In support of the Red Cross National Societies of Argentina, Brazil, Paraguay and Uruguay

People to be reached

- **Climate and environment**: 21,000
- **Disasters and crises**: 15,000
- **Health and wellbeing**: 100,000
- **Migration and displacement**: 10,500
- **Values, power and inclusion**: 5,500

IFRC network multiyear focus

**Longer term needs**
- disaster risk management
- climate change adaptation
  - community health

**Capacity development**
- auxiliary role
- financial sustainability and resource mobilization
- volunteering

Population

- **Argentina**: 45.8M
- **Brazil**: 214M
- **Paraguay**: 7.2M
- **Uruguay**: 3.5M

Funding Requirement: CHF 4.3M

Appeal numbers: MAA46003, MAABR003
This document details IFRC network-wide figures and actions in areas agreed with the country National Society. 
For additional information, see last page of this plan. * National Societies which have contributed only multilaterally through the IFRC in the past two years.

**Participating National Societies**

- American Red Cross*
- Argentine Red Cross*
- Australian Red Cross
- Costa Rican Red Cross
- Danish Red Cross*
- Ecuadorian Red Cross
- German Red Cross
- Italian Red Cross
- Spanish Red Cross
- Swiss Red Cross
- Turkish Red Crescent Society
- Ukrainian Red Cross Society

**Funding requirements**

**Total 4.3M CHF**

Through the IFRC

**4.2M CHF**

Through Participating National Societies

**120,000 CHF**

**IFRC Breakdown**

**Longer term needs**

- **270,000 CHF**
  Climate and environment

- **1.8M CHF**
  Disasters and crises

- **920,000 CHF**
  Health and wellbeing

- **620,000 CHF**
  Migration and displacement

- **120,000 CHF**
  Values, power and inclusion

- **480,000 CHF**
  Enabling local actors

**Hazards**

- Earthquakes
- Volcano
- Drought
- Floods
- Fires
- Disease outbreaks
NATIONAL SOCIETY PROFILES

Argentine Red Cross

<table>
<thead>
<tr>
<th>Number of staff</th>
<th>1,620</th>
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<tr>
<td>Number of volunteers</td>
<td>5,000</td>
</tr>
<tr>
<td>Number of branches</td>
<td>66</td>
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Founded in 1880, the Argentine Red Cross has a wide network of branches distributed throughout the country. It seeks to ensure full territorial coverage and the social impact that characterizes the National Society. It is an innovative and constantly growing organization aiming to train and strengthen its work teams at all levels to expand humanitarian action in the Argentine Republic.

The National Society carries out its activities in coordination with international and national organizations, the state and private sector, as well as other civil society organizations. It also maintains links and joint actions with the different levels of government (national, provincial and local) in accordance with its auxiliary role to the public authorities. It enhanced this role through specific actions during the pandemic.

The Argentine Red Cross’s mission is to improve people’s lives, especially those in vulnerable situations. Its institutional vision is to be an innovative National Society with a solid presence throughout the national territory, led by professionals with capacity and integrity.

The organizational principles of the Argentine Red Cross are based on those of the International Red Cross and Red Crescent Movement. To fulfil its mission, the National Society will adjust its actions to the organizational values established by the International Federation of Red Cross and Red Crescent Societies (IFRC), notably people, integrity, diversity, leadership and innovation. It also incorporates the values of the Argentine Red Cross, which are respect, justice and responsibility.

The Argentine Red Cross continues to work on its strategic plan. In 2020, the Red Cross law was approved and put into effect, which generated a significant additional funding stream for the National Society and greater security and resources for volunteers.

Brazilian Red Cross

<table>
<thead>
<tr>
<th>Number of staff</th>
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<td>Number of volunteers</td>
<td>28,000</td>
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<td>Number of branches</td>
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Founded in 1908, the Brazilian Red Cross was registered and recognized in 1910 and 1912 respectively as an entity at national and international level. The First World War of 1914–1918 proved a decisive factor in further developing itself as an institution. The Ladies of the Brazilian Red Cross, formed by a committee of the Carioca Society, led to the creation of the Women’s Section. Its first task was the formation of a volunteer nursing corps, leading in 1916 to the creation of a practical school for nursing. With Brazil declaring war against Germany and its allies, the National Society expanded its nursing courses and formed new state and municipal sections. The Brazilian Red Cross became an IFRC member in 1919.

The National Society has four national departments: volunteering, youth, education and health, and relief and disasters. Its headquarters are located in Rio de Janeiro, from where it runs 74 branches. The purpose of the Brazilian Red Cross is to alleviate and mitigate human suffering; contribute to improving health through disease prevention; develop training programmes and community services; coordinate assistance to people affected by emergencies; train volunteers; and disseminate the humanitarian principles of the Movement. Overall, it seeks to develop the ideals of peace, mutual respect and understanding among all peoples of the Brazilian population.

The Brazilian Red Cross carries out its activities in coordination with international and national organizations, the state and private sector, and other civil society organizations.
Paraguayan Red Cross

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<tr>
<td>Number of branches</td>
<td>18</td>
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Founded in 1919, the Paraguayan Red Cross is the oldest humanitarian aid organization in the country and the one with the most extensive territorial coverage. According to a law of 2015, it serves as an auxiliary to the Paraguayan State in full compliance with the principle of independence.

The National Society has its headquarters in the capital, Asunción, with 18 branches distributed throughout the country. It also runs a mother and child hospital, a mother and child home, and two educational centres. As part of its institutional mission, each operational unit collaborates according to the needs of respective areas of interest.

The Paraguayan Red Cross has 1,043 volunteers on the ground, complemented by a contracted team responsible for overall management.

The main objective of the National Society is to prevent and alleviate human suffering in a completely impartial manner. It achieves this without discrimination on the grounds of nationality, race, sex, religion, language, social status, political opinion, language or anything else. Its vision is to be well positioned as a strong, recognized and respected humanitarian organization. Broadly representative of Paraguayan youth, its committed volunteers and other human resources are trained and prepared to lead and carry out its mission and objectives.

In 2021, indicators showed significant improvement in all major development areas of the National Society. The Paraguayan Red Cross has newly elected authorities and successfully resolved its integrity crisis. To regain its place as a key humanitarian actor in Paraguay, the National Society must continue reforming and modernizing its network to fulfil its auxiliary role. The Paraguayan Red Cross successfully implemented its operations in 2020 and 2021 and responded to the COVID-19 pandemic, albeit with limited resources and capacity.

Uruguayan Red Cross

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<tbody>
<tr>
<td>Number of staff</td>
<td>52</td>
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<tr>
<td>Number of volunteers</td>
<td>350</td>
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<tr>
<td>Number of branches</td>
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The Uruguayan Red Cross is a civil association constituted under the laws of the Oriental Republic of Uruguay on 5 March 1897, with legal status granted by the Executive Power on 26 October 1897. Through its territorial network of 20 departmental and local branches, the National Society is able to provide a timely and efficient response wherever needed. Volunteers are often the first to arrive at a disaster scene, and remain during the community rebuilding stages.

The National Society’s mission is to fulfil its humanitarian mandate to assist people and their communities in vulnerable situations as well as to protect and promote health so that people can achieve a life of dignity. All this is achieved within the Fundamental Principles and humanitarian values framework.

The Uruguayan Red Cross embraces different responsibilities, notably risk management and disaster response, communications, resource mobilization and development, and volunteering. It also hosts a comprehensive training centre that provides training services in areas such as first aid, water rescue and nursing.

The Uruguayan Red Cross changed governing authorities in 2021. Its new development plan, which focuses on sustainability and growth, now needs to be implemented appropriately. It still runs a strategic deficit of sustainable financing to address National Society staffing needs.
IFRC NETWORK ACTION IN 2023

Joint situational analysis

The Southern Cone is the most prosperous macro-region in Latin America, and it has a relatively high life expectancy and access to health care and education. However, Argentina, Brazil, Paraguay and Uruguay all face challenges. These include political uncertainty, corruption, income inequality, partial progress on structural reform and limited infrastructure, all of which pose significant obstacles to long-term growth.

As a region, these four countries generally maintain open policies to refugees and migrants from Venezuela. However, socio-demographic trends in Latin America over the coming years are expected to contribute to changing vulnerabilities in the population. These include a predominantly young population, increasing numbers of older people, changes in family structures and broader ethnic-cultural diversity. There is also a growing concern that violence is becoming a public health issue.

The region remains highly exposed to a combination of factors such as floods, earthquakes, volcanic eruptions, droughts, health emergencies, densely populated urban areas, political instability and internal disturbances, all of which exacerbate the vulnerabilities of poor and marginalized people.

The Argentine Republic covers more than 2.8 million square kilometres of continental territory. The country is federally organized into 24 jurisdictions (23 provinces and one autonomous city) with nearly 2,500 municipalities. Of the total population, 95 per cent are concentrated in urban centres, and 37 per cent live below the poverty line. These populations are in critical situations of social vulnerability in the context of a complex socioeconomic situation, characterized by a sustained increase in inflation and an unemployment rate of 7% by mid-2022.

The crisis unleashed by the COVID-19 pandemic directly affected the country’s economy and social situation. Further economic contraction may lead to more job losses, a correlated increase in poverty and new challenges to sustainable development and social peace. The pandemic in Argentina hit a country already affected by significant socio-economic challenges, notably a food, socio-health and productivity crisis. At the same time, these challenges produced fiscal constraints affecting the basic demands of the population.

Brazil is the largest country in Latin America. With an estimated area of more than 8.5 million square kilometres, it ranks as the world's fifth largest in total area and is equivalent to 47 per cent of South American territory. Brazil has an estimated population of 215 million with almost half (91.8 million) aged between 0 and 17 years old. Most Brazilians (84.7 per cent) live in urban areas, and only 15.3 per cent in rural zones. The country recorded an 11 per cent unemployment rate in mid-2022, with more than 30 million people living below the poverty line.

Paraguay ranks as Latin America’s eighth-largest country, with an area of nearly 407,000 square kilometres. It has a population of 7,353,000 people with a very low population density of 18 inhabitants per square kilometre. Paraguay is among the group of countries best able to cope with the COVID-19 pandemic. It recorded a minor GDP contraction and one of the most modest poverty increases in the region. However, it currently faces rising inflation and a historic drought threatening a decline in incomes, especially in rural areas, and stagnation in reducing extreme poverty.

Uruguay is the second-smallest country in South America, with a population of 3,485,000. It stands out as one of the continent’s most egalitarian societies with high per capita income and low levels of inequality and poverty. In relative terms, its middle class is the largest in the Americas, representing more than 60 per cent of its population. According to the World Data Bank, the country is currently in an advanced stage of demographic transition. It is in the process of reforming its social security system, which presently generates high fiscal costs. Uruguay also faces the challenges of incorporating women into economic activities. It seeks to transform its educational and labour institutions to take advantage of the productive benefits of technological change. Finally, while poverty remains relatively low in Uruguay than in the rest of the region, essential disparities persist regarding age, gender, region and ancestry. These may have deepened with the pandemic.
Strategic priorities

Climate and environment

Latin America and the Caribbean are heavily affected by climate change. In the Southern Cone, external weather events are causing damage to health, livelihoods, access to water, and socio-economic development, all of which can expect to have long-term impacts. The most common consequences are rising temperatures, partly caused by retreating glaciers and loss of ice mass; droughts that inflict critical food insecurity impacts; heavy rains resulting in landslides and flash floods in urban and rural areas; and fires and deforestation linked to logging for pasture and livestock.

Argentina

Given Argentina’s size and climatic diversity, climate change will have different impacts in different parts of the country. The most significant warming is expected to occur in this century. Such warming is already leading to a scenario of increasing water stress, less efficient use of water by ecological systems, and the probable local extinction of some species less tolerant to the new conditions. Average temperatures are likely to increase across the country under both moderate and extreme states of increasing greenhouse gas concentrations. Average temperature rises of between 0.5°C and 1°C are projected to occur throughout most of the country, with higher increases in the northwest, and higher in the north than in the south. Changes in average precipitation across the country are not expected to be significant, ranging from 10 per cent less rainfall in some parts to 10 per cent more in others.

The Argentine Red Cross will use scientific information and community knowledge to transform how it works to respond more effectively to the vulnerabilities and threats wrought by climate change. It will also aim to reduce the country’s carbon footprint.

Brazil

Due to its territorial diversity, Brazil is affected by several climatic contexts. On the one hand, the rising sea level along the Atlantic coast of South America threatens a large part of the population in coastal areas. Contamination of freshwater aquifers, coastal erosion and flooding in low-lying areas are expected to increase. On the other hand, multi-year droughts in the Paraná-La Plata basin – the worst since 1944 – have affected central-southern Brazil. This has caused agricultural damage and a reduction in crop production and affected world markets.

Extreme rains (with record values in many places), floods and landslides caused considerable challenges in 2021 and 2022, with the loss of hundreds of lives, tens of thousands of homes destroyed or damaged, and hundreds of thousands of people displaced. South America is one of the world’s regions with the greatest documented need for strengthened early warning systems.

Deforestation in the Brazilian Amazon rainforest has doubled compared to the 2009–2018 average, reaching its highest level since 2009. Compared with 2020, 22 per cent more forest area has been lost. Brazil’s National Institute for Space Research (INPE) reported a three-year record for deforestation of the Amazon recorded in September 2022. From January to September, 8,590 square kilometers were deforested.

The Brazilian Red Cross will start training its entire team to address climate change. It has committed to developing a climate-related narrative and plans various actions to combat the climate and environmental crisis.

Paraguay

In 2021, temperatures throughout South America, including Paraguay, were above average. There was below-normal precipitation in the Paraná-La Plata basin, where the multi-year drought is expected to continue affecting parts of Paraguay. This lack of rainfall, mainly in the basin’s upper reaches, has led to a significant decrease in the flow of the Paraguay and Paraná rivers. Drought in the Paraná-La Plata basin countries has affected many sectors, such as agriculture, inland navigation, energy production, water supply and ecosystems. On 8 July 2021, Paraguay formally declared a drought emergency and a state of emergency for navigation on the Paraná, Paraguay and Apa rivers.

The Paraguayan Red Cross understands that climate change and the environmental crisis will bring consequences to the country and its vulnerable populations. Over the next few years, the National Society will work on the issue, firstly by training and sensitizing its technical team and policy approaches. It will then develop programmes and projects related to climate change and the environmental crisis and their impact on the most vulnerable communities.
Uruguay

Natural hazards in Uruguay are closely associated with climatic phenomena such as droughts, floods and tornadoes. Major droughts usually coincide with the La Niña phenomena, while El Niño tends to cause floods. There is a slow but increasing deterioration of surface water quality. This results from inadequately treated domestic and industrial waste disposal and run-off from agricultural and production waste. The quality of water resources could deteriorate further with increasing temperature and pollutant loads likely to be produced by socio-economic development projects. According to studies by the Intergovernmental Panel on Climate Change, the main consequences of climate change in Uruguay will be the increased frequency and intensity of extreme weather events and a rise in the average sea level.

The Uruguayan Red Cross will work to anticipate and respond to events ranging from local emergencies to major disasters or from predictable events to unexpected catastrophes. It will work to incorporate improved environmental management measures into all programmes, operations and activities.

The National Societies of Argentina, Paraguay and Uruguay are part of the IFRC Global Climate Resilience Programme, which aims to foster an unprecedented scale-up in locally led climate-smart disaster risk reduction and adaptation efforts. These are designed to prevent and reduce climate-related disaster impacts and build community-level climate resilience. The programme aims to support 500 million people in 100 of the most climate-vulnerable countries, focusing on the least supported and marginalized communities. This holistic, multi-year programmatic approach consists of four operational pillars: (1) scaling up climate-smart disaster risk reduction, anticipatory action and preparedness; (2) reducing the public health impacts of climate change; (3) addressing climate displacement; and (4) enabling climate-resilient livelihoods and ecosystem services.

Disasters and crises

For real-time information on emergencies, see IFRC GO pages:

- Argentina
- Brazil
- Paraguay
- Uruguay

All Southern Cone countries, as well as Brazil, are affected by different crises or catastrophes in various ways.

Earthquakes (Argentina)

Earthquakes affect Argentina when the Nazca plate (which forms part of the Pacific Ocean floor) converges with the South American plate. This contact zone, considered the longest in the world, is located along the coast of Peru and Chile. Cuyo (mainly San Juan and Mendoza) and NOA (Salta) are the regions with the highest seismic risk. There is also a risk in some areas of Patagonia and Central Chile.

Volcanic eruptions (Argentina)

Of all volcanic hazards, ash fallout is the one that covers the most significant area and affects the greatest number of people and property in Argentina. There are 117 active volcanoes in the Andes Mountains, shared by Argentina and Chile. In Argentina, according to the National Geographic Institute, 37 active volcanoes are registered in the provinces of Jujuy, Salta, Catamarca, Mendoza, Neuquén, Río Negro, Chubut and Santa Cruz.

Floods (Argentina, Brazil, Paraguay, Uruguay)

Floods occur in all four countries. In Argentina, precipitation and its variations, topographic features, soil saturation and human activity (such as deforestation, poor urban planning, inadequate management of cultivated soils, and unplanned irrigation systems and reservoirs) are the main variables causing floods. In Brazil, excess rainfall is the primary variable, along with soil saturation and human activities. Paraguay and Uruguay have two main types of floods: river floods resulting from seasonal flooding of the great rivers Paraná, Paraguay and Pilcomayo, and urban pluvial floods (known in the north of Uruguay as enchorradas), provoked by localized heavy rains. These types of floods affect the regional economy and cause other hazards, such as the flooding of crops, the interruption of communication routes and the total or partial isolation of specific areas.

Droughts (Argentina, Brazil, Paraguay, Uruguay)

Meteorological droughts that cause a shortage of rainfall give rise to other types of droughts, such as agricultural (a shortage of water for crops), hydrological (a low availability of surface and groundwater) and socio-economic (where there are social and economic consequences).

Fires (Argentina, Brazil, Uruguay)

Each region presents a different fire problem depending on its phytogeographical, environmental, social and economic characteristics. In Brazil, there were more than 180,000 fire outbreaks in 2021–2022 in the Amazon area alone (Pantanal of Mato Grosso do Sul).
Most fire outbreaks are associated with human activity, such as deforestation and the maintenance of pastures by burning.

**Snowfall (Argentina)**

Snowstorms with powerful winds or intermittent snowfall can last several days. They can result in increased precipitation in snowy areas, causing extraordinary snowfall or snowfall accompanied by frost. The areas most affected by snow include the Andean region of Patagonia, the Central and Northern Cordillera and foothills, the Atacama Puna, and the extra-Andean Patagonian region, including the plateau and coastal zone, the foothills and mountainous areas of San Luis and Córdoba.

**Mass rallies / internal violence / social tension (Argentina)**

In Argentina, this type of hazard includes popular demonstrations, political-partisan marches and counter-marches, claims by communities affected by emergencies, job insecurity in informal settlements, and disputes over land tenure.

**Outbreaks or epidemics (Brazil, Paraguay)**

Outbreaks of dengue and other vector-borne diseases are common in Brazil. There were 110 per cent more cases of dengue fever before the end of 2022 than there were in 2021. This increase can be attributed to heavy rains, causing an increase in standing pools of water which are conducive to mosquito breeding. Vector-borne diseases also pose a severe public health problem in Paraguay. Mosquito-borne infections have health security implications, and, despite efforts to control them, several factors continue to contribute to their transmission. These include rapid and unplanned urbanization, poor sanitation, climatic and environmental conditions, and specific aspects of population behaviour.

These events directly affect household economies, people's livelihoods and health, and increase social inclusion and violence problems, including gender-based violence.

The four National Societies are committed to implementing integrated risk management programmes that promote the resilience of people and communities. They seek to strengthen their capacities for effective response through the deployment of early warning and action systems and the use of self-sustaining models of preparedness and risk reduction based on forecasting. They will also use community-based knowledge as an extension of the national disaster preparedness and response mechanism.

The National Societies will work to improve and develop their risk management and emergency response work by training their technical teams and volunteers. They will also strive to assist in every emergency in coordination with government entities and civil society organizations.

The National Societies will promote the use of analytical tools for community assessment and planning, for appropriate community responses and recovery from emergencies and disasters. They will maintain strategic agreements with key partners to work efficiently and effectively through coordinated action.

The IFRC network will continue to support the four National Societies in disaster response actions using the IFRC Disaster Response Emergency Fund (DREF), Emergency Appeals, DREF forecast-based funding, and the deployment of Preparedness for Effective Response (PER) actions.

The IFRC and the Argentine Red Cross will launch a Humanitarian Logistics Hub to expand humanitarian responses across the Southern Cone countries of Argentina, Bolivia, Brazil, Chile, Paraguay and Uruguay. It will be able to pre-position humanitarian aid to address the needs of up to 10,000 people affected by emergencies and disasters. Located at Ministro Pistarini International Airport in Buenos Aires, the hub will operate with support from Cargo Terminal Argentina, a logistics unit for international trade led by Aeropuertos Argentina 2000 (AA2000), the country's largest private airport operator.

**Health and wellbeing**

Non-communicable diseases such as cancer, diabetes, and cardiovascular and respiratory infections are common in Southern Cone countries. Government restrictions and the limited capacity of health services during the pandemic have led to people postponing treatment or neglecting these diseases. There are high levels of malnutrition, especially in the most vulnerable parts of Argentina, Brazil and Paraguay. In addition, psychoactive substance use is common, leading to situations of abuse that are often linked to gender issues or social inclusion. Mental health is a critical factor in the region, but it is not directly addressed in most of its countries. Many people suffer from symptoms of depression, anxiety or dependence on psychoactive substances. The Pan-American Health Organization (PAHO) and World Health Organization (WHO) assert
that South America has significant levels of disability resulting from mental illness. They report that suicide imposes a disproportionately high burden in Uruguay, Chile, and Argentina, and that depressive disorders mostly affect young working-age people.

The Southern Cone countries have addressed sexual and reproductive health, especially in Argentina and Uruguay, but the region still lacks social measures or policies in this area. Furthermore, a large part of the population still needs more access to information.

Older adults are a vulnerable but often ignored demographic.

Emergencies resulting from dengue, Zika or chikungunya are endemic in Argentina, Paraguay and Brazil. Communities with inadequate water, hygiene and sanitation infrastructures are the most affected by vector- and water-borne diseases, and this has a considerable economic impact on individuals, families and communities.

**Argentina**

Argentina has nearly 26,000 health facilities situated in the most densely populated central parts of the country. During the first half of 2020, during the COVID-19 pandemic, the number of health facilities increased significantly, although many were only temporary. Approximately 64 per cent of the population are covered by private or social health insurance, and 36 per cent are covered exclusively by public health services.

The leading causes of death are traffic accidents and non-communicable diseases such as cardiovascular disease, chronic respiratory illness, diabetes and cancer. These are often related to excessive consumption of tobacco and alcohol, unhealthy eating habits, sedentary lifestyles and environmental neglect.

Infectious diseases such as acute diarrhoea and respiratory diseases are common causes of death. Vaccine-preventable diseases such as measles are increasing, due to non-compliance with mandatory vaccination programmes.

There are fewer cases of Chagas disease in the country, while syphilis is increasing. Dengue is re-emerging and affects the country’s north, and hantavirus (a zoonotic pathology) mainly affects the south.

Mental illnesses and the problematic use of alcohol and other psychoactive substances are generating an increasing demand for outpatient care, hospitalization, rehabilitation and reintegration.

The Argentine Red Cross will continue to implement comprehensive health programmes that contribute to reducing unmet health needs and strengthening community resilience. In particular, it will address access to health care for people who are affected by emergencies and crises, and people who are isolated, marginalized or vulnerable to stigma and discrimination.

**Brazil**

Over the years, Brazil has suffered from a triple health burden: increasing lifestyle-related non-communicable diseases; the persistent problem of infectious diseases; and epidemics and other external causes of mortality.

In the last two years, the COVID-19 health emergency has brought about a major change in the causes of death. The pandemic worsened risk factors related to non-communicable diseases, such as physical inactivity, being overweight, the consumption of ultra-processed foods, and the harmful use of alcohol and other psychoactive substances. Many preventive health measures – such as vaccinations, prenatal and postnatal care, annual physical examinations and care for chronic diseases – were suspended. Both non-communicable diseases and maternal mortality increased. These indicators reflect the need for women, pregnant women, newborns, children, adolescents and the elderly to regain access to health services disrupted by the COVID-19 pandemic.

The pandemic has also had a significant impact on the population's mental health and psychosocial well-being, especially among health professionals, women, children, adolescents and people with pre-existing mental illnesses. Results from a national survey found a high prevalence of depression, anxiety, stress and psychological impact due to the isolation caused by the pandemic.

Non-communicable diseases and their aggravating factors have been responsible for Brazil's greatest morbidity and mortality burden in recent decades. This has caused a loss in quality of life, personal limitations, disabilities and premature deaths. The greatest impact has been on the most vulnerable populations. Cardiovascular diseases and neoplasms lead the mortality ranking, followed by diabetes and kidney diseases, respiratory infections, tuberculosis, suicides, assaults, and maternal and neonatal conditions.

There is some rejection of vaccinations, despite their availability in health services, and vaccination uptake has declined in recent years. Diseases considered eradicated or eliminated, such as mumps, have reappeared. There are difficulties in the vaccination process in and around large cities, in slums, border regions,
remote areas and isolated communities such as indigenous villages.

The Brazilian Red Cross will work to ensure that people enjoy safe and equitable access to health, water and sanitation services, and it will intensify community-based health, health care, water, sanitation and hygiene programmes. It aims to strengthen community linkages that lead to social well-being and improved mental health in communities.

**Paraguay**

Non-communicable diseases are one of Paraguay’s leading causes of premature and preventable deaths. These illnesses, affecting all age groups, include circulatory system diseases, cancer, diabetes mellitus, respiratory system diseases, cerebrovascular diseases, accidents and kidney diseases. Four risk factors are common to all of them: smoking, being overweight, having a sedentary lifestyle, and consuming excessive amounts of alcohol.

Vector-borne diseases remain a significant public health problem in Paraguay, despite efforts to eliminate them. The most prevalent diseases are dengue, Zika, chikungunya and other vector-borne diseases endemic in this country, such as Chagas disease and leishmaniasis.

According to the World Bank, the impact of the pandemic on the population in terms of mental health proved worrying, ranking fourth in terms of mental health vulnerability. People experienced sleeping difficulties, anxiety, nervousness, aggressive attitudes or feelings of loneliness. These mental health problems are greater in urban areas and affect women to a greater extent, although unemployed men also remain a concern.

Some people in Paraguay, especially those living in vulnerable peri-urban and rural areas, drink well water, surface water and, in some cases, untreated rainwater. The poor-quality sewage system is a serious problem in Asunción and its metropolitan area. It is the only capital of a South American country that does not have a sewage treatment plant and discharges some 300,000 cubic meters of water from domestic sewage into the Paraguay River every day.

The Paraguayan Red Cross will promote health and healthy lifestyles by raising awareness of non-communicable diseases considered among the main threats to health and development worldwide. It will also continue working on psychosocial support in communities and emergencies to restore cohesion and social infrastructures. It will do this by involving the community as much as possible in response planning, implementation, monitoring and evaluation. The process will motivate community members to participate in activities and take responsibility for their responses to humanitarian challenges.

The National Society will continue its work in community health and first aid. It will provide training to communities through simple and dynamic tools to facilitate and implement health plans and projects that benefit communities according to their priorities.

The Reina Sofia Hospital will continue to offer quality maternal and child health services and care for pregnant women and newborns. The National Society will ensure the continuous improvement of the hospital’s equipment through the Ministry of Health and follow the Law on Auxiliaries of the Public Powers of the State. It will continue to work on joint actions with the national headquarters to link the hospital with campaigns and community education projects on sexual and reproductive health, epidemics, addictions, and the prevention of cancer in women (among others) in coordination with the Health Department of the National Society.

The National Society will continue to provide pre-hospital care and coverage through the provision of emergency services. It will develop and fund a comprehensive communication plan to record the impact of its health work.

**Uruguay**

Chronic non-communicable diseases include cardiovascular diseases, cancer, diabetes and chronic respiratory diseases. They are responsible for 60 per cent of all deaths and 62 per cent of early mortality (deaths between 30 and 69 years).

With regard to external causes of morbidity and mortality, the country has a high rate of suicide and there are many road traffic accidents. Suicide rates in Uruguay are the highest in the Americas, at 21.4 people per 10,000 and, according to WHO, Uruguay ranks 22 globally. Older adults and young people aged 10–24 are the most affected, with four times as many men committing suicide than women.

The Uruguayan Red Cross will work to ensure that the population has safe and equitable access to health, water and sanitation services. It will intensify its community health, health care, water, sanitation and hygiene programmes. It will seek to strengthen community linkages that lead to social well-being and improved community mental health.
Migration and displacement

Most countries in the region have recently invested in improving migration management, laying the groundwork for better migration data. The main destinations of migrants, mainly from the Andean countries and Paraguay, are Argentina, Chile and Brazil. Asian migration from China, Japan and Korea and countries such as Bangladesh, India, Pakistan, Nepal and Syria increased 37.8 per cent between 2010 and 2020. Most asylum seekers in Brazil come from Africa, particularly Senegal, Nigeria, Ghana and the Democratic Republic of Congo (DRC). In addition, there has been a notable increase in residence permits, humanitarian visas and special amnesties issued through regular channels, most of them in Brazil, Chile, Argentina and Uruguay.

The complex context in Venezuela has led to the most significant movement of refugees and migrants in Latin America. The socio-economic situation of the refugees and migrants and the host communities has become dire, as national and local capacities have been affected by the influx of migrants and the COVID-19 pandemic.

Government measures to respond to the pandemic, such as closing borders, have aggravated the situation, leaving people unable to meet their basic needs or access essential services. In this context, the issues of health, food, water, sanitation and hygiene, housing, protection and social inclusion are priorities. The COVID-19 pandemic also has led to a rise in gender-based violence, increased mental health problems, and growing levels of malnutrition and destitution. Xenophobia and stigmatization have soared, in line with fears of catching the virus, and this has increased insecurity.

Argentina

A significant population shift has resulted from the growing influx of foreigners. Although Argentina has historically been a migrant-receiving nation, in recent years, the number of migrants has increased significantly. According to estimates by the National Direction of Migration and the Ministry of Foreign Affairs and Worship, an estimated 1.8 million migrants are living in the country. Most come from countries such as Bolivia, Paraguay and Venezuela.

Since 2017, Argentina, Paraguay and Uruguay have experienced a gradual increase in the number of refugees and migrants arriving from Venezuela. The four countries of the Southern Cone sub-region have maintained open-door policies towards the reception and permanent settlement of refugees and migrants from Venezuela in their territories. This is particularly the case with Argentina, which has the highest concentration of this migratory flow (85 per cent).

Venezuelans represented six per cent of people migrating to Argentina in 2016, and by 2018, they were the largest migratory group in terms of settlements. According to the National Directorate of Migration, this trend continued during 2019 and 2020, despite a slight decrease in influx. Permanent settlements of Venezuelans have accounted for almost 35 per cent of the total. Between 2018 and 2020, 36.1 per cent of migration in Argentina (between temporary and permanent settlements) originated from Caribbean countries. According to Argentine government figures, 205,000 refugees and migrants from Venezuela live in the country.

Since the start of the COVID-19 pandemic, governments in the Southern Cone sub-region have implemented mitigation and response measures, such as border closures and mandatory isolation and quarantine policies. These worsened the living conditions of refugees and migrants, reduced economic activities drastically and, in most cases, completely suspended them. For many refugees and migrants, especially those working in the informal sector, this had an adverse effect on their ability to pay for basic needs and services.

Subsequently, the reopening of borders had an impact on the reactivation of migratory dynamics. It brought new challenges for Venezuelan migrants and refugees, as the borders were initially opened for tourism and border transit, ignoring those seeking refuge. Other challenges are the implementation of health requirements and the suspension of Provision 520/2019. This had previously allowed children under the age of nine to enter the country with only a birth certificate (in the absence of other travel documentation) and people with documents that had expired up to two years before.

According to the R4V platform, Argentina showed a slight month-on-month increase in regular arrivals of Venezuelan nationals between April, May and June 2022, reaching over 26,000 arrivals and 26,0 departures in this period. Land entries increased at the Tancredo Neves border in the province of Misiones, on the border with Brazil, surpassed only by air entries through Buenos Aires. Refugees and migrants currently arriving in the Argentine territory do so with more limited resources and fragile support networks. These factors accentuate their vulnerability and compromise their safe transit to their cities of destination, affecting their subsequent stay and integration in the host country. It is important to consider these issues when addressing border assistance and identifying and responding to protection needs.
needs – in order to avoid human rights violations linked to barriers to accessing basic services.

The Argentine Red Cross will work to reduce the specific risks, discrimination and xenophobia associated with population movements of migrants, internally displaced persons, asylum seekers and returnees, whether in their place of origin, transit or destination. It will do this by expanding comprehensive services and programmes and promoting the rights and dignity of individuals.

**Brazil**

Brazil continues to receive a large migrant or refugee population. Migrants from Venezuela have increased in recent years, both with residence permits and refugee recognition. Access to documentation remains a challenge, as the number of people needing regularization exceeds the state’s processing capacity. The analysis is based on 800 structured telephone interviews conducted with Venezuelans nationwide, with a sample stratified by the Government. The results show that refugees and migrants from Venezuela continue to face significant obstacles in exercising their fundamental rights and accessing public services in Brazil.

Many migrant children and adolescents do not attend school. Nor can they socialize with other children of similar age. They are more vulnerable to child labour, economic exploitation, early pregnancy and gender-based violence. Many migrants have difficulty accessing targeted health care, mainly because of the cost of obtaining certain medications or treatments.

Due to low-income levels and high commodity prices, migrants find it difficult to meet their basic needs, especially food and rent. Many are homeless or live in informal settlements without adequate water, sanitation and hygiene services.

Although migrants have access to work permits and enjoy the same labour rights as any worker in Brazil, they face various socio-economic challenges. Many are unemployed and less likely to benefit from social assistance programmes. Many, too, receive less than the minimum wage. They have difficulty integrating due to the language barrier, and many are victims of xenophobia and discrimination. These challenges mainly affect women, youth, the elderly, indigenous people and LGBTQI+ communities.

**Paraguay**

In line with regional trends, Paraguay has recently reshaped its migration policy. The country has taken numerous measures to address international immigration, even though it has historically been characterized as a country of origin. In Paraguay, most migrants settle in Asunción and Alto Paraná, and more than 80 per cent enter the country by land through border crossings, by bus or on foot. Most manage to enter the territory regularly, although family members are often left behind during the migratory movement. Numerous children cannot enroll in school due to a lack of documents or administrative complications.

The Paraguayan Red Cross will work to prevent and reduce the risks of discrimination and xenophobia associated with population movements.

**Uruguay**

Uruguay receives the second-largest number of migrants in the Southern Cone. It has been experiencing an influx of Venezuelan migrants for some years now. Since 2016, when the exodus of Venezuelan migration began, Uruguay has been a pole of attraction, experiencing considerable growth in the entry of refugees and migrants. Uruguay has had comprehensive human mobility policies in place for more than a decade based on a universalist human rights perspective.

At the macroeconomic level, Uruguay has high unemployment rates or labour informality among migrants. Approximately one in four migrants in Uruguay is active in the labour market. One of their main concerns is access to sufficient food: more than 20 per cent of the migrant population do not have the necessary income to purchase enough food. The food assistance mechanisms deployed by the state are insufficient or fail to reach the Venezuelan migrant population, especially new arrivals.

In early 2021, there was a 22 per cent increase in asylum applications. Despite provisions to facilitate entry and asylum applications during 2020 and 2021, there needs to be more awareness of the facilities for accessing international protection, especially at the border.

Many migrants and refugees have chronic medical conditions (asthma, hypertension, diabetes and depression, among the most commonly cited). Nearly 20 per cent of migrants and refugees are aged 55 years or older and are therefore vulnerable to COVID-19. Many in this group require daily medication.

More than a fifth of migrants or refugees have children not in school, primarily because newly arrived families lack the necessary documentation.

The Uruguayan Red Cross will work to assist migrants and ensure their safety. It will provide support at all
stages along the main migratory routes. It will promote with particular emphasis the protection of vulnerable groups, women, children, people living with disabilities and asylum seekers. The National Society seeks to protect the rights of migrants in their search for a better and safer life by broadening its scope and adapting its actions to respond comprehensively to their needs for assistance and protection. It will also promote the integration of migrants into the host community.

Through its National Migration Programme, the Uruguayan Red Cross aims to plan and expand the efforts made through its branches to provide a better, broader response to the challenges posed by migration. This programme seeks to create a unified response that will enhance its capacities and allow for the strengthening of strategic alliances within and outside the Movement. The Uruguayan Red Cross is deployed throughout the national territory, providing humanitarian assistance to people of different nationalities, especially in border areas at identified points of entry into the country.

The National Societies of Argentina, Brazil and Uruguay are part of the IFRC three-year Global Route-Based Migration Programme. This aims to improve the safety and dignity of people on the move along deadly and dangerous land and sea-based migration routes across Africa, the Americas, Europe, the Middle East and North Africa. The programme aims to support 4.7 million people annually, including those in host communities, through three operational pillars: (1) improving access to assistance and protection, including through humanitarian service points; (2) strengthening National Society capacities; and (3) local to global humanitarian diplomacy.

Values, power and inclusion

The Southern Cone countries and Brazil have high rates of crime and violence against populations in vulnerable situations. In all of these countries, violence tends to be under-reported. In this context, shame, stigma and fear impede the filing of formal complaints and the development of public policies capable of providing effective responses. Each country has legislation concerning the rights and comprehensive protection of women and children. Government and civil society efforts have made considerable progress in recent years. Among these advances, governments have concentrated on placing trained professionals specializing in different forms of care and handling complaints into police units. However, much remains to be done to protect and guarantee the rights of populations in situations of vulnerability. In partnership with civil society, public security services should ensure that victims have access, in an integrated and intersectoral manner, to a broader range of services, such as legal assistance, medical care and psychosocial support, shelter and temporary support.

Argentina

The COVID-19 pandemic has slowed and delayed progress towards gender equality, as it increased some structural differences between men and women that remain largely invisible. For example, women work more in health and education but, despite performing the same tasks, they receive lower salaries than men. There is still a lack of women in decision-making positions. Women also perform most of domestic and care work while holding down full-time jobs, and this places an enormous burden on them. Before the crisis, women were 44 per cent more likely to lose their jobs than men, and only half of the working-age women in the region had access to formal employment. Now, as jobs begin to return, unemployment persists more among women, and 21 per cent of those employed before the pandemic are still out of work. Moreover, 12 per cent of the female population in the region are engaged in paid domestic work – a sector that is characterized by informality and precariousness. With the added impossibility of working remotely, this exposes women to extreme working conditions, further damaging their health.

The Argentine Red Cross will strive to be an organization with a culture of diversity and peace that actively uses participatory consultation. This includes efforts to protect and respect the dignity of marginalized groups and those affected by violence. At the same time, it will raise awareness that violence impacts all humanitarian activities.

Brazil

Compared with 2019, the effects of the pandemic hit the least educated and most vulnerable groups hardest, especially women, and black and mixed-race populations. Inequality reflects both the greater participation of men in the labour force and women’s difficulties in finding and keeping jobs. Gender-related inequality is more significant when compared with educational inequalities based on race or skin colour, and it primarily affects women with little or no basic education. This reduces women’s autonomy and independence in decision-making and may even increase vulnerability to violence.
The pandemic has had an impact on guaranteed access to school for all children and adolescents between the ages of four and 17. Other internal and external factors in the education system have also intensified inequalities. This has created different experiences between students of different socio-economic backgrounds. Students in the public school network, those with lower incomes, who are black or of mixed race, who are living in rural areas and the north and northeast regions, experience the worst educational conditions.

External causes of death include road traffic injuries, assaults and suicides. Analysis by age group indicates that young and adult women aged 15–49 have a higher risk of dying from interpersonal violence than other age groups.

The Brazilian Red Cross will work to reduce the specific risks, discrimination and xenophobia associated with population movements (migrants, internally displaced persons, asylum seekers and returnees), whether at their place of origin, transit or destination. It will expand comprehensive services and programmes, and promote people’s rights and dignity.

**Paraguay**

The labor market gender gap that existed in Paraguay before the outbreak of COVID-19 has been exacerbated by the pandemic. According to the Paraguay High Frequency Survey, a World Bank initiative, more than half of women reported losing their jobs in May 2020, at the beginning of the pandemic, compared with 35 per cent of men. The employment of men has also recovered more quickly. Even before the pandemic, unpaid work was already affecting the ability of young Paraguayan women to enter the labor market. It limited their ability to spend time earning an income and prevented some women from leaving abusive relationships because of the implicit economic dependence on their abusers. In addition, women have a higher burden of domestic and unpaid work than men.

Women in rural areas, who are particularly disadvantaged in several ways, such as the amount of unpaid work they do, will continue to be adversely affected by the pandemic. These women are vulnerable because of their economic dependence, low access to education and health, reduced economic and credit opportunities, and low rates of ownership of productive assets.

Violence against women, a serious problem in Paraguay, has worsened during the pandemic. For example, the emergency service of the Ministry of Women registered 50 per cent more calls in March 2020 than in same month of the previous year.

The Paraguayan Red Cross will continue to strengthen social inclusion by promoting equal opportunities and access to essential services to improve the quality of life of all people, especially the most vulnerable. Social inclusion is considered in all interventions of the National Society and is developed within community programmes, and protection and support services for children and adolescents.

The National Society will continue to work on the Maternal Home programme for pregnant adolescents. This guarantees the continuity of academic studies through an interdisciplinary work group of social workers, psychologists and gynecologists. The Reina Sofia Hospital, which depends on the Paraguayan Red Cross, will carry out all medical treatment.

**Uruguay**

Refugees, migrants and affected host communities in Uruguay are in a worse situation than in previous years. This comes as a result of prolonged border closures, due to measures to contain the spread of COVID-19, and the detrimental impact the pandemic has had on the economy. Entry restrictions imposed by countries in the sub-region have led to difficulties in family reunifications and impeded the safe entry of unaccompanied or separated children and adolescents. In many cases, prolonged border closures and health requirements (such as vaccinations and often costly antigen testing or quarantines) meant migration was unaffordable for migrants and refugees, who opted instead for alternative routes or irregular entry.

Since the pandemic, there has been an increased risk of human smuggling and trafficking. Some migrants and refugees seek irregular access to Uruguay, while those already in the country risk being exploited in the informal labour market when their incomes reduce or disappear.

The National Society will work to develop programmes that ensure the protection and promotion of humanitarian values and principles that foster positive change for communities. Efforts will focus on initiatives that help promote the Uruguayan Red Cross's core principles. It plans to develop initiatives to highlight inclusion, diversity of opportunity, representation and decision-making processes within the National Society and the network of collaborators.
Enabling local actors

The National Societies are committed to pursuing their institutional strengthening. Some have already carried out the self-assessment part of the Organizational Capacity Assessment and Certification (OCAC) process in 2015 (Argentina), 2016 (Paraguay) and 2017 (Uruguay). The self-assessment part of the OCAC process intends to capture the strengths and weaknesses of National Societies concerning a wide range of organizational capacities.

The IFRC network is committed to supporting the National Societies’ development in accordance with their identified priorities.

Engaged
Argentina
The Argentine Red Cross will work to bridge the digital divide by using, at all levels, new technologies and innovations to collect and validate data to inform decision-making internally and with strategic partners; improving the quality of the services it provides; ensuring accountability to stakeholders; and ensuring that technologies are in line with national legislation and data protection policies. The National Society will continue to strengthen communication and media processes and tools at all levels and, with the support of the IFRC, raise the profile of the Southern Cone Humanitarian Centre, and the work of the Humanitarian Observatory on climate change.

Brazil
The Brazilian Red Cross considers it essential to incorporate new technologies into its activities, to achieve higher levels of performance when executing its tasks. It will conduct thorough research into new systems that will maximize the results of its activities and ensure full operational performance and effective decision-making. It will analyze each mission and activity and create a bank of lessons learned. This should lead to the improvement of procedures and the creation of new ones, forming the basis for administrative and operational evolution.

Uruguay
The Uruguayan Red Cross will work to bridge the digital divide by using, at all levels, new technologies and innovations to collect and validate data to inform decision-making, internally and with its strategic partners. This will improve the quality of the services it provides, ensuring accountability to stakeholders, keeping it in line with national legislation and data protection policies. IFRC support includes capacity building in disaster communication, media management and digital content production.

Paraguay
The Paraguayan Red Cross is working to improve information security in order to maintain transparency and safeguard information. At the same time, it continues its efforts to develop digital mechanisms for the management of volunteers and the systematization of the activities conducted by volunteers in the Branch Network. The IFRC is supporting the Ns to access systems for the participation in digital events through hardware upgrades.

Accountable

Argentina, Brazil and Uruguay
The National Societies in Argentina, Brazil and Uruguay will continue to provide a clear and unified message which is aligned with the Movement’s messaging and in accordance with the Fundamental Principles. This will establish them as reliable sources of information for communities and the media. They will focus on strengthening their communication processes and tools at all levels. They will also continue to serve as agents for change by promoting good practices in communities and listening to their concerns. They will continue to work on developing community communication mechanisms, to provide information with the potential to save lives in an efficient and timely manner, prevent reputational risk situations and increase volunteer safety in the field.

Argentina
The Argentine Red Cross proposes to implement permanent National Society development processes, at local and national level, to strengthen its leadership, capacities, systems and organizational structures. It will contribute to the development of strategies that allow National Societies to decide their priorities and fulfil their missions in a sustainable manner. It will champion the leadership role of women by promoting equality at
all levels within and outside the Movement, by considering gender and inclusion in programmes and operations and by celebrating diversity and respect for all people. The National Society will invest in and implement new forms of youth development and volunteerism that are inclusive, self-managed and evidence based. These activities will use available technology, employ decentralized decision-making processes, reflect the diversity of the country, and protect, promote, recognize and inspire volunteerism.

Paraguay

The Paraguayan Red Cross commits to becoming a strong and effective local actor, ensuring the technical and operational growth of volunteering and youth. It will develop programmes and projects that maintain accountability and integrity, ensuring trust and accountability, financial sustainability, and membership and Movement coordination. The organizational development objective of the National Society is to strengthen its corporate and institutional management capacities and develop the competencies of its collaborators and branches to achieve its mission of becoming the model for humanitarian aid. Its priority areas of action are planning, human capital, branch development, resource mobilization, accountability and communication.

The Paraguayan Red Cross has a national Youth Policy – a framework document that expresses the importance of youth and their participation in youth directorates in the branches and sub-branches. These guidelines promote youth as protagonists and recognize the importance of the involvement of young volunteers in planning, action, evaluation and decision-making. Young people play a crucial role in implementing the programmes of the National Society, contributing to the humanitarian and development field as innovative agents of change. Through their directorates, youth volunteers are organized at local, regional and national level. Young people themselves, branch and sub-branch directors, and institutional authorities understand and implement the Youth Strategy, the Youth Policy and the Youth Action Lines of the National Society. Youth volunteers are trained leaders in the youth agenda, develop training activities for their peers and meet the needs of young people in their communities.

THE IFRC NETWORK

The IFRC

The IFRC operates through its Southern Cone and Brazil Cluster Delegation in Buenos Aires. IFRC support to the four National Societies centres on strategic and operational coordination, National Society development and humanitarian diplomacy. It also supports accountability as a cross-cutting theme.

In recent years, the IFRC has supported the National Societies through a number of DREFs and Emergency Appeal operations in relation to floods, droughts, wildfires and disease outbreaks. Since the beginning of the pandemic, the IFRC, through its global appeal, has supported the National Societies in their COVID-19 responses.

The IFRC also provides technical support in a wide range of areas, in accordance with the National Societies’ needs, either from its delegation in Buenos Aires or from its Americas Regional Office in Panama.

IFRC membership coordination

The IFRC’s coordination activities involve working with the National Societies to assess the humanitarian context, situations and needs; agreeing on common priorities; co-developing common strategies to address issues such as obtaining greater humanitarian access, acceptance and space; mobilizing funding and other resources; clarifying consistent public messaging; and monitoring progress. This also means ensuring that strategies and programmes in support of people in need incorporate clarity of humanitarian action, development assistance, and reinforcement of the National Societies’ auxiliary roles.

A number of participating National Societies provide support in the region:

The **Australian Red Cross** conducts joint assessments in Argentina.

The **Costa Rican Red Cross** provides peer support and first aid courses in Uruguay.

The **Ecuadorian Red Cross** has training agreements with the Brazilian Red Cross.

The **German Red Cross** supports the Argentine Red Cross with water, sanitation and hygiene in emergencies, and forecast-based financing.
The Italian Red Cross works on youth climate change programmes, and supports the development of resource mobilization in Uruguay.

The Mexican Red Cross supports safer access activities in Brazil.

The Spanish Red Cross works on projects in Argentina.

The Swiss Red Cross has a presence in Paraguay.

The Turkish Red Crescent Society supports a humanitarian programme in Salta, Argentina.

The Ukrainian Red Cross Society operates a school of nursing with the Argentine Red Cross.

### Movement coordination

The IFRC maintains a close working relationship with the International Committee of the Red Cross (ICRC), forged through shared work and a common approach based on integrity. Monthly coordination meetings take place, and there are tripartite agreements between the respective National Societies of the Southern Cone countries and Brazil, the IFRC and the ICRC. Agreements are revised to match the realities of the contexts and the National Societies when needed. This is carried out in line with the Strengthening Movement Coordination and Cooperation (SMCC) principles and the newly adopted Seville Agreement 2.0.

The ICRC regional delegation is based in Brasilia, with an office in Buenos Aires. With 117 staff, including 19 staff members in communication centres in Argentina, the ICRC works mainly in protection, international humanitarian law dissemination, violence prevention, restoring family links, first aid, migration and Movement cooperation.

### Coordination with other actors

In line with their auxiliary roles, the four National Societies work closely with the national authorities in their respective countries, particularly in disaster management and response. The IFRC has productive and encouraging relationships with government-related advocacy groups focused on humanitarian objectives that are part of the Southern Common Market (MERCOSUR). These partnerships are especially productive in international humanitarian law, civil-military coordination and disaster law.

The IFRC has a long and positive history of cooperation with UN partners in the region. The IFRC head of delegation is one of the permanent secretaries of the International Humanitarian Network for Argentina (Red Humanitaria Internacional de Argentina – RHIA), which is equivalent to a humanitarian country team and led by the UN coordinator in Argentina. The IFRC has facilitated programmatic funding and coordination with the International Organization for Migration, UNHCR and UNICEF, for the Argentine Red Cross.

In the corporate sector, the National Societies of Argentina and Brazil benefitted from an IFRC partnership with Airbnb in 2021 and 2022. In this arrangement, Airbnb granted National Societies access to up to US$30,000 in accommodation credit, to strengthen their responses to emergencies and increase resilience in the wake of humanitarian crises.

### ADDITIONAL INFORMATION

- IFRC Global Plan and Country Plans
- Subscribe for updates
- Donor response on IFRC website
- Live Disaster Response Emergency Fund (DREF) data
- Operational information: IFRC GO platform
- National Society data: IFRC Federation-wide Databank and Reporting System
The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world's largest humanitarian network, with 192 National Red Cross and Red Crescent Societies and around 14 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.

Contact Information

Daniel Bolaños
Head of Delegation
IFRC Country Cluster Delegation for South Cone, based in Argentina
T +54 911 3396 2819
daniel.bolanos@ifrc.org

Mei Lin Leon
Head of Strategic Engagement & Partnerships, a.i.
IFRC Regional Office for Americas, Panama
T +507 6676 1582
meilin.leon@ifrc.org

Argentina Red Cross
W cruzroja.org.ar
Brazilian Red Cross
W cruzvermelha.org.br
Paraguayan Red Cross
W cruzroja.org.py
Uruguayan Red Cross
W cruzroja.org.uy/