

# MEXICO CITY (regional)

COVERING: Costa Rica, Cuba, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama



ICRC regional delegation ICRC mission ICRC-supported prosthetic/orthotic centre

The Mexico delegation opened in 1998, becoming a regional delegation in 2002. It helps the region's National Societies strengthen their capacities and works with them to address the most urgent humanitarian needs of persons affected by organized violence and of vulnerable migrants; monitors detainees' conditions; and endeavours to ascertain the fate of missing persons. It helps integrate IHL into armed forces' doctrine and into academic curricula, and human rights norms applicable to the use of force into the doctrine, training and operations of security forces. The delegation hosts the regional advisory service on IHL.

## YEARLY RESULTS

Level of achievement of ICRC yearly objectives/plans of action

MEDIUM

## KEY RESULTS/CONSTRAINTS

### In 2014:

- ▶ vulnerable migrants eased their journey with the help of improved water, sanitation and health-care facilities, as well as family-links services, provided at ICRC-supported centres in Guatemala, Honduras and Mexico
- ▶ in El Salvador, Guatemala, Honduras and Mexico, 60 families of missing migrants coped with their uncertainty through accompaniment projects conducted by the respective National Society and the ICRC
- ▶ detainees in El Salvador and Honduras benefited from improved sleeping, water and sanitation facilities, and at 1 prison in Honduras, from a refurbished electrical network that reduced fire hazards
- ▶ some 7,500 security personnel regionwide furthered their understanding of internationally recognized standards on law enforcement, while 120 senior police instructors received teacher training in the topic
- ▶ with the government having adopted regulations to implement the law on the use of the red cross emblem, the Mexican Red Cross, supported by the ICRC, launched a countrywide campaign to promote the law

| EXPENDITURE (in KCHF)               |       |
|-------------------------------------|-------|
| Protection                          | 6,796 |
| Assistance                          | 5,009 |
| Prevention                          | 2,675 |
| Cooperation with National Societies | 1,005 |
| General                             | -     |

**15,485**

of which: Overheads 945

| IMPLEMENTATION RATE       |     |
|---------------------------|-----|
| Expenditure/yearly budget | 94% |

| PERSONNEL                                   |     |
|---|-----|
| Mobile staff                                | 32  |
| Resident staff (daily workers not included) | 106 |

| PROTECTION  | Total  |
|---|--------|
| <b>CIVILIANS (residents, IDPs, returnees, etc.)</b>                                   |        |
| Red Cross messages (RCMs)   |        |
| RCMs distributed  | 10     |
| Phone calls facilitated between family members  | 20,251 |
| People located (tracing cases closed positively)                                      | 3      |
| <b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>                 |        |
| ICRC visits   |        |
| Detainees visited   | 30,885 |
| Detainees visited and monitored individually  | 89     |
| Number of visits carried out  | 139    |
| Number of places of detention visited   | 51     |
| Restoring family links  |        |
| RCMs collected  | 15     |
| Phone calls made to families to inform them of the whereabouts of a detained relative | 1      |

| ASSISTANCE  | 2014 Targets (up to) | Achieved |
|---|----------------------|----------|
| <b>CIVILIANS (residents, IDPs, returnees, etc.)</b>   |                      |          |
| Economic security, water and habitat (in some cases provided within a protection or cooperation programme) <sup>1</sup> |                      |          |
| Cash  | Beneficiaries        | 386      |
| Water and habitat activities  | Beneficiaries        | 47,135   |
| Health  | Structures           | 23       |
| <b>WOUNDED AND SICK</b>   |                      |          |
| Physical rehabilitation   |                      |          |
| Centres supported   | Structures           | 8        |
| Patients receiving services   | Patients             | 150      |
|   |                      | 8,450    |

1. Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.

## CONTEXT

National elections in Costa Rica, El Salvador, Honduras and Panama were held without incident; nevertheless, violence persisted throughout the region, resulting in a range of humanitarian consequences. The armed forces continued to be deployed alongside police personnel to maintain law and order in several countries.

Armed confrontations occurred with increased intensity between Mexican cartels and its allied groups, and security forces and, in some regions, local community militias. Heightened violence was observed in El Salvador and the truce between the two main gangs deteriorated.

The effects of the land dispute in the Bajo Aguán region of Honduras continued to be felt; in the Darién region of Panama, bordering Colombia, people had little access to basic services.

Cuba continued to host peace talks between the Colombian government and the Revolutionary Armed Forces of Colombia – People’s Army (see *Colombia*).

Migrants heading for/being deported from the United States of America (hereafter US) remained at risk of abduction, physical injury, disappearance, death and other dangers along their route. The number of those apprehended at the US border rose, as did the proportion among them of the most vulnerable groups, such as women and children.

Families throughout the region continued to seek information about relatives who went missing during past armed conflicts, armed violence, migration or natural disasters.

## ICRC ACTION AND RESULTS

In cooperation with the region’s National Societies and other Movement partners, the ICRC continued to focus on responding to the humanitarian consequences of armed violence. It also supported the various efforts by National Societies and other local partners to provide orientation sessions, temporary shelter facilities and health-care and family-links services for vulnerable migrants. An American Red Cross/ICRC field report on the consequences of certain deportation/repatriation practices was submitted to the US authorities.

Initiatives to facilitate the search for and identification of missing persons, including migrants, continued. These made some headway in Guatemala and Mexico, with government approval being given for the use of the ICRC’s ante/post-mortem data-management software. Efforts to clarify the fate of people who went missing during past conflicts made little progress. To help the families of missing persons deal with their difficulties, the National Society concerned and/or the ICRC began accompaniment projects and trained Guatemalan and Mexican professionals in providing psychosocial support. An ICRC regional assessment of the needs of missing migrants’ families was pending submission to the authorities of four countries.

In violence-affected areas in five countries, the ICRC continued to implement multidisciplinary projects that helped people cope with the humanitarian consequences of armed violence. Community members benefited from health-care services, such as psychological assistance, as well as improvements to drinking-water facilities.

Besides disseminating key messages of the Health Care in Danger project, the ICRC continued to facilitate training for health personnel in treating weapon-related injuries. Disabled persons, including migrants, received physical rehabilitation services at ICRC-supported facilities, as well as financial support for treatment and referrals to specialized care.

The ICRC visited, according to its standard procedures, detainees in El Salvador, Honduras, Mexico and Panama, and migrants at retention centres in Mexico. Confidential feedback, multidisciplinary evaluations and sponsorship to attend workshops encouraged the authorities concerned to improve detainees’ treatment and living conditions. The ICRC provided structural and/or technical support for the penitentiary authorities in El Salvador and Honduras, which helped improve detainees’ living conditions, and, in Honduras, enhanced safety measures at one prison and increased prison directors’ preparedness in the event of fire.

At both national and regional levels, the ICRC drew the attention of policy-makers and other parties concerned to the importance of respecting IHL and internationally recognized standards for the use of force, for instance, through workshops for police/military officers and trainers. The results were reflected in the efforts by the Central American Integration System (SICA) to draw up a regional framework for the use of force, and in the Mexican authorities’ drafting of a similar framework at the federal level, as well as in El Salvador’s and Panama’s ratification of the Arms Trade Treaty.

With ICRC support, National Societies developed contingency plans and reinforced the emergency response capacities of their personnel. They also strengthened their legal bases and their response to the psychosocial needs of violence-affected people.

## CIVILIANS

The concerns of migrants and violence-affected people, including the families of missing persons, remained a major theme of the ICRC’s dialogue with the authorities. Instances of obstructing the safe provision of health care were discussed with non-State armed actors in El Salvador.

In line with the objectives of the Health Care in Danger project, workshops/seminars helped parties concerned in Mexico’s health sector acquire a firmer grasp of their rights/duties and/or mobilized their support for protecting medical services. University of Guerrero’s medical faculty included the subject in their curriculum; other academic institutions were encouraged to do the same.

### Migrants meet their basic needs while in transit

At key points along their routes in Guatemala, Honduras or Mexico, vulnerable migrants benefited from orientation sessions and assistance at centres run by the pertinent authorities, civil society actors and National Societies with ICRC support. Unaccompanied child migrants in Honduras were given hygiene kits and food.

Some 24,000 migrants received first aid and/or basic medical care at seven Mexican Red Cross/ICRC health facilities; approximately 5,000 repatriated migrants in Guatemala and around 24,000 migrants in Honduras received similar services. ICRC-provided equipment at centres in the three countries, as well as National Society training for staff at Mexican centres, helped enhance first-aid capacities.

Over 62,000 people received potable water at National Society-run facilities. Renovations at other centres, including three govern-

ment-run shelters in Mexico housing some 360 people a day, enabled migrants to benefit from improved water, sanitation and sleeping facilities. Informational posters at centres in Honduras and Mexico reminded migrants to maintain their hygiene.

Migrants staying at four Mexican Red Cross assistance points made a total of 2,828 phone calls to their families. At the ICRC's suggestion, a private company installed payphones at 10 shelters, enabling migrants staying in these facilities to make 3,300 calls to relatives using ICRC-distributed phone cards; those in Guatemala and Honduras did the same with the help of ICRC-funded phone services. Over 240 unaccompanied migrant children who had been deported from Mexico and temporarily accommodated in two transit shelters in Guatemala were reunited with their families, with National Society support and ICRC financial input. Approximately 1,100 vulnerable deportees at the shelters in Guatemala and Honduras received assistance to travel home.

To facilitate their social and economic reintegration, disabled migrants received psychological support and referrals to rehabilitative care (see *Wounded and sick*). In Honduras, 20 disabled migrants earned additional income through microeconomic initiatives.

The US Department of Homeland Security received a report on the humanitarian consequences of deportation/repatriation practices, based on the findings of American Red Cross/ICRC field missions in northern Mexico (see *Washington*). An assessment of the effects of Mexico's deportation policies on Honduras and Guatemala commenced.

### Families of missing migrants cope with their uncertainty

Initiatives continued to help improve the search for missing persons in El Salvador, Guatemala, Honduras and Mexico. Migration and child-protection authorities in Mexico, as well as the Jesuit Migrant Service, worked with the ICRC to improve procedures for tracing missing migrants; dialogue with parties concerned on creating a network to trace these migrants got under way. The American and Mexican National Societies and the ICRC identified ways to expand family-tracing activities along the Mexico-US border.

Specialists participated in ICRC training/seminars in ante/post-mortem data collection and identification. Guatemalan forensic experts, in partnership with ICRC-trained staff from 14 local NGOs, consolidated data on missing persons and possible gravesites. Mexico's Office of the Attorney-General approved the

use of the ICRC's ante/post-mortem data-management software in all 31 states and the Federal District; its Guatemalan counterpart implemented the software and trained its staff in its use. In Mexico, the Interior Ministry and the ICRC endeavoured, within the framework of a cooperation agreement, to revive a working group on missing persons.

With the help of technical advice/training, staff from organizations in Guatemala collected and centralized records of missing persons from the past conflict; however, human resources constraints held up the mapping of burial sites. ICRC efforts to facilitate the search for people who went missing during past conflicts in El Salvador and Panama made no progress.

The results of a regional assessment of the needs of missing migrants' families were shared with the families concerned before a report on the subject was presented to the Guatemalan, Honduran, Mexican and Salvadoran authorities. Accompaniment projects managed by the National Societies/ICRC helped 60 of these families ease their distress. People working with the families of missing persons in Guatemala and Mexico were trained in psychosocial support.

### Violence-affected communities obtain health services

Through community-based projects, residents of violence-prone urban and rural areas strengthened their ability to cope with the humanitarian consequences of armed violence. These projects used an approach that combined emergency response, livelihood training and psychological assistance.

In Honduras and Mexico, local educational authorities incorporated material about the humanitarian consequences of violence into the curricula of some schools. Around 7,500 students and teachers from 20 primary schools in five regions of Honduras familiarized themselves with self-protective measures to use in emergencies.

In El Salvador, Guatemala and Honduras, some 25,860 inhabitants of urban areas benefited directly or indirectly from first aid, psychosocial assistance and vocational training provided by National Societies with support from Movement partners. In Ciudad Juárez, Mexico, residents, including victims of sexual violence, received psychological first aid from 70 ICRC-trained teachers. Some 2,400 people there and those in another city had access to improved recreational and medical facilities.

| CIVILIANS   | EL SALVADOR | GUATEMALA | HONDURAS | MEXICO | PANAMA |
|---|-------------|-----------|----------|--------|--------|
| <b>Red Cross messages (RCMs)</b>  |             |           |          |        |        |
| RCMs distributed  | 1           | 4         | 5        |        |        |
| Phone calls facilitated between family members                                |             | 5,688     | 8,416    | 6,128  | 19     |
| <b>Tracing requests, including cases of missing persons</b>                   |             |           |          |        |        |
| People for whom a tracing request was newly registered                        | 13          | 1         | 2        | 5      |        |
| <i>of whom women</i>  | 1           |           |          | 1      |        |
| <i>of whom minors at the time of disappearance - girls</i>                    | 2           |           |          |        |        |
| <i>of whom minors at the time of disappearance - boys</i>                     | 7           |           |          | 1      |        |
| People located (tracing cases closed positively)                              |             |           |          | 3      |        |
| Tracing cases still being handled at the end of the reporting period (people) | 16          | 1         | 2        | 10     | 1      |
| <i>of whom women</i>  | 3           |           |          |        |        |
| <i>of whom minors at the time of disappearance - girls</i>                    | 2           |           |          | 1      |        |
| <i>of whom minors at the time of disappearance - boys</i>                     | 7           |           |          |        |        |
| <b>UAMs/SCs*, including unaccompanied demobilized child soldiers</b>          |             |           |          |        |        |
| UAM/SC cases still being handled at the end of the reporting period           |             |           |          | 1      |        |

\* Unaccompanied minors/separated children

Thanks to a National Society/ICRC project, over 3,600 people in six vulnerable communities in the Bajo Aguán region of Honduras had access to primary-health-care services. Approximately 1,000 people from the Marañones community benefited from the construction of a community health centre, which provided an average of 25 consultations per day. Improvements to water distribution systems gave 1,839 people in three communities access to potable water.

In Darién, Panama, over 1,100 people improved their hygiene practices and 1,232 were given medical consultations during a Health Ministry/ICRC campaign. With the Education Ministry's support, 18 teachers were trained to disseminate public-health messages. A new spring-water-collection system gave some 180 people in two communities access to potable water. Some 570 people in three communities stood to benefit from improved health services with the construction of a health post.

## PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in El Salvador, Honduras, Mexico and Panama received visits, in accordance with standard ICRC procedures, from ICRC delegates. They included people held in connection with conflict/violence, migrants at 12 retention centres in Mexico, and North Korean sailors detained in Panama. Recommendations/reports submitted confidentially gave encouragement and guidance to detention authorities, such as the National Migration Institute in Mexico, for improving detainees' treatment and living conditions. Salvadoran officials received an ICRC evaluation of their prison system, including health-care services; a similar report was pending submission to the Honduran authorities.

Honduran and Salvadoran officials furthered their understanding of internationally recognized prison management practices at a regional course held by the International Centre for Prison Studies/ICRC. Through dialogue and participation in various fora, the ICRC mobilized international organizations/the diplomatic community to provide support for the region's prison authorities. One embassy funded the construction of a bakery in a Salvadoran prison, enabling 130 inmates to gain employable skills they could use after their release.

Through RCMs and phone calls, 10 migrants detained in Mexico re-established contact with their families in El Salvador, Guatemala and Honduras after several years of not being in touch.

### Honduran prison directors take steps to reduce the risk of fire in detention facilities

Some 20,190 detainees at 17 prisons and police stations in El Salvador benefited from improved living conditions following

the provision of hygiene items and bunk beds and the renovation/construction of water systems, floors and roofs. In support of government efforts to address problems in detention facilities, 14 specialists charged with designing new prisons learnt, at training sessions, about public-health issues in penitentiary settings.

In Honduras, 1,639 detainees at six prisons, among them 272 women, had access to upgraded water/sanitation facilities; one result of this was more water daily for detainees at some of these prisons. Some of these detainees also received instruction in proper waste management. At the Nacaome prison, the electrical network was refurbished and the presence of combustible materials reduced as much as possible. This made the environment safer for 303 detainees, who were also trained in preventing/responding to fires. During a seminar organized with the national fire department, all 24 prison directors learnt more about implementing fire-prevention measures and drafting contingency plans.

In Mexico, 25 staff members from retention centres participated in training in public health and psychosocial support and detainees at one prison benefited from the improvement in services at a clinic upgraded by the ICRC. The provision of wheelchairs helped vulnerable detainees in El Salvador and Mexico regain their mobility.

## WOUNDED AND SICK

### Health personnel bolster their skills in weapon-wound management

At seminars in Guatemala and Mexico, over 1,000 health workers honed their skills in pre-hospital care and surgical treatment of weapon-related injuries. These subjects were also discussed at the Second Latin American Surgical Conference, attended by 279 health professionals from the region and organized by the Mexican Academy of Surgery, the Honduran Surgical Association, the Honduran Red Cross and the ICRC. The Mexican Academy of Surgery promoted the inclusion of these subjects in the curricula of three medical schools.

The Mexican Red Cross organized a second seminar on psychosocial programmes for emergencies, where 18 of its mental-health specialists enhanced their technical skills. ICRC training sessions, some organized with the Guatemalan and Mexican National Societies, enabled Guatemalan, Honduran and Mexican Red Cross volunteers and Mexican Federal Police personnel to manage stress after traumatic events.

Over 8,400 disabled persons, including disabled migrants, in El Salvador, Guatemala, Honduras and Mexico regained their mobility

| CIVILIANS   |   | GUATEMALA | HONDURAS | MEXICO | PANAMA |
|---|---|-----------|----------|--------|--------|
| Economic security, water and habitat <sup>1</sup> |   |           |          |        |        |
| Cash  | Beneficiaries                                   | 386       |          |        |        |
| Water and habitat activities                      | Beneficiaries                                   | 5,878     | 24,627   | 39,599 | 1,310  |
| Health  |   |           |          |        |        |
| Health centres supported                          | Structures                                      | 1         | 7        | 7      | 8      |
| Average catchment population                      |   | 10,000    | 23,942   | 55,000 | 2,340  |
| Consultations                                     | Patients  | 153       | 4,696    | 23,707 | 1,409  |
|   | <i>of which curative</i>                        | 153       | 4,456    | 23,685 | 1,345  |
|   | <i>of which ante/post-natal</i>                 |           | 240      | 22     | 64     |
| Immunizations                                     | Doses   |           | 95       |        | 878    |
|   | <i>of which for children aged five or under</i> |           | 89       |        | 435    |
| Referrals to a second level of care               | Patients  | 7         | 57       | 47     | 4      |
| Health education                                  | Sessions  |           | 99       | 106    | 11     |

1. Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.



at eight ICRC-supported centres that provided prostheses/orthoses and physiotherapy. To enhance these centres' services, physiotherapists and technicians underwent further training. Use of a cost calculation tool improved the management of three of the centres.

## ACTORS OF INFLUENCE

ICRC technical input and organization of/participation in events, encouraged regional bodies, government institutions and security forces to promote and ensure respect for IHL and internationally recognized standards on the use of force and to sustain dialogue on issues of common concern.

Along with the adoption of various resolutions on humanitarian issues by the General Assembly of the Organization of American States (see *Washington*), the Inter-American Institute of Human Rights co-organized a training session with the ICRC where Inter-American Court of Human Rights lawyers learnt more about best practices in forensic science.

SICA continued to work on a draft regional framework for regulating the use of force.

### Two States ratify the Arms Trade Treaty

Mexico adopted regulations to implement its law on the use of the red cross emblem. It also hosted the Second Intergovernmental Conference on the Humanitarian Impact of Nuclear Weapons; representatives from 21 National Societies, as well as other Movement partners, attended.

The Cuban National Conference on Public International Law included IHL within its scope and hosted an ICRC presentation.

El Salvador and Panama ratified the Arms Trade Treaty.

### Senior police officers undergo training to teach standards for the use of force

Through training courses and workshops, nearly 7,500 police and military personnel regionwide familiarized themselves with inter-

nationally recognized standards for the use of force. Some 120 senior police officers from El Salvador, Honduras, Mexico and Panama attended train-the-trainer sessions in this regard. The Conference of Central American Armed Forces/ICRC organized seminars on cultural property and IHL for Guatemalan and Salvadoran troops.

Dialogue with Mexico's Interior Ministry focused on the drafting of a federal law regulating the use of force; at the ministry's request, the ICRC organized a meeting of senior representatives from four federal agencies involved in implementing existing regulations. Local authorities in Chiapas and Guerrero states received technical support for applying international standards for the use of force.

Guatemala's Defence Ministry and the ICRC signed a cooperation agreement on disseminating/implementing IHL and international human rights law. With ICRC technical assistance, the Honduran National Police continued to work on similar matters; a law on the use of force was drafted.

National Society/ICRC conferences on specific subjects, informational materials and/or articles and interviews for print and social media helped increase awareness of the Movement and of humanitarian issues, particularly in relation to the violence in the region. Staff from local institutions and Movement partners underwent training to help ensure effective communication while working in tension-prone areas.

No activities with academic circles were developed owing to other priorities.

## RED CROSS AND RED CRESCENT MOVEMENT

### Mexican Red Cross promotes the proper use of the emblem after the adoption of a new law

The National Societies of El Salvador, Guatemala, Honduras, Mexico and Panama, supported by Movement partners, continued to respond to emergencies and to the needs of vulnerable migrants and resident communities (see *Civilians*).

| PEOPLE DEPRIVED OF THEIR FREEDOM  |                       | EL SALVADOR | HONDURAS | MEXICO | PANAMA |
|---|-----------------------|-------------|----------|--------|--------|
| <b>ICRC visits</b>  |                       |             |          |        |        |
| Detainees visited   |                       | 20,813      | 6,572    | 3,445  | 55     |
|   | <i>of whom women</i>  | 2,143       | 328      | 792    |        |
|   | <i>of whom minors</i> | 130         | 32       | 403    |        |
| Detainees visited and monitored individually  |                       |             | 6        | 28     | 55     |
|   | <i>of whom women</i>  |             |          | 2      |        |
| Detainees newly registered  |                       |             | 5        | 15     | 8      |
|   | <i>of whom women</i>  |             |          | 1      |        |
| Number of visits carried out  |                       | 77          | 23       | 31     | 8      |
| Number of places of detention visited   |                       | 17          | 12       | 19     | 3      |
| <b>Restoring family links</b>   |                       |             |          |        |        |
| RCMs collected  |                       | 3           | 1        | 10     | 1      |
| Phone calls made to families to inform them of the whereabouts of a detained relative |                       |             |          | 1      |        |
| Detainees visited by their relatives with ICRC/National Society support               |                       |             | 1        | 11     | 7      |

| PEOPLE DEPRIVED OF THEIR FREEDOM            |               | EL SALVADOR | HONDURAS | MEXICO | PANAMA |
|---|---------------|-------------|----------|--------|--------|
| <b>Economic security, water and habitat</b> |               |             |          |        |        |
| Food commodities                            | Beneficiaries |             |          |        | 35     |
| Essential household items                   | Beneficiaries | 1,121       |          | 3      | 5      |
| Water and habitat activities                | Beneficiaries | 20,188      | 1,639    |        |        |

Twenty-eight Cuban health personnel and six staff members from the Colombian and Costa Rican National Societies boosted their emergency response capacities during a Health Emergencies in Large Populations course organized by the Cuban Red Cross, the Latin American Centre for Disaster Medicine and the ICRC. Training in the Safer Access Framework enabled National Society volunteers in Costa Rica, El Salvador, Guatemala, Honduras, Mexico and Panama to build up the same capacities. The Honduran, Panamanian and Salvadoran National Societies developed contingency plans in preparation for national elections.

To enhance their abilities to provide and coordinate family-links services, 84 National Society volunteers in the countries covered underwent training and representatives from 12 National Societies in the region shared best practices at the annual restoring family-links meeting in Panama.

The Guatemalan, Honduran, Panamanian and Salvadoran National Societies continued to review their statutes, with a view to strengthening their legal bases. Following the adoption of a law on the use of the red cross emblem (see *Actors of influence*), the Mexican Red Cross, with ICRC technical advice, launched a countrywide campaign to promote it.

In line with its cooperation agreement with the ICRC, the Mexican Red Cross co-hosted a regional meeting of Latin American and Caribbean National Societies, at which participants reviewed the implementation of their plans of action and of the resolutions adopted at the 2011 Council of Delegates.

| WOUNDED AND SICK                    |   | EL SALVADOR <sup>1</sup> | GUATEMALA | HONDURAS | MEXICO |
|-------------------------------------|---|--------------------------|-----------|----------|--------|
| <b>Physical rehabilitation</b>      |   |                          |           |          |        |
| Centres supported                   | Structures  |                          | 3         | 3        | 2      |
| Patients receiving services         | Patients  | 23                       | 7,285     | 1,106    | 36     |
|                                     | <i>of whom women</i>  | 3                        | 44        | 162      | 2      |
|                                     | <i>of whom children</i>   |                          | 423       | 442      | 2      |
| New patients fitted with prostheses | Patients  | 8                        | 49        | 58       | 10     |
|                                     | <i>of whom women</i>  |                          | 3         | 11       | 1      |
|                                     | <i>of whom children</i>   |                          | 20        | 1        | 1      |
| Prostheses delivered                | Units   | 8                        | 90        | 129      | 12     |
|                                     | <i>of which for women</i>   |                          | 5         | 20       | 1      |
|                                     | <i>of which for children</i>                                      |                          | 20        | 7        | 1      |
|                                     | <i>of which for victims of mines or explosive remnants of war</i> |                          | 29        |          |        |
| New patients fitted with orthoses   | Patients  |                          | 500       | 250      |        |
|                                     | <i>of whom women</i>  |                          | 32        | 49       |        |
|                                     | <i>of whom children</i>   |                          | 456       | 141      |        |
| Orthoses delivered                  | Units   |                          | 680       | 348      |        |
|                                     | <i>of which for women</i>   |                          | 38        | 28       |        |
|                                     | <i>of which for children</i>                                      |                          | 599       | 270      |        |
|                                     | <i>of which for victims of mines or explosive remnants of war</i> |                          | 16        |          |        |
| Patients receiving physiotherapy    | Patients  |                          | 79        | 3,614    |        |
| Crutches delivered                  | Units   |                          | 2         | 84       | 5      |
| Wheelchairs delivered               | Units   |                          |           | 13       | 1      |

1. Subsidized patients

| MAIN FIGURES AND INDICATORS: PROTECTION  |  | Total  |           |        |                      |
|--|--|--------|-----------|--------|----------------------|
| <b>CIVILIANS (residents, IDPs, returnees, etc.)</b>  |  |        |           |        |                      |
| <b>Red Cross messages (RCMs)</b>   |  |        | UAMs/SCs* |        |                      |
| RCMs distributed   |  | 10     |           |        |                      |
| Phone calls facilitated between family members   |  | 20,251 |           |        |                      |
| <b>Tracing requests, including cases of missing persons</b>                                      |  |        | Women     | Girls  | Boys                 |
| People for whom a tracing request was newly registered   |  | 21     | 2         | 2      | 8                    |
| People located (tracing cases closed positively)   |  | 3      |           |        |                      |
| Tracing cases still being handled at the end of the reporting period (people)                    |  | 30     | 3         | 3      | 7                    |
| <b>UAMs/SCs*, including unaccompanied demobilized child soldiers</b>                             |  |        | Girls     |        | Demobilized children |
| UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period |  | 1      |           |        |                      |
| <b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)<sup>1</sup></b>                |  |        |           |        |                      |
| <b>ICRC visits</b>   |  |        | Women     | Minors |                      |
| Detainees visited  |  | 30,885 | 3,263     | 565    |                      |
|  |  |        | Women     | Girls  | Boys                 |
| Detainees visited and monitored individually   |  | 89     | 2         |        |                      |
| Detainees newly registered   |  | 28     | 1         |        |                      |
| Number of visits carried out   |  | 139    |           |        |                      |
| Number of places of detention visited  |  | 51     |           |        |                      |
| <b>Restoring family links</b>  |  |        |           |        |                      |
| RCMs collected   |  | 15     |           |        |                      |
| Phone calls made to families to inform them of the whereabouts of a detained relative            |  | 1      |           |        |                      |
| Detainees visited by their relatives with ICRC/National Society support                          |  | 19     |           |        |                      |

\* Unaccompanied minors/separated children

1. El Salvador, Honduras, Mexico, Panama

| MAIN FIGURES AND INDICATORS: ASSISTANCE   |   | Total    | Women | Children |
|---|---|----------|-------|----------|
| <b>CIVILIANS (residents, IDPs, returnees, etc.)</b>   |   |          |       |          |
| <b>Economic security, water and habitat (in some cases provided within a protection or cooperation programme)<sup>1</sup></b> |   |          |       |          |
| Cash <sup>2</sup>   | Beneficiaries   | 386      | 16%   | 68%      |
| Water and habitat activities <sup>3</sup>   | Beneficiaries   | 71,414   | 11%   | 7%       |
| <b>Health<sup>4</sup></b>   |   |          |       |          |
| Health centres supported  | Structures  | 23       |       |          |
| Average catchment population  |   | 91,282   |       |          |
| Consultations   | Patients  | 29,965   |       |          |
|   | <i>of which curative</i>  | Patients | 5,598 | 3,968    |
|   | <i>of which ante/post-natal</i>                                   | Patients | 326   |          |
| Immunizations   | Doses   | 973      |       |          |
|   | <i>of which for children aged five or under</i>                   | Doses    | 524   |          |
| Referrals to a second level of care   | Patients  | 115      |       |          |
| Health education  | Sessions  | 216      |       |          |
| <b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>   |   |          |       |          |
| <b>Economic security, water and habitat (in some cases provided within a protection programme)</b>                            |   |          |       |          |
| Food commodities <sup>4</sup>   | Beneficiaries   | 35       |       |          |
| Essential household items <sup>5</sup>  | Beneficiaries   | 1,129    |       |          |
| Water and habitat activities <sup>6</sup>   | Beneficiaries   | 21,827   |       |          |
| <b>WOUNDED AND SICK</b>   |   |          |       |          |
| <b>Physical rehabilitation<sup>7</sup></b>  |   |          |       |          |
| Centres supported   | Structures  | 8        |       |          |
| Patients receiving services   | Patients  | 8,450    | 211   | 867      |
| New patients fitted with prostheses   | Patients  | 125      | 15    | 22       |
| Prostheses delivered  | Units   | 239      | 26    | 28       |
|   | <i>of which for victims of mines or explosive remnants of war</i> | Units    | 29    |          |
| New patients fitted with orthoses   | Patients  | 750      | 81    | 597      |
| Orthoses delivered  | pUnits  | 1,028    | 66    | 869      |
|   | <i>of which for victims of mines or explosive remnants of war</i> | Units    | 16    |          |
| Patients receiving physiotherapy  | Patients  | 3,693    | 2,136 | 12       |
| Crutches delivered  | Units   | 91       |       |          |
| Wheelchairs delivered   | Units   | 14       |       |          |

1. Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.

2. Guatemala

3. Guatemala, Honduras, Mexico, Panama

4. Panama

5. El Salvador, Mexico, Panama

6. El Salvador, Honduras

7. El Salvador (subsidized patients), Guatemala, Honduras, Mexico