



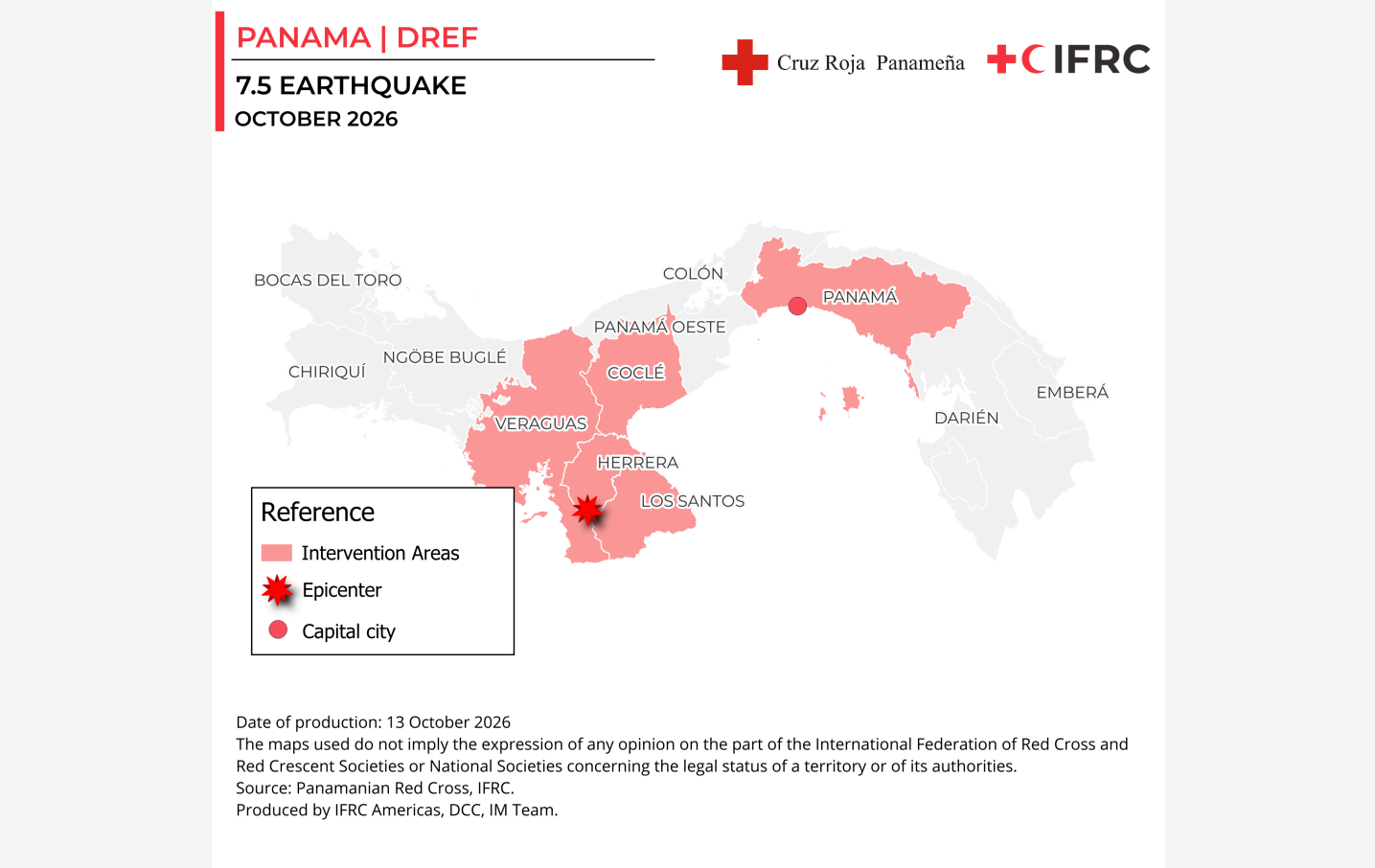
CRP assessing damage and providing assistance to a family in Los Santos.

Appeal: MDRPA023	Hazard: Earthquake	Country: Panama	Type of DREF: Response
Crisis Category: Orange	Event Onset: Sudden	DREF Allocation: CHF 608,726	
Glide Number: EQ-2026-000188-PAN	People Affected: 38,000 people	People Targeted: 4,075 people	
Operation Start Date: 16-10-2026	Operation Timeframe: 6 months	Operation End Date: 30-04-2027	DREF Published: 16-10-2026
Targeted Regions: Los Santos, Panama, Veraguas, Coclé, Herrera			

Description of the Event

Date of event

09-10-2026



Areas of intervention for earthquake response. October 2026

What happened, where and when?

On October 9, 2026, at 12:56 p.m. (local time), a magnitude 7.7 Mw earthquake affected Panama. According to the United States Geological Survey (USGS), the epicenter was located approximately 12 km west-southwest of Pitaloza Arriba, Herrera province, at a depth of 12.6 km, generating strong seismic movements perceived in much of the national territory and in areas of neighboring countries (1). The Institute of Geosciences of the University of Panama initially reported the event with a magnitude of 7.2 and a depth of 20 km, approximately 45 km west of Tonosí, Los Santos province (8).

After the main earthquake, an intense seismic sequence was recorded, with numerous events of magnitude greater than 5.0. According to the records of the Institute of Geosciences, on October 9 there were movements of magnitude 6.9 east of Coiba and 6.6 northwest of Tonosí. On October 12, another movement of magnitude 6.4 was recorded northeast of Coiba, while seismic activity continued on October 13 (8). The persistence of the aftershocks has increased the concern of the population, generated uncertainty about the safety of the affected structures and hindered the work of assessing damage and the continuity of some essential services. Panamanian Red Cross teams reported episodes of fainting, emotional crises and convulsions in students from Bocas del Toro, as well as families who remained outdoors and in need of psychological first aid in different locations (4).

According to SINAPROC's Official Statement No. 12, dated October 14, 2026, damage assessments and needs analysis identified 4,045 affected families, equivalent to 13,623 people. Of these, 879 families reported total loss of their homes, 926 moderate damage, 1,577 partial damage, and 663 minor or minor damage. The damage also includes educational and health infrastructure, public buildings, roads, bridges, and water supply systems. Assessments continue in the affected provinces and the figures remain subject to verification



and updating (9).

The earthquake had a particular impact on coastal communities on the Azuero Peninsula. In Isla Cañas, Los Santos province, approximately 300 people were evacuated preventively during the first hours after the earthquake, according to initial reports from the Panamanian Red Cross (4). As of October 12, OCHA reported that 193 displaced people from Isla Cañas remained in three makeshift accommodation points in Cañas (5). Subsequently, SINAPROC's balance sheet of October 14 identified 13 shelters set up in Los Santos, with 644 people housed. At the national level, 45 shelters were reported with 3,696 people housed, evidencing the need for temporary accommodation and humanitarian assistance for families who cannot safely return to their homes (9).

The impact on health infrastructure has led to interruptions in the provision of services and preventive evacuations of patients. According to SINAPROC's Official Statement No. 12, as of October 14, 22 health centers in Veraguas, four hospitals in Los Santos, three hospitals in Herrera, and two hospitals in Coclé were affected, in addition to damage to health facilities in other provinces (9). At the Santo Tomás Hospital, more than 40 patients were preventively evacuated from the old maternity ward due to structural damage (3, 5). The Panamanian Red Cross reports also document hospital evacuations, patient transfers, and the provision of temporary care spaces (4). These effects represent risks for the continuity of health services, particularly for the elderly, patients with chronic diseases, and people with mobility difficulties or access to health facilities.

Access to drinking water has also been affected by damage to supply systems. SINAPROC reported the persistence of interruptions in the supply of water, electricity, and telecommunications in Veraguas, as well as damage to storage tanks and fissures in a water treatment plant in Chiriquí (9). These conditions can temporarily compromise families' access to safe water, especially in communities with access restrictions and interrupted services. As part of the response, as of October 12, authorities had reported the transfer of 240 tons of water to supply communities and hospitals (2).

As a response measure, the national authorities activated emergency coordination and response mechanisms to support damage and needs assessments in the affected areas. On October 10, 2026, the Government of Panama declared a State of National Emergency through Cabinet Resolution No. 108, with the purpose of facilitating resource mobilization and response actions (7). The Panamanian Red Cross mobilized its local committees and response teams to provide first aid, pre-hospital care, psychological first aid, support for hospital evacuations, and humanitarian assistance, in coordination with SINAPROC, the Ministry of Health, and other competent institutions (4).

Due to the magnitude of the event, its relatively shallow depth, and the persistence of aftershocks, many communities remain under observation while sectoral assessments are completed. Uncertainty about the stability of some structures, coupled with the risk of new seismic movements, has led to preventive evacuations and the temporary stay of families outside their homes. The damage to homes, health facilities, water supply systems, educational centers, and road infrastructure shows humanitarian needs related to temporary housing, access to basic services, assistance to cover essential needs, continuity of health care, and mental health and psychosocial support. The figures remain preliminary and may be modified as the assessments of the authorities and the Panamanian Red Cross progress (5, 9).



CRP developed psychosocial support activities. El Pájaro, Macaracas.



CRP provided first aid and psychosocial support in Omar Park. Panama.



CEA Officer CRP explained backpack and family plan in Tu Mañana. CRP



Scope and Scale

The 7.7 Mw earthquake that occurred on October 9, 2026 generated far-reaching impacts in different provinces of Panama, due to its shallow depth and the intensity of the tremors recorded. According to estimates by the United States Geological Survey (USGS), approximately 4.6 million people were exposed to moderate to severe shaking levels in the modeled area, although this exposure does not equate to the number of people directly affected or requiring humanitarian assistance (1). According to the Pan American Health Organization/World Health Organization (PAHO/WHO), approximately 478,000 people reside in areas where the shaking reached very strong or higher levels, while about 41,000 are in areas where moderate to severe damage is expected, according to estimates in OCHA Situation Report No. 03 of October 12, 2026 (5).

UNICEF estimates that approximately 38,000 people, including 8,300 children, are in need of humanitarian assistance as a result of the earthquake. The greatest damage is concentrated in Veraguas, Los Santos, Herrera and Coclé, where damage to homes, health facilities, educational centers and essential infrastructure has generated needs for shelter, access to safe water, health care and protection (6). As of the morning of 12 October, more than 350 aftershocks had been recorded, which maintain the concern of the communities and hinder the evaluation and recovery of the affected services (5).

The preliminary damage reported by SINAPROC shows damage to homes, hospitals, health centers, educational centers, government buildings, churches, bridges, and roads, in addition to interruptions of basic services in multiple provinces. According to SINAPROC's Official Statement No. 12, dated October 14, 2026, damage assessments and needs analysis identified 4,045 affected families, equivalent to 13,623 people. Of these, 879 families registered total loss of their homes, 926 moderate damage, 1,577 partial damage, and 663 minor or minor damage (9). The Ministry of Education (MEDUCA) reported approximately 619 educational centers affected nationwide, including establishments that require structural and safety inspections before resuming school activities (9).

The provinces closest to the epicenter concentrate significant damage. According to the SINAPROC balance of October 14, in Veraguas 637 homes were reported affected and damage to nine bridges in the district of Soná; in Los Santos, 2,010 homes were affected and 6,175 people were affected; and in Coclé, 1,324 homes were affected and 4,703 people were affected. In Herrera, 831 homes were reported with moderate, partial or light damage and 153 with total damage, in addition to five communities cut off in sectors of Las Minas and Los Pozos (9). In the district of Tonosí, 11 townships remained without regular access to drinking water and electricity as of October 12, according to OCHA (5). Damage to roads, bridges and landslides continue to hinder access to certain communities. At the national level, OCHA had reported 16 bridges affected as of 12 October, representing a major constraint on transport, access to services and distribution of humanitarian assistance (5).

Temporary displacement is one of the main humanitarian consequences of the earthquake. According to SINAPROC, as of 14 October 2026, 3,696 people remained housed in 45 shelters nationwide (9). However, this figure does not necessarily include families who have sought accommodation with family or friends or those who continue to sleep rough for fear of aftershocks or due to damage to their homes (5). On Isla de Cañas, Los Santos province, approximately 300 people were evacuated preventively during the first hours after the earthquake (4). As of 12 October, OCHA reported that 193 displaced people from Isla de Cañas remained in three makeshift shelter points in Cañas, including children and infants. The identified needs include safe shelter, food, clothing, baby items, diapers, and repellents (5).

The impact on the health sector is significant. According to OCHA, as of October 12, 29 health facilities were reported affected and at least three health centers were out of operation (5). Several establishments have continued to provide care in tents, parking lots, and other temporary facilities, while structural evaluations are completed. According to SINAPROC, as of October 14, temporary care modules had been installed outside five hospitals and 83 health facilities had been evaluated (9). The Tonosí Hospital and the La Colorada Health Subcenter are among the establishments that moved their care to temporary spaces, while the Santo Tomás Hospital evacuated more than 40 patients from its former maternity ward and reorganized the care of its dialysis patients (5). These conditions create difficulties for the continuity of essential services, especially for the elderly, people with chronic diseases, pregnant women, people with disabilities, and patients with special medical needs. According to the balance consolidated by OCHA as of October 12, 27 people were injured, with no deaths or missing persons registered at that time (5).

The persistence of aftershocks, displacement, and the interruption of essential services have also increased mental health and psychosocial support needs. The Panamanian Red Cross reported episodes of emotional crises, fainting, and other manifestations of stress in the affected communities, as well as the provision of psychological first aid (4). UNICEF has warned of the protection needs of children, particularly in the face of displacement, interruption of school activities, and psychosocial effects. These conditions reinforce the need to provide differentiated support to children and adolescents, women, the elderly, and people with disabilities (5, 6). In addition, the SINAPROC balance of October 14 identified 547 people with disabilities and 50 pregnant women among the people evaluated, which shows the importance of considering their specific needs during the response (9).

Access to safe water and sanitation presents significant challenges in the most affected areas. Although OCHA reported that water treatment plants had resumed operation as of 12 October, the supply was still not reaching all households, schools, health facilities and shelters normally (5). In addition to the interruptions in Tonosí, OCHA identified irregular access to water in Las Minas, Los Pozos and Ocú, in Herrera, as well as specific needs for safe water, sanitation and hygiene items for displaced families on Isla de Cañas (5).



SINAPROC's Official Communiqué No. 12 confirmed that as of 14 October, interruptions in the water supply persisted in communities of Veraguas and damage to supply infrastructure in Chiriquí (9). These conditions can increase the public health risks associated with the consumption of unsafe water and difficulties in maintaining proper hygiene practices.

The livelihoods of affected families are also at risk. Damage to homes, shops, tourism infrastructure and roads, as well as disruptions to basic services, can temporarily affect economic activities, household incomes, and access to markets and essential services. Rural and coastal communities may face additional difficulties due to transport and connectivity restrictions. However, economic losses and their effects on livelihoods still require specific assessments to determine their magnitude (5, 9).

The seriousness of the emergency prompted the Government of Panama to declare a State of National Emergency on October 10, 2026, in order to facilitate the mobilization of resources and response actions to the needs of the population (7). The situation continues to evolve as the authorities, the Panamanian Red Cross, and other humanitarian actors complete damage and needs assessments, especially in rural and hard-to-reach communities. The magnitude of the damage, the interruption of essential services, temporary displacement, and health and protection needs show the need to maintain a coordinated humanitarian response, prioritizing households that face the greatest impact and barriers to accessing assistance.

Source Name	Source Link
1. United States Geological Survey (USGS). PAGER: M 7.7, 12 km WSW of Pitaloza Arriba, Panama. October 9, 2026, version 4.	https://earthquake.usgs.gov/earthquakes/eventpage/us6000u18k/executive#pager
2. SINAPROC, Official Statement No. 8, October 12, 2026	https://www.sinaproc.gob.pa/comunicado-oficial-8/
3. SINAPROC, Official Statement No. 7, October 11, 2026	https://www.sinaproc.gob.pa/comunicado-oficial-n-7/
4. Panamanian Red Cross, SITREP No. 01 and No. 02, October 9 and 10, 2026	https://ifrcorg.sharepoint.com/:f/s/IFRCSharing/IgDkq0M969NIQ4q9CyFOBFfhAcjq1gLQfsK4kjW-uFQd_cl?e=PXOM16
5. United Nations Office for the Coordination of Humanitarian Affairs (OCHA). Panama: Earthquake in Azuero and Veraguas. Situation Report No. 03. October 12, 2026, 2:30 p.m.	https://reliefweb.int/report/panama/panama-earthquake-azuero-veraguas-situation-report-no-03-12-october-2026-1430
6. United Nations Children's Fund (UNICEF). More than 8,000 children in need of humanitarian assistance following the earthquake in Panama. Published on 13 October 2026.	https://www.unicef.org/lac/comunicados-prensa/mas-de-8000-ninos-y-ninas-necesitan-asistencia-humanitaria-tras-terremoto
7. Republic of Panama, Cabinet Council. Cabinet Resolution of October 10, 2026, declaring a State of National Emergency. Official Digital Gazette No. 30631, October 10, 2026.	https://ifrcorg.sharepoint.com/:b/s/IFRCSharing/IQBncXgaqs-NQ5csYIIeEgMZASr3JlUriX7MHddLdJnLF60?e=xvVbLc
8. Institute of Geosciences, University of Panama. Seismic activity record from October 9 to 13, 2026.	https://sismosgeociencias.up.ac.pa/
9. National Civil Protection System (SINAPROC). Official Statement No. 12. Preliminary balance of damages caused by the earthquake of October 9, 2026. Panama, October 14, 2026.	https://www.sinaproc.gob.pa/comunicado-oficial-n-12/

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	No
Did it affect the same population group?	-



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:

-

Lessons learned:

The Panamanian Red Cross has not carried out Disaster Response Emergency Fund (DREF) operations related to earthquakes in recent years, it has implemented multiple DREF operations in response to emergencies caused by floods, river pollution, dengue outbreaks, population displacements, some of them MDRPA021, MDRPA022, MDRPA020, MDRPA019 which it has derived valuable lessons learned in terms of financial, administrative and operational management. Below are the main lessons learned for this operation:

Previous and recent experiences of earthquake response in other countries in the region have demonstrated the importance of rapid damage and needs assessments during the first hours of the emergency, especially in rural and hard-to-reach communities. Early identification of the most affected communities allows for more efficient targeting of humanitarian assistance and optimization of the use of resources. The active involvement of communities in the different phases of the response makes it possible to adapt actions to the real needs of the affected population and improve the relevance of assistance, in addition to the incorporation of a comprehensive response.

In addition, the need to continue strengthening the capacities of staff and volunteers through continuous processes of training, preparation and technical updating has been identified, in order to guarantee a safe and efficient response, in accordance with humanitarian standards, in addition to updating scenarios and anticipatory measures that allow us to be better prepared and make better decisions.

It has also highlighted the need to maintain effective coordination mechanisms between government institutions, the Panamanian Red Cross, local authorities and other humanitarian actors in order to avoid duplication, improve the exchange of information and ensure a complementary response based on the needs of the population.

Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level?	Yes
What was the risk level for Child Safeguarding Risk Analysis?:	HIGH RISK. The Panamanian Red Cross conducted the Child Protection Risk Analysis on August 21, 2026, within the framework of a previous DREF operation. The evaluation identified a high risk associated with direct work with children and adolescents, and a moderate organizational risk, considering the existing protection systems. The overall result was high risk, so it was recommended to develop a detailed action plan to strengthen child protection measures, follow-up, and monitoring.

Current National Society Actions

Start date of National Society actions

09-10-2026



Shelter, Housing And Settlements	The Panamanian Red Cross coordinates with national and local authorities to monitor the needs of people who have had to leave their homes due to structural damage or as a precaution against continuous aftershocks. It also carries out assessments of damage to homes and temporary housing conditions to guide assistance and early recovery actions. The National Society also participates in the care of temporarily displaced people in reception spaces.
Health	The Panamanian Red Cross maintains teams deployed for pre-hospital care, first aid, health evacuations and Mental Health and Psychosocial Support (MHPSS) actions in the affected provinces. In coordination with the Ministry of Health (MINSa) and other actors, it provides community support, patient transfers and care in areas impacted by the earthquake and aftershocks, in a context of damage to health facilities, including the Rural Hospital of Tonosí. Between October 10 and 14, MHPSS teams provided care to 285 people at 13 points of care in Los Santos, Herrera, Veraguas and Coclé, through community psychosocial support, psychological first aid and crisis intervention
Water, Sanitation And Hygiene	The Panamanian Red Cross has initiated multisectoral assessments with an emphasis on Water, Sanitation and Hygiene (WASH) to identify impacts on access to safe water, sanitation and basic services. Field teams collect information to update priority needs and support the planning of humanitarian actions related to water, hygiene and sanitation in affected communities.
Community Engagement And Accountability	The Panamanian Red Cross maintains Community Participation and Accountability (CEA) mechanisms that allow affected people to access information, express their needs, and provide feedback on the response. These include the institutional WhatsApp line "Matilde" (+507 6209-0221), through which communities can request information, report needs, make inquiries, and receive guidance on available services. Since the beginning of the emergency, this channel has collected information on humanitarian needs, requests for support, and inquiries related to donations and volunteering. These mechanisms are complemented by community assessments on the ground and a public communication strategy through radio, television, social networks and digital platforms. Through these channels, information is shared on the evolution of the emergency, ongoing response actions, and messages on prevention and preparedness for earthquakes and aftershocks. The information and feedback collected are analyzed and used to adapt the response to the priorities expressed by the affected communities. As part of this operation, listening and monitoring mechanisms will be strengthened through post-distribution surveys, ensuring that the opinions and experiences of the participants are incorporated into decision-making and continuous improvement of the response.
Coordination	The Panamanian Red Cross maintains its institutional Emergency Operations Center activated and participates in the national and provincial coordination mechanisms led by SINAPROC. It also maintains permanent communication with national authorities, humanitarian agencies and partners of the Movement for the exchange of information, the identification of priority needs and the coordination of response actions.
Assessment	Rapid assessment teams have been deployed in the affected provinces to collect information on damage to homes, infrastructure, livelihoods and urgent humanitarian needs. The National Society maintains the collection and verification of information through its affiliates and territorial teams, with an emphasis on shelter, health, WASH, protection and access to essential services.

IFRC Network Actions Related To The Current Event

Secretariat	The International Federation of Red Cross and Red Crescent Societies (IFRC), through the Cluster Delegation for Central America and the Regional Office for the Americas, has provided technical and operational support to the Panamanian Red Cross since the beginning of the emergency. The IFRC has made available to CRP an Operations Coordinator (personnel seconded by the Netherlands Red Cross) to support the coordination, planning and monitoring of the response, as well as the accompaniment of technical teams in health, logistics, communications, information management and PMER. It has also accompanied the preparation of an emergency advance request for CHF 100,000 and the formulation of the DREF operation, as well as the identification of complementary financing opportunities. In terms of logistics, the Panamanian Red Cross mobilized approximately 15 tons of humanitarian assistance from its pre-positioned reserves at the IFRC Humanitarian Logistics Center in Panama, destined for the provinces of Los Santos, Herrera and Veraguas. In addition, the IFRC has provided support in communication, emergency monitoring and information management, including updating IFRC GO and disseminating situation reports to facilitate coordination and decision-making.
Participating National Societies	The PNSs that support the Panamanian Red Cross are the Spanish Red Cross, Italian Red Cross, Swiss Red Cross. The Canadian Red Cross is supporting the National Society with funds for rapid procurement, tarpaulins and NFI for the Communities. The Panamanian Red Cross maintains coordination and permanent communication with the Participating National Societies (PNS) present in the country, which provide technical accompaniment and strategic support in different areas of institutional strengthening and risk management.

ICRC Actions Related To The Current Event

The ICRC provides technical advice on the Safer Access Framework, as well as on humanitarian advocacy and diplomacy, as part of the National Society's interaction with the country's authorities

Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	The Government of Panama is leading the response to the emergency through the National Civil Protection System (SINAPROC) and the National Emergency Operations

	Center (COEN), coordinating damage and needs assessments, evacuations, temporary emergency shelter, humanitarian assistance, and logistical operations in the affected areas. National response institutions, including the National Aeronaval Service (SENAN), support the transportation of humanitarian personnel and supplies, particularly to communities where damage to roads and bridges has restricted access. According to SINAPROC, no missing persons are reported as of Official Communiqué No. 5. The authorities reiterate the recommendations to avoid damaged structures, compromised bridges, landslides, and unstable roads, as well as to stay informed through official channels. SINAPROC, through the National Emergency Operations Center (COEN), continues to coordinate response actions, damage assessment, humanitarian assistance, and monitoring of secondary risks. The National Government maintains the deployment of security and emergency agencies and the competent sectoral institutions to support the affected people, evaluate the conditions of housing and infrastructure and restore access to essential services. The National Aeronaval Service (SENAN) maintains air transport operations to move bottled water and essential supplies to affected communities, including sectors of Tonosí, Soná and Mariato. In the field of international cooperation, logistical support from the United States Government is reported for the transport of supplies to affected communities. International assistance is also being mobilized. On October 10, the U.S. Embassy in Panama reported on the deployment of personnel and logistical support, including helicopter operations that transported approximately 2,000 pounds of food to Guararé and other affected communities, as well as support in the loading and transportation of bottled water. U.S. military aviation assets are also supporting the movement of emergency supplies to the affected areas of Azuero and Coclé. In addition, the Development Bank of Latin America and the Caribbean (CAF) announced a humanitarian contribution of USD 250,000 to support the national response. The Inter-American Development Bank (IDB) also announced the availability of up to USD 300 million in contingent financing and USD 500,000 in grant assistance to address urgent humanitarian needs, conduct damage assessments and support recovery planning. The Ministry of Foreign Affairs coordinates offers of international assistance with relevant government institutions. The Panamanian Red Cross maintains active coordination with SINAPROC and the relevant national authorities, while its local committees carry out damage and needs assessments and provide assistance in affected communities. The IFRC provides technical and operational support to the National Society, including the development of a coordinated response strategy.
UN or other actors	The Development Bank of Latin America and the Caribbean (CAF) announced a humanitarian contribution of USD 250,000 to support the national response. The Inter-American Development Bank (IDB) also announced the availability of up to USD 300 million in contingent financing and USD 500,000 in non-reimbursable assistance to address urgent humanitarian needs, conduct damage assessments and support recovery planning.

Are there major coordination mechanism in place?

The coordination of the response to the earthquake is being led by the Government of Panama through the National Civil Protection System (SINAPROC), in close coordination with provincial and municipal authorities, emergency corps, the Meritorious Fire Department of Panama, the National Police, the Ministry of Health (MINSa), the Ministry of Public Works (MOP), the Institute of Geosciences of the University of Panama and other technical entities responsible for damage assessment, seismic monitoring, evacuations and assistance to the affected population.

At the national level, the Emergency Operations Center (EOC) and SINAPROC's coordination structures facilitate the exchange of information, the consolidation of damage and needs reports, the mobilization of resources, and decision-making for the response. At the provincial and district levels, local authorities activated their risk management mechanisms to coordinate rapid assessments, preventive evacuations, the provision of temporary spaces, and the care of affected communities.

The Panamanian Red Cross, as an auxiliary to the public authorities in the humanitarian field, actively participates in the coordination spaces established by national and local authorities. The National Society is part of the Emergency Operations Center at the national level and maintains permanent communication with SINAPROC and other response actors for the exchange of information, the identification of priority needs and the planning of humanitarian assistance actions. It also coordinates with the International Federation of Red Cross and Red Crescent Societies (IFRC) for the analysis of the situation, the mobilization of technical capacities and the eventual activation of international support mechanisms. Based on its humanitarian mandate and territorial presence, the Panamanian Red Cross plays a key role in needs assessment, evacuation support, first aid, assistance to affected people and risk communication.

Needs (Gaps) Identified



Shelter Housing And Settlements

According to SINAPROC's Official Statement No. 12, of October 14, 2026, 4,045 affected families were identified, equivalent to 13,623 people. Of these, 879 families registered total loss of their homes, 926 moderate damage, 1,577 partial damage, and 663 minor or minor damage. Likewise, 3,696 people remained housed in 45 temporary shelters nationwide.

The CRP's on-site assessments identify families housed in the homes of relatives, neighbors, and other temporary spaces. In Penonomé, a group of 11 people who remained in a pasture area was identified, including a person with a disability.

These conditions create needs for safe temporary shelter, weather protection materials, kitchen utensils, lighting and other essential household items. It is also necessary to verify the living conditions of the affected houses and the accommodation alternatives for the displaced families.



Livelihoods And Basic Needs

Preliminary assessments indicate effects on the livelihoods of coastal and rural communities in the provinces most impacted by the earthquake, particularly in Isla Cañas, Los Santos province, where the anomalous rise in sea level after the seismic event caused flooding in inhabited sectors and productive areas. According to reports from the Panamanian Red Cross (CRP), approximately 300 people were evacuated preventively from Isla Cañas to the community of Cañas, due to the rise in sea level and waves.

In these communities, crop losses and impacts on family sources of income are reported, especially among households that depend on subsistence agriculture, artisanal fishing, and other local economic activities. Preventive evacuations, the persistence of aftershocks, and difficulties in returning to the affected areas have temporarily limited the development of productive activities, increasing the economic vulnerability of families and their ability to cover basic needs, such as food, transportation, and other essential expenses.

In addition, damage to roads, bridges and communication routes has generated difficulties in accessing certain communities. According to SINAPROC bulletins, isolated communities were identified in Los Santos, Herrera and Veraguas, a situation that can hinder the transport of products, access to markets and the resumption of economic activities. Likewise, damage to commercial and tourist establishments is reported, with possible repercussions on the income of households that depend on these activities.

In this context, the need to continue assessments of livelihoods and basic needs is identified, to determine the number of affected families, the magnitude of crop losses and other productive activities, interruptions in sources of income and priority recovery needs. This information will make it possible to identify the households with the greatest economic impact and guide measures for immediate assistance and early recovery of their livelihoods, in coordination with the competent authorities.



Health

Preliminary assessments carried out by the Ministry of Health (MINSa) identified damage to at least six hospitals, eight health centers, and three MINSa-CAPSI facilities, located in the provinces most impacted by the earthquake. As a safety measure, several establishments had to evacuate patients and temporarily reorganize the provision of health services. This situation has generated additional needs for care, medical equipment, and essential supplies, according to information provided by the different health regions and the national level of MINSa.

Among the most significant damages is the Anita Moreno Regional Hospital, in Los Santos, where cracks were reported in walls and stairs that forced the evacuation of patients. Likewise, in the Rural Hospital of Tonosí, the fall of structural elements required temporarily moving care to outdoor spaces. In Herrera, the Cecilio Castellero Hospital reorganized the provision of services through temporary tents due to the damage registered.

In Chiriquí, the Hospital del Oriente Chiricano, located in San Félix, reported structural damage in the emergency area and the equipment center, a situation that led to the complete evacuation of the facility, including more than 200 people including patients, relatives and health personnel.

These effects have reduced the operational capacity of some establishments and generated difficulties in guaranteeing the continuity of essential services, particularly in rural communities and areas near the epicenter, where care alternatives are limited. The reorganization of services in temporary spaces requires tents, lighting systems, ventilation, screens to guarantee privacy, additional beds, medicines, medical supplies and equipment, as well as health personnel and logistical support to maintain adequate care conditions.

It also identifies the need to strengthen pre-hospital care and first aid in affected communities, especially for the elderly, pregnant women, people with disabilities, and patients with chronic diseases who face difficulties in accessing health services. This includes having trained personnel, ambulances, first aid supplies, and effective referral and transfer mechanisms to health facilities with functional capacity.

In terms of Mental Health and Psychosocial Support (MHPSS), the magnitude of the earthquake, the continuity of the aftershocks, the loss of homes and temporary displacements have generated fear, stress, anxiety and uncertainty among the affected population. According to information compiled by the Panamanian Red Cross, the Ministry of Social Development (MIDES) received more than 300 calls related to psychological first aid and emotional containment through the 147 line, reflecting the need for emotional support during the emergency.

The Panamanian Red Cross' assessments and on-the-ground interventions also identify psychosocial support needs in communities and temporary shelters, particularly among children and adolescents, older adults, people with disabilities, and displaced families. The interruption of school activities, the loss of safe spaces, and uncertainty about returning home can increase the need for accompaniment and specialized care.

In view of this situation, it is a priority to strengthen the provision of psychological first aid, emotional support, community psychosocial activities, and mechanisms for identification and referral to specialized mental health services. It is also necessary to consider the psychosocial well-being of the personnel and volunteers who participate in the response, due to the continuous exposure to emergency situations, the operational days and the emotional impact associated with the care of the affected communities.



Water, Sanitation And Hygiene

Preliminary assessments carried out by SINAPROC and the Panamanian Red Cross (CRP) identify effects on the drinking water supply and distribution systems in various communities in the provinces most impacted by the earthquake. In Veraguas, interruptions in drinking water, electricity and telecommunications services were reported, as well as damage to rural aqueducts, which have been partially restored. Likewise, in the province of Chiriquí, the collapse of two water storage tanks was reported, which raises concerns about the continuity and security of supply in the communities that depend on these systems.

According to SINAPROC's Official Communiqué No. 11, as of October 13, more than 331 tons of drinking water had been supplied to meet the needs of affected communities and hospitals. Although these actions have contributed to responding to immediate needs, the



importance of verifying the availability, continuity and quality of water in localities where supply systems are damaged or interrupted persists.

Water, sanitation and hygiene needs have also increased due to the displacement of the population. According to SINAPROC's Official Statement No. 12, of October 14, 2026, 3,696 people remained housed in 45 temporary shelters nationwide, of which 2,569 were in Veraguas. Likewise, preventive evacuations on Isla Cañas and the presence of families in other provisional spaces require verifying the conditions of access to safe water, sanitary facilities, water storage and availability of hygiene items.

On the other hand, the effects on health facilities and the reorganization of services in tents and temporary spaces generate additional needs to guarantee adequate water, sanitation and hygiene conditions during patient care. Interruptions in the supply and possible damage to distribution networks can increase health risks, especially when families resort to alternative sources of water whose quality has not been verified.

Difficulties in accessing certain communities, caused by damage to roads, bridges and landslides, can also delay the repair of affected systems and the distribution of drinking water and essential supplies. These conditions reinforce the need to maintain temporary supply solutions, especially in rural communities, shelters and health facilities where service interruptions persist.

In this context, the need to strengthen access to safe water through temporary treatment and distribution solutions, adequate storage systems, and items for the safe management of water at the family and community level is identified. Likewise, it is a priority to verify sanitation conditions, promote hygiene practices, and provide essential supplies, considering the specific needs of children, pregnant women, the elderly, and people with disabilities. These measures will contribute to reducing the risks associated with the consumption of unsafe water and inadequate hygiene conditions in the affected communities.



Protection, Gender And Inclusion

The earthquake and the continuous aftershocks have increased the protection risks for the affected population, especially children and adolescents, the elderly, people with disabilities, pregnant women, and people with specific care needs. According to SINAPROC's Official Statement No. 12, of October 14, 2026, among the affected people were identified 547 people with disabilities and 50 pregnant women, who may face greater barriers to accessing essential services and humanitarian assistance in conditions of safety, dignity, and equality.

Damage to housing and temporary displacement also generate differentiated protection needs. According to SINAPROC, 3,696 people remained housed in 45 temporary shelters as of October 14, 2026, while the Panamanian Red Cross's on-site assessments identify families housed in the homes of relatives, neighbors, and other temporary spaces. These conditions make it necessary to verify the safety, accessibility, privacy, and housing conditions, especially for women, children, and people with reduced mobility, as well as to strengthen the mechanisms for identifying and referring to situations of risk.

Likewise, the temporary transfer of health services to tents and temporary spaces has generated needs for privacy, accessibility, and protection during patient care. It is necessary to guarantee adequate conditions for differentiated care, particularly for pregnant women, people with disabilities, older adults, and patients who need accompaniment or assistance to access services.

In relation to child protection, according to SINAPROC, 619 official educational centers were under evaluation and 35 schools had been reported as completely collapsed. These effects, added to the displacement of families and the uncertainty generated by the aftershocks, can increase protection risks and affect the well-being of children and adolescents. In this context, the need to promote safe environments and age-appropriate educational, recreational and psychosocial activities is identified, in coordination with the competent authorities and applying child safeguarding measures.

In addition, displacement and interruptions in telecommunications can hinder communication between family members. According to the CRP's on-the-ground interventions, Restoring Family Links (RCF) activities have been carried out in affected communities, reinforcing the importance of maintaining accessible mechanisms for communication, guidance and follow-up on cases that require support.

Given these conditions, it is a priority to integrate protection, gender and inclusion measures into all humanitarian interventions, strengthen the identification of specific needs, guarantee equitable and safe access to assistance, promote community participation and establish feedback mechanisms, prevention of sexual exploitation and abuse, child safeguarding and referral to specialized services.



Community Engagement And Accountability

The 7.5 magnitude earthquake and the continuous sequence of aftershocks have generated concern and uncertainty among the affected communities, increasing the need to access clear, reliable, and timely information on the evolution of the emergency, the existing risks, the protection measures, and the assistance services available. According to SINAPROC's Official Statement No. 12, of October 14, 2026, 4,045 affected families had been identified, equivalent to 13,623 people, while damage and needs assessments continued in different provinces.

Preventive evacuations and temporary displacements have increased the information and guidance needs of affected families. According to SINAPROC, 3,696 people remained sheltered in 45 temporary shelters as of October 14, 2026, while Panamanian Red Cross field assessments identified the preventive evacuation of approximately 300 people from Isla Cañas due to anomalous sea level rise. These conditions require maintaining accessible communication channels to inform about security measures, return conditions, available services, and mechanisms to request assistance.

Likewise, damage to road infrastructure and interruptions in electricity and telecommunications services can limit communities' access to timely information. According to SINAPROC bulletins, 11 communities remained incommunicado in the province of Herrera, while in other areas of Los Santos and Veraguas, access difficulties were reported. These situations make it necessary to adapt communication mechanisms to the conditions of each community, considering face-to-face channels and other alternatives that allow the exchange of information to be maintained even when telecommunications services are interrupted.

The response also requires considering the information and communication needs of the groups with the greatest barriers to access. According to SINAPROC, 452 people with disabilities and 42 pregnant women were identified among the population evaluated. Likewise, according to the information collected by the CRP, the Ministry of Social Development (MIDES) received more than 300 calls related to emotional support through the 147 line, including care that required sign language interpreters. This reinforces the importance of providing information in accessible formats, using inclusive communication channels, and ensuring that people with specific needs can express their concerns and receive appropriate guidance.

In this context, the need to strengthen mechanisms for community participation, risk communication, and feedback is identified, particularly in rural, coastal, and hard-to-reach communities. It is a priority to ensure that affected people receive information on the selection criteria, the modalities of assistance, the rights of beneficiaries, and the channels available to submit queries, suggestions, or complaints in a safe and confidential manner. It is also necessary to promote the participation of communities in the identification of needs, the prioritization of assistance, and the follow-up of the response, as well as to establish mechanisms to analyze and respond in a timely manner to the feedback received.

The continuity of aftershocks and the evolution of the emergency also make it necessary to strengthen preventive communication and rumour management, ensuring that communities have verified information and understand the self-protection measures, associated risks and ongoing response actions.

Operational Strategy

Overall objective of the operation

The IFRC's DREF operation aims to enable 815 households affected by the earthquake in Panama to meet their priority basic needs through a multipurpose cash transfer program, complemented by community participation, accountability and protection mechanisms, while strengthening the capacity of the Panamanian Red Cross to implement a quality response.

Operation strategy rationale

The Panamanian Red Cross has developed a Single Response Plan to comprehensively address the humanitarian needs arising from the October 9, 2026 earthquake. This Single Response Plan constitutes the overall strategic framework for the response and consolidates the identified needs in livelihoods and basic needs, health, psychosocial support, water, sanitation and hygiene (WASH), protection, community participation, and institutional strengthening.

The response will be implemented through complementary funding sources that contribute to different components of the same Single Plan. This DREF will primarily finance multipurpose cash transfer assistance for 815 affected households, Community Participation and



Accountability (CEA) activities, Protection, Gender and Inclusion (PGI) actions, post-distribution monitoring, and institutional strengthening measures necessary to implement the cash response.

In parallel, the Panamanian Red Cross and the IFRC have submitted a request for supplementary funding under a Rapid Activation (DHR) mechanism for approximately USD 2 million to cover identified needs in the health, mental health and psychosocial support (MHPSS), water, sanitation and hygiene (WASH), emergency shelter and complementary livelihood and basic needs assistance. This proposal includes assistance with household items, temporary shelter materials, water treatment and distribution, rehabilitation of community water systems, hygiene supplies, support to health facilities, pre-hospital care, psychosocial support and strengthening of operational capacities of the National Society.

At the time of preparation of this DREF request, financing for these complementary sectors is in the process of being mobilized. If approved, it will allow the implementation of the multisectoral components foreseen in the Single Plan, while the DREF guarantees an immediate response focused on multipurpose cash and urgent basic needs. This approach makes it possible to avoid duplication between sources of financing and to ensure a phased and complementary response based on the needs identified by the assessments.

Targeting Strategy

Who will be targeted through this operation?

The operation will target households affected by the October 9, 2026 earthquake in the prioritized districts of Tonosí and Macaracas (Los Santos province), Mariato (Veraguas) and Los Pozos (Herrera), and Coclé where damage to homes, interruptions of essential services, temporary displacement, and impacts on livelihoods have been reported. Geographic coverage may be adjusted based on new assessments and evolving humanitarian needs.

The operation will prioritize households facing difficulties in meeting their basic needs as a result of the earthquake, especially those affected by damage to their homes, loss of essential goods, temporary displacement or reduction of their income and livelihoods. The assistance will focus mainly on households with unmet basic needs that require support to regain access to essential goods and services and advance their early recovery.

Special attention will be paid to individuals and households in situations of greater vulnerability, including female-headed households, families with children, older persons, persons with disabilities, pregnant or lactating women, persons with chronic diseases, indigenous communities and persons on the move affected by the disaster

Explain the selection criteria for the targeted population

The selection of the target population will be based on criteria of affectation, vulnerability and unmet humanitarian needs. The Panamanian Red Cross will use information from community assessments, home visits, records of authorities and community validation processes to identify families with the greatest needs.

Priority will be given to households that meet one or more of the following conditions:

- Damage to the home or inadequate living conditions.
 - Temporary displacement or need for alternative accommodation.
 - Loss or affectation of essential household goods.
 - Interruption of economic activities or significant reduction of income as a result of the earthquake.
 - Difficulties in covering immediate basic needs without external support.
- Limited access to other forms of humanitarian assistance.

Likewise, priority will be given to households with additional vulnerability factors, including the elderly, people with disabilities, pregnant or lactating women, single-parent households, families with children, people with chronic diseases and other groups that face greater barriers to recovery from the emergency.



Total Targeted Population

Women	2,038	Rural	-
Girls (under 18)	-	Urban	-
Men	2,037	People with disabilities (estimated)	-
Boys (under 18)	-		
Total targeted population	4,075		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	Yes
Does your National Society have prevention of sexual exploitation and abuse policy?	Yes
Does your National Society have child protection/child safeguarding policy?	No
Does your National Society have whistleblower protection policy?	No
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
Continued aftershocks and the possibility of new seismic events, which could put affected communities and responders at risk during humanitarian assessments and activities.	- Permanent monitoring of official seismic reports. - Application of safety protocols for volunteers and staff. - Temporary suspension of activities in areas identified as unsafe. - Continuous coordination with SINAPROC for the updating of alerts and preventive measures.
Limited access to affected rural and coastal communities, especially isolated areas such as Isla Cañas, due to damage to infrastructure, security conditions, or logistical limitations.	- Coordination with local and national authorities to facilitate safe access. - Prioritization of rapid assessments in hard-to-reach communities. - Use of logistical capacities and local vessels when necessary. - Constant updating of safe routes for response teams.



Changing or incomplete information on damage and needs, as assessments continue and the situation evolves rapidly.	- Conduct ongoing evaluations and periodic updates of information. - Data triangulation with authorities and other humanitarian actors. - Flexible adjustment of the response according to the identified needs.
Stress, exhaustion or emotional impact of staff and volunteers derived from the magnitude of the emergency and prolonged exposure to crisis situations.	- Implement well-being and psychosocial support measures for volunteers and staff. - Rotation of equipment in the field. - Monitoring of the physical and emotional well-being of deployed personnel.
Spreading rumours or disinformation, which may lead to fear, unsafe behaviour or mistaken expectations about humanitarian assistance.	- Strengthen Risk Communication and Community Participation (CEA) activities. - Disseminate official information and consistent messages in coordination with the authorities. - Establish community feedback mechanisms to identify and manage rumours.
Increased humanitarian needs due to deterioration of housing, livelihoods or basic services due to new aftershocks.	- Continuous monitoring of the humanitarian situation. - Regular updating of operational priorities. - Maintaining operational flexibility to extend or readjust assistance according to the evolution of the emergency.
Duplication of assistance and activities due to overlapping interventions by humanitarian actors in the same geographical areas or with the same target populations.	Coordination between the actors that implement the Multipurpose Cash Transfer program.

Please indicate any security and safety concerns for this operation:

The operation will take place in a context marked mainly by risks associated with the seismic emergency and its secondary effects, rather than by threats related to violence or conflict. Affected areas continue to experience frequent aftershocks after the main earthquake, posing a risk to communities, staff and volunteers involved in the response activities. These aftershocks can cause additional damage to already compromised structures, increase the risk of building collapse and lead to new evacuations.

Assessments carried out by national authorities report damage to homes, hospitals, educational centers, public buildings, bridges and roads, as well as communities temporarily cut off due to landslides and damage to road infrastructure. These conditions can hinder the safe access of humanitarian personnel to some localities and increase operational risks during land displacement.

Likewise, the effects on health facilities and the need to provide medical services in tents and temporary spaces require additional measures to protect patients, family members, health personnel and volunteers. High temperatures, prolonged exposure to the elements and limitations in temporary infrastructure can represent additional risks to the health and well-being of the people served.

In addition, the interruptions recorded in electricity, drinking water, telecommunications and transportation services in some affected areas could limit operational communications and the coordination of response actions. Monitoring of secondary threats is also maintained, including landslides, structural damage to buildings and possible coastal effects derived from the anomalous rise in sea level reported in areas near the epicenter.

The Panamanian Red Cross will implement its institutional safety protocols for personnel and volunteers, including continuous risk assessments, permanent monitoring of seismic activity, use of appropriate protective equipment when necessary, safety procedures for access to potentially damaged structures, and permanent coordination with the competent authorities. All activities will be carried out prioritizing the safety of personnel, volunteers, and affected communities, by following up on the recommendations issued by the risk management and civil protection authorities.

Has the child safeguarding risk analysis assessment been completed?	Yes
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Planned Intervention



Multi Purpose Cash

Budget: CHF 422,447

Targeted Persons: 4,075

Indicators

Title	Target
Number of households receiving multipurpose cash transfers.	815
Percentage of beneficiary households satisfied with the monetary assistance received.	80
Number of post-distribution monitoring exercises performed.	1

Priority Actions

- Conducting feasibility studies to implement the Cash Transfer Program (PTM).
- Mapping and coordination with financial service providers.
- Identification, selection and registration of beneficiary households.
- Training of volunteers in cash transfers.
- Delivery of multipurpose cash transfers to affected households.
- Preparation and distribution of information materials on CVA.
- Mobilization of personnel and volunteers for the implementation and monitoring of transfers.
- Recruitment of technical staff for the coordination of CVA.



Protection, Gender And Inclusion

Budget: CHF 6,177

Targeted Persons: -

Indicators

Title	Target
Number of awareness sessions on PSEA carried out.	3
Number of volunteers who sign the commitment to comply with the PSEA Policy.	100
Package of protection awareness messages prepared and adapted to different population groups.	1



Priority Actions

- Sensitization of volunteers on the Policy for the Prevention of Sexual Exploitation and Abuse (PEAS).
- Signing of commitments to comply with the PSEA Policy by volunteers.
- Preparation of protection awareness messages, adapted to children, adolescents and adults.
- Mobilization of personnel for the development of PGI activities.



Risk Reduction, Climate Adaptation And Recovery

Budget: CHF 78,235

Targeted Persons: -

Indicators

Title	Target
Lessons Learned Workshops (Mid-Term and Final)	2
Mapping of suppliers and key actors	1

Priority Actions

Finance and logistics staff recruitment
Communications and volunteer mobility costs
DREF Visibility
Communication campaigns
Mapping of suppliers and key actors
Lessons Learned Workshops (Mid-Term and Final)
Purchase of office and technological equipment

•Note: These actions have been placed under this sector due to the IFRC's new budget coding.



Community Engagement And Accountability

Budget: CHF 30,779

Targeted Persons: -

Indicators

Title	Target
Percentage of people surveyed who consider that care meets their priority needs.	80
Number of CEA orientation sessions conducted for staff and volunteers.	2
Number of community information and consultation meetings held	6

Priority Actions

- Preparation and printing of informative materials on CEA.
- Training of staff and volunteering in CEA.

- Holding community meetings for information and consultation.
- Dissemination of informative messages through radio media.
- Application of community surveys to collect opinions and feedback.
- Mobilization of personnel and volunteers for the implementation of CEA activities.



Secretariat Services

Budget: CHF 49,682

Targeted Persons: -

Indicators

Title	Target
Number of monitoring and technical accompaniment visits carried out by IFRC	1

Priority Actions

- Support from a CVA specialist, critical to strengthening the National Society's capacity in the design and implementation of the National Society's unique response plan.
- A monitoring and technical accompaniment visit by IFRC is also planned.
- Technical support will be provided by the IFRC's Planning, Monitoring, Evaluation and Reporting (PMER) team for the mid-term review of the operation and the completion of the final lessons learned workshop, in order to identify adjustments during implementation and systematize the main learnings at closing.



National Society Strengthening

Budget: CHF 21,407

Targeted Persons: -

Indicators

Title	Target
Number of visibility kits delivered to volunteers.	100

Priority Actions

- Delivery of visibility kits for volunteers
- Volunteer recognition



About Support Services

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

This operation is expected to mobilize approximately 100 volunteers from the Panamanian Red Cross, from the affiliates and national response teams, as well as the participation of technical and administrative personnel from the National Society in charge of coordination, follow-up, financial management, logistics, monitoring and reporting. The teams will support the implementation of the planned activities in the provinces of Herrera, Los Santos, Veraguas, Coclé and Panama.

Volunteers and staff will be organized according to the technical areas of intervention:

Multipurpose Cash Transfer Program: support in damage and needs assessments, beneficiary registries, evaluation of the feasibility of cash transfers, distribution of multipurpose assistance, post-distribution monitoring and follow-up to households affected by damage to homes, livelihoods or essential goods.

Protection, Gender and Inclusion (PGI): identification and monitoring of groups in vulnerable situations, promotion of safe and dignified access to assistance, activation of Restoring Family Links (RCF) services and referral of cases with specific protection needs.

Community Participation and Accountability (CEA): conducting community consultations, perception and needs surveys, disseminating prevention and self-protection messages, managing community feedback mechanisms, identifying rumors, and strengthening risk communication during the emergency.

Assessments and information management: collection, analysis and consolidation of information on damages, priority needs, assistance coverage and evolution of the humanitarian situation to support operational decision-making.

The operation will be supervised by a national coordination team made up of sectoral technical managers, emergency management personnel and the Emergency Operations Center of the Panamanian Red Cross, with technical support from the IFRC. The operation also includes the deployment of an Operations Manager to strengthen coordination, operational monitoring and implementation of the activities planned during the six months of intervention.

Personnel hired specifically for this operation

To support the implementation of the operation, the Panamanian Red Cross will hire additional personnel to strengthen the capacity for management, coordination and logistical support of the response:

Operational Coordinator: responsible for the general coordination of the operation, supervision of activities in the field, monitoring of results, articulation with the branches, coordination with authorities and partners, as well as monitoring compliance with the operational plan and the objectives of the intervention.

Logistician: responsible for the planning and coordination of the operation's logistical processes, including supply, storage, transportation, distribution of humanitarian assistance, inventory control, and support for field activities.

Finance Officer: responsible for the financial management of the operation, budget monitoring, expense control, financial reconciliations, preparation of economic reports and support for compliance with the financial and accountability requirements established by the IFRC.

Cash Transfer Program Officer: responsible for the implementation of damage and needs assessments, feasibility analysis for cash transfers, multipurpose assistance, and follow-up to households affected by damage to homes, livelihoods, or essential goods.

And it will be accompanied by the base of the CRP: Head of Integrated Risk Management, Water, Sanitation and Hygiene (WASH) Focal Point, Health and Psychosocial Support Focal Point, Livelihoods and Cash Assistance Focal Point (CVA), PMER Specialist, CEA Focal Point and PGI.

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 Panamanian Red Cross volunteer team largely reflects the diversity of gender, age, and territorial contexts of the communities where the operation will take place. The intervention will involve the participation of volunteers from the local branches and committees of the prioritized provinces, which facilitates knowledge of the local context, strengthens community acceptance, and favors more effective communication during the implementation of response activities. The balanced participation of women and men within the volunteer work will contribute to ensuring safe, dignified, and inclusive access to humanitarian assistance, especially for women, children, older adults, people with disabilities, and other groups with specific needs.

The Panamanian Red Cross will seek to form diverse and balanced work teams, promoting the participation of women in operational, coordination and leadership roles, as well as the representation of the communities where the operation will be implemented. This



diversity will contribute to strengthening community trust, accountability, identification of differentiated needs and the relevance of interventions in health, psychosocial support, water, sanitation and hygiene, livelihoods, cash assistance and community participation. Likewise, the staff and volunteers involved in the operation will be encouraged to apply the Protection, Gender and Inclusion (PGI) and Community Participation and Accountability (CEA) approaches in a cross-cutting manner, ensuring that the activities are accessible, culturally appropriate and sensitive to the needs of people affected by the earthquake, including those who are in a situation of vulnerability or temporary displacement.

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

Yes

An official CVA is planned to be deployed to support the activities of the Panamanian Red Cross' single response plan

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

The Panamanian Red Cross will directly carry out the purchases planned for the operation, in accordance with its institutional procedures and in coordination with the IFRC logistics area to ensure compliance with applicable standards and procedures. These acquisitions will be for direct distribution and not for replenishment.

How will this operation be monitored?

The monitoring of the operation will be coordinated by the Panamanian Red Cross, with the technical support of the IFRC. The monitoring will be carried out continuously during the six months of implementation through field monitoring mechanisms, periodic review of indicators, analysis of operational information and community feedback.

Operational records, evaluation forms, digital data collection tools, beneficiary databases, branch reports, distribution reports, post-distribution monitoring (when applicable), community feedback mechanisms, and internal information management systems of the Panamanian Red Cross will be used to monitor activities and results. In addition, Community Participation and Accountability (CEA) activities will make it possible to collect qualitative information on the perception, satisfaction, and needs of affected communities.

The progress of the operation will be reviewed periodically through operational coordination meetings, analysis of physical and financial progress, monitoring of indicators, and updating of work plans. The information collected will make it possible to identify gaps, adjust interventions when necessary, and strengthen the quality and relevance of the assistance provided.

Key monitoring indicators include the number of people reached with humanitarian assistance, people assisted with first aid and psychosocial support, people with temporary access to safe water, families assisted with basic necessities, people reached through health promotion activities, households receiving cash assistance, as well as the specific indicators defined for each sector of intervention.

Likewise, protection, gender and inclusion (PGI) monitoring, as well as community participation and accountability (CEA) will be carried out, to ensure that assistance is accessible, safe, dignified and adequate to the differentiated needs of the affected population.

Follow-up and monitoring visits by the IFRC are planned, which may be carried out in person or virtually depending on operational and access conditions. These visits will aim to verify progress, provide technical support, review compliance with quality standards and support the identification of lessons learned and opportunities for improvement during the implementation of the operation.

Please briefly explain the National Societies communication strategy for this operation

The Panamanian Red Cross' communication strategy for this operation will focus on ensuring the timely, transparent and accessible dissemination of information related to the humanitarian response to the earthquake, the activities implemented in the affected communities and the services available to the population. It will also seek to make visible the auxiliary role of the National Society and the application of the Fundamental Principles of the International Red Cross and Red Crescent Movement during the emergency.

Internal communication will be developed through institutional coordination channels between the national headquarters, the branches, the Emergency Operations Center, technical personnel, operational teams, and volunteers. These mechanisms will allow for the sharing



of updated information on the evolution of the emergency, operational progress, identified needs, security measures, and results achieved during the implementation of the operation.

Externally, the Panamanian Red Cross will use its digital platforms, social networks, national and local media, as well as community information spaces to disseminate messages related to self-protection measures against aftershocks, access to available services, health, psychosocial support, safe water, humanitarian assistance. Communication products will also be developed to give visibility to the actions implemented and the impact of the operation on the affected communities.

As part of the media strategy, press releases, interviews, social media posts, audiovisual materials, photo galleries, human interest stories and other information products will be issued. In case of approval by the DREF, the Panamanian Red Cross will organize a press conference to present the objectives of the operation, the planned activities and the support provided to the people affected by the earthquake.

The operation will also incorporate Community Engagement and Accountability mechanisms, through community consultations, perception surveys, information meetings and feedback channels that allow communities to express concerns, ask questions and share their opinions on the assistance received. This will contribute to strengthening transparency, trust and the continuous adaptation of the response to the needs of the population.

The IFRC will provide technical support in terms of communication and visibility, supporting the review of key messages, the development of communication products, the documentation of results and lessons learned, as well as the application of institutional guidelines for communication and visibility throughout the operation.



Budget Overview



DREF OPERATION

MDRPA023 - Red Cross Society of Panama Panama: Earthquake

Operating Budget

Planned Operations	537,638
Shelter and Basic Household Items	0
Livelihoods	0
Multi-purpose Cash	422,447
Health	0
Water, Sanitation & Hygiene	0
Protection, Gender and Inclusion	6,177
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	78,235
Community Engagement and Accountability	30,779
Environmental Sustainability	0
Enabling Approaches	71,089
Coordination and Partnerships	0
Secretariat Services	49,682
National Society Strengthening	21,407
TOTAL BUDGET	608,726

all amounts in Swiss Francs (CHF)



Contact Information

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

National Society contact: Daniel González, Jefe de Gestión de Riesgos, daniel.gonzalez@cuzroja.org.pa

IFRC Appeal Manager: Marjorie Soto Franco, Head of Country Cluster Delegation, marjorie.sotofranco@ifrc.org

IFRC Project Manager: Katherine Fuentes, Coordinadora Programas y Operaciones, katherine.fuentes@ifrc.org

IFRC focal point for the emergency: Katherine Fuentes, Coordinadora Programas y Operaciones, katherine.fuentes@ifrc.org

Media Contact: Susana Arroyo, Manager, Regional Communications, susana.arroyo@ifrc.org

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