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Operation Update

Argentina: Drought

International Federation
of Red Cross and Red Crescent Societies

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| DREF n° MDRAR017 | GLIDE N° DR-2020-000031-ARG |
| Operation update n° 1; 15 May 2020 | Timeframe covered by this update: 27 February 2020 to 3 May 2020 |
| Operation start date: 27 February 2020 | Operation timeframe: 5 months (2-month extension requested) new end date 31 July 2020 |
| N° of people being assisted: 4,000 people | |
| Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of the Red Cross and Red Crescent (IFRC) and Spanish Red Cross. | |
| Other partner organizations actively involved in the operation: Salta Civil Defence, Argentine Army, OCHA, ECHO, IOM, UNICEF and the High Commissioner for Human Rights (OHCHR), Fundación Pata Pila and Fundapaz. | |

Summary of the main revisions made to the Emergency Plan of Action: This DREF operation has been extended for two months to 31 July 2020 to complete activities that have been delayed or suspended due to measures related to the COVID-19 pandemic taken by Argentine authorities, particularly "Mandatory Preventive Social Isolation" measures that began on 19 March 2020. Movement restriction measures have affected mobilization on the ground and the implementation of activities in indigenous Wichi, Chorotes and Tobas communities in Salta province that are central to the planned activities in livelihoods, community awareness, nutritional surveillance, and water and hygiene. Argentine Red Cross (ARC) will continue to provide assistance based on its ability to reach the affected population and following government-issued regulations; however, there will be greater operational implementation challenges if restrictions continue.

A. Situation analysis

Description of the disaster

On 20 January 2020, the government of province of Salta in Argentina declared a Social and Health Emergency for its north-eastern regions due to the death of 8 children and the hospitalization of 30 others due to malnutrition, especially in indigenous communities in the departments of Rivadavia, San Martín and Orán. Dozens of other children in areas under emergency were hospitalized, and some discharged, due to gastrointestinal and respiratory illnesses aggravated by their acute state of malnutrition and dehydration. Salta's Ministry of Health has reported 855 cases of acute malnutrition in children under five years of age and more than 10,000 at-risk cases in the three departments under the emergency declaration. One of the origins of this situation is the seasonal drought that began in the last quarter of 2019 and intensified in February, which directly affected people's quality of life due to low food production, impact on livestock and, consequently, a significant decrease in people's daily food consumption.



The Argentine Red Cross (ARC) established a first aid attention at the base camp in Mission Grande, Salta. Source: ARC

Argentine Red Cross (ARC) began to provide assistance in the most affected areas immediately after the declaration of emergency. The Argentine Red Cross Humanitarian Observatory conducted a field assessment that identified

that 90 per cent of the population evaluated had a below normal nutritional status, registering 45 per cent for the “very underweight” indicator, using the Body Mass Index (BMI) scale. In addition, 84 per cent of the children assessed had experienced at least one episode of diarrhoea in the previous month linked to hygiene habits and access to safe water. The National Society established a camp in the area to continue assisting communities and populations through health, water, hygiene and livelihood actions.

The COVID-19 pandemic has made access to health services more complex, as the significant distance between communities and health centres has been compounded by the closing of access roads and the decrease in traffic. In addition to the reduced staff in health centres, prioritization is given to people with COVID-19 symptoms and regular consult services remain suspended. As for the already limited water or electricity supply services, all municipal staff are working reduced hours, which minimizes access and ability to solve problems.

Summary of the current response

Overview of Host National Society

Argentine Red Cross, with support from the International Federation of Red Cross and Red Crescent Societies (IFRC), is responding to the emergency in the town of Santa Victoria Este, located 540 km from the city of Salta. It was decided to set up a base camp in the Misión Grande area, approximately 15 km from Santa Victoria Este, from which it is able to provide response to more than 38 indigenous Wichis, Chorotes and Tobas communities.

The National Society established the first humanitarian camp in ARC's history, within which the National Response Directorate activated an Emergency Operations Centre (EOC) to coordinate actions on the ground. The camp has an operations centre, a first aid post, telecommunications, a logistics area, fleet, training rooms, kitchen, dining area, water supply and sanitation for communities.

Prior to rolling out the operation, the field team met with more than 35 chieftains (*caciques*) and community leaders to socialize the planned operational actions that ARC would implement and to explain the Movement's mission and fundamental principles. These communities members' expressed a high level of acceptance and demonstrated positive engagement in the pre-implementation processes.

The National Society has provided support and care in the following aspects:

- More than 30 water assessments conducted at different collection points
- 4,000 individuals surveyed regarding household needs, using Open Data Kit (ODK)
- 330 first aid services provided
- 556 household water filters distributed
- 740 jerrycans distributed

Since the beginning of the operation, Argentine Red Cross, together with OCHA, IOM, UNHCR, UNICEF, the Argentine Army and ECHO, has been part of the coordination working group, convened by the Office of the United Nations Resident Coordinator that create a Global Action Plan that unites the actions of all these organizations. The working group maintains joint work and regular meetings (online in the COVID-19 context) with the organizations, which are developing their specific action plans, and especially with the Argentine Army on the ground to coordinate water distributions.

Overview of Red Cross Red Crescent Movement in country

Prior to the approval of this DREF operation, a surge Water, Sanitation and Hygiene Promotion (WASH) specialist was deployed to assist with assessment of communities' water sources and identify factors to contribute to the WASH implementation strategy.

Through the IFRC Regional Logistic Unit (RLU), the National Society acquired bladders, jerrycans, household and community water filters, and hygiene kits (which are pending arrival). The latter were ultimately requested via the RLU due to the significant increase in price in the country. The RLU also assisted with the shipping, quoting, purchasing and custom clearance processes.

Within the framework of the Plan of Action, Spanish Red Cross sent an a M15 Emergency Response Unit (ERU M15 with a Purification Line) to the country. It arrived in late April, has been set up and is in operation in the field. Simultaneously, 1600 jerrycans are being distributed to carry water from the plant or distribution

bladders. Spanish Red Cross also donated 25,000 Euros to implement the operation and set up the base camp.



The Spanish Red Cross donated a M15 Water Treatment Plant for this operation, as shown in the pictures during its arrival in Ezeiza Airport Humanitarian Hub in Buenos Aires, Argentina. Source: Argentine Red Cross

The head of the IFRC Country Cluster Support Team (CCST) for the Southern Cone and Brazil has provided direct and ongoing support to all planning and coordination processes by both the Red Cross and government (national and province) and external agencies. In addition, the IFRC Disaster Management coordinator and financial coordinator are providing support to the operation.

Overview of non-RCRC actors in country

Since 22 January 2020, the Argentine Army has been working in Santa Victoria Este, specifically in the “El Rosado” area, with a commission of water specialists from the V Mountain Brigade’s engineering battalion, which has put into operation an M-11 water treatment plant with the capacity to produce 9000 litres per hour, providing access to safe water in more than 15 communities in the area.

Salta’s Ministry of Public Health, with support from the National Ministry of Health, is assisting the Santa Victoria Este Hospital with reinforcements (medical/nursing personnel), basic ward equipment and a four-wheel drive ambulance to provide health care access to communities in the area.

Salta’s Ministry of Social Development was distributing monthly basic food kits to families affected by the emergency. Restrictions related to the pandemic interrupted this activity.

The Ministry of Public Health began an influenza vaccination campaign on 2 April, distributing 3,550 doses allocated to the Santa Victoria Este/Rivadavia area, which are being administered to targeted beneficiaries at their homes. On 3 April, the province government delivered six medium-complexity ambulances to strengthen efforts in localities affected by the social and health emergency.

On 7 April, UNICEF delivered 1,000 nutritional supplements to the province to assist with the nutritional recovery of underweight and acutely malnourished children in northern Salta. Supplements are being distributed through five points (health posts) created for this purpose, adhering to UNICEF distribution standards.

Within the framework of the Humanitarian Plan of Action developed in conjunction with ECHO, ARC was able to secure 200 additional household water filters to expand drought response in affected localities.

OCHA sent two experts to support the Office of the UN Resident Coordinator and strengthen coordination, needs assessment and information management.

Argentine Red Cross works in coordination with local institutions to provide a more tailored response and avoid duplication. ARC’s main strategic partners in the area are Fundación Pata Pila and Fundapaz.

Needs analysis and scenario planning

Health: Three more children with symptoms associated with severe dehydration caused by diarrhoea and vomiting died during the month of March. Like all the others, these deaths are closely related to acute

malnutrition triggered by the lack of access to drinking water and food. Field assessment teams identified that 90 per cent of the population assessed presents a below normal nutritional status, registering 45 per cent for the "very underweight" indicator (per the BMI scale). In addition, 84 per cent of the children assessed have experienced at least one episode of diarrhoea in the previous month.

While dengue cases have not increased significantly in the area, it is important to continue to raise awareness about vector-borne diseases. So far this year, 2201 positive cases of Type 1 dengue have been registered in Salta province, mostly in nearby municipalities. None of the cases registered have resulted in death.

The children's deaths have caused widespread emotional impact to area residents - both to the families of the children who have died as well as to the community at large given the community ties that unite them (families live in organized communities under a "*cacicado*" system where everyone is part of a "big family" structure). There are signs of severe stress linked to conditions of uncertainty and fear, mainly because they do not know what condition their children are in, but also due to the COVID-19 scenario - which has prevented families from engaging in everyday activities, such as attending church and school, and disrupted everyday life - and the mandatory quarantine that continues to be extended every week and prevents them from medium to long-term planning.

Water and sanitation: Access to safe water remains a need. Some communities (around 40 per cent of those surveyed and 20 per cent of surveyed families) do not have access to water due to remote distance of wells or rivers, while others have access to low-quality sources. In some cases, there is no access to water distributed via the supply network or people are unable to travel to these. On the other hand, the communities that do have access to water lack containers to store it or transport it to their homes, which exacerbates associated diseases (diarrhoea, dehydration, heat stroke, gastroenteritis, urinary infections, allergies, respiratory issues). The mandatory preventive isolation is an additional factor that is affecting people's ability to collect water.

In terms of sanitation, waste management is virtually non-existent, as improvised garbage dumps spring up around the very areas where these communities live; no community has a drainage network; and half use latrines. This is partly attributed to the nomadic nature of several communities, which does not allow for long-term sanitation implementation. Furthermore, many communities' location far from paved roads hinders planning for a waste collection system.

Livelihoods: The drought has negatively affected access to and availability of water to sustain food sources (livestock) produced by communities. The rivers' decreased flows have affected fishing, which communities engage in mostly to secure food. Current conditions caused by the COVID-19 pandemic have increasingly led to a shortage of resources and stocks for local businesses (roadblocks, limited transport), and people are unable to go to work or sell their crafts. Day labourers who were able to get jobs are no longer working due to restrictions on agricultural production activities, in accordance with governmental measures.

Food security

Assessments conducted by the Red Cross team in the field reveal that 65 per cent of children went without food at least once during the week, and 53 per cent were able to eat only once a day. Food bag distributions have been suspended due to the pandemic, and the dining halls and canteens that usually operate in schools are closed as well. This has forced families to reduce their number of food rations, mainly affecting vulnerable groups such as children under the age of five, women who are pregnant, the elderly and people with acute and chronic diseases. They also look for ways to travel to cities to collect their pensions and subsidies to buy food.

Operation Risk Assessment

Because of the pandemic, communities set up roadblocks and closed the main access roads to the areas affected by the emergency, which during the first stage of the operation hindered staff movement on the ground. The Argentine Red Cross coordination team met several times with community leaders to reach an agreement that would allow teams to travel freely along the roads; however, road closures and similar restrictions still constitute a potential operational risk.

While volunteer team rotations varied based on security provisions related to the pandemic, both in terms of length of stay and number of members, the residents of the communities being assisted expressed concern regarding these rotations and the people coming in from "the outside". This was dealt with through community awareness mechanisms, longer-term stays, and by prioritizing local volunteerism, and eventually their concerns decreased. In subsequent conversations with *caciques* and other community members, they

expressed their approval for the ARC camp, since they see Red Cross members as health agents who provide assistance to the population and contribute to their COVID-19 prevention actions. It is necessary to follow-up on certain situations and monitor rumours where necessary.

During the course of the operation, several ARC vehicles assisting with response suffered mechanical failures due to bad road and weather conditions (temperatures above 48°C on occasions).

| Scenario | Humanitarian consequence | Potential Response |
|--|--|--|
| COVID-19. Increase in the number of confirmed cases in Salta province, potentially coming to assisted communities. | High rate of contagion due to pre-existing precarious social and health conditions in communities, causing significant impact to operational activities. | ARC has prepared an action protocol in the event a positive case of COVID-19 is detected in the area, which immediately reduces the possibility of transmission in communities and isolates the suspected case at the Santa Victoria Este hospital. Activities in relation to access to the population will be adjusted. |
| Overflowing of the Pilcomayo river | Damage to housing located near the river and within the floodplain, possibly requiring evacuation from the area. | Support to province and municipal governments with community evacuations, with possible evacuation of base camp. |
| Road closure and community perception | Free movement of volunteers and humanitarian aid elements is impossible, and validation and acceptance by communities is jeopardized. | Awareness talks are organized with leaders to explain our processes. Dialogue with local authorities and community leaders to allow ARC vehicles to pass |

B. Operational strategy

Overall Operational Objective

To reduce the impact of humanitarian needs caused by the prolonged drought in Salta province through actions that reduce negative survival strategies, improve access to drinking water, and nutritional surveillance with a gender perspective.

ARC's EPoA includes actions to support 4,000 vulnerable people in the municipalities of Santa Victoria Este and General Ballivian in northern Salta in terms of health care, livelihoods and water and hygiene.

OPERATIONAL SUPPORT

Human resources: All deployed personnel have life and personal accident insurance in accordance with Argentine legislation, and institutional staff has work-risk insurance.

So far, 9 national intervention team (NIT) members, 4 headquarters staff and 52 volunteers from branches in Luján, La Plata, Mar del Plata, Necochea, Rosario, Saavedra, Salta, San Andrés, San Juan, San Rafael, Santa Fe, Santiago del Estero, Santos Lugares, Tucumán, and Villa Crespo have been deployed.

The COVID-10 context has generated extra documentation, requiring a health declaration stating that the person has not presented associated symptoms in the 14 days prior to deployment as well as another stating that the person has not come into close contact with suspected cases. Related protocols and procedures and a permanent surveillance system have been incorporated. The pandemic has made it difficult to mobilize volunteers, requiring them to stay for longer periods of time to reduce the virus' circulation and prioritizing local volunteerism.

Logistics and supply chain: All of the National Society's logistical resources have been made available since the beginning of the operation, and the humanitarian logistics area at Headquarters has been working actively since then as well. However, the COVID-19 action plan has required sharing logistical support resources, such as transportation, to implement the operation.

Agreements were established with the Aeropuerto 2000 agency, which has provided storage space at Ezeiza International Airport to be used as an extra warehouse. Likewise, it should be noted that the logistics team had to devote time to purchasing and acquisition processes for the action plan mentioned above.

The assistance provided by the IFRC RLU to acquire the humanitarian aid that is currently being distributed in the field has been essential for the Plan of Action's implementation. Also, with their support, ARC has acquired 1600 jerrycans (sent from Panama), 800 hygiene kits (which are scheduled to arrive soon), 4 bladders, and 800 household water filters and 16 community water filters (sent from the United Kingdom).

Other important pandemic-related issues to consider are the closed roads, restricted transport of cargo and the border closures (both commercial and personal).

It is important to note that transportation costs have been high due to:

- The distance between the location from which resources are deployed and the field.
- The difficult access, and therefore the need to have specific vehicles and equipment.
- Increased maintenance costs for cell phones and resources due to the distances travelled over rough terrain.

The following material resources have been deployed to the field:

| Resources | Quantity |
|----------------------------------|----------|
| 4x4 trucks, double cab | 4 |
| 4x2 trucks, double cab | 2 |
| Utility truck | 2 |
| Unmanned aerial vehicle (drone) | 1 |
| Backpacks and first aid kits | 7 |
| VHF communication equipment | 20 |
| WASH kit (for source evaluation) | 1 |
| Safety equipment for volunteers | 30 |
| ATVs | 2 |
| Semitrailer | 1 |
| Motorhome | 1 |
| M15 Water Treatment Plant | 1 |
| Generators | 2 |
| Structural Tent | 3 |
| Field tents | 4 |
| Awnings | 3 |

Information technology: Community assessments have been carried out using the ODK platform. Satellite telephony is being used, as many areas in this region of Argentina do not have telephone or communication services. A satellite internet antenna was installed at the camp to support the operation.

Communications: Images, videos and testimonials have been obtained in coordination with the national headquarters' communication area and volunteers and personnel deployed in the field, from which various materials have been created. These have been shared in the media, social networks, and used in accountability documents to communities, the government and strategic partners.

The communications team has a four-stage strategy. The first one, which has been completed, was directly related to the “problematization of the situation” and positioning the issue in the agenda. The second stage involved fundraising. The third stage involved visibility, monitoring rumours and producing pieces for the community (which is currently underway). The fourth stage involves the compilation of elements that provide visibility to actions and that can be used for accountability to the community, State and strategic partners.

The following are links to media coverage on the ARC operation:

- <https://www.diariopopular.com.ar/general/cruz-roja-ayudara-las-comunidades-wichis-y-los-pueblos-indigenas-salta-2-millones-litros-agua-n460841>
- <https://www.tribuno.com/salta/nota/2020-2-6-14-3-0-organismos-internacionales-se-suman-a-la-agenda-de-intervencion-sociosanitaria-en-el-norte-salteno>
- <https://www.lanacion.com.ar/comunidad/cruz-roja-se-suma-ayuda-salta-llevar-nid2336185>
- https://www.ellitoral.com/index.php/id_um/226900-la-cruz-roja-argentina-brindara-2-millones-de-litros-de-agua-potable-a-salta-en-dos-meses-nacionales.html
- <https://www.minutoneuquen.com/nacionales/2020/2/21/ante-la-emergencia-la-cruz-roja-argentina-llevara-agua-potable-la-comunidad-wichi-de-salta-189818.html>
- <https://www.ambito.com/politica/juan-cabandie/la-cruz-roja-repartira-2-millones-litros-agua-pueblos-indigenas-salta-n5084323>
- <https://www.telam.com.ar/notas/202002/434160-cruz-roja-argentina-agua-potable-comunidades-wichi-salta.html>
- <https://www.pagina12.com.ar/249975-la-cruz-roja-instalara-un-campamento-en-el-chaco-salteno>
- <https://mundo.sputniknews.com/america-latina/202002071090399016-la-onu-la-ue-y-la-cruz-roja-intervienen-en-provincia-argentina-ante-emergencia-sociosanitaria/>

Security: Argentine Red Cross ensures Safer Access in all its operations. All volunteers and staff are covered by life insurance, work under safety regulations and use the appropriate personal protection equipment. Considering the COVID-19 emergency, specific protocols for action and appropriate use of face mask, gloves, social distancing, etc. have been established.

The Red Cross has a good community acceptance and does not have major issues working in affected areas. The community actively participates in activities carried out by the institution.

A safety plan has been prepared, which is sent to volunteers prior to deployment and reviewed during induction. Upon arrival, volunteers are provided work gloves, an institutional vest, and a biosafety kit consisting of a face mask, goggles and gloves (COVID-19 kit).

Planning, monitoring, evaluation and reporting: The operation is being coordinated by an Emergency Operations Centre set up at the base camp. This EOC is coordinated by the National Response Directorate, which in turn is responsible for planning the actions to be carried out in the field. This monitoring is carried out through spreadsheets and documents that are completed and shared daily and the reports prepared by operation leaders (usually members of the national team), which are systematized by the EOC.

Administration and finance: Fundraising was activated as soon as the emergency was declared through both conventional and new fundraising mechanisms. The full marketing team, web donation channels and an advertising campaign over the main mass media were activated. On the other hand, a comprehensive and general plan was submitted to strategic partners such as large donor companies and Chamber of Entrepreneurs for Sustainable Development (CEADS).

All funds raised, including this DREF, were consolidated into one single plan and unified budget called "Salta 2020 Humanitarian Plan of Action". It contains short- and medium-term goals, which will be the responsibility of the Response Directorate, as well as long-term actions, which will be taken up by the National Directorate for Human Development team. The campaign, which is still underway, has raised 50 per cent of the total amount necessary to complete all its actions. ARC has private and individual donors collaborating with the operation, and Spanish Red Cross contributed with 25,000 Euros.

The Argentine Red Cross has specific procedures for procurement and accountability in emergency situations, which aim to guarantee transparency in the management of funds allocated for the implementation of humanitarian aid actions. In addition, the National Accounting and Administration and Finance Directorates will provide support to the operation through budget monitoring, procurement, expense reports, audits and financial reports.

In addition, the National Society maintains annual accounting, which is presented through the Annual Report; an independent audit company audits the reports; and there is an internal oversight body.

C. Detailed Operational Plan



Livelihoods and basic needs

People targeted: 1500

Male: 760

Female: 740

Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

| Indicators: | Target | Actual |
|--|--------|------------|
| Livelihood assessment and cash feasibility study | 1 | 1 |
| Implementation activities to cover the basic needs of 300 families | 300 | In process |
| Monitoring, follow-up and satisfaction survey | 30 | Pending |

Progress towards outcomes

Livelihood assessment and cash feasibility study: A feasibility report and market analysis concluded that conducting a cash transfer programme (CTP) via Visa cards was not feasible, as there are not enough shops that operate with the card modality, sufficient ATMs, and shops do not carry enough stock. However, the National Society is considering alternative ways of delivering the cash and revising the number of people to be reached.

Implementation activities to cover the basic needs of 300 families / Non- conditional Cash Distribution: The National Society is looking into other methods to provide a quick response, considering the possibility of expanding the target population.

Monitoring, follow-up and satisfaction survey: This activity will be conducted after the cash transfer mechanisms are implemented.

Challenges: Limited market opening and access due to COVID-19 restrictions.

Measures: Alert mechanisms to support the needs of affected populations are being analysed.



Health

People targeted: 4000

Male: 2040

Female: 1960

Health Outcome 1: Less severe cases of illness or malnutrition are treated at the community level and referral pathways are established for severe cases

| Indicators: | Target | Actual |
|---|--------------|------------|
| Training volunteers in healthy eating and nutritional surveillance | 60 | In process |
| Identify procedures for referring children identified as potentially malnourished to health centres | 1 | 1 |
| Promotion and awareness of Healthy Eating with a community engagement and accountability (CEA) approach | 800 families | In process |
| Nutritional surveillance and referral to the health centre | 800 families | 355 |

Health Outcome 2: Transmission of diseases with epidemic potential is reduced

| Indicators: | Target | Actual |
|---|---------------|---------------|
| Visits by health personnel from headquarters to assess and monitor the health situation and coordinate with the authorities | 6 | 10 |
| Health promotion training to volunteers for their integration into the emergency response | 30 volunteers | 22 volunteers |

| | | |
|--|------------------|---------------|
| Preparation and distribution of health promotion material that considers the challenge of native peoples with a CEA approach | 800 families | 556 families |
| Health promotion and vector-borne and communicable diseases | 800 | 556 |
| Health Outcome 3: Psychosocial impacts of the emergency are reduced | | |
| Indicators: | Target | Actual |
| Provide psychosocial support (PSS) to people affected by the emergency with priority given to family of victims | 30 families | 4 |
| Provide psychosocial support to staff and volunteers | 120 PSS sessions | 60 |

Progress towards outcomes

Training volunteers in healthy eating and nutritional surveillance: This activity was suspended due to the mandatory social isolation measures decreed in Argentina that ban mass gatherings of people. This training has been rescheduled for 16 May, which will be provided online by nutrition and food security specialists.

Identify procedures for referring children identified as potentially malnourished to health centres: A procedure to identify at-risk children was developed, which includes criteria to assess the target population for this activity (e.g. age, height, weight, community, access to safe water and disabilities). The nursing staff will be responsible for reporting and identification, supervised by base camp leaders. Children will be reported and referred to the Santa Victoria Este hospital, which is the main health facility in the region. The case must also be reported to the province's Ministry of Health, as agreed with the Ministry of the Interior (a reporting protocol and form exist).

Promotion and awareness of Healthy Eating with an CEA approach: The mandatory isolation measures have also hampered community training because of people's inability to travel; however, micro-recommendations and key messages are provided to the people who come to the infirmary or scheduled distributions.

Nutritional surveillance and referral to the health centre: The infirmary has reported 355 visits by various community members to seek treatment for various ailments (headaches, wounds, pharyngitis, otitis, colic, lower back pain, gastroenteritis, labour, seizures, BP and vital signs monitoring). This is very important information for this line of action, given that, in the COVID-19 context, it constitutes a source of information, detection, surveillance and referral. As mentioned above, this is done in coordination with the Santa Victoria Este Hospital, which receives the cases that are considered serious or require advanced medical monitoring, such as cases of severe malnutrition. A protocol to measure height and weight, which are recorded, is applied in all healthcare services as the main surveillance factor.

On the other hand, but no less important, at the beginning of the operation, Argentine Red Cross' Humanitarian Observatory conducted research into the nutritional status of children in northern Argentina using a representative sample. The results regarding nutritional conditions and food dynamics were alarming, which were shared with the municipality and the province.

| Communities | Men | Women | Total |
|-----------------|-----|-------|-------|
| Anglicana | 49 | 65 | 114 |
| 27 de junio | - | 2 | 2 |
| 3 de septiembre | 1 | - | 1 |
| Belizani | 3 | 2 | 5 |
| Cañaverl | - | 1 | 1 |
| CIC | 1 | 4 | 5 |
| Chañaram | - | 1 | 1 |
| Cruce Viejo | - | 1 | 1 |
| La Curvita | 7 | 8 | 15 |
| El Cruce | 1 | 1 | 2 |
| Golondrina | 4 | 4 | 8 |
| La Sardina | 1 | - | 1 |

| | | | |
|------------------|-----|-----|-----|
| Nueva Belisani | 1 | - | 1 |
| La Puntana | 4 | - | 4 |
| Mistolar | 10 | 18 | 28 |
| Misión Grande | 19 | 13 | 32 |
| Padre Coll Nuevo | 4 | 5 | 9 |
| Pablo Secretario | 1 | - | 1 |
| Padre Coll | 4 | 3 | 7 |
| Misión Nueva | 1 | 1 | 2 |
| La Sardina | 1 | - | 1 |
| Misionera | - | 1 | 1 |
| La Estrella | 1 | 1 | 2 |
| Pelicano | 4 | 8 | 12 |
| Paraje Invernada | 1 | - | 1 |
| Monte Carmelo | - | 3 | 3 |
| Pozo del Tigre | - | 2 | 2 |
| Quebrachal | - | 2 | 2 |
| Quebracho Blanco | 5 | 3 | 8 |
| El Retiro | 3 | 1 | 4 |
| Pozo La Yegua | 3 | 1 | 4 |
| Nueva Curvita | 2 | 4 | 6 |
| Monte Verde | 2 | - | 2 |
| Santa María | 18 | 45 | 63 |
| Rosado Malla | 1 | - | 1 |
| Toba | 1 | - | 1 |
| Yuchan | 1 | - | 1 |
| Tartagal | 1 | - | 1 |
| Vizcacheral | 1 | - | 1 |
| Total | 156 | 199 | 355 |

Visits by health personnel from Headquarters to assess and monitor the health situation and coordinate with the authorities: Volunteer technicians and specialized health personnel were deployed. Meetings were held with province Ministry of Health authorities, directors of the Santa Victoria Este hospital and representatives of the national Ministry of Health tasked with keeping records of the cases of malnourished children, to establish care, referral and reporting protocols.

Health promotion training to volunteers for their integration into the emergency response: A total of 13 volunteers distributed across deployments were trained, who later went on to lead health promotion in communities. The training took into account a cultural approach considering the operation's scenario as well as dynamics and approaches, under the corresponding guidelines.

| Date | N° of trainings | Branches | Men | Women | Total |
|-------|-----------------|---------------------------------|-----|-------|-------|
| 08-03 | 1 | Salta | 1 | 1 | 2 |
| 14-03 | 1 | Necochea, Santa Fe | 1 | 1 | 2 |
| 26-03 | 1 | Rosario, Saavedra | 1 | 1 | 2 |
| 09-04 | 1 | Salta, Santos Lugares | 1 | 1 | 2 |
| 21-04 | 1 | Saavedra, Salta, Santos Lugares | 1 | 2 | 3 |

| | | | | | |
|-------|---|-----------------|---|---|----|
| 05-05 | 1 | Salta, Santa Fe | 1 | 1 | 2 |
| Total | 6 | 6 branches | 6 | 7 | 13 |

Preparation and distribution of health promotion material that considers the challenge of native peoples with a CEA approach: Health promotion workshops were provided to individuals together with delivery of and training on the use of household filters. These came with brochures as well as filter use manuals translated into the Wichi language. Three pieces were produced in this manner: one on safe water, one on hand-washing and the filter manual (1000 copies of each).

Health promotion and vector-borne and communicable diseases: This was conducted to complement other awareness-raising workshops and during household filter distributions.

Considering the current situation due to the Coronavirus pandemic, the response strategy in the area had to be re-evaluated in order to ensure the safety of both the communities and volunteers. Action protocols have been established in the event a positive case of COVID-19 is detected in the area, as well as safety-related documents on personal protection equipment and action to minimize the risk of infection.

COVID-19 related consultation spaces have been generated, providing precautionary measures and information to the community.

| Province | Communities | Women | Men |
|--------------|---|------------|------------|
| Salta | Santa María (composed of several communities with a small number of families) | 94 | 77 |
| | Monte Carmelo | 60 | 50 |
| | La Curvita | 74 | 62 |
| | Padre Coll | 33 | 27 |
| | El Pelicano | 2 | 3 |
| | La Golondrina | 3 | 4 |
| | El Retiro | 3 | 4 |
| | El Cruce | 8 | 11 |
| | Mecle | 4 | 4 |
| | Quebracho Blanco | 8 | 9 |
| | Anglicana 3 | 5 | 6 |
| | Madre Nueva Esperanza | 2 | 3 |
| Total | | 296 | 260 |



The ARC conducted a vector-borne disease workshop in the community of Misión Anglicana. Source: ARC.

Provide psychosocial support to people affected by the emergency with priority given to family of victims: Recreational activities used to be conducted with children and adults when the camp had just been set up, which had

to be suspended due to the mandatory social isolation measures. After the children died from malnutrition, volunteers specializing in psychosocial support approached the immediate relatives of these children.



The ARC conducts recreational activities with children. Source: ARC

Provide psychosocial support to staff and volunteers: At the end of each mission, a defusing and mission assessment is conducted with each volunteer who had been in the camp. Group sharing sessions on performance under a psychosocial support strategy are held, which can be done one-on-one if requested. In addition, spaces to socialize are provided daily in the evenings. There is a psychosocial support team at headquarters always available for volunteers who require specific assistance.

| Date | N° of workshops | Branches | Men | Women | Total |
|--------------|-----------------|--|-----|-------|-------|
| 15-03 | 1 | Salta, San Rafael, Santiago del Estero, Villa Crespo, HQ | 6 | 3 | 9 |
| 22-03 | 1 | Necochea, Salta, San Juan, Santa Fe, Santos Lugares, Tucumán, HQ | 7 | 5 | 12 |
| 09-04 | 1 | La Plata, Rosario, Saavedra, Salta, Santos Lugares, HQ | 5 | 6 | 11 |
| 23-04 | 1 | La Plata, Luján, Rosario, Salta, Santos Lugares, HQ. | 7 | 4 | 11 |
| 04-05 | 1 | Saavedra, Salta, San Andrés, Santa Fe, Santos Lugares. | 5 | 6 | 11 |
| Total | | 14 branches + HQ | 30 | 24 | 54 |

Challenges:

- Training volunteers in food security in a COVID-19 context.
- Generating group spaces for families in a COVID-19 context.
- Instability of computer networks.
- Low flow of official information.
- Language barriers.
- Psychosocial support for women.

Actions to overcome challenges:

- Virtual training spaces are established.
- Strategies for home visits and family micro-chats are initiated, respecting all COVID-19 biosafety measures
- The bandwidth of the camp's antenna is increased.
- The Red Cross Humanitarian Observatory is designing new research to be socialized with authorities.
- Pieces are produced in native languages, and contacts are established with community translators.



ERC volunteers provide first aid in the community of El Pelicano. Source: ARC

- Once COVID precautionary measures end, the plan is to have protected, gender-differentiated spaces, agreed with *caciques* and community leaders.



Water, sanitation and hygiene

People targeted: 4000

Male: 2040

Female: 1960

WASH Outcome 1: Immediate risk reduction of water-borne and water-related diseases in selected communities

| Indicators: | Target | Actual |
|---|------------------|---------------|
| WASH Training for volunteers | 15 | 15 |
| Water, sanitation and hygiene quality assessments and monitoring of water quality | 30 | 30 |
| Distribution of drinking water by means of a drinking water distribution system with installed bladders | 2,000,000 Litres | In process |
| Distribution of PUR powders (ARC donation) | 75000 | In process |
| Distribution and use of family water filters | 800 families | 556 |
| Distribution and use of community water filters | 16 | 4 |
| Distribution and use of jerrycans | 1,600 jerrycans | 740 jerrycans |

WASH Output 2: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population

| Indicators: | Target | Actual |
|--|--------------|--------------|
| Adaptation of WASH promotional materials with a CEA approach and in native languages | 1 | 1 |
| Hygiene promotion, water care and sanitation sessions with communities | 800 families | 556 families |
| Distribution of hygiene kits | 800 families | 0 families |

Progress towards outcomes

WASH Training for volunteers: Volunteers deployed to the Argentine Red Cross Base Camp in the Santa Victoria Este area receive a quick induction, mainly on hygiene and sanitation strategies. Beyond that, volunteers were trained specifically on water (purification, analysis, plant management, monitoring and tracking of sources and networks), sanitation (monitoring, waste treatment) and hygiene promotion (with a strong focus on hand-washing and maintaining personal hygiene). This will be reinforced during distribution of family hygiene kits.

| Province | N° of trainings | Branches | Men | Women | Total |
|--------------|-----------------|---------------------|----------|----------|-----------|
| Salta | 6 | Santiago del Estero | 1 | | 1 |
| | | Tucumán | 1 | | 1 |
| | | Santos Lugares | 1 | 2 | 3 |
| | | Saavedra | | 1 | 1 |
| | | Santa Fe | 1 | | 1 |
| | | Salta | 3 | 2 | 5 |
| | | San Andrés | | 1 | 1 |
| | | La Plata | 1 | 1 | 2 |
| TOTAL | 6 | 7 | 8 | 7 | 15 |

Water, sanitation and hygiene quality assessments and monitoring of water quality: Water quality assessments in the area yielded negative results. Diarrhoea is a recurring illness in the area, as 84 per cent of children have suffered an episode in the last month; only 40 per cent of people have access to a water network, and the rest lack the means to store water they obtain from other sources; nobody likes how the water tastes; the lack of access to water and its poor quality causes symptoms of severe dehydration in the population. Some 30

water samples from the communities of Puntana, Monte Carmelo, Santa María, Nueva Curvita, Misión Grande, Padre Coll, Ruta 54 km 117 (laguna) and Santa Victoria Este were tested for nitrite, nitrate, pH, chlorine, sodium, microsiemens, temperature and turbidity. Water sources have been mapped, and water, especially that which is purified and consumed at the camp, is tested daily.



ARC is doing water quality samples in the community of El Pelicano. Source: Argentine Red Cross

Distribution of drinking water by means of a drinking water distribution system with installed bladders:

This activity is delayed due to the period that it entailed for the arrival of the water treatment plant. Border closures delayed the plant's shipping from Spain to Argentina and later from Buenos Aires to Salta. The plant is currently functioning and purifying water, which will be distributed in the coming weeks.

Distribution of PUR powders (ARC donation): The powders donated by P&G have not been delivered due to delays in transporting materials from the main warehouse to Salta because of the pandemic. Furthermore, the powders arrived during the initial stages of the household filters' delivery, deciding to prioritize the latter.

Distribution and use of family (800) and community (16) water filters and jerrycans (1,600): 556 household filters have been delivered in communities in Salta. Each distribution was accompanied by at least two health- and water and sanitation-related training spaces. Four filters have been delivered to health centres in Santa María, Monte Carmelo, La Puntana and Santa Victoria Este. Filters have not been delivered to other community spaces, such as schools and CICs (Community Integration Centres), as these remain closed because of isolation measures. So far, 740 filters have been delivered to community families, and distribution is expected to be completed in the next two days. Filter deliveries had to be restructured so as to adhere to pandemic-related recommendations. A safe distribution protocol was designed, which includes distancing and safety barriers.

| Province | Communities | Household filters | Jerrycans | Community filters | Women | Men |
|----------|--|-------------------|-----------|-------------------|-------|-----|
| Salta | Santa María (composed of several communities with a small number of families) | 171 | 530 | 1 | 94 | 77 |
| | Monte Carmelo | 110 | 210 | 1 | 60 | 50 |
| | La Curvita | 136 | | | 74 | 62 |
| | Padre Coll | 60 | | | 33 | 27 |
| | El Pelicano | 5 | | | 2 | 3 |
| | La Golondrina | 7 | | | 3 | 4 |
| | El Retiro | 7 | | | 3 | 4 |
| | El Cruce | 19 | | | 8 | 11 |
| | Mecle | 8 | | | 4 | 4 |
| | Quebracho Blanco | 17 | | | 8 | 9 |
| | Anglicana 3 | 11 | | | 5 | 6 |
| | Madre Nueva Esperanza | 5 | | | 2 | 3 |

| | | | | | | |
|--------------|---------------------|------------|------------|----------|-------------|-------------|
| | La Puntana | | | 1 | 36 | 30 |
| | Santa Victoria Este | | | 1 | 1375 | 1125 |
| Total | | 556 | 740 | 4 | 1707 | 1415 |

Adaptation of WASH promotional materials with a CEA approach and in native languages: The instruction manual for the household filters was translated into Wichi, which was done in conjunction with community leaders and individuals who offered to translate. These instructions were delivered along with these water filters and explained during the community water and sanitation workshops. The pieces on safe water and hand-washing were also designed, translated and printed (1000 copies of each).



Household filter manual translated to the Wichi language. Source: Argentine Red Cross

Hygiene promotion, water care and sanitation sessions with communities: Workshops on proper water use, under a CEA approach, have been held in communities, engaging the women and with support from community leaders. Each filter distribution is preceded by a community workshop on the filters' proper use, which also includes overlapping aspects of proper water care and use as well as sanitation and hygiene measures.

| Province | Communities | Women | Men |
|-----------------------|--|------------|------------|
| Salta | Santa María (composed of several communities with a small number of families) | 94 | 77 |
| | Monte Carmelo | 60 | 50 |
| | La Curvita | 74 | 62 |
| | Padre Coll | 33 | 27 |
| | El Pelicano | 2 | 3 |
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| | El Cruce | 8 | 11 |
| | Mecle | 4 | 4 |
| | Quebracho Blanco | 8 | 9 |
| | Anglicana 3 | 5 | 6 |
| Madre Nueva Esperanza | 2 | 3 | |
| Total | | 296 | 260 |

Distribution of hygiene kits: These kits were acquired through the RLU, which are expected to arrive soon by sea. Once in Argentina, distribution will begin immediately.

Challenges:

- The COVID-19 pandemic represents one of the main challenges of the operation due to the closing of customs offices and borders. The delays in the entry of humanitarian aid items plus the closing of certain points between provinces in Argentina delayed their arrival or caused them to arrive in small batches, lengthening the supply chain between the capital and the affected areas.
- The global situation cause by the pandemic has required reorganizing distributions in emergencies to include protection measures. Having to comply with social distancing measures slows down the humanitarian aid delivery process.
- Argentina has banned mass public and community events, making it impossible to hold some community workshops.
- While the town of Santa Victoria Este is not difficult to access, it is far from the main urban centres in northern Argentina, which makes it difficult to acquire the items needed for activities and requires transporting enough supplies to the base camp as well as replenishing them on a weekly basis.

Actions to overcome challenges:

- Community distributions and activities are planned in advance, anticipating the number of people attending and focusing mainly on complying with COVID-19 protection measures.
- Personal protection materials were distributed to volunteers on the ground.
- A number of minimum safety standards were created for volunteers involved in Argentine Red Cross activities.
- An agreement was reached with leaders who maintain the roadblocks, as well as with the appropriate authorities, to allow free movement of Red Cross personnel.



Protection, gender and inclusion

People targeted: 4000

Male: 2040

Female: 1960

Protection, gender and inclusion Outcome 1: Communities become more peaceful, secure and inclusive by meeting the needs and rights of the most vulnerable.

| Indicators: | Target | Actual |
|--|-----------------------|--------|
| Conduct an assessment of the specific needs of the affected population based on criteria selected from the minimum standards for PGI in emergencies. | 3 | 1 |
| Develop standard operating procedures for the protection from sexual and gender-based violence and the protection of children, including mapping of referral routes. | 1 | 1 |
| Conduct training in protection, gender and inclusion for volunteers. | 15 volunteers trained | 4 |
| Support sector teams and ensure the collection and analysis of data disaggregated by sex, age and disability | 1 | 1 |

Progress towards outcomes

Conduct an assessment of the specific needs of the affected population based on criteria selected from the minimum standards for PGI in emergencies: A first report of the initial surveys of the different lines of the Plan has been prepared. The referral strategy should be redesigned given the context of isolation and the closure of government structures, such as Social Development. The assessment has also detected the main cultural barriers, mostly related to gender and the asymmetric power relations between families and individuals; however, positive results from these evaluations have been linked to the presence of women (although few) in spheres of power and leadership..

Develop standard operating procedures for the protection from sexual and gender-based violence and the protection of children, including mapping of referral routes: This was done at they beginning of the operation,

and must be harmonized for the current COVID-19 isolation context. This procedure includes referral scenarios and activation of protection protocols, among the most important documents.

Conduct training in protection, gender and inclusion for volunteers: Four volunteers have been trained on the subject, who supported the preparation of the procedure and adaptation of the registration forms. the national PGI coordinator will conduct a virtual training on 12 May for 20 volunteers, some of them residing at the camp and others soon to be deployed.

| Province | N° of trainings | Branches | Men | Women | Total |
|--------------|-----------------|----------------|----------|----------|----------|
| Salta | 1 | Salta | 1 | 1 | 2 |
| | | Santos Lugares | 1 | 1 | 2 |
| TOTAL | 1 | 2 | 2 | 2 | 4 |

Support sector teams and ensure the collection and analysis of data disaggregated by sex, age and disability: The preparation of data collection tools, such as ODK, beneficiary registration forms, volunteer registration and reporting matrices, were adjusted to the gender and inclusion approach, considering the most important parameters of this dimension.

Challenges:

- Adapting engagement and decision-making spaces for women.
- Referring cases of violence.
- Integrating people into decision-making processes.

Actions to overcome challenges:

- Protected, gender-differentiated spaces are planned for when the social restrictions are over.
- A referral plan agreed with the Ministry is established, as well as a sub-contingency plan for situations that may occur during the pandemic.
- Weekly meetings are established with *caciques* to communicate progress and hear their views on new lines or actions to be addressed.

National Society Strengthening

S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform.

S 1.1.4: National Societies have effective and motivated volunteers who are protected.

| Indicators: | Target | Actual |
|--|--------|--------|
| Mobilization of the National Intervention Team | 12 | 9 |
| Follow-up visits by the National Society | 3 | 2 |
| Distribution of personal protective equipment | 50 | 50 |
| Lessons learned workshop | 1 | 0 |

International Disaster Response

S2.1: Effective and coordinated international disaster response is ensured.

S2.1.1: Effective and respected surge capacity mechanism is maintained.

| Indicators: | Target | Actual |
|-------------------------------------|--------|--------|
| IFRC monitoring and support | 1 | 1 |
| Water specialist support (RIT WASH) | 1 | 1 |

Influence others as leading strategic partner

S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.

| S3.1.1 IFRC and NS are visible, trusted and effective advocates on humanitarian issues. | | |
|--|---------------|---------------|
| Indicators: | Target | Actual |
| Communication strategy for the operation | 1 | 1 |
| <p>Progress towards outcomes</p> <p>Mobilization of the National Intervention Team: Nine NIT members were deployed on different occasions, working as base camp leaders and following up on EPoA activities to fulfil main objectives.</p> <p>Follow-up visits by the National Society: EPoA activities are constantly monitored through the Operational Coordination of the Emergency and Disaster Response Directorate, which is in communication with the EOC at the base camp to obtain feedback in order to achieve the objectives.</p> <p>Distribution of personal protective equipment: Personal protection equipment from National Society stocks has been distributed to the operation, including work gloves, institutional vest, and a biosafety kit consisting of a face mask, goggles and gloves.</p> <p>Lessons learned workshop: A lessons learned workshop will be held during the EPoA closeout stage, linking all actors in the emergency. Argentine Red Cross has a model adapted to the context that has been implemented in previous operations.</p> <p>IFRC monitoring and support: Constant contact with IFRC is maintained through Head of the Country Office, and DM Coordinator. Support has been received on various occasions from specialized units such as Livelihoods, Health, Procurement and Logistics.</p> <p>Water specialist support (RIT WASH): As part of the initial assessment, a WASH specialist was deployed for one week for sector assessments. This assessment space was shared with United Nations agencies.</p> | | |

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How we work

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

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote **social inclusion**
and a culture of
non-violence and **peace**.