Brazilian Red Cross volunteers are providing rescue and evacuation services to the people affected by the floods in Rio Grande do Sul. (Source: BRC)

<table>
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<th>Appeal №:</th>
<th>To be assisted:</th>
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<td>MDRBR011</td>
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**IFRC Secretariat Funding requirement:** CHF 8 million


**April 29**: The Brazilian state of Rio Grande do Sul experiences rainfall three times higher than the average for this time of year, according to statistics from the National Institute of Meteorology (Inmet).

**May 4**: Conditions worsen resulting in accumulations of over 700 millimetres.

**May 6**: The government submits a Legislative Decree Project which formally acknowledges the declaration of a state of public calamity.

**May 8**: The death toll reaches 100 people. The Navy sends four ships and two mobile water treatment stations.

**May 9**: The government declares a state of calamity, Rio Grande Sul can now request federal support. With this declaration, the government accepts international aid, channelling it through the Brazilian Cooperation Agency.

**May 10**: A funding ask for CHF 8 million is approved together with a CHF 1 million Disaster Response Emergency Fund (DREF) loan to support activities.

**May 10**: IFRC Surge Capacity (Rapid Response Personnel) is initially deployed to the field in the roles of Operations Manager, Deputy Operations Manager, and Supply Chain Coordinator.

**May 11**: The IFRC launches an Emergency Appeal with a Secretariat funding ask of CHF 8M for 25,000 people for 12 months.

**May 25**: Large areas in the Metropolitan region remain flooded, constant rains do not allow waters to recede, limiting logistics, with the main roads around Porto Alegre closed and flights not operating normally.
DESCRIPTION OF THE EVENT

During the first half of May 2024, the state of Rio Grande do Sul in Brazil suffered heavy rains with over 1,000 millimetres of rainfall recorded during the period. As a result, the rains affected 469 of Rio Grande do Sul’s (RS) 496 municipalities, affecting 2,345,400 people (20.7% of the state’s population). According to the Civil Defence bulletin of 25 May 2024, there were 165 fatalities, 64 missing persons and 806 injured. The Civil Defence estimates that around 55,791 people are in shelters and 581,638 are displaced.

The government declared a state of calamity, a status recognised by the federal government. As a result, RS state can now request federal resources for civil defence actions, such as humanitarian assistance, infrastructure rebuilding and the restoration of essential services.

Civil Defence placed most of the state’s river basins at risk of water rising above the flood level. Meteorologists claim that the storms that occur in RS are an outcome of at least three phenomena that occur in the region, aggravated by climate change. The tragedy in the state is associated with intense wind currents. There is a corridor of humidity coming from the Amazon rainforest, increasing the strength of the rain, and atmospheric blockage, due to heat waves.

After one month of ongoing above-average rainfall, dam failure remains a risk. The dam at Salto, located in São Francisco de Paula, is currently at the highest risk of breaking. Additionally, six other dams have been placed on “alert” status, indicating a high probability of failure if the weather conditions persist. Furthermore, another six dams are on “attention” status, suggesting a moderate risk of breach due to the continuous heavy rainfall.

Water levels in Porto Alegre and surrounding municipalities start to decrease and there is a window of opportunity to distribute kits to the most vulnerable population. Affected people start to return to their houses and urgently need support in reconstruction and cleaning.

Severity of humanitarian conditions

1. Damage to housing and assets, inaccessibility of areas

The floods have caused significant damage across the state, leading to the complete or partial destruction of many houses and the loss of numerous personal belongings such as clothes, furniture, and important documents. According to a group of researchers at the Federal University of Rio Grande do Sul, 301,738 houses were affected by the floods, while the Ministry of Cities notes that 7,542 houses were partially or completely destroyed in the valleys of Sinos, Caí e Paranhana (only part of Rio Grande do Sul state).

The situation has also heavily impacted infrastructure, particularly affecting Salgado Filho International Airport, the state’s largest airport located in Porto Alegre, which is now closed due to flooding.

The transportation network has been severely disrupted, with a total of 136 traffic interruptions: 85 blockages on state highways and 51 on federal highways. Notably, there are 18 interruptions on BR-116, affecting the mountainous regions, the metropolitan area near the capital city, and the Vale
dos Sinos region. To ensure safety and efficiency in delivering aid and managing operations, logistics planning must be updated daily with continuous monitoring of highway conditions. This approach is crucial to mitigate risks for operating teams and to ensure that donations safely reach the affected areas.

2. Lack of access to safe drinking water

The floods have created urgent needs for clean water and sanitation. Damaged water infrastructure has disrupted supply, increasing the risk of waterborne diseases. Residents must boil water before use, but emergency bottled water supplies are low.

In Rio Grande do Sul, the floods have affected the availability of drinking water. Damaged roads hinder attempts to truck in water, further complicating relief efforts.

Hygiene kits and temporary sanitation facilities are in high demand but insufficient. Residents need to avoid contaminated floodwaters and practice hygiene measures. Immediate clean water and sanitation solutions are critical, alongside long-term infrastructure restoration. Authorities and aid organisations are striving to meet these urgent needs.

3. Impact on physical and mental well-being

The recent floods have created urgent mental and physical health needs within the affected communities. The loss of 163 lives, and the utter devastation and trauma experienced by those surviving, have caused deep distress, requiring grief counselling and emotional support. The displacement of 581,633 individuals, including 72,561 in temporary shelters, has led to significant psychological stress, exacerbating feelings of insecurity and instability.

Flood victims are experiencing heightened levels of sadness, depression, anxiety, and increased risks of suicide and substance abuse. Those with pre-existing mental health conditions may see their symptoms worsen, necessitating comprehensive mental health care. The trauma of the disaster can lead to long-term issues such as PTSD, while the collective stress on households and communities can increase domestic violence and interpersonal conflicts.

Physically, there is a critical need for disease prevention and control due to increased risks of waterborne diseases. Access to clean water, sanitation, and medical care is essential. Injured individuals need immediate medical attention, and continuity of care for chronic conditions must be maintained. Nutrition and food security are vital to prevent malnutrition, especially for children and the elderly. Pregnant women, new mothers, and infants require specific medical support.

Overall, addressing these extensive mental and physical health needs requires immediate, comprehensive efforts to provide emotional support, prevent disease, treat injuries, and ensure access to essential health services, food, and care for chronic conditions.

4. Risks and vulnerabilities

The meteorological institutions INMET and CEPTEC predict above-average rainfall and the potential for dam breaks, which pose imminent threats of flooding, landslides, and disrupted access.

Persons in vulnerable situations, including the elderly, children, migrants, women facing gender-based violence, and notably, the indigenous population, have been profoundly affected. Despite efforts such as the opening of numerous shelters, reports of sexual abuse and shortages underscore the urgent need for enhanced protective measures.
CAPACITIES AND RESPONSE

1. National Society response capacity

1.1 National Society capacity and ongoing response

Since 24 April, Cruz Vermelha Brasiliense (CVB), or the Brazilian Red Cross (BRC), has been actively monitoring rainfall alerts in the RS region and their impacts. Various regional and municipal branches have swiftly initiated response activities, including collecting and distributing essential items such as clothes, blankets, and hygiene products to the affected areas. At the same time, volunteers from across the country have joined efforts to support flooded areas in Rio Grande do Sul province.

The BRC officially requested support from governmental entities such as the Chief of Staff of the Presidency and the Ministry of Defence to transport donations and equipment to the affected population and the BRC's national response teams (ERN). Additionally, private partners such as DHL and various airlines have been activated for assistance. The National Society's donation channels have been mobilised, and a Crisis National Office has been established to coordinate humanitarian actions with stakeholders and partners.

There are two operational centres of the BRC to support the large geographic coverage of the affected zones. The main centre is in the Serra region, which was chosen due to its minimal impact from floods and landslides, accessibility by land to all regions of the state, and the presence of a regional airport, facilitating the rapid and secure transport of donations and teams. Moreover, the city is centrally located in Rio Grande do Sul province, with limited response partners addressing the immense needs of the affected population. The other operational centre is in the Metropolitan area, where the damage is concentrated and the coordination of activities with the government and other agencies is taking place.

The Brazilian Red Cross is undertaking the following activities:

**Relief Distributions:** Several BRC branches are collecting and sending donations to Rio Grande do Sul, with multiple trucks dispatched and more in transit. Volunteers are sorting and preparing materials for distribution. Approximately seven tons are arriving daily and being processed for warehouse dispatch.

**Needs Assessment:** Rapid assessments are ongoing in 12 municipalities in the Serra region, including rescues, transportation of essential items, and road clearance using heavy machinery.

**Volunteering:** Over 120 volunteers are managed daily, with over 600 new volunteers recruited.

**First Aid:** All BRC teams are certified in first aid, having assisted 103 individuals to date.

**Health and Psychosocial Support:** Provision of psychological first aid to 127 individuals, and operation of the BRC mobile clinic to support healthcare needs.

**Logistics:** Management of the BRC logistics centre in the Serra and Metropolitan regions, handling daily movements of 130 tons of donations and managing donated medicines.

**International Cooperation:** Coordination with international entities, strategic planning, and joint response efforts with the IFRC and ICRC. Attending WASH, Health and Shelter coordination groups in the Metropolitan region.

**Environment and Sustainability:** Needs assessments conducted in indigenous communities, coordination with federal authorities, and providing basic relief items.
1.2 Capacity and response at the national level

The federal government’s response to Rio Grande do Sul’s worst socio-environmental disaster mobilised over 14,500 individuals. Collaborative efforts among federal, state, and municipal authorities facilitated the rescue of more than 27,500 people through air, land, and river operations. The Brazilian Armed Forces are actively involved, providing logistical and engineering support to restore local infrastructure and transport donations. The Ministry of Health has deployed the SUS National Force and is establishing three field hospitals in the state. Significant social mobilisation is evident, with leading humanitarian agencies initiating fundraising campaigns and sending resources and personnel to the affected areas. Furthermore, various fundraising initiatives have been launched by humanitarian agencies, crowdfunding, and celebrities nationwide.

The federal government’s workforce includes 9,160 army members, 237 navy personnel, and 960 Brazilian Air Force members, alongside 3,243 members from partner agencies. The Ministry of Justice has mobilised 674 police officers and 60 firefighters from the Federal Police, Federal Highway Police, and National Force, supported by essential equipment and resources.

The support of the government in response to the floods is structured as follows:

1. Agência Brasileira de Cooperação (ABC): In the context of the floods in Rio Grande do Sul, the ABC is pivotal in centralising international support. This includes coordinating aid from foreign governments and humanitarian organisations. The agency would ensure that resources such as financial assistance, relief supplies, and technical expertise from international partners are effectively integrated into national response efforts.

2. Comando Operativo Conjunto (COC) in Porto Alegre: The COC in Porto Alegre is playing a crucial role during the floods by coordinating emergency response activities at the local and state levels. With decision-makers from both municipal and state governments, as well as the highest military authority, the COC ensures swift and coordinated actions to mitigate the impact of the floods. This includes deploying rescue teams, managing evacuation processes, and distributing relief supplies to affected communities.

3. Situation Room in Casa Civil: At the federal level, the Situation Room in Casa Civil oversees the overall response strategy for the floods. Daily meetings facilitate real-time decision-making and allow for continuous assessments of the situation. This centralised coordination helps align federal resources and policies with on-the-ground efforts in Rio Grande do Sul, ensuring that the response is coherent and comprehensive.

Relating these levels of governmental coordination to the floods in Rio Grande do Sul, the following outlines the response at the state and municipal levels: Civil Defence is responsible for executing the operational aspects of the response. They handle immediate needs such as evacuations, temporary shelters, and emergency medical services. Organisations seeking to engage in the response efforts should contact the state’s Civil Defence representative to effectively integrate their contributions.

Additionally, the recently established Extraordinary Secretariat for Support to the Reconstruction of Rio Grande do Sul is tasked with overseeing the long-term recovery and reconstruction efforts following the floods. Headed by Paulo Roberto Severo Pimenta, this secretariat coordinates with various governmental and non-governmental stakeholders to develop and implement reconstruction plans. Given its direct reporting line to the Presidency and its status as a Ministry of State, this secretariat has the authority and resources to address the extensive rebuilding needs in the aftermath of the floods. In conclusion, this multi-level coordination framework ensures a structured and efficient response to the floods in Rio Grande do Sul. Each level, from the ABC to the COC, the Situation Room, and the Extraordinary Secretariat, plays a distinct and complementary role in managing both the immediate and long-term challenges posed by the disaster.
Shelter recovery support
The government is mapping the shelter needs using drones and satellite images, which are assisting in mapping the areas affected by the floods in Rio Grande do Sul. So far, 224 out of the 469 impacted municipalities have been mapped using this technology.

Lieutenant Colonel Rafael Luft of the Rio Grande do Sul Civil Defence explained that this mapping is crucial for the assessment process, saying to TV Globo, “We will establish this diagnosis, identifying which houses, schools, daycare centres, and basic health units were destroyed. This comprehensive mapping of the destruction poses a significant challenge for us in determining the full extent of the disaster in Rio Grande do Sul.”

On Friday (24th), a new law was enacted to establish a reconstruction plan for the state. This regulation creates a fund to support government actions in three key areas: emergency actions, reconstruction efforts, and a series of future state plans. In the coming weeks, a better definition is expected of the pathways to shelter for households. As of today, most of the areas remain flooded and it is hard to assess the longer-term needs.

Governor Eduardo Leite emphasised that the law would ensure greater transparency in resource allocation. “This fund will guide the state's reconstruction efforts across various fronts, whether supporting private initiatives, rebuilding housing, restoring infrastructure, or assisting municipalities,” he stated during the signing of the law. According to the plan set up by the federal government, the municipalities will select the households most affected in line with the following criteria: “Families living in flood-affected areas who have temporarily or permanently abandoned their homes in municipalities in a state of calamity or emergency.” They will receive financial support in the amount of 5,100 reais (about 1,000 Swiss francs).

The government expects to support 240,000 families with this amount, 5,100 reais per family, as part of an estimated amount of 1.2 billion reais (215 million Swiss francs).

2. International capacity and response

2.1 Red Cross Red Crescent Movement capacity and response

IFRC membership
The IFRC Americas Regional Office and the Regional Logistics Unit (RLU) are based in Panama, while the IFRC Southern Cone Country Cluster Delegation (CCD) operates from Buenos Aires, Argentina. The CCD, with its team of specialists in emergency response, financial sustainability, National Society development (NSD), finance, and PMER, maintains close coordination with the National Societies of Argentina, Brazil, Chile, Paraguay, and Uruguay.

The BRC coordinates its actions with the IFRC Regional Health Disasters Climate Crisis (HDCC) team through the CCD and deployed personnel. Before the flooding, no other IFRC members were present in the country. However, the current staff in Brazil includes personnel such as HEOPS, Operations Manager, Finance Assistant, Communications Coordinator, Audiovisual, Security, and a WASH Coordinator, along with a WASH team from Argentina.

Additionally, the Swiss Red Cross and Spanish Red Cross have deployed a logistics Emergency Response Unit (ERU), while the Argentine Red Cross has sent a plane with hygiene kits, shelter items, and volunteers. These items include kitchen sets (200), cleaning sets (200), hygiene kits (200), water filters (300), blankets (1,500), jerrycans (400), shelter toolkits (200), tarpaulins (600), buckets (200), and mosquito nets (600).
Furthermore, a plane carrying cargo from the IFRC Panama office has arrived, containing jerrycans (200), kitchen sets (300), hygiene kits (300), cleaning sets (300), water filters (300), and solar lamps (419).

Additional support has been confirmed from the Danish Red Cross, American Red Cross, Swedish Red Cross, Canadian Red Cross, and others, providing rapid response assistance. The coordination of flights from the IFRC Panama Hub with essential household items has been crucial in managing these efforts to support the team on the ground. Moreover, additional road and sea shipments are being coordinated from the Argentina and Panama Hubs to further support operational activities.

ICRC

The ICRC has had a presence in Brazil for years, working to minimise the consequences of armed violence, promote international humanitarian law, and support the BRC in Restoring Family Links (RFL).

In RS, the ICRC maintains a cooperation agreement with the Porto Alegre municipality for the implementation of the Safer Access for Essential Public Services (AMS) programme, which aims to reduce the consequences of armed violence. In response to the recent flooding in RS state, the ICRC dispatched staff to evaluate, in collaboration with the authorities and the Movement, needs related to the Protection of Family Links, especially with RFL, forensics, and missing persons.

Regarding RFL, ICRC and National Society representatives visited the affected areas in the Serra region and the capital's metropolitan area, coordinating with organisations and local authorities, particularly concerning shelter. Simultaneously, under the request of Brazilian authorities, the ICRC is providing technical support in missing persons coordination mechanisms and forensics. The ICRC is further supporting the IFRC logistically in receiving and transporting relief items to RS and providing local information for rapid deployment in the affected areas.

There is strong coordination among Movement components in the country, with all entities working together at the main emergency operations centre and jointly conducting needs assessment visits in the affected areas.

2.2 International Humanitarian Stakeholder capacity and response

The United Nations team in Brazil, led by the Resident Coordinator, is actively supporting flood response efforts alongside local authorities. Various UN agencies and other organisations are playing crucial roles in addressing both the immediate needs and long-term impacts of the disaster:

PAHO/WHO is collaborating with the Ministry of Health to monitor and manage the spread of diseases in flood-affected areas.

UNHCR and IOM are providing technical expertise in managing emergency shelters, distributing kitchen supplies and other essential household items, and assisting with documentation efforts for the displaced population.

UNICEF is implementing child protection measures, facilitating family reunification, and distributing emergency items such as hygiene kits, dignity kits, childhood kits, and food/nutrition packages.

UNFPA, which has secured approximately 500,000 US dollars for the response, is ensuring continued access to essential services related to gender-based violence and sexual reproductive health, focusing on the needs of displaced women, adolescents, and pregnant women, and working on the prevention of maternal mortality and morbidity.

UNAIDS is supporting local NGOs in providing basic supplies to people living with HIV/AIDS.

World Vision plans to establish two safe spaces for child protection and safety, providing psychosocial support and other essential services.

World Central Kitchen is preparing and distributing meals to people in shelters.
Samaritan's Purse is distributing household items and has installed a community water filtration system at a local church. This system, managed by their Water, Sanitation, and Hygiene (WASH) team, can produce clean water for up to 10,000 people daily.

MSF is sending donations, doctors, and a programme of action for indigenous peoples.

Greenpeace has dispatched teams for support and donations. The organisation has been supporting the BRC’s logistics warehouse and donated DRM material to the National Society.

The IFRC and the BRC are actively coordinating their response efforts with other humanitarian organisations and authorities. This collaboration is essential for ensuring a comprehensive and effective response to the flooding crisis in Rio Grande do Sul. By working together with other organisations and authorities, they can pool resources, expertise, and manpower to provide the best possible support to the affected population. This coordinated approach helps to avoid any duplication of efforts, maximise impact, and promptly address the diverse needs of the community.

3. Gaps in the response

SHELTER & INFRASTRUCTURE:

The severe floods in Rio Grande do Sul have created an urgent need for immediate safe shelter and housing for the displaced population. People who have evacuated their homes due to rising floodwaters need immediate access to safe and secure shelter. This could include collective shelters set up by aid organisations or government bodies, or temporary accommodation in hotels or community centres. Immediate needs include providing safe refuge to over 540,192 displaced individuals,1 with shelters needing to be accessible and equipped with basic amenities like beds, blankets, and hygiene kits.2 Collective shelters must be adapted to comply with protection mainstreaming, including private changing and breastfeeding facilities, indoor and outdoor lighting, safe WASH facilities, and climate comfort. Collective shelters also need to meet minimum humanitarian standards (Shelter, Settlements and Household Items chapter - Sphere Standards - Sphere Handbook). Additionally, long-term needs are significant, as many homes are damaged beyond repair, necessitating substantial rebuilding and repair efforts. Temporary or permanent housing solutions will be essential for those whose homes are destroyed.3 Furthermore, health and safety measures are crucial to prevent disease in overcrowded shelters while ensuring the well-being of the affected population. Across almost all affected municipalities, classes were suspended, affecting 273,000 students, with 789 schools suffering damage and 52 being repurposed as shelters.4

The floods have caused widespread destruction, impacting infrastructure, including bridges and roads, utilities, and communication networks. This has resulted in the isolation of entire communities and complicated relief efforts and access to basic services. Over 500,000 people are without power and clean water, and around 140 sections of 60 highways are either totally or partially closed.5 According to OCHA data, almost one million people do not have reliable access to electricity. Entire communities have been cut off due to the destruction of bridges and roads, making rescue and relief efforts challenging.

HEALTH:

Before the recent floods, Rio Grande do Sul's healthcare system faced significant challenges. The state has approximately 300 hospitals, with the major ones located in urban centres like Porto Alegre. However, rural areas lack medical facilities, relying on urban hospitals for specialised care. Healthcare professionals are unevenly distributed, with shortages in rural regions. Hospitals were operating at near-full capacity even before the floods, exacerbated by the COVID-19 pandemic. Vulnerable demographics include children under five years of age, 1 Brazil: Rio Grande do Sul Floods Snapshot, Covering the period of 10 - 16 May 2024 - Brazil | ReliefWeb 2 UNHCR supports Brazil's response to devastating floods - Brazil | ReliefWeb 3 Brazil: Disruptions ongoing as flooding continues to impact Rio Grande do Sul State as of May 7 | update 5 | Crisis24 (garda.com) 4 Sobe para 85 o número de mortos após enchentes que atingem o RS | Rio Grande do Sul | G1 (globo.com) 5 Brazil floods: Dam collapses and death toll rises in Rio Grande do Sul (bbc.com)
women of reproductive age, the elderly, and people with disabilities. Common diseases include cardiovascular
diseases, diabetes, and respiratory infections. Immunisation coverage is crucial, with approximately X% of the
population vaccinated. Malnutrition affects X% of children under five. Diseases such as dengue and Zika pose seasonal threats. While emergency response is well-coordinated, resource constraints may hamper large-scale disaster management.

The primary health concerns include the risk of waterborne diseases such as leptospirosis, gastroenteritis, and other infections due to contaminated water sources and poor sanitation conditions in temporary shelters.6 Four deaths due to leptospirosis were already reported on 25 May, while 54 cases have been confirmed and over 1,000 suspected cases have been registered. Immediate access to clean water, sanitation, and hygiene (WASH) facilities is critical to prevent outbreaks of these diseases. Moreover, the stagnant water is a breeding ground for mosquitos, which only increases the risk of dengue cases.

Additionally, the disruption of health services has compounded the problem. Many hospitals and clinics have been damaged or are inaccessible due to flooding, limiting the availability of medical care for both flood-related injuries and ongoing health conditions, including mental health conditions.

Mental health support is also a significant need, as the impacts of the disaster can lead to increased anxiety, depression, and other mental health issues. Providing psychological support and counselling services in shelters and affected communities is essential to help residents cope with the aftermath of the floods.

Lastly, there is a need for vaccinations and health monitoring to prevent the spread of infectious diseases, especially in crowded shelter environments. Ensuring that vulnerable people, such as children and the elderly, receive necessary medical attention and preventive care is crucial to maintaining public health during this crisis.

WATER, SANITATION, AND HYGIENE (WASH)

Likewise, there was considerable damage to water tanks due to the destruction of rooftop tanks. Significant damage to infrastructure caused disruptions in water supply, increasing the risk of waterborne diseases.7 Floodwaters have contaminated many sources of drinking water, and the city's authorities are urging residents to boil water before use to prevent waterborne diseases. Emergency services are distributing bottled water, but supplies are running low due to high demand.

Rio Grande do Sul has also been heavily impacted, with many neighbourhoods and municipalities from Caixas do Sul, Canoas, and Porto Alegre submerged, with water treatment facilities either not functioning8 or overwhelmed.9 The city is facing critical shortages of potable water, leaving an estimated 80 per cent of the population without access to drinking water. Efforts are underway to truck in water from less affected areas as supplies are being rationed and officials are distributing drinking water to hospitals and shelters in tankers. However, access to some areas remains limited due to road damage, complicating relief efforts.

Authorities and aid organisations are distributing hygiene kits and setting up temporary sanitation facilities, but demand far exceeds supply. Residents are being advised to avoid contact with contaminated floodwaters and to practice preventive measures. The overall situation remains critical, necessitating continuous support to effectively address these pressing hygiene needs. Overall, the need for clean water in these cities is immediate and urgent. Authorities and aid organisations are working tirelessly to address these needs, but the scale of the disaster means that comprehensive solutions will take time. The focus remains on providing immediate relief to the affected populations while working on the long-term restoration of water infrastructure.10

7 Health in times of climate chaos: floods in Rio Grande do Sul | Peoples Dispatch
8 Ciudad de Brasil se queda sin suministros básicos tras fuertes inundaciones | AP News
9 Severe flooding leaves at least 100 dead and thousands homeless in Brazil | Euronews
10 Daily Press Briefing by the Office of the Spokesperson for the Secretary-General | Meetings Coverage and Press Releases (un.org)
LIVELIHOODS AND CVA:
Countless households in the region have been devastated by the loss of their homes, possessions, and livelihoods, as vital businesses, farms, and infrastructure suffered extensive damage. Urgent assistance is required to provide financial aid to these affected households, enabling them to meet their fundamental needs for food, clothing, and temporary housing. Additionally, the food supply of the South American nation is under threat, as Rio Grande do Sul, a key region, contributes 70% of Brazil's staple food – rice.11

Longer-term solutions will be required targeting households that will be relocated far away from their original livelihoods when the reconstruction plans become more concrete.

OPERATIONAL CONSTRAINTS

The floods have impacted 90% of RS's cities, with major state and federal highways partially or completely blocked by flooding or landslides, severely hindering the delivery of relief items and services. The normally two-hour drive from Caxias do Sul to the capital, Porto Alegre (115 km), now takes more than six hours. RS's main airport is flooded, and the nearest operational airport, located in Canoas, is a military base handling only humanitarian flights. There are no other international airports in the state, forcing international donations to be nationalised in nearby capital cities such as Florianopolis and Curitiba. Communication infrastructure has also been damaged in some areas, affecting internet access and GSM coverage.

The Brazilian Red Cross is operating from different location with the main operational centre in the Serra region and another one in the metropolitan area. Branch capacity is varied with the National Society implementing a rotative staff approach with staff and volunteers and leveraging support from nearby state branches.

Numerous stakeholders and humanitarian actors are operating primarily in Porto Alegre, including UN agencies, NGOs, public authorities, security forces, and volunteers. This has led to coordination challenges and frequent instances of overlapping assistance. The BRC's efforts to also serve other regions of the state make it possible to analyse the needs and provide a humanitarian response to the regions without a constant flow of humanitarian response.

OPERATIONAL STRATEGY

Vision

This appeal aims to raise CHF 8 million for the flood-affected population of Rio Grande do Sul, Brazil, targeting 25,000 individuals in need. The response will be conducted over twelve months, with an emergency phase of three months followed by recovery activities.

The relief efforts will encompass various forms of assistance, including the distribution of household items and shelter kits to 2,000 people. Additionally, Cash and Voucher Assistance (CVA) will be provided to 5,000 individuals to address their shelter needs. The IFRC will collaborate with the Brazilian Red Cross to organise the reception, storage, and distribution of essential items, ensuring effective assistance delivery.

Furthermore, this response will include the distribution of 5,000 hygiene kits to support personal hygiene and sanitation. To enhance community resilience, 150 volunteers will be trained in Health, Community Engagement and Accountability (CEA), Water, Sanitation, and Hygiene (WASH), as well as Psychosocial Support and Gender Inclusion (PGI).

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11 Ciudad de Brasil se queda sin suministros básicos tras fuertes inundaciones | AP News
Psychosocial support will be integrated into all activities, recognising the importance of addressing the emotional and psychological needs of affected individuals. Additionally, primary health care services will be accessible through a mobile clinic, providing essential medical assistance to those in need.

Emergency WASH activities will be conducted to clean flooded homes using water pumps and cleaning equipment, ensuring a safe and sanitary living environment for the affected population. Volunteers will also receive training on diseases such as acute watery diarrhoea, leptospirosis, and dengue, enabling them to educate and raise awareness within their communities.

Finally, the initiative will focus on strengthening the logistical, volunteer management, health, CEA, and PGI capacities of the BRC, ensuring sustainable support and resilience-building efforts in the long-term.

Given the current situation, with persistent heavy rains making onsite evaluation of the main affected regions difficult, combined with the vast geographical extent of the disaster, the National Society had to use publicly available aerial and photographic observations, government reports, interviews with state actors, and affected community members to develop this document.

Based on these findings, the BRC propose a regional response divided into the following blocks:

- **Metropolitan Region**: Porto Alegre, Canoas, Guaíba, Eldorado do Sul, and Novo Hamburgo.
- **Serra Region**: Santa Bárbara, Santa Teresa, Muçum, Encantado, Rocs Sales, Colinas, Arroio do Meio, Lajeado, Cruzeiro do Sul, Estrela, and Taquari.
- **Vale do Caí**: Bento Gonçalves, Cotiporã – dam, Garibaldi, Santa Tereza, Pareci Novo, São Vendelino, Vale Real, São Sebastião do Caí, and Montenegro.
Of these regions, the Brazilian Red Cross has initiated the response simultaneously in the municipalities of the Serra and the Metropolitan regions. In the first emergency phase of the operations, the response will be scaled up to the Taquari Valley and the indigenous communities in the Serra region. This is because most of the humanitarian organisations, private sector actors, and governmental actors are focusing on the areas of Porto Alegre and Canoas.

**Anticipated climate-related risks and adjustments in the operation**

The locations most affected by the floods from the rains that began on 29 April are expected to suffer from further flooding for at least three more months. Forecasts indicate climatic instability until June, with rainfall exceeding 100mm, which directly impacts how the rivers of the Guaíba basin, and the Patos Lagoon will behave, especially concerning the region's flood levels and the lagoon's outflow to the sea.
In the metropolitan region, the risks are directly associated with the flooding, with Porto Alegre and Canoas being the most affected areas that require focused attention due to the possibility of rising river levels and community isolation. In the Serra region, the greatest risk lies in landslides occurring in rural areas and on the main access roads. In the valley regions, the risks of flooding and landslides are combined, making it the area with the highest operational risk.

Therefore, the National Society will conduct a preliminary risk assessment of the communities the Movement will serve, considering chemical, physical, and biological risks to the teams, as well as the sanitary and health conditions of the population. Additionally, access to the communities will be monitored in line with the operational plan, which may involve land or air transport depending on the area’s condition. Following this assessment, evacuation routes and the zoning of safe areas will be created so that in cases of flooding, rain, or landslides, volunteers and the assisted population can evacuate vulnerable areas and reach safe zones.

Operations will be organised based on the reports produced from the preliminary risk assessment and the multi-sectoral needs assessment, in conjunction with constant monitoring of weather conditions, considering the areas the National Society will be operating in, and enabling the mapping of risk areas 72 hours in advance.

**Targeting**

1. **People to be assisted**

The Brazilian Red Cross aims to provide support to 25,000 people affected by the floods with a focus on addressing the needs of the population that have completely lost their homes, with particular attention on the displaced living in temporary shelters and indigenous communities. Priority will be given to households that have not received assistance, especially single-parent households with children under five, the elderly, and people with disabilities.

The immediate response will target people in affected provinces, including those in temporary shelters, individuals remaining in homes deemed structurally safe, or those evacuated to nearby regions, including communities of indigenous peoples. Following the initial mass relief efforts, short-term assistance will prioritise households affected by the loss or injury of family members, loss of shelter and livelihoods, internal displacement, and those with pre-existing vulnerabilities such as people with disabilities.

Mid-to-long-term recovery programmes will address the broader impacts of the floods, including physical and mental well-being, and individuals’ capacity to recover and cope. Given the disaster’s impact on urban centres, special attention will be given to specific vulnerabilities such as the urban poor, people living in informal settlements, and other marginalised groups. Building the resilience of urban communities will be a key consideration in programme design. Targeting will be informed by data from the authorities and the BRC’s analysis of household vulnerabilities within the affected population.

As mid-to-long-term programming evolves, the geographic focus may expand to support people unable to return home, assisting those who lost their jobs or had a serious reduction in their monthly income, and indigenous and rural communities.

To date, no disaggregated data is available on the operation, however, the BRC will provide this along with reporting in the future. The following is an estimate of the total population in the state of Rio Grande do Sul disaggregated by sex and age, based on population statistics for 2022.

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>%</td>
</tr>
<tr>
<td>Under 18</td>
<td>1,314,399</td>
<td>12.1%</td>
</tr>
<tr>
<td>Over 18</td>
<td>3,941,352</td>
<td>36.2%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>5,255,751</td>
<td>48.3%</td>
</tr>
</tbody>
</table>
Based on this, below is an estimate of the 25,000 people to be served, disaggregated by sex and age:

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>Men</th>
<th>Women</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>%</td>
<td>Total</td>
</tr>
<tr>
<td>Under 18</td>
<td>3,025</td>
<td>12.1%</td>
<td>2,900</td>
</tr>
<tr>
<td>Over 18</td>
<td>9,050</td>
<td>36.2%</td>
<td>10,025</td>
</tr>
<tr>
<td>TOTAL</td>
<td>12,075</td>
<td>48.3%</td>
<td>12,925</td>
</tr>
</tbody>
</table>

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

Regarding protection, gender, and inclusion, it is essential to consider several key points to ensure the well-being of individuals, primarily based on the prevention of and response to forms of violence, abuse, and exploitation. Special attention will be given to the protection of children, and unaccompanied children, and addressing possible situations that compromise dignity in temporary accommodation. This involves building capacities, training teams to identify protection risks and act to mitigate them, and ensuring that shelter spaces, for example, are safe for everyone, especially persons in vulnerable situations. It is important to recognise and respond to the different needs and capacities of people of different genders. Women and girls, often disproportionately affected in emergency situations, must receive special attention to ensure their access to essential services such as reproductive health and their protection against gender-based violence. In terms of inclusion, it is important to recognise diversity, which involves the active inclusion of marginalised groups such as people with disabilities, the elderly, ethnic minorities, and LGBTQIA+ individuals, ensuring that their voices are heard, and their needs met.

Rio Grande do Sul is the state with the third largest number of migrants in Brazil, around 40,000 people, mainly from Haiti, Venezuela, Uruguay, and Argentina, who are scattered throughout the state and most concentrated in the cities of Porto Alegre, Caxias do Sul, and Canoas. Roughly 35,000 migrants are estimated to be living in vulnerable situations and risk areas, affected directly or indirectly by the floods, resulting in the loss of their belongings, homes, and documents.

Regarding Community, Engagement and Accountability (CEA), community participation should always be taken into consideration during the emergency response. The effectiveness of the emergency response is enhanced when affected communities are involved in the process. This not only ensures that interventions are relevant and culturally sensitive but also strengthens community resilience and promotes self-sufficiency. It is also important to establish feedback mechanisms to create clear and accessible channels for those affected to provide information and report concerns or abuses.

By integrating these considerations into all phases of the response, from planning to evaluation, the Brazilian Red Cross will ensure that its actions are not only effective but also relevant and respectful of the dignity and rights of all individuals.

**PLANNED OPERATIONS**

**INTEGRATED ASSISTANCE**

<table>
<thead>
<tr>
<th>Shelter, Housing and Settlements</th>
<th>Female &gt; 18: 10,025</th>
<th>Female &lt; 18: 3,025</th>
<th>CHF 1,220,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male &gt; 18: 9,050</td>
<td>Male &lt; 18: 2,900</td>
<td>Total target: 25,000 people</td>
<td></td>
</tr>
</tbody>
</table>
**Objective:**

Emergency Phase: People affected restore and strengthen their safety and well-being through the provision of shelter kits and household items.

Early-recovery phase: meeting short – medium shelter needs in line with the principles of dignity, protection, and an integrated and incremental approach to increase resilience among the affected population.

Due to the floods, many people have experienced damage to their housing and assets, therefore, there is an urgent need for the distribution of household items, shelter kits, sleeping kits, etc. Currently 581,638 people are still displaced of which the majority is residing in hotels, temporary housing, or with families. Of these, 55,791 are in shelters. The government announced a large support plan for the most affected households, while the municipalities are mapping the households. It is predicted that about 240,000 households will receive assistance of about CHF 1,000 to reconstruct or build their houses. The BRC and IFRC will coordinate with the authorities on the shelter needs and what support the Red Cross can provide in line with capacities.

The following activities will be implemented to respond to the needs of the most affected households:

1. **Multi-sectoral needs assessment including shelter**
   Conduct a multi-sectoral needs assessment, focusing on understanding the detailed shelter requirements of the affected populations. Using field surveys, interviews, and other options to identify the specific needs and priorities of those impacted by the floods.

2. **Distribution of household items to 2,000 households**
   - **Kitchen Sets:** Essential cooking utensils and equipment.
   - **Blankets:** To provide warmth and comfort.
   - **Mosquito Nets:** For protection against mosquito-borne diseases.
   - **Shelter Tool Kits:** Tools for repairing and rebuilding homes.
   - **Tarpaulins:** Waterproof sheets for temporary shelter and for houses affected by damaged roofs.
   - **Solar Lamps:** For lighting in areas without electricity.
   - **Sleeping Kits:** Including mattresses and blankets.

3. **Logistical support**
   A total of 2,000 household kits will be shipped from the IFRC logistics hubs in Panama and Argentina to Brazil.

   The IFRC will support the Brazilian Red Cross as well with logistics support in the distribution of household kits that they are receiving through donations across the country to the warehouses in Serra and metropolitan areas. The IFRC will
support the improved organisation of reception, storage, and distribution, and will further support the BRC with logistics (trucks and vehicles), HR (volunteers and training), and visibility.

4. Awareness Raising and Training
   - Train volunteers, staff, and the affected population on the best use of in-kind assistance and safe sheltering practices. Conduct training sessions for volunteers and staff.
   - Sessions with explanations to the affected populations to demonstrate the proper use of distributed items and safe shelter construction techniques.

5. Shelter settlement pathways

Trained volunteers of the Brazilian Red Cross will support affected households in understanding and using the shelter settlement options and pathways.

6. Post-distribution monitoring

Assess the impact and effectiveness of the distribution efforts and ensure that the needs of the affected populations are being met.

### Livelihoods

<table>
<thead>
<tr>
<th>Objective:</th>
<th>Female &gt; 18: 1,000</th>
<th>Female &lt; 18: NA</th>
<th>Male &gt; 18: 800</th>
<th>Male &lt; 18: NA</th>
<th>CHF 192,000</th>
<th>Total target: 1,800</th>
</tr>
</thead>
</table>

Contribute to the affected population's urgent and long-term recovery needs by providing resources to safeguard and begin restoring assets that support livelihoods

The floods have caused extensive damage, not only to homes but also to enterprises and agricultural fields, severely impacting livelihoods. A comprehensive approach is required to assess and support the recovery of affected socioeconomic groups and labour markets. The main activities are:

1. **Multi-sectoral needs assessment including livelihoods**
   - Conduct a detailed assessment to understand the socioeconomic impact and labour market conditions.
   - Focus on identifying the needs of different socioeconomic groups.

2. **Training and capacity building**
   - Train 20 staff and 50 volunteers of the Brazilian Red Cross on the Livelihood Programming Course (LPC) and Emergency and Recovery Livelihood Assessment (ERLA).
• Increase both knowledge and skills to effectively support the recovery in livelihoods.

3. Livelihood recovery activities

Based on the assessment and training, organise livelihood activities prioritising those who have been permanently relocated to new areas. By supporting these individuals, their livelihoods can be rebuilt from scratch in safer locations.

This plan aims to address the long-term impact of the floods on livelihoods by conducting thorough assessments, training staff and volunteers, and implementing targeted livelihood recovery activities. By prioritising those who need to start over in new areas, the plan seeks to support resilience and a sustainable recovery.

<table>
<thead>
<tr>
<th>Multi-purpose Cash</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td></td>
</tr>
<tr>
<td>Multi-purpose CVA distributions to 5,000 households to address the diverse needs of persons in vulnerable situations affected by the floods</td>
<td></td>
</tr>
<tr>
<td><strong>Priority Actions:</strong></td>
<td></td>
</tr>
<tr>
<td>1. Market assessment and feasibility study</td>
<td></td>
</tr>
<tr>
<td>• Conduct needs assessments to understand the challenges faced by the affected population.</td>
<td></td>
</tr>
<tr>
<td>• Assess the feasibility of CVA distributions and evaluate the readiness of local markets.</td>
<td></td>
</tr>
<tr>
<td>• Identify potential risks and explore various service provider options to ensure smooth programme execution.</td>
<td></td>
</tr>
<tr>
<td>2. Training of staff and volunteers</td>
<td></td>
</tr>
<tr>
<td>• Train 100 volunteers on rapid needs assessment, community engagement, and PGI.</td>
<td></td>
</tr>
<tr>
<td>• Facilitate community engagement activities to ensure inclusivity and that the voices of the targeted population are heard.</td>
<td></td>
</tr>
</tbody>
</table>
3. Distribution of CVA to 5,000 households

Register and distribute two instalments of multi-purpose CVA to 5,000 households.

4. Monitoring & Evaluation

- Continuously monitor local markets to ensure the availability and affordability of essential goods.
- Conduct post-distribution assessments to evaluate the impact of CVA on recipients and the community.
- Establish feedback channels to gather input from people and stakeholders, ensuring accountability and transparency.

The CVA distribution plan by the Brazilian Red Cross aims to provide flexible, dignified assistance to flood-affected populations. By conducting thorough assessments, engaging the community, and implementing rigorous monitoring and evaluation, the plan seeks to ensure effective and impactful support for those in need.

HEALTH & CARE INCLUDING WATER, SANITATION, AND HYGIENE (WASH)

(MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT/COMMUNITY HEALTH)

<table>
<thead>
<tr>
<th>Health &amp; Care (Mental Health and Psychosocial Support/ Community Health/ Medical Services)</th>
<th>Female &gt; 18: 10,025</th>
<th>Female &lt; 18: 2,900</th>
<th>CHF 270,000</th>
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</thead>
<tbody>
<tr>
<td>Male &gt; 18: 9,050</td>
<td>Male &lt; 18: 3,025</td>
<td>Total target: 25,000 people</td>
<td></td>
</tr>
</tbody>
</table>

Objective: Improved mental and physical health while mitigating the impact of waterborne and vector-bone diseases

The recent disaster has severely impacted 290 healthcare structures, including hospitals and emergency care units (UPAs), with 250 of these facing significant staff shortages. Many health centres and hospitals are not functioning at full capacity, overwhelming the state's health system, particularly in critical care due to roadblocks. Additionally, the disaster has had a profound psychosocial impact as people have lost loved ones and belongings. The floods have also resulted in stagnant water, which serves as breeding grounds for mosquitoes and increases the risk of acute watery diarrhoea. To address these challenges, the key actions include mental health and psychosocial support, community-based health initiatives, and the provision of medical services and first aid:

1. Multi-sectoral needs assessment including health
Assessing the most important needs in the health response in terms of the health structures impacted, risks of the spread of diseases, and psychosocial impacts, including:

2. Mental Health and Psychosocial Support (MHPSS)

- Mapping of MHPSS services and referral pathways.
- Training of 150 volunteers in psychological first aid. These volunteers include those who will carry out MHPSS actions, in addition to those who participate in the operation.
- Equip volunteers to provide immediate support to individuals experiencing stress, anxiety, and fear.
- Integrate psychosocial support into the response activities, including RFL, PGI, and CEA, allowing volunteers to recognise individuals with mental health symptoms or signals of distress.
- Conduct group discussions and awareness sessions, particularly focusing on those residing in emergency shelters, to address psychosocial needs and provide support, including grieving and ambiguous loss.
- Provide ongoing psychosocial support to volunteers and staff providing a response to the floods. Assure rotations in work and sufficient rest for the teams.

1. Community-based health to mitigate impact of diseases

- Training of 150 volunteers in community-based health: This includes the basics of epidemiology, the basics of the community-based health and first aid approach, explanation of prevention measures concerning specific diseases such as acute watery diarrhoea, leptospirosis, and dengue. The training also includes the basics of epidemic control for volunteers and the toolkit. The 150 volunteers will be trained in groups of 25 across four days, and will be divided into the respective areas depending on the outcomes of the multi-sectoral needs assessment in close collaboration with the health centres. Additionally, these volunteers will be trained on CEA.
- Sensitisation activities by the 150 community volunteers, including group discussions. The activities will be specified based on the multi-sectoral needs assessment, evolution of the situation, and community engagement activities (such as community meetings).

3. Provision of medical services and first aid

- Provide additional training to 150 volunteers in first aid over a three-day period.
- Equip trained volunteers with new first aid kits to support immediate medical needs.
• The BRC will donate medical supplies, including tests and personal protective equipment (PPE), to affected health centres. No drugs will be donated, focusing instead on essential medical equipment and protective gear.
• Primary health care with the mobile clinic of the BRC through doctors and nurses volunteering for the Red Cross.

This response will address the health and psychosocial needs arising from the recent disaster. By training volunteers who will be doing sensitisation activities, the BRC aims to mitigate the impacts of the disaster on healthcare services while promoting the well-being of affected individuals.

### Water, Sanitation and Hygiene

<table>
<thead>
<tr>
<th></th>
<th>Female &gt; 18: 10,025</th>
<th>Female &lt; 18: 2,900</th>
<th>CHF 1,346,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male &gt; 18:</td>
<td>9,050</td>
<td>Male &lt; 18:</td>
<td>3,025</td>
</tr>
<tr>
<td>Total target:</td>
<td>25,000 people</td>
<td></td>
<td>CHF 1,346,000</td>
</tr>
</tbody>
</table>

**Objective:**

Reduce the risk of waterborne diseases and ensure the dignity of the affected population through the provision of WASH services

**Priority Actions:**

1. Multi-sectoral needs assessment including WASH needs
   Conduct thorough evaluations in designated areas to identify and register persons in the most vulnerable situations requiring WASH support.

2. Distribution of household items and sensitisation on their use
   • Provide essential household items to 5,000 households, including jerrycans, water filters, hygiene kits, cleaning kits, buckets, and aqua tabs.
   • Conduct sensitisation sessions led by female volunteers to provide menstrual hygiene products and education to affected women.

3. Training of 150 volunteers on water and sanitation
   • Sessions on proper filter use, safe water management practices, and key messages on hygiene promotion.
   • Sessions on the use of water treatment plants.

4. Provide access to safe drinking water through the use of a water treatment plant
Establish a water treatment plant capable of producing 3,000 litres of water per hour, ensuring access to clean water for the community (24,000 litres per day).

5. Support for the cleaning and sanitation of homes and removal of stagnant water
   - Distribute 50 water pumps to support households in removing stagnant water, reducing health risks within homes.
   - Construction of emergency latrines.
   - Organise a community cleaning campaign to promote sanitation and prevent further health risks associated with floodwaters.

## PROTECTION AND PREVENTION

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

<table>
<thead>
<tr>
<th>Protection, Gender, and Inclusion</th>
<th>Female &gt; 18: 10,025</th>
<th>Female &lt; 18: 3,025</th>
<th>CHF 54,000</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male &gt; 18: 9,050</td>
<td>Male &lt; 18: 2,900</td>
<td>Total target: 25,500 people</td>
</tr>
</tbody>
</table>

**Objective:**

Prevent, mitigate, and respond to protection, gender, and inclusion and safeguarding threats against affected populations.

**Priority Actions:**

The increased risk of sexual violence against vulnerable girls in the over 700 shelters, where approximately 72,561 persons are currently residing, poses a significant concern amidst the stressful situation caused by the floods. It is imperative to prioritise attention to protection, gender, and inclusion matters to ensure that persons in vulnerable situations, especially those who were victims of violence, receive the support they need. Additionally, the over 30,000 indigenous people in the affected areas are facing critical situations and require additional support to address their specific needs and vulnerabilities. This operation will also pay special attention to migrants living in Rio Grande state.

1. Multi-sectoral needs assessment – including protection, gender, and inclusion

Specific questions will be included in assessments to better understand and address the needs of the most vulnerable people. These questions will focus on identifying the most pressing needs and determining the best ways to reach those affected. Additionally, information will be gathered on issues related to violence, including gender-based violence (VBGA).
2. Training of volunteers and staff on protection, gender, and inclusion
Train 150 volunteers and 20 staff ensuring they are equipped to identify and respond to the diverse needs of affected individuals with sensitivity and effectiveness. They will be trained in protection from sexual exploitation and abuse (PSEA) and encouraged to sign the Code of Conduct.

3. Cooperate with other humanitarian organisations working on protection, gender, and inclusion
Map partners and develop partnerships with local organisations specialising in protection and response to enhance support mechanisms for affected individuals while strengthening the overall response effort.

4. Identify and use referral pathways for victims of SGBV
Map functioning referral pathways for SGBV survivors in shelters or temporary cities to ensure they have access to appropriate services and support, and share the information on pathways with the affected population.

These activities aim to address the specific needs and vulnerabilities of affected individuals, particularly in temporary shelters. By integrating these aspects into assessments, providing training, establishing referral pathways, and fostering partnerships with local organisations, the Brazilian Red Cross seeks to ensure the safety, dignity, and inclusion of all individuals affected by the floods.

### Community Engagement and Accountability

<table>
<thead>
<tr>
<th>Objective:</th>
<th>Community Engagement and Accountability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female &gt; 18: 10,025</td>
<td>Female &lt; 18: 3,025</td>
</tr>
<tr>
<td>Male &gt; 18: 9,050</td>
<td>Male &lt; 18: 2,900</td>
</tr>
</tbody>
</table>

Centre the community in the response with an inclusive, participatory approach, ensuring alignment with their priorities

### Priority Actions:
Community engagement and accountability are essential for ensuring an inclusive and participatory approach to the response efforts, aligning them with the actual needs of the community. Based on the experience of the Brazilian Red Cross in their work with indigenous communities in recent years, the following activities are being proposed to involve the community throughout the elaboration and implementation of the response:

1. Involve the community as much as possible at various stages of the response planning and implementation to ensure their voices are heard and their needs are effectively addressed.
In all activities, the community will be consulted through different methods, such as community meetings. The multi-sectoral needs assessment will include questions to gather information on community preferences regarding communication tools (radio, TV, etc.) and languages.

2. **Train 150 volunteers on community engagement and accountability to equip them with the necessary skills to engage with and empower the community.**

3. **Organise community meetings with the targeted population, including community leaders.**

Identify needs and concerns, inform the Red Cross operation, and agree on selection criteria.

4. **Set-up and implement a feedback mechanism.**
   - Assure the functioning of a dedicated channel to receive and listen to feedback and complaints about the operation.
   - Ensure timely response and follow-up on received feedback.
   - Include feedback boxes during distributions to provide an accessible avenue for community members to share their thoughts and concerns.
   - Ensure that the feedback mechanism includes a minimum standardised process to process sensitive cases, such as PSEA cases.

By actively involving the community, training volunteers in community engagement, holding regular meetings to gather feedback and assess needs, and establishing a robust feedback mechanism, the Brazilian Red Cross can ensure that its response efforts are accountable, responsive, and aligned with the needs and preferences of the affected communities.

<table>
<thead>
<tr>
<th>Risk Reduction, Climate Adaptation, and Recovery</th>
<th>Female &gt; 18: 50</th>
<th>Female &lt; 18: N/A</th>
<th>Male &gt; 18: 50</th>
<th>Male &lt; 18: N/A</th>
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<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Priority Actions:</strong></td>
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<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

*Communities in high-risk areas are prepared for and able to respond to disasters.*

In Rio Grande do Sul, recurring extreme weather events, including floods and landslides, have resulted in significant loss of life, with 161 fatalities reported this year alone. With these events becoming more severe due to climate change, there is a critical need for anticipatory action and disaster risk reduction. The priorities for disaster risk reduction include:
1. Training volunteers and staff in rapid assessment methodology for early recovery activities (NEAT+).
2. Providing training to volunteers in Enhanced Vulnerability and Capacities Assessment (EVCA) to inform disaster risk management and sectoral recovery actions.
4. Provision of equipment for community Disaster Response Teams to enhance their capacity to respond effectively to disasters.
5. Development of climate-smart livelihoods micro-projects focused on increasing the resilience of vulnerable communities.

**Enabling approaches**

<table>
<thead>
<tr>
<th>National Society Strengthening</th>
<th>Female &gt; 18: <strong>NA</strong></th>
<th>Female &lt; 18: <strong>NA</strong></th>
<th>CHF 2,289,000</th>
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<tbody>
<tr>
<td>Male &gt; 18: <strong>NA</strong></td>
<td>Male &lt; 18: <strong>NA</strong></td>
<td>Total target: <strong>NA</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Objective:**

*The Brazilian Red Cross is enhancing its capacity to respond effectively to emerging crises, with its auxiliary role in providing humanitarian assistance well-defined and widely recognised.*

**Priority Actions:**

Throughout the operation, the response activities will be implemented to strengthen the functioning of the BRC and, in particular, the branches of Rio Grande do Sul province. Priority activities include:

1. Training and equipping 150 volunteers to boost their capabilities and readiness.
2. Providing specialized training for the National Intervention Team (ENI)'s staff and volunteers to enable a rapid and effective response.
3. Revision of the multi-hazard national contingency plan for the BRC to enhance preparedness and response strategies.
4. Conducting comprehensive training programmes in Emergency Needs Assessment and Planning (ENAP) for staff and volunteers to ensure thorough preparedness, and adapting to the National Society's needs.
5. Improve the BRC's capacities in needs assessment and data collection.
6. Equipping staff and volunteers with the necessary skills to effectively manage the Emergency Operations Centre (EOC) during crises.
7. Develop an application to streamline volunteer database management and logistical resources. Secure the registration and identification of volunteers, and provide them with insurance.
8. Deploy 250 volunteers from other regions, based on their specialties, to support operations in the affected areas for a 38-day period.
9. Enhance the National Society's digitalization by procuring essential IT equipment such as laptops, mobile phones, and tablets.
10. Enhance visibility through the acquisition of materials like donation stickers, personalized bags, banners, flags, and vests.
11. Organise a Regional Intervention Team (RIT) training in Brazil.
12. Conduct branch assessments and formulate development plans for all branches of Rio Grande do Sul.

<table>
<thead>
<tr>
<th>Coordination and Partnerships</th>
<th>Female &gt; 18: NA</th>
<th>Female &lt; 18: NA</th>
<th>CHF 16,000</th>
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<tbody>
<tr>
<td>Male &gt; 18: NA</td>
<td>Male &lt; 18: NA</td>
<td>Total target: NA</td>
<td></td>
</tr>
</tbody>
</table>

Objective:

Technical and operational complementarity among the IFRC membership and with the ICRC, enhanced through cooperation with external partners.

Priority Actions:

1. Membership Coordination
   - Strengthening of existing and established membership coordination mechanisms including the Emergency Appeal and surge mechanisms, including deployment of rapid response personnel (RRP) and ERUs, as a tool for engagement and coordination of resources.
   - The IFRC is providing technical and coordination support through the Strategic Partnerships and Resource Mobilisation Unit to support the multilateral and bilateral contributions provided through the Federation-wide approach.
   - Ongoing coordination and information exchange between the BRC and IFRC on all membership-related activities, including membership presence, visits, and information needs.

2. Engagement with external partners
   - Further strengthening of coordination with relevant external actors, including the government and UN agencies.
   - Active representation towards donors and external partners.
   - Proactive engagement with key external stakeholders, including the private sector and non-traditional donors in driving financial and in-kind support.

3. Movement Cooperation
   - Coordination with the ICRC in supporting the BRC and the operation, including a readiness to facilitate deployments of experts to provide technical guidance in ICRC-specific areas of work such as RFL.
   - Daily movement (de)briefings at the start and end of the day to discuss the progress and challenges in the operation.
Objective:

**IFRC Secretariat**

<table>
<thead>
<tr>
<th>Services</th>
<th>Female &gt; 18: NA</th>
<th>Female &lt; 18: NA</th>
<th>Male &gt; 18: NA</th>
<th>Male &lt; 18: NA</th>
<th>Total target: NA</th>
</tr>
</thead>
</table>

**IFRC Secretariat**

*Female > 18: NA  Female < 18: NA  CHF 1,382,000  Male > 18: NA  Male < 18: NA  Total target: NA*

**Priority Actions:**

**Strategic support**
- The IFRC secretariat will support the operation at the nearest level ensuring both effective and efficient implementation by providing technical expertise to maintain strategic direction with support from the Southern Cone Country Cluster Delegation and Americas Regional Office.
- Joint liaison with key external stakeholders and donors for continued broad positioning beyond the flooding emergency response operation.
- Continued capitalization of learning and knowledge management from the operation and wider programming.

**Logistics**
- Providing firsthand support to the BRC Logistics Team to coordinate supply chain efforts and ensure that relief items reach people in need in the affected areas.
- Support in terms of international and local procurement to the BRC as required.
- Launching a mobilization table in close coordination with the BRC to seek in-kind donations to meet operational needs.
- Negotiating with partners for free-of-charge cargo flights to transport urgently needed relief items.
- Ensure real-time reporting on stock procurement and shipments.
- Provision of PPE to staff and volunteers.

**Human Resources**
- Coordinate the timely deployment of rapid response personnel.
- Facilitating measures to ensure the well-being of rapid response personnel and staff.
- IFRC surge mechanisms will be used to guarantee compliance with the regional rapid response personnel competency framework and management.
- Strengthen the capacity of the IFRC's in-country team by hiring suitable personnel to manage the operation.
- Provide insurance to staff and volunteers.

**Finance**
• Ensure compliance with financial procedures to guarantee transparency and accountability during the operation.
• Ensure the timely and proper submission of financial reports.

PMER
• Provide support to the BRC in the elaboration and update of the Operational Strategy.
• Develop and jointly implement a progress monitoring plan with the BRC.
• Support the BRC in the elaboration of operation updates.
• Jointly plan and implement a lessons learned workshop with the BRC.
• Support the BRC in the preparation and implementation of a multi-sectoral needs assessment.
• Support the BRC in improving the data collection system.

Information Management
• Support the BRC in implementing data collection, processing, and analysis to support timely decision-making.
• Design data collection strategies for needs assessments and develop visual products required to enable ongoing actions.
• Manage the GO Emergency Page to update required documents, reports, and additional information to monitor and report ongoing actions.
• Strengthen the National Society's capacity for implementing information management-related activities, knowledge transfer, and ensure the continuity of IM products throughout the operation.
• Coordinating and tasking the SIMS network for the production of maps and infographics, satellite imagery analysis, and other data analysis tasks.

Communications
• Promote the Emergency Appeal.
• Develop a communication plan and key messages related to the operation.
• Support the BRC in the elaboration of communication materials related to the operation.
• Disseminate key messages and other communication material through mass media.
• Manage reputational risk at the country, regional, and global levels.

Security
• The IFRC will deploy a Surge Security Delegate to cover security and flood-related safety aspects.
• The IFRC's security plans will be developed and apply to all IFRC staff throughout the operation.
• Expanded Security Welcome Brief (ESWB) approved by the Global Security Unit (GSU) and the Security Delegate as well as minimum security requirements (MSRs) will be shared and implemented.
• Security and Flood Safety Risk Assessments will be conducted for any operational area should any IFRC personnel deploy
there; risk mitigation measures will be identified and implemented.
- The IFRC must, and National Society staff and volunteers will be encouraged, to complete the IFRC Stay Safe 2.0 e-learning courses.
- IFRC personnel and personnel under the IFRC Umbrella will have a valid PSIF (Proof of Life) on file.
- All delegates and National Society staff working for with the IFRC will be briefed in security protocols and acknowledgement will be filled and sent.

Risk management
- Elaboration of a risk register and the implementation of clear mitigation measures.
- Regular monitoring of the risk management register to make sure that the risk owners follow-up on their tasks.

Risk management

A detailed risk register has been elaborated and discussed between the HoD of the Cluster, IFRC Operations Manager, IFRC HEOPS, ARO Operations colleagues, and the Risk Management Coordinator for the Americas. In this register, more details are included, such as the risk owner and the residual risk after implementing mitigation actions. A risk management plan will be developed to ensure it will be properly implemented. This register is being reviewed and updated every two weeks by the persons mentioned above. A workshop on risk management will be organised as well with the Brazilian Red Cross.

<table>
<thead>
<tr>
<th>Risk</th>
<th>Likelihood</th>
<th>Impact</th>
<th>Mitigating actions</th>
</tr>
</thead>
</table>
| Volunteers acting with or without the approval from the National Society | High       | Medium  | - Reinforce operational communications by contacting local authorities in places where the National Society has a presence  
- Improve operational communications awareness in the National Society at all levels  
- Provide National Society volunteers and staff with proper identification  
- Create clear communication lines and improve dissemination at all levels |
| Delays in delivering relief items and teams due to road blockages and traffic jams | High       | Medium  | - Maintain constant communication with Brazilian authorities to promptly evaluate infrastructure conditions  
- Use air transportation (air force flights, helicopters, etc.)  
- Cooperate with the ICRC and other agencies for consolidated cargo |

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<table>
<thead>
<tr>
<th>Issue</th>
<th>Impact 1</th>
<th>Impact 2</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Politicisation of humanitarian assistance due to the electoral year</td>
<td>High</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>• Reinforce operational communications by contacting local authorities in places where the National Society has a presence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Improve operational communications awareness in the National Society at all levels</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Ensure that all volunteers have been trained</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Injury of volunteers and staff during the operation</td>
<td>Low</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>• Reinforce awareness and training of volunteers on Stay Safe and SAF</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Avoid flooded areas and/or highroads</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Ensure that volunteers are insured for the entire response period</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Congestion in the urban shelters, lack of proper sanitation facilities, and presence of stagnant flood water may result in waterborne diseases</td>
<td>Medium</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>• Create awareness with authorities managing the shelters to avoid stagnant flood water</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Provide affected shelters with repellent and bed nets, among other items</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• BRC personnel working in these shelters will be sensitised on disease surveillance so they can detect any of the early signs of likely diseases</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donation of food and materials may jeopardize local small commerce and businesses</td>
<td>Low</td>
<td>Medium</td>
<td>Change the type of support to affected communities from in-kind donations to cash-based interventions (CBI) after 12-16 weeks</td>
</tr>
<tr>
<td>Non-affected cities may receive a large number of displaced people and overwhelm the city's hosting capacity</td>
<td>Medium</td>
<td>Medium</td>
<td>Include neighbouring cities in the BRC's intervention area, providing them with food items, household items, and CBI</td>
</tr>
<tr>
<td>Limited resources</td>
<td>High</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>• Maintain an open dialogue with state actors to direct support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Start partnerships with other agencies and local organizations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Reduction of the project scope</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safeguarding incidents</td>
<td>High</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>• Train staff and volunteers on PGI and VGB</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Disseminate referral pathways</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Limited technical capacity of the Brazilian Red Cross</td>
<td>Medium</td>
<td>Medium</td>
<td></td>
</tr>
<tr>
<td>• Some of the branches have limited capacity and the Movement will bring in more</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
experienced volunteers from other regions
• Surge support
• Additional training

- Monitor the weather forecasts
- Gather primary and secondary information on areas at risk
- Advocate the communication of Civil Defense residing in areas at risk
- Have an updated IFRC reallocation plan

<table>
<thead>
<tr>
<th>Dam breaks</th>
<th>Medium</th>
<th>High</th>
</tr>
</thead>
</table>

Quality and accountability

The key indicators identified below will be used to establish a monitoring and evaluation (M&E) framework to assess the suitability, quality, and satisfaction of the targeted population, as well as track progress on the planned activities. The BRC and partners will routinely conduct self-assessments against these indicators to ensure the operation is on track, products and services meet minimum quality standards, and the operation remains relevant. The monitoring system will also evaluate the effectiveness of established accountability systems. Regular feedback mechanisms, including post-distribution and satisfaction surveys, will be conducted after each significant activity to gather feedback and complaints from specific groups within the crisis-affected population. A final evaluation will be conducted at the end of the operation.

The operation will ensure that all safeguarding measures are in place, with BRC staff and stakeholders meeting requirements for PSEA and child safeguarding. Actions will include completing a child safeguarding risk analysis, implementing screening, briefing, and reporting systems, mapping, and testing referral pathways, and maintaining community feedback mechanisms, child-friendly information, and participation.

### Intervention areas

#### Integrated assistance

**Shelter and basic household items**

**Indicators**

- Number of households reached with essential household items
- Needs assessment including assessing shelter needs completed
- Households received shelter support through CVA vouchers
- Number of people (and households) provided with household items that support the restoration and maintenance of health, dignity, and safety and the undertaking of daily domestic activities in and around the home
- Households supported with shelter resettlement pathways
- Number of people trained on the best use of in-kind assistance and safe sheltering practices

**Livelihoods**

**Indicators**

- Needs assessment for livelihoods and food security is used to generate criteria for targeting the most at-risk people/households
- Volunteers and staff trained on LPC and ERLA
<table>
<thead>
<tr>
<th>People reached through livelihood activities</th>
</tr>
</thead>
</table>

### Multipurpose Cash

**Indicators**

- Conduct market and feasibility studies
- Number of people (and households) who successfully received cash for basic needs after being identified and processed for transfers
- Number of volunteers trained on cash
- Number of households receiving cash transfers from the RCRC are satisfied with the amount received
- Percentage of households receiving cash transfers from the RCRC are satisfied with the amount received
- Number of Post-Distribution Monitoring (PDM) surveys conducted

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

#### Health & Care

(Mental Health and Psychosocial Support [MHPSS]/Community Health/Medical Services)

**Indicators**

- Number of people who receive mental health and psychosocial services in emergency situations from the RCRC
- Health needs assessment
- Number of volunteers trained on community-based health, epidemics prevention, and psychosocial support
- Number of people sensitized by volunteers on health promotion and disease prevention
- Number of people reached with primary care
- Number of people reached with psychosocial support

#### Water, Sanitation, and Hygiene (WASH)

**Indicators**

- Number of people reached with WASH assistance
- Number of people (and households) reached with effective water treatment materials
- Number of volunteers trained on WASH
- Number of people (and households) reached with hygiene promotion activities
- Number of communities/sites with WASH situation assessments conducted at least once
- Number of litres of safe water distributed through the RCRC emergency water supply (cumulative)

### Protection and Prevention

#### Protection, Gender, and Inclusion

**Indicators**

- Number of people reached by protection, gender, and inclusion services
- Needs assessment on protection, gender, and inclusion
- Number of RCRC staff and volunteers trained on prevention and protection of sexual exploitation and abuse, and child safeguarding

### Community Engagement and Accountability

**Indicators**

- Number of community meetings held
- Number of complaints received through feedback mechanisms
- Needs assessment on community engagement and accountability
- Number of volunteers trained on CEA
- Percentage of people surveyed who report receiving useful and actionable information through different trusted channels
Percentage of community members, including marginalised and at-risk groups, who know how to provide feedback or make a complaint about the operation

### Risk Reduction, Climate Adaptation, and Recovery

**Indicators**

| Number of people reached by the RCRC through disaster risk reduction (DRR) and climate change adaptation activities |
| Needs assessment on DRR and CCA |
| Environmental baseline of the operation has been assessed using an appropriate environmental screening tool (e.g. the NEAT+), and progress against recommendations has been tracked |
| Number of people reached with activities on increasing resilience and reducing disaster risks |

### Enabling approaches

#### National Society Strengthening (NSS)

**Indicators**

| Number of volunteers involved in the response that have increased their skills and management of the operations |
| Number of volunteers provided with equipment for protection, safety, and support (e.g. PSS) appropriate to the emergency |
| National Society has National Disaster Response teams trained and management systems in place |
| Number of well-functioning branches in Rio Grande do Sul |
| National Society has in place capacities to conduct Emergency Needs Assessments |

### Coordination and Partnerships

**Indicators**

| Movement coordination meetings are organised and updates are provided to Movement partners |

### Secretariat Services

**Indicators**

| Number of surge missions or deployments |
| Number of articles, press releases, and interviews supported by the Communications team |
| Number of IFRC monitoring and support missions |
## FUNDING REQUIREMENT

Breakdown of the IFRC secretariat funding requirement

### OPERATIONAL STRATEGY

**MDRBR011 - Brazil**

**Brazil: Floods - Rio Grande do Sul**

### FUNDING REQUIREMENTS

<table>
<thead>
<tr>
<th>Planned Operations</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter and Basic Household Items</td>
<td>1,263,000</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>192,000</td>
</tr>
<tr>
<td>Multi-purpose Cash</td>
<td>999,000</td>
</tr>
<tr>
<td>Health</td>
<td>270,000</td>
</tr>
<tr>
<td>Water, Sanitation, and Hygiene</td>
<td>1,346,000</td>
</tr>
<tr>
<td>Protection, Gender, and Inclusion</td>
<td>54,000</td>
</tr>
<tr>
<td>Education</td>
<td>0</td>
</tr>
<tr>
<td>Migration</td>
<td>0</td>
</tr>
<tr>
<td>Risk Reduction, Climate Adaptation, and Recovery</td>
<td>135,000</td>
</tr>
<tr>
<td>Community Engagement and Accountability</td>
<td>56,000</td>
</tr>
<tr>
<td>Environmental Sustainability</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Enabling Approaches</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination and Partnerships</td>
<td>16,000</td>
</tr>
<tr>
<td>Secretariat Services</td>
<td>1,382,000</td>
</tr>
<tr>
<td>National Society Strengthening</td>
<td>2,287,000</td>
</tr>
</tbody>
</table>

**TOTAL FUNDING REQUIREMENTS** 8,000,000

*all amounts in Swiss francs (CHF)*
Contact information

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

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