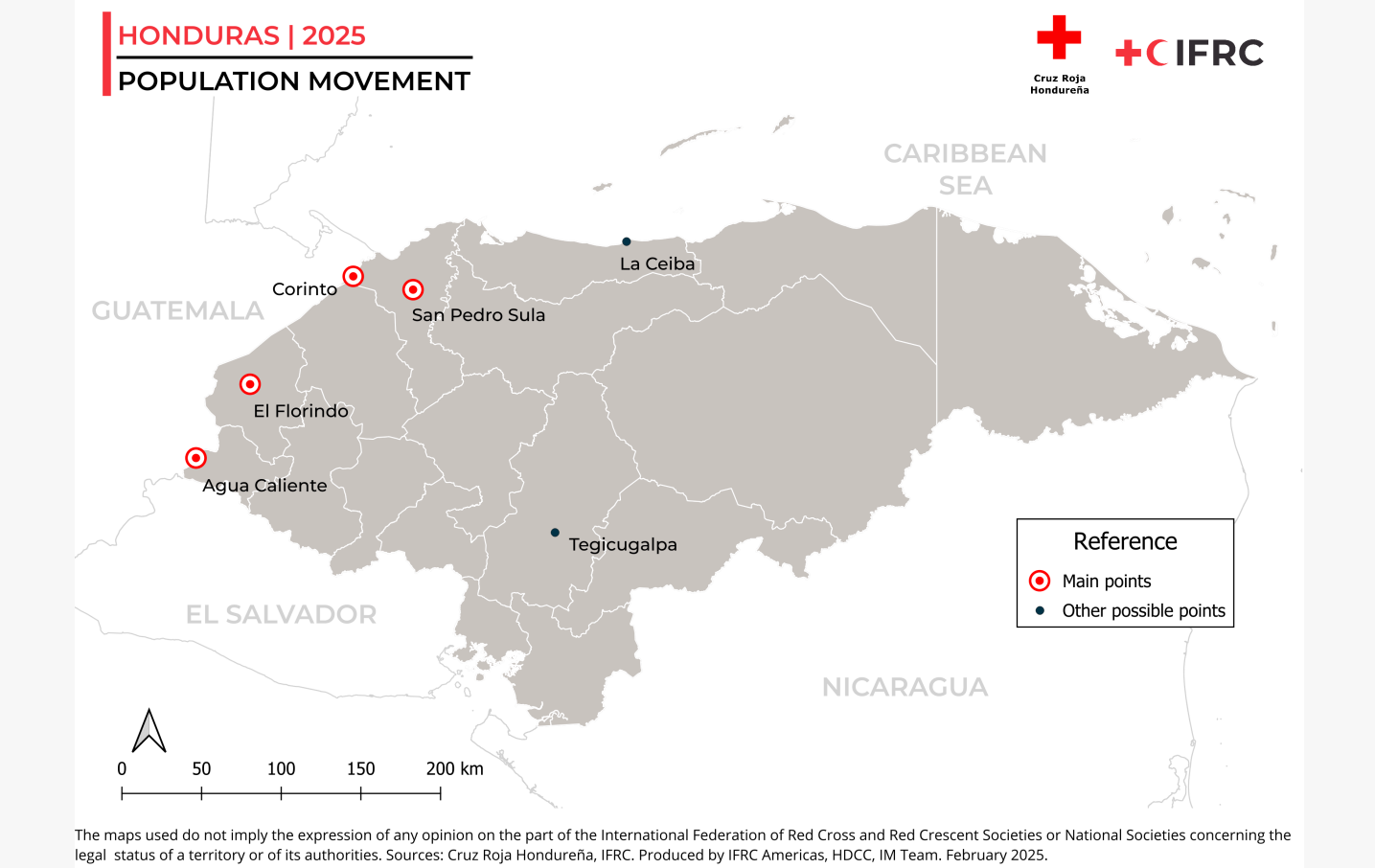
DREF Operational Update

Honduras: Population Movement

Participants of the Specialized Standard First Aid Course, held from 30 March to 6 April 2025. Source: Honduran Red Cross

Appeal: **MDRHN025**	Total DREF Allocation: **-**	Crisis Category: Yellow	Hazard: **Population Movement**
Glide Number: **-**	People Affected: **261,651 people**	People Targeted: **4,000 people**	
Event Onset: **Slow**	Operation Start Date: **12-02-2025**	New Operational End Date: **31-08-2025**	Total Operating Timeframe: **6 months**
Reporting Timeframe Start Date: **12-02-2025**		Reporting Timeframe End Date: **30-04-2025**	
Additional Allocation Requested: **-**		Targeted Regions: **Copan, Cortes, Ocotepeque**	

Description of the Event



Main points of attention for returned migrants and other potential locations considered for the implementation of actions with this IFRC-DREF. Source: IFRC

Approximate date of impact

Deportations of Hondurans from the U.S. and Mexico are expected to rise significantly between March and June 2025. Changes in U.S. immigration policies, effective 20 January 2025, per executive orders (1)(2) (3), could increase return flows, with U.S. Immigration and Customs Enforcement (ICE) estimating that up to 261,651 Hondurans may face deportation during 2025 (4). Over the past decade, 596,394 migrants have returned. In 2024 alone, 21,442 returnees were recorded.

Provide any updates in the situation since the field report and explain what is expected to happen.

According to data from the U.S. Immigration and Customs Enforcement (ICE), the return of 261,651 Hondurans is anticipated in 2025. This number could increase if Mexico and Guatemala reform their migration policies, intensifying the flow of returns. In this scenario, the operational capacity of the migrant returnee care centers in northern Honduras could be overwhelmed. According to INM, since the start of this operation 7,423 people have returned to Honduras from from the United States and 1808 from Mexico amounting 99% of the overall people returned to Honduras. From these total (9231 people) 75% were men, 11% women and 14% children. These figures represented a 5% decrease with respect to the same period in 2024 (Feb 2024-May 2024) where INM recorded 9771 people returned from United States and Mexico.

Reception could be distributed across various points in the country, especially at Palmerola (Comayagua), Toncontín (Tegucigalpa), and Golosón (La Ceiba) airports, as well as the main land border crossings with Guatemala: Ocotepeque-Agua Caliente, Copán-Florido, and Cortés-Corinto. This might necessitate the establishment of new care points and the deployment of officials from various ministries, including Foreign Affairs, Childhood, Adolescence and Family (SENAF), Social Development (SEDESOL), and the National Migration Institute (INM).

Humanitarian assistance, as stipulated by the Law for the Protection of Honduran Migrants and their Families (Article No. 27), will include

services such as humane reception, social orientation, basic health assistance, food, clothing, communication with relatives, transportation, attention to vulnerable cases, and shelter.

Honduran Red Cross volunteers preparing the pre-positioned differentiated hygiene kits at the National Society central warehouse. Source: Honduran Red Cross.

Participants attending the refresher session on the CEA mechanism and channels in migration contexts, held in San Pedro Sula on April 5, 2025. Source: Honduran Red Cross.

Participants of the Specialized Standard First Aid Course, held from March 30 to April 6, 2025. Source: Honduran Red Cross

Why your National Society is acting now and what criteria is used to launch this operation.

The increasing number of returned migrants requires an urgent scaling up of humanitarian assistance. The Centers for Returned Migrant Assistance (CAMR), as the main reception points, have seen a surge in demand for essential services. Drawing from previous operational experience and the evolving migratory landscape, the National Society recognizes the imperative need to strengthen its actions, particularly given projections of an unprecedented return of migrants.

To effectively address this situation, the preemptive mobilization of human and logistical resources is crucial. This proactive approach ensures that migrants receive complementary assistance in key humanitarian sectors, including health, Water, Sanitation, and Hygiene (WASH), protection, shelter, transportation, and food. The ability to deploy resources in advance is essential for mitigating operational bottlenecks and ensuring dignified and adequate support for migrants upon their arrival.

Based on migration trend monitoring and operational response capacity, the Honduran Red Cross has established two key triggers for activating and scaling its intervention:

First Trigger: Activation of Readiness, pre-positioning and Early Actions

This trigger is activated in response to changes in U.S. immigration policies, effective as of 20 January 2025, according to U.S. executive orders (2)(3)(4), which may directly affect migratory flows towards Honduras. The main reasons for activating this first level of intervention include:

-Executive orders in the U.S. prioritizing the detention and deportation of irregular migrants in various states, including the involvement of institutions beyond ICE.
-The elimination of refugee programs, leaving asylum seekers vulnerable and increasing their risk of deportation.
-The cancellation of Temporary Protected Status (TPS) or Parole programs for Hondurans, potentially leading to a backlog of migrants in Mexico and increasing the likelihood of mass deportations by land.

In this scenario, the National Society aims to implement readiness, pre-positioning, and early actions by activating the Migration Response Coordination Table. These actions will allow for:

-Assessing existing response capacities.
-Designing strategies to strengthen operational capacity.
-Ensuring readiness to handle a surge in deportations within 24 to 48 hours.

Second Trigger: Scaling Up the Humanitarian Response (From Imminent DREF to DREF Response)

The Steering Committee of the Migration Response Coordination Table within the National Society will assess the migration context based on data related to returned migrant flows, operational capacity, and national context. If it is determined that the situation has escalated into a severe event, with a high probability of a return flow exceeding regular thresholds and overwhelming existing response capacities, the humanitarian response will be scaled up.

The scale-up decision is based on three key indicators:

Indicator 1: Increase in Returned Migrant Flows

This indicator is assessed through:
- Data analysis from the National Migration Institute (INM) to forecast migrant flows in the coming weeks.
- Monitoring trends using migration flow analysis tools.
- Official statements from the Honduran government regarding the authorization of additional deportation flights or land transfers of returned migrants.

Indicator 2: Operational and Financial Capacity of Reception Centers

This indicator involves two evaluation phases:
- On-the-ground monitoring and data collection using predefined tools to assess the operational and financial capacity of CAMRs and other migration service points.
- Contextual and statistical analysis conducted by migration experts in health, WASH, Community Engagement and Accountability (CEA), protection, and other relevant sectors.
- Based on this analysis, a formal recommendation for scaling up the response will be issued.

The response scale-up will be activated if projected returnee flows exceed:
- 1,000 returned individuals in San Pedro Sula.
- 1,000 returned individuals in Omoa.

Additionally, if these flows exceed the current operational capacity (500 people daily) or if new reception centers are required at Palmerola Airport (Comayagua) or Goloson Airport (La Ceiba), additional resources will be mobilized.

Indicator 3: Official Request from Authorities

This indicator is independent of the previous two and is activated when government authorities (e.g., Ministry of Foreign Affairs, National Migration Institute or similar entity) formally request the National Society to:
- Expand reception center capacities.
- Assist in establishing new reception points or centers.

In summary, it is important to clarify that the initiation of response actions will depend on the activation of triggers 1 and 2, or solely on indicator 3, considering that the latter is independent.

Stop mechanism
This includes potential changes in migration policies regarding returnees at home country (i.e. refusing to receive nationals) or changes in migration policies in USA (diverting flights to third countries, not materialization of additional deportation flights) which will affect the number of returnees. The NS will conduct regular monitoring of the number of returned migrants, profiles as well as capacity analysis to provide assistance to returned migrants with current portfolio (i.e. ECHO PPP, AECID) and based on this monitoring the NS will implement the early actions. This will be closely monitored by IFRC CCD. Also, as indicated an alternate trigger for early actions or scalation to response is related to express requests by national authorities to NS for assistance. It is not feasible to provide a specific date since this is a situation under development with short lead times (24-48hrs).

Regarding an exit strategy, in case the triggers and conditions for transitioning for response are not met the National Society wil preposition all NFIs procured under this operation in NS warehouses, all costs related to warehouse management of these items beyond this operation's timeframe are covered by NS. For any new DREF operation launched by the NS these prepositioned items will be considered and requested to use in coordination with IFRC CCD and DREF team. All staff and volunteers trained during this operation remain available and active for any new operations in their target areas.

Scope and Scale

The intensification of migratory flows has given rise to complex humanitarian crises, necessitating an immediate, structured, and effective intervention. In this context, the Honduran Red Cross, within the framework of its institutional mandate, auxiliary function, and in adherence to the principles of the International Red Cross and Red Crescent Movement, has played a fundamental role in addressing the most urgent humanitarian needs of populations affected by human mobility. Failure to provide adequate humanitarian support could exacerbate vulnerabilities, leading to heightened protection risks, health concerns, and increased exposure to unsafe conditions.

According to data recorded by U.S. Immigration and Customs Enforcement (ICE), a massive return of approximately 261,651 Hondurans is

projected for the year 2025 from the United States. However, this dynamic could shift if Mexico and Guatemala introduce reforms to their migration policies, potentially exacerbating the large-scale return of Honduran migrants through additional deportation measures.

The repatriation of such a significant number of individuals necessitates the mobilization of both state resources and humanitarian organizations responsible for providing assistance to this population. Furthermore, the return process is expected to occur through multiple air and land entry points across the country, adding complexity to the intervention. This scenario presents two critical challenges: (1) the risk of an insufficiently prepositioned response due to underestimation of return flows, and (2) the potential dilution of available resources as a result of the overwhelming scale of arrivals.

Source Information

Source Name	Source Link
1. DW - Honduran individuals who have a deportation order	https://www.dw.com/es/honduras-recibir%C3%A1-primeros-dos-vuelos-militares-con-126-deportados-de-eeuu/a-71464460
2. White House - Declaring a national emergency at the southern border of the United States.	https://www.whitehouse.gov/presidential-actions/2025/01/declaring-a-national-emergency-at-the-southern-border-of-the-united-states/
3. White House - Securing Our Borders (Executive Order)	https://www.whitehouse.gov/presidential-actions/2025/01/securing-our-borders/
4. White House - Realigning the United States Refugee Admissions Program (Executive Order)	https://www.whitehouse.gov/presidential-actions/2025/01/realigning-the-united-states-refugee-admissions-program/

Summary of Changes

Are you changing the timeframe of the operation	Yes
Are you changing the operational strategy	No
Are you changing the target population of the operation	No
Are you changing the geographical location	No
Are you making changes to the budget	No
Are you requesting an additional allocation?	No

Please explain the summary of changes and justification:

Through this Operations Update No. 1, the Honduran Red Cross aims to inform about:
1. A 3-month no-cost timeframe extension (new end date: 31 August 2025) without modifying the operation's scope, targeting, geographic coverage, or budget.

This request is based on the scenario-based planning exercise on population movement conducted at the end of March 2025 with the support of the IFRC. The objective of this exercise was to anticipate possible developments over the next 12 months. It enabled the identification of potential impacts and humanitarian needs, contributing to strengthening strategic planning, promoting preparedness, and guiding response actions.

As a result of this analysis, three possible scenarios were identified: 1) effective response to needs, 2) reduced response capacity, and 3) collapse of response capacity. Following a validation process that included internal meetings, monitoring exercises, and coordination with governmental and humanitarian actors, the Honduran Red Cross has concluded that the most likely scenario in the coming months is the reduced response capacity scenario.

This scenario anticipates a sustained flow of between five thousand and seven thousand returning migrants per month, which could limit the adequate coverage of the needs of both returnees and host communities. This projection is further supported by the recent extension of the government's "Hermanos Vuelvan a Casa" program until December 2025, which anticipates a continued increase in migratory flows. This extension also considers the impact of delegated immigration enforcement to state and local police and other

entities in destination countries such as United States, that could lead to an increased flows of returnees in the next months (scenario 2).

Additionally, this extension will allow the National Society to complete the pre-positioning of hygiene kits, whose procurement has recently been finalized, ensuring their availability for timely response and strengthening the National Society capacity to address emerging needs without compromising the commitments already established.

Please explain how the operation is transitioning from Anticipatory to Response:

This request does not imply the activation of a response phase, as the established triggers for such activation have not yet been reached. Rather, the extension is requested to anticipate a possible increase in humanitarian needs, as projected in the scenario- based analysis on population movement. This measure aims to ensure operational readiness and timely response capacity in the event of a potential deterioration of the situation that could affect a larger number of returning migrants and host communities in the coming months.

Current National Society Actions

National Society anticipatory actions started

15-01-2025

Health	Coordination with the Ministry of Health for Medical Personnel Deployment: Collaboration with the Ministry of Health to facilitate the assignment of healthcare personnel to the CAMR-Omoa, ensuring adequate medical attention for returned Hondurans. Strengthening Psychological Support Capacity: At the National Society level, a total of 54 psychologists have been identified and updated on the current migration situation.
Water, Sanitation And Hygiene	Inventory Mapping of Water and Hygiene Promotion Resources: Assessment and documentation of the National Society available resources for water supply and hygiene promotion, ensuring adequate preparedness to support returned migrants with essential WASH (Water, Sanitation, and Hygiene) services.
Protection, Gender And Inclusion	Updating Protocols for Assisting Returned Migrants who are Survivors of Gender-Based Violence: Revision and enhancement of response protocols to ensure specialized care and protection for returned migrants who have survived gender-based violence (GBV). Capacity Building for Volunteers in Protection, Gender, and Inclusion (PGI): Training of volunteer personnel on key topics related to PGI, with a particular emphasis on the current humanitarian crisis. Deployment of Protection Officers: Assignment of two protection officers stationed at CAMR-Belén and CAMR-Omoa to strengthen protection mechanisms and ensure the safeguarding of returned migrants' rights and well-being.
Coordination	Active Participation in Coordination Platforms with SENAF: Engagement in collaborative efforts with the Secretariat of Childhood, Adolescence, and Family (SENAF) to strengthen protection mechanisms for migrant children and families. Agreements with the Secretariat of Foreign Affairs and International Cooperation: Establishment of formal agreements for the management and administration of the Centers for Returned Migrant Assistance (CAMR) in Omoa and Belén, ensuring structured and efficient service delivery for returned migrants. Interinstitutional Coordination and Participation in Thematic Working Groups: Active involvement in migration and health coordination tables, fostering a comprehensive, multi-sectoral response to the challenges posed by the migratory crisis.

National Society Readiness	Monitoring and Analysis of Deportation Trends: Continuous tracking of socio-political and humanitarian developments in the United States related to mass deportation policies, assessing their potential impact on Honduras. Mapping of Complementary Intervention Projects: Identification and evaluation of ongoing and potential projects that can enhance and support humanitarian assistance for returned migrants, ensuring a coordinated and efficient response.
Assessment	Scenario Analysis Based on the Humanitarian Crisis Landscape: Continuous assessment and monitoring of migration flows to anticipate trends, evaluate risks, and adapt response strategies in line with the evolving humanitarian context.
Resource Mobilization	Securing Government Funding for Migrant Assistance: Successful application and acquisition of a state grant through the Directorate for Migrant Protection under the Center for Returned Migrant Assistance (CAMR) – Secretariat of Foreign Affairs and International Cooperation. This funding supports the management and administration of the CAMR-Omoa and CAMR-Belén, ensuring the provision of essential services to returned migrants.
Activation Of Contingency Plans	Development of a Unified Plan for Assisting Returned Migrants: Formulation of a comprehensive response plan for the care and assistance of returned migrants, coordinated through the Risk Management and Disaster Response Department and the Social Development Department. This plan ensures a structured, efficient, and integrated approach to addressing the needs of returning populations.

IFRC Network Actions Related To The Current Event

Secretariat	The Honduran Red Cross has received continuous technical support from the IFRC Country Cluster Delegation in Central America. Even before the formulation of this IFRC-DREF, the IFRC has been actively involved through monitoring meetings and technical support to guide response strategies. The IFRC also provides humanitarian needs and regional context analysis support to NS as part of the Migration technical table convened by the NS. For this IFRC-DREF, the IFRC has provided direct support throughout the formulation process and its official presentation, ensuring alignment with international humanitarian standards and best practices.
Participating National Societies	The Honduran Red Cross has received technical guidance and financial resources from both the Spanish Red Cross and the German Red Cross, reinforcing its capacity to respond effectively to the ongoing humanitarian crisis. Additionally, various National Societies (PNS) have actively participated in the Migration Coordination Table, established by the National Society, contributing logistical and human resources to implement the necessary actions within the framework of the National Response Plan activation. It is also important to highlight that the Honduran Red Cross has received a contribution from the Netherlands Red Cross, which is focused on the migrant population in transit. However, the National Society will assess whether, depending on the increase in needs, a portion of these funds could be redirected to support the prioritized returned migrant population in this IFRC-DREF, primarily in actions to strengthen volunteers and staff of the National Society in operational communication areas with an emphasis on the current situation and distribution of kits, which could be either hygiene or psychosocial support kits, depending on the identified need. Additionally, to date, the National Society has not planned actions that could be complemented with funds from the Programmatic Partnership with ECHO (ECHO-PP).

ICRC Actions Related To The Current Event

In response to the current humanitarian crisis, the ICRC has continued to support the Honduran Red Cross through various strategic actions. One such action includes integrating key protection staff to support safe referrals and the joint implementation of the Red Safe project, under the information as aid approach, also connected with promoting safe referral routes for vulnerable cases.

Furthermore, the ICRC has maintained an active presence in the Migration and Health Coordination Table, contributing its expertise and coordination to enhance response strategies. Additionally, it has engaged in advocacy efforts with government entities to promote the update and improvement of protection protocols, ensuring a more effective and rights-based approach to assist vulnerable migrant populations.

Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
National authorities	Coordination efforts continue through the Cooperation Table for the Assistance of Returned Migrants, ensuring a collaborative approach to addressing the needs of this population. Additionally, the Government of Honduras has been implementing the “Hermano Vuelve a Casa” program, which was initially planned for three months but has since been extended until December 2025. This program provides comprehensive assistance from the moment returning migrants are received at the Returned Migrant Assistance Centers (CAMR), ensuring the protection of their rights and well-being. As part of the support package, each returning migrant receives a cash grant of 2,600 lempiras, along with two food vouchers worth 2,000 lempiras each redeemable at BANASUPRO, and a transportation voucher provided by the Ministry of Foreign Affairs. In total, 6,600 lempiras are provided per person, helping to ensure their initial stability upon returning to the country.
UN or other actors	UNICEF is providing direct support to the Secretariat of Childhood, Adolescence, and Family (SENAF) in activating the reintegration process through the deployment of reintegration officers, ensuring comprehensive assistance for returned children and adolescents. The International Organization for Migration (IOM), in coordination with the Secretariat of Foreign Affairs, is actively promoting the Reintegration Plan, strengthening efforts to facilitate the social and economic reintegration of returned migrants.

Are there major coordination mechanism in place?

The National Protection Table for Returned Migrants (MNPPMR) is an inter-institutional coordination platform that brings together government agencies, international organizations, and non-governmental organizations (NGOs) to ensure the protection and comprehensive assistance of returned migrants. Its primary role is to plan, implement, and monitor strategies aimed at providing effective support and humanitarian aid to this vulnerable population.

Needs (Gaps) Identified

Health

Returned migrants in Honduras face serious health challenges, both due to the conditions they experienced during migration and the difficulties of reintegration in the country. Among the main gaps are limited access to healthcare services, lack of attention to physical illnesses, a mental health crisis, and the vulnerability of certain groups, such as women, children, adolescents, and the elderly.

Access to medical care is restricted due to a lack of healthcare coverage, economic and geographical barriers, and the overburdening of the Returned Migrant Assistance Centers (CAMR). In many cases, returned migrants must seek care at health centers in their communities of origin, where resources are insufficient, leading to delays in treating illnesses and accessing essential services.

Regarding physical health, the National Society has identified that returned migrants often suffer from neglected chronic diseases such as diabetes, hypertension, and asthma, which worsen due to a lack of proper treatment. Additionally, injuries and infectious diseases resulting from the migration journey, such as respiratory, gastrointestinal, and skin conditions, require medical attention that is often unavailable.

Mental health represents one of the most critical gaps, as many individuals have been victims of violence, family separation, or prolonged detention, increasing cases of depression, anxiety, and post-traumatic stress disorder. However, access to psychological and psychiatric services is extremely limited, with a low availability of specialists and only two psychiatric hospitals in the entire country. This situation particularly affects rural communities, which lack access to specialized care.

Vulnerable groups, such as women, children, and the elderly, require differentiated care. Women face significant gaps in sexual and reproductive health, while children and adolescents are at greater risk of malnutrition, lack of vaccination, and emotional problems due to violence and the precarious conditions of their return. Meanwhile, elderly returnees often come back without support networks and without access to treatments for chronic illnesses, further exacerbating their vulnerability.

At a structural level, the healthcare system in Honduras is insufficient to meet the growing number of returned migrants. The unequal distribution of services, shortages of medical and human resources, and the lack of effective social and economic reintegration programs limit the system's ability to respond. This health crisis not only affects returned migrants but also has broader public health implications, increasing the prevalence of chronic diseases and mental disorders in receiving communities.

Water, Sanitation And Hygiene

Returned migrants face severe deficiencies in water, sanitation, and hygiene (WASH), compromising their health, dignity, and well-being. Reception areas and temporary shelters often lack adequate infrastructure to ensure access to safe drinking water, increasing the risk of diarrheal diseases, dehydration, and skin infections. The lack of efficient water storage and distribution systems worsens the situation, forcing many individuals to rely on contaminated sources or ration their consumption, which particularly affects vulnerable groups. Likewise, sanitation conditions are inadequate, with insufficient, poorly maintained, or non-functional facilities, making the safe management of excreta and solid waste difficult and increasing the risk of contamination and disease transmission.

The absence of safe and gender-sensitive spaces for sanitation services exposes women and girls to insecurity and gender-based violence, further limiting their access to basic hygiene conditions. Additionally, the scarcity of essential supplies such as soap, sanitary pads, diapers, disinfectants, and other basic hygiene products hinders the ability to maintain proper hygiene practices, disproportionately affecting women, girls, children, the elderly, and people with disabilities. These deficiencies in WASH not only heighten the risk of disease but also negatively impact the dignity and quality of life of returned migrants, making their reintegration and adaptation to their environment even more challenging.

Protection, Gender And Inclusion

The increase in returned migrants with protection needs, many of whom have been affected by forced displacement or are survivors of gender-based violence (GBV), highlights significant gaps in the response to this crisis. In Honduras, death threats, citizen insecurity, extortion, and intimidation are key drivers of cross-border displacement. Situations such as forced recruitment, the murder of family members or neighbors, kidnappings, and femicides have forced many individuals to migrate in search of safety. However, upon their return, these individuals continue to face a high-risk environment without effective protection mechanisms. The institutions responsible for their assistance provide a limited response in activating immediate protection and care procedures, leaving the affected population in a state of extreme vulnerability, without timely access to comprehensive assistance or guarantees for their safety.

In the particular case of unaccompanied returned children and adolescents, they face severe challenges, including intense psychological stress due to the traumatic experiences of migration and the lack of stability upon return. Additionally, many lack access to essential services such as basic education and healthcare. They are also at high risk of exploitation and abuse due to the absence of a protective environment. Moreover, they need adequate shelter to protect themselves from adverse environmental conditions and access to basic hygiene supplies, including menstrual hygiene kits for adolescents, which are essential for their health and dignity.

The migration context in Honduras is deeply marked by poverty, economic inequality, and violence, factors that perpetuate the

vulnerability of returned migrants. According to recent data from the 2024 Global Peace Index, a large portion of the population lives in precarious conditions, with limited access to job opportunities and basic services, forcing many to migrate in search of a more dignified life. Upon their return, they not only face the same threats that initially led them to migrate but also a lack of socioeconomic opportunities that hinders their effective reintegration into their communities. Despite government efforts, the response capacity of state institutions remains insufficient to meet the needs of this population. The lack of effective protection mechanisms, as well as limited interinstitutional coordination, exacerbates the crisis, leaving thousands of people exposed to violence, poverty, and social exclusion.

Community Engagement And Accountability

Misinformation, combined with an overload of diverse and fragmented information regarding measures and actions directed at returned migrants, represents a significant gap in access to clear and timely information. This situation makes it difficult for migrants to make informed decisions about available services and limits their access to assistance and protection mechanisms. The lack of effective strategies to ensure the dissemination of relevant and understandable information creates confusion and distrust, particularly affecting vulnerable groups such as women, children, and individuals with protection needs. Additionally, the absence of specialized training for volunteer and technical personnel providing these services exacerbates the issue, as inadequate guidance tools weaken response capacity and result in fragmented and ineffective support for returned migrants.

Limited access to reliable feedback mechanisms is another key challenge in assisting returned migrants. The short duration of contact with the assisted population hinders the collection of information regarding their level of satisfaction and unmet needs. Without a proper system to evaluate and adjust services, ensuring that they effectively and appropriately address the real needs of the population becomes difficult. This communication gap also affects the identification of emerging issues requiring immediate attention, limiting the adaptability of humanitarian responses. The absence of accessible and dynamic communication channels with the returned migrant community further reinforces the disconnect between available services and actual needs, ultimately impacting their reintegration and access to dignified assistance.

Operational Strategy

Overall objective of the operation

Through this IFRC-DREF allocation, the Honduran Red Cross aims to mitigate the risk of a humanitarian crisis that could be triggered by an unusual increase in the number of returned migrants. To this end, it will implement anticipatory actions designed to provide humanitarian assistance to 4,000 returned individuals, focusing on key areas such as health, water, sanitation and hygiene (WASH), protection, gender and inclusion (PGI), and community engagement and accountability (CEA). These actions will be carried out at border points in Omoa, Ocotepeque, and Copan, as well as at the Returned Migrant Assistance Centers (CAMR) in Omoa and San Pedro Sula, over a period of six months.

Operation strategy rationale

The Honduran Red Cross has prioritized assistance to returned migrants by providing essential services tailored to their specific needs. Based on National Society operational experience, this strategy seeks to address critical gaps through a structured approach that includes:

- Strengthening institutional capacities, particularly in partnerships and coordination with external actors, including governmental authorities.
- Expanding technical and volunteer personnel to improve service delivery.
- Enhancing resource management, including financial, logistical, and technical capacities.
- An anticipatory action approached focused on five key sectors of intervention where activities will be implemented in three different phases including: Readiness, Pre-positioning, and Early Actions.

Priority Areas of Intervention:

Health

Readiness Phase:
To ensure comprehensive, high-quality, and humanitarian healthcare services for returned migrants, standard first aid (SFA) training will be provided. This training, designed for National Society staff and volunteers, will emphasize triage, wound management, trauma care, and basic life support. Utilizing an evidence-based approach with expert instructors, training will include theoretical-practical

methodologies, updated instructional materials (manuals, videos, and simulation equipment), and hands-on skill-building sessions. These efforts will strengthen personnel competencies, ensuring a timely and effective health response.

Also, the "Caring for the Caregivers" program will be implemented to strengthen the emotional resilience of HRC volunteers and staff, ensuring sustainable and high-quality interventions. This initiative will equip frontline responders with the emotional support and coping strategies necessary to manage complex humanitarian situations effectively.

Early Actions:
Primary healthcare services will be reinforced, ensuring the availability of medical care, nursing services, and first aid. A structured triage system will be implemented to optimize patient flow and minimize waiting times. Additionally, sustained access to medical supplies will be secured through HRC procurement mechanisms and external funding sources.

Healthcare services will be provided through Mobile Humanitarian Service Points (HSPs), strategically located to facilitate migrant access. Special attention will be given to mental health support, integrated into the mental health and psychosocial support Program to address trauma-related challenges.

Also, a structured psychosocial support program will be deployed to provide direct mental health services to returned migrants and individuals displaced by violence. Given the gaps in mental health services at the national level, early risk factor identification—including post-traumatic stress and social vulnerability—will be prioritized to prevent long-term psychological distress.

Currently, the National Society has volunteers and staff trained and updated in mental health and psychosocial support (MHPSS), achieved through other funds. This ensures that there is a qualified team available for this operation and a broader network to draw upon if necessary.

The intervention includes:
- Psychological counseling and therapy sessions.
- Structured referrals based on a mapped network of key service providers across the country.
- Remote and in-person support through HRC's trained psychosocial support volunteers to bridge the gap in professional mental health service availability.
- This dual approach ensures that both humanitarian workers and beneficiaries receive essential psychological support, fostering a resilient and dignified reintegration process for returned migrants.

Water, Sanitation, and Hygiene (WASH)
The WASH strategy aims to ensure safe water access and improve hygiene conditions for vulnerable populations in reception centers and temporary shelters.

Early Actions:
- Installation of strategically located water access points to provide a consistent and safe water supply. These installations will adhere to minimum dignity, accessibility, participation, and safety standards to ensure usability for all individuals, including those with disabilities.
- Distribution of hygiene kits tailored to age and gender-specific needs. These kits will include essential supplies such as soap, sanitary pads, disinfectants, and other hygiene products, ensuring health and dignity maintenance.

Protection, Gender, and Inclusion (PGI)
This strategy aims to ensure protection, inclusion, and equity in humanitarian response, prioritizing vulnerable groups.

Readiness Phase:
- Workshops on Protection, Gender, and Inclusion (PGI) will be conducted for staff, volunteers, and key stakeholders.
- Dissemination of the Protection Against Exploitation, Abuse, and Sexual Harassment (PEAS) Policy to ensure adherence to protection standards.
- Updated actor mapping and service referral pathways will be developed to enhance the identification and referral of individuals with specific protection needs, particularly those affected by violence and forced displacement.

Early Actions:
- Restoring Family Links (RFL) services will be provided, including access to the RedSafe Humanitarian Platform to ensure safe and reliable information about available humanitarian and government services.

Community Engagement and Accountability (CEA)

Readiness Phase:
- Volunteers and staff will receive community engagement training, equipping them with the skills to identify information gaps and specific communication needs among migrant populations.
- Review and adjustment of existing communication materials will ensure context-relevant messaging based on an updated stakeholder

mapping.
- Training sessions will be integrated into sector-specific response areas, ensuring community engagement is embedded in all intervention aspects.

Early Actions:
- Implementation of the Honduran Red Cross Feedback Mechanism, allowing returned migrants to express concerns regarding the services received. This mechanism will assess service satisfaction levels and identify unmet basic needs requiring immediate adjustments.
- Feedback channels will include phone calls, text messaging, and email.
- Context-appropriate participatory tools will be applied based on the specific needs of the migrant population.
- Development and distribution of information materials outlining service eligibility criteria, available assistance, and key points of contact for migrants seeking support.

The planned CEA actions will not require additional funding for implementation, as the National Society already has established materials and communication channels within its structure. These resources will only need to be adapted to the specific needs of individuals affected by the emergency. Additionally, the National Society has a designated CEA focal point, responsible for leading and overseeing these activities, ensuring their effective implementation and alignment with operational priorities.

This operational strategy ensures a coordinated, evidence-based, and needs-driven response to the urgent humanitarian challenges faced by returned migrants in Honduras. Through the integration of health services, mental health support, water, sanitation, and hygiene (WASH), protection, and community engagement, the Honduran Red Cross aims to bridge critical service gaps and strengthen the dignity, safety, and resilience of affected populations.

Strategic alignment with government entities and humanitarian partners will further enhance coordination mechanisms, ensuring that interventions are sustainable and effectively adapted to the changing needs of returned migrants.

Likewise, the National Society will organize a structured workshop to review, analyze, and document key learnings from the anticipatory action phase. This process will help identify best practices, challenges, and areas for improvement, with the goal of strengthening and optimizing future humanitarian response efforts.

It is important to highlight that 58% of the total budget is allocated to operational expenses, compared to support costs. This distribution reflects the high mobilization costs for volunteers, given the extensive geographic coverage required for planned interventions. The logistical demands of reaching remote areas significantly impact transportation and deployment expenses, making operational funding critical to ensuring an effective and timely humanitarian response.

Targeting Strategy

Who will be targeted through this operation?

The Honduran Red Cross will implement the actions outlined in this IFRC-DREF operation, focusing on returned migrants located at the border points of Agua Caliente (Ocotepeque), Corinto (Omoa), and El Florido (Copán), as well as at the Returned Migrant Assistance Centers (CAMR) in Omoa, Belén (San Pedro Sula), and San Pedro Sula. Additionally, should the needs increase, Goloson Airport (La Ceiba) and Palmerola International Airport (Comayagua) have been considered as additional points.

The intervention is expected to reach 4,000 people, based on internal analyses conducted by the National Society, using data from official primary and secondary sources. These estimates reflect the scale of identified needs and the planned operational capacity to ensure an effective and timely humanitarian response.

Explain the selection criteria for the targeted population

The actions proposed in this IFRC-DREF operation are primarily targeted at returned migrants who fall under the following conditions:

Unaccompanied Children and Adolescents: Individuals under 18 years of age who are outside their country of origin, either in transit or in the process of return, without the presence of a legally responsible adult. This category also includes minors who, despite being accompanied, have been separated from their primary caregivers.

Pregnant and Lactating Women: Women who are either pregnant or breastfeeding and face extreme vulnerability during the migration process and upon returning to their communities of origin. These individuals require specialized support to address their health and nutritional needs.

Women Survivors of Violence: Women who have experienced gender-based violence, sexual exploitation, physical abuse, human trafficking, or psychological violence either during migration or after returning to their communities. These individuals often face significant protection risks and require immediate assistance.

Individuals with Urgent Medical Needs or Disabilities: This group includes migrants with critical health conditions, chronic illnesses, and physical, sensory, intellectual, or psychosocial disabilities that require priority attention during the return process. These individuals face multiple challenges due to their health conditions, as well as physical, social, and economic barriers that impact their well-being both during migration and upon reintegration into their communities.

Returned Migrants Facing Imminent Risks of Violence or Internal Displacement: Individuals who, upon returning to their country of origin, are exposed to high levels of insecurity, violence, and threats that endanger their safety, well-being, and stability. This group requires urgent protection measures to prevent further displacement and ensure their access to safe living conditions.

Total Targeted Population

Women	1,400	Rural	70%
Girls (under 18)	400	Urban	30%
Men	1,800	People with disabilities (estimated)	1%
Boys (under 18)	400		
Total targeted population	4,000		

Risk and Security Considerations (including "management")

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

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

Risk	Mitigation action
Limited Reception Centers and Inadequate Assistance Spaces	Strengthening collaboration with relevant stakeholders to identify and secure safe spaces for the reception and assistance of returned migrants, ensuring adequate conditions for humanitarian response. Providing appropriate Personal Protective Equipment (PPE) to all personnel and ensuring its correct use through targeted biosecurity training. These measures aim to minimize exposure to infectious diseases and environmental hazards, safeguarding the health and well-being of response teams.

Overload of Reception and Assistance Capacity	Implementing rotational shifts to ensure balanced workloads, along with an equitable distribution of tasks and responsibilities among personnel. This measure aims to prevent excessive fatigue and reduce the risk of burnout. Enforcing strict adherence to safe work schedules and secure transportation protocols, including the use of officially identified institutional vehicles for mobilization. Additionally, security regulations will be disseminated to staff to enhance situational awareness and safe access to operational areas. Providing mental health and emotional support through the "Caring for the Caregiver" methodology. This initiative ensures that frontline workers receive the necessary psychological support to manage stress, improve resilience, and maintain overall well-being.

Please indicate any security and safety concerns for this operation:

Reception of Individuals Linked to Criminal Organizations: The presence of returned migrants associated with kidnapping, extortion, gang recruitment, or drug trafficking networks poses a security risk. Such individuals may attempt to identify humanitarian personnel to extract personal information about beneficiaries, compromising the safety and confidentiality of assistance operations.

Aggressive Behavior from Returned Migrants: Dissatisfaction with government services or the assistance provided may lead to violent reactions from some returnees, resulting in disturbances at reception or shelter centers. These incidents pose a direct threat to staff safety, with the potential for physical harm and operational disruptions.

Political and Socioeconomic Context Challenges: The evolving global and national socio-political climate, coupled with the proximity of internal and general elections, may present challenges in coordination and the effective implementation of planned assistance activities. Political tensions and shifting priorities could impact resource allocation, interagency collaboration, and overall response effectiveness.

The National Society has a cooperation agreement with the Ministry of Foreign Affairs to ensure that all actions are aligned with the guidelines of the law protecting returned populations. Additionally, the National Society will ensure the socialization and updating of the operational communication manual, which includes all basic security considerations.

Has the child safeguarding risk analysis assessment been completed?	No

Planned Intervention

Health

Budget: CHF 48,199
Targeted Persons: 450

Indicators

Title	Target	Actual
Number of individuals receiving primary healthcare services (including medical and psychological assistance).	400	0
Number of volunteers trained in Standard First Aid and Mental Health & Psychosocial Support (SMAPS).	50	100

Progress Towards Outcome

The Honduran Red Cross has strengthened its preparedness and response capacities through the implementation of two key training processes aimed at staff and volunteers from its branches across different regions of the country.

First, two specialized Standard First Aid (SFA) courses and a Training of Trainers (ToT) course in Triage were conducted in two consecutive sessions.

The first session, targeting Regions I and II, was held from March 30 to April 6, 2025, with the participation of 25 volunteers from the branches of Juticalpa, Choluteca, El Paraíso, Siguatepeque, Márcala, Comayagua, Catacamas, Talanga, Yuscarán, Tegucigalpa, Perspire, and Danlí.

The second session, targeting Regions III and IV, took place from May 4 to 10, 2025, with 30 volunteers and technical staff from the branches of Colón, Tela, La Lima, Villanueva, San Manuel, Santa Bárbara, Quimistán, Olanchito, Ocotepeque, Jutiapa, Islas de la Bahía, Las Vegas, Chamelecón, Santa Rosa de Copán, San Luis, Colinas, and Puerto Cortés.

These trainings enhanced skills in triage, wound care, trauma management, and basic life support, using evidence-based methodologies, updated materials (manuals, videos, simulation equipment), and expert instructors. This ensures that staff and volunteers are equipped with the necessary skills to provide timely and effective care in emergency situations.

In parallel, and in coordination with the National Society Mental Health and Psychosocial Support (MHPSS) focal point, two "Caring for the Caregiver" workshops were implemented to strengthen the emotional well-being of frontline volunteers. These workshops were held from March 28 to 30, 2025, in San Pedro Sula and Santa Rosa de Copán, with the participation of 45 volunteers from Regions I and II.

The sessions provided practical tools for stress management, self-care, and building emotional resilience—critical elements for safeguarding the well-being of personnel working in high-pressure humanitarian situations.

Initially, the participation of 50 volunteers was planned for both training processes. However, after identifying capacity-building needs in other prioritized regions, the National Society decided to expand the call, successfully increasing the number of participants.

Water, Sanitation And Hygiene

Budget: CHF 87,022
Targeted Persons: 4,000

Indicators

Title	Target	Actual
Number of individuals with access to safe drinking water for hydration.	4,000	0
Number of individuals receiving gender-sensitive hygiene supplies, including menstrual hygiene products.	4,000	0

Progress Towards Outcome

The Honduran Red Cross has completed the procurement of 4,000 bottles of water, which are now pre-positioned in the National Society central warehouse, ready for distribution in the event of early action activation.

In addition, the purchase of 4,000 differentiated hygiene kits has been completed, distributed as follows: 2,500 for men, 500 for women, 500 for children, and 500 for infants, all of which are already pre-positioned in the central warehouse.

Furthermore, the National Society is in the final stages of procuring 1,800 menstrual hygiene kits, which are still pending delivery by the supplier. Once received, they will be stored in the central warehouse of the National Society.

Protection, Gender And Inclusion

Budget: CHF 6,752
Targeted Persons: 400

Indicators

Title	Target	Actual
Number of individuals who receive information and utilize Restoring Family Links (RFL) services to reconnect with their families.	400	0
Number of individuals identified and safely referred for specialized protection services, with a focus on violence and forced displacement.	50	0
Number of volunteers trained in PGI in emergencies, who sign the PEAS policy.	25	45

Progress Towards Outcome

The Honduran Red Cross has strengthened its protection capacities through the implementation of an update process delivered in two in-person sessions, held in San Pedro Sula and Santa Rosa de Copán, targeting volunteers providing assistance in migration contexts.

These sessions focused on key topics such as the presentation of the national migration context, the dissemination of the Prevention and Response to Sexual Exploitation, Abuse, and Harassment (PSEAH) Policy, vulnerability analysis, and the identification and safe referral of cases. During the sessions, it was verified that all participants had signed the PSEAH policy, reaffirming the institutional commitment to safeguarding. A total of 45 volunteers actively participated in this capacity-building process.

Additionally, the National Society updated the mapping of organizations and key actors present in the field, involved in protection and humanitarian assistance, with the aim of strengthening safe referral pathways and coordination mechanisms. This effort ensures that updated information is available to enable a more coordinated response and more effectively safeguard people in vulnerable situations.

Initially, the participation of 50 volunteers was planned. However, due to scheduling constraints, the targeted number of participants was not reached. Nevertheless, with the requested extension, the National Society has planned to conduct an additional virtual session, which will expand coverage and engage more volunteers, allowing their participation from different regions.

Community Engagement And Accountability

Budget: CHF 0
Targeted Persons: 3,200

Indicators

Title	Target	Actual
Percentage of satisfaction among returned migrants regarding the services provided.	80	0
Number of volunteers trained and updated in CEA, with a specific focus on feedback mechanisms.	50	45

Progress Towards Outcome

With the aim of strengthening its accountability processes, both internally and toward communities, the Honduran Red Cross implemented two refresher sessions on the feedback mechanism and channels used by the National Society under the Community Engagement and Accountability (CEA) framework, with a particular focus on migration contexts.

The purpose of these sessions was to ensure that participants understood the functioning of the feedback mechanism and channels, and to establish internal communication lines for the proper handling of complaints, concerns, or comments received from communities.

The sessions were held in person in San Pedro Sula and Santa Rosa de Copán on 5 and 6 April 2025, respectively, with the participation of 45 people. Initially, the participation of 50 volunteers was planned. However, due to scheduling constraints, the targeted number of participants was not reached. Nevertheless, with the requested extension, the National Society has planned to conduct an additional virtual session, which will expand coverage and engage more volunteers, allowing their participation from different regions.

Secretariat Services

Budget: CHF 4,276
Targeted Persons: 0

Indicators

Title	Target	Actual
Number of field monitoring visits conducted.	2	0

Progress Towards Outcome

Currently, technical monitoring and support have been conducted virtually through regular sessions with the implementing team, and no field monitoring visit has taken place so far. With the requested extension, a field visit is planned to verify the progress and completion of the planned preparedness and pre-positioning activities, as well as to provide closer and more tailored support based on the needs identified by the National Society. This visit will also contribute to strengthening operational capacities on the ground, ensuring that the team is better prepared in the event that early action measures are triggered.

National Society Strengthening

Budget: CHF 3,001
Targeted Persons: 0

Indicators

Title	Target	Actual
Number of lessons learned workshops conducted.	1	0

Progress Towards Outcome

The lessons learned workshop has not yet been conducted, in line with the submitted extension request. This workshop is scheduled to take place in early September 2025, after the planned preparedness and readiness activities have been completed, including, if applicable, the implementation of early actions should any of the defined triggers materialize.

About Support Services

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

A total of 50 Honduran Red Cross volunteers will be mobilized to support both the IFRC-DREF operations and humanitarian assistance activities at designated service points. These volunteers will form specialized teams trained in Protection, Gender, and Inclusion (PGI); Community Engagement and Accountability (CEA); First Aid; Safe Water Access; and Hygiene Promotion, ensuring a response aligned with identified needs.

Additionally, 10 staff members from the National Society will be deployed to ensure the effective implementation of the operation. These specialists have expertise in emergency operations, human trafficking, Mental Health and Psychosocial Support (MHPSS), emergency health, Water, Sanitation, and Hygiene (WASH), Restoring Family Links (RFL), Information Management (IM), and CEA. Their knowledge will contribute to strengthening the operational capacities of the Returned Migrant Assistance Centers (CAMR) and humanitarian service points, ensuring an efficient and well-coordinated response.

For this operation, insurance for volunteers has not been included in the budget, given that the National Society already has an emergency fund for volunteers active in operations, as well as social security and life insurance coverage for staff.

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?

Among the volunteers identified for mobilization in the event that early actions are triggered, the Honduran Red Cross has a diverse team in terms of gender, age, and representation from different regions of the country, with experience and awareness in providing assistance to migrants regardless of their legal status.

These volunteers are familiar with the internal channels established to raise questions or report situations where they feel uncomfortable, ensuring they have access to support and that the "do no harm" principle is upheld.

Additionally, this group of volunteers has previous experience in humanitarian operations related to human mobility, and has participated in training and refresher sessions on Protection, Gender and Inclusion (PGI), Community Engagement and Accountability (CEA), Mental Health, and other relevant topics, enhancing their ability to provide safe, inclusive, and needs-based support to affected people by crisis.

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

All planned procurements outlined in the National Society Action Plan have been carried out locally, in line with supplier capacity and market availability. The Honduran Red Cross has a well-established procurement structure for goods and services, with defined procedures that are fully compatible with the IFRC system. Additionally, the National Society has a spacious and secure warehouse for the storage and safeguarding of the supplies that have been procured.

For this operation, all procurement processes have been conducted in strict compliance with IFRC standard procurement procedures and in accordance with Sphere Standards for the acquisition of diversified hygiene supplies, ensuring quality, efficiency, and accountability in resource management.

How will this operation be monitored?

The monitoring and supervision of activities have been led by the National Society's Monitoring, Evaluation, and Reporting Unit (UMER), which has conducted field verification visits during implementation and another at the end of the project to assess indicators, results, outputs, and activities.

UMER personnel will be responsible for conducting satisfaction surveys following distributions to evaluate the effectiveness of the assistance provided. At the conclusion of the operation, they will also document lessons learned, ensuring continuous improvement in future responses.

Additionally, the National Society has been carrying out both virtual and on-site monitoring in coordination with representatives from the IFRC Delegation for Central America, to ensure that actions are implemented in accordance with the action plan. This monitoring has enabled the timely identification of necessary adjustments and the adoption of appropriate measures to optimize the implementation of activities based on evolving conditions and emerging needs.

Please briefly explain the National Societies communication strategy for this operation

The National Society will also use the operational communication manual as a reference, which specifies The considerations to ensure accurate and Movement-aligned communication. Additionally, the National Society already has communication focal points in each branche, ready to be activated when needed, and they have already been previously trained. Regarding resources (internal bulletins, audiovisual materials, other communication platforms, etc.) to be shared on the official social media of the National Society, these are included in the National Society's communication plan, so no additional funds are required. These will be adjusted to the specific needs of the operation.

Budget Overview

IFRC

DREF OPERATION

MDRHN025 - Honduran Red Cross
Honduras: Population movement

Operating Budget

Planned Operations	**141,973**
Shelter and Basic Household Items	0
Livelihoods	0
Multi-purpose Cash	0
Health	48,199
Water, Sanitation & Hygiene	87,022
Protection, Gender and Inclusion	6,752
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	0
Environmental Sustainability	0
Enabling Approaches	**7,277**
Coordination and Partnerships	0
Secretariat Services	4,276
National Society Strengthening	3,001
TOTAL BUDGET	**149,250**

all amounts in Swiss Francs (CHF)

Internal 2/13/2025 #V2022.01

Click here to download the budget file

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