



House Destroyed in the Municipality of Guama. Santiago de Cuba. IFRC 2025

Appeal: MDRCU013	Hazard: Cyclone	Country: Cuba	Type of DREF: Response
Crisis Category: Orange	Event Onset: Sudden	DREF Allocation: CHF 997,990	
Glide Number: FL-2025-000201-CUB	People Affected: 2,700,000 people	People Targeted: 7,260 people	
Operation Start Date: 01-11-2025	Operation Timeframe: 6 months	Operation End Date: 30-04-2026	DREF Published: 20-11-2025

Targeted Regions: **Granma, Holguin, Las Tunas, Santiago de Cuba**

Description of the Event

Date of event

29-10-2025

What happened, where and when?

On 29 October 2025, Hurricane Melissa made landfall in eastern Cuba as a Category 3 hurricane, striking the southern coast of Santiago de Cuba province with maximum sustained winds of 195 km/h (125 mph). Melissa had intensified rapidly over the Caribbean, reaching Category 5 strength before its approach—becoming one of the most intense hurricanes ever recorded in the Caribbean basin.

In the days preceding landfall, Cuba's Civil Defense implemented extensive preparedness measures, including the evacuation of more than 735,000 people, the suspension of classes and transportation, and the safeguarding of essential assets. However, the hurricane brought torrential rains (250–600 mm in some mountainous areas), severe storm surges, and destructive winds that caused widespread flooding, landslides, and housing collapse across the eastern provinces of Santiago de Cuba, Guantánamo, Holguín, Granma, Las Tunas, and Camagüey.

Preliminary assessments from the Cuban Civil Defense and UNOSAT estimate that 2.7 million people were directly affected. Critical infrastructure, including electricity, water supply, health, and education services, was severely disrupted. Widespread power outages were reported across three provinces, isolating rural communities and impeding rescue efforts.

The hurricane compounded Cuba's pre-existing public health and infrastructure crises, particularly the arboviral outbreak declared by the Ministry of Public Health (MINSAP) in October 2025 (involving dengue, chikungunya, and Oropouche viruses), as well as chronic power and fuel shortages affecting essential services. The combination of these factors has created a complex, multi-crisis situation in which affected populations face overlapping humanitarian needs.

The Cuban Red Cross, in coordination with the IFRC and the National Civil Defense, is supporting the humanitarian response. Ahead of landfall and in support of governmental preparedness and readiness measures, the CRC disseminated early-warning messages and preparedness advisories to at-risk communities, pre-positioned relief stocks, and mobilised volunteers for evacuation support and rapid assessments. Following the hurricane's impact, the IFRC, on behalf of the Cuban Red Cross, launched the Emergency Appeal (MDRCU013), which targets 100,000 people for integrated, multi-sectoral assistance. Within this framework, and as initial funding for the emergency response that forms part of the broader operation being developed and implemented, this DREF operation will prioritise the most vulnerable families whose homes and essential household items were lost or damaged, focusing on the distribution of non-food items and relief materials in the provinces of Santiago de Cuba, Guantánamo, Holguín, and Granma.





CRC volunteers supporting evacuation in the province of Santiago de Cuba.



Search and rescue activities in Santiago de Cuba.

Scope and Scale

Hurricane Melissa has had devastating humanitarian consequences across eastern Cuba, representing one of the most destructive weather events to hit the country in recent decades. According to initial assessments from the Cuban Civil Defense, UNOSAT, and the Cuban Red Cross (CRC), an estimated 2.7 million people have been affected across the provinces of Santiago de Cuba, Guantánamo, Holguín, Granma, Las Tunas, and Camagüey. These areas faced the hurricane's full force—sustained winds of up to 195 km/h, torrential rains exceeding 400 mm, and severe storm surges that inundated coastal and low-lying communities.

Preliminary data indicate that approximately 992,000 homes have been damaged to varying degrees, including 200,000 houses either partially or totally destroyed in Santiago de Cuba alone. Thousands of families remain in temporary shelters, community centers, or hosted by relatives, often without access to basic household items. Essential services such as electricity, water supply, and telecommunications were severely disrupted.

The hurricane's impact has been particularly severe because it struck areas that were still recovering from Hurricane Oscar (2024) and Cyclone Rafael (2024), where fragile infrastructure and resource shortages limited recovery. The destruction of water systems, local food distribution centers, and loss of personal assets have compounded pre-existing vulnerabilities caused by economic constraints, fuel scarcity, and frequent power outages.

Given the scale of destruction, it is estimated that nearly 1 million people are in urgent need of humanitarian assistance—particularly shelter materials, non-food items, safe water access, and health protection.

Source Name	Source Link
1. UNOSAT (United Nations Satellite Centre)	https://unosat.org/
2. United Nations Country Team (UNCT) – Cuba	https://reliefweb.int/report/cuba/flash-update-01-hurricane-melissa-ensp
3. PAHO/WHO – Crisis Situation in Cuba (October 2025)	https://www.paho.org/en



Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	Yes
Did it affect the same population group?	No
Did the National Society respond?	-
Did the National Society request funding form DREF for that event(s)	-
If yes, please specify which operation	-

If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:

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Lessons learned:

The Cuban Red Cross (CRC) has extensive experience in emergency response and relief operations, having implemented several DREF operations and Emergency Appeals over the past decade, including responses to Hurricanes Ian (2022), Oscar (2024), and Rafael (2024), as well as flood and health emergencies. Key lessons drawn from these operations have informed the design of this DREF:

Pre-positioning and logistics readiness are critical.

Previous operations demonstrated that delays in customs clearance and transportation constraints can significantly affect the timely distribution of relief items. As a result, this operation prioritises the use of pre-positioned stocks and locally available materials whenever possible, with strong coordination between CRC logistics, the IFRC Regional Logistics Unit in Panama, and the Civil Defense system.

Standardisation of non-food items ensures quality and efficiency.

Standardising NFI kits (shelter toolkits, kitchen sets, hygiene kits, blankets, mattresses, and solar lamps) across operations has improved procurement efficiency and facilitated training for volunteers and local authorities on distribution protocols and reporting. These standards will be maintained in this operation to ensure consistency and accountability.

Volunteer safety and continuity of operations must be guaranteed.

During past operations, energy shortages and fuel constraints affected the mobility of teams and warehouse management. Consequently, this operation will integrate alternative energy solutions (solar systems) and reinforce fleet maintenance to ensure continuity of operations and safe deployment of volunteers.

Strong coordination with Civil Defense and local authorities enhances reach and legitimacy.

Joint assessments, planning, and beneficiary selection conducted with Civil Defense, local councils, and health institutions have proven effective in ensuring equitable and transparent assistance. This DREF builds on that coordination model, ensuring complementarity and the use of existing national systems.

Community engagement and accountability mechanisms increase trust and efficiency.

Feedback systems and communication through local radio, community meetings, and public information boards—introduced in recent DREFs—helped identify emerging needs and address grievances promptly. These mechanisms will be reactivated to maintain community trust and transparency during relief distribution.

Environmental considerations and energy efficiency improve sustainability.

Past operations showed the need to integrate Green Response measures such as debris recycling and solar-powered lighting to reduce environmental impact. The CRC will apply these principles throughout the current operation, especially in logistics and NFI distributions.

Continuous learning and institutional strengthening.

Post-operation reviews and lessons-learned workshops from previous DREFs (floods, hurricanes, and epidemics) highlighted the



importance of documentation and real-time monitoring. This DREF-funded operation includes monitoring, after-action reviews, and a lessons-learned exercise to continuously strengthen the quality and accountability of the overall response.

Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level? **Yes**

Current National Society Actions

Start date of National Society actions

27-10-2025

<p>Health</p>	<p>First aid and psychosocial support (PSS) services delivered to 460 evacuees.</p> <p>Deployment of community health and rescue teams to conduct basic health surveillance, support patient transfers, and provide first aid.</p> <p>Joint vector-control and hygiene-promotion campaigns with MINSAP and local authorities in flooded communities to mitigate the spread of dengue, Oropouche, and chikungunya.</p> <p>Dissemination of public health messages through community networks and local radio, focusing on disease prevention and safe hygiene practices.</p>
<p>Protection, Gender And Inclusion</p>	<p>Volunteers trained in PGI minimum standards were mobilised to ensure safe, dignified, and equitable access to assistance in collective shelters.</p> <p>Special attention to women-headed households, older people, and persons with disabilities during evacuations and initial relief distributions.</p> <p>CRC staff and volunteers promoted safe spaces in shelters, providing psychosocial support and monitoring for protection risks such as overcrowding or family separation.</p> <p>Restoring Family Links (RFL) services activated, in coordination with the ICRC, to support families separated during evacuations.</p>
<p>Coordination</p>	<p>The CRC has maintained daily coordination with the National Civil Defense, ensuring alignment with national response priorities and access to official data on evacuations, damages, and affected populations.</p> <p>Participation in inter-institutional coordination platforms, including meetings with MINSAP, Ministry of Construction (MICONS), and local government authorities, to synchronise relief operations and avoid duplication.</p> <p>Close coordination with the IFRC Latin Caribbean Country Cluster Delegation and Regional Office for the Americas to monitor needs, plan the DREF-supported response, and prepare for the broader Emergency Appeal implementation.</p> <p>Engagement with UNETE (UN Emergency Technical Team), PAHO/WHO, and WFP to share assessment findings and harmonise assistance strategies, particularly in health and WASH sectors.</p>
<p>National Society Readiness</p>	<p>Before Hurricane Melissa made landfall in Cuba, the National Society mobilized 40,000 volunteers and 393 staff, deploying provincial emergency teams to Santiago de Cuba, Guantánamo, Holguín, and Granma. These early deployments ensured local preparedness and immediate response capacity once impacts began.</p> <p>To maintain operations under severe conditions, temporary logistics bases were established with backup power systems and radio communication networks, allowing</p>



	<p>coordination to continue despite anticipated power outages and telecommunications disruptions.</p> <p>Volunteer safety was prioritized throughout the preparedness phase. Teams were equipped with personal protective equipment (PPE), rescue gear, and insurance coverage, ensuring safe deployment to high-risk areas expected to face flooding, debris, and infrastructure damage.</p>
Assessment	<p>Initial rapid assessments conducted immediately after landfall in Santiago de Cuba, Guantánamo, Holguín, and Granma to identify priority humanitarian needs in shelter, NFIs, WASH, and health.</p> <p>Damage verification and household mapping ongoing in coordination with local authorities to identify families who lost homes or essential household items.</p> <p>CRC volunteers using standard IFRC assessment forms and mobile data collection tools (Kobo) to ensure systematic information gathering for DREF planning.</p> <p>Findings are being consolidated to refine targeting criteria for relief distribution and to feed into the multi-sectoral assessments under the Emergency Appeal (MDRCU013).</p>
Activation Of Contingency Plans	<p>The Cuban Red Cross (CRC) activated its national and provincial contingency plans in coordination with the National Civil Defense immediately after the “alarm phase” was declared on 27 October 2025.</p> <p>All 183 provincial and municipal branches were placed on alert, and emergency committees were activated to coordinate evacuation, relief, and communication measures.</p> <p>Early warning messages and preparedness advisories were disseminated to communities through local radio, social networks, and Red Cross volunteers, in alignment with Civil Defense guidance.</p> <p>Evacuation support: CRC volunteers assisted in the preventive evacuation of over 2,300 people from high-risk coastal and low-lying areas, ensuring safe transfer to collective centres and shelters. CRC volunteers also distributed approximately 500 pre-positioned kits.</p>

IFRC Network Actions Related To The Current Event

Secretariat	<p>The IFRC Latin Caribbean Country Cluster Delegation (CCD) in Santo Domingo has maintained continuous contact with the Cuban Red Cross Headquarters since the activation of the national alarm phase on 27 October 2025.</p> <p>A dedicated operations coordination cell was established within the CCD to support the CRC with situational monitoring, operational guidance, and DREF preparation.</p> <p>The Regional Office for the Americas (ARO) in Panama has been providing technical and strategic support across sectors including Disaster and Crisis, Health and Care, Logistics and Supply Chain, PMER, Information Management, CEA, and PGI.</p> <p>The IFRC Secretariat participated in daily coordination calls with the CRC, Civil Defense, and relevant ministries to consolidate damage information and ensure alignment with national priorities.</p> <p>The Emergency Appeal MDRCU013 (Cuba – Hurricane Melissa) was launched on 30 October 2025, establishing a Federation-wide coordination framework and enabling the mobilisation of international support for a two-year multi-sector response.</p> <p>The IFRC Regional Logistics Unit (RLU) in Panama has initiated planning for the</p>
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	<p>replenishment of pre-positioned NFI stocks and the potential deployment of surge logistics personnel to Cuba, in coordination with CRC logistics teams.</p> <p>The Surge Desk and Global Humanitarian Services & Supply Chain Management Department have been alerted for rapid mobilisation if operational scale-up is required.</p> <p>The IFRC Communications and Public Engagement team has supported CRC with visibility materials, key messaging, and dissemination of humanitarian information at global and regional levels.</p> <p>Deployment of the Disaster Risk Management Coordinator to Cuba in order to support the Cuban Red Cross during the first two weeks of the emergency.</p>
Participating National Societies	<p>Although no Partner National Societies have a permanent presence in Cuba, the IFRC has shared situation updates and briefings with interested PNS, facilitating potential in-kind or financial contributions through the regional coordination channels.</p> <p>China Red Cross donated 1,000 hygiene kits, which the Cuban Red Cross had pre-positioned and will deliver to Granma Province. Swiss Red Cross is coordinating with the National Society and the IFRC to implement WASH interventions.</p>

ICRC Actions Related To The Current Event

The International Committee of the Red Cross (ICRC) continues its collaboration with the CRC on Restoring Family Links (RFL) and International Humanitarian Law (IHL) promotion, and has supported the activation of RFL services for families separated during evacuations.

The IFRC and ICRC regional offices maintain a Movement Coordination mechanism to ensure coherence in messaging, resource mobilisation, and engagement with national authorities.

Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	<p>The Government of Cuba, through the National Civil Defense System (Defensa Civil de Cuba), has led a comprehensive, centrally coordinated emergency response since the approach of Hurricane Melissa.</p> <p>Preparedness and Early-Warning</p> <p>On 25 October 2025, following forecasts from the National Meteorological Institute (INSMET) and the National Hurricane Center (NHC), Civil Defense activated the information and alert phases, escalating to the alarm phase on 27 October for the eastern provinces.</p> <p>Over 735,000 people were preventively evacuated from coastal and low-lying areas to collective centres, schools, and relatives' homes.</p> <p>Public information campaigns were disseminated nationwide through radio, television, and community networks, advising families on evacuation procedures, storm preparedness, and health precautions.</p> <p>Key infrastructure, crops, and livestock were secured in advance; schools and ports were closed; and transport and fuel distribution were temporarily suspended to facilitate emergency operations.</p>



Response and Immediate Relief

Provincial and municipal Civil Defense councils mobilised rapid-response brigades for search and rescue, debris clearance, and road reopening.

Health authorities (Ministry of Public Health – MINSAP) deployed medical teams, ensured the continuity of essential services, and activated vector-control brigades to reduce the risk of arboviral disease transmission.

The Ministry of Construction (MICONS) began assessing and stabilising damaged housing structures and coordinated the use of local materials for temporary shelter solutions.

The Ministry of Energy and Mines and the National Electric Union (UNE) launched emergency repair operations to restore electricity to critical institutions and affected communities.

Water-supply companies under the National Institute of Hydraulic Resources (INRH) mobilised technical teams to clean and rehabilitate community aqueducts and reservoirs affected by flooding.

UN or other actors

Under the national response plan, the Government of Cuba is working in close collaboration with the United Nations System (UNETE), PAHO/WHO, and the IFRC, ensuring harmonised actions in health, logistics, and humanitarian assistance. CERF Rapid Response allocation was approved in late October 2025 for Hurricane Melissa. UN agencies—WFP, UNICEF, WHO/PAHO, FAO, and UNDP—are supporting government-led efforts with anticipatory and immediate life-saving assistance, including evacuation support; pre-positioning and distribution of essential supplies (food, water, hygiene items); critical health and WASH interventions; temporary shelter and urgent repairs; and logistics and coordination. Priority support targets the most affected provinces: Santiago de Cuba, Guantánamo, Holguín, Granma, Las Tunas, and Camagüey.

Are there major coordination mechanism in place?

Cuba has a well-established national coordination structure for disaster preparedness and response, led by the National Civil Defense (Defensa Civil de Cuba) under the Council of State. This mechanism integrates all ministries, provincial and municipal governments, and key national institutions — including the Cuban Red Cross (CRC) as an auxiliary to the public authorities — into a unified system for risk management and emergency operations.

National Coordination:

The National Civil Defense Headquarters coordinates the overall emergency response through its National Emergency Operations Centre (EOC). It convenes daily meetings with sectoral ministries (Health, Construction, Energy and Mines, Hydraulic Resources, Agriculture, Transport, and Interior) to plan, monitor, and report on emergency actions. The CRC participates as a standing member of the national coordination platform, contributing to planning, data sharing, and community-level implementation.

Provincial and Municipal Coordination:

Each affected province and municipality has an Emergency Management Council chaired by local government authorities, ensuring the vertical integration of response measures. These councils oversee search and rescue, evacuations, logistics, and initial damage assessments in collaboration with CRC provincial branches.

Health and WASH Coordination:

The Ministry of Public Health (MINSAP) leads the health sector response, supported by the CRC, PAHO/WHO, and local health brigades, focusing on disease surveillance, vector control, and access to basic health services. The National Institute of Hydraulic Resources (INRH) leads WASH coordination, working jointly with CRC and municipal water enterprises to restore supply systems.

International and Humanitarian Coordination:

The United Nations Emergency Technical Team (UNETE), led by the Resident Coordinator's Office (RCO) and supported by OCHA, has been activated to align the efforts of UN agencies (PAHO/WHO, WFP, UNDP, UNICEF, UNFPA, FAO, and others). The IFRC, through its Latin Caribbean Country Cluster Delegation (CCD) and the Cuban Red Cross, participates actively in this platform, ensuring complementarity between national and international humanitarian actions.

Red Cross Red Crescent Movement Coordination:

The IFRC, CRC, and ICRC maintain a Movement coordination mechanism to harmonise operational planning, communication, and



advocacy. This ensures adherence to Movement principles, coherent messaging, and alignment with national priorities.

Through these interconnected mechanisms, the response to Hurricane Melissa benefits from strong national leadership, inter-institutional collaboration, and alignment with international humanitarian coordination frameworks, ensuring efficiency, complementarity, and accountability.

Needs (Gaps) Identified



Shelter Housing And Settlements

Hurricane Melissa caused severe and widespread housing destruction, particularly in the provinces of Santiago de Cuba, Guantánamo, Holguín, Granma, Las Tunas, and Camagüey, where nearly one million homes were reported damaged and around 200,000 houses were completely or partially destroyed in Santiago de Cuba alone.

Strong winds and heavy rainfall caused the collapse of roofs and walls, extensive flooding inside dwellings, and loss of household belongings such as bedding, kitchen items, and clothing. Many affected families are now staying in temporary collective shelters, schools, or with relatives, often without basic items to meet daily needs.

Identified Needs:

Shelter assessment

Emergency shelter support: tarpaulins, shelter toolkits, ropes, and nails to conduct temporary repairs and protect damaged homes.

Essential household items (NFIs): mattresses, blankets, bed linen, kitchen sets, buckets, and solar lamps to ensure minimum living conditions and safety during power cuts.

Protection from environmental conditions: materials to secure temporary shelters and reduce exposure to wind, rain, and vector breeding.

Safe shelter awareness: community guidance on Build Back Safer practices to minimise future risks during reconstruction.

Restoring safe shelter and providing basic household items are critical to safeguarding health, dignity, and protection for displaced and affected families. The distribution of NFIs will help stabilise living conditions and prevent exposure-related health risks while recovery and reconstruction efforts scale up under the Emergency Appeal.



Health

The hurricane compounded an already critical public health situation due to a nationwide arboviral outbreak (dengue, chikungunya, and Oropouche viruses) declared by MINSAP in October 2025. Flooding and stagnant water have intensified mosquito breeding and increased the risk of disease spread. Damage to health facilities, pharmacies, and cold chain systems, combined with ongoing power and fuel shortages, has limited access to essential health services and medicines.

Identified Needs:

Essential medicines and medical supplies: replenishment of priority drugs such as antipyretics, antibiotics, antihypertensives, insulin, and oral rehydration salts, as well as first-aid kits and wound care materials.

Support to health facilities: provision of small-scale medical modules and solar-powered backup systems for community health posts.

Disease prevention: vector-control materials (larvicides, sprayers, protective gear) and information materials for community-led prevention.

Psychosocial support: mobilisation of volunteers trained in First Aid and PSS to assist affected families and responders.

Public health messaging: dissemination of risk-communication materials through local radio and community networks to promote hygiene, prevention, and early treatment-seeking behaviour.



Health needs are acute due to the dual impact of physical injuries, epidemic risk, and loss of access to medicines. The immediate provision of essential drugs and medical supplies is vital to maintain the continuity of care, prevent disease outbreaks, and reduce morbidity among affected populations. Coordinated actions with MINSAP and PAHO/WHO will ensure complementarity and avoid duplication of support.



Water, Sanitation And Hygiene

Flooding, power outages, and landslides have severely disrupted water supply systems and sanitation networks, particularly in rural and coastal communities. The National Institute of Hydraulic Resources (INRH) reports that nearly 450,000 people temporarily lost access to safe water in the provinces of Santiago de Cuba, Guantánamo, and Holguín. Many water tanks and reservoirs were contaminated by debris, and households lack sufficient means to treat or store water safely.

Identified Needs:

Access to safe water: rehabilitation and cleaning of water systems and wells in coordination with local water authorities.

Household water storage and treatment: distribution of jerrycans, buckets, and water purification tablets or chlorine.

Hygiene materials: soap, detergent, sanitary pads, and cleaning supplies to prevent disease transmission.

Hygiene promotion: community awareness on safe water handling, handwashing, and waste disposal to reduce diarrhoeal and vector-borne disease risks.

WASH needs are directly linked to the health risks and poor living conditions resulting from the hurricane and ongoing arboviral outbreak. Ensuring access to safe water and hygiene items will significantly reduce the risk of dengue, diarrhoea, and skin infections. These interventions will complement the health and shelter components of this DREF.

Any identified gaps/limitations in the assessment

The current assessment data remain preliminary and evolving, as access to several affected areas continues to be constrained by damaged roads, collapsed bridges, and fuel shortages. Communication interruptions and extended power outages have limited real-time information sharing between provincial and national levels. While the Cuban Red Cross (CRC) has conducted rapid assessments jointly with Civil Defense and local authorities, detailed household-level verification is still in progress and data are largely based on aggregated figures provided by municipal councils.

In the health sector, the availability of updated information on medical supply stocks and disease incidence remains limited, particularly from isolated rural health posts. In WASH, the extent of contamination of water systems and sanitation infrastructure has not yet been fully quantified. The absence of disaggregated data (sex, age, disability) also limits the precision of vulnerability profiling at this early stage.

To address these gaps, the CRC is deploying additional assessment and information-management teams to priority provinces (Santiago de Cuba, Guantánamo, Holguín, and Granma) and coordinating with MINSAP, INRH, and the National Civil Defense to harmonise data and complete detailed sectoral assessments. Continuous triangulation of information with UNETE, PAHO/WHO, and WFP will ensure a more comprehensive understanding of humanitarian needs as access improves.

Operational Strategy

Overall objective of the operation

To provide life-saving assistance and essential relief support to people affected by Hurricane Melissa in eastern Cuba by addressing their immediate needs in shelter, household items, safe water, hygiene, and access to basic health care and medicines.

The operation aims to stabilise living conditions, reduce health risks, and preserve the dignity and wellbeing of approximately 7,260 people (2,200 households) in the most affected provinces of Santiago de Cuba, Guantánamo, Holguín, and Granma.



Operation strategy rationale

This DREF allocation provides rapid kick-off funding that enables the Cuban Red Cross to deliver immediate, life-saving humanitarian assistance while the overall response continues to be developed and adapted based on emerging needs. The DREF constitutes an integral part of the IFRC's collective response, ensuring timely action while additional resources are mobilised through complementary funding mechanisms as required. It does not represent a separate phase but forms part of the same coherent response strategy led by the National Society, in line with IFRC's localisation commitments and the Emergency Response Framework and targets the most urgent needs identified in initial assessments.

1. Emergency shelter and non-food items,
2. Access to safe water and hygiene, and
3. Availability of essential medicines and basic health services.

The operation targets approximately 7,260 people (2,200 households) in the provinces of Santiago de Cuba, Guantánamo, Holguín, and Granma—those most severely impacted by wind damage, flooding, and infrastructure collapse.

Priorities and Justification

1. Shelter and NFIs: Many families lost roofs, furniture, and personal belongings. Distributing emergency shelter materials (tarpaulins, toolkits, ropes) and essential household items (mattresses, blankets, kitchen sets, solar lamps) will immediately improve safety, protection, and dignity while enabling basic household recovery.

2. WASH: Access to safe water and sanitation remains disrupted. Providing water-treatment tablets, water tanks, menstrual hygiene kits and hygiene kits will reduce the risk of diarrhoeal and vector-borne diseases that typically follow major floods.

3. Health and Medicines: Damaged health facilities and power outages have limited access to essential drugs and increased disease transmission risks. Replenishing priority medicines and medical supplies, along with supporting MINSAP-led community health and vector-control campaigns, will help prevent outbreaks and ensure continuity of care.

These priorities were selected because they address immediate survival and protection needs.

Implementation Modality

Assistance will be provided in-kind, given the absence of cash-transfer mechanisms in Cuba, and will consist mostly of pre-positioned relief items mobilized from the IFRC Logistics Hub in Panama. Distribution will rely on the CRC's existing logistics and volunteer network, in coordination with the National Civil Defense and local authorities to ensure transparency and equitable targeting. Community feedback mechanisms (CEA) will guide adjustments during implementation, while PGI standards will ensure that vulnerable groups—such as women-headed households, older people, and persons with disabilities—receive adequate support.

The strategy takes into account:

- Access limitations due to damaged transport networks and fuel shortages, requiring the prioritisation of nearby provinces first.
- Electricity and communication disruptions, addressed through the use of solar-powered equipment and radio communication at branch level.
- Public-health risks from the arboviral outbreak, which heighten the urgency of WASH and health interventions.
- Strong national coordination mechanisms, ensuring complementarity with government and UN actions and efficient use of limited resources.

Expected Outcomes

By focusing on relief distribution, health protection, and basic service continuity, the operation will:

- Restore minimum living conditions for the most vulnerable households;
- Prevent disease outbreaks and reduce morbidity through access to medicines and hygiene supplies;
- Strengthen the Cuban Red Cross's operational readiness for continued response under the Emergency Appeal framework.

This strategic approach ensures that DREF resources are used efficiently to address immediate humanitarian priorities, bridge the gap before longer-term funding becomes available, and reinforce the National Society's capacity to respond to future climate-related and health emergencies.



Targeting Strategy

Who will be targeted through this operation?

This DREF operation will target approximately 2,200 households, equivalent to around 7,260 people, based on the Cuban average household size of 3.3 persons. The focus will be on families whose homes and essential household assets were destroyed or severely damaged by Hurricane Melissa in the eastern provinces of Santiago de Cuba, Guantánamo, Holguín, and Granma.

Targeting Logic

The target figure was established through joint analysis by the Cuban Red Cross (CRC) and the National Civil Defense, considering:

- The overall scale of impact (nearly one million homes damaged nationwide).
- The limited accessibility and logistical constraints in the most affected areas.
- The available DREF resources (CHF 1 million) and operational capacity for rapid deployment.
- The need to prioritise the most vulnerable households through rapid, principled humanitarian action as part of the overall response effort.

The selected target represents the highest-impact population segment that the CRC can reach within the timeframe and scope of this DREF while ensuring quality, accountability, and adherence to Red Cross principles.

Target Groups

The operation will prioritise households meeting one or more of the following criteria:

- Families whose homes were totally destroyed or suffered major roof loss, leaving them exposed to the elements.
- Female-headed households and single caregivers with dependent children.
- Older persons living alone or caring for dependents.
- Persons with disabilities or chronic health conditions requiring ongoing medication or care.
- Families hosting evacuated or displaced persons who have increased vulnerability due to overcrowding.
- Low-income households that have lost essential household items and have no immediate means of recovery.

Vulnerability and Inclusion Approach

Targeting will be conducted in coordination with Civil Defense, municipal authorities, and local health and social protection institutions to ensure transparency and avoid duplication. Community Engagement and Accountability (CEA) mechanisms—such as public information boards, community meetings, and feedback channels—will allow people to understand the selection criteria and express concerns or complaints.

The CRC will apply Protection, Gender and Inclusion (PGI) standards to guarantee equitable access to assistance. Volunteer teams will ensure that women, older people, and persons with disabilities can safely access distributions and that assistance points are adapted to local conditions (ramps, shade, seating).

Although Cuba does not currently host significant migrant or refugee populations, the CRC remains committed to its humanitarian mandate of impartiality and will assist any person in need, regardless of status or origin, if encountered within affected communities.

Geographical Targeting

Priority provinces and municipalities will be selected based on damage severity, accessibility, and coordination with Civil Defense authorities. Initial operations will concentrate on Santiago de Cuba and Guantánamo, followed by Holguín and Granma, depending on assessment findings and logistical feasibility.

Explain the selection criteria for the targeted population

The Cuban Red Cross (CRC) will apply clear, transparent, and vulnerability-based selection criteria to ensure that assistance reaches those most severely affected and least able to recover without support. These criteria were defined jointly with the National Civil Defense, local authorities, and community representatives, based on initial damage assessments and the nature of Hurricane Melissa's impact.

Rationale and Targeting Logic

The operation prioritizes households whose homes and livelihoods were destroyed or severely damaged by Hurricane Melissa and who



face compounded vulnerabilities due to age, health, gender, or socio-economic status. Given the limited timeframe and funding available under the DREF (CHF 1 million), the selected caseload of 2,200 households represents those with the most urgent humanitarian needs within the broader affected population.

Targeting is guided by:

- Severity of impact: prioritising communities with extensive structural damage, flooding, or loss of household assets.
- Vulnerability profile: ensuring that families with limited coping capacity are prioritised over those with stronger recovery options.
- Accessibility and safety: focusing on locations that can be reached quickly and safely to enable timely life-saving assistance.
- Complementarity: avoiding duplication with government relief and UN partner interventions, ensuring CRC support fills critical gaps.

Primary Selection Criteria

Households meeting one or more of the following conditions will be prioritized:

1. Destroyed or severely damaged dwellings—families whose homes are uninhabitable or who lost roofing and essential household assets.
2. Displaced households living in temporary shelters, schools, or with host families due to unsafe housing conditions.
3. Female-headed households or single caregivers responsible for children or dependent relatives.
4. Older persons (60+) living alone or caring for dependents.
5. Persons with disabilities or chronic health conditions who require specific care or regular medication.
6. Families with children under five, pregnant or lactating women, or members with special nutritional or health needs.
7. Low-income or socially marginalized households lacking access to state-supported reconstruction materials or assistance.

Inclusion of Vulnerable Groups

The CRC will ensure that assistance is delivered impartially and that Protection, Gender and Inclusion (PGI) standards are applied throughout implementation. This includes:

- Mapping and identifying households facing multiple vulnerabilities (e.g., disability, age, gender) through local committees and health networks.
- Ensuring equal access to distribution sites, with adaptations for people with reduced mobility.
- Providing safe and dignified assistance environments, with separate waiting areas and privacy for women and older persons where possible.
- Engaging community leaders, women’s representatives, and youth volunteers to validate targeting lists and mitigate exclusion risks.
- Monitoring the inclusion of vulnerable groups through Community Engagement and Accountability (CEA) mechanisms such as feedback boxes, help desks, and community meetings.

Consideration of Specific Context

While Cuba does not host significant migrant or refugee populations, the CRC will apply its Fundamental Principles of impartiality and humanity to assist any person in need encountered within the affected areas, regardless of legal or social status.

Through this inclusive and community-driven approach, the operation will ensure that life-saving relief items and medicines are delivered to those facing the greatest hardship and least capacity to recover, thereby upholding accountability, transparency, and equity in humanitarian assistance.

Total Targeted Population

Women	2,700	Rural	25%
Girls (under 18)	2,460	Urban	75%
Men	1,200	People with disabilities (estimated)	5%
Boys (under 18)	900		
Total targeted population	7,260		



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?	Yes
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
Volunteer Fatigue and Safety Risks	<ul style="list-style-type: none"> - Rotate teams and ensure adequate rest, hydration, and food. - Provide protective equipment, insurance coverage, and psychosocial support to all volunteers. - Reinforce security protocols and supervision for field teams, particularly in debris-heavy or flood-prone areas.
Economic and Supply Chain Volatility	<ul style="list-style-type: none"> - Pre-identify multiple suppliers and use framework agreements through IFRC and CRC procurement channels. - Maintain a contingency reserve within the budget for inflation and exchange-rate adjustments. - Prioritise essential life-saving items for procurement in the initial phase.
Access and Logistics Constraints	<ul style="list-style-type: none"> - Prioritise accessible municipalities in the initial phase while coordinating with Civil Defense for debris clearance and safe routes. - Use CRC's existing branch-based distribution system to decentralise relief delivery. - Coordinate with the Ministry of Transport and local authorities for prioritised fuel allocation for humanitarian operations. - Utilise pre-positioned stocks where possible and plan staggered deliveries to reduce transport pressure.
Disruption of Electricity and Communication	<ul style="list-style-type: none"> - Install solar panels and power banks in provincial branches and warehouses to ensure continuous operation. - Strengthen radio communication systems for field coordination. - Schedule redundant reporting channels (radio, WhatsApp, and paper forms) to ensure data continuity.
Public Health Risks and Disease Outbreaks	<ul style="list-style-type: none"> - Integrate vector-control and hygiene promotion campaigns with NFI distributions. - Coordinate with MINSAP and PAHO/WHO for epidemiological surveillance and early detection. - Distribute mosquito nets, repellents, and cleaning supplies to reduce exposure. - Ensure availability of basic medicines and first aid supplies in targeted areas.



Logistical Delays in International Procurement	<ul style="list-style-type: none"> - Use locally available materials and existing CRC stocks wherever feasible. - Leverage IFRC's Regional Logistics Unit (RLU) in Panama to pre-plan procurement, documentation, and supplier vetting. - Maintain continuous communication with MINCEX (Ministry of Foreign Trade and Investment) and Civil Defense for customs facilitation.
Reputational and Coordination Risks	<ul style="list-style-type: none"> - Apply transparent targeting criteria and inform communities of assistance scope and limitations through CEA activities (radio, community meetings, posters). - Coordinate closely with Civil Defense, UNETE, and local authorities to harmonise coverage. - Maintain consistent public communication and visibility highlighting CRC's auxiliary role.

Please indicate any security and safety concerns for this operation:

The overall security environment in Cuba remains stable, and there are no significant threats of violence or civil unrest affecting humanitarian operations. However, the post-hurricane context presents several operational safety challenges that must be carefully managed to protect volunteers, staff, and beneficiaries.

Key Security and Safety Risks

1. Environmental and Physical Hazards

- Flooded roads, landslides, debris, and collapsed structures pose risks of injury, vehicle accidents, or isolation of field teams.
- Some areas remain partially inaccessible due to damaged bridges and unstable terrain.

2. Infrastructure and Energy Disruptions

- Extended power outages and poor lighting increase accident risks during night-time work or distributions.
- Limited telecommunications can delay coordination or emergency contact in the field.

3. Health and Sanitation Risks

- Exposure to vector-borne diseases (dengue, chikungunya, Oropouche) and water-borne infections remains high due to stagnant water and inadequate waste disposal.
- Risk of injuries or contamination during debris removal and hygiene activities.

4. Operational Fatigue and Psychological Stress

- Volunteers and staff face long working hours and emotionally demanding conditions that can lead to exhaustion or stress.

5. Road and Transport Safety

- Fuel scarcity, damaged roads, and heavy traffic of emergency vehicles increase the likelihood of transport delays and minor accidents.

Has the child safeguarding risk analysis assessment been completed?

No

Planned Intervention



Shelter Housing And Settlements

Budget: CHF 360,609

Targeted Persons: 7,260

Indicators

Title	Target
# of families reached with household items	2,200
# of people that received shelter technical guidance	2,200



Priority Actions

- Procurement and distribution of 2,200 Kitchen sets
- Procurement and distribution of 4,400 solar lamps
- Procurement and distribution of 300 Sleeping kits
- Procurement and distribution of 2,200 Shelter Tool Kits
- Mobilization of a Charter flight for the immediate transport of aid for 500 families
- Educational sessions on use of kits, safe shelters and build back better practices



Health

Budget: CHF 213,000

Targeted Persons: -

Indicators

Title	Target
# of provincial health facilities receiving procured medicines and medical supplies.	4

Priority Actions

- Procurement of medicines and medical supplies as requested officially by MINSAP



Water, Sanitation And Hygiene

Budget: CHF 336,519

Targeted Persons: 7,260

Indicators

Title	Target
# of families reached with hygiene kits	2,200
# of women and girls of reproductive age receiving menstrual hygiene kits and information materials.	700
# of reached with household water-disinfection items to ensure safe drinking water	2,200
# of mosquito nets procured and delivered under MINSAP's vector-control plan.	4,400
# families reached through community health and vector control campaigns	2,200

Priority Actions

- Procurement and distribution of 2,200 Water Tanks (33 Gallons)
- Procurement and distribution of 2,200 Hygiene kits
- Procurement and distribution of 700 Menstrual Hygiene kits
- Procurement and distribution of 198,000 Aquatabs for 2,200 families
- Procurement and distribution of 4,400 Mosquito Nets as part of The National Health System Strategy (2 per family).



Secretariat Services

Budget: CHF 48,458

Targeted Persons: -

Indicators

Title	Target
# of field monitoring visits conducted by the Latin Caribbean CCD to oversee DREF implementation.	6
# of surge personnel deployed for operational coordination and technical support.	1
# of ARO technical support and monitoring missions conducted.	2

Priority Actions

- 6 Monitoring visits from the Latin Caribbean CCD
- Deployment of an Ops. Manager for 2 months under IFRC Surge mechanism based in the Dominican Republic with scheduled visits to Cuba
- 2 Monitoring visits from the Americas Regional Office



National Society Strengthening

Budget: CHF 39,405

Targeted Persons: -

Indicators

Title	Target
Number of electric or solar generators procured and installed in affected CRC branches.	4
# of volunteer mobilized for response activities	500

Priority Actions

- Purchase of Electric/Solar generators as back up for affected branches

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

A total of 1,300 volunteers will participate in this operation (Granma: 300, Santiago de Cuba: 300, Guantánamo: 300, and Las Tunas: 400). Of these, 1,120 volunteers will engage in direct humanitarian activities, including the distribution of non-food and relief items (kitchen sets, hygiene kits, solar lamps, water tanks, mosquito nets, and shelter toolkits), as well as community hygiene promotion, vector-control campaigns, and basic psychosocial support.

The remaining 180 volunteers will provide logistical support, including loading and unloading of relief items, warehouse management, transportation, and assistance during distributions in coordination with local authorities and Civil Defense structures.



Additionally, 32 staff members from the Cuban Red Cross (CRC) will be involved in the implementation and technical oversight of the operation.

At the National Headquarters, four staff members will coordinate key functions — Secretary General, Operations, Health, Logistics, and Finance.

In the four targeted provinces, seven staff members per province will participate — three at the provincial level and four at the municipal level — ensuring technical supervision, coordination, and administrative follow-up.

Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

The Cuban Red Cross (CRC) volunteer network reflects a broad diversity of gender, age, and background consistent with the communities it serves. Volunteers come from both urban and rural areas, including students, health workers, and community leaders, which ensures cultural and linguistic proximity to affected populations.

Women represent approximately 48 per cent of active volunteers nationwide, and in the eastern provinces targeted by this operation, women and youth play key roles in community mobilisation, health promotion, and hygiene-awareness activities. Many female volunteers also serve as focal points for Protection, Gender and Inclusion (PGI) and Community Engagement and Accountability (CEA) initiatives at branch level.

Some gaps remain, particularly in achieving greater representation of older adults and persons with disabilities among active volunteer teams, as well as ensuring balanced gender participation in traditionally male-dominated areas such as logistics and rescue services.

To address these, the CRC:

- Actively promotes equal participation of women and youth in all operational sectors, including logistics and coordination.
- Integrates PGI and diversity training in volunteer induction and refresher sessions.
- Engages community leaders, schools, and local health networks to recruit volunteers from under-represented groups.
- Ensures that all training and operational materials are inclusive and accessible, using clear language and culturally appropriate communication.

Through these actions, the Cuban Red Cross seeks to maintain a volunteer workforce that is representative, inclusive, and sensitive to the diverse needs of the people it serves, strengthening trust and ensuring that assistance is delivered with equity and respect.

Will surge personnel be deployed? If yes, please provide the role profile needed.

Yes

One Operations Coordinator (Roving) will be deployed under the IFRC Surge mechanism to support the implementation and coordination of this DREF operation.

The deployment is planned for a period of three months, although shorter availability may be considered depending on operational needs and the evolution of the response. The position will be based in Santo Domingo, Dominican Republic, with regular travels to Cuba upon request to provide in-country technical and coordination support to the Cuban Red Cross (CRC) and the Latin Caribbean Country Cluster Delegation (CCD).

The Operations Coordinator will ensure close coordination between the CRC, CCD, and the Americas Regional Office (ARO), supporting planning, implementation, monitoring, and reporting, as well as surge preparedness for the broader Federation-wide response under the Emergency Appeal (MDRCU013).

Language requirements: Fluency in Spanish (spoken and written) is mandatory, while English proficiency is considered an asset.

Profile: The position follows the standard IFRC Operations Coordinator role profile, with experience in emergency operations management, coordination, and support to National Societies.

If there is procurement, will it be done by National Society or IFRC?

Coordination has been maintained with the Regional Logistics Unit since the beginning of the DREF formulation to ensure that all the articles, items, kits, etc., included in the action plan can be delivered taking into account the time taken by the shipping companies and



the time the Cuban Government grants import permits. The above taking into account that all purchasing processes will be done through the IFRC and following all the processes and protocols.

Based on recent operational experiences in Cuba, it has been observed that humanitarian goods typically take 1.5 to 3 months to reach the intended beneficiaries from the moment the Logistic requisition is submitted for processing. Air Freight is being considered in order to mitigate long times of delivery by sea.

How will this operation be monitored?

The Cuban Red Cross (CRC), with the technical and operational support of the IFRC Latin Caribbean Country Cluster Delegation (CCD) and the Americas Regional Office (ARO), will ensure that this operation is closely monitored through a combination of regular field visits, systematic data collection, and structured reporting.

Monitoring and Supervision Structure

- The CRC National Headquarters will coordinate overall implementation, supervision, and data consolidation from the four targeted provinces (Santiago de Cuba, Guantánamo, Granma, and Las Tunas).
- Each provincial branch will designate a monitoring focal point responsible for tracking distributions, collecting beneficiary data, and reporting progress through standard IFRC templates.
- The CCD Operations Coordinator (Surge), based in Santo Domingo, will oversee operational progress, conduct technical field monitoring missions to Cuba, and provide continuous remote support to the CRC operations team.
- The CCD will conduct six monitoring visits, while the Americas Regional Office (ARO) will carry out two complementary field missions to provide technical backstopping and quality assurance in logistics, PMER, finance, and sectoral implementation.

Data Collection and Reporting

- Monitoring will be based on standard IFRC tools including distribution reports, warehouse tracking sheets, beneficiary lists, and post-distribution monitoring forms.
- Data will be collected using sex-, age-, and disability-disaggregated (SADD) indicators where feasible to ensure inclusive reporting.
- Operational Updates will be produced periodically and uploaded to the IFRC GO platform, providing analysis on progress, key achievements, and emerging challenges.
- A final report will summarise quantitative results, financial implementation, lessons learned, and recommendations for future operations.

Quality Assurance and Coordination

- Monitoring findings will be reviewed during regular coordination meetings between the CRC, CCD, and ARO to ensure compliance with IFRC standards and DREF procedures.
- The CCD PMER and Finance teams will support the CRC with financial monitoring, expenditure tracking, and narrative reporting to ensure efficiency, transparency, and accountability.

Please briefly explain the National Societies communication strategy for this operation

The Cuban Red Cross (CRC) will implement a targeted communication and visibility strategy to ensure accurate, timely, and transparent information about the operation. The main objectives are to:

1. Highlight the humanitarian impact of the operation and the role of CRC volunteers in assisting affected families.
2. Strengthen public trust and institutional visibility through clear, factual messaging on activities, achievements, and accountability.
3. Support coordination and advocacy efforts with national authorities, partners, and the media.

The CRC, in coordination with the IFRC Latin Caribbean Country Cluster Delegation (CCD) and the Americas Regional Office (ARO), will manage the production and dissemination of press releases, photos, and success stories for use on national and IFRC communication platforms.

Provincial branches will provide regular content—images, testimonies, and field updates—to ensure consistent messaging across all levels.

All external communications will follow the IFRC Communications Guidelines and the Fundamental Principles, ensuring that messaging remains neutral, humanitarian, and community-centred. Visibility materials (banners, vests, stickers) will be used in all distributions and field activities to reinforce the identity of the Cuban Red Cross and the IFRC.



Budget Overview



DREF OPERATION

MDRCU013 - Cuban Red Cross
Cuba: Hurricane Melissa

Operating Budget

Planned Operations	910,128
Shelter and Basic Household Items	360,609
Livelihoods	0
Multi-purpose Cash	0
Health	213,000
Water, Sanitation & Hygiene	336,519
Protection, Gender and Inclusion	0
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	0
Environmental Sustainability	0
Enabling Approaches	87,863
Coordination and Partnerships	0
Secretariat Services	48,458
National Society Strengthening	39,405
TOTAL BUDGET	997,990

all amounts in Swiss Francs (CHF)



Contact Information

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

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