

Emergency appeal №: MDRCU013 Emergency appeal launched: 30/10/2025 Operational Strategy published: 17/11/2025	Glide №: FL-2025-000201-CUB
Operation update #5 Date of issue: 06/10/2026	Timeframe covered by this update: From 30/10/2025 to 31/08/2026
Operation timeframe: 24 months (30/10/2025 – 31/10/2027)	Number of people being assisted: 100,000
Funding requirements (CHF): CHF 18 million through the IFRC Emergency Appeal CHF 19.5 million Federation-Wide	DREF amount initially allocated: CHF 997,990

To date, this Emergency Appeal, which seeks 18,000,000 Swiss francs, is 38.6 per cent funded¹. Further funding contributions are needed to enable the Cuban Red Cross, with the support of the IFRC, to continue to address the growing humanitarian needs of the communities affected by Hurricane Melissa in Cuba and the compounded effects of increasing health risks and persisting energy constraints.



Installation of photovoltaic system in Jiguani Hospital, Granma Province, July 2026. Source: Cuban Red Cross.

¹ Including soft pledges (see Funding section).

Description of the crisis

Nearly one year after Hurricane Melissa, its effects continue to shape humanitarian conditions in eastern Cuba, compounded by an energy and fuel crisis that deepened further between May and August 2026. Melissa made landfall in eastern Cuba on 29 October 2025 as a Category 3 hurricane with sustained winds of 125 mph (195 km/h) causing severe flooding, landslides, and significant storm-surge impacts across the provinces of Granma, Santiago de Cuba, Holguín, and Guantanamo. Close to 2.2 million people were affected, with no fatalities reported (OCHA, 2025a).

More than 215,000 homes were damaged or destroyed, affecting an estimated 645,000 people, half of whom are considered vulnerable. Of the 642 healthcare institutions that sustained damage, all are now operational and essential services have been restored across the affected provinces, although repairs to address the remaining hurricane related damage are ongoing (PAHO/WHO, 2026a). Around 450,000 people lacked access to safe water in the immediate aftermath (OCHA, 2025c). Livelihoods were also heavily impacted: at least 158,000 hectares of crops were damaged or destroyed – including grains, cassava, plantains, and coffee – alongside significant losses to fishing vessels and livestock (OCHA, 2025b; IOM, 2025).

Recovery has been particularly challenging due to pre-existing structural vulnerabilities and the cumulative effects of prior disasters, including Hurricanes Oscar and Rafael in 2024, from which many communities had not yet fully recovered (IFRC, 2025).

The situation has been further aggravated since end of 2025 by concurrent outbreaks of dengue, oropouche, and chikungunya, declared by Cuba's Ministry of Public Health (MINSAP), severe energy and fuel constraints and supply chain disruption due to external factors that have limited the access to essential services and items throughout 2026.

Cuba is also experiencing severe energy and fuel constraints that have become a dominant compounding factor across all sectors. Since January 2026, disruptions in petroleum product imports – linked to broader geopolitical dynamics and international market conditions – have sharply reduced fuel availability nationwide (ACAPS, 2026). The national electricity grid experienced repeated nationwide collapses, including two failures within one week in March, three within nine days in July and another major grid failure in early August (Reuters, 2026a). By August, electricity generation covered less than one third of national demand, compared with 45 per cent in January, and some areas experienced outages of more than 30 hours (OCHA, 2026).

The effects of these energy and fuel constraints are wide-ranging and cross-cutting. With more than 80 per cent of Cuba's water pumping infrastructure electricity-dependent, prolonged blackouts are severely affecting access to safe water, sanitation, and hygiene (IFRC, 2026). In August, around 3.5 million people were affected by water-supply disruptions (OCHA, 2026). Close to one million people depend on water tanker trucks, many of which face operational limitations due to reduced fuel availability (OCHA, 2026). Solid waste collection has been significantly reduced in many areas, heightening public health risks. The health system continued to face severe pressure. By May, more than 100,000 patients were awaiting delayed surgical procedures, including approximately 12,000 children. As of March 2026, all 46 blood banks were experiencing operational constraints; while interruptions to electricity dependent services placed 2,888 dialysis patients at heightened risk (OCHA/UNCT, 2026). More than 32,000 pregnant women also faced increased risks due to limited access to diagnostic services, transportation for obstetric emergencies and reliable electricity for maternal and neonatal care. Routine immunisation services remained operational but were under growing pressure from cold-chain disruptions, transport constraints and supply shortages (United Nations System in Cuba, 2026; PAHO/WHO, 2026). In August, cold-chain disruptions put the routine immunisation of nearly 70,000 children at risk (OCHA, 2026).

In the social sphere, reduced access to food, essential services, and income has deepened existing vulnerabilities. In addition, household diets in 2026 were often inadequate in energy intake and insufficiently healthy or diverse, amid persistent inflation, reduced purchasing power, fuel shortages and reduced availability of domestic and imported food (WFP, 2026). In July, year-on-year inflation in the formal market reached 20.7 per cent, with food prices up 26.4 per cent (ONEI, 2026). These dynamics reflect the convergence of compounding pressures: the energy and fuel constraints, the ongoing recovery needs in communities affected by Hurricane Melissa, and the persistent deteriorating health situation together place Cuban communities – particularly in the eastern provinces and those recently affected by arboviruses and hepatitis A outbreaks – at heightened and escalating risk.

DISASTER OVERVIEW					
	People In Need	2.2 million		People Still Displaced	2,760 ²
	Educational Centres Damaged	2,117		Healthcare Institutions Damaged	642
	Households Damaged	215,000		Crops Damaged (Hectares)	158,000
	Fatalities due to Arboviral Diseases	33 ³		Confirmed Fatalities	0

Summary of response

Overview of the host National Society and ongoing response

The Cuban Red Cross (CRC) maintains a nationwide presence with 39,648 volunteers organised across 15 departmental and 183 local branches. It is integrated into the National Health System and works in close coordination with the National Civil Defence System and the Ministry of Public Health (MINSAP). Through its Operations and Relief Department, the CRC leads disaster relief efforts and manages prevention, preparedness, response and recovery activities at the community level, including Restoring Family Links (RFL).

Since the start of the operation, 4,115 volunteers have supported the operation, with 1,593 volunteers still active in distributions and psychosocial activities. Between May and August 2026, the operation moved into early recovery while continuing distributions despite fuel and electricity constraints, supported by a Logistics Service Agreement signed with WFP in June. Until end of August, 2,356 households have received essential shelter and household items, (including tarpaulins, shelter toolkits, kitchen kits and solar lamps) as well as information on safe shelter practices. Community health and mental health and psychosocial support have reached over 3,517 people (up from 2,680) and 1,523 families (up from 651) have received hygiene kits and hygiene-promotion messages. More than 35,105 people have been reached through the provision of medicines and 4,146 have received essential health services in clinics and hospitals supported with photovoltaic systems. In addition, 34 CRC staff members and 595 volunteers have been trained in Psychological First Aid (PFA) and community-based health and first aid (CBHFA).

² Most recent data as of 17 December 2025: PAHO, Regional Situation Report – Hurricane Melissa, Sitrep No. 7, 27 January 2026, [paho-regional-sitrepmelissa-v2.pdf](#).
³ Official figure announced by the Ministry of Public Health (MINSAP) on 1 December 2025, as of epidemiological week 48 of 2025 (IFRC, 2026a; CBS News, 2025: <https://www.cbsnews.com/news/mosquito-borne-illnesses-cuba-chikungunya-dengue/>). Operation Update No. 4 reported 55 fatalities, based on a later non-official source; this update uses the official figure.

Needs analysis

The needs described in Operation Update No. 4 remain valid; this section highlights the main changes observed between May and August 2026. Throughout 2025 and into the current reporting period, Cuba has faced multiple, overlapping shocks, including drought, recurrent disease outbreaks (dengue, zika, chikungunya and oropouche), the lingering impacts of an earthquake and most recently, Hurricane Melissa, which caused extensive destruction in the eastern provinces as well as arboviral and hepatitis A outbreaks in provinces such as Matanzas and deterioration in mother and child health indicators, with critical situations in provinces such as Ciego de Avila. While recovery from the hurricane is ongoing, the country is simultaneously experiencing a sharp socio-economic deterioration driven by barriers to fuel availability. Fuel shortages have become the primary systemic shock, triggering cascading effects across all sectors of the economy and public services. In response, the Cuban government has activated a national contingency plan to address acute energy and fuel constraints. As highlighted by the Cuban Red Cross, humanitarian needs extend beyond the populations directly affected by the hurricane, in a context of pre-existing vulnerabilities (Cuban Red Cross, 2026).

Political and economic dynamics, fuel scarcity and the decline in tourism are collectively pushing the country towards a fragile recovery environment, with significant secondary humanitarian impacts due to the disruption of essential health and water systems, degradation of sanitation services and major interruption of food supply chains. About eight months after fuel cuts began, drastic effects are already noticeable in all sectors in which the Cuban Red Cross and the IFRC are operating.

Health

The health situation is further strained by an arboviral disease outbreak declared by the Ministry of Public Health in October 2025, with widespread circulation of dengue, oropouche and chikungunya. As of 30 November 2025, MINSAP reported 38,938 cumulative chikungunya cases (1,260 confirmed by PCR) and 33⁴ deaths from arboviral diseases (12 from dengue and 21 from chikungunya), 21 of them among children and adolescents under 18 (IFRC, 2026a; Prensa Latina, 2025). In June 2026, health authorities warned of an elevated risk of dengue, with all four serotypes circulating simultaneously (MINSAP, 2026). Health authorities have also identified gaps in vector control, including shortages of operators for fumigation machines and frequent breakdowns of these devices (IFRC, 2026a).

On mother and child health indicators, Ciego de Avila stands out as one of the provinces as it closed 2025 with an infant mortality rate of 10.7 per 1,000 live births, higher than the national average (9.9 by the end of 2025). By June 2026, 1,393 pregnant women registered, 25.2 per cent had nutritional problems and 88 suffered from anaemia. The territory also has one of the highest rates of infant malnutrition, with 125 children under one year old affected, and faces a lack of maternity homes, medical equipment, and basic supplies for the care of pregnant women and newborns.

Electricity instability has severely disrupted health-service continuity. Power cuts compromise cold-chain systems for vaccines and temperature-sensitive medicines, threaten neonatal and intensive-care equipment, and place dialysis

⁴ Official figure reported by the Ministry of Public Health (MINSAP) as of 30 November 2025 (<https://www.prensa-latina.cu/2025/12/01/confirman-en-cuba-muertes-por-arbovirosis/>). Operation Update No. 4 reported 55 fatalities, based on a later non-official source; this update uses the official figure.

patients and people dependent on artificial breathing machines at immediate risk. The Cuban Red Cross reports that power cuts can last 24 to 48 hours in some areas, affecting the continuity of neonatal and surgical care (Cuban Red Cross, 2026). According to Cuban authorities, as of May 2026 around 100,000 people, including 12,000 children, were on the national surgical waiting list, but energy restrictions are forcing non-urgent procedures to be postponed in favour of oncology and life-saving surgeries. Despite these efforts, oncological survival rates have dropped from 85 to 65 per cent according to official figures. An estimated 32,000 pregnancies require essential diagnostic ultrasounds that are increasingly difficult to guarantee. Neonatal services are experiencing a cascading deterioration, with the malfunctioning of ventilators, incubators, and other equipment requiring a stable power supply.

Interruptions in water access due to the prolonged energy and fuel limitations affect hygiene routines and the continuity of health services, further heightening risks for vulnerable populations, especially in provinces recovering from Hurricane Melissa, arboviral outbreaks and other infectious diseases, such as Hepatitis A. Prolonged blackouts, lack of connectivity, lack of sleep and hygiene conditions compounded by rising temperatures affect stress levels of the population signalling an increase in protection and mental-health needs. Diarrheal illnesses across Cuba have increased, linked to the ongoing deterioration of water and energy infrastructure. This deterioration affects the water supply as well as food storage and temperature control. Recent cases have involved E. coli, Norovirus, Shigella, and other gastrointestinal pathogens.

The mental health impact due to prolonged power outages is linked to increased depression, stress and anxiety among the Cuban population, considerably affecting daily activities. This is particularly alarming as it affects children and young populations that have already experienced prolonged confinement periods during COVID-19. Families and caregivers of school-age children are also affected, as the lack of electricity, educational materials and fuel for school transport disrupts schooling (Cuban Red Cross, 2026).

Overall, the compounded effects on the health system require urgent support to sustain primary health care, protect essential public-health functions, restore cold-chain capacity and safeguard critical services such as maternal health and neonatal care.

Water, Sanitation, and Hygiene (WASH)

Electricity instability further threatens water quality. Outages affect water treatment processes and pumping stations, reducing water availability and compromising hygiene conditions at household and facility levels. Emergency purification plants are operating but reach only a fraction of affected populations. The instability of power supply affecting water infrastructure means that even short-duration power outages can result in prolonged supply interruptions. Frequent electricity cuts and voltage fluctuations are damaging pumping equipment, while aging infrastructure and leakages further reduce system efficiency. As a result, localized failures rapidly escalate into broader service disruptions, leaving affected populations without clear timelines for service restoration. At national level, 87 per cent of water pumping systems are dependent on the National Electrical System, which with the current electric and fuel constraints impact up to 3.5 million people due to lack of fuel and energy according to UN. Water pumping stations at municipal level only work 2-3 hours per day, hindering the filling of tanks and reservoirs and above all the access to safe water for large parts of the population⁵. Prolonged and worsening water issues and power due to deteriorating infrastructure impact nationwide. According to the Cuban Red Cross, pumping and distribution

⁵ Cubadebate. ¿Qué acciones implementan los sectores eléctrico, industrial e hidráulico ante el déficit de combustibles?. 26 March 2026. [Cubadebate](#)

systems need eight to ten continuous hours of electricity to maintain adequate supply and pressure in some areas (Cuban Red Cross, 2026). Wells are running dry across the country due to drought, aggravating the ability to supplement water delivery. The lack of water, coupled with power shortages that have disrupted cold chain networks, poses significant health challenges.

Solid-waste management has continued to deteriorate noticeably. Fuel shortages have disrupted waste-collection services, leading to the accumulation of uncollected waste and debris, particularly in provinces impacted by Hurricane Melissa and arboviral outbreaks in provinces such as Santiago, Holguin, Ciego de Avila and Matanzas, where potential breeding grounds for vectors have increased at make-shift garbage dumps. This has resulted in the disruption of sanitation services, increased vector-borne disease risks and worsening environmental health conditions.

According to UN⁶, the summer months ended with a record number of power outages, including days when 74 per cent of the island was without electricity and at least four episodes where the National Electrical System disconnected. By May 2026, fuel imports had fallen short of planned levels by 2,667,000 tons.

Increased times for water delivery cycles via tanker trucks are reported (reaching over 60 days in eastern municipalities), alongside more than 16,000 cesspools or septic tanks nationwide awaiting sanitation services—affecting 63,125 people (Institute of Hydraulic Resources, based on UNICEF data).

Shelter

Hurricane Melissa damaged or destroyed approximately 215,000 homes⁷, displacing families into overcrowded schools, universities and temporary collective centres. Pre-existing housing deficits and slow reconstruction exacerbate exposure to hazards, leaving households increasingly exposed to storms and prolonged rainfall. In the most affected provinces, large numbers of homes remain unrepaired, including an estimated 17,000 in Holguín, 9,100 in Santiago de Cuba and 8,100 in Granma.⁸

Livelihoods

Hurricane Melissa caused extensive damage to livelihoods across affected provinces, with an estimated 158,000 hectares of crops affected.⁹ Damage to fishing vessels and livestock has further reduced food availability and undermined household income sources. These impacts coincide with severe disruptions to the national power system, where widespread outages and fuel shortages continue to affect food storage, distribution and market operations.

Nutritional risks are increasing due to the loss of livelihoods as main sectors of the economy, such as tourism, continue declining¹⁰ (a reduction of 56 per cent of international travellers by April 2026 compared to 2025). Also, disruptions in international supply chains limit food availability, which in combination of an almost null food storage capacity at household level due to lack of energy and fuel, are increasing restrictions for food consumption. This is particularly critical with at risk groups such as elderly people and children. Priority actions include strengthening recovery actions with a focus on livelihoods in communities affected by Hurricane Melissa. Year-on-year inflation in

⁶ Situation Report: Informative update on Cuba Situation, August 2026. [Reliefweb](https://reliefweb.int/node/4192553)

⁷ OCHA, Cuba: Seis Semanas después del huracán Melissa, 23 December 2025, <https://reliefweb.int/node/4192553>.

⁸ Granma, Los nuevos Techos, 26 Januari 2026, <https://www.granma.cu/cuba/2026-01-26/los-nuevos-techos-26-01-2026-22-01-30>.

⁹ OCHA, Cuba: Hurricane Melissa, Flash Update No. 7, 15 November 2025, <https://reliefweb.int/node/4187084>.

¹⁰ ONEI, Cuba: Arrival of international travelers, April 2026, <https://www.onei.gob.cu/>

the Cuban market reached a record 20.7 per cent, during July with a trend of accelerating price increases for food, non-alcoholic beverages, and transportation (ONEI). Estimates regarding a basic basket of goods for two people show a 60 per cent price increase over the course of a year, with particularly notable rises in products such as oil, rice, grains, and eggs. According to estimates, cumulative inflation between 2022 and 2026 is projected to exceed 300 per cent—an indicator reflecting the severe downward impact on people's purchasing power. The devaluation of the national currency and the growing role of foreign currency in the economy have further reduced purchasing power, and several international and hospitality sector companies have reduced or ceased operations in the country (Cuban Red Cross, 2026).

Protection, Gender, and Inclusion (PGI)

The humanitarian situation in Cuba continues to deteriorate due to the convergence of structural vulnerabilities and recent emergencies. Hurricane Melissa caused significant damage to homes, schools and roads, directly affecting spaces that serve as protective environments for children and adolescents, and limiting safe access to education, basic services and community support networks. At the same time, the energy and fuel shortages are heightening everyday protection risks, particularly in communities most affected by the hurricane and provinces that are epidemiological hotspots with high transmission of arboviral diseases and are facing additional public health risks. Prolonged and repeated blackouts disrupt domestic life, mobility and personal safety, forcing people to move in complete darkness using torches or candles to carry out basic activities, which increases exposure to accidents, violence and harassment. These conditions disproportionately affect women, adolescents and older people, deepening existing inequalities and further weakening the capacity of communities to cope with and recover from the ongoing emergency. Population ageing and the emigration of young people are also generating social and psychosocial impacts for many families (Cuban Red Cross, 2026).

Disaster Risk Reduction (DRR)

Cuba remains highly exposed to climate-related hazards, particularly hurricanes, heavy rainfall and coastal flooding, which continue to affect communities recovering from the impact of Hurricane Melissa. Recent assessments by United Nations agencies and humanitarian partners in the country indicate that damage to housing, basic infrastructure and public services has increased the vulnerability of many households, particularly in eastern provinces where recovery remains ongoing. At the same time, nationwide energy and fuel shortages have disrupted critical services such as water supply, waste management and transportation, further reducing the coping capacity of communities and local institutions ahead of new shocks. For over five years, the central province of Ciego de Ávila has been gripped by extreme drought, and the territory has yet to fully recover the groundwater levels upon which its economic and social development depends; reservoirs are barely reaching 46 percent of their capacity. El Niño phenomenon could become one of the strongest recorded since the second half of the 20th century, creating drought conditions and increasing hydraulic stress, reducing water availability as temperatures reach increasingly extreme levels according to the Institute of Meteorology (INSMET¹¹).

Operational risk assessment

Below is an updated risk analysis, building on the version included in the Operational Strategy. It reflects the realities encountered during implementation and outlines the mitigation measures undertaken to prevent, reduce, or address the consequences of identified risks. It also incorporates newly emerging risks that were not previously considered.

¹¹ El Niño vuelve a despertar: Un gigante climático que amenaza el equilibrio del planeta - August 16 2026 [Cubadebate](#)

Risks previously identified in the Operational Strategy

Risk	Reality during implementation period	Mitigation actions
1. Prolonged operations and overlapping emergencies (e.g. hurricanes, virus outbreak, earthquake) may lead to volunteer fatigue and reduced capacity for sustained engagement.	The implementation of activities of the Emergency Appeal coincided geographically and chronologically with DREF activities for the arboviral epidemic in Granma, Santiago de Cuba and Holguín, increasing volunteer workload.	- The National Society prioritised DREF activities (those feasible under the context) and rescheduled activities from the Emergency Appeal. - The CRC reinforced MHPSS activities for volunteers. - Rotations and rest periods were introduced to protect volunteer well-being and maintain long-term commitment.
2. Exposure to vector-borne diseases and unsafe environments during community work may increase infection or accident risk among volunteers or IFRC staff.	- Several mild and moderate cases of dengue and chikungunya were recorded among Cuban Red Cross leadership, staff and volunteers. - No accidents involving personnel were reported during operational activities. - Fuel shortages and prolonged blackouts have increased exposure to unsafe environments and heightened safety risks faced by volunteers, especially when travelling to remote areas or returning home after dark.	- Referral pathways established with MINSAP to ensure timely medical attention for staff and volunteers presenting symptoms compatible with dengue or chikungunya. - Regular vector-control and prevention measures implemented at branch level (elimination of breeding sites, fumigation, etc.) - Strengthened operational security protocols and adjusted activity schedules to reduce long-distance travel and ensure volunteers return home before nightfall.
3. Delays in the procurement and transport of essential supplies due to import restrictions as a result of the broader geopolitical context pose a significant challenge in emergency situations.	- Geopolitical context has reduced freight availability to Cuba. - Fuel shortages and electricity outages have caused significant delays in customs clearance and cargo release.	- Prepositioning strategy for a minimum coverage of 1000 families developed for resource mobilization. - A contingency plan to face the fuel scarcity in Cuba has been created which include photovoltaic equipment for the ports of Mariel and Santiago de Cuba to ensure power continuity during customs procedures.
4. Looting of government trucks transporting food assistance due to the unavailability or scarcity of supplies at the local level.	No such incidents were reported during the operation.	- Maintain the mitigation measures previously established, being: - Close coordination with local authorities and communities. - Sharing in advance distributions plans. - Using visible CRC logos. - Using a community targeting approach to identify the most vulnerable households.
5. Insufficient funds pose a risk to operational continuity.	Ensuring sufficient funding for the Emergency Appeal has proven to	Continued proactive resource mobilisation by the IFRC.

be difficult with currently only 38 per cent assured funding (hard pledges and in-kind donations).

- Focus on strengthened donor engagement through partnership-oriented strategies.
- Using the Mobilisation Table to track and communicate contributions and funding gaps.

New risks identified during the implementation period			
Risk	Likelihood	Impact	Mitigating actions
6. Power and connectivity disruptions reduce branch operability.	High	High	• Purchase and install photovoltaic solutions for CRC headquarters and branches. • Telecom equipment to be procured for HQ and branches (SAT, VHF, etc). • Portable power stations to ensure business continuity.
7. Fuel shortages reduce branch operability by limiting mobility, logistics, and coordination for critical activities.	High	High	• Acquire electric vehicles for CRC headquarters and branches, charged by solar energy, to reduce dependence on fuel and ensure operational mobility. • Expand shipping routes and companies mapping to diversify existing supplier database for Cuba
8. Fuel shortages prevent trucks carrying humanitarian aid from reaching affected communities.	High	High	• Explore options to access and supply fuel for humanitarian purposes, adhering to procurement and transport mechanisms that comply with regulatory frameworks. • Service agreements with private fuel suppliers and UN agencies adhering to procurement and transport mechanisms that comply with regulatory frameworks
9. Protracted fuel and energy constraints and uncertainty affect	High	High	• CRC reinforced MHPSS activities with

B. OPERATIONAL STRATEGY

Update on the strategy

The Operational Strategy¹² for this response was published on 17 November 2025. Since publication, indicators across each strategic sector of intervention were reviewed and adjusted to ensure adaptation to the rapidly evolving fuel and electricity limitations in Cuba. These restrictions have significantly affected the operational environment. As large portions of the response depend on electricity and fuel, the operation introduced targeted adjustments to safeguard continuity and ensure the operation can be implemented under current conditions.

To mitigate disruptions and maintain essential functionality, the operation has incorporated measures to strengthen operational capacity at priority Cuban Red Cross branches and selected Ministry of Public Health facilities. These adaptations aim to protect minimum operational continuity by reducing dependency on grid power and fuel, supporting solid-waste management in affected municipalities and exploring mechanisms to ensure CRC's humanitarian mobility during acute fuel shortages. At the same time, the deterioration of water, sanitation, and hygiene (WASH) conditions—driven by prolonged power outages, infrastructure damage, and limited access to safe water—has intensified health risks beyond arboviruses. The emergence of waterborne diseases, including confirmed localized hepatitis outbreaks in Matanzas and suspected cases in Santiago de Cuba and other provinces, demonstrates that affected populations are now exposed to multiple transmission pathways linked to the same structural drivers. These outbreaks, associated with contaminated water, inadequate sanitation, and poor hygiene conditions, highlight the need to adjust the operational strategy.

This evolving context reflects **a multi-sectoral and evolving emergency** with overlapping factors characterized by the compounded effects of energy shortages, infrastructure degradation, health system constraints, where facilities are already under strain due to rising caseloads and reduced operational capacity affecting particularly vulnerable populations such as newborn and expectant mothers. The coexistence of arboviral diseases and waterborne infections nationwide in combination with weather-related effects of El Niño in water supply reinforces the need for a holistic and integrated response that considers:

- The **inclusion of the province** of Ciego de Avila within the Hurricane Melissa Emergency Appeal, justified by the convergence of overlapping, interrelated humanitarian risks affecting the same geographic areas and populations. Although this province was not originally included in the Emergency Appeal's geographical scope, it represents one of the operational epicenters of deteriorating health indicators, where the impacts of fuel and energy constraints have directly worsened mother and child health conditions, which in combination with reduced water availability due to prolonged power outages and depleted water reservoirs and limited sanitation have worsened hygiene and access to safe water increasing the risks on water-borne diseases.
- Revision of sectoral priorities:

¹² IFRC, Cuba: Hurricane Melissa, <https://www.ifrc.org/emergency/cuba-hurricane-melissa>.

- **Health:** This sector is the most critical area due to the convergence of multiple disease outbreaks and deterioration of mother and child health indicators due to fuel and energy constraints. These are occurring in a context of strained health services, scarcity of medicines and medical supplies, reduced operational capacity, and increasing caseloads, requiring strengthened support to disease prevention, community surveillance, and health promotion including reinforcing community outreach on mother and child health. Also, mental health and psychosocial support, particularly among children, adolescents and young populations due to increased stress levels requires scaling up services at local level, based on an MHPSS assessment targeting children and youth. An adjustment towards the global target population to be reached will be included considering that medicines and medical supplies as well as backup power solutions for health centers will potentially reach a larger number of populations.
- **WASH:** This sector remains a priority. In consultation with the National Hydraulic Resources Institute, the technologies assessed have been revised. The focus is now on photovoltaic systems (10-30kw) for water pumping stations, solar-powered chlorine pumping stations, and a modular solar-powered water treatment plant for the Cauto Cristo community, which was heavily affected by Hurricane Melissa.
- **Shelter:** Shelter needs remain relevant; however, as they are more geographically focused target has been adjusted from 3,100 households to be reached with roofing kits to 1,600 households, as interventions will be concentrated in the original provinces included in the Emergency Appeal and most affected communities with a blanket approach maximizing existing resources and logistical arrangements.
- **Risk reduction, climate adaptation and recovery:** strengthening of preparedness efforts through a prepositioning strategy in Cuba to address supply chain management disruption, as well as inclusion of telecom and communications needs. Anticipatory action workshops for CRC and at municipal level scaled up considering new provinces.
- **Livelihoods:** Scaling up of livelihood activities by including small scale projects focused on recovery. Also, a livelihoods recovery framework will be developed as complementary strategy to existing eVCA interventions (workshops, application at community level).

Integrating of Ciego de Avila province into the Emergency Appeal for the Health and WASH sectors, ensures greater operational coherence, as it maximizes the impact of existing resources, and enables an effective response to compound and mutually reinforcing risks affecting the same populations, without requiring additional funding or significant changes to planned targets.

Importantly, the inclusion of this province does not represent an expansion of the Emergency Appeal but rather a realignment of the operational footprint to reflect the evolving nature of needs, as activities, resources, and intervention modalities (WASH, vector control, health promotion with a focus on mother and child health and MHPSS, procurement of medicines and medical supplies and community engagement) can be implemented within existing capacities and within the already agreed operational arrangements between CRC and local authorities.

These adaptations do not alter the strategic vision or priorities of the Emergency Appeal but are necessary measures to ensure that the Emergency Appeal remains relevant, evidence-based, and responsive to current needs, while

maximizing the effectiveness of available resources so that humanitarian assistance can be delivered despite the severe energy constraints affecting the country, while addressing the interconnected drivers of vulnerability affecting already vulnerable populations.

C. DETAILED OPERATIONAL REPORT

STRATEGIC SECTORS OF INTERVENTION

	Shelter, Housing and Settlements	Female > 18: 20,280	Female < 18: 5,070
		Male > 18: 19,720	Male < 18: 4,930
Objective:	<i>Support families in achieving safe sheltering solutions in the short and long-terms, with an emphasis on the Build Back Better (BBB) approach.</i>		
Key indicators:	Indicator	Actual	Target
	<i>Number of households provided with relief items (tarpaulins, shelter tool kits, and sleeping kits)</i>	2,356	5,000 (DREF: 2,200 ¹³)
	<i>Number of households provided with essential household items (kitchen sets, bedding sets, and solar lamps)</i>	2,356	15,000 (DREF: 2,200 ¹⁴)
	<i>Number of people who attended basic awareness raising sessions on safe shelter</i>	2,356	5,000 (DREF: 2,200)
	<i>Number of staff and volunteers trained in participatory methods such as PASSA</i>	17	75
	<i>Number of people who attended home repair training workshops and technical orientation sessions on roof repair, safe roofing practices, and build back safer guidance</i>	0	200
	<i>Number of households provided with roofing kits</i>	0	1,600 ¹⁵
	<i>Number of repair toolkits distributed</i>	0	80

The Cuban Red Cross (CRC) continues to implement shelter assistance in the provinces of Santiago de Cuba, Granma and Holguín, the provinces most affected by Hurricane Melissa. The response is structured in two phases: emergency assistance and early recovery.

As of August 2026, 2,356 households received essential household and shelter items, including tarpaulins, shelter toolkits, kitchen kits and solar lamps, to restore basic habitability. The total number of people reached is 7,775.

¹³ 2,200 shelter toolkits; 300 sleeping kits

¹⁴ 2,200 kitchen sets; 4,400 solar lamps (2 per household)

¹⁵ Target adjusted from 3,100 households to 1,600 households.

Awareness sessions on safe shelter practices, covering for example ventilation, humidity, securing tarpaulins, were delivered to these households (1 person per household).

The National Society will further strengthen community capacity by facilitating participatory training methodologies such as PASSA and by developing technical guidelines for school management committees on safe roofs. As of August 2026, Cuban Red Cross has trained 17 staff and volunteers from Santiago de Cuba and Granma (including Guama municipality) that will replicate the PASSA approach in their respective communities to promote practical, culturally appropriate and affordable repair techniques for the most vulnerable households and supports safer reconstruction across affected communities. Representatives from Santiago's Municipal Civil Defense and the Risk Management Centre, as well as the Provincial and Municipal Housing offices took part in the PASSA training, in order to strengthen future applications of the approach as well as adaptation to Cuban context.



(left) Arrival of charter plane with 22.5 tons of NFIs, August 2026; (center) supplementary distribution to communities in El Mango community, Rio Cauto, Granma Province, July 2026; (right) PASSA workshop in Santiago de Cuba, August 2026. Source; Cuban Red Cross

With IFRC support, CRC has transitioned into the recovery phase while maintaining response actions. The target has been adjusted to assist 1,600 households with roofing kits for the reinforcement of lightweight structures, fixing of roof and sealing, ensuring wind and water resistance. Complementary toolkits (e.g. drills, ladders, gloves, welding machines) will be distributed as well to enable the reparations to community repair brigades. These distributions will be accompanied by training and technical guidance on safe roof repair and Build Back Safer approaches. The target adjustment responds to revision of the implementation strategy at local level, a blanket approach for hard-to-reach communities affected by Hurricane Melissa and coverage of complete households will be prioritized; other households and communities have been reached with temporary or partial solutions by UN agencies and other stakeholders. This adjustment ensures avoiding duplication and optimization of resources and logistic arrangements. By August 2026, the first lot of 500 roofing kits has been dispatched by the supplier and it's expected to arrive during October 2026. A second (500) and third lot (600) of roofing kits is under production, and it's expected to be shipped by October. Due to supply chain disruptions (no maritime shipping arriving to Santiago) roofing kits will be delivered to Mariel port, this will require securing in-land cargo transportation to the eastern provinces through local private suppliers or WFP.

During June 2026, a Logistics Service Agreement was signed between IFRC and WFP in Cuba for the provision of logistical services (transportation and fuel) for humanitarian organizations and interventions. Under this agreement, during July, 7 containers were transported to eastern provinces to advance distributions of NFIs. On August 31st 22.5 tons of NFIs, visibility and mobilization items arrived in Cuba through a second charter flight. The delivery was adjusted from maritime shipping to consolidation in Panama and delivery through charter flights as major shipping companies suspended all operations and routes to Cuba.

Progress on the shelter indicators has steadily advanced since the last Operations Update. Despite fuel and energy constraints, distributions have continued as fuel supply has been secured for CRC's vehicles after an extensive due diligence process was completed with local suppliers. Also, a solar back up power system will be installed in Santiago de Cuba port in the coming months to support the expedition of custom services in eastern provinces.

	Health & Care <i>(Mental Health and psychosocial support / Community Health / Medical Services)</i>	Female > 18: 30,600	Female < 18: 7,650
		Male > 18: 29,400	Male < 18: 7,350
Objective:	<i>Implement health promotion activities and provide first aid and psychological support services at the community level to reduce the risk of increased morbidity and mortality and enhance the overall well-being of the affected population.</i>		
Key indicators:	Indicator	Actual	Target
	<i>Number of people reached with mental health and psychosocial services (MHPSS)</i>	3,517	20,000
	<i>Number of volunteers and staff trained in mental health and psychosocial support including Psychological first-aid (PFA)</i>	629	900 ¹⁶
	<i>Number of people trained in community-based health and first aid (CBHFA)</i>	203	280 ¹⁷
	<i>Number of volunteers trained in Epidemic Control for Volunteers (ECV)</i>	149	180 ¹⁸
	<i>Number of branches receiving first aid kits and haemorrhage control kits</i>	2	60 ¹⁹

¹⁶ Indicator adjusted to better reflect CRC extensive reach through volunteer trainings as well as inclusion of new provinces. Indicator was combined with trainings on PFA as it was duplicated.

¹⁷ Indicator adjusted to better reflect CRC extensive reach through volunteer trainings as well as inclusion of new provinces.

¹⁸ Indicator adjusted to better reflect CRC extensive reach through volunteer trainings as well as inclusion of new provinces.

¹⁹ Indicator adjusted to account for branches in new provinces.

<i>Number of local health care centres receiving backup power sources (e.g. solar panels, generators)</i>	8	22 ²⁰
<i>Number of provincial, municipal and local health facilities receiving procured medicines and medical supplies²¹</i>	11	20 (DREF: 4)
<i>Number of people reached by risk communication on maternal, and newborn health and sexual and reproductive health</i>	0	15,000 ²²
<i>Number of people reached with medicines and medical supplies</i>	35,105	75,000 ²³
<i>Number of branches with community pharmacies set up</i>	0	6 ²⁴
<i>Number of rapid repair brigades established</i>	0	45
<i>Number of community health promoters trained</i>	26	100 ²⁵

The Cuban Red Cross, in coordination with specialised personnel from the Ministry of Public Health, has provided Psychological First Aid (PFA) and psychosocial support to people in affected and hard-to-reach communities to 3,517 people (51 per cent from Santiago de Cuba, 31 per cent from Granma and 18 per cent from Holguin); 47 per cent are male and 53 per cent female and 5 per cent of them are people with disabilities. People reached with psychological first aid have been referred to specialized personnel. Coordination with the Mother and Child Program (PAMI) and the Elderly program have allowed the provision of psycho-emotional services to children and adolescents as well as elderly populations from affected communities.

As of August 2026, 629 volunteers and staff have been trained in MHPSS and Psychological first aid (34 staff, 595 volunteers). All volunteers have been integrated into psychosocial support teams within the communities, focusing their efforts on both populations directly affected by the disaster and the general population experiencing emotional distress. An assessment on MHPSS between children and adolescents is planned to take place in selected provinces to adjust and scale up actions on MHPSS as stress, anxiety and depression levels of the population deteriorate due to prolonged exposure to power outages and disruption of daily life.

²⁰ Indicator adjusted to account for health centres in added province.

²¹ This indicator has been revised to include distribution of medicines and medical supplies in 2 additional provinces: Matanzas and Guantanamo.

²² New indicator added to reflect community outreach activities focused on maternal health and SRH.

²³ New indicator added to reflect number of patients reached with medicines and medical supplies provided through this Emergency Appeal.

²⁴ Indicator adjusted to include branch in added province.

²⁵ Indicator adjusted to include promoters trained in added province.

203 people (58 per cent male and 42 per cent female) have been trained on Community-based Health and First Aid (CBHFA) 37 per cent from Santiago de Cuba, 31 per cent from Granma, 13 per cent from Holguin, 8 per cent from Guantanamo and 11 per cent from Matanzas.

149 volunteers (72 per cent male and 28 per cent female) in the priority provinces have been trained in Epidemic Control for Volunteers (ECV). The branches have conducted vector control training, accompanying and supporting community awareness campaigns on mosquito breeding site control. They also supporting vector control measures in communities with the highest proliferation rates (i.e. fumigation, auto focal, identification of symptoms and isolation of febrile cases).



(left) Installation of photovoltaic system in Malaco Clinic, Rio Cauto, Granma Province, July 2026. (right) MHPSS training with Urbano Noris volunteers, Holguin province. Source; Cuban Red Cross

As of August, 8 healthcare centres received back up power sources and 2 had an installation progress of 50 per cent. During August, an estimated of 4,146 patients (50 per cent female) were reached with essential care services in 5 centres (Urbano Noris 2 clinics, Rio Cauto, Jiguani, Manzanillo). Early August, the Ministry of Health in Santiago province requested a change in the installation sites prioritizing hospitals that serve larger number of populations. Additional hospitals and healthcare centres have been identified in Matanzas (3), Ciego de Avila (3) and Guantanamo (2) with priority to mother and child specialized care centres and maternity homes.

Medicines and medical supplies were delivered to provincial and municipal health facilities reaching 35,105 people; the services provided were critical patient care, mother and child health, cardiology and internal medicine and dermatology and burn care.

	Water, Sanitation and Hygiene	Female > 18: 20,280	Female < 18: 5,070
		Male > 18: 19,720	Male < 18: 4,930
Objective:	Increase access to safe drinking water, sanitation facilities, and hygiene promotion services for the affected population to reduce the risk of waterborne diseases.		

Key indicators:	Indicator	Actual	Target
	<i>Number of households reached with hygiene kits</i>	1,523	15,000 (DREF: 2,200)
	<i>Number of people reached with menstrual hygiene kits</i>	122	15,000 (DREF: 700)
	<i>Number of households reached with household water storage and water treatment items</i>	1,801	15,000 (DREF: 2,200 ²⁶)
	<i>Number of community-level hygiene promotion / awareness sessions conducted</i>	2,300	15,000 ²⁷
	<i>Number of volunteers and staff trained in WASH</i>	13	120
	<i>Number of water pumping stations supported through solar backup power systems</i>	0	10 ²⁸
	<i>Number of households provided with mosquito nets</i>	2,356	5,000 (DREF: 2,200) ²⁹
	<i>Number of households reached through community health and vector control campaigns</i>	2,498	(DREF: 2,200)
	<i>Number of solid waste removal and environmental clean-up campaigns conducted</i>	6	12 ³⁰

With support from the IFRC, the Cuban Red Cross provided 1,523 households with hygiene kits and 1,801 households were reached with water storage and treatment (jerrycans, water filters, buckets). These distributions were accompanied by key messages on hygiene promotion. This operation is expected to reach a total of 15,000 people with menstrual hygiene kits and 15,000 households with water storage and treatment solutions (jerrycans, buckets with taps and lids, aqua tabs/household water filters), along with key messages on proper use. Staff and volunteers from the Cuban Red Cross will be trained in WASH to strengthen local capacities.

Swiss government and Swiss Red Cross teams supported the rapid response following Hurricane Melissa, in collaboration with the Cuban Red Cross. WASH specialists were deployed from Switzerland and, in collaboration with the Institute of Hydraulic Resources of Santiago de Cuba, assessed and installed a water treatment plant at the "Alberto Fernández Montes de Oca" Municipal Hospital in San Luis, thereby improving the hospital's water quality. The coordination and installation of safe water systems were also carried out, benefiting 12 communities in the municipality of San Luis. A total of 24,224 people were reached after the emergency. Currently water supply through the water plant and bladders is hindered due to lack of fuel supply and electricity.

²⁶ 2,200 water tanks (33 GL); 198,000 aqua tabs for 2,200 households.

²⁷ Indicator adjusted to better reflect implementation strategy, as sessions are conducted at household level.

²⁸ New indicator added to reflect water pumping stations targeted with solar back up power systems.

²⁹ The target has been adjusted from 15,000 to 5,000 households. Please refer to section B of the report for the explanation.

³⁰ Indicator adjusted, the actual data has been corrected as of August 2026 and target set at 12 campaigns.

Mosquito nets were distributed to 2,356 families to reduce the risk of dengue, oropouche and chikungunya. These distributions were part of local vector control campaigns with community messaging on correct use, identification and elimination of indoor breeding sites and the removal of standing water. During distributions CRC's volunteers conducted face-to-face talks promoting hygiene and the proper use of mosquito nets. Since the start of the response 2,498 households have been reached through community health and vector control campaigns. Also, 2,300 sessions on hygiene promotion and awareness were conducted at household level, target has been adjusted to better reflect operational context. Solar technologies for water pumping stations (10kw) and water purification (solar hypochlorite pumps) have been included to reduce environmental and public-health risks in a context where chlorine tabs are not available in the local market and sanitation is reduced at household and community level.



Delivery of WASH supplies in Polipalo community.
Source; Cuban Red Cross



Protection, Gender and Inclusion

Objective:

Ensure that Cuban Red Cross staff and volunteers identify the needs of the most at risk and particularly disadvantaged groups, facilitating access to assistance, equitable participation, and safe and dignified conditions in collective centres.

Key indicators:

Indicator

Actual

Target

Number of Cuban Red Cross staff and volunteers trained on protection of sexual exploitation and abuse (PSEA) and all forms of child safeguarding.

45

150

Number of community awareness campaigns conducted on PSEA, including dissemination of printed safeguarding key messages.

7

10

Number of device charging kits distributed to support RFL services during emergencies.

9

6

All actions of the operation are planned and executed in accordance with the principles and standards of Protection, Gender, and Inclusion (PGI), with a focus on 'do no harm', accessibility, dignity, safety, and informed participation. The Cuban Red Cross has mainstreamed PGI so that all distribution, training and services incorporate specific actions to prevent the risks of exclusion, violence, exploitation or abuse and to guarantee equitable access, with an emphasis on people at greatest risk.

With DREF funding for the Arbovirus response, a four-day PGI and CEA training was conducted in Santiago de Cuba with staff and volunteers engaged in the arbovirus and post-hurricane Melissa responses. The workshop strengthened practical skills, promoted integration of PGI and CEA in emergency operations, and created a cohort of trained individuals able to replicate the training in their branches. With funding from the Hurricane Melissa response, the training was replicated with 15 staff members and 30 volunteers of the branches in Santiago de Cuba, Granma and Holguín.

Community awareness activities were carried out in 7 primary schools in Santiago de Cuba, Holguin, Guantanamo, Matanzas and Granma to promote key protection messages.

	Community Engagement and Accountability		
Objective:	<i>Strengthen community engagement and accountability to enable the CRC to have a thorough understanding of community needs, integrating meaningful community participation, and implementing effective mechanisms to listen to and act on community feedback throughout the response.</i>		
Key indicators:	Indicator	Actual	Target
	<i>Number of complaints, questions, suggestions, inquiries and appreciations received through the feedback mechanism.</i>	113	N/A
	<i>Number of staff, volunteers and leadership trained in community engagement and accountability.</i>	23	150
	<i>Percentage of people surveyed report that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner.</i>	N/A	70%
	<i>Percentage of people surveyed who report they know how to provide feedback about the operation.</i>	N/A	70%
	<i>Number of community feedback committees formed.</i>	13	15 ³¹
Throughout implementation, the Cuban Red Cross maintains an open dialogue with communities, engaging both formal and informal leaders in the priority areas. Selection criteria, lists of selected households and details on the items to be distributed are clearly communicated, ensuring transparent and participatory processes. Social workers from each community supported house-to-house visits, jointly assessing vulnerabilities based on CRC criteria and ensuring safe, equitable access for the most at risk families.			
To ensure transparency and accountability in the activities of the Cuban Red Cross, 13 feedback Committees were established, one for each municipality where supplies were delivered, to encourage greater community participation in the actions carried out by the National Society. Up to date 113 inquiries have been received and addressed mostly focusing on selection criteria and some expressing gratitude for the support provided.			

	Risk Reduction, climate adaptation and Recovery	Female > 18: 5,704	Female < 18: 1,901
		Male > 18: 5,916	Male < 18: 1,479
Objective:	Communities in high-risk areas are prepared for and able to respond to disasters.		

³¹ Indicator adjusted to include added province.

Key indicators:	Indicator	Actual	Target
	<i>Number of volunteers and staff trained in EVCA.</i>	38	75
	<i>Number of participants trained in Anticipatory Action T1 to build competencies for designing, implementing, and institutionalizing AA systems.</i>	7	75
	<i>Number of municipal-level AA training sessions or ToT sessions conducted to strengthen skills in identifying community needs and risks.</i>	0	6 ³²
	<i>Number of Simplified Early Action Protocols (SEAP) developed and validated for communities or municipalities.</i>	0	1

CRC has advanced key activities related to anticipatory action and Enhanced Vulnerability and Capacity Assessment (EVCA) implementation until August 2026. During June, a training session at HQ level took place on anticipatory action to provide basic awareness and information on AA and the development of Early Action protocols. Also, a technical exchange took place with representatives from the National Meteorological Institute (INSMET), the National Hydraulic Institute (INRH) and the Civil Defense, during the exchange discussions took place on anticipatory action under RCRC mechanisms, development of EAPs, definition of triggers and thresholds. By the end of August, CRC had developed a simplified Early Action protocol on Extreme rainfall to be presented towards the validation committee after final revisions during September.

38 staff and volunteers (23 female, 15 male) were trained on eVCA in the provinces of Santiago, Granma and Holguin. Trained volunteers will advance with replicas and implementation of eVCA at community level during the last quarter of 2026.

³² Indicator adjusted to reflect added provinces.

Also, a recovery framework focused on livelihoods will be developed to inform future revisions of the Emergency Appeal as well as the CRC country plan. The framework will be supported by the findings of the EVCA application including the adaptation of Household Economic Security tools. Technical support from the Livelihoods Centre and the Spanish Red Cross for the development of the recovery framework. The budget has been revised to include micro projects on livelihoods recovery in eastern provinces.



(up) Workshop on eVCA with Cuban RC volunteers and staff, municipality of Bayamo, Granma Province, July 2026. (right) Introductory session on anticipatory action with Cuban RC staff, La Habana, June 2026. Source; Cuban Red Cross, IFRC.



Enabling approaches

	National Society Strengthening		
Objective:	Strengthen the CRC's response capacities by supporting ongoing institutional and operational development in line with the National Society's strategy and preparedness plans, leveraging rapid response expertise and laying the foundations for longer-term capacity strengthening throughout the operation.		
Key indicators:	Indicator	Actual	Target
	Number of volunteers provided with equipment for protection, safety and support (e.g. PSS) appropriate to the emergency.	0	200
	Number of volunteers trained through National Intervention Team (NIT) training on needs assessment, emergency response protocols, and coordination.	0	20

<i>Number of electric or solar generators procured and installed in affected CRC branches.</i>	9 ³³	5 (DREF: 1)
<i>Number of volunteers mobilized for response activities.</i>	4,115	(DREF: 500)



*Electric tricycle delivered to CRC HQ in La Habana, August 2026.
Source: Cuban Red Cross*

The Cuban Red Cross received four vehicles to be used in the affected territories, thereby reinforcing their fleet and achieving greater operational capacity in the areas most affected by Hurricane Melissa. One of the vehicles received is a hybrid, ensuring that despite the limitations in accessing fuel it remains operational. Also, an electric tricycle has been delivered to CRC HQ and 3 remain under procurement process.

In total 4,115 volunteers have been mobilised for response activities, of whom 1,593 are currently still active in the operations. Solar backup systems will be installed in CRC HQ and 3 branches from the eastern provinces, the process has been awarded. Also, telecom needs are being identified with NS teams as part of preparedness efforts.



Secretariat Services

Objective:

The IFRC secretariat is capable and equipped to support hurricane response and preparedness, delivering services as planned in the Emergency Appeal in a timely manner and in full compliance with IFRC policies, procedures, and minimum standards as stated in the Sphere Guidelines and Humanitarian Charter.

Key indicators:

Indicator	Actual	Target
<i>Number of rapid response personnel supporting the operation.</i>	3	2 (DREF: 1)
<i>Number of field monitoring visits conducted by the Latin Caribbean CCD to oversee DREF implementation.</i>	10	15 (DREF: 6)
<i>Number of ARO technical support and monitoring missions conducted.</i>	7	10 (DREF: 2)

As part of the stabilization of the operation, a dedicated Operations Manager based in Dominican Republic was recruited during April and has taken charge of the operation, focusing on the transitioning of the operation into recovery phase and the adaptation of the operational strategy based on contextual changes and evolving needs.

³³ The figure reported in Operation Update 2 was incorrect as visits conducted under the Arbovirus DREF were mistakenly included. The number included in this update reflects the correct data for this Emergency Appeal only.

The Country Cluster Delegation conducted 10 field monitoring visits to support, oversee and verify the implementation of activities. These visits aim to ensure that response activities are carried out in accordance with operational standards, donor requirements, and organizational policies, while also providing technical guidance, identifying challenges, and facilitating timely corrective actions. From May-August, technical support from ARO (2 missions) was provided on Supply chain management and anticipatory action.



Monitoring mission to Santiago de Cuba, July 2026.
Source: Cuban Red Cross

D. FUNDING

The Emergency Appeal MDRCU013 – Cuba: Hurricane Melissa has a total IFRC funding requirement of CHF 18,000,000 (CHF 19,500,000 Federation-wide). As of 31 August 2026, the appeal has mobilised CHF 6,941,681, including confirmed contributions, in-kind support and soft pledges, representing 38.6 per cent coverage.

Confirmed contributions amount to CHF 6,941,681, including CHF 6,834,716 in cash pledges and CHF 106,965 in in-kind donations.

Despite these contributions, the operation still faces a funding gap of CHF 11,058,319 to fully implement the planned activities in support of the Cuban Red Cross response to Hurricane Melissa. Resource mobilisation efforts remain ongoing to secure additional funding and ensure the continuation and scale-up of humanitarian assistance to affected communities.

See the distribution in the table below:

Funding Coverage	Funding Requirement (CHF) ³⁴	Amount Raised (CHF)	Funding Gap (CHF)	Coverage (%)
IFRC Secretariat	18,000,000	6,941,681	11,058,319	38.6%

³⁴ CHF = Swiss francs

Contact information

For further information, specifically related to this operation please contact:

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For In-Kind donations and Mobilization table support

- **Regional Head, Global Supply Chain:** Stephany Murillo, stephany.murillo@ifrc.org

Reference documents

➤ Click here for:

- [Previous Appeals and updates](#)
- [Emergency Appeal](#)
- [Operational Strategy](#)

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

APPEAL

MDRCU013 - Cuba - Hurricane

All figures in Swiss Francs (CHF)

OPERATING TIMEFRAME
30 Oct 2025 to 31 Oct 2027

APPEAL LAUNCH DATE
30 Oct 2025

REPORT STATUS

INTERIM

SECTION I Emergency Appeal Funding Requirements

TOTAL FUNDING REQUIREMENTS

18,100,000

CHF

DONOR RESPONSE* (as per 08 Oct 2026)

4,613,112

CHF

APPEAL COVERAGE

25%

of total funding requirement

SECTION II IFRC Operating Budget Implementation

STRATEGIC PRIORITIES & ENABLING APPROACHES	OP STRATEGY	OP BUDGET	EXPENDITURE	VARIANCE
AP000 - Undefined output	0	0	0	0
PO01 - Shelter and Basic Household Items	0	2,288,482	379,713	1,908,769
PO02 - Livelihoods	0	0	0	0
PO03 - Multi-purpose Cash	0	0	0	0
PO04 - Health	0	882,844	31,129	851,715
PO05 - Water, Sanitation & Hygiene	0	412,385	277,064	135,321
PO06 - Protection, Gender and Inclusion	0	29,100	0	29,100
PO07 - Education	0	0	0	0
PO08 - Migration	0	0	0	0
PO09 - Risk Reduction, Climate Adaptation and Recovery	18,100,000	976,056	137,992	838,064
PO10 - Community Engagement and Accountability	0	7,000	0	7,000
PO11 - Environmental Sustainability	0	0	0	0
Planned Operations Total	18,100,000	4,595,868	825,898	3,769,970
EA01 - Coordination and Partnerships	0	0	9,711	-9,711
EA02 - Secretariat Services	0	554,129	342,123	212,006
EA03 - National Society Strengthening	0	456,698	206,090	250,608
Enabling Approaches Total	0	1,010,827	557,924	452,903
TOTAL	18,100,000	5,606,695	1,383,822	4,222,873

SECTION III Operating Movement & Closing Balance

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	5,302,704
Expenditure	-1,383,822
Closing Balance	3,918,882
Deferred Income	428,667
Funds Available	4,347,549

SECTION IV DREF Loan

* not included in Donor Response	Loan:	997,990	Reimbursed:	0	Outstanding:	997,990
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SECTION V Contributions by Donor and Other Income

Opening Balance	0					
INCOME TYPE	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income
American Red Cross	1,608,794	0	0	0	1,608,794	0
Belize Red Cross Society	1,903	0	0	0	1,903	0
British Red Cross	105,119	0	0	0	105,119	0
Bulgarian Red Cross	1,014	0	0	0	1,014	0
DREF Allocations	0	0	0	997,990	997,990	0
ELMA Relief Foundation	650,000	0	0	0	650,000	0
French Red Cross	93,761	92,887	0	0	186,648	0
German Red Cross	36,079	0	0	0	36,079	0
Hong Kong Red Cross, Branch of the Red Cross Society of China	19,579	0	0	0	19,579	0
Italian Government Bilateral Emergency Fund	180,730	0	0	0	180,730	0
Italian Red Cross	112,513	0	0	0	112,513	0
Japanese Red Cross Society	25,220	0	0	0	25,220	0
New Zealand Red Cross	10,441	0	0	0	10,441	0
On Line donations	10,408	0	0	0	10,408	0
Red Cross of Monaco	13,918	0	0	0	13,918	0
Sage Foundation	8,009	0	0	0	8,009	0
Spanish Government	35,384	0	0	0	35,384	428,667
Spanish Red Cross	157,680	0	0	0	157,680	0
Swiss Government	250,000	0	0	0	250,000	0
The Canadian Red Cross Society	533,570	27,894	0	0	561,464	0
The Netherlands Red Cross	250,803	0	0	0	250,803	0
The Republic of Korea National Red Cross	26,777	0	0	0	26,777	0
UNDP - United Nations Development Programme	32,232	0	0	0	32,232	0
Z Zurich Foundation	20,000	0	0	0	20,000	0
Total Contributions and Other Income	4,183,933	120,781	0	997,990	5,302,704	428,667
TOTAL INCOME AND DEFERRED INCOME						5,302,704
						428,667