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Emergency appeal Central America: Hurricane Eta



International Federation
of Red Cross and Red Crescent Societies

Appeal n° MDR43007

Glide n°:

[TC-2020-000218-NIC](#)

[TC-2020-000220-HND](#)

[TC-2020-000222-GTM](#)

To be assisted: **15,000 families (75,000 people)**

DREF allocated: **1,000,000 Swiss francs (CHF)**

Funding requirements: **20 million Swiss francs**

Appeal launched: **08 November 2020**

Appeal ends: **30 November 2022 (24 months)**.

This Emergency Appeal seeks 20 million Swiss francs to enable the IFRC to support the **Honduran, Nicaraguan and Guatemalan Red Cross** to deliver assistance and support early recovery of the people affected by the Hurricane Eta for **24 months**, with a focus on the following areas of focus and strategies for implementation: **Shelter; Livelihood and basic needs; Health (including Mental Health and Psychological Support); Water, sanitation and hygiene; Protection, Gender and Inclusion; Migration; Strengthening the National Society, Ensuring effective international disaster management, Influencing others as leading strategic partner and Ensuring a strong IFRC.** In addition, the **Belize Red Cross, Costa Rican Red Cross and Panamanian Red Cross** are developing Emergency Plans of Action (EPoA) to request DREF funds. The planned response reflects the current situation and information available at this time of the evolving emergency and will be adjusted based on further developments and more detailed assessments. Emergency Response Units and Rapid Response Personnel has been requested by Honduras Red Cross. [Click here for the funding requirements and contact information.](#)

The disaster and the Red Cross Red Crescent response to date

31 October 2020: Hurricane Eta originated as a tropical wave in the eastern Caribbean Sea.

3 November 2020: Eta intensified into a major hurricane reaching Category 4 strength and made landfall south of Puerto Cabezas, Nicaragua.

4 November 2020: Eta weakened to a Tropical Storm as it moved slowly westward Nicaragua towards Honduras. IFRC launched a [DREF Operation \(MDRNI020\)](#) to support Nicaraguan Red Cross in the amount of 439,928 Swiss francs to assist 2,000 families (10,000 people).

5 November 2020: Eta moved towards Guatemala and the Honduran government requested international assistance.¹ The Guatemalan government declared a state of emergency in the departments of Petén, Quiché, Alta Verapaz, Izabal, Chiquimula, Zacapa, Jutiapa, El Progreso, and Santa Rosa.²

6 November 2020: Tropical depression Eta re-entered the Caribbean Sea and is expected to pass over Cuba.



Photo: Honduran Red Cross (HRC) volunteers help to evacuate residents near rivers and streams in the community of Taulabe.
Source: HRC, 5 November 2020.

¹ Honduran Red Cross. 5 November 2020.

² [Prensa Libre. Decretan Estado de Calamidad por Eta y estas son las medidas que regirán en nueve departamentos. 5 November 2020.](#)

08 November 2020: IFRC issues an Emergency Appeal for 20 million Swiss francs to assist 15,000 families (75,000 people) to support the Guatemalan, Honduran and Nicaraguan Red Cross.

The operational strategy

Summary of Red Cross response to date

The **Nicaraguan Red Cross (NRC)** prepared and carried out preventive actions before the arrival of Eta reviewing its inventory and activation of its institutional response teams. The National Society sent out alerts to the areas that were at risk prior to the hurricane's arrival, specifically in the areas of direct impact such as Puerto Cabezas, Jinotega, Ocotal, and Chinandega. Local contingency plans were activated in branches with red and yellow alerts. Information on resources (tools, equipment, mapping of capacities) was updated.

After impact, the National Society has been participating in meetings with municipal actors to coordinate the response. The National Society has been supporting the evacuation of families and a team was deployed to assess the needs of the affected areas. The team was composed of one Regional Intervention Team member, one National Intervention Team specializing in Water and Sanitation, and a logistician.



*Photo: Nicaraguan Red Cross (NRC) relief team and emergency unit support the cleaning of roads obstructed by debris and trees dragged by the currents in the Juan Davila, El Coyo, and Limon regions.
Source: NRC, 3 November 2020.*

Unfortunately, the team has been faced with many challenges to enter the affected areas due to flooding and the authorities' preventive measures to wait until the rains ended. While access to the territory is restored, the National Society has been preparing the distribution of household items and water purification pumps. Pre-positioned household items at the headquarters include hygiene kits, kitchen, blankets (for about 1,000 – 2,000 people). The National Society has been actively coordinating with the government and developing a strategic relationship with them to guarantee efficient national coordination. Similarly, the National Society has met with Movement Partners, IFRC ARO and donors including Walmart, GVC Germany and World Central Kitchen.

On 2 November, the **Honduran Red Cross (HRC)** activated over 150 volunteers specializing in Disaster Risk Management, Aquatic Rescue, Damage and Needs Assessments (DANA), National Intervention Teams (NIT), Regional Intervention Teams (RIT), National Response Units (NRUs) in Health, Paramedics, Psychosocial Support (PSS), doctors and the Regional Strategic Monitoring Center (CEM) from the branch in Comayagua. These teams assessed the National Society's pre-positioned stock and prepared the response teams to support the local authorities.

The HRC activated its Strategic Monitoring Centers and local branches at the national level and is participating in coordination meetings with the Municipal Emergency Committee (CODEM) and Permanent Contingency Committee (COPECO). All the HRC's 53 branches were activated, initially focused on preventive measures and afterwards in response modality. Two rescue specialized teams were deployed to Sula Valley and Damage and Needs Assessment (DANA) teams were assigned to El Paraiso and Olancho departments. In the upcoming days, new DANA teams will be deployed to the most affected areas in Sula Valley. HRC volunteers are monitoring river levels and high-risk areas and are providing evacuation, rescue, and pre-hospital care and psychosocial support services to the affected people. Field activities and projects are on hold until the emergency passes. The branches in the departments affected by the rain have carried out evacuation and rescue families at risk on the banks of rivers or landslides. These families were taken to temporary shelters throughout the duration of the emergency.

On 5 November, the Government of Honduras requested international humanitarian assistance to address the affected people's immediate needs for recovery, reconstruction of housing, road, and productive infrastructure and the country's agricultural, livestock, and industrial sectors. The government is still working on the detailed

list of the specific needs based on the needs assessment to date. With the IFRC Secretariat's support, the Honduran Red Cross actively participates in the CCAHI³ and advocates for implementing the IDRL recommendations. The final adoption of the IDRL Law was approved in January 2020 in the first debate by the National Congress of Honduras.

The **Guatemalan Red Cross (GRC)** activated its Emergency Operation Center (EOC) and is on institutional red alert in 20 branches. It is coordinating with the National Coordinator for Disaster Reduction (CONRED) system and monitoring the hydro-meteorological conditions in the country and its consequences.

While the tropical depression departed from Guatemalan territory on 6 November, the National Institute of Seismology, Volcanology, Meteorology, and Hydrology (INSIVUMEH) registers continued rains in Alta Verapaz, Izabal, and Petén departments. It is expected that once the heavy precipitation stops, entry by land to isolated areas will be possible. The Guatemalan Armed Forces are entering regions by air as land passage remains difficult in several locations.

The following GRC branches in Puerto Barrios, Santo Tomás de Castilla, Petén, Chiquimula, Cobán, Purulhá, and El Estor have conducted the evacuation of areas at risk, pre-hospital care, transfers of patients to care centres, search and rescue, in support of local authorities, providing psychological first aid and psychosocial support, medical care and delivery of medicines, Restoring Family Links (RFL), and supporting temporary shelter.

Needs assessment and targeting

Tropical Storm Eta originated in the eastern Caribbean Sea and developed into a tropical depression late on 31 October. Eta intensified into a major hurricane before reaching Category 4 strength on 3 November. An eyewall replacement cycle then caused the storm to weaken some, but it remained at Category 4 strength as it made landfall south of Puerto Cabezas, Nicaragua, late on 3 November. Eta rapidly weakened to tropical storm status early on 4 November. Eta has sustained winds of 35 mph (55 kph), and was moving north-northwest at 8 mph (13 kph) on 5 November, west of La Ceiba, Honduras. Although significantly reduced in strength, in Honduras, rivers, and towns on the Atlantic coast flooded, and landslides made roads impassable⁴. It is estimated that Nicaragua and Honduras received 380 to 635 millimeters of rain, with 1,000 millimeters possible in some isolated parts.⁵ The cloud bands from the tropical depression on November 6, has generated heavy rains, strong winds, floods, landslides, and high waves in Guatemala.

On 6 November, in Guatemala, CONRED reported⁶, 81,553 people severely affected, 5,120 people evacuated, and 4,812 people in formal collective centres. Rains from the tropical depression Eta caused a landslide in Quejá village, located in San Cristóbal Verapaz in the Alta Verapaz department. Landslides covered 150 homes, and government sources estimated that approximately 100 people remain missing. Other landslides were reported in Cunén, Quiché, Chinautla, Guatemala, and San Juan Ixcay in Huehuetenango with nine confirmed deaths. The National Institute of Seismology, Volcanology, Meteorology, and Hydrology (INSIVUMEH) of Guatemala reported that in 30 hours over the region of Izabal bordering Honduras, 400 millimeters of rain fell, which is equivalent to a month and a half of rain projections⁷.

³ El manual del Centro de Coordinación de la Asistencia y la Ayuda Humanitaria Internacional

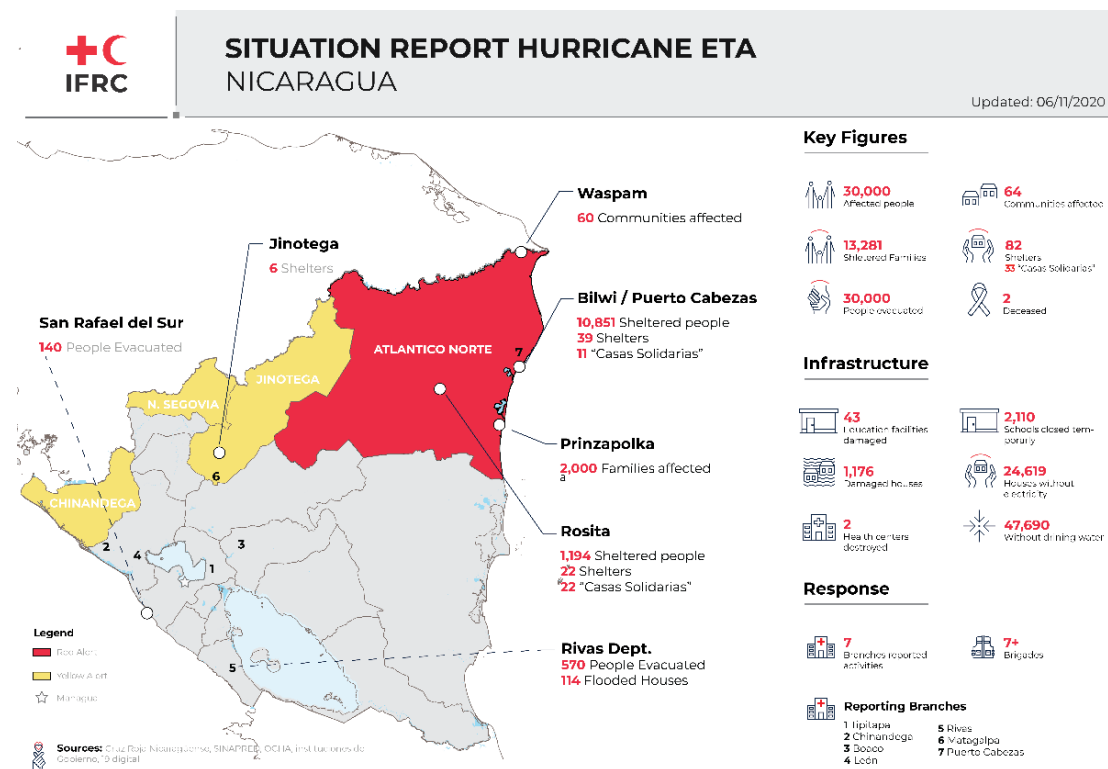
⁴ [AP News](#). Weakened Eta drenches Honduras; could reach Gulf of Mexico. 5 November 2020

⁵ [Marca](#). Huracán Eta: Últimas noticias, trayectoria y daños en Honduras y Nicaragua; muertos y heridos. 7 November 2020.

⁶ [CONRED](#). 6 November 2020

⁷ La Prensa. Eta deja decenas de muertos por derrumbes e inundaciones en América Central. 6 November 2020.

NICARAGUA



Reports so far indicate large property damage, fallen power poles, destroyed roofs, and rivers' flooding, particularly in Prinzapolka River (Prinzapolka) which flooded on 6 November and Grande River (La Cruz del Rio Grande) which since 4 November had high probabilities of overflowing. It was the amount of water which is causing significant damage and devastation. Isolated maximum storm totals of 40" (1,000 mm) in eastern Nicaragua 8.

Initial reports indicate the following damages:

- Damage to the dock in Puerto Cabezas Bilwi.
- Damage to the 31 road infrastructures and lack of access to Bilwi and Waspam due to the Wawa rivers' flooding⁹.
- Damage to the electrical systems
- Damage to 43 educational centres.
- Damage to 3 vocational centers in Bilwi, Ticuantepe and San Rafael del Sur.
- Damage to 1176 houses.
- Damage to 74 artisan fishing boats in Bilwi and the Southern Caribbean Coast¹⁰.
- Several families without access to water service due to water turbidity and loss of water systems
- Roofs of homes destroyed.
- Wawa Bar community destroyed in its totality, however no reports on the loss of human lives yet.
- Environmental destruction.



Photo: Nicaraguan Red Cross (NRC) doing house damage assessments caused by Hurricane Eta. Source: NRC, 3 November 2020

Note that this is initial information and data is constantly being revised by the authorities and the National Society.

8 [Netweather](#). 5 November

9 [19 Digital](#). Declarations from Vice-president of Nicaragua, 5 November

10 [19 Digital](#). Report from the Fishing Institute, 5 November

Another affected area with flooded communities and swollen rivers is the department of Rivas and the municipality of San Rafael del Sur due to low pressure in the Pacific Ocean, which has left flooded communities and families in collective centers.

Shelter: Winds of more than 240 km/h and intense rains caused material damage in neighbourhoods and communities in different municipalities in the Northern Caribbean.¹¹ One of the most affected communities is Wawa Bar, located south of the municipality of Puerto Cabezas¹².

There is infrastructure damage on roads¹³, docks, 9 schools, parks, 2 local markets, and the Nicaraguan Red Cross branch in Bilwi due to flooding, falling trees and strong winds.

Around 30,000 people were evacuated from affected areas in the country to collective and community centers¹⁴ and some to houses with friends and family members with safer structures.

There are 14,362 people registered in collective centers that need support to ensure minimum comfort and to establish proper hygiene conditions to comply with protection and physical distancing measures due to COVID-19. There is also the need for basic items to meet immediate needs, such as blankets, personal hygiene items, etc. The National System for the Prevention, Mitigation and Attention to Disasters (SINAPRED) reported that the Nicaraguan government sent 88 tons of food to the Northern Caribbean region and teams to attend emergencies with power lines, communications, infrastructure, and health.¹⁵

Some of the families in the collective centers are gradually returning to their homes, as well as carrying out clean-up work in their homes and will need support of materials and labor work to repair their homes.

A series of teams from the government and the Nicaraguan Red Cross are conducting damage assessments in the communities, especially in the southern part of Bilwi.¹⁶

Livelihoods and essential needs: Nicaragua is currently going through the economic effects of the COVID-19 mobility restrictions and neighbouring countries' lockdowns. Self-quarantine measures adopted by the population also contributed to the contraction of economic activity in which many livelihoods and businesses have been affected by the outbreak. For example, the labour participation rate fell 4% in the second quarter of 2020¹⁷.

The full magnitude of the damage caused by Eta to small local businesses, agricultural, fishing, tourism, and service activities cannot yet be determined. It is estimated that they will be significant, considering the current economic crisis in the region. Damage to fishing artisan boats, small businesses' infrastructure, agricultural production activities, and access routes to markets is expected, which will make it difficult to restart these activities. Families will most probably lack the resources to buy basic products in the market. This could lead to negative coping strategies, such as reducing diet or selling work tools.

Several families have been suffering from the depletion of their income and savings in recent months due to the social and economic impact of COVID-19. The remittances level has suffered a significant decrease in the first quarter of the year (-9.1%), recovering in the second semester (5.6%). Despite this, it is expected that the effect of the crisis and the impact of the hurricane in the region will affect remittances in the remainder of the year (almost 20% of them come from neighbouring countries)¹⁸.

Health: Due to the limited access to the most affected areas there is no accurate information on the specific health needs at the time of writing this Emergency Appeal. Usually, primary health centers get destroyed or

Department	Municipality	Collective Centers		People in Collective Centers	
		Authorized Collective Centers	Community Centers	Families	People
Costa Caribe Norte	Puerto Cabezas	39	11	--	10,851
Costa Caribe Norte	Bocana de Pailvas	1	--	13	49
Costa Caribe Norte	Mulukuku	1	--	31	150
Costa Caribe Norte	Siuna	3	--	41	117
Costa Caribe Norte	Bonanza	4	--	54	274
Costa Caribe Norte	Rosita	22	--	499	1,930
Jinotega	Jinotega	13	6	59	276
Nueva Segovia		5	1	16	59
Managua		1	--	102	340
Madriz		1	2	6	25
Rivas	Rivas	1	1	80	291
Totals		91	21	841	14,362

11 [El 19 digital](#). Eta el Huracán que impacto el Caribe de Nicaragua.

12 [Nicaragua investiga](#). The houses were taken by the sea: Devastation in the Wawa bar community after ETA.

13 [El 19 digital](#). Hurricane Affects Stage and Response Actions by the MTI.

14 [OCHA](#). Central America: Tropical Depression Eta: Impact and Potential Needs Snapshot (As of 5 November 2020).

15 [El Tiempo](#). Huracán Eta toca tierra en la costa noreste de Nicaragua. 3 November 2020.

16 [SINAPRED](#). Eta leaves Nicaragua and goes to Honduras as a tropical depression.

17 [Central America Data](#). Nicaragua: Empleo formal cae 4%. 19 October 2020.

18 [Banco Central de Nicaragua](#). Informe Trimestral de Remesas. Second quarter 2020.

partially damaged in the most affected areas, bringing an important barrier to the closest basic health services during the emergency. It is also expected that under these conditions, there will be a lack of health personnel assigned to local structures since there are issues of access and prioritization to individual and family property and security. In addition, people temporarily staying in collective centers require on-site health care, especially in the context of COVID-19. There is a need to strengthen the prevention and control measures for the transmission of COVID-19, especially with the potential of a deterioration of access to adequate hygiene, lack of proper water and sanitation (diarrheal diseases), exposure to humidity and cold (acute diseases of the respiratory tract), and the proliferation of vectors of communicable diseases (dengue, chikungunya, Zika, malaria). It is important to mention that in the immediate aftermath of a hurricane, the risk of contracting dengue or other vector borne disease may decrease due to the destruction of the breeding places of local vectors. However, it is likely that as the situation changes a few weeks later; for example, the destruction of aqueducts, it will force the population to accumulate fresh water in temporary containers, which are an ideal breeding ground for mosquitoes that transmit dengue. Therefore, it is extremely important to have an early warning and alert system in place as well as timely, accurate and appropriate information about vector-borne prevention and control measures in local languages.

It is crucial to ensure the continuation of adequate care for at-risk populations, such as children under five years of age, pregnant and lactating women, people with disabilities, and the elderly population with chronic diseases. During the disaster people were exposed, and continue to be, to high levels of stress and trauma caused by the effects of the hurricane, evacuations, separation from family members, loss of life, homes and livelihoods. The psychosocial needs of the affected people will be addressed in the collective centers and in the affected communities to reduce the impact of the event including mental health, psychosocial support and Psychological First Aid interventions to reduce the stress and cope with loss and grief and promote the resilience.

The estimated priority needs include:

- People and communities affected by severe rain, flash floods, landslides, need first aid during rescue and transfer to collective centers.
- People with severe injuries or medical conditions are in need of specialized pre-hospital emergency care and adequate medical transport to reference health centers (stable or deployed ad hoc).
- Temporary collective centers need to ensure primary health care with particular attention to children under five, pregnant women, the elderly, and those with chronic diseases.
- Efficient referral between collective and health centers, and hospitals for cases that require advanced care and attention.
- Communities need to establish and strengthen community epidemiological surveillance with particular attention to COVID-19 and outbreaks of communicable diseases (vectors, water, and other prevalent and potentially serious ones: measles).
- Provide services of First Aid and pre-hospital care in collective shelters and sanitary facilities.
- Public Health Information Management (PHIM) tools to monitor, identify, and give a significant and rapid response to emerging health problems.
- PPE for both respondents and general population to ensure the maximum standards on COVID-19 prevention protocols.
- Provide Psychological First Aid and other psychoeducation activities to cope with stress, loss and grief, as well as establishing a referral pathway to advanced services for the most complex cases will be also crucial in shelters and in the affected communities.
- Identify the people with pre-existing mental health conditions that needs access to permanent medicine treatments.
- Provide safe and supportive friendly spaces for children and teenagers in the collective centers to attend the psychosocial issues and traumatic experience passes due to the complexity of traumatic event.
- Establish PSS systems to attend the psychosocial needs of volunteers and staff to cope with stress and loss.
- Support the affected communities to establish a community self-help and social support network to promote resilience and deal and be prepared to reduce the impact of the climate change in the well-being of the population.

Water Sanitation and Hygiene: Water Supply disruption in areas of **Nicaragua** due to high presence of turbidity in the water systems. As of 4 November, 47,690 people have been affected in Bilwi, Waspam, Matagalpa, Nueva

Segovia, and Masaya by a lack of access to drinking water due to the turbidity of the waters because of flooding of rivers from different sources and the lack of electric service that does not allow pumping¹⁹.

Waste management, cleaning, and purification of water sources are urgently needed. Sanitation systems are still in need of assessment, particularly smaller household level systems in areas that are difficult to access since the hurricane. Debris clearing and waste management assistance is also a priority.

Monitoring of acute watery diarrhoea should be implemented urgently. It is estimated that vector borne diseases will be high. Initially such disaster often flush away mosquito breeding sites but after water recedes and environmental condition worsen, breeding sites and mosquito population increase. In addition, the debris and solid waste disposal in this post disaster environment create ideal conditions for vector such as rats which also carry disease.

Protection, Gender, and Inclusion (PGI): The population of Puerto Cabezas is very heterogeneous, due to its multi-ethnic character, where 72.3% belongs to the Miskito ethnic group, 21.7% to the mestizo ethnic group, 5.7% to the Creole ethnic group and 0.3% to the Sumu ethnic group; there is a total of 46 indigenous communities in the municipality and this creates the necessity to have a multicultural approach in the response, including not only adaptations in the shelters but also in the information to be provided.

According to research of local universities, the communities have shown high rates of domestic violence, intimate partner violence and gender-based violence including pregnancy in girls and adolescents with high rates of femicides compared to other regions²⁰, protection risks that are very likely to increase during this emergency. Around 500,000 children affected will face risks such as psychosocial impact, separation from their caregivers and protection.

Migration: Migrants and displaced persons are more vulnerable to losing contact with their families amid crises such as the current one which generates a breakdown in contacts owing to communication failures, the Nicaraguan Red Cross will evaluate the need to re-establish contact between family members.

Although there is no information on the migration sector's needs, the potential routes and the impact that the hurricane may generate in the main affected areas in terms of displacement will be evaluated. Currently, there are no government records of the number of people in Nicaragua who move internally. The country is considered a transit zone for regional and extra-continental migrants, as it is part of the migratory route from Panama to the Northern Triangle of Central America and later to North America, so there is a probability that migrants in transit are stranded in some unknown areas or unidentified areas.

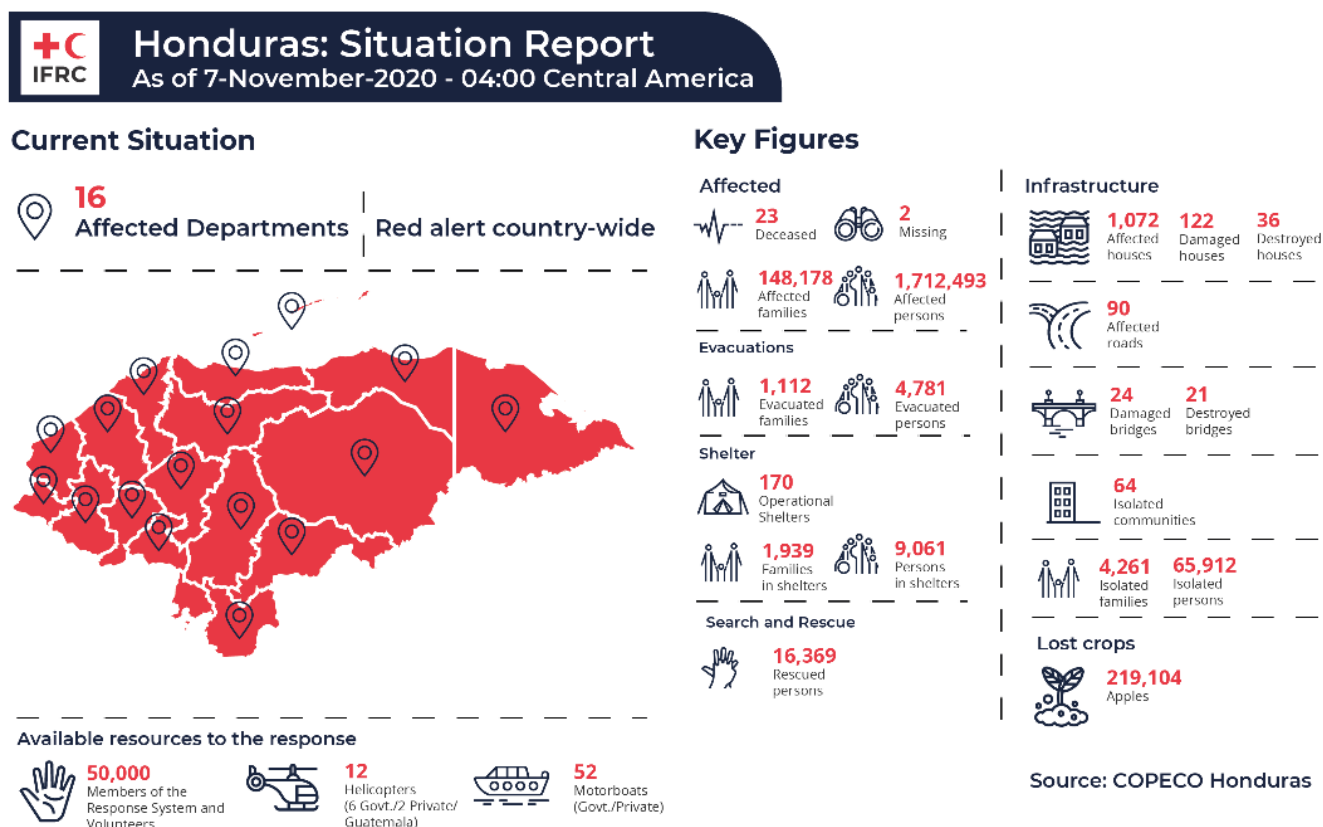
¹⁹ [ENACAL](#). Avances del trabajo que están haciendo tras el paso del huracán Eta

²⁰ [Uraccan](#)

HONDURAS

According to the United Nations Institute for Training and Research UNOSAT, based on the forecasted tropical cyclone path of wind speeds zones and population data, 9.5 million people were exposed to Tropical Storm Eta in Central America. In Honduras, about 1% of the population lives inside the path of a wind speed zone of 60-120 km/h, and 11% live inside the wind speed zone below 60 km/h.

Preliminary reports from communities near the Atlantic indicate that Eta has caused disruptions in the power supply. As of noon November 4, COPECO has all Honduran departments under red alert. As of 7 November, it is estimated that about 1,712,493 people have been directly affected²¹.



Shelter: COPECO reports that as of 7 November, 1,112 families have been evacuated (4,781 people). 170 collective centers have been established accommodating a total of 1,939 families (9,061 people).

The damage to houses is substantial: 1,072 houses affected, to date 122 houses damaged and 36 destroyed. There is damage to bridges and roads and about 600 landslides reported, that have left 64 communities isolated.

Due to the magnitude of the damage, the Secretary of Infrastructure and Public Services (INSEP) and the Institute for Community Development and Water and Sanitation (IDECOAS) have divided the country into three regions to deal with the rehabilitation of roads, highways, and destroyed water and sanitation systems. The priority is to save human lives.

On 5 November, COPECO published on [social media](#) a list of collective centers set up in the departments of La Paz, Yoro, Francisco Morazán and Cortes sheltering 325 families (2,131 people). On 7 November, [El Heraldo](#) published that more shelters were habilitated in the Sula Valley, housing people from the most affected areas, such as La Lima, Villanueva, Choloma and Pimienta.

²¹ CEPREDENAC. Informe de Situación Tormenta Tropical ETA. 5 November 2020.

Livelihoods and basic needs: According to OCHA, countries in Central America are suffering a triple-impact from Hurricane Eta, COVID-19, and a pre-existing humanitarian crisis²². Before the COVID-19 pandemic hit, about 1.3 million people already needed assistance in Honduras at the beginning of this year, primarily in the food security, health, protection, and water and sanitation sectors.

The impact of COVID-19 has already affected all income-generating activities due to the restrictions to control the spread of the virus, with a 51 per cent reduction in employment of the population. According to the Comprehensive Vulnerability Monitoring (CVME) carried out by the World Food Programme²³, 88% of those surveyed are facing the crisis using negative coping strategies; of which the most used are reduction of rations or number of meals, having a direct impact on the stated nutritional requirements, compromising the adequate intake of foods to maintain health.

The rains have caused flooding in urban and rural areas, affecting the most vulnerable people with greater force, damaging their homes, and making it difficult to access basic services (water, electricity). Floods have also affected local commerce, agriculture, and self-employment. Government reports²⁴ more than 32,000 hectares of agricultural land flooded, with the loss of rice, beans, sugar cane, fruit trees, and other crops. This affects the population's livelihoods and food security, causing the irreversible survival strategies described above to be exacerbated. The most vulnerable people require immediate assistance to meet their basic needs, protect and recover their livelihoods, so reduce the risk of irreversible coping strategies.

Health: Limited access to the most affected areas currently limits having accurate information on specific health needs. Usually, primary health centers get destroyed or partially damaged in the most affected areas, bringing an important barrier to the emergency's closest basic health services. It is also expected that under these conditions, there will be a lack of health personnel assigned to local structures since, as affected population too, issues of access or prioritization to individual and family property and security are not unusual. Also, people temporarily housed in collective centers require on-site health care, especially in the context of COVID-19. There is a need to strengthen the prevention and control measures for the transmission of COVID-19, especially with the potential deterioration of access to adequate hygiene, lack of proper water and sanitation (diarrheal diseases), exposure to humidity and cold (acute diseases of the respiratory tract), and the proliferation of vectors of communicable diseases (dengue, chikungunya, Zika, malaria). It is important to mention that in the immediate aftermath of a hurricane, the risk of contracting dengue or other vector-borne diseases may decrease due to the destruction of local vectors' breeding places. It is crucial to ensure the continuation of adequate care for at-risk populations, such as children under five years of age, pregnant women, and the older adult population with chronic diseases.

Most people affected by emergencies will experience distress (e.g., feelings of anxiety and sadness, hopelessness, difficulty sleeping, fatigue, irritability, anger and/or aches and pains). However, the prevalence of common mental disorders such as depression and anxiety are expected to more than double in a humanitarian crisis. A study on the impact of Hurricane Mitch on mental health showed that 10.6% of the respondents had Post-Traumatic Stress Disorder (PTSD).²⁵ The affected population will require further mental health support to assist in recovery.

Water Sanitation and Hygiene: due to the high levels of rainfall, overflowed rivers and high waves caused by this natural phenomenon, accessibility to drinking water becomes an immediate need, as well as sanitation and hygiene measures, in order to prevent the outbreak from other illnesses such as cholera or intestinal, bacterial or parasitic diseases.

In the post-emergency stage and with the return of families back to their communities and homes, work should be done on the water supply and sewerage systems, considering that there has been a severe impact on public infrastructure, which will limit access quality services for a significant amount of time.

On 6 November, the water company [Aguas de San Pedro](#), announced that due to the intense rains, the water service drinking was affected due to two fundamental factors:

- High turbidity in sources (Río Piedras, Santa Ana, El Zapotal, Primavera and Machaguala)

²² [Humanitarian Programme Cycle. Humanitarian needs overview; El Salvador, Guatemala and Honduras addendum: impact of covid-19](#)

²³ [WFP. Situación SAN por efectos del COVID-19, April 2020.](#)

²⁴ [Sigmof.icf.gov.hn](#)

²⁵ [Robert Kohnl; Itzhak Levav; Irma Donaire; Miguel Machuca; and Rita Tamashiro. Psychological and psychopathological reactions in Honduras following Hurricane Mitch: implications for service planning.](#)

- Lack of electricity in some areas of the city and particularly in Chamelecón

On 7 November, the same water company announced that they were able to reactivate the service up to 60 per cent, although there is severe damage in Chamelecon.

OCHA's Situation Report²⁶ from 6 November notes that partners from different humanitarian organizations are preparing to deliver some 40,000 liters of water and deploy 53 officials to non-governmental organizations and United Nations agencies.

Protection, Gender, and Inclusion (PGI): In the context of containment of the epidemic and measures taken, there is a strong probability of aggravation of existing gender inequalities, increasing the harm and risks for women, girls, and people of sexual diversity at home and in the community. The situation could be aggravated twofold in hurricane Eta's context due to overcrowding in collective centres, isolation of communities, and the police and security institutions' workload. According to the Women's Rights Center (CDM)²⁷, there has been an increase in cases of domestic violence since the restrictions for COVID-19 began. This could worsen due to the stress caused by housing, income, and overcrowding in shelters.

According to the "Analysis of the state of the violence and citizen security - First semester 2020"²⁸ from UNDP, the northern and north central areas of the country continue to account for most homicides, particularly the municipalities of Distrito Central, San Pedro Sula, Choloma and El Progreso. Likewise, the municipalities of Distrito Central, San Pedro Sula, Danlí and La Ceiba still account for a third of all injuries in the first semester of 2020.

Although there were fewer homicides in the first quarter of 2020, possibly due to the lockdown measures put in place to prevent the transmission of COVID-19, this still represents a high risk for women, children and humanitarian staff trying to reach these areas to provide support to the most vulnerable.

Migration: The experience with Hurricane Mitch in 1998 shows that the loss of housing and the loss and damage to agricultural areas and/or the means of livelihood fuels unemployment and leads to increased migration toward urban centers²⁹. A recent report from the Associated Press³⁰ shows that as of 1 October, a group of 2,000 Honduran immigrants entered Guatemala testing the recently reopened border that had been shut down due to the pandemic. Of the 16 departments affected, the Comprehensive System for Assistance to Returning Migrants (SIAMIR) indicates that the departments of Cortes, Yoro, and Atlántida are areas with high rates of returning migrants and receiving internally displaced persons, as evidenced by the fact that each of these departments has at least one Municipal Unit for Assistance to Returning Migrants. According to information from SIAMIR, the departments with the most returnees as of July 2020 are Francisco Morazán, Cortés, Yoro, Atlántida, and Olancho, the departments with the most returnees July 2020 are Francisco Morazán, Cortés, Yoro, Atantlida, and Olancho, respectively. Part of the affected regions is migrant transit points. There is no data yet on the number of people in transit or migration centers, but their pre-existing vulnerability conditions expose them to double exposure to emergencies.

²⁶ [OCHA Situation report CENTROAMÉRICA: Tormenta Tropical Eta Informe de Situación No. 1](#)

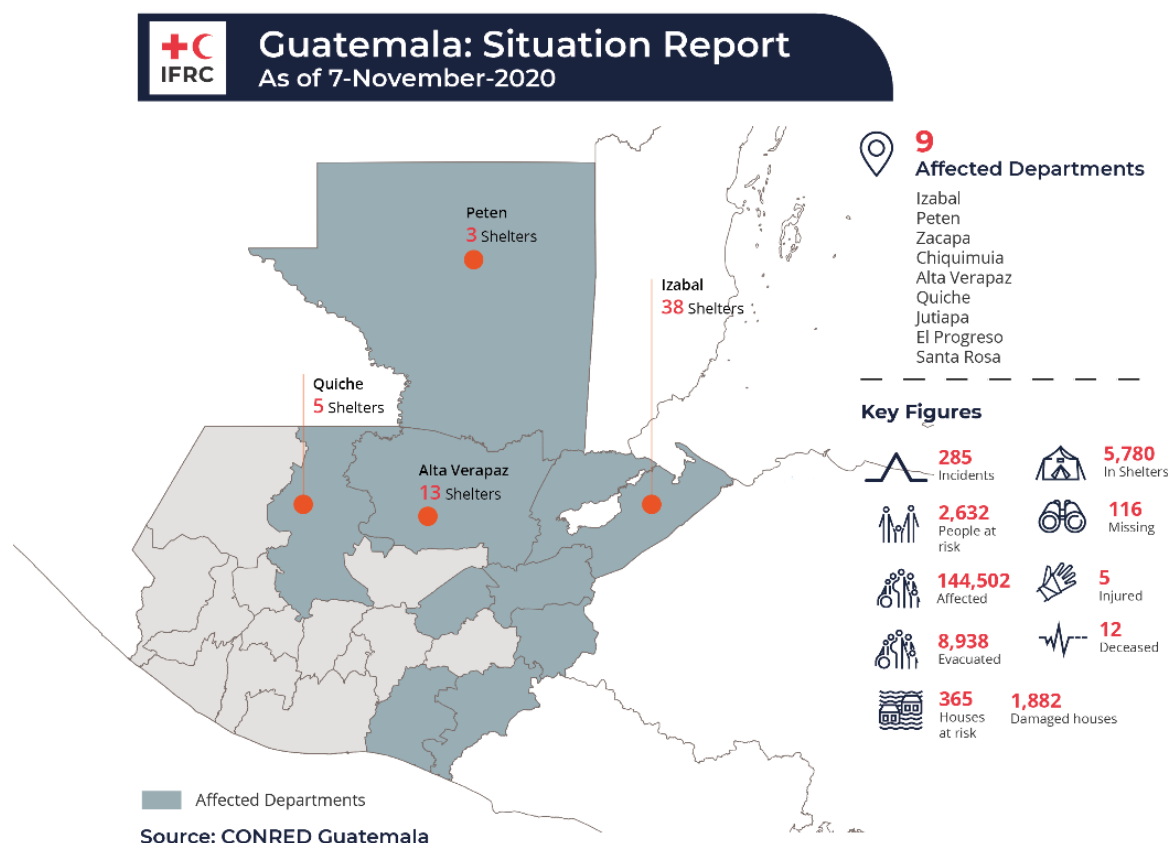
²⁷ [DerechosDeLaMujer.org](#)

²⁸ [Analysis of the state of the violence and citizen security - First semester 2020](#)

²⁹ [PAHO. Impact of Hurricane Mitch in Central America. December 1998.](#)

³⁰ [AP News Hundreds of Honduran migrants set out for US amid pandemic. 1 October 2020](#)

GUATEMALA



Volunteers and staff from Guatemalan Red Cross (GRC) have carried out rapid assessments in the localities of the departments of Izabal, Petén, Alta Verapaz and Chiquimula and identified that there are houses with severe and moderate damage. Additionally, the impact on the livelihoods of the population that has been affected by the floods. Families are in collective centers and many more in are staying with family or acquaintances. The records indicate the loss or deterioration of household goods, household supplies, food and personal items.

The selection of beneficiaries is made based on the needs and capacities of the people and their communities. The GRC is prioritizing families whose homes were lost or destroyed by the floods, or whose livelihoods were affected or destroyed as a result of the emergency. Then follows the families whose homes were not destroyed but whose household items and personal belongings were damaged by the floods. The GRC will identify and register the beneficiaries in their homes, in collective shelters or in places where they sought refuge on their own, based on information provided by community leaders on the conditions of these families.

Instruments such as the Humanitarian Charter and Minimum Standards for Response (Sphere Standards) are reference tools used to select beneficiaries to protect the human dignity of those affected by the disaster. Some of the beneficiary selection criteria may include:

- Families with low socioeconomic status.
- People or families considered vulnerable, including the elderly, children, people with disabilities, single mothers, people with chronic diseases, etc.

According to the information currently available and on the perspective of the evolution of the emergency, the GRC has identified the following response actions to be implemented in the departments of Izabal, Alta Verapaz, Chiquimula and Petén.

Shelter: The families that have been evacuated from their homes due to the severe damage to their homes and because of the risks have been housed in collective centers set up by local authorities. Although it is known that these shelters are providing food and basic hygiene services, it is not certain that these services are of quality and if they are sufficient for the needs of the population. As the rains continue in the region, the Volunteers support the evacuation efforts of the families together with their basic items to protect them, however, many affected families have already lost their personal belongings.

As part of the actions carried out in the face of the tropical phenomenon Eta, the National Coordinator for Disaster Reduction –CONRED- set up 59 collective centers in the departments most affected by landslides, landslides, floods, among others, housing 4,812 people³¹.

Livelihoods and essential needs: The families affected by the tropical depression have lost their belongings in their homes. Agricultural losses are also recorded in seasonal crops such as corn and beans. In other cases, poultry and some cattle have also been lost due to the overflowing of the mighty rivers and this loss constitutes a severe impact on food and family economy. It is therefore necessary to include humanitarian aid actions in the areas of cleaning kits, food in kind and through cash transfers, with which the affected families can correct the essential losses they have suffered, especially those who are in a condition of high vulnerability, such as single mothers, people with disabilities, boys and girls, older adults, etc.

Department	Municipality	# of Shelters
Alta Verapaz	Chisec	3
	San Pedro Carchá	1
	Cobán	3
	Panzós	2
	San Cristóbal Verapaz	1
	Senahú	1
Izabal	Tactic	2
	El Estor	1
	Livingston	2
	Los Amates	19
	Morales	9
Quiché	Puerto Barrios	7
	Chicamán	1
	Ixcán	1
	Nebaj	1
Petén	Uspantán	2
	Sayaxché	3
Total Shelters		59

Health: The population has been affected in its physical and mental health, due to the impact of the emergency. Health conditions in the affected region are precarious. Because this is the rainy season, people are exposed to dermatological, respiratory, and vector-borne diseases. The risk of disease increases over time, which could lead to outbreaks and consequences for children, the elderly and the vulnerable. It is important to note that floods could further increase the risk of outbreaks in affected areas. Stagnant water is a conducive environment for vectors that transmit diseases such as dengue, Zika, and chikungunya. The constant rain has increased the risk that vector-borne diseases, which are already highly prevalent in this region, will spread to the population affected by the floods. Consequently, immediate containment actions have become a priority. GRC's specialized services for care include pre-hospital care and psychosocial support including self-care and psychological first aid, provided by specialized National Society staff. This area also includes the promotion of Covid-19 prevention actions, especially in licensed collective centres, as well as in homes affected by the tropical depression.

Water Sanitation and Hygiene (WASH): Due to the contamination of the water supply points, caused by the floods, preventive actions and support for the population are essential and allow the reduction of morbidities associated with the consumption of contaminated water. The promotion of hygiene, the provision of hygiene kits, as well as suitable containers and the provision of water filters are necessary actions to protect the health of the population in the shelters and affected communities.

OCHA's Situation Report³² from 6 November notes that partners from different humanitarian organizations are prioritizing WASH activities, as well as food and nutrition security. The partners are working to deliver 135,000 litres of water and 1,000 emergency kits.

Protection, Gender, and Inclusion (PGI): The latest Save The Children report "*Girls on the Move in Central America and Venezuela*"³³ states the prevalence of child migrants in Guatemala is rising. During transit, the study identified different risks such as gender-based violence, trafficking, smuggling, detention, health problems (anxiety, insomnia, etc.), or hunger. Since these young girls are still in transit, the emergency can heighten these protection risks and bring others such as sexual abuse, trafficking with means of labour exploitation.

In Guatemala, according to UNICEF's situational report #134 - the situation is not distant from the needs in Honduras and Nicaragua, having over 81,000 children affected migrants and from host communities. Currently,

³¹ [CONRED](#)

³² [OCHA Situation report CENTROAMÉRICA: Tormenta Tropical Eta Informe de Situación No. 1](#)

³³ <https://reliefweb.int/sites/reliefweb.int/files/resources/girls%20on%20the%20move.pdf>

³⁴ Situation Report 1- UNICEF

these children are being placed in temporary shelters and will require psychosocial support and child protection services.

Finally, specific populations such as persons with disabilities and indigenous communities have been identified as key populations who can face situations of vulnerability such as neglect, abuse, and marginalization. For this reason, the need for reasonable adjustments for persons with disabilities in emergency settings such as shelters and health services and the adaptation of Public awareness campaigns and key messages of prevention, protection, and information on the pandemic and the emergency in the indigenous languages will be key to consider.

Migration: Huehuetenango, Quiché, Alta Verapaz, and Petén are among the 10 departments with the highest rates of returned migrants in Guatemala, including both adults and children. This means that these departments already have vulnerable populations, unemployment, lack of livelihoods, problems with job reinsertion, and school reintegration in the case of returned migrant children. Hence, a crisis like the current one increases the vulnerabilities of this population. Likewise, Izabal and Petén, for example, are recognized as part of the migratory route of migrants in transit from Honduras and extra-continental migrants. Affections such as Eta can cause the migratory route's interruption, making the migrant population and its needs invisible.

COVID-19 Pandemic

This operation and its operational strategy consider the risks related to the current COVID-19 pandemic and is aligned with the IFRC global emergency appeal that supports National Societies to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic.

COVID-19 cases as of 7 November (source: [PAHO](#))

Country	Confirmed cases	Deaths
Honduras	99,347	2,736
Nicaragua	4,480	157
Guatemala	110,502	3,794

The National Societies' response to COVID-19 is supported through the [IFRC global appeal](#), which is facilitating and supporting them to maintain critical service provision, while adapting to COVID-19. This Emergency Appeal operation is aligned with and will contribute to the current global strategy and regional Emergency Plan of Action for COVID-19 developed by the IFRC Americas Regional Office, in coordination with global and regional partners. This means that the National Societies will ensure, even as it responds to the damages caused by Eta, COVID-19 prevention measures are adhered to, in line with the regional plan of action and their national COVID-19 country plans.

IFRC continues to assess how emergency operations in response to disasters and crisis should adapt to this crisis and provide necessary guidance to its membership on the same. The National Societies will keep monitoring the situation closely and revise the plan accordingly if needed, taking into consideration the evolving COVID-19 situation and the operational risks that might develop, including operational challenges related to access to the affected population, availability of items, procurement issues, and movement of National Societies volunteers and staff. For more information, please consult the COVID-19 operation page on the [IFRC Go platform](#).

Targeting

The total population targeted is 75,000 people (15,000 families) in Nicaragua, Honduras, and Guatemala. The calculation of the target population is based on the direct population to be reached through the proposed emergency response activities. The targeted families within the served/affected population will be selected based on different criteria, such as:

- Level of impact (housing, livelihoods, health, etc.)
- Absence of assistance received from other entities.
- Specifically, vulnerable population (children, pregnant women, single-parent family, older adults, people with disabilities, etc.)

Coordination and Partnerships

The Red Cross Movement has been very active since the beginning of the emergency, participating in regional coordination meetings called by the IFRC. Partner National Societies (PNS) and the International Committee of the Red Cross (ICRC) are actively sharing information with National Societies, the IFRC and counterparts in their respective headquarters. PNS with Central America presence have put at disposal vehicles and human resources working in development projects in [Guatemala](#), [Honduras](#), [El Salvador](#), and [Nicaragua](#). The ICRC, where present in Central America, has approached the IFRC and the National Societies for potential support, integrated or complementary to the operation planned in this Regional Appeal and in its area of capacity and expertise. A Restoring Family Links (RFL) pool member will be deployed in Honduras to support the HRC to respond the RFL needs. The RFL pool member will be under ICRC Mission Honduras umbrella for the logistic, security and administrative.

The IFRC has published the following communications material:

- [Press releases](#) - Updated on 6 November.
- [Key Messages](#) - Updated version to be approved.
- [Pictures](#) - New images from Nicaragua, Costa Rica, and Honduras.
- IFRC [Twitter](#) account.
- [GO emergency page](#) – Hurricane Eta.

In the COVID-19 context, the localization approach, and the use of local resources is essential. To this end, the American Red Cross, Swiss Red Cross, Norwegian Red Cross, Spanish Red Cross, Italian Red Cross, and German Red Cross are ready to support the National Society's and IFRC's actions in the countries. Other PNS have been in close communication with the Americas Regional Office and participating in the coordination meetings and information sharing.

The Airbnb Open Homes partnership will soon be activated for Honduras and Nicaragua to support with unmet accommodation needs. Under the framework of this partnership, HRC and NRC staff and volunteers participating in TS Eta response, in addition to displaced disaster-affected individuals, will be eligible to stay in Airbnb accommodation free of charge.

IFRC consistently participates in the Regional Group on Risks, Emergencies and Disasters for Latin America and the Caribbean (REDLAC), which is a regional coordination platform for preparedness and response to disasters. Established in 2003, REDLAC benefits from the presence of regional organizations in Panama, and is inspired by the Inter-Agency Standing Committee (IASC) coordination system. IFRC leads the REDLAC Shelter Working Group, and is convening meetings of shelter partners in the region to ensure effective coordination of the regional shelter response.

IFRC will deploy a Membership Coordination position that will seek to enhance the membership coordination and collective impact of members.

Once the Emergency Appeal is launched, the Partnership and Resource Department (PRD) unit will have briefings with donors, especially with DG ECHO, BHA and AECID to socialize the document and seek their support. Corporate actors are being engaged and encouraged to activate private sector alliances with NRC in support of this operation. In addition, a funding strategy for this Emergency Appeal is also being developed to reach the funding requirements.

Since the beginning of the emergency, partner calls have been organized to share information and seek support among the members of the Movement. Some Partner National Societies have shown interest in supporting this emergency and the dialogue will continue to define their assistance.

Honduras: The National Risk Management System (SINAGER) has informed the government of the measures to prepare for Eta's anticipated arrival. It is also coordinating preparedness and response actions with municipal and departmental authorities and the departmental and regional offices of COPECO to follow up on evacuations and the activation of collective shelters in high-risk areas. The Government is allocating some 2 million American dollars

(USD) for emergency response through a decree in the coming days. COPECO reports that has pre-positioned more than 120,000 pounds of food supplies at regional and departmental COPECO facilities and biosecurity equipment and household items such as blankets, mattresses, and sheets. COPECO also shipped 4,000 pounds of food directly to the department of Gracias a Dios, with the support of the Honduran Air Force.³⁵

World Vision activated funds for 100,000 USD to assist affected people in Yoro, Copan, Paraiso, Intibucá and Francisco Morazán. Plan International in Santa Barbara is supporting the delivery of hygiene kits. UNICEF has the capacity to assist 2,000 children with WASH. Save the Children has activated preparedness funds to intervene in the Department of Atlántida. Save the Children is working with UNICEF to implement needs assessments. IOM plans to support the affected regions with hygiene kits and protection services.³⁶

Nicaragua: SINAPRED took preventive actions to reduce and mitigate human loss by activating early warning mechanisms in Puerto Cabezas and its communities. They supported the evacuation of families and the provision of humanitarian aid (mattresses and food).

On 2 November, the World Food Programme (WFP) in coordination with SINAPRED³⁷ dispatched 72 metric tonnes of rice and 8 metric tonnes of vegetable oil to the Autonomous Region of the Northern Caribbean. UNICEF prepositioned 3,000 family hygiene kits, 3,000 water containers, 87 boxes of water disinfection tablets, and 50 chlorine test kits for water quality monitoring on standby for delivery to the Ministry of Health SINAPRED³⁸.

Guatemala: The Government of Guatemala, through the Executive Secretariat of CONRED, is implementing actions such as the deployment of its immediate response teams (IRTs) to the departments of Izabal, Petén and Alta Verapaz. It is currently planning to mobilise humanitarian aid for families affected by the effects of the tropical depression.

The Humanitarian Country Team (HCT) has held a meeting with the National Coordinator for Disaster Reduction in order to learn about the actions, as well as the immediate needs of the population. United Nations agencies and humanitarian NGOs, as well as the Red Cross Movement present in Guatemala, are participating in the HCT. The Guatemalan Red Cross is an active member of the HCT Executive Working Group.

The National Society participates in the country's national Emergency Operations Centre, as well as in the departmental and municipal COEs activated for the emergency response, through the GRC branches.

Proposed Areas for intervention

General Operational Objective

The present operation aims to meet the immediate basic needs and support early recovery of affected people affected by Hurricane/Tropical Storm Eta's passage for an estimated duration of 24 months.

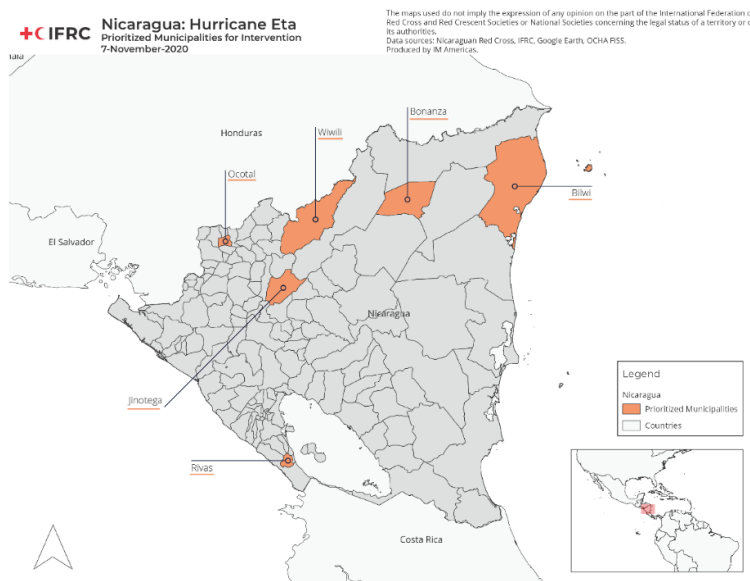
³⁵ CEPREDENAC. Informe de Situación Tormenta Tropical ETA. 5 November 2020.

³⁶ REDLAC Tropical Storm Eta Meeting. 5 November 2020.

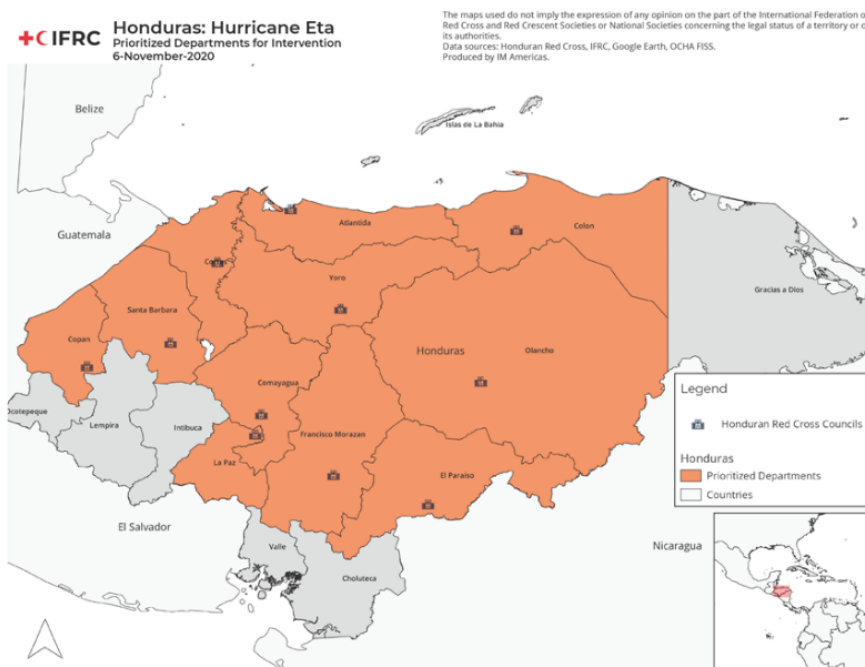
³⁷ [WFP](#). WFP deploys staff in Nicaragua's Northern Caribbean Region as hurricane Eta makes landfall. 3 November 2020.

³⁸ [UNICEF](#). Half a million children in Nicaragua at risk from Hurricane Eta. 3 November 2020.

The **Nicaraguan Red Cross** will contribute to the national response in **Bilwi, Bonanzas, Jinotega, Wiwili, Rivas, and Ocotal municipalities to support 3,000 families affected (15,000 people)** with their emergency and recovery needs in the areas of **Shelter; Livelihood and basic needs; Health; Water, sanitation and hygiene; Protection, Gender and Inclusion; Migration.**

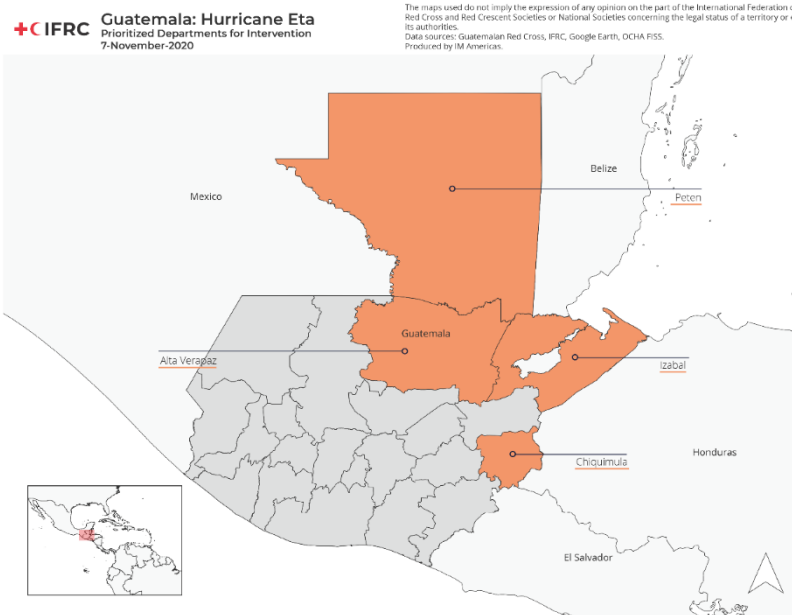


The **Honduran Red Cross** will contribute to the national response to the Hurricane Eta in **Copán, Santa Bárbara, Cortés, Comayagua, La Paz, Francisco Morazán, El Paraíso, Olancho, Colón, Atlántida, and Yoro departments to support 10,000 families affected (50,000 people)** with their emergency and recovery needs in the areas of Shelter, Livelihoods and basic needs, Health, WASH, and Protection, Gender and Inclusion, Migration.



The **Guatemalan Red Cross** will contribute to the national response to the Hurricane Eta in **Izabal, Petén, Alta Verapaz, and Chiquimula departments to support 2,000 families affected (10,000 people)** with their emergency

and recovery needs in the areas of **Shelter; Livelihood and basic needs; Health; Water, sanitation and hygiene; Protection, Gender and Inclusion; Migration.**



This Emergency Appeal will be revised once rapid emergency assessments have been completed, and the National Societies have a clearer picture of the storm's impact. Sectoral interventions will be integrated at community level where feasible.

Each of the intervention areas is planned to be implemented to provide a comprehensive response, orienting actions to respond to short-term (1 to 3 months) and medium-term (4 to 12 months) early recovery needs. In a first phase, the response will focus mainly (but not exclusively) on assisting affected people through health actions, WASH in collective centres, shelter assistance including household items to cover basic needs, search and rescue, Restoring Family Links (RFL), primary health care and ensure the deployment and response of response teams.

In the following months, in a medium-term response phase, strong livelihood interventions will be carried out through multipurpose Cash and Voucher Assistance (CVA) for restoration and recovery; combined with actions for epidemic control, sanitation, restoration of water systems at the community level, shelter assistance to support early recovery, rehabilitation of health and education facilities and services at the community level, community-based surveillance, strengthening of community structures, risk reduction, and community accountability and involvement, among others.

The operation will be carried out at the same time as the current COVID-19 outbreak, keeping the measures for preventing the contagion in the populations served as well as the volunteers. It will be essential to ensure volunteers' and employees' safety and support throughout the operation of assistance. The personnel will be provided with the necessary protection, identification, and equipment for their tasks' correct performance, accompanied by rapid training processes on specific topics, and protocols will be developed to coordinate humanitarian assistance with external volunteer organizations. However, in this type of scenario, it is recognized that some volunteers are part of the affected populations so that they will be part of the target groups through psychosocial support services and a solidarity and emergency fund.

Areas and approaches may vary throughout the intervention due to multiple variables, including other actors' involvement (UN, NGOs, government, private sector) in the country response. The National Societies will ensure a constant and adequate coordination level by integrating inter-sectorial tables among the different actors at the local and international level to avoid duplication of efforts. At the field level, continuous monitoring and evaluation of needs will be implemented through specialized teams, always guaranteeing safety standards and basic norms established by the IFRC.

Some strategies to support this operation include:

Human Resources:

For the implementation of this Emergency Appeal, it is necessary to hire Project Coordinators, Planning, Monitoring, Evaluation and Reporting (PMER) Officers, field staff, Administrative Officers and a Procurement Officers, Information management officers and support from volunteers for the implementation of the actions, more staff will be added according to the evolution and availability of funds. The hiring of this staff assumes that the National Society is operating at full capacity and needs to increase its capacity to implement the response actions planned. IFRC also plans to deploy Rapid Response Personnel (RRP) and IFRC staff to support the Emergency Appeal.

Volunteer support and protection:

The National Societies of Honduras, Nicaragua and Guatemala have over 4,000 volunteers trained in various areas related to the response. The protection, security, motivation and well-being of those volunteers and the strengthening of the volunteering systems that supports them is fundamental for the operation. The Nicaraguan Red Cross requested that psychological support for volunteers is guaranteed and that the needs of volunteers affected by the emergency are also considered; also that they will receive the proper protection equipment, training on Volunteering in Emergencies and Fundamental Principles; additionally, motivation and training systems are required. Furthermore, it is needed to support the rebuilding of the branches affected where volunteers are working.

All volunteers will receive the appropriate protective equipment, including PPE for COVID-19, identification, visibility, and uniforms; in addition, systems of motivation, recognition and training are required. In addition, additional resources are needed to strengthen the Solidarity Fund for volunteers. Life insurance will be covered through this operation. Additionally, volunteers will receive mobilisation and food necessary for the implementation of the operational activities.

Logistics:

Logistics activities aim to effectively manage the supply chain, including mobilization, procurement, customs clearance, fleet, storage, and transport to distribution sites following the operation's requirements and aligned to IFRC's logistics standards, processes, and procedures. A proper evaluation will be conducted to evaluate the status of infrastructure/airport/port damages or congestions; difficult road/boat access, widespread of the affected area, security issues, fuel shortages. The National Societies have storage capacity through their main warehouses and well-trained logistics counterparts, that will need to be reinforced through IFRC surge capacity. The main supply chain strategy will be to utilize the prepositioned stock already placed in Honduras, Nicaragua and Guatemala as first responses, followed by the coordination of road shipments from the Panama Hub to all the countries. Charter tenders were launched and once requested, the unit can coordinate flights, within 48 hours.

All procurements related to this operation will follow the IFRC's standards procurement procedures and sphere standards for household items purchases. The procurement of items and services will meet the required conditions based on the affected population's needs and/or the operational areas to guarantee the appropriate supplies and optimal performance. After the revision of the market's capacities, with the support of a procurement officer from Regional Logistics Unit Panama, the decision will be taken to follow Local procurements and/or international procurements.

A Mobilization table will be launched to coordinate needs in the field and contributions offered by donors/partners and updated by the Regional Logistics Unit, Panama office. Import regulations are known, and a revision process will be conducted to eliminate bottlenecks and delays.

Communication:

The Communications Unit will provide coverage and dissemination for the main actions in the operation, preparing digital content for dissemination in media outlets such as: web, social networks, internal bulletins, audio-visual material, etc. The communications teams in the National Societies are very strong and have produced media material to be shared with media outlets, partners, TV and radio.

The attention of the international media has been focused on other issues, so it is a challenge to make visible the magnitude of the impact of this disaster. Additional efforts will be required to attract media attention and help mobilize resources. It is recommended that a communications team be deployed to support the National Society

in content production and international media attention to promote broad coverage of the needs that this emergency has brought.

Public communications support to this operation will ensure that humanitarian needs are highlighted, and the achievements of the operation are well-profiled through proactive public information that integrates the use of IFRC online platforms, media relations activities, audio-visual production and social media engagement. Primary target audiences will include regional and international media, partner national societies, peer organizations as well as donors and the wider public. The deployment of communications staff will be promoted to support the National Society's public communication actions and engagement with the international media to ensure the visibility of the humanitarian emergency posed.

Community Engagement and Accountability (CEA):

The CEA approach is crosscutting and used across the different response areas and activities implemented as part of the different intervention strategies. It seeks to build trust and engagement with local communities and to adjust interventions based on feedback from affected and at-risk groups to deliver community accountability. Approaches that incorporate participatory decision-making and actions are more likely to be high-quality, cost-effective and sustainable. The activities proposed as part of the CEA approach include:

- sharing information through trusted and accessible channels on community preparedness, primary response actions, physical and mental health during and after the flooding emergencies. This will be through the most appropriate and safe approaches (i.e., small community dialogues, interpersonal communication when safety measure allows, use of social media networks, loudspeakers, community radios, etc,
- collecting community feedback so we understand the beliefs, fears, rumours, questions, suggestions and complaints circulating in communities about the current floods but also underlying health threats such as COVID-19, Dengue, Zika and Chikungunya and use this to inform the response;
- working with communities to identify and support community-led solutions to inform and better tailor the response

CEA support will be provided to other areas such as Shelter, Health, WASH, Livelihoods, PGI, and in the case of Cash interventions, the CEA toolbox elements for cash programmes will be used.

From the early actions of response, it is intended to include the CEA approach, for which we will work with the teams that will be doing the needs assessments to incorporate some key questions to develop community participation activities in the intervention. Additionally, information as aid actions will be reinforced the public awareness messages not only for the emergency response, but to emphasise the protection messages for COVID-19 and Dengue.

The regional CEA team will support the National Societies in implementing feedback mechanisms to address questions, doubts and identify rumours that are circulating in the communities. The information collected through these mechanisms will feed into the intervention areas to improve, change or improved the intervention.

To ensure the implementation of the CEA approach the National Societies will be supported with the deployment of a surge capacity to support the early implementation of the approach and to coordinate the creation of a team within the National Society and to train a first group of volunteers and staff.

The reinforcement and institutionalization of community engagement and accountability is a key deliverable of the EA considering the necessity to raise the National Societies standard when planning, consulting, and delivering aid to affected populations. In the recovery phase, the CEA team will work with the HRC to define clear standard.

Information Technology:

There is a radio communication system, which can be used by the teams in the field if necessary. Additionally, technicians and volunteers will be provided with airtime for cell phone calls. The national context for the COVID-19 emergency has led to an increase in the use of virtual conference platforms, such as Zoom, Skype, etc., as

well as data hosting for remote work. These tools are vital for work and communication with the target groups, given the mobility restrictions and biosecurity measures that have been established and govern everyday life. Several branches have been affected by the floods, losing radios and IT equipment. It convened with the strong winds that destroyed antennas and repeaters, making it necessary to implement urgent actions to restore the communication to operate in isolated areas.

Security:

During the implementation of the operation, a Security Plan will be drawn up according to the territorial context of intervention, taking into account the current social situation, the recurrence of hydro-meteorological events and the upsurge in violence in those departments. Through the Emergency Operations Centre, all types of incidents that occur in the intervention area will be kept informed, both internally and externally. Strategies will be promoted within the framework of the concepts of Stay Safe, "Safer Access Framework and the Code of Conduct. All Red Cross personnel involved in operations wear the uniform and promote the Fundamental Principles and Humanitarian Values.

It is necessary to strengthen the internal security network of the Red Cross Societies, for this, more training in operational security is necessary and would promote greater protection to those who protect us and the communities. This requires an initial training in operational security that covers the basic parameters necessary to keep an installed capacity to improve the processes of how to make briefings, debriefings, what are the situations of insecurity that can be faced in the field, how to report a security incident and create a monitoring mechanism, Civil Military Relations (CMR), among others. Once the National Societies' security network and all people involved in a response are aware of these basic parameters of operational security, it is necessary to develop protocols that allow protection of volunteers and staff through security risk analysis and the creation of a protocol for critical incident management, which will contribute to a more integrated security plan focused on security risks in the field. This should go hand in hand with a sufficient supply of Personal Protective Equipment for those who will be attending to the emergency and are facing a pandemic and a promotion of stay safe personal, for volunteers and for managers virtual and in person courses. More emphasis of a comprehensive Business Continuity Plan should be guaranteed on place to promote a duty of care from the units and departments involved while providing support to the emergency.

In Honduras, particular attention should be given to the area of Valle de Sula to ensure that volunteers and staff have proper training and handle security protocols as the area is prone to security issues.

Considering that Nicaragua is in a pre-electoral period and undergoing a socio-political crisis, the technical team involved in the operation, in coordination with each government's authorities, will prepare a Security Plan to ensure the physical integrity of Volunteers and management team. This plan will be based on the eight elements of Safer Access and the pillars, procedures and tools of the Operational Security to promote a more pragmatic and comprehensive security plan. It will include information to the EOC about all types of incidents, use of the emblem, schedules, coordination with other institutions, and community leaders.

In order to support the operation, a Rapid Response Alert for a Security Coordinator was launched.

Disaster Law and Legislative Advocacy:

The COVID19 regulatory environment and the new legislative context in Nicaragua may pose challenges for the Red Cross and Red Crescent Humanitarian Assistance Principles and Rules' effective operationalization. Honduras adopted in a debate in January 2020 an IDRL Law based on the IFRC IDRL Model Law, and the Ministry of Foreign Affairs issued an Appeal for International Humanitarian Assistance, sensitizing all the authorities involved in the management of the international response to the new IDRL recommendations will be critical to providing a rapid and effective response from the Movement and international donors. The 2019 CONRED Law in Guatemala provides for some special tax exemptions on importing humanitarian goods, advocating at both national and regional levels (with CEPREDENAC) to adopt and implement the IDRL recommendations will be crucial to enable an effective international response.

Information Management: Information Management support to the operation will include spatial analysis and mapping to support targeted relief distributions and support for most vulnerable communities; structured collection of primary and secondary data to build evidence-based strategic orientations and adaptations to emerging/changing crisis conditions. Information Management support will be focused during response and recovery phases with continuous activity monitoring. The Information Management capacity building component to National Societies will include trainings focused on data collection, analysis and visualization. National Societies' data collection capacities will be reinforced with provision of mobile data collection kits (one kit per

National Society), and peer NS networked support for effective survey design, data collection and analysis. The regional IFRC IM and global IFRC Surge Information Management Support (SIMS) networks have been activated for the immediate response phase, drawing on expertise from across the IFRC, to support development of maps, databases, secondary data review and other data analysis and visualisation tasks.

Planning, Monitoring, Evaluation and Reporting (PMER):

As part of the PMER strategy, a technical staff member will advise and facilitate these processes. Actions previously identified include the preparation of the indicator monitoring matrix and monitoring and evaluation plan that will be used to monitor the progress made in achieving the goals. Rapid studies will also be conducted to identify some target groups' perceptions regarding implementing the CEA approach. The results of past lessons learned will also be presented to the implementation team, and preparation of the corresponding reports will be monitored.

Areas of Focus



Shelter

People targeted: 75,000 (15,000 families)

Male: 37,500

Female: 37,500

Requirements (CHF): 5,346.000 CHF

Proposed intervention

Due to similarity of the damage that Hurricane Eta caused in all three countries it is expected to have similar needs to support families in collective centers by providing kitchen sets, tarpaulins, and blankets, to help meet some of their needs. The selection of the target population will be based on damage assessments and needs analyses. The response will also include the distribution of Shelter kits to support repairs of the affected houses alongside with a repair programme. Rental support will be also be provided to those in need while people is able to rebuild/repair their house and re-establish their livelihood. And it will include trainings to reinforce capacity building on shelter and DRR for staff and volunteers

NICARAGUA

Needs analysis and population to be assisted:

As a response to Hurricane Eta, preventive evacuations were conducted due to the high impact of winds and surge tidal in the North Caribbean Coast, including Triangulo Minero. The families have been taken to collective centers, which has generated the need to ensure that evacuees have basic items to meet their immediate needs.

All the evacuees, including families that have taken refuge with relatives will need to repair the damages generated by the hurricane and the floods to their homes to return. Families whose homes have partial damage, especially in their roofs, will need assistance to cover the affected areas until they begin the repair process.

The Nicaraguan Red Cross is part of the National Civil Protection System. Through this mechanism, emergency assistance is prioritized and coordinated to avoid the duplication of efforts. The intervention will include trainings to reinforce capacity building on shelter and DRR for staff and volunteers.

HONDURAS

Needs analysis and population to be assisted:

A significant number of houses have suffered damages due to flooding in the most affected areas. It is still unclear the accurate figures in terms of the number of damaged houses. It is expected that the numbers are quite high according to the panoramic views taken from the air. Because of the floods, the affected households have lost their basic belongings such a kitchen tools, clothes, and sleeping elements (mattress and blankets).

GUATEMALA

Needs analysis and population to be assisted:

According to the Situational Report shared by CEPREDENAC on the 6 of November, due to the forecasted rainfall in the above locations, river floods, landslides, and mudslides occur. Hence, institutions that make up the National Coordination System for Disaster Reduction -CONRED- maintain response actions to assist people affected by the tropical phenomenon Eta. So far, they have registered 134 homes at risk and 943 homes with damage. This intervention will focus on the distribution of household items.

Activities planned to be carried out:

- Support camp management and camp coordination mechanism according to the role if requested by the government's, the Red Cross will lead the Camp Management and Camp Coordination mechanism. NS will assign human resources to the coordination Mechanism.
- Assessment of shelter needs, capacities, and gaps.
- Identification of cases and verification of beneficiaries in different target groups (including integrated factors such as gender, diversity, and disability in the response).
- Coordination with government and other stakeholders.
- Procurement and distribution of 45,000 blankets (3 per family).
- Procurement and distribution of 15,000 kitchen sets (1 per family).
- Procurement and distribution of 30,000 tarpaulins (replenishment) (2 per family).
- Procurement and distribution of 3,000 shelter toolkits (1 per family).
- Monitoring the provision of shelter assistance and household items.
- Repair of homes to support safe, sustainable, and secure settlement conditions for 1,200 families and Post Distribution Monitoring.
- Support the provision of rental assistance for 1,200 families.
- Basic awareness on build back safer to accompany the distribution of Shelter kits.
- Shelter & settlements training for volunteers and staff.
- Training of Trainers on Participatory Approach for Safe Shelter Awareness (PASSA) Youth/Plus
- PASSA Youth/Plus sessions for affected households
- Orientations on assessments implementation for volunteers
- Orientations to volunteers and to affected household on the best use of the provided shelter assistance and distribution of household items
- Rehabilitation of educational facilities used as temporary accommodation.
- Advice by specialized personnel for evaluation and repair of affected homes, the rehabilitation of the educational facilities and the definition and implementation of the rental assistance component.
- Production and distribution of information, education, and communication (IEC) materials
- Evaluation/ lessons learned workshop on shelter response (one per NS)
- Hiring of shelter staff to support implementation of activities



Livelihoods and basic needs

People targeted: 75,000 (15,000 families)

Male: 37,500

Female: 37,5000

Requirements (CHF): 5,746,000 CHF

Proposed intervention

NICARAGUA

Needs analysis and population to be assisted:

The current economic crisis caused by COVID-19, evacuations, and the damage caused to homes, small markets, agriculture, and fishing has affected the poorest people, increasing their vulnerability. People must be the main actors in the response and recovery. Resources and support to satisfy their basic needs, protect and recover their livelihoods will be required. To define the needs of the most vulnerable people, market and livelihood assessments will be carried out in coordination with the communities, and assistance will be implemented to promote the local market's recovery.

HONDURAS

Needs analysis and population to be assisted:

Large number of families have been affected due the floods and landslides throughout the country, according to the initial data, many of the affected families have as economic activity agriculture, including plantain, bananas, maize, vegetables and other economic activities. It is expected that many families will experience food insecurity during the next months due the mixing situation between COVID-19 and the loss of crops and other income resources. Due the catastrophic combination of crisis and the urgent need to support the families, Red Cross will carry out a rapid assessment to identify the main actions to be taken to address the needs and provide support with cash and voucher assistance to the most vulnerable families, at the same time rapid market assessments will be done in coordination with the national authorities to define a recovery strategy, selection criteria and concrete actions to replenish assets and restart livelihoods in the selected communities.

GUATEMALA

Needs analysis and population to be assisted:

A large number of families have been affected by floods and landslides throughout the country, which has left hundreds of people dead in a village, according to initial data. Mainly the affected families have agriculture and small businesses as an economic activity. The rains are expected to continue during the next few days, saturating the soils even more. The floods have severely damaged the homes and livelihoods of the most vulnerable families. Several families are expected to be food insecure in the coming months due to the mixed situation between COVID-19 and the loss of crops and other income sources. It is urgent to support families and carry out a rapid assessment to identify the main actions to meet basic needs, protect, and recover livelihoods. Support with cash assistance and vouchers should be provided to the most vulnerable families and concrete actions to recover assets and restart livelihoods in targeted communities.

Activities planned to be carried out:

- Identification of needs for the protection and recovery of livelihoods
- Activate and deploy Rapid Response Personnel specialized in CVA and Livelihoods to support the initial stage of the emergency
- Carry out Cash feasibility study
- Induction to volunteers to use the Market Assessment survey
- Carry out a Market Assessment to identify main impacts in the market's chains
- Procurement and distribution of 15,000 food kits (1 kit for one month) during the initial phase of the response considering that markets have been affected and persons are not able to access other markets.
- Implementation of CVA for basic needs for 6,000 households
- Implement livelihoods protection assistance for 3,000 households, through CVA where feasible.
- Support 3,000 microbusinesses to restart and improve their capacity
- Activate the previous agreement with supermarket groups
- Identification of needs for the protection of livelihoods
- Definition of intervention options for protection of livelihoods
- Training for volunteers on CVA
- Coordination with government and other stakeholders
- Design and roll out of a CEA plan for awareness, involvement, and feedback mechanisms.
- Post Distribution Monitoring (PDM)
- Hire specialized staff to implement the recovery actions for livelihoods
- Organize training for Red Cross Volunteers in Emergency and Recovery Livelihoods Assessment and Response Option Analysis (ERLA)
- Definition of intervention options for protection and recovery of livelihoods
- Monitoring and evaluation



Health

People targeted: 12,000 (2,400 families)

Male: 6,000

Female: 6,000

Requirements (CHF): 1,398,000 CHF

Proposed intervention

Needs analysis and population to be assisted:

During the acute phase of the emergency, attention needs to be focused on lives saving through first aid and rescue, prehospital emergency care, medical referral of complicated cases, and adequate advance medical care in either stable or temporary health facilities. In terms of mental health psychosocial support, the first interventions to reduce the stress and the trauma experienced by the affected population in collective centres or within the communities will be provision of Psychological First Aid, cover the basic needs of shelter and food to promote contact with families and, establish safe spaces for the vulnerable groups such as children and teenagers. Priority will be addressed to health conditions presented in people due to excessive humidity, such as skin diseases, respiratory conditions, diarrheal diseases, and priority will also be given to Psychosocial support for children and volunteer staff who supported rescue evacuation efforts.

The affected families need to access primary health care services to get proper health in emergency assistance to assess their health concerns and issues triggered by the floods. All this in the context of COVID-19, where clear and accurate flows and triage need to be implemented and optimize all the biosecurity measures to minimize the risk of uncontrolled transmission in the areas.

Added to COVID-19, active and efficient community-based surveillance system need to be implemented and strengthened to monitor, warn and launch response in case of outbreaks of any water or vector-borne diseases as well as other dangerous ones, potentially likely in these conditions like measles. These measures need to be kept for all length of the early post-emergency phase.

Establish Community-based Psychosocial interventions with the community's active participation will be a crucial action to support the population to cope with the stress, be resilient, and have mechanisms that help them be prepared and reduce the impact that climate change can produce on the well-being of them.

Activities planned to be carried out:

- Replacement of first-aid kits for response units
- Search and Rescue, First Aid
- Deliver 12,000 PSS kits for children and adults in shelters
- Establish PSS systems for volunteers and staff to cope with stress and promote well-being
- Promotion of safe return and necessary sanitation actions in the community
- Enabling psychosocial support services for affected people.
- Establishment of a referral and response systems for COVID-19 cases and other communicable diseases.
- Establish two-way communication channels to inform and collect feedback using CEA approaches about health awareness messages (COVID-19, Dengue, non-communicable diseases- well-being- cope with stress, loss, and grief, -promote resilience) adapted to local cultural realities and languages
- Prehospital Emergency Care
- Evaluation, analysis, and monitoring of damages and needs, including mental health: In coordination with health authorities, conduct detailed assessments to identify health needs, the number/type/location of damaged health facilities and/or deficiencies in medical services in the target communities (PHIM tools)
- Health Promotion with an emphasis on communicable diseases and COVID-19 in communities and temporary accommodation (including prevention of vector-borne diseases)
- Refreshing volunteer knowledge about epidemic control
- Establish referral pathway to mental health services for the complex cases detected and people with pre-existing mental health disorders
- Refreshing volunteer knowledge about Psychological First Aid and PSS
- Health and hygiene promotion campaigns are implemented on the prevention and control of common communicable diseases such as malaria, acute watery diarrhea, bloody diarrhea, dermatitis and other outbreaks that may occur during emergencies in addition to reinforce of COVID-19 PHSM.
- Implementation and Strengthening of community-based surveillance programs and tools.
- Development of community campaigns for the prevention of prioritized diseases (vector-borne diseases)

- Actions aimed at promoting healthy lifestyles and nutrition, emphasizing child nutrition, and monitoring the weight and diet of children under five.
- Institutional strengthening for mental health care and psychosocial support to affected people.
- Reconstructing damaged health structures
- CBHFA training for volunteers for emergency response



Water, sanitation and hygiene

People targeted: 75,000 (15,000 families)

Male: 37,500

Female: 37,500

Requirements (CHF): 3,732,000 CHF

Proposed intervention

NICARAGUA

Needs analysis and population to be assisted:

Basic sanitation and Hygiene promotion to meet some of the needs of the affected population. Detailed assessment and needs analysis are needed to select the affected population. Also, capacity building at the community level on WASH supports water management, solid waste disposal, where water demand is highest and where groundwater supply systems have been impacted. In the recovery phase, the repair and construction of sanitation facilities will be integrated with the shelter program. Vector control will be supported by providing mosquito nets, a solid waste management program, and retrofitting of rainwater collection drums. Hygiene promotion key messages and modified PHAST training will also be delivered.

HONDURAS

Needs analysis and population to be assisted:

Water and sanitation are some of the main actions to be implemented urgently. Thousands of people have been evacuated to the collective centers and camps. The water distribution system has been totally affected in several communities contributing to the high risk of water-related diseases vectors and COVID-19.

GUATEMALA

Needs analysis and population to be assisted:

The population affected by the tropical depression Stage identifies the impact on the supply of safe water and the methods for water supply. Due to the floods, wells and water sources were totally or partially affected, putting the population at high risk of consuming contaminated water, which would generate health effects, especially gastrointestinal and dermatological infections.

Activities planned to be carried out:

- Water and sanitation assessment
- Analysis and monitoring of water quality in collective centres and affected communities
- Cleaning and disinfection of water wells
- Installation of water treatment plants
- Distribution of drinking water to selected families and in accommodations
- Procurement and distribution of PPE for 15,000 families
- Procurement and distribution of 15,000 water filters (1 per family)
- Procurement and distribution of 15,000 family cleaning kits (1 per family)
- Procurement and distribution of 30,000 family hygiene kits (for two months)
- Acquisition of thermos foggers and pumps for fumigation
- Fumigation of homes and communities for vector control
- Procurement and distribution of items for the proper management of solid waste in collective centres and communities.
- Rental and fitting out of latrines and equip toilets with handwashing facilities, water and menstrual hygiene disposals and ensure they remain functional.
- Hygiene promotion

- Water tank truck rehabilitation
- Awareness talks on optimizing drinking water in homes
- Procurement and distribution of water storage containers in the home (30,000 buckets, 2 per family)
- Re-establishment of drinking water and sewage systems in communities
- Acquisition of dewatering pumps
- Installing and fitting out latrines in schools and health centers
- Training for volunteers on WASH
- Coordinate with other WASH actors on target group needs and appropriate response
- Select target groups, and use community engagement and accountability approaches to promote key sanitation messages in culturally tailored and context specific methods



Protection, Gender and Inclusion

People targeted: 8,000

Male: 4,000

Female: 4,000

Requirements (CHF): 351,000 CHF

Proposed intervention

Needs analysis and population to be assisted:

During emergencies, women, girls, vulnerable groups, and children are more exposed to risks. Gender-based violence can occur at any time but can worsen during emergencies due to a lack of public order, the lack of or limited support services, and the temporary disruption of social networks. For these reasons, women's and girls' protection needs should be considered and coordinated in interventions to address gender-based discrimination.

It is essential to guarantee access to psychosocial assistance and support provided by health or community services. One way of looking after women and girls is to ensure security personnel that prevents women from being victims of violence and establishes preventative measures in the evacuation centres, including information sessions and setting of referral mechanisms. It would be important to advocate for the temporary shelters and emergency collective centres to comply with the Interagency Minimum Standards for Gender-based Violence in Emergencies Programming. Finally, it is necessary to identify specific vulnerabilities and capacities related to gender, age, and vulnerabilities.

Women who live in evacuation centres and groups of at-risk women who are vulnerable to sexual abuse and the systematic violation of their communities' rights. The target population will be defined based on surveys in the existing evacuation centre, and assessments carried out by volunteers in the field.

Tropical Storm Eta has harmed people's lives, not only through the loss of their homes, livelihoods, and even loved ones, but also through the restriction of exercising their rights, participation, access, and security. Children and adolescents will be key to be included as the population to be assisted. The disruption of educational service and their ubication in collective centres with their families can put them at different protection risks.

Specific vulnerability of women, as well as girls, boys and adolescents during emergencies will be considered during the need's assessment and response development. News report missing persons, suggesting that it will be important to implement a mechanism to accompany their families and, if necessary, proceed to their identification and burial (implemented by the ICRC).

Activities planned to be carried out:

- Assess the specific needs of the affected population based on criteria from the PGI minimum standards for emergency situations
- Establish a system to ensure that IFRC and National Society staff and volunteers have signed and been briefed on the Code of Conduct, the PSEA Policy and the Child Protection Policy.
- Hold basic trainings with IFRC and NS staff and volunteers on PGI issues, and how to adhere to the Minimum Standards on PGI including the PGI IFRC tool kit

- Support sectoral teams to collect and analyse sex-age and disability-disaggregated data (see guidance in Minimum Standards) and target population selection criteria
- Identification of populations with special needs (gender, disability, elderly, sexual diversity) in accommodations
- Setting of Child Friendly Spaces, together with the psychosocial support teams
- Develop and include messages on preventing and responding to SGBV in all community outreach activities
- Hold basic trainings with IFRC and NS staff and volunteers on addressing SGBV (or integrate a session on addressing SGBV in standard/sectoral trainings)
- Support for the process of educational reintegration of children
- Provision school kit oriented to children and adolescents affected.
- Sensitization for processes of participation/inclusion of women in decision making and citizen training.
- Awareness campaigns on child protection in emergencies.
- Strengthening of community structures for the development of inclusive recovery processes for communities affected by the emergency.
- Information and awareness campaigns on participation, gender, inclusion, and other related issues for social fabric cohesion in the prioritized communities.
- Community micro-projects that strengthen the processes of recovery of spaces for participation and coexistence.
- Development of social inclusion microprojects oriented to work with the indigenous communities and the Miskito
- Actions for the restitution of rights and educational inclusion focused on children and adolescents
- Promotion of access to protection services and rights for vulnerable populations



Migration

People targeted: 5,000

Male: 2,500

Female: 2,500

Requirements (CHF): 117,000 CHF

Proposed intervention

Needs analysis and population to be assisted:

The communities affected by the flows and evacuation are at risk of displaced in the mid and long-term. The region is a traditional route of migrants on transit that crossing the country as part of the migratory journey to the North America region. Many of them have limitations that increase the risks and needs, such as language barriers and misunderstanding of the environmental risk. Lack of reliable information about the current situation and the available services in affected areas reduces accessibility during the emergency response and increases the protection risks of being a victim of abuse, violence, and exclusion. The local communities evacuated or reallocated, and migrants in transit risk losing contact with families and loved ones.

Activities planned to be carried out:

- Delivery of services to restore and maintain contact between family members -RCF (telephone calls, connectivity, cargo, information, equipment, logistics, biosecurity, and others).
- Information campaigns on the services of restoration of contact between family members at the national level, with authorities and communities.
- Provision of service including a minimum protection approach (training of volunteers and NS staff)
- Volunteer training on Restoring Family Links (basic RFL, RFL in emergencies, NIT-RFL) and other related topics.
- Establish strategic alliances with institutions that favour the development of RFL activities/protocols for access to information/data protection.
- Purchase and distribution of 1,000 hygiene kits (including biosecurity inputs) to returned and transit migrants (differentiated by age and sex).
- Conducting needs assessments about displacement communities and migrant population in transit

- Monitoring of flows and communities displaced as well as migratory flows changes.
- Coordination with local authorities and stakeholder to ensure the humanitarian access to migrants regardless their legal status.
- Basic trainings to staff and volunteers abouts RC Migration approach.
- Coordination with local and international actors to strength the response and recovery of people on the move.

Activities implemented in coordination with the ICRC: Protection Kits for sheltered women. Search request system, body management and identification. Accompaniment of families of missing persons. Maintain and reestablish family contact (phone calls, connectivity, logistics, training of volunteers, data protection, biosecurity, etc.). Assistance for returnees and displaced persons. Accompaniment of children and adolescents from affected communities. Respect and dignity of those who died during the hurricane are upheld by developing a plan for appropriate management of the dead that involves search and recovery, temporary storage, identification and final disposal of bodies. Special requirements in terms of logistics: use of PPE, body bags, ID tags, refrigerated vehicles, temporary storage (refrigerated trailers), photographic cameras, forensic tools and traceable individual burial places. Procedures of identification and final disposal should take into account the involvement and wishes of families of the missing/deceased and the communities affected by this devastating disaster.



Disaster Risk Reduction

People targeted: 75,000

Male: 37,500

Female: 37,500

Requirements (CHF): 1,151,000 CHF

Proposed intervention

Needs analysis and population to be assisted:

At the moment, communities are experiencing the double impact of the effects of Tropical Storm ETA and the COVID-19 pandemic. Unfortunately, these types of phenomenon where multiple impacts are happening simultaneously and consecutively: impacts on health, loss of life, destruction of property, loss of livelihoods, reduction of quality and supply of food and water, forced displacement, etc. are increasing in both scope and extension.

IFRC and its National Societies are pushing for an inclusive, green, and resilient recovery to Hurricane ETA and pushing for community-led adaptation and resilience. Thus, investing in mobilizing the power of local actors and in what will bring the greatest benefit to the people most exposed and vulnerable to climate risks in the medium to long term.

As the acute phase of emergency diminishes out, attention needs to be focused on addressing the key issues highlighted through this emergency: reinforcing climate-smart DRR considerations, creating awareness and adopting measures to tackle the climate crisis, providing the necessary tools and support to those directly affected by this emergency, as well as those working to support them in preparations to upcoming events, that have high probability of happening in the nearby future due to the high incidence of threats historically occurring in the Central American region.

Activities planned to be carried out:

- Organization and restructuring of Municipal and Local Emergency Committees
- Review and adjustments, of branch Response Planning and update it through simulation exercises
- Disseminate the Public Awareness and Public Education: DRR messages
- Ensure VCA is followed by the development and implementation of community's plan of action for DRR
- Equipment with items for emergency response.
- Strengthening of inter-institutional communication mechanisms for the response.
- Elaboration of models of Family Emergency Plans by the experiences caused by the emergency.
- Elaboration of Sectorial Response Plans according to the action lines of the National Response Plan.
- Training on Disaster Risk Management system for branches
- Procurement of Water Rescue equipment for communities
- Implement one Vulnerability & Capacity assessment (eVCA) and CAN Checklist Training of Trainers

- Implement School Disaster Preparedness programme in three schools
- Apply the School Safety Framework and the School Protected Module
- Carry out three workshops on Disaster Planning and Identification of Evacuation Route
- Conduct workshops on climate change.
- Train affected communities on climate change awareness.
- Train volunteers on the Climate Change toolkit.

Strategies for Implementation

Requirements (CHF): 2,207,000 CHF

Based on the demand for the technical and coordination support required to deliver in this operation, the following programme support functions will be put in place to ensure an effective and efficient technical coordination: volunteering support and protection, **human resources, logistics and supply chain; information technology support (IT); information management; communications; regional and country-level coordination of the shelter and settlements sector, as required; financial sustainability, business continuity plan, strengthening the branches network, protection of the integrity, information management; security; planning, monitoring, evaluation, and reporting (PMER); partnerships and resource development; and finance and administration.** More details are in the Emergency Plan of Action.

"Strengthening National Societies" will focus on enhancing and aligning capacity building efforts, strengthening organisational systems and structures based on OCAC, BOCA and PER assessments, further developing volunteer management and promoting and fostering strong local actors and leadership.

Funding Requirements

International Federation of Red Cross and Red Crescent Societies

EMERGENCY APPEAL

MDR43007 – CENTRAL AMERICA – Hurricane Eta

Funding requirements - summary

Area of Intervention	Needs in CHF
DISASTER RISK REDUCTION	1,151,000
SHELTER	5,346,000
LIVELIHOODS AND BASIC NEEDS	5,746,000
HEALTH	1,398,000
WATER, SANITATION AND HYGIENE	3,732,000
PROTECTION, GENDER AND INCLUSION	351,000
MIGRATION	117,000
STRENGTHEN NATIONAL SOCIETIES	585,000
EFFECTIVE INTERNATIONAL DISASTER MANAGEMENT	1,302,000
INFLUENCE OTHERS AS LEADING STRATEGIC PARTNERS	282,000
ENSURE A STRONG IFRC	38,000
TOTAL FUNDING REQUIREMENTS	20,048,000

all amounts in Swiss Francs (CHF)

Jagan Chapagain
Secretary General

Reference documents

Click here for:

- [DREF Operation](#)
- [Information bulletin no. 1](#)

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

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How we work

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