



Volunteer testing water quality before distribution, November 2026. Source: HRC.

Appeal: MDRHN026	Total DREF Allocation: CHF 318,535	Crisis Category: Yellow	Hazard: Flood
Glide Number: FL-2025-000112-HND	People Affected: 25,000 people	People Targeted: 5,000 people	People Assisted: 13,403 people
Event Onset: Sudden	Operation Start Date: 07-07-2025	Operational End Date: 31-01-2026	Total Operating Timeframe: 6 months
Targeted Regions: Ocotepeque			

The major donors of the Disaster Response Emergency Fund (DREF) include the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, Canada, Denmark, Germany, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden, and Switzerland, as well as DG ECHO, Mondelez International Foundation and other corporate and private donors. The IFRC, on behalf of the Bolivian Red Cross, would like to extend thanks to all for their generous contributions.

Description of the Event

HONDURAS | DREF 2025
FLOODS



The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities. Sources: Cruz Roja Hondureña, IFRC. Produced by IFRC Americas, HDCC, IM Team. July 2025.

Prioritized intervention areas under this IFRC-DREF. Source: IFRC.

Date of event

25-06-2025

What happened, where and when?

Since 17 June 2025, the department of Ocotepoque was affected by heavy rainfall caused by the interaction of a surface trough with Tropical Wave Erick. This hydrometeorological phenomenon resulted in flooding, landslides, and the collapse of road infrastructure, sanitation systems, and water collection facilities, particularly impacting the municipalities of Sinuapa, Ocotepoque, Dolores Merendón, and Fraternidad.

In response to the evolving emergency, on 18 June, the Secretariat of State for Risk and National Contingency Management (COPECO) declared a Red Alert for Ocotepoque and areas along the Ulúa River in the department of Yoro. Subsequently, yellow and green alerts were issued across other departments of the country.

Local authorities in six municipalities, including Dolores Merendón, Fraternidad, San Jorge, Concepción, Ocotepoque, and Sinuapa, requested urgent assistance from the central government and humanitarian organizations to address the impacts of the crisis. Reported damages included the loss of more than 150 acres of coffee crops, as well as the destruction of roads and drinking water systems.

In municipalities such as Dolores Merendón, El Chimis, San Jerónimo, San Antonio, Vega Vieja, and Las Toreras, landslides and rising river levels caused the destruction of homes, coffee crops, and bridges, leaving communities isolated and without access to basic services. In addition, the La Laborcita dam, a key infrastructure for water supply in the area, was reported to have completely collapsed.

During August and September, heavy rainfall continued to affect the region. On 16 September, COPECO issued several weather alert



bulletins, declaring a green alert for 72 hours across nine departments, including Copán, Ocotepeque, Lempira, Intibucá, La Paz, Santa Bárbara, Francisco Morazán, Valle, and Choluteca. On 18 September, the alert level was elevated, with a red alert declared for municipalities along the Ulúa River and a yellow alert for nine departments, including Ocotepeque, due to persistent rainfall across the country. The heaviest precipitation was expected in the western, southwestern, southern, and central regions of Honduras.

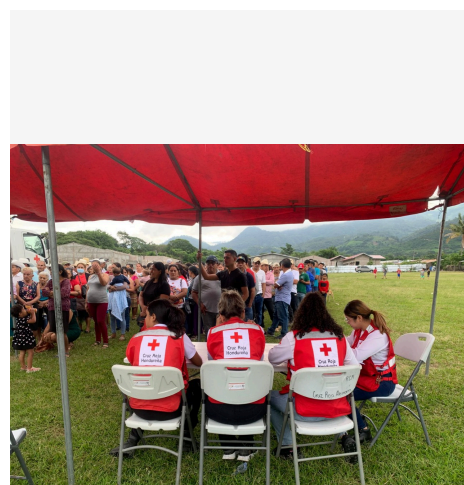
This yellow alert remained in effect until 25 September, when COPECO issued a new green alert for five departments, including Ocotepeque, Copán, Santa Bárbara, Lempira, and Intibucá, which remained active until 29 September.



Safe water distribution, July 2025.
Source: HRC.



CEA activities in Pie del Cerro and Santa Rita, August 2025. Source: HRC.



Distribution of hygiene kits in affected communities, August 2025. Source: HRC.

Scope and Scale

The hydrometeorological event triggered by the interaction between Tropical Wave Erick and a surface trough resulted in a major emergency in the department of Ocotepeque, with progressive and multi-municipal impacts. Since 17 June 2025, intense and sustained rainfall caused extensive damage to critical infrastructure, livelihoods, and essential services, severely affecting health, protection, and food security conditions of the population.

According to official reports from COPECO, the most affected municipalities included Sinuapa, Ocotepeque, Dolores Merendón, Fraternidad, Concepción, and San Jorge. One of the most critical impacts was the total collapse of the La Laborcita dam, a key infrastructure for drinking water supply, which left more than 25,000 people without access to safe water. In addition, the destruction of pipelines and water intake systems in Pomola and Cacalhuapa exposed entire communities to immediate health risks.

According to the damage report issued by the Honduran Red Cross on 6 September 2025, the water shortage emergency directly affected approximately 16,000 people in the urban area of Ocotepeque and indirectly impacted around 25,000 people in total, including communities in the neighboring municipality of Sinuapa. The situation caused severe limitations in access to safe water for consumption, hygiene, and sanitation, particularly affecting vulnerable families, educational centers, and health facilities.

During the reporting period, palliative measures were implemented by the government to partially restore the water supply in the municipality of Ocotepeque, with support from Plan Trifinio, a regional integration mechanism composed of the governments of Honduras, El Salvador, and Guatemala. Through this platform, specific funds were allocated to temporarily address water supply needs in the affected areas. However, these measures proved insufficient, as continued heavy rainfall caused the temporary systems to fail. Pipelines installed to restore services were repeatedly damaged by runoff and landslides, leading to further service interruptions.

The Honduran Red Cross assessment also indicated that, despite interventions by the Honduran Social Investment Fund (FHIS) and COPECO, no official technical reconstruction report or budget had been finalized, limiting progress toward sustainable solutions. Actions implemented by local authorities and partners remained temporary and palliative, including emergency connections to local water sources, partial rehabilitation of pipelines, water distribution through private tankers, and the activation of underground wells.

In the urban area of Ocotepeque, overflowing rivers flooded more than 120 homes, damaging personal belongings, contaminating water

storage systems, and forcing evacuations. Public infrastructure, including health centers and schools, reported minor to moderate damage, affecting the continuity of essential services.

The crisis disproportionately affected vulnerable groups. Children and adolescents represented a significant proportion of the affected population, facing increased risks associated with unsafe water, inadequate sanitation, malnutrition, and psychosocial distress. Older adults and people with chronic illnesses experienced limited access to healthcare, while pregnant and lactating women faced additional barriers in accessing adequate shelter and hygiene conditions. At least three rural schools and one health facility temporarily suspended operations due to structural damage and access constraints.

The deterioration of water and sanitation conditions increased the risk of outbreaks of gastrointestinal, skin, and vector-borne diseases, including dengue, due to prolonged exposure to contaminated water and the proliferation of mosquito breeding sites.

During August and September, heavy rainfall continued to affect the region. In the department of Ocotepeque, additional impacts were recorded, including the flooding of more than 120 homes in the municipality of San Francisco de Ocotepeque, as well as the death of a 14-year-old girl in the village of La Labor, who was swept away by a stream. According to local media reports, the passage of tropical waves also caused the isolation of several communities in the western region, maintaining a high level of alert among local authorities and communities due to the risk of further landslides and flooding.

At the national level, more than 8,000 people were affected, 45 communities were cut off, 60 homes were damaged, and 9 were completely destroyed, resulting in significant material damage to housing and basic infrastructure (5).

In June, COPECO estimated that more than 25,000 people were affected by the disruption of the water supply system. Subsequently, in early September 2025, the Honduran Red Cross conducted a detailed assessment, confirming approximately 16,000 people directly affected by the water shortage in the urban area of Ocotepeque and surrounding communities, and a total of 25,000 people indirectly impacted.

Despite the broader scale of the crisis, the Honduran Red Cross operation prioritized humanitarian assistance for 5,000 people (1,000 families) with urgent needs in water, sanitation, and hygiene (WASH), food security, and other essential services. The continued rainfall in September further affected previously impacted areas, including communities where temporary water systems had been restored, causing additional damage and prolonging humanitarian needs.

Through this DREF operation, the Honduran Red Cross maintained an active humanitarian response, focusing on restoring and ensuring access to safe water as a critical priority. Following the September assessment, the operation reinforced its interventions, prioritizing the most affected communities identified through field evaluations. Key actions included the installation and operation of a water treatment plant, daily water distribution through tanker trucks, the provision of hygiene kits, and the promotion of safe water storage and consumption practices.

Source Information

Source Name	Source Link
1. 2. El Mundo - Six municipalities in Ocotepeque call for state aid after devastation caused by rains and dam collapse	https://elmundo.hn/claman-por-ayuda-estatal-tras-devastacion-por-lluvias/
2. 3. COPECO – Raises Ocotepeque to Yellow Alert	https://x.com/copecogob/status/1968564844543480049?s=48
3. 4. COPECO – Green Alert to Ocotepeque	https://x.com/copecogob/status/1972898658224869477?s=48
4. 5. El País- More than 120 homes affected and the death of a young girl reported after severe rainfall in Ocotepeque.	https://www.elpais.hn/mas-de-120-viviendas-afectadas-y-una-menor-fallecida-tras-intensas-lluvias-en-ocotepeque/
5. 1. COPECO – Raises Ocotepeque to Red Alert	https://x.com/copecogob/status/1935408032231633223



National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?

No

IFRC Network Actions Related To The Current Event

Secretariat

The Honduran Red Cross maintained ongoing coordination with the IFRC through the Central America Country Cluster Delegation. From the early stages of the emergency, the IFRC provided technical support, which was instrumental in the development of the IFRC-DREF operation.

This collaboration continued throughout the implementation period, with regular coordination meetings held to monitor progress, address challenges, and ensure alignment with operational objectives.

Participating National Societies

As part of the humanitarian response to the floods in Ocotepeque, the Honduran Red Cross received support from Partner National Societies within the International Red Cross and Red Crescent Movement. A key contribution was provided through the project "Local response targeting the most vulnerable people affected by the complex humanitarian crises unfolding in Central America", implemented by the German Red Cross with funding from the European Union's Directorate-General for Civil Protection and Humanitarian Aid (DG-ECHO).

Under this initiative, technical personnel were deployed through operational internships to support the coordination of field activities in the municipality of Ocotepeque. This approach, aligned with the project's regional cooperation and technical exchange framework, contributed to strengthening operational capacities through the deployment of specialized WASH personnel from the Central America WASH Hub.

This support contributed to enhancing the quality and coordination of the humanitarian response in the water, sanitation and hygiene (WASH) sector. It facilitated knowledge exchange, improved operational practices, and strengthened coordination with local actors. In addition, it supported joint planning processes and the alignment of interventions with Honduran Red Cross teams, contributing to a more coordinated and efficient response focused on the needs of affected communities.

ICRC Actions Related To The Current Event

No joint actions were carried out with the International Committee of the Red Cross (ICRC) under this IFRC-DREF operation.



Other Actors Actions Related To The Current Event

<p>Government has requested international assistance</p>	<p>Yes</p>
<p>National authorities</p>	<p>National authorities activated risk management mechanisms from the early stages of the emergency to coordinate an inter-agency response. The National Risk Management System (SINAGER) was activated, including the National Emergency Operations Center (EOC) and regional EOCs, to support evidence-based decision-making and real-time monitoring of the situation.</p> <p>COPECO, as the lead authority, convened an extraordinary session of SINAGER to update the national outlook and strengthen coordination in the most affected departments. As a preventive measure, a Red Alert was maintained for the department of Ocotepeque, and the suspension of in-person academic activities nationwide was announced during the peak of the emergency.</p> <p>Following the significant disruption of basic services caused by the collapse of the La Laborcita dam and the interruption of drinking water supply, municipalities including Sinuapa, Ocotepeque, and Dolores Merendón formally requested international assistance.</p> <p>In response, palliative measures were implemented to partially restore water supply in the municipality of Ocotepeque, with support from Plan Trifinio, a regional integration mechanism involving the governments of Honduras, El Salvador, and Guatemala. Through this platform, resources were mobilized to temporarily address water supply needs in affected areas. However, these measures proved insufficient due to continued heavy rainfall, which damaged temporary infrastructure, including provisional pipelines, leading to further service disruptions.</p> <p>In parallel, the Inter-American Development Bank (IDB) provided a contribution of 200,000 US dollars to support the temporary restoration of water systems in the municipalities of Ocotepeque and Sinuapa, as well as to address priority needs in Dolores Merendón. These funds were managed by the Honduran Red Cross and contributed to mitigating immediate impacts of the water crisis while supporting initial steps toward more sustainable solutions.</p> <p>Overall, these actions reflected coordinated efforts between national authorities and international actors to respond to the emergency and restore access to essential services in a context of prolonged impact in the western region of the country.</p>
<p>UN or other actors</p>	<p>Coordination meetings were held through the humanitarian network, and sectoral cluster mechanisms were activated to support coordinated interventions and efficient resource utilization.</p>



Needs (Gaps) Identified



Shelter Housing And Settlements

Based on the technical assessments conducted by the Honduran Red Cross, significant shelter and housing needs were identified. More than 150 families were affected by partial or total damage to their homes, with cases of complete destruction reported particularly in high-risk hillside communities such as La Torera, Las Cumbres, and La Honduras in the municipality of Dolores Merendón.

In this locality, at least 40 people were temporarily accommodated in community shelters, while other affected families sought refuge with relatives or neighbors. In the municipalities of Fraternidad and Ocotepeque, severe impacts were also reported, including the loss of housing, flooding, damage to road infrastructure and basic services, as well as impacts on educational facilities.

The situation was further exacerbated by the continued risk of landslides in mountainous areas, posing an ongoing threat to households located in unstable zones.



Livelihoods And Basic Needs

The technical assessments conducted by the Honduran Red Cross identified significant livelihoods needs and gaps in the affected areas. Total or partial losses were reported across more than 150 manzanas (approximately 105 hectares) of coffee, maize, and bean crops due to flooding, runoff, and landslides in both hillside and lowland areas. These impacts severely disrupted household production systems and directly affected the income of rural families relying on agricultural labor and small-scale local economic activities.

The communities of Fraternidad, Ocotepeque, and Concepción were among the most affected, with reported crop losses, damage to agricultural infrastructure, and deteriorated conditions for economic recovery. No substantial updates were reported in the September 2025 damage assessment, and the needs identified earlier remained largely unchanged.

Rural households continued to face difficulties in restoring their livelihoods, as agricultural recovery remained slow and highly dependent on weather conditions, as well as on limited access to financial and technical support.



Health

Based on the technical assessments conducted by the Honduran Red Cross at the onset of the operation, significant health needs and gaps were identified in the municipalities of Dolores Merendón, Fraternidad, Sinuapa, Ocotepeque, and Concepción. More than 25,000 people experienced disruptions in access to safe drinking water, which immediately increased the risk of gastrointestinal and skin diseases. In addition, unsafe household water storage contributed to the proliferation of disease vectors such as mosquitoes, increasing the risk of dengue and other vector-borne diseases.

According to the damage report issued by the Honduran Red Cross on 6 September 2025, lack of access to safe water remained one of the main public health concerns, limiting the ability of affected families to maintain adequate hygiene, food preparation, and sanitation practices. This prolonged situation continued to pose a risk of waterborne and vector-borne diseases, particularly in communities where temporary water sources had become contaminated or were insufficient to meet basic needs.

Health risks were particularly acute among vulnerable groups, including older adults, pregnant women, and children, who faced increased exposure to unsanitary conditions. Psychosocial distress was also reported among families who had lost their homes or livelihoods, highlighting the need for mental health and psychosocial support (MHPSS). Field observations further identified limited access to basic health services in affected areas, compounded by damage to local infrastructure and transport routes.





Water, Sanitation And Hygiene

Based on the technical assessments carried out by the Honduran Red Cross in the department of Ocotepeque at the beginning of the operation, critical gaps were identified in the water, sanitation, and hygiene (WASH) sector. The total interruption of access to safe drinking water affected more than 25,000 people following the collapse of the La Laborcita dam and structural damage to additional water intake points and distribution lines. Although the government implemented temporary and palliative measures to restore access to water from the beginning of the operation, these were affected by the heavy rains in August and September, which once again disrupted water supply systems and prolonged the needs initially identified in July.

As a result, many families continued to rely on unsafe water sources and inadequate water storage practices, significantly increasing the risk of waterborne diseases and other public health concerns. The persistence of these conditions confirmed the need to maintain water supply interventions and reinforce hygiene promotion activities in order to mitigate further health impacts.

Sanitation conditions also remained precarious. The collapse of latrines and the accumulation of solid waste contributed to unsafe environments in affected communities and temporary shelters. The prolonged crisis also led to contamination of temporary water sources and further deterioration of sanitation infrastructure, increasing health risks and community vulnerability. Limited access to personal hygiene items and poor sanitation conditions in communal areas remained key concerns.

In addition, stagnant water in densely populated areas contributed to the proliferation of mosquito breeding sites, increasing the risk of vector-borne diseases such as dengue. These gaps continued to disproportionately affect rural populations and vulnerable groups, given their dependence on local water systems, limited infrastructure, and economic constraints that reduced their ability to adopt preventive measures.



Protection, Gender And Inclusion

Based on the multisectoral assessment conducted by the Honduran Red Cross at the beginning of the operation, using a Protection, Gender and Inclusion (PGI) approach, significant protection needs were identified among vulnerable groups, particularly those residing in temporary shelters. The assessment revealed differentiated impacts by age, gender, and diversity, including the presence of children, older adults, female-headed households, and adolescents living in non-segregated spaces that lacked minimum standards of privacy and safety. This situation increased exposure to protection risks, including gender-based violence (GBV), particularly for women, adolescents, and LGBTIQ+ individuals.

In addition, important barriers were identified in access to essential services such as water, sanitation, and hygiene, directly affecting people's ability to maintain basic self-care practices, including menstrual hygiene and child care. Inadequate living conditions also affected the emotional well-being and protection of older adults and young children. The disruption of community support networks, combined with geographic isolation, impassable roads, and the loss of basic services, further deepened access barriers, especially for persons with disabilities and those with reduced mobility. Finally, the absence of clear information regarding the presence of indigenous communities or persons with disabilities represented a critical visibility gap, limiting the ability to ensure a more inclusive and differentiated humanitarian response.



Community Engagement And Accountability

Based on the initial actions carried out using a Community Engagement and Accountability (CEA) approach, the Honduran Red Cross identified critical needs related to limited access to clear, timely, and culturally appropriate information among affected communities. Gaps were observed in communication channels between humanitarian actors and the affected population, as well as limited opportunities for communities to actively participate in decision-making processes related to the assistance they received.

In addition, the absence of structured mechanisms for the safe and confidential expression of concerns, questions, and priority needs was also identified.



Operational Strategy

Overall objective of the operation

Through this IFRC-DREF operation, the Honduran Red Cross aimed to assist 5,000 people, approximately 1,000 families, through multisectoral actions to reduce health risks and protect the dignity of communities affected by Tropical Wave Erick in the department of Ocotepeque.

Following additional rainfall in August and September, which caused further damage and prolonged humanitarian needs, the operation maintained its original target population, prioritizing the most vulnerable households identified during the initial phase. Assistance focused on Water, Sanitation and Hygiene (WASH), Protection, Gender and Inclusion (PGI), and Community Engagement and Accountability (CEA), with the aim of ensuring access to safe drinking water, basic hygiene conditions, and healthier environments throughout the six-month implementation period.

Operation strategy rationale

The operational strategy was designed to respond in a timely and targeted manner to the most urgent needs generated by the hydrometeorological event that affected the department of Ocotepeque, one of the areas most severely impacted according to official reports and field assessments. From the outset, the Honduran Red Cross framed its response in close coordination with municipal authorities, institutions within the National Risk Management System (SINAGER), and other relevant actors, in order to ensure that humanitarian actions complemented public efforts and responded to the priorities expressed at local level.

In line with its auxiliary role to the public authorities, the Honduran Red Cross maintained coordination with local and departmental structures throughout the operation. This helped ensure that the response remained context-specific and operationally relevant, particularly in a setting marked by repeated rainfall, damage to critical infrastructure, and prolonged disruption of basic services. The intervention also remained aligned with the formal support requests issued by local authorities in the most affected municipalities.

Although the initial assessments identified significant needs in shelter, health, education, and livelihoods, the operation prioritized Water, Sanitation and Hygiene (WASH) as the main response sector. This prioritization reflected the scale of the collapse of water supply systems, the prolonged interruption of access to safe water, and the direct public health risks associated with unsafe water consumption, deteriorated sanitation conditions, and increased vector proliferation. The operational strategy therefore concentrated on restoring and maintaining access to safe water, improving hygiene conditions at household level, and reducing epidemiological risks in the most affected communities. Additionally, cross-cutting approaches in Protection, Gender and Inclusion (PGI) and Community Engagement and Accountability (CEA) continue to be integrated throughout the response to ensure all actions were inclusive, culturally appropriate, and people-centered.

Water, Sanitation, and Hygiene (WASH)

The response combined direct service delivery with preventive and community-based actions. Safe water distribution was implemented through WASH teams, tanker-based household delivery, and the operation of water treatment equipment. This was complemented by the distribution of family hygiene kits and household water filters, as well as hygiene promotion and vector control activities carried out in coordination with community leaders, municipal authorities, and the Ministry of Health. The persistence of rainfall during August and September confirmed the relevance of maintaining this focus, as temporary restoration measures were repeatedly damaged and water-related needs remained acute throughout the operation.

Protection, Gender, and Inclusion (PGI)

PGI was integrated as a cross-cutting component to ensure that the response remained safe, inclusive, and responsive to differentiated needs. The strategy recognized that the emergency had disproportionately affected vulnerable groups, including women, children, older persons, persons with disabilities, and households exposed to heightened protection risks due to displacement, loss of privacy, and limited access to basic services. In response, the operation incorporated rapid PGI-informed assessments, awareness activities on protection pathways and access to rights, and institutional strengthening through training of volunteers and staff on PGI and Prevention of Sexual Exploitation and Abuse (PSEA). These actions aimed to improve the quality of assistance while reinforcing referral knowledge and safer community engagement practices.

Community Engagement and Accountability (CEA)

To promote transparency and strengthen community ownership, the HRC included community information sessions, participatory processes to define targeting criteria, and the deployment of institutional feedback mechanisms such as suggestion boxes and telephone-based channels. These actions allowed affected communities to receive timely information, raise concerns, and provide feedback on the



response. The use of satisfaction surveys and community-level engagement activities also supported the adjustment of interventions and helped reinforce accountability to affected populations.

National Society Strengthening

At institutional level, the operation also sought to strengthen the response capacity of the Honduran Red Cross. This included the recruitment of key operational staff, the provision of protective and visibility items for volunteers, monitoring and supervision visits, psychosocial support for staff and volunteers, and operational learning processes such as the lessons learned workshop. These investments were important not only for implementation of the DREF operation itself, but also for strengthening coordination, traceability, and operational readiness in a complex and evolving emergency context.

Throughout the implementation period, the IFRC Central America Country Cluster Delegation provided technical support through field monitoring missions and remote follow-up, particularly in WASH, Health, CEA, and PMER-related areas. This support contributed to maintaining alignment with IFRC standards, strengthening operational quality, and reinforcing community-centred approaches across the response.

Targeting Strategy

Who was targeted by this operation?

The IFRC-DREF operation targeted 5,000 people, approximately 1,000 families, affected by the impacts of Tropical Wave Erick and subsequent rainfall in the department of Ocotepeque, with priority given to the municipalities of Ocotepeque and Sinuapa.

Targeting focused on communities experiencing the most severe disruptions in access to safe drinking water, damage to sanitation infrastructure, and increased public health risks. The prioritization of intervention areas was based on technical assessments conducted by the Honduran Red Cross in coordination with local authorities, Municipal Emergency Committees (CODEM), and community leaders, allowing for the identification of the most affected sectors in terms of basic service disruption and concentration of vulnerable populations.

Explain the selection criteria for the targeted population

The selection of the target population for this IFRC-DREF operation was based on a combination of risk, vulnerability, and needs-based criteria to ensure that humanitarian assistance reaches the most affected and underserved groups. The primary criteria used include:

Geographic exposure to risk: The operation focused on communities located in areas classified as high-risk or highly vulnerable according to official alerts issued by the Permanent Contingency Commission (COPECO), particularly within the municipalities of Ocotepeque and Sinuapa in the department of Ocotepeque. These areas experienced critical damage to water and sanitation infrastructure and faced a heightened risk of waterborne diseases.

Socioeconomic vulnerability: Priority was given to families with limited resources or pre-existing conditions of poverty, as their capacity to respond to and recover from the impacts of the emergency was significantly constrained. This included households lacking access to basic services such as safe water, hygiene items, and health care.

Inclusion of specific groups in situations of vulnerability: The operation gave special consideration to people at heightened risk of exclusion or harm, including female-headed households, older adults, persons with disabilities, and children. These groups often faced additional barriers in accessing assistance and were more exposed to protection risks during the emergency.

The identification of priority communities and households was supported by multiple data sources and participatory processes, including:

- Initial situational reports from the National Emergency Operations Center (EOC) under COPECO.
- Needs assessments conducted by Honduran Red Cross branch councils in the affected areas.
- Use of the Damage Assessment and Needs Analysis tool (DANA) to verify field conditions.

This multi-layered and coordinated approach helped ensure that the selection process was transparent, evidence-based, and aligned with humanitarian principles. It also helped avoid duplication of efforts with other actors involved in the response and maximize the impact of available resources.



Total Assisted Population

Assisted Women	7,171	Rural	70%
Assisted Girls (under 18)	-	Urban	30%
Assisted Men	6,232	People with disabilities (estimated)	3%
Assisted Boys (under 18)	-		
Total Assisted Population	13,403		
Total Targeted Population	5,000		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	Yes
Does your National Society have prevention of sexual exploitation and abuse policy?	Yes
Does your National Society have child protection/child safeguarding policy?	No
Does your National Society have whistleblower protection policy?	Yes
Does your National Society have anti-sexual harassment policy?	Yes

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
Collapse or flooding of roads and bridges	Identify alternative routes in coordination with SINAGER and local authorities. Set up distribution points near remote communities to reduce travel constraints.
Increased flood risk may compromise staff safety	Continuously monitor weather conditions and adjust activities accordingly. Implement safety protocols, including temporary suspension of activities if needed.



	Provide field staff with protective equipment (raincoats, boots, etc.).
Risk of disease outbreaks	Distribute hygiene kits, chlorine, and sanitation supplies. Train staff on hygiene promotion and waterborne disease prevention.
Physical and emotional exhaustion among staff	Implement shift rotations to ensure adequate rest. Offer psychosocial support, including debriefings and counseling sessions. Monitor staff health and promote open communication on well-being.
Insecurity during aid distribution	Work with local authorities to ensure security at distribution and shelter sites. Train staff on personal safety protocols and conflict management. Clearly communicate distribution processes to reduce tension and avoid crowds. Prepare an FAQ sheet for volunteers and technical staff on the response operation.

Please indicate any security and safety concerns for this operation:

The department of Ocotepeque, located in western Honduras and bordering El Salvador and Guatemala, presented moderate security concerns related to its geographic and socioeconomic context. While the region did not currently report active presence of violent groups that would restrict access or humanitarian operations, its location in the "Trifinio" border area was associated with informal cross-border movements of people and goods, particularly through unmonitored routes. These dynamics led to increased patrols by police and military forces in border areas, particularly near customs checkpoints at El Poy (El Salvador) and Agua Caliente (Guatemala).

The topography of Ocotepeque is predominantly mountainous, with limited access routes, which may pose logistical and safety challenges during field deployments. Incidents linked to community disputes and social tensions are more common than organized violence, and should be monitored accordingly.

The Honduran Red Cross maintains high levels of trust and acceptance in the region, reinforced by its long-standing presence and ongoing activities, including pre-hospital care and humanitarian services for migrants at official border crossings. Nevertheless, continuous context monitoring and application of the Safer Access Framework, institutional security protocols, and operational communication guidelines are essential to mitigate risks and ensure the safety of personnel throughout the operation.

Has the child safeguarding risk analysis assessment been completed?	Yes
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Implementation



Water, Sanitation And Hygiene

Budget: CHF 204,271



Targeted Persons: 5,000

Assisted Persons: 13,403

Targeted Male: -

Targeted Female: -

Indicators

Title	Target	Actual
Number of families receiving family hygiene kits.	1,000	1,000
Number of communities reached through vector control campaigns.	5	5
Number of people with access to safe water.	5,000	13,403

Narrative description of achievements

A total of 1,000 family hygiene and cleaning kits were distributed following a community-based targeting process. With the support of community leaders, a population census was conducted in each intervention area, allowing for the registration and prioritization of 1,000 households. Through this process, 4,103 people were reached across the communities of San Francisco, Colonia Aguilar, Quebrachal, Prados del Sol, Santa Rita, Pie del Cerro, Los Morros, El Poy, Buenos Aires, and Las Américas. The distribution of these kits contributed to improving hygiene practices and sanitary conditions at the household level.

Access to safe water was a central component of the response. A total of 13,403 people were reached through the distribution of safe water in the affected communities. The water was transported and delivered using a 5,000 litres water tanker, which enabled the response to bring safe water closer to households in the communities with the greatest needs. WASH teams supported the coordination and implementation of the distribution, in close coordination with municipal authorities. Of the total people reached, 6,232 were men and 7,171 were women, based on the sex-disaggregated population estimates for the communities assisted. The people reached were distributed as follows: Barrio San José, with 2,880 people, including 1,339 men and 1,541 women; Barrio Las Américas, with 2,715 people, including 1,262 men and 1,453 women; Colonia Buenos Aires, with 2,010 people, including 935 men and 1,075 women; Colonia San Andrés, with 2,340 people, including 1,088 men and 1,252 women; Colonia Progreso, with 1,478 people, including 687 men and 791 women; and Colonia Rodas Alvarado, with 1,980 people, including 921 men and 1,059 women.

Water quality control was integrated into the treatment and distribution process. Water was subject to physical, chemical and bacteriological verification, including checks related to turbidity and chlorination, to ensure that the water distributed was suitable for human consumption. When water quality parameters did not meet the required conditions, corrective measures included reinforcing sedimentation and filtration, adjusting chlorination, rechecking water quality and proceeding with distribution only once the water was considered safe.

The operation also generated operational learning on the need to maintain systematic records of water quality monitoring, including residual chlorine and turbidity measurements, as well as the corrective actions taken when parameters are outside the acceptable range. In addition, the response highlighted the importance of ensuring adequate availability of reagents, testing supplies, spare parts and contingency measures for periods of heavy rainfall, when access constraints, increased turbidity at the water source or delays in distribution may affect continuity of service.

Vector control interventions were also implemented in areas with higher epidemiological risk. A total of 16 vector control campaigns were conducted, following a coordinated workplan with the Ministry of Health (SESAL) and local health centers. Activities included initial larval index assessments, application of biological larvicides (BTI), community clean-up campaigns, fumigation, and post-intervention monitoring. Risk communication was strengthened through loudspeaker announcements and the dissemination of informational materials, with the support of trained volunteers.

As part of the operation, the distribution of household water filters was implemented during October in prioritized communities. Filters were delivered in Aldea Los Monos and in Antigua Ocoatepeque. These distributions were accompanied by community-level awareness sessions on the correct use and maintenance of the filters, ensuring their effective utilization at the household level.

These actions were implemented in coordination with local authorities and community actors, including municipal governments, which supported waste collection and disposal through the provision of transport and logistical resources. Community health committees were



also trained in the use and handling of thermal fogging equipment, enabling their active participation in vector control activities.

Community feedback informed practical adjustments to WASH implementation. During water distribution, some households reported difficulties carrying water from external delivery points, particularly households with older adults or people with limited mobility. In response, teams adapted the delivery modality by extending hoses into homes whenever feasible, allowing water to be deposited directly in household storage containers.

Feedback from satisfaction surveys also showed that communities required more information on water and sanitation, vector control, waste classification and disease prevention. In response, WASH teams reinforced messages on safe water use, filter use and maintenance, hygiene practices, solid waste management and elimination of mosquito breeding sites during community activities and follow-up visits.

Monitoring activities were conducted by the National Society's Monitoring Unit (UMER) through household visits to verify the quality and effectiveness of water distribution and hygiene interventions. These monitoring efforts informed recommendations to improve targeting, delivery modalities and WASH messaging throughout the operation.

Lessons Learnt

The active involvement of community health committees in WASH activities strengthened local ownership and accountability, while also promoting more integrated coordination between institutional actors and communities.

Coordination with the Fire Department facilitated the supply and treatment of water, contributing to the continuity of safe water distribution during the operation.

Coordination with municipal authorities and community leaders proved essential to ensure more efficient water distribution and improved access to affected communities.

Challenges

One of the main operational challenges related to vector control was that some of the larval index assessment methods initially used by health technicians were not fully aligned with Ministry of Health (SESAL) parameters. This affected the reliability of the results and limited the ability to fully measure the impact of vector control campaigns.

Another key challenge was identifying a suitable location for the installation of the water treatment plant and for the reception of untreated water, without generating additional operational costs. This required continuous coordination and operational adjustments during implementation.

The operation also generated operational learning on the importance of strengthening the flow, control and timely availability of critical WASH supplies. Future responses should include clearer procedures for stock monitoring, replenishment of reagents, chlorine, filters, spare parts and other water treatment inputs, as well as preventive maintenance arrangements for WASH equipment.



Protection, Gender And Inclusion

Budget: CHF 12,413

Targeted Persons: 300

Assisted Persons: 114

Targeted Male: -

Targeted Female: -

Indicators

Title	Target	Actual
Number of volunteers and staff trained in PGI in emergency contexts.	25	25
Number of people reached with key information on access to rights	300	114



and safe reporting mechanisms.

Narrative description of achievements

Honduran Red Cross implemented actions to strengthen protection, gender, and inclusion approaches at both community and institutional levels, focusing on reducing protection risks and improving access to rights for affected populations.

A rapid assessment with a PGI approach was conducted on August in priority communities, identifying differentiated risks and needs among vulnerable groups in the emergency context. These findings informed the design of community-based interventions, particularly in areas with high population density and limited access to basic services. The assessment was carried out through community consultations and satisfaction surveys in Bosques de San Juan, Las Américas, Rodas Alvarado, El Progreso and Buenos Aires, in the department of Ocotepeque. A total of 103 people participated in the assessment, including 80 women, representing 77.7 per cent of participants, and 23 men, representing 22.3 per cent. The highest participation was recorded among people aged 41 to 50 years, representing 24.8 per cent of respondents.

The main concerns and priorities identified by community members were related to water and sanitation, vector control, solid waste management, sexual education, first aid and measles prevention. Community members also raised concerns about the lack of filters for the wider community and the limited effectiveness of mosquito control products. These findings informed the design of community-based interventions, particularly by reinforcing hygiene promotion, elimination of mosquito breeding sites, use of filtered water and preventive health education. Community feedback also led to the inclusion of sexual education and disease prevention messages as part of the response.

The feedback process showed a high level of community engagement, with 86 per cent of respondents providing feedback and 89 per cent reporting that they felt their opinions were taken into account. This information was used to adjust activities and reinforce training and promotion sessions in health, sanitation and prevention, contributing to visible behaviour changes, including cleaner community spaces and improved personal hygiene practices.

Coordination was established with key local and national actors working on access to rights, including the National Police of Honduras, the National Commissioner for Human Rights (CONADEH), the Interinstitutional Commission Against Commercial Sexual Exploitation and Human Trafficking (CICESCT), the Chamber of Commerce and Industries of Tegucigalpa (CCIT), the Ministry of Health (SESAL), the Ministry of Education (SEDUC), the Honduran Fire Department, municipal authorities, UN agencies, and other humanitarian organizations. Through these coordination mechanisms, a joint workplan was developed, defining roles and responsibilities and prioritizing two communities based on municipal data and identified needs related to education, livelihoods, health, protection, and social cohesion. This coordinated approach facilitated the implementation of complementary actions while avoiding duplication of efforts.

Although WASH activities reached 13,403 people, PGI activities were intentionally targeted to a smaller group due to the nature of the intervention and the need to prioritize people with differentiated protection and inclusion needs. The selection criteria for PGI activities focused on people and groups facing higher vulnerability or specific protection risks, particularly women and people requiring additional support to access information, services and safe reporting mechanisms. Participants were identified through community consultations, participation in promotion activities and coordination with local leaders and community actors. The profile of participants reached through PGI activities reflected this prioritization, with 89 women and 25 men reached across the targeted communities.

At the institutional level, a training workshop on Protection, Gender and Inclusion was conducted with the participation of 25 volunteers and staff. The training included the dissemination of the Prevention of Sexual Exploitation and Abuse (PSEA) Policy. This contributed to improving staff capacity to identify and appropriately refer protection cases, while promoting safer and more inclusive interventions.

Lessons Learnt

The dissemination of protection pathways and the Prevention of Sexual Exploitation and Abuse (PSEA) Policy strengthened the capacities of staff and volunteers, contributing to greater awareness of protection risks and promoting safer institutional environments. These actions also helped reinforce knowledge of referral mechanisms and the role of different institutions in ensuring comprehensive protection.

Challenges

Limited interest among some representatives of State institutions in protection-related issues remained a challenge for strengthening inter-institutional capacities. This was particularly relevant in Ocotepeque, given its geographic location and heightened exposure to protection risks, which required stronger institutional engagement on these issues.





Community Engagement And Accountability

Budget: CHF 13,878
Targeted Persons: 300
Assisted Persons: 103
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of sessions conducted to socialize the IFRC-DREF operation and the institutional feedback mechanism.	5	5
Number of volunteers and staff trained in feedback mechanisms and CEA in emergency contexts.	25	25
Percentage of people reached who report satisfaction with the implemented actions.	80	98
Percentage of affected people who have access to the institutional feedback mechanism.	100	100

Narrative description of achievements

Information sessions and community meetings were conducted in prioritized areas to present the objectives and scope of the intervention, as well as to define selection criteria in a participatory manner and identify affected households. These processes contributed to strengthening community ownership and ensuring a more transparent and inclusive targeting approach.

At the institutional level, a specialized training workshop on CEA in emergencies was conducted with the participation of 25 volunteers and staff, strengthening local capacities and promoting the practical application of CEA approaches through field exercises. This training reinforced knowledge on institutional feedback mechanisms and the management of confidential information.

Feedback and communication mechanisms were implemented across intervention areas, including written channels, suggestion boxes placed in strategic locations, and telephone-based mechanisms accessed through QR codes. These channels were used during key activities such as hygiene kit distribution, water supply, vector control campaigns, training sessions, and community outreach. Community leaders and volunteers supported the dissemination of these mechanisms, ensuring accessibility and encouraging their use among the population, including persons with disabilities.

A total of 103 satisfaction surveys were conducted with community members, providing insights into beneficiaries' perceptions and contributing to the continuous improvement of the operation. The 103 respondents correspond to people who participated in community activities implemented between 13 and 16 January in the communities of Bosques de San Juan, Las Américas, Rodas Alvarado, El Progreso and Buenos Aires, in Ocotepaque. The sample was defined as an operational feedback sample rather than a statistically representative survey of the total assisted population. Its purpose was to collect timely feedback from people directly participating in activities during the implementation period, in order to identify satisfaction levels, concerns and opportunities for adjustment.

Respondents were selected among people who had participated in or accessed the community activities and who were available and willing to provide feedback voluntarily and confidentially at the time of data collection. The survey mainly represented adult women and men from the targeted communities, with higher participation among people aged 31 to 50 years. Of the 103 respondents, 80 were women, representing 77.7 per cent, and 23 were men, representing 22.3 per cent. Results indicated that 98.6 per cent of respondents reported being satisfied with the assistance received, reflecting a high level of acceptance and perceived relevance of the interventions. Prior to data collection, volunteers and staff were briefed to ensure a consistent approach and clear messaging during engagement with communities.



Coordination between technical areas, including WASH, CEA, and operational teams, was strengthened, contributing to more effective planning and implementation. Community engagement activities, such as information fairs and local events, also supported volunteer mobilization and reinforced community trust in the National Society. In addition, efforts were made to ensure that communication remained aligned with the Fundamental Principles of the Red Cross, particularly neutrality and independence, in a context sensitive to the national electoral environment.

Lessons Learnt

Clear and proactive communication with communities proved essential to the quality of the response. Early socialization of the intervention, including timelines, selection criteria, and technical processes, helped prevent misunderstandings, reduce rumors, and mitigate potential tensions.

Community feedback mechanisms strengthened accountability and contributed to improving the quality of the operation. Their implementation from the beginning of the response encouraged communities to share opinions, suggestions, and concerns, while also increasing awareness of the importance of participation in humanitarian action.

The positive perception expressed by communities regarding the work of Honduran Red Cross volunteers and staff highlighted the value of respectful, consistent, and community-centered engagement. In particular, household-level delivery approaches contributed to stronger community acceptance and trust.

The operation also showed that volunteer well-being had a direct influence on the quality of implementation, reinforcing the importance of adequate support and coordination for frontline teams.

Challenges

Another important challenge related to community perception in the context of the national electoral environment. There was a risk that humanitarian assistance could be misinterpreted as being linked to local political actors, which required continuous, clear, and strategic communication to reinforce the neutrality and independence of the Honduran Red Cross.



Secretariat Services

Budget: CHF 18,776

Targeted Persons: 0

Assisted Persons: 0

Targeted Male: -

Targeted Female: -

Indicators

Title	Target	Actual
Number of field monitoring visits conducted during the operation.	2	2

Narrative description of achievements

Two technical monitoring visits were conducted, involving specialists in Community Engagement and Accountability (CEA) and Health/WASH. These field missions allowed for the verification of progress in technical, operational, and community-level implementation. In the WASH sector, the visits confirmed the planning and coordination of activities, including the systematic distribution of safe water to prioritized communities through a household-level delivery approach, which contributed to improved access and community acceptance.

The visits also included observation of the water treatment system, confirming that water collection, treatment, and quality control processes were implemented in line with standards for human consumption.

In the CEA component, the IFRC supported a specialized training process combining theoretical sessions and practical exercises in



communities such as Santa Rita and Pie de Cerro. This support strengthened local capacities, reinforced the use of institutional feedback mechanisms, and promoted a more people-centered approach.

In addition, the IFRC Senior PMER Officer facilitated the lessons learned workshop held at the end of the operation.

Engagement with volunteers and the Ocotepeque branch leadership also helped reinforce understanding of humanitarian principles, the local operational context, and the importance of maintaining clear and consistent communication throughout the response.

National Society Strengthening

Budget: CHF 49,756

Targeted Persons: 25

Assisted Persons: 25

Targeted Male: -

Targeted Female: -

Indicators

Title	Target	Actual
Number of volunteers and staff receiving institutional uniforms, personal protective equipment, and safety gear.	25	25
Number of field monitoring and follow-up visits conducted.	3	4
Number of people participating in the lessons learned workshop.	25	22

Narrative description of achievements

Key technical positions were filled during the operation, including an operation coordinator, a Water, Sanitation and Hygiene (WASH) specialist, an administrator, and a driver, which contributed to improving operational management and field implementation.

Supervision and monitoring visits were carried out by National Headquarters and the Report, Monitoring and Evaluation Unit (UMER) to support quality assurance and strengthen the effectiveness of interventions. These visits contributed to identifying operational improvements and reinforcing institutional oversight throughout the implementation period.

In addition, psychosocial support sessions were provided to staff and volunteers as part of institutional care actions, contributing to their well-being and supporting their capacity to operate effectively in a demanding emergency context.

To support safer and more effective field deployment, visibility items and protective equipment were procured and distributed to volunteers participating in the operation. These included shirts, jackets, caps, gloves, and protective glasses. Distribution was organized based on volunteer rotation records, helping ensure that personnel actively engaged in the response had access to the required items.

In addition, a lessons learned workshop was conducted under the facilitation of the IFRC PMER Senior Officer, with participation from key support and operational areas of the National Society, including the Project Administration Unit, Procurement Unit, Logistics Management, UMER, the CEA focal point, administrative representatives, volunteers, project teams, and IFRC staff in Honduras. This process contributed to documenting operational experiences and identifying opportunities to strengthen future emergency responses.

Lessons Learnt

Bringing together National Society support areas during the lessons learned process helped identify operational bottlenecks and institutional challenges more clearly, while also generating practical recommendations for future responses.

The active involvement of volunteers strengthened response capacity and highlighted the importance of maintaining adequate support



and coordination mechanisms for volunteer deployment.

Community-based assessments and the availability of personnel trained in Protection, Gender and Inclusion (PGI) contributed to a better understanding of the context and to a more appropriate and responsive intervention.

Challenges

The operation also highlighted the need to allocate specific resources for emotional support and care for staff and volunteers before, during, and after emergency deployments.

Ensuring timely insurance activation for volunteers and improving the physical conditions of local branch facilities to support operational readiness.



Financial Report



DREF Operation Final Report (CHF)

Date from: 7 jul. 2025 to 30 abr. 2026

MDRHN026 - Honduras -Floods

Operating timeframe: *Start date: 07-jul.-2025 End date: 31-ene.-2026*

Appeal launch date: *10-jul.-2025*

I. Summary

	Actual (CHF)
Opening Balance	0
Funds & Other Income	318.535
DREF Response Pillar	318.535
Expenditure	-281.925
Closing Balance	36.610

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items			
PO02 - Livelihoods			
PO03 - Multi-purpose Cash			
PO04 - Health			
PO05 - Water, Sanitation & Hygiene	204.271	197.197	7.074
PO06 - Protection, Gender and Inclusion	12.413	13.491	-1.078
PO07 - Education			
PO08 - Migration			
PO09 - Risk Reduction, Climate Adaptation and Recovery	0	0	0
PO10 - Community Engagement and Accountability	13.878	4.431	9.447
PO11 - Environmental Sustainability			
Planned Operations Total	230.562	215.119	15.443
	19.441	0	19.441
Total	19.441	0	19.441
EA01 - Coordination and Partnerships			
EA02 - Secretariat Services	18.776	14.956	3.820
EA03 - National Society Strengthening	49.756	51.850	-2.094
Planned Operations Total	68.532	66.806	1.726
Total	318.535	281.925	36.610

III. Expenditure by budget category & group

Prepared on 10-jun.-2026

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[Click here for the complete financial report](#)

Please explain variances (if any)

The total IFRC-DREF allocation for this operation was 318,535 Swiss francs. Total expenditure amounted to 281,925 Swiss francs, resulting in an unspent balance of 36,610 Swiss francs, which has been return to the DREF in accordance with IFRC financial procedures.

The main variances were recorded under Water, Sanitation and Hygiene, Community Engagement and Accountability, Secretariat Services



and National Society Strengthening. These variances were mainly due to savings achieved during implementation, lower-than-planned costs for coordination and technical support, and cost efficiencies in procurement and field implementation.



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