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DREF Emergency Plan of Action (EPoA) Brazil: Floods

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation: Floods in southern Brazil (MDRBR007)	Glide no. FL-2015-000092-BRA
Date issued: 31 July 2015	Date of disaster: 14 July 2015
Operation manager (responsible for this EPoA): Pabel Ángeles IFRC Disaster Management Coordinator for South America pabel.angeles@ifrc.org	Point of Contact: Andre Araujo, Risk and Disaster Management Coordinator of the Brazilian Red Cross
Operation start date: 15 July 2015	Expected timeframe: 3 months
Overall operation budget: 186,625 Swiss francs (CHF)	
Number of people affected: 109,740 persons	Number of people to be assisted: 2,500 (500 families)
Host National Society presence: 1 Headquarters, 21 branches, 5,000 volunteers and 300 staff members	
Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of the Red Cross and Red Crescent Societies (IFRC) and the International Committee of the Red Cross (ICRC)	
Other partner organisations actively involved in the operation	
Governmental Organizations: Civil Defence, Secretariat of Government, Social Assistance, Secretariat of Health, Secretariat of Works, Secretariat of Urban Mobilization, Secretariat of Security	
Non-governmental Organizations: Rio Grandense de Saneamento Company, Rio Grande Energy (RGE), Boy Scouts, Club de las Madres, National Organization for Animal Protection (ONDA is its acronym in Portuguese)	

<Click [here](#) to view the DREF budget. [Here](#) for the map of the affected area. [Here](#) for the contact information>

A. Situation Analysis

Description of the Disaster

On 14 July 2015 Rio Grande Do Sul Civil Defence declared an emergency at the municipal level, reporting floods in several cities. The Uruguay River's water levels reached 13.57 meters, whose average levels are barely five or six meters. This is the result of intense rainfall in the region which caused the overflowing of the Gravataí and Arrollo Sapucaya Du So rivers and floods that affected homes, roads and shops in these three States.



Currently 184 cities have been flooded in the States of Paraná, Santa Catarina and Rio Grande Do Sul, with more than 109,740 people are affected, of which 5,122 are in collective centres, with host families or elsewhere. The most affected cities include Esteio, Frederico Westphalen, Cachoeira do Sul, Riozinho Rolante, Chapecó, Xanxerê and Maravilha.

Civil Defence remains in control of the situation around the Uruguay, Cai and Sinos rivers and are providing all necessary assistance to municipal security corps. The increase in Uruguay River flows is also a matter of concern for the municipalities of Irai, San Borja, Uruguiana, Itaqui and Barra do Quaraí. Likewise, in the case of the Sinos River the municipalities that are expecting a large amount of rainfall are Novo Hamburgo, São Leopoldo, Esteio, Parobé, Montenegro and São Sebastião do Caí. Monitoring continues and rivers are expected to slowly return to their normal courses.



Data from a 20 July Civil Defence situation report as follows:

Impact to Southern Regions

State	Number of cities	People affected	People in shelters
Paraná	69	51,414	840
Santa Catarina	52	13,500	1,421
Río Grande Do Sul	63	44,826	2,851
TOTAL	184	109,740	5,112

Source: Civil Defence Report

On 20 July 2015 the State of Rio Grande do Sul, through Supreme Decree No. 52,467, declared an emergency for 180 days in the following 26 municipalities: Alvorada, Bagé, Barra do Quaraí, Barra do Guarita, Cachoeira do Sul, Cachoeirinha, Cerro Grande, Esteio, Esperança do Sul, Frederico Westphalen, Gravataí, Hulha Negra, Irai, Itaqui, Rolante, São Borja, São Jerônimo, São Sebastião do Caí, Montenegro, Parobé, Pinheiro do Vale, Porto Alegre, Porto Maura, Porto Xavier, Porto Vera Cruz y Uruguiana.

The following table shows the municipalities affected in the State of Rio Grande Do Sul, where affected persons are those whose homes have been damaged by the floods and had been evacuated living with hosted families, while sheltered persons are those being housed in collective centres set up jointly by Civil Defence and the municipalities.

Affected and relocated people in Rio Grande Do Sul

Cities		People	
		Affected	Sheltered
Cachoeirinha	Heavy rains	5,998	605
Alvorada	Heavy rains	6,006	210
Ametisa do Sul	Heavy rains	349	0
Bagé	Heavy rains	29	0
Barra do Guarita	Heavy rains	286	0
Barra do Quaraí	Heavy rains	122	0
Bom Jesus	Heavy rains	13	0

Cachoeira Do Sul	Heavy rains	504	0
Esteio	Heavy rains	306	180
Cruzaltense	Heavy rains	25	0
Encantado	Heavy rains	13	0
Esperanca do Sul	Heavy rains	63	0
Estrela	Heavy rains	63	0
Frederico Westphalen	Heavy rains	630	0
Gravataí	Heavy rains	17640	840
Hulha Negra	Heavy rains	298	0
Lajeado	Heavy rains	59	21
Montenegro Iraí	Heavy rains	420	0
Iraí	Heavy rains	454	0
Itaqui	Heavy rains	1134	0
Novo Hamburgo	Heavy rains	0	42
Novo Xingu	Heavy rains	391	0
Palmeira	Heavy rains	269	0
Parobe	Heavy rains	210	25
Pinheirinho	Heavy rains	55	0
Portao	Heavy rains	176	0
Porto Mauá	Heavy rains	130	386
Porto Xavier	Heavy rains	294	0
Riozinho	Heavy rains	567	0
Rolante	Heavy rains	382	244
Sao Borja	Heavy rains	504	0
Sao Jeronimo	Heavy rains	286	21
Sao Leopoldo	Heavy rains	2995	147
Sao Sebastiao	Heavy rains	3276	0
Sapiranga	Heavy rains	378	0
Sapucaia do Sul	Heavy rains	34	63
Soledade	Heavy rains	34	0
Taquari	Heavy rains	34	46
Uruguaiana	Heavy rains	399	21
	TOTAL	44826	2851

Source: Rio Grande Do Sul Civil Defence (20 July 2015)

Because affected areas are all plains, homes are mostly located in flat areas, which is why residents have had to leave their homes as these have been rendered uninhabitable and inaccessible. The Government has opted to open collective centres, but the State's Civil Defence does not have actual figures in this regard due to the lack of information in the crisis room.

Figure 2 Assessment in the municipality of Cacheirinha.
Source: IFRC

Rio Grande do Sul Civil Defence has 12 teams distributed across the State assisting 63 affected municipalities. So far 4 cities are without water and electricity, so there are 44,826 affected people across the State of Rio Grande do Sul.¹



Summary of current response

¹ Assessoria de Imprensa/State Civil Defence 21-07-2015.

Overview of Host National Society: The Brazilian Red Cross has been on site from the very outset of the emergency on Tuesday, 14 July 2015, responding primarily to the flash floods and assisting in the evacuation of families in the affected areas. Through its Headquarters and six branches and municipal centres, BRC is directing its efforts to the most affected municipalities and those least assisted by the Government, which are Cachoeirinha with 5,998 affected people and Gravataí with 17,640 affected people. There are 44,826 affected people state-wide.

The Brazilian Red Cross is coordinating directly with Rio Grande du Sol Civil Defence and with Civil Defence coordinating the situation in the municipalities of Cachoeirinha and Garavati. It is receiving guidance and support from the National Relief Department to carry out concrete actions in management of and assistance to collective centres, support to primary health care activities, basic training in community-based first aid and psychosocial support to affected families in collective centres, as well as in the distribution of clothing and toys for children.

The current BRC team working on the Operation consists of 50 volunteers from the municipalities and the State. A call to recruit more volunteers has been made.

Overview of the Red Cross - Red Crescent Movement

The regional IFRC office for South America is in Lima, which coordinated with the Disaster Management delegate who provided technical support during initial actions. A PADRU member was also deployed who participated in assessments with the National Society team. The International Committee of the Red Cross is established in the city of Brasilia and has been informed of the activities conducted.



Figure 3 Flooding from the Garavati River. Source: Brazilian Red Cross

Overview of non-RCRC actors in the country

The Rio Grande Du Sol Civil Defence has been participating in evacuations and directing the population into collective centres. Arrangements are being made with the Secretariat of Security to protect the lives of people in flooded areas. Civil Defence is working on performing structural evaluations of homes together with the Engineering Department in order to determine the risks posed by the dwellings.

The Brazilian armed forces are assisting in rescue and evacuation actions in high-risk areas, using boats and helicopters to transport those affected, in addition to logistical support during the emergency.

People who are in collective centres are being assisted by both the Secretariat of Social Development and Municipal Civil Defence. The Ministry of Health is tracking people and referring those in need of medical assistance to the nearby hospitals. The Epidemiological Surveillance Centre is monitoring the situation jointly with the Ministry of Health.

Through its Secretariat of Urban Development, the municipal government is providing support to transport affected families.

Rio Grandense De Saneamiento Company in Cachoeirinha and Gravataí is working on interconnecting piping near Cachoeirinha collection point so that it can be functional. Through this action, the integrated system of the two municipalities should gradually normalize. It was necessary to divert the flow of raw water pumping station (EBAB), which was flooded by rain and prevented the engines from igniting. Some of the water produced in Cachoeirinha had to pass through a flooded section of the EBAB. Under normal conditions, the water reaches the EBAB through one pipe and it is pumped to a water treatment station (ETA is its acronym in Portuguese) through another one. The two pipes are connected, which will allow the water to reach the water treatment plant without going through the flooded area.

RGE stopped providing security in the flooded areas of Cachoeirinha, São Leopoldo, Sapiranga, Gate, Novo Hamburgo, Montenegro, Rio Pardo, Santa Maria, Sinimbu, Rosário do Sul, Garavati, Tupandi, Candelaria, San Sebastian the Fall and Alegrete. The remaining customers without power are in the metropolitan regions, Central, beyond the valleys of the Rio Pardo and Taquari, and it is unknown when their service will be restored. The State Company for Electric Energy (CEEE) said that it had had only occasional issues.

The Boy Scouts in the area of Porto Alegre mainly collected food and clothing supplies in public areas and distributed them to the affected area. Clube de Madres is providing support on the cleaning of donated clothes and the classification of them.

Many people in the affected area have pets; as a result, ONDA is providing medicine, food and helping with evacuations in some cases in the area.

Needs analysis, beneficiary selection, risk assessment and scenario planning

As an auxiliary to public authorities, the Brazilian Red Cross has been working in collaboration with Civil Defence in the municipalities of Cachoeirinha and Gravati in the State of Rio Grande Do Sul to identify the areas of intervention. It has identified 2 highly vulnerable municipalities - Cachoeirinha and Gravati - and will support municipal government activities.

According to the initial information, the municipality of Cachoeirinha has 254 affected families, of which 80 are in shelters. The rest are either living with host families or have remained in their own flood-affected homes. The main livelihood for this population is fishing, agriculture and waste management.

There is a water shortage in the communities of Vila Olaria and Meu Rincão in the municipality of Cachoeirinha as flooding has affected the pumps that provide this service, and part of the population has been displaced to collective centres. Affected communities in the municipality of Gravati include Vila Itatiaia, Jardim das Palmeiras, Jardim do Cedro, Loteamento Father Reus, Vila Mato Alto, Vila Novo Mundo, Vila Rica and Vila Maria.

Most of the affected population has not left their homes for fear of losing their possessions or the theft thereof. The population in shelters is there because water levels have invaded their homes.

Shelter: This urban and semi-urban context is characterized by homes built out of wood and in particular cases of concrete (The houses closer to the city centre are safer and more stable). The houses near the river, which are mostly of wood, are the most damaged and many of these homes are being used as warehouses to house garbage.

These settlements all had regular services (water, electricity, telephone, hydraulic, etc.), which they were interrupted by the flood. For this the government is working on a recovery plan to support the reconstruction of the homes with the support of private companies that provide services.

Livelihoods: Collecting and recycling waste and paper is the main livelihood activity of most of the people affected in the two aforementioned communities, while others work in shops and in the municipality's industrial zone. There is no place to work since homes and land in the community are flooded, and waste and paper were swept away by the overflowing river waters and contaminated. Therefore, their livelihoods have been completely disrupted and the affected population is looking for ways to get temporary jobs despite Government efforts to assist in this regard.

Food and Nutrition: Normally, the financial situation of these communities is not good, and with the emergency the population does not have the capacity to buy basic food items. Furthermore, food storage spaces have been contaminated by flood waters and some were swept away by the current.

Currently this population depends on shelters, friends or family for food. The government, through its Social Secretariat, is making an effort to meet these needs, but it is not enough; this is a need that has been identified, especially in families with vulnerable groups.

Water and Sanitation: The large amount of rain that fell in the State of Rio Grande do Sul in such a short period of time caused flash flooding from the Uruguay, Guaíba and Gravataí rivers which affected 52 cities state-wide, mainly Gravati and Cachoeirinha, and damaged water supply pumps in four municipalities. Trash, dead animals, rotting food, mice and other contaminants have polluted the water sources (wells) used by the communities and their families, preventing its use for consumption and cleaning.

There are not enough water taps, showers and toilets for the amount of people residing in the collective centres. Solid waste collection is inadequate, with vectors reproducing rapidly. In addition, thousands of displaced persons are facing hygiene issues due to the lack of sanitation. Hygiene promotion in the collective centres is considered a good option to promote hygiene, together with hand washing and good household water management.

The conditions of the families in the collective centres are precarious, so consistent hygiene promotion can prevent waterborne diseases.

Municipal governments are delivering water to the communities through trucks, but families have nowhere to store it, so they need buckets to store water safely and prevent contamination. Families also need guidance on how to estimate the amount of water they need for both consumption and cleaning, since this is the season for water shortages.

Health: The communities are vulnerable to increases in cases of skin and respiratory infections and to water-borne and vector-borne diseases. This is due to the poor hygiene and sanitation conditions coupled with the waste swept around after the flood. Another important factor has been the low temperatures which have led to an increase in influenza cases.

There is one key factor, and that is the possible presence of cases of bacterial meningitis type C (although it is unclear whether it is in or near the community). This information is still being confirmed with the Ministry of Health. There is a report describing 48 cases to date, which is an alarming number that needs to be corroborated. This should generate an immediate alert with authorities as well as subsequent prevention and protection measures. It is essential to identify the measures taken by the authorities and the monitoring system that is being implemented to identify cases and to respond accordingly.

Prevention and promotion actions by health centres have been very limited. There is only one health facility to deliver care, which is unable to meet the demand, and a hospital in Porto Alegre (Capital of Rio Grande Do Sul) is 20 km from the place where the community is sheltered.

There are no reports on psychosocial and mental health status in the community, especially among those most vulnerable such as children, older adults and people with disabilities. Feelings of sadness and anxiety have been observed, and there are no reports of assistance being provided on this issue.

Beneficiary Selection:

The Brazilian Red Cross will assist 500 families (2,500 people benefited directly) who have been affected by the flood in terms of lost housing and water sources. The operation has established selection criteria at the community and family level.

The following criteria will be applied to select beneficiaries:

- Families affected by the event in critical areas (structural damage to or uninhabitable homes, access to basic services, damage to the lives and health of family members)
- Families with children under 5 years of age, older adults, pregnant women, people with disabilities.
- Exposure to risks to health and life
- Families whose livelihoods have been affected.
- Low socioeconomic level
- Families not receiving similar non-complementary aid from other institutions.

Target population of the Operation:

Municipality	Community	Families	Total persons
Garavati	Villa Rica	196	980
	Villa Maria	50	250
Cachoerinha	Vila Olaria	120	600
	Meu Rincão	134	670
Total		500	2,500

500 families in municipalities in Rio Grande do Sul will be assisted through Emergency Health, Psychosocial Support, Collective centres, and Water and Sanitation. Priority will be given to Garavati because of the level of damage and the existing humanitarian gap.

Figure 4 Assessment of communities in Cacherinha. Source: IFRC

Risk Assessment

A large number of families have refused to leave their homes despite the level of water inside the dwellings for fear of losing their belongings (70%). Insufficient access to safe water or adequate sanitation conditions increases the risk of damage to people's health. Meteorological Service forecasts indicate that rains will continue in the area.



While communities have urban violence issues, the logo is respected and the Brazilian Red Cross has issued security guidelines for volunteers.

It is possible that the Brazilian Red Cross may have problems accessing communities by land, so they have considered renting boats to gain access to these communities and continue with assessments and delivering aid to families to their doors.

B. Operational plan and strategy

Overall objective

Contributing to meet the priority needs of the most vulnerable populations affected by the floods in urban areas in the cities of Cachoeirinha and Garavati, in Vila Olaria, Meu Rincão, Vila Rica and Vila Maria respectively, by providing a response that contributes to sustainable and resilient communities

Proposed Strategy

Initial on-site assessments in the municipalities of Cachoeirinha and Garavati - during the first phase performed by volunteers and during the second phase by sector technical teams - determined that the greatest changes to the people's quality of life involve the emotional impact of flood damage to livelihoods and to their homes. Actions related to first aid in collective centres and in areas affected by the flood, as well as hygiene promotion and recovering possessions, are essential.

Based on the above, key Brazilian Red Cross actions will include:

- **First Aid in collective centres:** The Brazilian Red Cross will support first aid care in shelters to people affected by the flood to treat sharp force trauma injuries, blood pressure issues, skin problems due to water, etc. The high concentration of people and the low temperatures at this time of year may cause the emergence of some respiratory diseases.
- **Psychological First Aid in collective centres:** A team of psychologists from the Porto Alegre branch will help improve the quality of life of the affected population by providing PSS directly to families and children in collective centres, since many of them have not recovered their personal belongings.
- **Water, sanitation and hygiene promotion:** Efforts will focus on recommendations for handling, transporting and storing water safely, specifically in collective centres, including hygiene promotion activities for shelter dynamics such as hygiene, cooking, recreation, etc. The sanitation work in the collective centres will not be conducted by the Brazilian Red Cross because the capacity of the collective centres has not been assessed and the length of time in which they will be open is unknown. As a result, sanitation, including within the collective centres, will be managed by the government and the Rio Grandense De Saneamento company.
- **Collective centres and accommodations:** As previously indicated, most people are staying with relatives or have remained in their homes, although others are housed in collective centres provided by the Government. Civil Defence has asked the Brazilian Red Cross to direct its main support towards shelter management, as it has the capacity and knowledge to do so. To this end, a workshop will be provided to facilitate the process. Priority actions identified involve the distribution of non-food items to support the population, particularly hygiene kits, kitchen kits, blankets, mats, etc.

In order to ensure maximum effectiveness and efficiency when working in affected areas and with priority groups, the latter will be identified according to the results of the initial assessment being conducted by the branches involved and through the updates that have been and will continue to be carried out. Priority will be given to minorities and response will focus on vulnerable groups, such as the chronically ill, pregnant women, the elderly and children.

Other factors are taken into account during the Operation, including:

1. Initial and detailed assessments will be performed with support from the Headquarters team and expert technicians from the branches.
2. Accountability is a key aspect for the Brazilian Red Cross, so a query box will be provided for suggestions, complaints and responses as channels of communication with beneficiaries in order to ensure two-way communications.
3. Presence of branch volunteers in municipalities affected by the floods.

Operational support services

Human Resources: The Operation requires hiring a full-time Operation Coordinator, and an Administrator to provide him or her with administrative, financial and logistical support at the Porto Alegre local level. He or she will also have support from Headquarters.

The Rio Grande do Sul branch has 200 volunteers which are convened and informed of current and future activities through the branch's internal media.

A volunteer and a team of volunteers will be appointed to manage health activities, water and sanitation activities and humanitarian aid activities. As local support to the Operation, the Porto Alegre branch will provide a team of psychologists specialising in disaster response.

The Operation will cover the cost to provide IFRC insurance to volunteers participating in the activities.

A General Regional Intervention Team (RIT) with experience in logistics will also be deployed.

The human resources required by the Operation are as follows:

- 1 Operations Coordinator
- 1 Administrator
- 1 volunteer responsible for Water and Sanitation
- 1 volunteer responsible for Health activities
- 3 PSS volunteers
- 1 Shelter/distribution of humanitarian aid volunteer
- 1 Communications and reporting volunteer at Headquarters
- 30 volunteers such as doctors, nurses, psychologists, etc.
- 1 RIT General specialising in logistics.

The IFRC, through its Pan American Disaster Response Unit (PADRU) will provide support through the Regional Disaster Management Coordinator and specialised technicians of the Unit. A member RIT will collaborate in the implementation of DREF activities as support to the Brazilian Red Cross.

Logistics and supply chain: The administrator, with support from the RIT and headquarters, will provide administrative, financial and logistical support to the Operation. There is a document detailing IFRC procurement and funds management procedures.

There is a 100m² warehouse/multipurpose area at the Porto Alegre branch of the Brazilian Red Cross. The Porto Alegre branch does not have any vehicles, however, a mobile unit (minivan) will be rented to transport personnel and volunteers to where they will be conducting their community activities.

The IFRC's Global Logistics Unit (GLS) will provide technical support to the National Society in procurement processes, and will deploy a RIT General specialising in logistics to support the Operation.

Information Technology (IT): Branches do not have a radio communications network. Communications are conducted over the cell phones of branch managers or through institutional emails.

Communications: The Brazilian Red Cross has a National Communications Department in charge of administrating the institutional web page (www.cruzvermelha.org.br), and an official Facebook page (Cruz Vermelha Brasileira- Orgao Central).

These resources will be as used as operational support, in addition to support from an IFRC Communications officer from the America Zone Office in Panama.

Security: A security plan will be drawn up assessing the risks within the targeted areas. There is insurance for the volunteers involved in the Operation, as well as protection items such as boots, goggles, masks, insect repellent, rain ponchos, etc. They will receive instructions on how to keep safe and on National Society and IFRC rules of conduct.

Protection kits will be provided to 30 volunteers actively working in the Operation and in affected areas.

Volunteer protection kit

ITEM	Quantity
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Plastic Helmet	1
Complete raincoat	1
Plastic rain boots	1
Pair of work gloves	1
AA flashlight batteries	1
N95 mask	1

Planning, monitoring, evaluation and reporting (PMER): With the end goal of guaranteeing a quality operation according to IFRC and Brazilian Red Cross standards, we will utilise the following monitoring, evaluation and report mechanisms:

1. Initial assessment that will have a report within the first 5 days
2. An update report 40 days after the start of the operation
3. A final monitoring visit to the communities
4. Implementation of a beneficiary satisfaction survey
5. A final report of the project.

The Regional Disaster Management Coordinator will conduct at least two visits to the affected area, while the Regional IFRC office will provide additional support as needed.

Administration and Finance: There is a financial team at headquarters which will provide on-site support to the administrator in all the activities necessary to ensure the proper use of financial resources. The administrator shall always coordinate with the Operation Coordinator for any expenditure or purchase that occurs during the operation through the RIT's support.

Resources will be used according to IFRC procedures and DREF fund use guidelines. Given the National Society's institutional situation and that this DREF operation will be implemented after several years of not having had DREF operations in the country, special support will be provided to the logistics, administration and financial management processes, which will include the hiring of a General RIT with extensive experience to provide in-person support to the logistics and financial procedures; all of this will be included within the terms of the memorandum of understanding (MoU) with the National Society.

C. DETAILED OPERATIONAL PLAN

Quality programming/ Areas common to all sectors

Objective		Indicators											
Outcome 1: Continuous and detailed assessment and analysis are used to inform the Operation's design and implementation		No. of evaluations conducted (general and detailed)											
Output 1.1. Initial needs assessments are conducted in consultation with beneficiaries and authorities		No. of evaluation reports that show consultation with beneficiaries (evaluation reports, plan of action). No. of evaluation reports that provide data such as sex, age and vulnerabilities (evaluation and beneficiary reports).											
Output 1.2 The management of the operation is informed by a comprehensive monitoring and evaluation system		Number of on-site visit reports and number of progress reports of the Operation											
Activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Emergency rapid assessment													
Sectorial assessment													
Beneficiary registration													
Planned activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Monitoring and follow up by the IFRC													
Monitoring visits to targeted communities													
Evaluation visits													
Support and monitoring by GLS													
Beneficiary Satisfaction Survey													

Health and Care

Needs analysis: Communities are facing a health related situation which to date has become the greatest cause for concern for the Brazilian Red Cross during these floods - reports of Meningitis Meninococcica cases in the area. Confirmed cases of meningitis type C have been identified in the municipality of Cachoeirinha, resulting in the death of 3 males (18, 8 and 17 years of age) and three females (two 12-year-olds and a 27-year-old). The identified risk is that 48 cases have been reported to the State Epidemiological Surveillance Centre over a period of 6 months, which in turn has requested the suspension of classes in unaffected areas in the municipality of Cachoeirinha to avoid an epidemic.

The State Health Department (SES) and the Municipal Rio Grande do Sul Health Council (COSEMS/RS) issued a statement on 13 July ensuring that "all the measures necessary to control meningitis in Cachoeirinha and other municipalities have already been taken as per clinical protocols of the World Health

Organisation (WHO)". The necessary measures have in fact been taken, as six teams are vaccinating against meningitis in Betania Jardim de Cachoeirinha. Up to 20 July, 1,443 people were vaccinated, including children and young people up to 20 years of age.

This situation adds to another situation that constitutes a major risk factor for the affected populations, which is that their main livelihood is recycling. This is an activity that is carried out under poor hygiene and sanitation conditions which generate vectors in the community such as rodents and mosquitoes, among others. This has been aggravated by the fact that the flood has covered and displaced these recyclables, creating sources of uncontrolled vectors.

The community is quite vulnerable to diseases caused by their limited access to adequate health conditions, proof of which is the increase in skin and respiratory infections, as well as cases of influenza which have been mainly attributed to dropping temperatures. In terms of access to health, some health posts and hospitals in the municipalities have been affected, resulting in fewer hours of care provision to the community. Intervention teams to treat people who have suffered accidents or crises are being considered. Currently, Cachoeirinha only has the Cardiology Hospital and a health post that operates 24 hours, although their operations are limited due to increased water levels and lack of electricity in the community. People are being transferred to the city of Porto Alegre (20 km) which has all types of health services available.

Assessments have detected that no communications or information activities aimed at disease prevention have been conducted. This is usually under the purview of the Ministry of Health; however, visits to shelters have had to be reduced due to staff shortages.

Minor injuries are frequent during shelter stays, as is the risk of burns or fire - families cook inside the shelter - which is why we believe that it is necessary to train first aid brigades in shelters to provide basic first aid support and provide guidance in the event of an emergency during their stay.

Not having trained health staff in shelters poses a great risk to families in shelters. Coexistence and the daily activities conducted therein, not to mention cooking, lead to minor injuries, so there is a great need of having staff trained in first aid that are able to become first responders and to transport people who require it in order to prevent a situation from worsening .

As for mental health and psychosocial support, the loss suffered by the population has caused impact resulting in sadness and anxiety. To date, no evaluation has been conducted regarding the impact to children and other vulnerable populations, and we have not been able to verify that either the Government or other agencies are providing PSS and mental health support to the community.

Population to be assisted: 2,500 people affected by the flood. The BRC will provide support through its staff trained in first aid and PSS in order to build capacity in first aid and PSS to increase the number of people assisted. Important aspects to consider are the needs of people with limited mobility, those who require special assistance, the elderly and people living with chronically ill people.

Objective	Indicators
Outcome 1 The floods' adverse effects on the health of the affected population are reduced through first aid, disease prevention and health promotion activities.	Number of people treated. Number of people that attend health promotion and prevention activities
Output 1.1 Thanks to their participation in community-based health mobilisation activities, 500 families have access to more information on how to prevent diseases in their communities, with special emphasis on Bacterial Meningitis prevention.	Number of people participating in disease prevention and health promotion activities, with special emphasis on preventing Bacterial Meningitis type C.
Output 1.2. 3 shelters have first aid care	Number of first aid brigades trained in shelters Number of first aid treatments

Output 1.3 250 affected families have psychological first aid and PSS activities with differentiated approaches		Number of PSS consults Number of people participating in PSS activities											
Activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Developing visual materials for health activities													
Community mobilisation activities													
Community respiratory disease prevention material													
Output 1.2													
Planned activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Workshops to train first aid brigades in shelters and epidemic control for volunteers													
Providing volunteers to deliver first aid care in shelters													
Output 1.3													
Planned activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Psychological first aid training workshop to volunteers and local leaders of targeted communities													
Providing volunteers to deliver PSS care in shelters.													

ITEM	Quantity
SPHYGMOMANOMETER - ADULT	02
STETHOSCOPE - ADULT	02
STETHOSCOPE	01
GLUCOSE METER (HGT)	01
GLUCOSE METER BATTERIES	02
LANCETS	200
GLUCOSE MEASUREMENT STRIPS	200
ETHYL ALCOHOL	02
ALCOHOL GEL	04
DISPOSABLE GLOVES	02
DISPOSABLE MASKS	01
SHARPS CONTAINER	02
CLINICAL PUPIL FLASHLIGHT	01
FLASHLIGHT BATTERIES	04
OPERATING FIRST AID KIT	01
BANDAGES	06
STERILE GAUZE	20
STERILE GAUZE COMPRESSES	10
THERMOMETER	03
BATTERIES FOR DIGITAL THERMOMETER	09
WIRE-FRAME SPLINT	06

Water, sanitation and hygiene promotion

Needs analysis: The government has delivered safe water in tanker trucks in order to meet the needs of the population. Containers and tanks are needed to ensure the proper transport, storage and chlorination of safe water so as to ensure supply to the affected population

Families living in areas close to the Sapucaia Brook who have been relocated to collective centres require support to access safe water. The drinking water system has suffered damage to pipes and main collection pools, as these are artisan wells that have been flooded by the overflowing river.

Hygiene kit for 5 people for 1 month - IFRC Standard

ITEM	Quantity
Bar of soap - 200 gr	5
Toilet paper - rolls	12
Bar of body soap - 100 gr	13
Toothpaste - 100 ml	5
Medium toothbrush	5
Shampoo - Adult - 250 ml	5
Razor	5
Feminine hygiene pads	8
Hand towel - 60 x 30 cm	5
Plastic comb - 16 x 6 cm	2
Plastic bag - 45 x 65 cm	1

Shelter and settlements (and household items)

Needs analysis:

Once the emergency was declared for the municipalities of Gravataí and Cachoeirinha in the State of Rio Grande do Sul, Civil Defence requested the Brazilian Red Cross's assistance in managing the collective centres using materials from the National Society - as it is recognised by both the population and the authorities - in view of the need to provide guidance and ensure humanitarian aid to people in shelters sent there because it was impossible for them to remain in their homes due to the damage caused and risks posed by the floods, in addition to the commitment to provide water to the city.

Water levels in evaluated areas are approximately 3.30 meters while houses are built some 2.00 meters off the ground, which means that homes are under 1.30 meters of water. Most household items have been lost and families have had to be evacuated to collective centres .

Shelters are under an Incident Command – Collective Centre System developed by the Brazilian Red Cross and recognized by Civil Defence, coordinating, managing and operating government-recognized shelters.

Currently, the collective centres have potable water, toilets and showers to comply with the basic shelter conditions. Some of the collective centres are hotels that have been rented by the government that provide all of the necessities. The collective centre's drainage and hydraulic systems are connected to the municipal services in that zone that were not saturated and/affected by the flooding.

That is why one of the main needs identified is providing refuge and protection to sheltered families. This has been requested by the municipal Civil Defence in Cachoeirinha and Garavati so people have mattresses and blankets to ensure their health. Many lost their belongings in the flood and this will provide them with household items that will allow them to rest safely when they return to their homes.

Population to be assisted: 500 families affected by floods in the municipalities of Coacherinha and Gravataí. These families will be identified in order to be able to provide support to people who have lost their household items and who are currently living in collective centres. Families in both municipalities have been identified jointly with Civil Defence.

It is important to mention that the other sector of population to be assisted is the one that meets selection criteria but that is not housed in collective centres. The Brazilian Red Cross is conducting assessments and identifications on site.

Objective		Indicators											
Outcome 1: 500 affected families improve their emergency shelter conditions		Percentage of families that improve their living conditions according to minimum Collective centre standards											
Output 1.1 Adequate management of 3 collective centres is promoted in Anapio Gomez, Delfin Moreira and Invuí		Number of volunteers and authorities that receive the shelter management workshop											
Output 1.2 Non-food items are provided to 500 families affected by the floods		Number of shelters receiving collective centre kits											
		Number of targeted families receiving kitchen kits to improve feeding practices.											
		Number of people receiving blankets											
		Number of people receiving mats											
Activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Shelter management workshop													
Acquisition and distribution of shelter management kits													
Shelter management													
Output 1.2													
Planned activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Acquisition and distribution of 500 kitchen kits													
Acquisition and distribution of 2,500 blankets													
Acquisition and distribution of 1,000 mats													

SHELTER MANAGEMENT KIT

ITEM	QUANTITY
Rechargeable LED flashlight	5
Security tape 25 m	5
Adhesive tape 15 m	5
Security cones	5
Flipcharts	50
White board	2

Markers for boards	5
Graphic material	2
Head flashlight	2
Flashlight with signaller	2
Visibility vest	5
Identification card	5
Inflatable tent	1
Hammer	1
Tarp	1
Table	1
Chair	2

Food security, nutrition and livelihoods

Needs analysis: Increased rainfall in communities located in flooded areas has affected the livelihoods of the population. This has increased the vulnerability of the population in terms of availability and access to food, as they have lost the income that allows them to buy food for their families and gain access to communities, jeopardising their nutritional and health status. To meet this need, speedy assistance will be provided by distributing food kits to meet food needs.

Population to be assisted: A total of 500 flood-affected families that meet beneficiary selection criteria, giving priority to single mothers, the elderly and families with children in the municipality of Cachoeirinha and Garavatá. The Brazilian Red Cross will provide support through its staff trained in shelter management.

Objective		Indicators											
Outcome 1: Affected families have immediate access to food and improved nutritional conditions		Number of families assisted by the Brazilian Red Cross											
Output 1.1 500 families have received food aid items		Number of families receiving food kits (Distribution report)											
Activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Acquisition and distribution of 500 food kits.													

Food KIT

ITEM	Quantity
Sugar (1Kg)	3
Tuna (200gr)	5
Beans (1Kg)	5
Rice (1Kg)	5
Noodles (1Kg)	5
Oil (1Lt)	3
Flour (1Kg)	2

Contact information

For further information specifically related to this operation please contact:

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DREF OPERATION

MDRBR007 - Brazil Floods

31/07/2015

DREF Grant
Budget CHF

Budget Group	DREF Grant Budget CHF
Shelter - Relief	0
Shelter - Transitional	0
Construction - Housing	0
Construction - Facilities	0
Construction - Materials	0
Clothing & Textiles	31,138
Food	23,952
Seeds & Plants	0
Water, Sanitation & Hygiene	23,952
Medical & First Aid	1,150
Teaching Materials	5,749
Ustensils & Tools	23,952
Other Supplies & Services	1,552
Cash Disbursements	0
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	111,445
Land & Buildings	0
Vehicles	0
Computer & Telecom Equipment	0
Office/Household Furniture & Equipment	0
Medical Equipment	0
Other Machinery & Equipment	0
Total LAND, VEHICLES AND EQUIPMENT	0
Storage, Warehousing	0
Distribution & Monitoring	862
Transport & Vehicle Costs	10,338
Logistics Services	0
Total LOGISTICS, TRANSPORT AND STORAGE	11,200
International Staff	10,539
National Staff	0
National Society Staff	11,631
Volunteers	4,934
Other Staff Benefits	1,677
Total PERSONNEL	28,781
Consultants	0
Professional Fees	0
Total CONSULTANTS & PROFESSIONAL FEES	0
Workshops & Training	1,916
Total WORKSHOP & TRAINING	1,916
Travel	14,371
Information & Public Relations	2,108
Office Costs	1,006
Communications	3,449
Financial Charges	958
Other General Expenses	0
Shared Office and Services Costs	0
Total GENERAL EXPENDITURES	21,892
Partner National Societies	0
Other Partners (NGOs, UN, other)	0
Total TRANSFER TO PARTNERS	0
Programme and Services Support Recovery	11,390
Total INDIRECT COSTS	11,390
TOTAL BUDGET	186,625



Brazil: Floods

