

EMERGENCY APPEAL

OPERATIONAL STRATEGY

Cuba | Hurricane Melissa



In Granma, Cuban Red Cross volunteers carry out search and rescue operations amid widespread destruction caused by Hurricane Melissa (November 2025).

Appeal №: MDRCU013	To be assisted: 100,000 people	Appeal launched: 30/10/2025
Glide №: FL-2025-000201-CUB	DREF allocated: 1 million CHF	Disaster categorisation: Orange
Operation start date: 30/10/2025	Operation end date: 31/10/2027	

IFRC Secretariat Funding requirement: CHF 15 million Federation-wide funding requirement: CHF 16.5 million

TIMELINE



October 2025: The Ministry of Public Health (MINSAP) identifies a complex epidemiological scenario with simultaneous circulation of dengue, chikungunya, and Oropouche across Cuba, requiring heightened surveillance and vector control interventions.



21 October 2025: Melissa forms off West Africa, becomes a depression, and strengthens into a tropical storm north of Venezuela.



24 October 2025: The IFRC, on behalf of the Cuban Red Cross, launches a DREF to support the response to Cuba's arboviral outbreak, targeting 10,000 people with health, WASH, and vector control interventions.



25 October 2025: As a Tropical Storm, Melissa moves steadily westward toward the Caribbean, prompting early monitoring by meteorological agencies and regional disaster preparedness teams.



27 October 2025: The storm rapidly intensifies into a Category 5 hurricane, reaching peak strength and signalling a high-risk threat to the Caribbean islands and Cuba.



28 October 2025: As Melissa makes landfall in Jamaica, Cuba's Civil Defence evacuates 735,000 people from high-risk areas, secures infrastructure, and pre-positions resources, while the Cuban Red Cross, as part of the Civil Defence Council, supports evacuations in close collaboration with the National Civil Defence System and MINSAP, and coordinates with the UN UNETE group.



29 October 2025: Category 3 Hurricane Melissa makes landfall in Cuba.

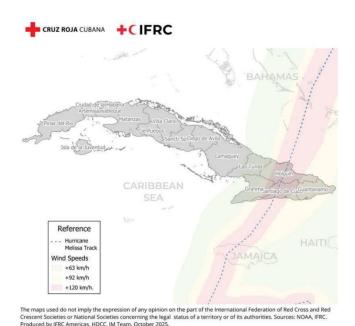


30-31 October 2025: The IFRC, on behalf of the Cuban Red Cross, launches a CHF 15M Emergency Appeal to support 100,000 people affected by Melissa (including a DREF allocation of CHF 997,991).



2 November 2025: The IFRC delivers 20 tonnes of humanitarian aid (kitchen, hygiene, bedding kits) to Santiago de Cuba.

DESCRIPTION OF THE EVENT



On 25 October 2025, the National Hurricane Centre began monitoring a tropical wave over the Atlantic that rapidly intensified into Hurricane Melissa. By 28 October, Melissa reached Category 5 intensity, with sustained winds near 185 mph (295 km/h) and a central pressure of 892 millibars, making it one of the most powerful hurricanes ever recorded in the Caribbean basin.

In anticipation, Cuba's Civil Defence implemented comprehensive preparedness measures, including mass evacuations, shelter activation, school and transport closures, and the safeguarding of agricultural and productive assets. More than 735,000 people were evacuated from coastal and low-lying areas, while preliminary estimates indicate that 2.2 million people have been severely affected. On 27 October, the provinces of Guantánamo, Santiago de Cuba, Holguín, Granma, Las Tunas, and Camagüey were placed under the highest alert level.

After striking Jamaica as a Category 5 hurricane, Melissa made landfall in Santiago de Cuba in the early hours of 29 October as a Category 3 hurricane, with sustained winds of 125 mph (195 km/h). The system produced 10-25 inches (250-635 mm) of

rainfall, with localised totals of 15 inches (38 cm) in Charco Redondo and 14 inches (36 cm) at Las Villas Reservoir, causing catastrophic flooding, landslides, and storm surge impacts. In the framework of preventive actions undertaken, the Cuban Red Cross (CRC) supported precautionary evacuations, provided psychosocial support, and coordinated preparedness with Civil Defence authorities.

Preliminary assessments indicate that nearly 150,000 homes are affected, with 95,000 of them located in Santiago de Cuba province. ² Critical services – including electricity, water, transport, and communications – have been severely disrupted, leaving around 450,000 people without safe water. At least 642 health facilities and 2,117 educational centres are damaged, ³ affecting over 670,000 students. ⁴ As of 14 November, roughly 54,000 people remain evacuated.

Many of those affected by Melissa had already endured the devastating impacts of Hurricanes Oscar and Rafael in 2024, which caused widespread flooding, infrastructure damage, and displacement. The affected provinces are facing a complex multicrisis emergency, with concurrent outbreaks of dengue, Oropouche, and chikungunya. Recent estimates from health authorities indicate that 30 per cent of Cuba's population has recently suffered from various arboviral diseases. 5 Flooding and damaged infrastructure increase health and sanitation risks. Response efforts are prioritising life-saving assistance, the restoration of essential services, and strengthening community resilience amid the overlapping and escalating humanitarian challenges.

Severity of humanitarian conditions

Cuba has a population of 11.32 million, making it the largest island in the Caribbean and the second-most

¹ Plan of Action – Response to Hurricane Melissa: United Nations System in Cuba (October 2025)

² OCHA. Cuba, Hurricane Melissa: Flash Update No. 7 (as of 14 November 2025)

³ OCHA. Cuba, Hurricane Melissa: Flash Update No. 6 (as of 8 November 2025)

⁴ OCHA. Cuba: Hurricane Melissa. Flash Update No. 4

⁵ OCHA. Cuba, Hurricane Melissa: Flash Update No. 7 (as of 14 November 2025)

populous after Hispaniola (Haiti and the Dominican Republic). The country invests heavily in health and education, resulting in high education indicators. Its Human Development Index is 0.764, placing it in the high human development category, and its GDP was USD 107.35 billion. While Cuba is the leading Caribbean producer of sugar, tourism has been the main source of foreign currency since the mid-1990s.

The country faces a complex economic situation and limited access to development funds and continues to experience severe humanitarian needs, exacerbated by longstanding economic challenges and recent disasters. In 2024, Cuba was affected by two hurricanes and two major earthquakes, causing extensive damage to infrastructure and essential services, including severe water shortages, power outages, and a strained healthcare system. ⁶ The situation has been further intensified by concurrent disease outbreaks, such as dengue, chikungunya, and the Oropouche virus, further intensifying the challenges facing the country.

1. Impact on accessibility, availability, quality, use, and awareness of goods and services.

Hurricane Melissa severely disrupted access to essential services. Shelter needs are critical, with nearly 150,000 homes affected, most with roof damage, forcing families into overcrowded schools, universities, and temporary collective centres.

Access to health services has been compromised, as 642 healthcare institutions suffered damage, with Santiago de Cuba (231) and Granma (144) being the hardest-hit provinces, facing roof collapses and carpentry damage as well as loss of medical equipment. ⁷ Meanwhile, medicine shortages – already a chronic issue before the hurricane – affect about 70 per cent of essential drugs, limiting treatment of common and vector-borne diseases. ⁸

Cuba's deteriorating infrastructure and prolonged drought conditions which deplete water reserves,

most notably during the dry season from November to April, have long strained the country's water, sanitation, and hygiene systems. Hurricane Melissa worsened these challenges by damaging electricity and hydraulic systems, which disrupted safe drinking water access across communities, institutions, and shelters. The storm intensified existing vulnerabilities, creating conditions ripe for the spread of waterborne and vector-borne diseases, especially in overcrowded evacuation centres and areas with stagnant water and poor waste management.

In response, urgent WASH interventions are needed to restore access to safe water and sanitation services. Support for vector control, hygiene promotion, and distribution of essential supplies, such as menstrual hygiene products and water treatment kits, is critical. Strengthening the resilience of WASH infrastructure through climate-adaptive solutions and community-led planning will be vital to protecting public health and supporting long-term recovery.

In the agricultural sector, crop damage has spread across 158,000 hectares, with grains, cassava, plantains, and coffee suffering the most significant losses. In certain parts of Santiago de Cuba, the full extent of damage to coffee plantations remains unassessed due to persistent flooding.⁹

Furthermore, damage has been observed in food storage, preparation, and preservation systems across households and institutions, including those integral to social protection programmes. These disruptions affect food availability and pose a serious risk to the economic stability of rural populations reliant on farming for their income. The agricultural and fishing sectors, key sources of employment and food security in eastern Cuba, have been devastated.¹⁰

2. Impact on physical and mental well-being

⁶ Latin Caribbean 2024-2026 IFRC network country plan

⁷ OCHA. Cuba, Hurricane Melissa: Flash Update No. 6 (as of 8 November 2025)

⁸ ACAPS. Anticipated Impacts of Hurricane Melissa, Cuba, 28 October 2025.

⁹ OCHA. Cuba, Hurricane Melissa: Flash Update No. 7 (as of 14 November 2025)

¹⁰ OCHA. Flash Update No. 4, 2 November 2025.

Physical well-being is threatened by exposure to damaged housing, flooding, and vector-borne disease outbreaks (dengue, chikungunya, and Oropouche).

Mental health needs are rising in the wake of Hurricane Melissa, as communities grapple with trauma from displacement, property loss, and the destruction of livelihoods, including for Cuban Red Cross (CRC) volunteers in the impacted areas. While psychosocial support brigades have been deployed by the CRC, coverage remains insufficient to meet the growing demand. An estimated 2.2 million people were affected by the storm across 33 municipalities in the provinces of Granma, Santiago de Cuba, Holguín, and Guantánamo, 11 and while specific mental health data for Cuba is not yet available, global disaster response trends indicate that 20-30 per cent of affected populations typically experience heightened levels of anxiety, depression, or trauma-related symptoms - a pattern recognised by the World Health Organization (WHO). This underscores the urgent need to scale-up mental health and psychosocial support (MHPSS) services to help individuals (including CRC volunteers) and communities recover and build resilience.

3. Risks and vulnerabilities

Pre-existing housing deficits, chronic poverty, and repeated prior storms intensify vulnerability. Women, children, persons with disabilities, and rural households are at heightened risk of protection violations, illness, and food insecurity. Among those most severely impacted, 50.2 per cent are women and 33.4 per cent reside in rural communities. 12 School closures impact over 670,000 students, including 8,500 with disabilities. 13 Slow reconstruction and limited shelter options prolong exposure to hazards and deepen existing

socioeconomic vulnerabilities. With the hurricane season extending until 30 November, the likelihood of further rainfall and the potential for new storms increases the risks to livelihoods, housing, and natural ecosystems in areas affected by Melissa.

Hurricane Melissa has further strained Cuba's fragile energy system – already weakened by deteriorating infrastructure and chronic fuel shortages – while ongoing economic, commercial, and financial embargoes, including international restrictions, continue to compound these challenges. The storm also disrupted the tourism industry, particularly in eastern provinces, where flooding and infrastructure damage led to the temporary closures of hotels and travel services, directly impacting the livelihoods of thousands of Cubans who depend on tourism for income.

Cuba's volatile currency (peso Cubano or CUP), marked by multiple exchange rates, severely limits its ability to finance recovery efforts. As of late 2025, the country operates with at least three distinct rates: an official rate of USD 1 to CUP 24 for state transactions, a Cuban Exchange Houses Network (CADECA) rate of around CUP 120 per USD for individuals, and an informal market rate exceeding CUP 400 per USD. These disparities distort the economy and restrict access to hard currency needed for imports and disaster relief.

As mentioned previously, the Ministry of Public Health (MINSAP) officially declared a complex arboviral outbreak on 15 October involving dengue, Oropouche, and chikungunya viruses. This situation represents a high risk for the operations in the field, exposing both staff and communities expecting assistance. Approximately 30 per cent of the population has become ill with one or more of these viruses¹⁴.

¹¹ OCHA. Cuba, Hurricane Melissa: Flash Update No. 6 (as of 8 November 2025)

¹² UN Cuba: PoA Response to Hurricane Melissa

¹³ OCHA. The Caribbean: Hurricane Melissa - Flash Update No. 4 (as of 4 November 2025)

¹⁴ OCHA. The Caribbean: Hurricane Melissa - Flash Update No. 4 (as of 4 November 2025)

CAPACITIES AND RESPONSE









IFRC National Society Directory.

1. National Society response capacity

1.1 National Society capacity and ongoing response

The CRC maintains a permanent presence nationwide, with 39,648 volunteers across 15 departmental and 183 branches. As part of the National Health System, it works closely with the National Civil Defence System and the MINSAP. The Operations and Relief Department leads disaster relief and coordinates prevention, preparedness, response, and recovery actions at the community level, including restoring family links (RFL).

Ahead of Hurricane Melissa, CRC staff and volunteers were mobilised 72 hours in advance, beginning evacuations on 26 October. As part of the Civil Defence Council, the National Society actively participated in evacuations in close collaboration with the National Civil Defence System and MINSAP, while also coordinating with the United Nations UNETE group.

As of 14 November, the CRC has mobilised 4,436 volunteers to support rescue operations, conduct damage assessments, and coordinate closely with Territorial Defence Councils and fire brigades. Teams have provided psychological first aid, distributed 1,000 pre-positioned family relief kits, and supported 35 evacuation centres with psychosocial support. All relief items transported on the charter flight of 2 November – including kitchen sets, hygiene kits, bedding sets, blankets, mosquito nets, solar lamps and plastic sheeting for 1,500 people – were pre-assigned for distribution in the provinces of Santiago de Cuba, Granma, and Holguín. Distributions are underway, beginning with 30 families in the communities of Boca de Dos Ríos and Aserradero, in the Municipality of Guamá, Santiago de Cuba Province. The CRC has also continued supporting the National Civil Defence System, which assisted 101,554 people in evacuation centres and a further 100,781 self-evacuated individuals staying with relatives or friends. Across the five eastern provinces affected by Hurricane Melissa, 612 volunteers have delivered RFL services, undertaken 325 search cases, and transmitted 34 Red Cross messages via amateur radio. Additional shipments of IFRC humanitarian aid are en route to the country.

1.2 Capacity and response at the national level

Cuba's robust early warning systems and preparedness protocols have been critical in minimising the impact of hurricanes across the island. These systems enable timely alerts, coordinated evacuations, and the continuity of essential services. This responsibility is led by Civil Defence, as the main agency in charge of disaster management, and is supported by the National Firefighters. The Provincial and Municipal Defence Councils are responsible for organising and implementing measures during disaster response and recovery situations following a system that escalates or de-escalates in phases: Informative (pre-impact), Alert (imminent impact), Alarm (impact and emergency), and Rehabilitation and Recovery (post-impact).

This national response framework works closely with authorities at both the national and local levels through the Civil Defence structure and MINSAP. Its activities include supporting health services, providing MHPSS, facilitating evacuations, and distributing essential supplies. The CRC is a key actor in this framework.

2. International capacity and response

2.1 Red Cross Red Crescent Movement capacity and response

IFRC membership

The Cuban Red Cross (CRC) is one of three National Societies within the IFRC's Latin Caribbean Country Cluster Delegation (CCD), based in Santo Domingo, covering the Dominican Republic, Haiti, and Cuba. The IFRC provides continuous support through its global, regional, and delegation teams.

With no Participating National Societies (PNSs) present in Cuba, the IFRC focuses on strengthening unified planning and promoting the membership's Way of Working, encouraging collaboration on National Society priorities and shared management of international cooperation. Technical focal points from the Regional Office for the Americas and the CCD for Cuba, Haiti, and the Dominican Republic engage in ongoing dialogue and peer exchanges to advance strategic planning and implementation.

In coordination with the Cuban Red Cross and the Swiss Embassy in Havana, the Swiss Red Cross supports hurricane response efforts by enabling safe water access through the quality assessment of water supplies, provision of safe water storage and treatment plants. The Disaster Risk Management Coordinator for the Cuba, Dominican Republic, and Haiti IFRC Country Cluster Office was deployed on 29 October to support the National Society. In parallel, the IFRC has confirmed the deployment of an Operations Coordinator and a Supply Chain Coordinator, both based in the Dominican Republic, with frequent field visits to support the response. These deployments were prioritised according to the most pressing needs identified by the CRC, with additional profiles to be launched as the situation evolves. In the framework of the current response, the IFRC has approved a CHF 997,991 DREF as kick-off funds for the emergency response, which are part of the overall response being implemented.

ICRC

The International Committee of the Red Cross (ICRC) is in permanent communication with the Cuban Red Cross through their office based in Venezuela, mainly supporting in the identification of main needs for the provision of Restoring Family Links (RFL) services. The ICRC and IFRC maintain close coordination through their respective regional offices.

2.2 International Humanitarian Stakeholder capacity and response

The United Nations (UN) in Cuba is supporting national response efforts to address the most urgent needs through proactive measures, including the pre-positioning of supplies within the country and the mobilisation of its own resources. Coordination is underway between the Cuban Refugee Agency (CRA) and the UNETE Group, while international organisations and UN agencies are leveraging their strengths and resources to support Cuba's response to Hurricane Melissa.

The UN system in Cuba, together with the government, has launched a Plan of Action to support the national response to the impact of Hurricane Melissa, aiming to assist one million people in the eastern provinces. The plan is requesting USD 74 million – with USD 11 million already secured (USD 4 million from the CERF's anticipatory funds and USD 7 million from UN agencies) – leaving a USD 64 million funding gap. The response focuses on health, water, sanitation, and hygiene (WASH), shelter, education, and early recovery and prioritising women, children, and vulnerable groups.¹⁵

For example, the Pan American Health Organization (PAHO) dispatched over 2.6 tons of emergency medical supplies from its regional stockpile to support Cuban authorities in the affected eastern provinces. ¹⁶ UNICEF mobilised pre-positioned supplies for child health, education, and WASH services, ¹⁷ while WFP and UNDP are leading food security and early recovery initiatives. Donor governments and partners are contributing funding and technical assistance to bridge critical response gaps. Coordination between the Humanitarian Country Team

¹⁵ <u>UN Geneva News, 5 November 2025</u>

¹⁶ PAHO News Release, 29 October 2025

¹⁷ UNICEF Cuba Press Release, 2 November 2025

(HCT), cluster leads, and national authorities ensures complementarity and efficiency across the humanitarian response.

4. Gaps in the response

This section provides information on the unmet needs and response gaps identified in Cuba. The narrative is based on rapid needs assessments and situation reports carried out by multiple actors, including the Cuban Red Cross, OCHA, and other humanitarian organisations. The analysis highlights current and emerging vulnerabilities, potential health and protection risks, and limitations in coping capacities.

Shelter

Hurricane Melissa affected nearly 150,000 homes¹⁸, forcing families into overcrowded schools, universities, and temporary collective centres. Pre-existing housing deficits and slow reconstruction exacerbate exposure to hazards, increasing vulnerability to further storms and continuous rainfall. Approximately 7,500 individuals remain in shelters as of 10 November.¹⁹ Urgent support is needed to provide safe, durable shelter solutions that reduce overcrowding and associated protection risks, especially for women, children, and people with disabilities, and to restore dignity to displaced families and enable the resumption of education services. Without accelerated recovery efforts and sustained international assistance, thousands risk facing prolonged displacement in inadequate living conditions.

Livelihoods

Hurricane Melissa delivered a devastating blow to livelihoods across Cuba, with 158,000 hectares of crops damaged – grains, cassava, plantains, and coffee among the hardest hit²⁰. In Santiago de Cuba, ongoing flooding has prevented a full assessment of coffee crop losses. The destruction extends to fishing boats and livestock, severely undermining food security and income sources, and deepening economic vulnerability. Compounding these impacts, Cuba's already fragile power grid – plagued by aging infrastructure, frequent breakdowns, and chronic fuel shortages – is further destabilised, causing widespread outages that disrupt food storage and market operations.

Health

Damage to 642 healthcare institutions, medicine shortages, and disrupted infrastructure have constrained healthcare delivery²¹. The surge in suspected cases of Dengue, Oropouche, and Chikungunya in Cuba, since the arboviral diseases outbreak declared in October by the MINSAP, especially in Matanzas and the eastern provinces, is driven by heavy rainfall that boosts mosquito breeding and disease transmission. Limited access to fumigation and vector-control equipment, coupled with low community awareness and weak surveillance, hampers prevention efforts. Inadequate training for early case detection and the absence of essential tools like mosquito nets and sprayers exacerbate the crisis, while affected populations face psychological distress and economic hardship due to illness and hospitalization. Additionally, severe disruptions to the power grid have heightened the risk of difficulties in health care access, especially in communities with limited access to refrigeration, supply chains, and essential services.

Water, Sanitation, and Hygiene (WASH)

Access to safe drinking water is critically limited due to damaged networks and power outages. Emergency purification plants serve only a fraction of the affected populations, while hygiene awareness campaigns are urgently needed to prevent disease outbreaks. Immediate support is needed to restore water infrastructure and expand purification capacity to reach underserved communities. Without adequate WASH interventions, the risk

¹⁸ OCHA. Cuba, Hurricane Melissa: Flash Update No. 7 (As of 14 November, 2025)

¹⁹ IOM Caribbean: Hurricane Melissa – Situation Report No. 7

²⁰ OCHA. Cuba, Hurricane Melissa: Flash Update No. 7 (As of 14 November, 2025)

²¹ OCHA. Cuba, Hurricane Melissa: Flash Update No. 6 (As of 8 November, 2025)

of waterborne illnesses and hygiene-related infections will continue to rise, especially among children and vulnerable groups.

Protection, Gender, and Inclusion (PGI)

Women, children, persons with disabilities, and rural households face heightened protection risks, interrupted education, and reduced coping capacity. Over 670,000 students, including 8,500 with disabilities, have been impacted by school closures, increasing vulnerability, and psychosocial distress. Targeted PGI support is needed to ensure safe and inclusive recovery services. Without coordinated interventions, marginalised groups risk being left behind in both the humanitarian response and long-term recovery efforts.

Disaster Risk Reduction (DRR)

Chronic poverty, repeated prior storms, and ongoing rainfall amplify disaster risks across vulnerable regions. Limited shelter options and slow recovery prolong exposure to hazards, while the extended hurricane season threatens further damage to housing, livelihoods, and ecosystems. Strengthening disaster risk reduction is essential to break the cycle of vulnerability – through resilient infrastructure, early warning systems, and community-based preparedness. Investing in mitigation measures and climate-adaptive planning will help reduce future losses and protect at-risk populations from escalating environmental threats.

Restoring Family Links (RFL)

The CRC and its volunteers are actively carrying out RFL activities to help to reconnect families separated by the disaster. To enhance their capacity, the CRC is planning to acquire RFL kits to build operational capacity and ensure preparedness.

Cuba is facing severe connectivity challenges – widespread power outages disrupted mobile networks and internet access, especially in the eastern provinces. Limited digital infrastructure and low-tech availability in rural areas further hinder emergency coordination and communication efforts. Telecommunications have been critically impacted: only three per cent of landline phones and 18 per cent of radio base stations remain operational, severely limiting access to timely information and increasing vulnerability for thousands. Authorities reported damage to over 1,000 poles, 400 telephone cables, 60 fibre optic lines, and six towers, with repairs expected to take weeks.²²

In the wake of Hurricane Melissa, digital connectivity has become a lifeline for both RFL and supporting the mental health and psychosocial well-being of affected communities. The ability to charge mobile devices, access Wi-Fi, and contact loved ones offers emotional reassurance, reduces anxiety, and helps people feel less isolated – especially in areas cut off by power outages and infrastructure damage. Reconnecting digitally is essential not only to locate missing relatives and coordinating humanitarian support across borders, but also to strengthen psychological resilience in the face of crisis.

OPERATIONAL CONSTRAINTS

The response to Hurricane Melissa is challenged by multiple, interrelated factors that affect the timeliness and effectiveness of humanitarian operations. Delays in the procurement and transport of essential supplies due to import restrictions imposed by the US embargo remain a significant barrier. Strict administrative procedures, limited shipping routes, and restrictions on international financial transactions slow the delivery of critical items, including roofing materials, water tanks, and hygiene supplies. Damaged transport infrastructure and acute fuel shortages further constrain logistics and the provision of essential services.

Key operational constraints include:

- Limited access to safe water from damaged networks and post-flood contamination.
- The ongoing hurricane season increases the likelihood of additional storms.

²² OCHA. Cuba: Hurricane Melissa. Flash Update No. 5

- Reduced food availability from slow crop recovery and livestock/fishing losses.
- Shelter gaps from nationwide shortages of roofing and construction materials.
- Prolonged outages in electricity, telecoms, and water disrupt coordination, WASH services, and communications, increasing reliance on scarce generators and fuel.
- Health service delivery constrained by facility damage; high reservoirs and water-supply issues raise overflow risks.
- Administrative and bureaucratic restrictions may slow international aid delivery and scale-up.

These challenges are compounded by volunteer fatigue, health and safety risks, and wider economic and supplychain instability. Operational planning prioritises risk mitigation, volunteer protection, and contingency measures to sustain relief efforts amid these constraints.

FEDERATION-WIDE APPROACH

The Emergency Appeal is part of a Federation-wide approach, based on the response priorities of the Cuban Red Cross and in consultation with all members of the IFRC network contributing to the response. The approach, reflected in this Operational Strategy, will ensure linkages between all response activities and assist in leveraging the capacities of all members of the IFRC network in the country, to maximise the collective humanitarian impact.

The Federation-wide funding requirement for this Emergency Appeal comprises all support and funding to be channelled to the Cuban Red Cross in response to the emergency event. This includes the CRC's domestic fundraising ask, the fundraising ask of supporting Red Cross and Red Crescent National Societies, and the funding ask of the IFRC Secretariat. While no PNSs are permanently based in Cuba, several are deploying Rapid Response personnel through the IFRC Surge mechanism, including the Bolivian Red Cross and Swiss Red Cross.

OPERATIONAL STRATEGY

Vision

This Emergency Appeal aims to address the urgent needs of people affected by Hurricane Melissa in Cuba and the current Arbovirus outbreak.²³ It will provide humanitarian assistance and recovery support to 100,000 people (30,000 households) in Santiago de Cuba, Granma, and Holguín over 24 months, while strengthening community resilience through the CRC and its volunteers.

Population Impact Summary

Province	Population ²⁴	Estimated # severely impacted ²⁵	% of Provincial Population
Granma	810,138	502,140	~62%
Santiago de Cuba	1,040,897	963,965	~93%
Holguín	1,012,768	491,690	~49%
Total	3,366,029	~2.2 million	~65% average

The operation will deliver Shelter, Health, including MHPSS, WASH, Risk Reduction, and Recovery interventions. Protection, Gender, and Inclusion (PGI) and Community Engagement and Accountability (CEA) will guide all activities. The Emergency Appeal will also strengthen National Society capacity, prioritising branch development, digital transformation, volunteer management, and safeguarding.

Ongoing hurricane and flooding risks will be mitigated through hydrometeorological monitoring and adaptive operations. By combining immediate relief with resilience-building, the IFRC and CRC aim to protect lives, restore dignity, and support long-term recovery.

²³ IFRC DREF Operation MDRCU012: Cuba: Arboviral Outbreak

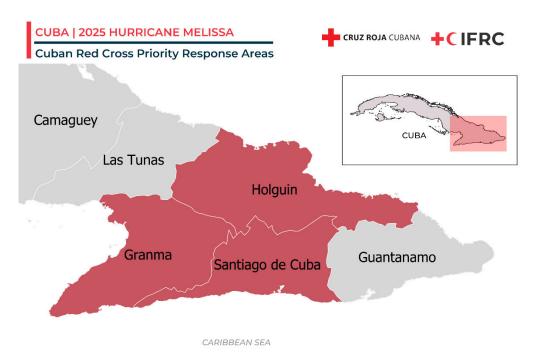
²⁴ Oficina Nacional de Estadística e Información, Cuba

²⁵ Plan of Action – Response to Hurricane Melissa: UN OCHA, October 2025

Anticipated climate-related risks and adjustments in the operation

With the rainy season in Cuba extending from April through November, and hurricane season running from June through the end of November, there remains a significant risk of additional rainfall and severe weather that could affect the ongoing operations. Although recent measurements indicate relatively low accumulations at this time (2.7 mm nationally and 0.5 mm in the eastern provinces), the season is still active, and soil and reservoir saturation levels remain high. Reservoirs in Santiago de Cuba (100 per cent), Guantánamo (99 per cent), and Holguín (95 per cent) are near or at full capacity, with several already overflowing. Excessive rainfall could further aggravate conditions in flood-prone areas and delay the recovery process for communities, particularly in Granma and Santiago de Cuba, where Río Cauto and Cauto Cristo remain under the alert phase. There is a risk of additional storm exposure with hurricane season extending until the end of November. The operation will continue to closely monitor meteorological forecasts and reservoir levels, adjusting implementation as needed to reduce risk and ensure community safety.

Targeting



The maps used do not imply the expression of any opinion on the part of the international Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities. Sources: ICRC; UN. Produced by IFRC Americas, HDCC, IM Team. November 2025.

People to be assisted

Initial assessments by the Cuban Civil Defence, UNOSAT, and the Cuban Red Cross (CRC) estimate that 2.2 million people have been affected across Santiago de Cuba, Guantánamo, Holguín, Granma, Las Tunas, and Camagüey. The CRC is prioritising the provinces of Santiago de Cuba, Granma, and Holguin, where it has a presence through provincial branches, to provide support to 30,000 households (approximately 100,000 people) whose homes suffered significant damage from Hurricane Melissa, concurrently addressing the Arbovirus outbreak in these areas. Although detailed disaggregated data is not yet available at this stage of the operation, the CRC will systematically collect and report sex-, age-, and disability-disaggregated data (SADD) as assessments progress. These data will be incorporated into the operation's updates and report.

To carry out the selection process of the target population, priority will be given to families that meet the following criteria:

²⁶ Centro de Dirección del Consejo de Defensa Nacional, "Parte Resumen Preliminar No. 11: Para Situaciones de Desastres, Huracán Melissa"

²⁷ UNCT Cuba: Flash update 0.4 Hurricane Melissa

- Families with damaged or destroyed homes
- · Families with total or partial roof damage
- Single-parent households
- Households with dependent elderly adults
- Households with children under five years old and/or pregnant women
- Households with people with disabilities and/or chronic illnesses
- Households that have suffered heavy losses of livelihoods (particularly among those dependent on the agricultural, fishing and tourism sectors)

This selection process will be coordinated by the CRC's provincial branches, which are currently assessing the needs of the municipalities in their respective provinces, in collaboration with local governments, Civil Defence, and civil society organisations. Support will also be provided for damage assessments and needs identification in coordination with the Territorial Defence Councils. Needs assessments are ongoing; however, results are not yet fully available due to access constraints and extensive damage. Sex-disaggregated targets will be included once the needs assessment is completed.

The table below consolidates the planned targets per sector.

Sector	People Targeted
Shelter and Household Items	50,000
Health (including MHPSS and Community Health)	50,000
Water, Sanitation, and Hygiene (WASH)	50,000
Protection, Gender, and Inclusion (PGI)	100,000
Community Engagement and Accountability (CEA)	100,000
Risk Reduction, Climate Adaptation and Recovery	15,000

Considerations for protection, gender, and inclusion and community engagement and accountability

The actions implemented within this operation will be carried out in accordance with the Minimum Standards for Protection, Gender, and Inclusion, which seek to ensure that the actions undertaken are implemented under the DAPS framework (Dignity, Access, Participation, and Security). This also includes the safeguard mechanism for the protection of children and the prevention of exploitation and sexual abuse.

The CRC maintains a strong and close relationship with the communities it serves. Through community meetings, focus groups, and contact with key informants, the CRC guarantees the meaningful participation of people from the affected communities. During the activities implemented within the framework of this response, and through volunteers trained in feedback and complaint mechanisms, the CRC will collect questions, suggestions, complaints, and any other information shared by the people affected.

This information will be documented and analysed to provide the operation with relevant data to adapt interventions to the real needs expressed by the community. CRC teams will ensure accountability for the

opinions gathered in community assemblies and focus groups. Furthermore, focus groups will be conducted during educational and family support sessions to identify potential gaps in the intervention and ensure that the response guarantees participation, accountability, and the application of a PGI approach. It should also be noted that PGI and CEA interventions will be implemented across all sectors.

PLANNED OPERATIONS

A multi-sectoral needs assessment covering shelter, health, WASH, and other relevant sectors will first be conducted to identify vulnerable households, determine their priority needs, and guide the prioritisation of assistance. Based on the findings of this assessment, the following activities will be implemented to respond to the needs of the most affected households:

INTEGRATED ASSISTANCE

	Shelter, Housing,	Female > 18: N/A	Female < 18: N/A	CHF 5,859,950
	and Settlements	Male > 18: N/A	Male < 18: N/A	Total target: 15,000 HHs / 50,000 people
Objective:			nieving safe sheltering sc n emphasis on the Build	
Priority Action	ons:	shelter tool kit awareness rais Distribute esse mattresses, be Conduct a she severity to how facilities and the Recovery Phase Train voluntee such as the Pa Awareness (PA Conduct technic committees or safer" guidance Prioritize and sevacuation she for future ever Distribute room 25 zinc sheets together with a gloves, welding tools and safe Conduct traini	nical orientation for schoon safe roofing practices, it is strengthen schools previously their parts. If it is to 2,500 househous previously their parts are purlins, six ridge common services and services are pair tool kits that in grods, a welding machine.	together with basic liters. ncluding kitchen sets, mps. o identify damage are facilities and school rticipatory methods, Safe Shelter ol management including "build back iously used as preparedness capacity holds, each containing aps, and screws, include drills, ladders, ie, and other essential

HEALTH AND CARE INCLUDING WATER, SANITATION, AND

HYGIENE (WASH)

(MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT / COMMUNITY HEALTH)

0	Health and Care (Mental Health and Psychosocial Support/ Community Health/Medical Services)	Female > 18: N/A	Female < 18: N/A	CHF 2,984,000
P		Male > 18: N/A	Male < 18: N/A	Total target: 15,000 HHs / 50,000 people
Objective:		Implement health promotion activities and provide first aid and psychological support services at the community level to reduce the risk of increased morbidity and mortality, and enhance the overall well-being of the affected population.		
Priority Actio	ons:	 Conduct MHPS the community Provide mental including psychemic psychemic psychemic provide PFA arresponders. Deliver community per provide focused parenting session children), integrated developed in community-based parenting session parenting se	In health and psychological hological first aid (PFA), the modern action with a wareness key mesting through the most appears to held psychosocial support and psychosocial support and socio-emotions and socio-emotions and socio-emotions are distributed into proposed safe collaboration with PGI. Assed health and first aid and volunteers. Assed surveillance through maigns. Asserved for Volunteers (ECV) with a modern and repellents and repellents and the modern accordance with the modern and capacities.	ify prioritised needs at cal support training, to staff and volunteers. ivities to first ssages on distress, propriate channels (e.g. cion points). to affected groups (e.g. al sessions for fe spaces and training for the awareness and training. to the most vulnerable th national guidelines.
		local public he Provide backu	ations and medical supp alth care system. p power sources to supp plar panels and generato	port local health care

Female > 18: N/A Female < 18: N/A CHF 2,520	,900
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	Water, Sanitation, and Hygiene	Male > 18: N/A	Male < 18: N/A	Total target: 15,000 HHs / 50,000 people
Objective:		Increase access to safe drinking water, sanitation facilities, and hygiene promotion services for the affected population to reduce the risk of waterborne diseases.		
Priority Actio	ons:	the available re WASH). The ass infrastructure t Distribute hygic to provide eme Ensure the sto providing wate equipped with tablets and filte Conduct comm campaigns, that using hygiene p	nunity-level hygiene awa at also cover menstrual horomotion materials in a port accessibility. al capacities through W	d (such as an ERU cal health care management. I menstrual hygiene kits e household level. drinking water by jerry cans and buckets with water purification reness promotion hygiene management,

PROTECTION AND PREVENTION

(PROTECTION, GENDER, AND INCLUSION (PGI), COMMUNITY ENGAGEMENT AND ACCOUNTABILITY (CEA), MIGRATION, RISK REDUCTION, CLIMATE ADAPTATION AND RECOVERY, ENVIRONMENTAL SUSTAINABILITY, EDUCATION)

	Protection,	Female > 18: N/A	Female < 18: N/A	CHF 69,000
Gender, and Inclusion		Male > 18: N/A	Male < 18: N/A	Total target: 30,000 HHs / 100,000 people
Objective:		Ensure that Cuban Red Cross staff and volunteers identify the needs of the most at risk and particularly disadvantaged groups, facilitating access to assistance, equitable participation, and safe and dignified conditions in collective centres.		
Priority Actio	ns:	 Conduct a training/refresher with volunteers in Safeguard and Protection from Sexual Exploitation and Abuse (PSEA) and Child Safeguarding, as per IFRC policies. Raise community awareness on PSEA through targeted campaigns and the dissemination of printed safeguarding messages. Ensure integration of PGI standards in all distributions: prioritising women-headed households, the elderly, and persons with disabilities. Establish safe spaces for women and children in shelters. 		on and Abuse (PSEA) clicies. chrough targeted rinted safeguarding key all distributions: s, the elderly, and

- Establish a PGI focal point within the Cuban Red Cross to ensure the strengthening of local long-term capacities in the mainstreaming of PGI.
- Provide device charging kits to enable RFL services during emergencies.
- Reinforce the search messages services and further enable the affected population in communicating about their wellbeing, in close coordination with the ICRC.

	Community	Female > 18: N/A	Female < 18: N/A	CHF 79,000
Engagement and Accountability	Male > 18: N/A	Male < 18: N/A	Total target: 30,000 HHs / 100,000 people	
Objective:		CRC to have a tho integrating meaningfu	rough understanding Il community participat to listen to and act o	ountability to enable the of community needs, ion, and implementing n community feedback
Priority Actio	ons:	discussions, complemented noticeboards is be safe, access. Include a clemechanism for reports related. Prioritise low including doo and coordinatinformation to telecommunic. CEA support for mechanisms a with PGI and the Collect and volunteers and accurate, trust. Coordinate be to ensure that	the by visual common shelters and communications and appropriate for ear guideline or proton managing sensitive of to Sexual Exploitation and tech, trust-based contexts at the communications and frequent power establishing communications team verify community conducted to local contexts and local leaders to address to discal leaders to address to discalled the community of	th local committees, unication tools and nity centres, adapting to or children. ocol in the feedback information, including and Abuse (SEA). mmunication systems, community assemblies, ommittees, to ensure usivity despite fragile ver cuts. ity feedback is, ensuring integration ms. oncerns through CRC is information gaps with despite fragile, and communication teams clusive, accessible, and

#	Risk Reduction, Climate Adaptation and Recovery	Female > 18: N/A	Female < 18: N/A	CHF 125,352
		Male > 18: N/A	Male < 18: N/A	Total target: 5,000 HHs / 15,000 people
Objective:			ry resilience to better rophe strikes again and	

	future disasters and climate change impacts through targeted activities that strengthen readiness, preparedness, early action, response, and ultimately, resilience. This includes enhancing the capacities of the local National Society and relevant entities through the priority actions below.
Priority Actions:	 Train CRC volunteers and staff in Enhanced Vulnerability and Capacity Assessment (EVCA) to strengthen their skills in identifying community needs and risks. Conduct an Anticipatory Action (AA) Feasibility Study to assess the readiness and capacity of communities in implementing AA and identify pathways to integrate AA into governance systems. Conduct Anticipatory Action T1 training to equip participants with the competencies needed to design, implement, and institutionalise effective AA systems. Conduct municipal-level AA Training of Trainers (ToT) training, to strengthen skills in identifying community needs and risks. Develop a simplified Early Action Protocol (sEAP).

Enabling approaches

National Societ Strengthening	National Society	Female > 18: N/A	Female < 18: N/A	CHF 823,898
		Male > 18: N/A	Male < 18: N/A	Total target: 5,000 volunteers
Objective:		Strengthen the CRC's response capacities by supporting ongoing institutional and operational development in line with the National Society's strategy and preparedness plans, leveraging rapid response expertise and laying the foundations for longer-term capacity strengthening throughout the operation.		
Priority Action	ons:	 Volunteer Management and Development Enhance first-response capacity through the facilitation National Intervention Team (NIT) training, strengthe volunteer skills in needs assessment, emergency response protocols, and coordination. Ensure volunteer safety and sustained mobilisation providing personal protective equipment (PPE), be rescue gear, and essential tools for up to 300 volunted deployed across affected provinces. Support volunteer retention and performance improving conditions for deployment and strengthe branch-level volunteer management practices through the Emergency Appeal implementation period. Digital Transformation and Operational Readiness Strengthen operational capacities by providing lapt 		training, strengthening ont, emergency response stained mobilisation by quipment (PPE), basic or up to 300 volunteers s. and performance by ment and strengthening ont practices throughout action period.

- connectivity to enhance data collection, coordination, and reporting.
- Improve office and branch readiness by equipping key operational hubs with essential office equipment to ensure the continuity of operations during high-demand periods.
- Reinforce fleet and energy resilience by procuring vehicles, motorcycles, and backup power systems, and repairing the existing fleet to guarantee timely access to the affected areas and maintain critical services.

Activate a Mobilisation Table to coordinate in-kind

on tracking and documentation.

contributions from partners and donors, with a strong focus

	IFRC Secretariat Services	Female > 18: N/A	Female < 18: N/A	CHF 811,600	
		Male > 18: N/A	Male < 18: N/A	Total target: N/A	
Objective:		The IFRC secretariat is capable and equipped to support hurricane response and preparedness, delivering services as planned in the Emergency Appeal in a timely manner and in full compliance with IFRC policies, procedures, and minimum standards as stated in the Sphere Guidelines and Humanitarian Charter.			
Priority Actio	ons:	response by of the deployme Chain Coordin Delegation, and Regional Common Coordinator. Reinforce the services of the and the Americal qualified assisting implementati Support the Notation Support the Coordinator.	technical support to impodeploying key technical potent of an Operations Coordinator from the Latin Carilland technical sector leads amunications Manager and programmatic, operations Latin Caribbean Countricas Regional Office to enstance to the Cuban Redon of the operation. National Society in coordinational Red Cross in adherand policies.	ersonnel. This includes rdinator and a Supply obean Country Cluster as needed, such as the nd the Regional WASH hal, and support y Cluster Delegation asure adequate and Cross in the	
		effective plan transport of r • Develop a log items, in line • Coordinate th essential item	ly Chain: disting supply chain structioning for procurement, waterlief items from IFRC registrates plan to streamline to with IFRC procedures and procurement and interest both for the relief and prepair kits and essential has been seen to be the repair kits and essential has been to be the relief and procurement with	arehousing, and the onal warehouses. The dispatch of relief distandards. Thational shipment of early recovery phase,	

 Provide technical support to the Cuban Red Cross on IFRC procurement procedures ensuring that procurement is carried out according to principles of efficiency, transparency, and accountability, with guarantees of quality and traceability.

3. Planning, Monitoring, Evaluation, and Reporting (PMER):

- Jointly develop a monitoring plan with the Cuban Red Cross based on key indicators to track operational progress.
- Support the drafting of Operations Updates and the final report, ensuring quality and timely delivery.
- Assist the Cuban Red Cross in planning and conducting postdistribution monitoring at the end of both the relief and recovery phases to assess the satisfaction and relevance of the assistance received.
- Conduct a lessons learned workshop to identify best practices and areas for improvement, together with a final evaluation of the emergency operation.

4. Communications:

- Design a communications plan specific to the operation, with key messages aligned to the context and humanitarian objectives.
- Support the Cuban Red Cross in developing communication materials to increase visibility and promote accountability.
- Contribute to strengthening the communications capacity of the Cuban Red Cross.

5. Information Management (IM):

- Support the Cuban Red Cross throughout the data management cycle (collection, processing, and analysis) to ensure timely and evidence-based decision-making.
- Develop visual products such as maps, dashboards, and infographics to inform and guide operational decisionmaking.
- Keep the emergency page on GO updated to ensure access to essential documents and operational reports.

6. Human Resources and Surge Deployment:

- Coordinate the timely deployment of specialised personnel through rapid response mechanisms.
- Promote measures to safeguard the physical and emotional well-being of deployed personnel.
- Ensure continuity of the technical and operational long-term support required for the sustainability of the intervention.

7. Resource Mobilisation:

- Develop and implement a resource mobilisation strategy to strengthen partnerships both within and beyond the Movement.
- Facilitate information sharing with donors, ensuring transparency regarding commitments, contributions, and funding gaps.

Security:

- Ensure that all IFRC staff and deployed personnel are aware and briefed on the expanded security welcome brief, including standardised procedures applicable at all times.
- Deliver offline security and operational safety training to CRC staff and volunteers using locally hosted IFRC materials.
- Strengthen operational risk mitigation measures to enhance the safety of CRC teams during deployment and response activities.

9. Humanitarian Diplomacy – legal facilities:

- Support the Cuban Red Cross in strengthening its capacity to manage customs and other related facilities for the relief operation.
- Contribute to strengthening the humanitarian diplomacy of the Cuban Red Cross in the exercise of its auxiliary role.

Risk management

Risk	Likelihood	Impact	Mitigating actions
1. Prolonged operations and overlapping emergencies (e.g. hurricanes, virus outbreak, earthquake may lead to volunteer fatigue and reduced capacity for sustained engagement.	Low	Medium	The operation will provide protective equipment, visibility items, psychosocial support, and insurance coverage for all volunteers. A rotational deployment will be implemented to ensure rest periods while maintaining operational efficiency.
 Exposure to vector- borne diseases and unsafe environments during community work may increase infection or accident risk among volunteers or IFRC staff. 	High	Medium	 Volunteers and IFRC staff will receive refresher/training on stay safe and epidemic control, will be provided with personal protective equipment (PPE) and arboviral diseases prevention kit (including repellents, mosquito nets). The CRC will coordinate closely with MINSAP to ensure adherence to public health safety standards.
3. Delays in the procurement and transport of essential supplies due to impor restrictions as a result of the US embargo pose a significant challenge in emergency situations.		Medium	 Early coordination with the IFRC Regional Logistics Unit (RLU) in Panama and Cuban authorities on customs clearance and prioritised shipments will mitigate this risk for timely delivery.
 Looting of governmen trucks transporting food assistance due 	t Low	High	 CRC to plan for distributions of essential household items in trucks with visible CRC logos, in

the unavailability or scarcity of supplies at the local level.			close coordination with local authorities and communities, sharing in advance, distribution plans and using a community targeting approach to identify the most vulnerable households.
Insufficient funds pose a risk to operational continuity.	Medium	Medium	 Proactive donor engagement and fundraising.

Quality and accountability

Federation-wide monitoring and reporting will be conducted throughout the operation. Regular internal reporting will be maintained, while external reporting will adhere to IFRC standards. IFRC Planning, Monitoring, Evaluation, and Reporting (PMER) and Information Management (IM) teams will engage with all National Societies to provide consultation and support in establishing and maintaining the necessary systems and practices for consistent monitoring.

The operation has included a systematic approach to Monitoring, Evaluation, and Learning (MEL), information sharing, and reporting. A comprehensive MEL plan will be developed and implemented at the country level, which will include regular monitoring of the key indicators outlined in the above table and targeted activities to reach the identified affected individuals.

A harmonised list of indicators, with data regularly collected and reported, will provide a comprehensive overview of IFRC network solidarity and response efforts. Disaggregated data will be collected, to the extent feasible, to reflect the needs of different groups. The Secretariat will support data collection from the Cuban Red Cross to generate interactive dashboards showing the services provided and people reached, and produce regular reports on activities. The WASH, shelter, and health sectors will ensure that appropriate steps for post-distribution monitoring are taken in both the relief and recovery phases, with PMER providing follow-up input. This includes ensuring quality control of roofing activities and conducting all necessary post-distribution monitoring.

A child safeguard training/refresher for volunteers is planned as part of PGI activities, including a PSEA session to be completed by all volunteers. All volunteers will be required to have signed the code of conduct and will be covered with the IFRC insurance in case of accident or death during volunteer activities.

Evaluation and learning will be promoted through a final cross-country evaluation and, if feasible, a Federation-wide lessons learned workshop. The Federation-wide list of indicators defined for the initial phase of the operation is as follows (this list may be updated and expanded as the operation evolves):

Intervention areas Integrated assistance



Shelter and Basic Household Items

Indicators

Number of households provided with essential relief items (tarpaulins and shelter tool kits)

Number of households provided with essential household items (kitchen sets, mattresses, bedding sets, and solar lamps)

Number of people who attended basic awareness raising sessions on safe shelter

Number of volunteers trained in roof repair and participatory methods such as PASSA

Number of technical orientation sessions conducted for school management committees on safe roofing practices, including Build Back Safer guidance

Number of households provided with roofing kits

Number of repair toolkits distributed

Number of community roofing brigade members who attended home repair training workshops

Number of households with repaired or rehabilitated roofs

Health and Care including Water, Sanitation, and Hygiene (WASH)



Health and Care

(Mental Health and Psychosocial Support/Community Health/Medical Services)

Indicators

Number of people reached with mental health and psychosocial services (MHPSS) from the Cuban Red Cross Number of volunteers and staff trained in mental health and psychosocial support (including psychological first aid)

Number of community awareness messages delivered on distress, grief, and coping through appropriate channels (e.g., radio, leaflets, or distribution points)

Number of people trained in community-based health and first aid

Number of volunteers trained in Epidemic Control for Volunteers (ECV)

Number of community-based surveillance awareness and promotion activities conducted

Number of households provided with mosquito nets and repellent

Number of first aid kits and haemorrhage control kits distributed

Number of medications and medical supplies distributed

Number of backup power sources distributed



Water, Sanitation, and Hygiene

Indicators

Number of households reached with hygiene supplies

Number of people provided with an improved protected source of drinking water

Number of people reached with menstrual hygiene kits

Number of people reached with dignity kits

Number of households reached with household water storage and water treatment items

Number of community-level hygiene promotion / awareness sessions conducted

Number of WASH training workshops conducted for National Society staff / volunteers

Protection and Prevention

(Protection, Gender, and Inclusion (PGI), Community Engagement and Accountability (CEA), Migration, Risk Reduction, Climate Adaptation and Recovery, Environmental Sustainability, Education)



Protection, Gender, and Inclusion

Indicators

Number of target locations where the Cuban Red Cross has established safe spaces for people at particularly high risk

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

The Cuban Red Cross has a Protection, Gender and Inclusion (PGI) focal person

The Cuban Red Cross has standalone, integrated or mainstreamed PGI programming that meets agreed minimum standards

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

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



Community Engagement and Accountability

Indicators

Number and percentage of complaints or feedback about the Cuban Red Cross operation which receive a response through established community communications

Number of staff, volunteers and leadership trained in community engagement and accountability

Percentage of affected people surveyed report that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner

Percentage of people surveyed who report they know how to provide feedback about the operation

Number of satisfaction surveys completed



Risk Reduction, Climate Adaptation, and Recovery

Indicators

Number of volunteers and staff trained in EVCA

Number of participants trained in Anticipatory Action T1 to build competencies for designing, implementing, and institutionalizing AA systems

Number of municipal-level AA training sessions or ToT sessions conducted to strengthen skills in identifying community needs and risks

Number of Simplified Early Action Protocols (sEAP) developed and validated for communities or municipalities

Enabling approaches



National Society Strengthening

Indicators

The National Society has identified knowledge transfer mechanisms from surge capacity to their staff for the duration of the operation

Number of volunteers provided with equipment for protection, safety and support (e.g. PSS) appropriate to the emergency

Number of volunteers trained through National Intervention Team (NIT) training on needs assessment, emergency response protocols, and coordination



Secretariat Services

Indicators

Number of rapid response personnel supporting the operation

Joint coordination tools and mechanisms are in use within the Membership's response (Yes/No)

FUNDING REQUIREMENT

Federation-wide funding requirement*

Federation Wide Funding Requirement including the National Society domestic target, IFRC Secretariat and the Partner National Society funding requirement

IFRC Secretariat Funding Requirement in support of the Federation-wide funding ask

CHF 16.5 million

CHF 15 million

Breakdown of the IFRC secretariat funding requirement



OPERATIONAL STRATEGY

MDRCU013 - Cuba Cuba: Hurricane Melissa

FUNDING REQUIREMENTS

Planned Operations	13,256,000
Shelter and Basic Household Items	7,077,000
Livelihoods	0
Multi-purpose Cash	0
Health	3,199,000
Water, Sanitation & Hygiene	2,685,000
Protection, Gender and Inclusion	77,000
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	134,000
Community Engagement and Accountability	84,000
Environmental Sustainability	0
Enabling Approaches	1,741,000
Coordination and Partnerships	0
Secretariat Services	864,000
National Society Strengthening	877,000
TOTAL FUNDING REQUIREMENTS	14,997,000

all amounts in Swiss Francs (CHF)

^{*}For more information on the Federation-Wide funding requirement, refer to the section: Federation-wide Approach

Contact information

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

At the Cuban Red Cross:

- **President:** Dr. Carlos Ricardo Pérez Díaz, <u>perezdiazcarlosricardo@gmail.com</u>
- Operational coordination: Luis Calero, <u>calero@infomed.sld.cu</u>

At the IFRC:

- Head of Latin Caribbean Country Cluster Delegation: Elias Ghanem, elias.ghanem@ifrc.org
- Operations Coordinator for Latin Caribbean Country Cluster Delegation: Nicolás Segura, nicolas.segura@ifrc.org
- Head of Health, Disaster, Climate and Crises: Marianna Kuttothara, marianna.kuttothara@ifrc.org
- Regional Operations, Evolving Crises and Disasters Manager: María Martha Tuna, maria.tuna@ifrc.org

For IFRC Geneva:

Senior Officer, Operations Coordinator: Antoine Belair, antoine.belair@ifrc.org

For IFRC Resource Mobilisation and Pledges support:

- Head of Strategic Partnerships and Resource Mobilisation: Mónica Portilla, monica.portilla@ifrc.org
- Strategic Partnerships and Resource Mobilisation in Emergencies Manager: Mei Lin León, meilin.leon@ifrc.org

For In-Kind donations and Mobilisation table support:

- Regional Head, Global Supply Chain: José Fernando Giraldo, fernando.giraldo@ifrc.org
- Regional Logistics Manager: Stephany Murillo, stephany.murillo@ifrc.org

Reference

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