



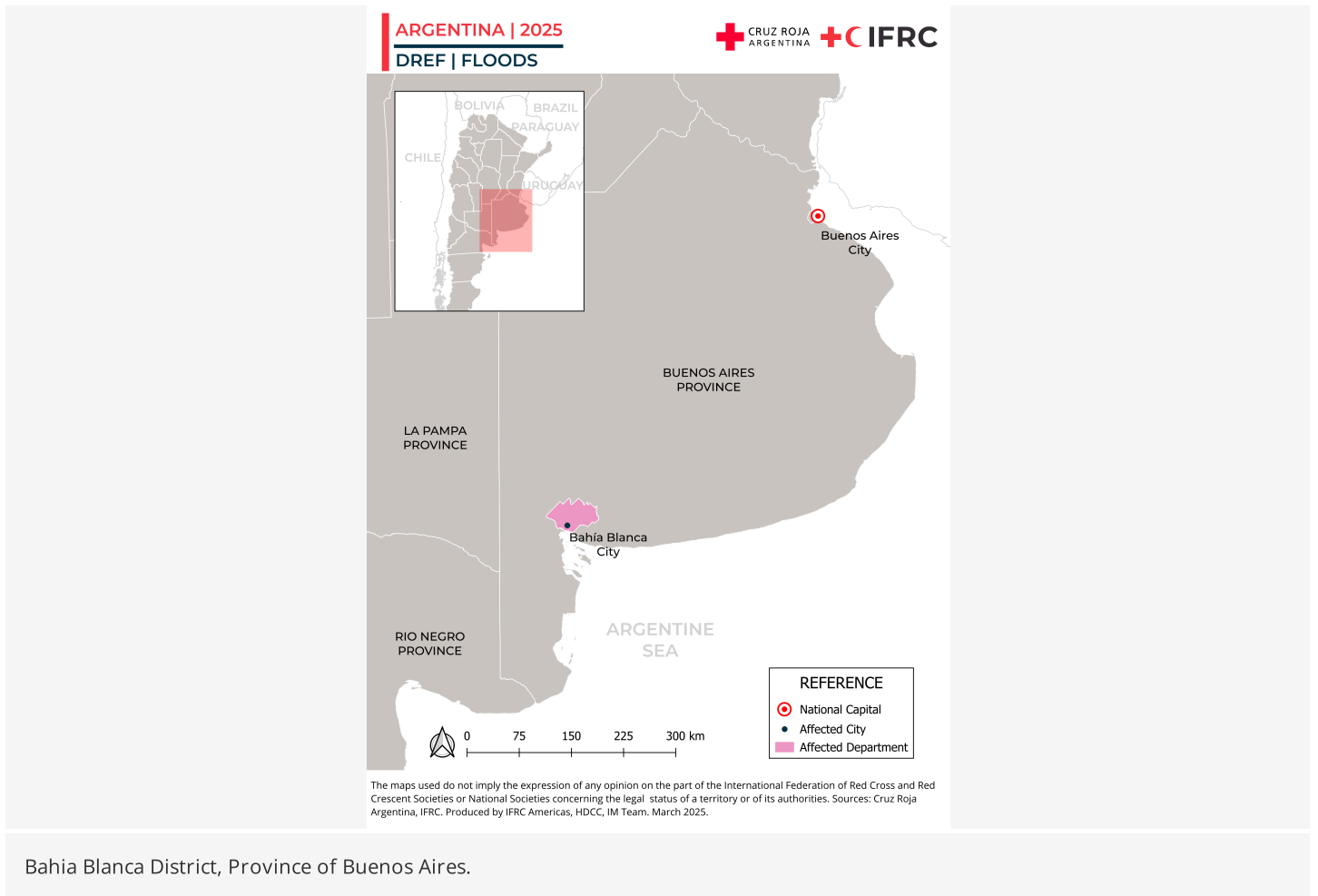
Argentine Red Cross in Bahia Blanca. March 2025. Source: ARC

Appeal: MDRAR023	Total DREF Allocation: CHF 499,921	Crisis Category: Yellow	Hazard: Flood
Glide Number: -	People Affected: 235,900 people	People Targeted: 5,000 people	People Assisted: 5,000 people
Event Onset: Sudden	Operation Start Date: 15-03-2025	Operational End Date: 31-08-2025	Total Operating Timeframe: 5 months

Targeted Regions: **Buenos Aires**

The major donors and partners of the IFRC-DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, China, Czech, Canada, Denmark, Germany, Ireland, Italy, Japan, Luxembourg, Liechtenstein, Malta, Norway, Spain, Sweden, Switzerland, Thailand, and the Netherlands, as well as DG ECHO, Mondelez Foundation, and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend thanks to all for their generous contributions.

Description of the Event



Date of event

07-03-2025

What happened, where and when?

On 6 March 2025, the National Meteorological Service of Argentina issued an Orange Alert for storms for the southern region of the Province of Buenos Aires, warning of a dangerous event for society, life, property and the environment. Municipal authorities and community institutions took preventive measures, such as the temporary suspension of classes, the cancellation of outdoor activities and the reinforcement of risk communication.

During the early morning of 7/3/2025, the district of Bahía Blanca, on the southern coast of the province, experienced intense and continuous rains that accumulated between 300 and 350 mm of water, an event that exceeded the 100-year recurrence period. In view of the worsening forecast, the National Meteorological Service raised the alert to Red Level. This caused the Napostá stream, which crosses the city, to overflow, affecting approximately 70% of the area. Other local watercourses, such as the Maldonado stream, also overflowed, exacerbating the situation and leaving the city in a state of emergency.

The flooding caused significant damage to residential, commercial, and utility infrastructure, affecting homes, light poles, walls, trees, and signs. In addition, essential services were disrupted, including medical care, transportation, electricity, gas, fuel, telecommunications, and water supply.

The urban and peri-urban areas of Bahía Blanca were the most affected, especially the towns of General Cerri and Ingeniero White, where pre-existing drainage conditions and high levels of vulnerability aggravated the situation. In General Cerri, material losses severely impacted families dependent on informal work, horticultural and rural production, generating a significant social impact.



In this context, the emergency gained international visibility and was reported in the international media. Following this situation, on 12 March 2025, the Senate declared the province of Buenos Aires, especially the municipalities of Bahía Blanca and Coronel Rosales, an emergency zone and a disaster situation for a period of 180 days due to the floods.



Cash distribution. Bahía Blanca, 6 April 2025. Source: Argentinean Red Cross



CEA activities, Bahía Blanca, 5 April 2025. Source: Argentinean Red Cross

Scope and Scale

The floods severely affected the entire district of Bahía Blanca, flooding 80% of the city and damaging more than 88,000 of its 100,000 homes. Total estimated losses amounted to US\$400 million. Approximately 235,900 people (70% of the population) were directly affected, with 18 confirmed fatalities, half of them over 80 years of age. Some residents had to take refuge on rooftops for more than 20 hours due to rapidly rising waters, especially in General Cerri. A total of 1,450 people were displaced, of whom 1,296 took refuge in 16 evacuation centers. Another 337,000 people were indirectly impacted.

Critical infrastructure was severely damaged. Electricity, water, gas, transportation, telecommunications and health services were interrupted. Hospitals and health centers -especially the Hospital Interzonal Dr. Penna- suffered significant damage from the floods. Garbage collection resumed on 11 March 2025 and water quality monitoring began the following day. Educational services were also disrupted: 156 of the 261 schools resumed activities on 20 March 2025, returning to normal by early April.

Road infrastructure, including Routes 3 and 252, remained heavily affected well into May, hampering access and recovery efforts. The municipality's operational capacity was reduced by 70% during the first few weeks and gradually restored.

Vulnerable populations-including the elderly, families dependent on informal labor, and peri-urban communities with poor drainage-were the hardest hit. In particular, neighborhoods such as General Cerri and Ingeniero White faced aggravated vulnerabilities.

Historically, events of this magnitude are extremely rare in the region. Rainfall recorded during this event exceeded levels seen in more than a century, underscoring the exceptional severity and lasting impact of the floods.

Source Information

Source Name	Source Link
1. BA Times	https://www.batimes.com.ar/news/argentina/report-climate-change-partly-behind-deadly-bahia-blanca-deluge.phtml



2. La Nueva	https://www.lanueva.com/nota/2025-5-12-8-42-0-el-adn-confirmo-que-los-restos-encontrados-son-de-delfina-hecker
3. DataClave	https://www.dataclave.com.ar/en-general/bahia-blanca-la-cifra-de-muertes-sube-a-16-y-mas-de-1400-personas-tuvieron-que-ser-evacuados_a67cc89fa6a0fe4d2f11a3225
4. INDEC	https://www.indec.gob.ar/indec/web/Nivel4-Tema-2-41-165
5. National Meteorological Service	https://www.smn.gob.ar/sites/default/files/Informe_Bahia%20Blanca_SMN_marzo_2025.pdf

National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?	Yes
Please provide a brief description of those additional activities	<p>Argentine Red Cross deployed a comprehensive operation based on its National Response Plan, initially declaring a Red Alert level and activating its National Response System on the same day of the event, 7 March 2025. Through the additional activities implemented by the National Society, more than 40,000 people were reached directly, while approximately 150,000 people were indirect beneficiaries.</p> <p>During the first 72 hours, technical teams and volunteer personnel were mobilized to the field, and the emergency was elevated to Category 3, the institution's highest classification. This categorization triggered a large-scale multisectoral and logistical deployment to directly assist more than 40,000 people, with a particular focus on the communities of General Cerri and Ingeniero White, two of the areas most severely affected by the adverse event.</p> <p>During the first week, 84 volunteers and 24 technical staff members specializing in emergency response, health, logistics, psychosocial support, risk management, and communications were mobilized. Key logistical resources were also deployed, including 4x4 vehicles, vans, minibuses, medical trailers, drones, and a mobile operations center, enabling the provision of first aid, assisted evacuations, pre-hospital care, and logistical support to evacuation and rescue centers. At the same time, hygiene kits, cleaning kits, filters, and water purification tablets were distributed, reaching thousands of people in critical situations, especially those isolated or without access to essential services.</p> <p>The National Society's response was structured into four interconnected phases.</p> <p>Phase 1 – Disaster Response: Argentine Red Cross provided support for emergency evacuations, in-home health assistance and support to response personnel, restoration of family links, and logistical support within Emergency Committees. It also supported care activities in evacuation centers through health assistance, distribution of kits, water, food, and psychosocial support.</p> <p>Phase 2 – Return Home: priority was given to housing recovery in General Cerri through the distribution of cleaning kits, hygiene kits, water filters and purification supplies, along with tool kits for community centers. Health care services were strengthened through mobile first aid teams, and efforts were made to restore chronic medication treatments. In addition, six health centers were equipped with furniture and basic medical resources, indirectly benefiting more than 12,000 people.</p> <p>Phase 3 – Early Recovery: Argentine Red Cross supported the restoration of four key</p>



community spaces (social centers and fire stations), indirectly benefiting more than 40,000 people by restoring community gathering points and basic community services. In addition, more than 300 community first aid kits were distributed to educational institutions and community organizations. Medical equipment, medicines, and medical consumables were also donated to the health department of the Municipality of Bahía Blanca.

Phase 4 – Strengthening Resilience: planning began for a community resilience proposal in General Cerri, including the restoration or creation of public spaces and the participatory design of community disaster preparedness plans.

Throughout these phases, a total of 219 unique individuals, including staff and volunteers, participated in the implementation of activities. Collectively, these individuals contributed to 1,324 volunteer deployments and staff mobilizations across the response. The 1,324 participations reflect the total number of mobilizations recorded throughout the operation. As many volunteers and staff members were deployed on multiple occasions and across different activities, individuals may be counted more than once in the participation total.

Various activities were carried out, including evacuations and support for rescue operations, reaching 265 people; restoration of family links involving 128 people; and support in evacuation centers reaching 429 people. In addition, first aid was provided to 621 members of the population and 51 first responders, while 151 patients were referred to hospital centers.

The National Society's support to community centers benefited 12,000 people. Regarding the distribution of relief items to the affected population, 1,418 cleaning kits were distributed (reaching 7,090 people), 971 hygiene kits were distributed (reaching 4,855 people), and 2,550 people were reached through the distribution of filters and water purification tablets.

In terms of humanitarian logistics through management and coordination activities, 40,000 people were reached, and 158 pallets of humanitarian aid were mobilized (managed and delivered to beneficiaries). In addition, as part of humanitarian transportation management, 3 full air cargo shipments were transported, and 65 mobile units were involved in local distribution activities.

All people directly reached by National Society activities received psychosocial support, a key process within the field of mental health that facilitates resilience, reconstruction, and the recovery of individuals, families, and communities.

Regarding equipment provision and infrastructure rehabilitation, support was provided to six health facilities, benefiting an estimated 45,000 patients and visitors. Of these, approximately 35,000 are recurrent users accessing services on a regular basis, while 10,000 are occasional visitors. In addition, 37 community gathering points were supported through the distribution of 361 items of equipment and supplies, enhancing their capacity to serve affected communities.

At the same time, 300 first aid kits were distributed to educational establishments in the Bahía Blanca district in coordination with the provincial education authority, and more than 40 additional kits were distributed to different socio-educational institutions across the city. This activity was accompanied by health promotion workshops delivered in kindergartens, schools, senior citizen centers, among others.

Additionally, Argentine Red Cross coordinated actions with the local and provincial Crisis Committee, participating in inter-institutional coordination efforts, and launched fundraising campaigns such as #DonateForBahíaBlanca, securing contributions of more than ARS 1 billion from civil society and the private sector.

Funds were received through Santander Bank and used for the Cash Transfer Programme, enabling a greater number of beneficiaries to be reached through debit cards.



The National Society's intervention, based on a rights-based, protection, and inclusion approach, enabled the delivery of an effective, coordinated, and evidence-based humanitarian response focused on restoring dignified living conditions and strengthening the recovery capacities of the most affected populations.

IFRC Network Actions Related To The Current Event

Secretariat	<p>The International Federation of Red Cross and Red Crescent Societies (IFRC) has a Southern Cone Delegation based in Buenos Aires, Argentina, which provides assistance and support to the National Societies of Argentina, Uruguay, Chile, Brazil, and Paraguay. This Delegation acts as a technical and operational liaison to facilitate preparedness, response, and recovery in emergencies, as well as to strengthen the institutional capacities of the National Societies within the region.</p> <p>During this emergency, the IFRC provided both remote and in-person support through the Southern Cone Delegation and the Disaster and Crisis Department of the IFRC Regional Office for the Americas, based in Panama, offering technical assistance for resource mobilization, information management, formulation of the DREF operation, and its remote and field monitoring.</p> <p>At the same time, through the Surge mechanism, two individuals were deployed to support operations management and provide technical support in Cash and Voucher Assistance (CVA). In addition, the Regional Office's technical focal points for Logistics, CVA, and Community Engagement and Accountability (CEA) provided remote support to the deployed Surge personnel.</p>
Participating National Societies	<p>There were no Participating National Societies (PNSs) providing support for this operation.</p>

ICRC Actions Related To The Current Event

The International Committee of the Red Cross (ICRC) has a mission in Buenos Aires. It works to promote the dissemination and adoption of international humanitarian law (IHL) among the armed forces and in academic environments. It also provides support to Argentina's Commission on the Application of International Humanitarian Law.

The ICRC focuses on improving the capabilities of the Argentine Red Cross to respond to emergency situations in the midst of violence and crises. In addition, it offers Restoring Family Links (RFL) services.

During the reporting period, this organization has not provided specific support for the emergency situation.

Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
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National authorities

All three jurisdictional levels took part in the response (municipal, provincial, and national).

The national government deployed personnel from the Security Forces and the Armed Forces to support security, rescue, evacuation, shelter management, field medical care, logistics, and transportation operations (including heavy transport vehicles, boats, and aircraft).

To improve circulation and connectivity lost due to the destruction of several bridges, the Argentine Army's Mechanized Engineering Company No. 10 constructed two Bailey bridges over the Maldonado channel.

In addition, the Ministry of National Security coordinated the deployment of the National Comprehensive Risk Management System (SINAGIR) and the Federal Emergency Agency (AFE), mobilizing resources and specialized personnel. Rescue teams, essential supplies, and amphibious vehicles were also deployed to access the most severely affected areas.

The Ministry of Health deployed a mobile hospital equipped with 40 beds, ventilators, infusion pumps, multiparameter monitors, ultrasound machines, a sterilization system, a pharmacy, ambulances, and medical teams sent to the city. In addition, emergency medical kits containing medications for cardiovascular diseases, diabetes, anti-inflammatory drugs, painkillers, antibiotics, corticosteroids, and bronchodilators were delivered, totaling nearly 20,000 additional treatment courses. Vaccines to prevent hepatitis A and rabies were also provided.

On 31 March 2025, the national authorities issued Decree 238/2025, establishing the creation of a Special Direct Assistance Fund with an allocation of up to ARS 200,000,000,000 to provide subsidies to affected residents. In addition, the "SINGLE SUPPLEMENT FOR RECONSTRUCTION (S.U.R.)" was implemented as a non-contributory cash benefit of up to ARS 3,000,000 intended to compensate material losses suffered by Argentine citizens or legal residents of Bahía Blanca over 18 years of age residing in the city.

The provincial government issued Decree 316/2025 declaring a 30-day state of emergency in the districts of Bahía Blanca, Coronel Rosales, Villarino, Puán, Coronel Suárez, Adolfo Alsina, and Guaminí. The purpose of this measure was to provide urgent assistance to affected populations, carry out necessary works, and prevent further humanitarian deterioration. Due to the continued severe impacts, the state of emergency was later extended through Decree 874/2025.

In coordination with the Municipality of Bahía Blanca, the provincial government led the emergency response by mobilizing the Ministry of Security and relying on the support of the Firefighters' Superintendency and the Government Secretariat. The Integrated Health Emergency System (SIES) provided medical care in the affected areas, while the Provincial Fire Department managed resources for search and rescue operations, including units from Necochea, Quequén, and Azul. Provincial Civil Defense assumed overall coordination, with two helicopters on standby for deployment depending on weather conditions.

Through Decree No. 373/2025, the provincial government established the "Direct Assistance Program for Those Affected by the Flood of 7 March 2025" in Bahía Blanca, Buenos Aires. The program aimed to provide subsidies of ARS 800,000 to households affected by the flooding, prioritizing those in conditions of greater socioeconomic vulnerability. Eligibility criteria included geographic location, level of damage suffered, and the socioeconomic situation of applicants.

At the municipal level, all available resources were dedicated to evacuations, medical care, and rescue operations, complemented by risk communication measures disseminated through various mass communication channels, preventive electricity cuts in the most affected areas, and the temporary suspension of school activities and



public transportation, prioritizing public safety.

Municipal teams began cleaning, debris removal, and reorganization tasks on 10 March 2025, particularly in the downtown area of the city, and together with the provincial government, Armed Forces, and Security Forces, they continued supporting the affected population.

At the same time, health teams carried out household visits in the areas most affected by the flooding to review vaccination records and administer vaccines to adults and children whose immunization schedules were incomplete. Household fumigation activities were also conducted to prevent an increase in mosquito populations.

In coordination with different entities, distribution points were established for bottled water, food, cleaning kits, mattresses and blankets, community clothing banks, and food assistance. In addition, a supplementary transfer of ARS 30,000 was added to social assistance cards during the month of March.

During the first 15 days following the flood, activities in educational and health centers were gradually restored, along with the reestablishment of waste collection and public transportation services.

UN or other actors

Local and national Civil Society Organizations participated in providing assistance to affected populations. Among them, the following can be highlighted:

- Scouts of Argentina launched a nationwide solidarity movement under the name #ScoutsxBahía. Local scout groups received, sorted, and distributed donations, set up community kitchens to provide hot meals to affected families, and assisted with the cleaning of damaged homes. At the national level, scout communities launched collection campaigns, sending food, clothing, and essential supplies.
- Different firefighter units sent personnel to support the recovery of homes and institutions. In total, 36 firefighters from localities such as Alberdi, Bayauca, Carabelas, Chacabuco, Colón, El Dorado, Granada, Salto, Lincoln, Vedia, and Roberts traveled to Bahía Blanca.
- Fundación Sí supported people affected by the floods through the distribution of food, hygiene and cleaning items, water, and mattresses. Since April, they have also distributed construction materials, work tools, and household appliances.
- Other civil society organizations deployed assistance in different parts of the city throughout the month of March.

Are there major coordination mechanism in place?

A Crisis Committee, made up of the mentioned agencies and led by the provincial authorities, was active.

Needs (Gaps) Identified



Shelter Housing And Settlements

The flooding left many homes uninhabitable, forcing numerous families to seek shelter in evacuation centers; however, the capacity of these facilities was insufficient to accommodate all evacuated families. According to data from the Municipality of Bahía Blanca, approximately 1,450 people were staying in these centers. As days passed, families gradually left these locations. The last center was closed on 18 March 2025.

The impact was especially severe in the most vulnerable households, where lightweight constructions suffered significant structural and content damage. Middle- and upper-middle-class sectors were also affected, highlighting the magnitude of the crisis.

Based on a needs assessment, it was identified that most homes in the affected area were built with stable materials such as brick and concrete (97.10%), while only a small percentage used lightweight materials (2.40%) or "other" materials (0.50%). However, the impact of



the flooding was significant, as 89.2% of homes suffered varying degrees of damage, affecting the daily lives of their inhabitants. In addition, 58.51% of respondents reported having to temporarily leave their homes, mostly self-evacuating to relatives' or friends' houses (52.60%) or being transferred to evacuation centers (25.30%). Other alternatives included remaining on the same property (8.40%) or staying on the streets or in private vehicles (2.60%). Eleven percent were evacuated to alternative locations such as neighbors' homes, fire stations, clubs, schools, religious centers, vehicles, or rooftops. Overall, 87.80% of people managed to return to their homes, while 12% remained displaced.



Multi purpose cash grants

As a result of the needs assessment conducted by the Humanitarian Observatory, it was identified that more than half of the people surveyed (54.90%) adopted adaptation strategies to cope with the loss of income, which evidences the direct economic impact of the emergency. In this context, 19.70% lost their source of work and 16.40% reported the loss of work tools, affecting their ability to generate income. To alleviate this situation, the main support strategies identified were family support (48.20%) and the help of neighbors and friends (41.70%), highlighting the reliance on informal networks to cope with the crisis. Regarding material losses, 92.6% of the people surveyed reported having lost essential goods, the most affected being clothing and bedding (78.30%), mattresses (75.60%) and kitchen items (57.30%). In addition, 43% reported the loss of refrigerators, affecting the preservation of food and medicines. A total of 37.30% lost work tools, which directly affected informal workers and self-employed workers. Finally, 15% mentioned the loss of large furniture, household appliances and vehicles, reflecting the structural damage to homes and the magnitude of the flooding suffered.

The implementation of a multipurpose cash transfer program represents a fundamental complementary strategy. This program will allow families to acquire, in the near future, the priority materials for the reconstruction of their homes, providing them with a significant degree of autonomy and choice in the acquisition of the most appropriate supplies for their specific needs.



Health

The emergency caused severe impacts on Bahía Blanca's health system, particularly at the Interzonal Penna Hospital, the region's main referral center, whose basement collapsed, forcing the evacuation of critical areas such as the emergency ward and neonatology unit, compromising its capacity to provide emergency medical care. In addition, municipal health centers suffered damage to medical equipment, consumables, and medicines, limiting their operational capacity and prioritizing only emergency care. Although outpatient services resumed on 13 March 2025 in all health facilities, surgeries at Penna Hospital were rescheduled for April, and academic activities were suspended until 31 March 2025, concentrating all resources on healthcare provision.

The accumulation of stagnant water favored an increase in mosquito population density. However, local health authorities did not identify an increase in the incidence of vector-borne diseases.

As a result of the Humanitarian Observatory needs assessment, gastrointestinal diseases were identified as the most prevalent among the affected population, reported by 35.30% of respondents. This situation was directly linked to the consumption of contaminated water, improper food handling, and overcrowded conditions in evacuation centers and flooded homes, manifesting in symptoms such as diarrhea, vomiting, and dehydration. Secondly, 19.20% of respondents reported dermatological conditions such as rashes and fungal infections caused by prolonged contact with stagnant water, mud, and wet clothing, especially in contexts without access to showers or adequate hygiene conditions. Finally, respiratory illnesses affected 11.20% of the population, exacerbated by persistent humidity, polluted air, poor ventilation, and overcrowding in improvised shelters. These findings highlighted the health impacts of the emergency and underscored the need to strengthen health prevention and response measures.

It should also be noted that accidents among affected individuals, as well as among first response teams mobilized to rescue those affected, increased significantly. The flooding damaged emergency ambulances, causing the temporary disruption of pre-hospital systems and resulting in delays in the treatment of patients with urgent medical and traumatic emergencies.

The rehabilitation phase following the storm was also characterized by precarious conditions where injuries and accidents were common, demonstrating the importance of having first aid kits available to adequately treat injuries caused by accidents during reconstruction activities, as well as training on their correct use in order to ensure immediate and appropriate care in emergency situations and protect the physical integrity of affected families





Water, Sanitation And Hygiene

The potable water service in several sectors of Bahía Blanca was severely affected, leaving thousands of people without access to this essential resource. This situation increased the risk of waterborne diseases such as leptospirosis, hepatitis A, and gastrointestinal illnesses.

The Humanitarian Observatory assessment in Bahía Blanca revealed a significant change in patterns of water access, treatment, and storage as a consequence of the flooding. A total of 61.8% of respondents reported having changed their usual water source, shifting from piped water (87.7% before the event) to bottled water (94.2% after the event), an emergency strategy that, although reducing health risks, implied additional costs and dependency on external assistance. This shift reflected a breakdown in the availability, accessibility, and/or safety of water resources within the household environment, whether due to contamination of the water network, flooding of facilities, or loss of storage infrastructure.

In addition, only 27.6% of respondents (237 households) adopted new water treatment practices, leaving a large proportion of the population (72.4%) at risk of consuming water without the necessary safety guarantees, particularly in a context where 35% of affected individuals reported gastrointestinal diseases. Regarding storage, a reduction in household storage capacity was observed: while before the flooding 65.5% used a family water tank, afterward only 36.7% stated they maintained this practice. Meanwhile, the percentage of people relying on small storage containers increased from 18.3% to 39.0%; those accessing a community tank decreased from 7.4% to 3.9%; and those reporting having no storage facility decreased from 11.8% to 8.3%. This reduction in storage capacity, combined with limited access to safe water sources and inadequate treatment practices, increased the risk of waterborne diseases, highlighting the need to continue guaranteeing access to safe water.



Protection, Gender And Inclusion

Following the needs assessment, it became evident that during the initial phase of the flooding, 25.3% of respondents reported having stayed in evacuation centers. It is important to note that these were mostly informal and self-managed spaces without protocols or structures to guarantee safety, hygiene, accessibility for people with specific needs, differentiated spaces by gender, or specific resources for pregnant women and children under five years of age.

Regarding the socio-labor situation, while 19.7% reported job loss, 16.4% lost work tools. In many cases, this situation affected people in informal employment, domestic workers, female heads of household, or young people without social protection, deepening pre-existing inequalities and hindering livelihood recovery for people in situations of exclusion.

During the operation of the shelters, it became evident that the emergency affected the population's health differently according to sex and age group. Cases of urinary tract infections, vaginal infections, anxiety, panic attacks, and symptoms compatible with post-traumatic stress were reported among women, adolescents, and older persons due to conditions in temporary shelters, exposure to contaminated water, and stress generated by the situation.



Education

The impact of the floods on Bahía Blanca's education system was severe. Numerous educational establishments suffered structural damage and lost equipment, office supplies, teaching materials, and other resources.

Among the most urgent emerging needs identified were the replacement of school materials, the establishment of safe spaces for learning and recreation, and prevention and response measures for accidents that could occur during infrastructure repair activities at school facilities.



Community Engagement And Accountability

Since the beginning of the emergency, the affected communities have expressed a strong need to be informed, to participate actively in decision making and to have accessible channels to express doubts, concerns or complaints about the assistance received.



During the first field surveys, it became evident that many people were unaware of the scope of humanitarian aid available from both the National Society and the plans of the National and Provincial Governments, the selection criteria for this aid and how to access it.

In this context, the need to strengthen community communication mechanisms, create spaces for active listening, and promote accountability instances that legitimize the humanitarian response and strengthen trust between organizations and communities are identified as priorities.

It is essential to ensure that affected people are not only passive recipients of assistance, but that they are able to influence, express their opinions and provide permanent feedback to the process, thus ensuring that the operation responds effectively to their real needs and changing priorities.

Operational Strategy

Overall objective of the operation

Through this Plan of Action, Argentine Red Cross aimed to provide comprehensive humanitarian assistance to vulnerable families affected by the floods in Bahía Blanca, especially in the General Cerri area.

At the end of the operation, 1,000 families (approximately 5,000 people) were reached through Multipurpose Cash Transfers, first aid, health promotion activities, Water, Sanitation and Hygiene promotion activities, as well as Protection, Gender and Inclusion activities.

Operation strategy rationale

Through this Plan of Action, Argentine Red Cross aimed to provide comprehensive humanitarian assistance to vulnerable families affected by the floods in Bahía Blanca, especially in the General Cerri area. In this way, 1,000 families (approximately 5,000 people) were reached through Multipurpose Cash Transfers, first aid, health promotion activities, Water, Sanitation and Hygiene promotion activities, as well as Protection, Gender and Inclusion activities.

Application of the Response Strategy

The operational strategy was based on protection criteria, prioritizing assistance to people in situations of greater vulnerability, women with children, households with persons with disabilities, people over 60 years of age, and people with chronic illnesses, while also considering the degree of damage to housing and livelihoods as a relevant criterion.

This prioritization responded to the immediate field assessments and evaluations carried out on the ground and to the analysis conducted by the National Risk, Emergency and Disaster Monitoring Team (ENMO), which identified the humanitarian gaps present in the post-flood scenario. In this way, the Plan of Action was structured around four key sectors:

Multipurpose Cash Transfers: Provided direct financial support to affected families in order to restore their financial autonomy. This strategy was selected following a feasibility analysis and community consultations, prioritizing families with severe housing damage, loss of livelihoods, and those who had not received support from other organizations.

Health: In this area, the National Society implemented first aid services during the different phases of the emergency, distributed community first aid kits, and carried out health promotion activities. In addition to providing an immediate response in the event of accidents or medical emergencies, these actions focused on reducing immediate and medium-term health risks while strengthening community response capacities.

Water, Sanitation and Hygiene (WASH): Together with the distribution of hygiene kits, filters, and water purification tablets (within the framework of the National Society's Emergency Action Plan), sessions on hygiene practices, water management, and basic sanitation were implemented for families receiving these items. Subsequently, WASH promotion activities were organized with community groups (schools, neighborhood associations, community centers, and other organized groups). These activities focused on preventing waterborne diseases, vector-borne diseases, and respiratory illnesses.

Community Engagement and Accountability (CEA): Measures were taken to ensure that affected populations actively participated in the design, implementation, and monitoring of the operation, promoting transparency and continuous improvement through meetings and assessments. Digital solutions were introduced to facilitate communication and ensure the traceability of and response to individuals requesting information or providing feedback regarding activities implemented by the operation.



The selection of these strategies responded to the needs identified through rapid assessments and humanitarian gaps, and was adapted to the emergency context, characterized by widespread housing damage, loss of livelihoods, and health risks. In addition, the post-flood inflationary impact was considered, ensuring that cash transfers were sufficient to cover the basic needs of affected families.

Targeting Strategy

Who was targeted by this operation?

The operation focused on providing assistance to 1,000 families (5,000 people), mainly in General Cerri and Ingeniero White. Priority was given to families directly affected by the floods that experienced total or partial damage to their homes.

Explain the selection criteria for the targeted population

The needs of all population groups were considered, taking into account age, sex, gender, and individuals with disabilities or special needs.

The needs of all population groups were taken into account, considering age, sex, gender, and persons with disabilities or special needs.

- Families whose homes suffered major damage or total or partial destruction due to the disaster.
- Families with members who are children, older persons (over 60 years of age), pregnant women, and/or persons with disabilities.
- Families not receiving direct assistance from other organizations, in order to avoid duplication of efforts and ensure that assistance reached the greatest possible number of affected populations.

Total Assisted Population

Assisted Women	3,000	Rural	33%
Assisted Girls (under 18)	0	Urban	65%
Assisted Men	2,000	People with disabilities (estimated)	15%
Assisted Boys (under 18)	0		
Total Assisted Population	5,000		
Total Targeted Population	5,000		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	No
Does your National Society have prevention of sexual exploitation and abuse policy?	No



Does your National Society have child protection/child safeguarding policy?	No
Does your National Society have whistleblower protection policy?	No
Does your National Society have anti-sexual harassment policy?	No

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
Inflation and market instability	Strategies will be implemented focusing on economic stability and access to essential goods and services. This will include continuous monitoring of the prices of basic goods and strengthening coordination with key public and private sector actors to ensure the continuous availability of essential goods. Additionally, mechanisms through which individuals can receive multipurpose assistance, as well as the amount granted, will be thoroughly assessed to ensure that market fluctuations are being considered, thus protecting the purchasing power of recipient families.
Misinformation and rumors regarding the multipurpose cash assistances. This could potentially lead to tensions between targeted and not targeted population	A clear and transparent communication strategy was applied. Meetings are organized with community referents (community members, leaders and representatives of vulnerable groups) explaining the working logic and the eligibility criteria used by the National Society in this operation. Through the National Society's Communication Secretariat, continuous monitoring of social networks is carried out, making it possible to identify and clarify rumors. A WhatsApp number has been set up to answer doubts and rumors about the National Society's operation. In the field activities there is an information area where the doubts of the community regarding the operation are answered promptly.
Limited capacity of the Red Cross to assist the entire population in vulnerable situations who do not receive support from other sources	Coordination with other organizations and government agencies to complement efforts and maximize the reach of available resources to benefit the largest possible population.
Staff and volunteer attrition and fatigue.	A staff rotation system is implemented and psychosocial support is provided for the well-being of the teams. The National Society rents a property that, in addition to being used as a base of operations, serves as accommodation for the volunteers deployed. This base has the necessary conditions for the volunteers to eat, rest, and engage in recreational activities. A person is deployed to ensure the well-being of the volunteers deployed in Bahía Blanca, both physically and mentally. Psychosocial support activities are provided after field activities.
Coordination Challenges / Duplication of efforts among humanitarian actors	Through the Emergency Operations Center (EOC), regular meetings, and real-time information exchange among the actors and organizations involved, a rapid and effective response was ensured. An EOC was established in General Cerri, enabling coordination



	<p>of operations in this sector, improving inter-institutional work, strengthening response capacity, and avoiding duplication of efforts, while ensuring that resources were distributed effectively.</p> <p>Participation took place in the Provincial Government's Crisis Committee, an inter-institutional coordination space among organizations involved in the flood response in Bahía Blanca.</p>
New rains or storms that hinder operational logistics.	Monitoring of activities by the Emergency Secretariat through its National Monitoring Team, with ongoing communication with the National Meteorological Service, including consideration of potential immediate actions to be taken.
Volunteers exposed to the risk of vector-borne diseases.	Protective equipment necessary for the activity is provided (appropriate uniforms, repellents, insecticides). The person in charge of volunteer welfare carries out continuous health surveillance of the deployed personnel. There is direct coordination with local health authorities to monitor the epidemiological situation of mosquito-borne diseases in order to establish measures to mitigate the risk of contagion to the volunteers deployed.
Delays in receiving required humanitarian aid items.	Compliance with the logistical procedures and standards outlined in the procurement/transfer strategy for inputs to meet the established operational deadlines. Advocacy is carried out with the corresponding instances of the IFRC Secretariat in order to facilitate the arrival of VISA cards to the Argentine Red Cross.

Please indicate any security and safety concerns for this operation:

The main security concerns within the context of this operation included the risk of theft, taking into account both the local context and previous experience in similar operations. As part of the strategy, a security protocol was developed to regulate field mobilizations, with the aim of mitigating risks and guaranteeing the safety of all persons involved.

In addition, continuous communication was maintained with local police authorities and municipal officials to ensure potential support if necessary. There was also major concern regarding the possibility of Argentine Red Cross volunteers and staff suffering injuries during mobilizations in affected areas. To address this situation, all personnel were provided with adequate insurance coverage and the necessary safety equipment to carry out activities safely and efficiently.

Has the child safeguarding risk analysis assessment been completed?	No
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Implementation



Multi Purpose Cash

Budget: CHF 340,032
Targeted Persons: 5,000
Assisted Persons: 1,000
Targeted Male: -
Targeted Female: -



Indicators

Title	Target	Actual
# of families reached with Multipurpose Cash Assistance	1,000	1,000
# volunteers trained on CVA	30	71

Narrative description of achievements

The National Society conducted a feasibility analysis to assess the appropriateness of implementing Cash Transfer Programming (CTP) in the context of this emergency through 1,998 household surveys.

As a result, the feasibility of distributing IFRC VISA cards to affected families for multipurpose use was identified, given the wide variety of needs reported. The cards were therefore intended to be used for the purchase of food, tools to replace household items lost during the emergency, and the reconstruction or repair of homes. Each card had a value of USD 380 per household.

Assessment surveys were carried out in General Daniel Cerri to determine eligibility for the Multipurpose Cash Transfer Programme, applying PGI principles through both in-person modalities (at School No. 510 facilities or at the homes of the most severely affected families) and telephone interviews, ensuring equal access to assistance for all affected persons. Based on 1,998 assessments, the final 1,000 card beneficiaries were selected according to the criteria established in the feasibility study.

In this way, 1,000 cards (1,000 families) were distributed through four distribution events, disaggregated as follows:

- General Daniel Cerri, 29/3/25, families reached: 238
- General Daniel Cerri, 6/4/25, families reached: 142
- General Daniel Cerri, 11/5/25, families reached: 541
- General Daniel Cerri, 7/6/25, families reached: 79

In addition to the 1000 VISA cards delivered, 80 additional cards were distributed using funds obtained through Fundación Margarita, increasing the number of beneficiary families under the Multipurpose Cash Transfer Programme. These beneficiaries were selected using the data previously collected in Cerri and the cards were distributed over two days between 7/6/25 and 8/6/25. Each card delivered had a value of USD per household.

The implementation of Community Engagement and Accountability (CEA) approaches contributed to several key outcomes throughout the operation. Community members were actively involved in reviewing and assessing the progress of the response, ensuring that their perspectives informed operational decision-making. Feedback received from affected populations was used to adapt and improve delivery mechanisms, making assistance more responsive to community needs and preferences.

In addition, clear information was provided to individuals who were not selected as recipients of assistance, helping to explain eligibility criteria and distribution processes and promoting transparency throughout the operation. Cases identified through community engagement activities that fell outside the scope of the National Society's mandate or the DREF operation were referred to municipal authorities and other relevant service providers for appropriate follow-up and support.

Due to its greater use among the target population, the WhatsApp line became the primary communication channel for multipurpose cash assistance inquiries, while the other channels were redirected to address additional questions. In this context, messaging systems were explored to send WhatsApp notifications to beneficiaries in a more agile, large-scale, and personalized manner, particularly to inform them about distribution dates or card activation. However, since this required a commercial Facebook account, it was recommended for consideration in future programmes.

All activities were made possible through the involvement of 85 volunteers from both Bahía Blanca and other branches of the Argentine Red Cross. Their participation strengthened both staff and volunteers through engagement in coordination, information management, and distribution activities alongside technical personnel.

As part of the National Society's capacity-building process, on 9/5/25 a webinar was conducted by the deployed IFRC Surge personnel specialized in CTP together with the person responsible for VISA card distribution activities within the National Society. A total of 71 Argentine Red Cross members participated. The webinar was subsequently uploaded to the National Society's virtual learning platform "APRENDE" to support future volunteer training.

Subsequently, on 17/5/25, an in-person CTP workshop was held in Buenos Aires for national headquarters staff and eight branches from the Buenos Aires metropolitan area that had been deployed and participated in activities in Bahía Blanca, reaching 15 participants. The



objective of these trainings was to strengthen basic CTP knowledge, integrating PGI and CEA components throughout the sessions.

The IFRC Regional Office provided training to two individuals — one Surge team member specialized in CTP and one representative from the National Society — on the use of the VISA card management platform provided by the company Onbe. Thanks to this training, both the card activation process and the monitoring of associated expenditures were significantly streamlined, enabling financial assistance to reach recipients more quickly and efficiently.

Lessons Learnt

- The implementation of cash transfers strengthened the dignity of affected people by promoting their freedom to prioritize and cover their most urgent needs.
- The CTP trainings organized by the National Society increased volunteer ownership and engagement.
- Integrating volunteers into all phases of the CTP process (registration, distribution, and monitoring) strengthened their operational capacities and understanding of people-centered approaches.
- Post-distribution follow-up was essential to validate the relevance of the assistance provided and to adjust processes flexibly and responsibly.
- The innovative use of the Monday platform throughout all CTP processes ensured timely responses to all individuals seeking information about CTP from the National Society.
- The experience strengthened the National Society's capacities for future cash-based response operations.
- Clear communication regarding transfer amounts and modalities reduced uncertainty and strengthened trust. - - Key messages were communicated at multiple moments: during card distribution, through printed informational materials, and via a dedicated WhatsApp communication channel.

Challenges

- ATM withdrawal fees in Argentina reduced the effective amount of cash available to beneficiaries.
- Exchange rate fluctuations involving the US dollar (USD) created distortions in the final conversion of transferred funds, affecting purchasing power.
- A continuous need for assistance was identified for older persons and persons with disabilities in managing cards and electronic procedures.
- The strategy of making phone calls from a "private number," implemented to protect volunteer personal data, created difficulties, as a significant number of people either did not answer or expressed distrust regarding the origin and purpose of the calls.



Budget: CHF 29,990

Targeted Persons: 5,000

Assisted Persons: 6,407

Targeted Male: -

Targeted Female: -

Indicators

Title	Target	Actual
# of people reached with first aid and pre-hospital care	2,500	2,286
# of people reached by the National Society's Community Health Promotion	4,000	4,121
# of community first aid kits distributed to local health facilities	40	40



Narrative description of achievements

First Aid Response

From the first hours of the event, teams of volunteers and technical staff from the branches of Necochea, Tandil, Buenos Aires, Mar del Plata, and Headquarters were mobilized to General Daniel Cerri, Ingeniero White, and Bahía Blanca, deploying a total of 108 people trained in first aid and pre-hospital care.

In these locations, immediate assistance was provided to people with minor injuries, wounds, trauma, medical emergencies, and acute emotional crises. This assistance was essential to fill the temporary gap in primary and pre-hospital care, while also enabling the prioritized referral of more complex cases such as pregnant women, persons with disabilities, or older adults suffering from decompensation. Assistance was also provided to members of first response teams who sustained injuries during humanitarian operations. All response teams were equipped with standardized first aid kits, institutional protocols were applied, and fluid communication was maintained with the local health system.

During the following weeks, services were provided with the following geographical breakdown:

General Daniel Cerri:

- Support for medical transportation: 194 people assisted.
- First aid assistance to affected people: 612 people assisted.
- First aid support to first responders: 95 people assisted.

Ingeniero White:

- Support for medical transportation: 11 people assisted.
- First aid assistance to affected people: 150 people assisted.
- First aid support to first responders: 30 people assisted.

Bahía Blanca – Downtown:

- Support for medical transportation: 4 people assisted.
- First aid assistance to affected people: 40 people assisted.
- First aid support to first responders: 10 people assisted

First aid stations were also installed during VISA card distribution activities, where 18 additional people were assisted, and during Margarita card distribution activities, where 3 people were assisted.

During health promotion activities, 3 first aid interventions were carried out in two different schools, and 8 interventions were provided in a Senior Citizens' Center.

Additionally, two Blood Pressure Screening Campaigns were carried out in two public spaces in the city:

- Bahía Blanca, 21 June 2025, Parque Independencia: 86 people reached (50 women, 23 men).
- Bahía Blanca, 28 June 2025, Parque de la Ciudad: 19 people reached (14 women, 5 men).

As part of the institutional strengthening component, the supplies and equipment used by the mobilized teams were replenished, thereby ensuring preparedness for future emergencies.

Distribution of First Aid Kits

To sustain local capacities during the recovery phase, a strategy for the distribution of community first aid kits was designed and implemented, delivering 347 units to educational institutions, neighborhood organizations, and community focal points (40 kits acquired with DREF funds).

The distribution of first aid kits, intended to meet the needs of various community organizations such as neighborhood associations, community centers, sports clubs, among others, also enabled an expansion in the coverage of people reached through first aid services. This action decentralized response capacity and strengthened community resilience. In this way, 361 families were reached between June and August.

Community spaces that received a first aid kit, which enabled expanded first aid coverage, included Asociación Civil Talita Kum, reaching 10 people; Casa del Niño de Ingeniero White, assisting 22 people; Community Center "Casa de Betania," assisting 30 people; Community Center "El Hogar de Naty"; Community Center "Los Peques de la Quinta," assisting 54 people; Community Center "Nos Ayudamos," assisting 13 people; Community Center "Parador Francisco," assisting 15 people; Community Center "Pequeños Guerreros," assisting 60 people; Community Center "San Ignacio De Loyola," assisting 45 people; Community Center "San Jorge"; Community Center "San Roque," assisting 15 people; Community Center "Sembrando Sonrisas"; Social and Sports Center "Chela Filipuzzi," assisting 60 people; Miramar Child and Family Development Center, assisting 40 people; Physical Education Center No. 46, assisting 17 people; Senior Citizens' Center "Alegria de vivir," assisting 30 people; Senior Citizens' Center "Abuelos Corajudos," assisting 23 people; Senior Citizens' Center of Loma



Paraguay, assisting 15 people; Villa Harding Green Recreational Club, assisting 30 people; "Villa Muñiz" Club, assisting 35 people; "Dublín" Social Football Club, assisting 23 people; Villa Nocito Sports Club, assisting 25 people; Grünbein Athletic Club, assisting 24 people; Soup Kitchen "A Puro Corazón"; Soup Kitchen "Alimentando el Futuro"; Soup Kitchen "Boulevard - Polo Obrero," assisting 16 people; Soup Kitchen "Entre Todos Salimos Adelante," assisting 20 people; Soup Kitchen "Luchemos Juntos por una Sonrisa," assisting 13 people; Soup Kitchen "Miramar," assisting 30 people; Soup Kitchen "Sonrisa Verdadera," assisting 50 people; Higher School of Visual Arts; Daniela Mena Neighborhood Community Social Group, assisting 30 people; "Mamá Margarita" Home, assisting 24 people; Jóvenes Esperanza, assisting 15 people; Snack Center "Arcoiris"; Snack Center "Dar te hará feliz"; Snack Center "Una Ilusión"; Snack Center "Desde el Alma"; Snack Center "Días de Sol," assisting 30 people; Snack Center "El Meren de Talleres," assisting 25 people; Snack Center "Los Principitos," assisting 30 people; Community Murga "Los Descarrilados," assisting 27 people; Community Meeting Point of Tierras Argentinas, assisting 25 people; Stella Maris Neighborhood Association, assisting 40 people; 9 de Noviembre Neighborhood Association, assisting 30 people; Grünbein Neighborhood Association; and "ABBA," assisting 12 people.

Health Promotion Activities

At the same time, in coordination with the National Society's Health Secretariat and based on the analysis of post-flood epidemiological risks, a health promotion strategy was launched. This initiative was structured around three complementary phases: the development of training guidelines according to the epidemiological scenario; the training of Bahía Blanca volunteers in community health, water, sanitation and hygiene (under the SPAC approach); and the implementation of direct activities such as health fairs and sessions for the dissemination of key messages.

These activities were culturally and contextually adapted, ensuring accessibility for diverse groups, especially children and adolescents, as well as older adults and migrant populations.

In General Daniel Cerri, activities were carried out in educational institutions under the General Directorate of Culture and Education of the Province of Buenos Aires, including Kindergarten No. 954 "Juana Azurduy" (Sauce Chico), reaching 9 people; Primary School No. 44 (Sauce Chico), reaching 15 people; Secondary School No. 7, reaching 755 people; and Physical Education Center No. 46, reaching 32 people. Activities were also implemented in social and educational centers, including the General Daniel Cerri Senior Citizens' Center, where 20 people were reached.

In Ingeniero White, activities were implemented at Primary School No. 15 "Stella Maris," reaching 181 people, and at Primary School No. 21 "Paula Albarracín De Sarmiento," reaching 125 people. Additional activities were conducted at the Ingeniero White Community Meeting Point, where 10 people were reached.

In Bahía Blanca, health promotion activities were carried out in educational institutions under the General Directorate of Education of the Province of Buenos Aires, including Kindergarten No. 909, reaching 28 people; Primary School No. 25 "General Juan Gregorio Lemos," reaching 100 people; Primary School No. 34 "José Manuel Estrada," reaching 370 people; Primary School No. 37 "Club De Leones," reaching 186 people; Primary School No. 46 "Comandante Seaver," reaching 360 people; Primary School No. 51 "Rafael Obligado," reaching 11 people; Primary School No. 52 "San Francisco del Monte," reaching 235 people; Primary School No. 68 "Marcos Antonio Zar," reaching 402 people; Primary School No. 84 "Antoine St. Exupery," reaching 232 people; Secondary School No. 4 "Bicentenario de la Patria" (Cabildo), reaching 195 people; Secondary School No. 17, reaching 116 people; Secondary School No. 19, reaching 80 people; Secondary School No. 26, reaching 91 people; Secondary School No. 31, reaching 63 people; Secondary School No. 33, reaching 80 people; Secondary School No. 34, reaching 237 people; and Secondary School No. 42, reaching 20 people.

Activities were also carried out in social and educational centers in Bahía Blanca, including the Stella Maris Neighborhood Association, reaching 35 people; Envión Stella Maris, reaching 25 people; an Envión Programme Workshop, reaching 30 people; the "San Martín" Senior Citizens' Center, reaching 8 people; the "San Ignacio De Loyola" Community Center, reaching 30 people; and the "Una Ilusión" Snack Center, reaching 40 people.

Lessons Learnt

- The rapid deployment of pre-hospital care points helped contain the overload of the public health system and saved lives during the critical phase.
- The distribution of first aid kits to community centers multiplied local response capacity.
- Health and water and sanitation promotion activities, coordinated with community organizations, generated greater community participation.
- The strategic coordination carried out by the National Society's Presidency and Emergency Secretariat with provincial and municipal education authorities facilitated the implementation of health promotion and WASH activities in educational establishments throughout the Bahía Blanca district.
- The content of promotion sessions was methodologically adapted according to the target group, becoming more recreational for children and more interactive for youth and adults.



- The support provided by the National Society's Health Secretariat enabled the continuous strengthening of volunteer capacities in facilitating promotion activities.

Challenges

- Unsafe conditions in flooded areas hindered the arrival of healthcare personnel.
- The need for medical referrals exceeded the capacity of the local public health system.
- Flood-related damage to health centers required rapid field decongestion measures.
- Weather conditions forced the repeated rescheduling of community health promotion activities.
- Volunteer fatigue activated rotation mechanisms involving volunteers from different branches.
- The limited number of volunteers resulted in work overload during the weeks when health promotion workshops were conducted.



Water, Sanitation And Hygiene

Budget: CHF 3,280

Targeted Persons: 5,000

Assisted Persons: 7,521

Targeted Male: -

Targeted Female: -

Indicators

Title	Target	Actual
# of people reached with hygiene promotion activities	5,000	7,521

Narrative description of achievements

Within the framework of the National Response Plan, Argentine Red Cross distributed family hygiene kits and water filters to families who had lost access to the public water network or whose household systems had become unusable. These distributions were concentrated in General Daniel Cerri.

Feedback gathered throughout the operation was used to inform implementation adjustments and strategic decision-making. On one hand, observations and recommendations provided by volunteers involved in distribution activities led to modifications in delivery modalities, improving the efficiency and accessibility of assistance. On the other hand, findings from the Humanitarian Observatory report of the National Society were considered in the prioritization of activities, helping to ensure that operational efforts remained aligned with the evolving needs and vulnerabilities identified in the affected communities.

During household distribution activities, hygiene and sanitation promotion sessions were conducted, emphasizing key messages such as handwashing, water treatment, and water maintenance practices.

The 680 families reached through these activities are detailed below:

General Daniel Cerri, 14 March: 104 families reached; General Daniel Cerri, 15 March: 265 families reached; General Daniel Cerri, 16 March: 214 families reached; General Daniel Cerri, 17 March: 51 families reached; General Daniel Cerri, 20 March: 16 families reached; General Daniel Cerri, 21 March: 16 families reached; General Daniel Cerri, 22 March: 14 families reached.

These indicators are in addition to those reached through the workshops implemented under the health promotion strategy described in the previous section. In this way, care and hygiene tools were provided to a total of 4,121 people, the majority of whom were children and adolescents.

As a result, it is estimated that Argentine Red Cross reached 7,521 people through direct educational actions, contributing to reducing the risk of vector-borne diseases, as well as gastrointestinal, dermatological, and respiratory illnesses, which were widely reported during the first weeks of the emergency.



Lessons Learnt

- The integration of hygiene promotion with the distribution of supplies increased the effectiveness of community practices.
- Practical demonstrations (handwashing, water management) had a greater impact than written messages.
- Contextualizing messages with local examples was key to achieving understanding and adherence.
- Coordination with schools as safe spaces for hygiene learning was strengthened.
- The need to include children and adolescents as key actors in hygiene promotion was validated.

Challenges

- Weather conditions characteristic of the winter season complicated outdoor educational sessions.
- Limited access to safe water in some areas of General Cerri hindered the implementation of recommended practices, as did the limited supply of soap in educational institutions.



Protection, Gender And Inclusion

Budget: CHF 0

Targeted Persons: 250

Assisted Persons: 228

Targeted Male: -

Targeted Female: -

Indicators

Title	Target	Actual
# of staff and volunteers that completed the sessions	30	157
# of people reached by protection, gender, and inclusion messages	250	228
# of RCRC staff and volunteers trained on prevention and protection of sexual exploitation and abuse, and child safeguarding	30	157
Needs assessment on protection, gender, and inclusion	1	1

Narrative description of achievements

Argentine Red Cross mainstreamed the Protection, Gender and Inclusion (PGI) approach throughout all phases of the response to the flooding emergency in Bahía Blanca, recognizing that emergencies affect vulnerable population groups differently and that effective assistance must be centered on dignity, equity, and non-discriminatory access.

The comprehensive assessments collected by the National Society and analyzed by the Humanitarian Observatory gathered data disaggregated by age, gender, disability, health status, and household composition, making it possible to identify heightened risk conditions in female-headed households and households including older adults, persons with disabilities, families with children, and people living with chronic illnesses.

Health, water, and hygiene interventions incorporated differentiated prioritization criteria, ensuring that these groups could access available resources in an equitable and safe manner. Cash Transfer Programme (CTP) distributions established eligibility criteria prioritizing households headed by single women with children under five years of age, households with pregnant women, older adults, people with chronic illnesses, and/or persons with disabilities.

As part of the remote CTP training process, on 9 May 2025, Argentine Red Cross trained 71 National Society volunteers on minimum PGI standards in emergencies, promoting good practices related to dignified treatment and active listening:



- National webinar, 9 May 2025: 71 people reached.

The reported figure of 228 people corresponds to participants reached through community activities, information sessions, and assistance interventions where key Protection, Gender and Inclusion (PGI) messages were disseminated. These messages covered topics such as violence prevention, protection of vulnerable groups, safe access to services, and the availability of feedback and complaints mechanisms. The total was derived from participation records consolidated throughout the implementation period of the operation.

The reported value of "0" under the indicator "PGI Assessments Conducted" reflects the fact that no standalone or dedicated Protection, Gender and Inclusion assessments were carried out during the operation. Nevertheless, PGI considerations and criteria were systematically integrated into broader assessments and data collection exercises conducted throughout the response. As a result, while the PGI approach was mainstreamed across assessment processes, these activities do not meet the definition of a specific PGI assessment and were therefore not counted under this indicator.

In addition, three PGI-focused sessions were conducted for different groups of participants, reaching a total of 157 individuals. These sessions contributed to strengthening awareness and understanding of key PGI principles among staff, volunteers, and community members involved in the operation.

During VISA card distributions, the Argentine Red Cross established a safe space (with shelter, chairs, and hydration) where older adults, pregnant women, mothers and fathers with children under two years old, and people with reduced mobility could receive their VISA cards without having to go through the standard distribution circuit established by the National Society.

At the same time, a virtual training on prevention against sexual exploitation and abuse and child protection was conducted over three sessions, with the participation of 157 people, including National Society staff and volunteers from different branches across the country:

- First Session "Introduction to PGI": 118 staff and volunteers completed the session.
- Second Session "Protection and Safeguarding Policies": 74 staff and volunteers completed the session.
- Third Session "Application of PGI in Emergencies": 59 staff and volunteers completed the session. • •

Lessons Learnt

- The integration of PGI into the activities implemented during the operation enabled a safer, more inclusive response adapted to the specific needs of vulnerable groups.
- Training volunteers on PSEA and child protection increased their capacity to identify and refer sensitive cases. Confidential feedback mechanisms were key to ensuring trusted environments.
- The establishment of a safe space for people with reduced mobility facilitated the humanitarian assistance card distribution process and enabled the provision of immediate support.

Challenges

- The internal cultural diversity of the communities required adapting messages to different cultural codes and levels of understanding.
- The shortage of inclusive materials may have limited the information provided to the population (for example, Braille brochures).



Community Engagement And Accountability

Budget: CHF 4,400
Targeted Persons: 5,000
Assisted Persons: 4,500
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
% of respondents who feel that National Society support/services meet their most critical needs and provide valuable assistance.	80	90



Narrative description of achievements

During the implementation of the DREF operation, the CEA approach was mainstreamed across all operational phases, consolidating itself as one of the most comprehensive experiences in incorporating rights-based and community management approaches.

The CEA approach was applied from the needs assessment stage, incorporating community consultations through interviews with authorities, health personnel, community leaders, household visits, family assessments, and participatory meetings in the affected areas. This information directly informed the planning of the operation, especially in the design of the Cash Transfer Programme (CTP), whose strategic decisions (such as eligibility criteria, delivery modalities, and communication channels) were co-designed with community focal points.

A particularly noteworthy element of the operation was the innovation of a consultation management system through the use of the digital platform Monday, which functioned as a real-time collaborative management system. This tool made it possible to capture, categorize, and track community requests, comments, and complaints, facilitating a rapid, organized, and traceable response to each request. The use of Monday also enabled the generation of indicators regarding service quality, response efficiency, and emerging needs, which were shared weekly with decision-making teams. The tagging system, assignment of responsibilities, and traceability of each request generated trust among the assisted population and strengthened both external and internal accountability.

A satisfaction survey was conducted among individuals reached by the operation to gather feedback on the relevance and usefulness of the assistance provided. The results indicated that at least 90 per cent of respondents considered that the support received addressed their priority needs and represented valuable assistance.

In addition, Community Engagement and Accountability (CEA) mechanisms were implemented throughout the operation to facilitate ongoing dialogue with affected populations. These mechanisms enabled community members to submit questions, comments, and suggestions, ensuring that feedback was continuously collected and considered during the implementation of activities.

Lessons Learnt

- The inclusion of multiple feedback mechanisms from the beginning of the operation increased the transparency and legitimacy of the response.
- The innovative use of the Monday platform to ensure the traceability of community concerns made it possible to guarantee that all concerns received responses, strengthening the transparency of the operation within the community.
- The Monday platform enabled the systematization and integration of feedback in real time.
- The empowerment of community leaders in the implementation of activities promoted community ownership of the response.
- Active listening by National Society volunteers reduced tensions and promoted collaborative conflict resolution during CTP distribution activities.
- Satisfaction surveys made it possible to identify timely adjustments to activities.
- The implementation of activities mainstreaming the CEA approach contributed to strengthening institutional and community trust in the National Society.

Challenges

- Processing and responding to community feedback required the National Society to create a dedicated operational structure specifically for this purpose.
- Some individuals initially showed distrust toward telephone-based feedback mechanisms due to the parallel presence of scams through these channels.
- Interpersonal communication needed to be reinforced in order to explain the purpose of the operation.



Secretariat Services

Budget: CHF 9,346

Targeted Persons: 0

Assisted Persons: 0

Targeted Male: -

Targeted Female: -



Indicators

Title	Target	Actual
Field monitoring missions	5	4
Session on PMER	1	0

Narrative description of achievements

The Secretariat of the International Federation of Red Cross and Red Crescent Societies (IFRC) provided a range of technical, operational, and strategic support services for the implementation of the Emergency Plan of Action led by Argentine Red Cross.

As part of this support, the Deputy Director of the Regional Office and the Head of the Southern Cone CCD conducted one field monitoring mission to the areas affected by the emergency. This visit was carried out in coordination with the local and national teams of Argentine Red Cross, and its main purpose was to accompany the implementation of operational activities, analyze the relevance of the strategies adopted, and assess the existing needs within the affected communities. The mission included interviews with beneficiaries, review of technical documentation, and direct observation of the adverse consequences of the flooding.

During this process, the CTP Officer carried out three monitoring missions during her deployment in order to provide technical support to the National Society in the implementation of the cash transfer programme, as well as to ensure the proper implementation of trainings and the design of post-distribution monitoring. Based on the work carried out by the Surge personnel, it was not necessary for IFRC to conduct a fifth monitoring mission.

Likewise, support was provided to the National Society in monitoring its results, in the methodological design of the lessons learned workshop, and through participation in the implementation of this process in Bahía Blanca. This made it possible to standardize quality requirements, establish clear means of verification, and align institutional evaluation methods within the Movement.

Regarding Planning, Monitoring, Evaluation and Reporting (PMER) training processes, the National Society conducted its own trainings for volunteers participating in these processes prior to the start of the DREF operation. For this reason, it was not necessary for IFRC to provide additional training, and remote support was provided to the management team during the implementation of the operation.

Lessons Learnt

- Continuous technical support from IFRC contributed to the implementation of operational activities.
- The tools shared by IFRC strengthened activity implementation and indicator tracking.
- Technical feedback improved the narrative and technical quality of the operation reports.
- Joint work promoted cross-institutional learning and the documentation of good practices.

Challenges

- Slow administrative processes within the IFRC structure, particularly regarding the management of CTP VISA cards, limited the rapid distribution of these cards.
- The lack of follow-up in international transportation processes for CTP VISA cards negatively affected the timely distribution of cards to families affected by the flooding.



National Society Strengthening

Budget: CHF 84,392

Targeted Persons: 100

Assisted Persons: 219

Targeted Male: -

Targeted Female: -



Indicators

Title	Target	Actual
# of volunteers provided with adequate protection, safety, and support equipment for the emergency.	100	219
# of lessons learned workshops conducted.	1	1

Narrative description of achievements

The operation carried out by Argentine Red Cross in response to the floods in Bahía Blanca not only focused on addressing the urgent needs of the affected population, but also on strengthening the institutional and operational capacity of the National Society itself, providing deployed volunteers with a safe, comfortable, and dignified environment during the operation, as well as equipping them with the tools, supplies, resources, and transportation necessary to operate effectively in the field.

This was essential to ensure a safe, efficient, and sustainable intervention, enabling the organization to provide the population with services delivered with both quality and compassion, while also consolidating lessons learned to improve preparedness and response to future emergencies in the country.

One of the operational priorities was to guarantee the protection, safety, and well-being of the mobilized volunteers, recognizing their essential role in every phase of the response. In this context, all volunteers involved were provided with Red Cross uniforms, personal protective equipment, repellents, and personal hygiene items, which helped reduce physical risks, protect health, and facilitate their work.

This process reached the 219 volunteers deployed in Bahía Blanca, who operated during the flooding and throughout the implementation of activities included in the operation. In addition to equipment provision, rest areas, food, psychosocial support, and direct communication channels with national technical teams were ensured in order to address any critical situations arising during operational activities.

As part of this strengthening process, a lessons learned workshop was conducted during the month of August. This process involved both Headquarters staff and volunteers who participated in the operation, as well as IFRC personnel and people reached within Bahía Blanca district. To ensure the participation of all these actors, an in-person workshop facilitated by Headquarters personnel and Paraguayan Red Cross staff was held, together with an in-person focus group session in Ingeniero White involving local community members, and an online survey directed at Headquarters staff who participated in the operation. These three processes generated inputs capable of informing an implementation and follow-up plan for lessons learned, including actionable recommendations for the National Society.

Lessons Learnt

- The adequate provision of protective equipment for National Society volunteers increased volunteer safety and well-being.
- The operation served as a learning space for new leadership figures from branches deployed in support of the operation.
- Lessons learned identified throughout the operation were systematically analyzed and used to strengthen local preparedness capacities. As a result, the Bahía Blanca branch developed a Local Emergency Response Plan that incorporates key findings, operational experiences, and recommendations generated during the response.
- Furthermore, the Local Emergency Response Plan was aligned with municipal emergency response frameworks and procedures, strengthening coordination mechanisms and enhancing the branch's capacity to operate in a complementary and coordinated manner with local authorities during future emergencies.
- Partnerships developed in the field strengthened the territorial network of the Bahía Blanca branch and, consequently, of the National Society.
- Institutional visibility increased thanks to sustained engagement with media outlets and communities.
- Local coordination with provincial and municipal governments, as well as key actors within Bahía Blanca district, was strengthened.
- The active involvement of branches in the operation fostered a stronger sense of national belonging.
- An organizational culture oriented toward continuous learning was promoted.



Challenges

- The inflationary context affected budget planning and procurement processes.
- The administrative workload reduced the time available for field activities.
- Pressure to achieve results limited opportunities for team reflection and self-care.
- Adverse weather conditions affected logistics and volunteer mobilization.



Financial Report

DREF Operation

Selected Parameters			
Reporting Timeframe	2025/2-2026/3	Operation	MDRAR023
Budget Timeframe	2025/03-2025/08	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 30/Mar/2026

All figures are in Swiss Francs (CHF)

MDRAR023 - Argentina - Flood

Operating Timeframe: 15 Mar 2025 to 31 Aug 2025

I. Summary

Opening Balance	0
Funds & Other Income	499,921
DREF Response Pillar	499,921
Expenditure	-489,107
Closing Balance	10,814

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items			0
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	340,032	357,483	-17,451
PO04 - Health	28,160	29,990	-1,830
PO05 - Water, Sanitation & Hygiene	3,080	3,280	-200
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery	30,512	263	30,249
PO10 - Community Engagement and Accountability	4,400	4,686	-286
PO11 - Environmental Sustainability			0
Planned Operations Total	406,184	395,702	10,482
EA01 - Coordination and Partnerships			0
EA02 - Secretariat Services	9,346	3,527	5,819
EA03 - National Society Strengthening	84,392	89,877	-5,485
Enabling Approaches Total	93,738	93,405	333
Grand Total	499,921	489,107	10,814

[Click here for the complete financial report](#)

Please explain variances (if any)

The "Multipurpose Cash" budget line presents an overspending of CHF 17,451. This variance is due to exchange rate fluctuations between the time the budget was prepared and the time the expenditure was recorded.

The Risk Reduction, Climate Adaptation and Recovery budget line presents an underspending of CHF 30,249. This variance was caused by a budget coding error related to the allocation of the activity code during the expense recording process.



Contact Information

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

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[Click here for reference](#)

