

Emergency appeal No: MDRAR022 Emergency appeal launched: 17/09/2024 Operational Strategy published: 04/11/2024	Glide No: N/A
Operation update #2 Date of issue: 30/05/2025	Timeframe covered by this update: From 17/09/2024 to 16/04/2025
Operation timeframe: 12 months (17/09/2024 - 30/09/2025)	Number of people being assisted: 20,000
Funding requirements (CHF): CHF 3 million through the IFRC Emergency Appeal CHF 3 million Federation-wide	DREF amount initially allocated: CHF 500,000

To date, this Emergency Appeal, which seeks CHF 3,000,000, is 1.8 percent funded. Further funding contributions are needed to enable Argentine Red Cross, with the support of the IFRC, to provide humanitarian assistance and protection to people affected.



Volunteers from the Argentine Red Cross carry out health promotion activities with homeless people on day and night tours in different locations of the Buenos Aires Metropolitan Area. December 2024. Source: Argentine Red Cross.

A. SITUATION ANALYSIS

Description of the crisis¹

Argentina is facing one of the most serious economic and social crises in recent decades, marked by high initial inflation, loss of purchasing power, limitations in access to health and coverage, job insecurity and consolidation of structural poverty. During 2024, the situation worsened significantly, affecting several sectors of the population, especially the most vulnerable.

From April 2024 to the present, the deepening of inequality in income distribution stands out. Despite certain signs of macroeconomic recovery, key social indicators show a persistence of structural poverty, a deterioration in real incomes with an increase in labor informality and widening of gaps in access to basic rights, with a strong impact on the community level and serious consequences for the most vulnerable individuals and families.

During the first quarter of 2025, although a slight recovery in economic activity was observed (year-on-year increase of 6.5%), this macroeconomic improvement did not translate into an increase in private consumption². The employment rate remained stable, with general unemployment of 6.4% (a slight decline compared to the same period in 2023). However, the year-on-year loss of formal private employment reached 182,000 jobs, also considering the public sector, as well as the high levels of labor informality, with more than 36% of the employed population not making pension contributions.

Inequalities in income distribution persist and are accentuated. The Minimum Living and Mobile Wage (SMVM) for March 2025 fell by 30% compared to November 2023. For its part, the wage gap between registered and unregistered workers stood at 76%, strongly affecting those who enter the informal market. In addition, inequalities in income distribution persist and deepen, significantly affecting the most vulnerable sectors. In March 2025, the Minimum Living and Mobile Wage (SMVM by its initials in Spanish) registered a 30% drop compared to November 2023, while the wage gap between registered and unregistered workers reached 76%, especially impacting those who work in the informal market. This disparity is reflected in a profoundly unequal income structure: the 40% of the population with the lowest income receive, on average, less than the SMVM, while the highest income sectors can earn up to 13 times more. This scenario consolidates a structural inequality that translates into a high Gini index (0.430), confirming the concentration of wealth.

The precariousness of income is also evident when comparing the SMVM with the individual Total Basic Basket (CBT), which in February 2025 exceeded it by more than 15%, placing even formal workers with minimum incomes below the poverty line. This situation prevents an effective recovery of consumption in the most affected households and consolidates a structural poverty base, deepening barriers to access to resources and opportunities and reinforcing social stratification. This reality is reflected in the evolution of the poverty rate: although poverty measured by income shows a slight downward trend compared to 2023, structural poverty of a multidimensional nature persists, including shortcomings in access to health services, water and sanitation, social security, decent housing and quality employment. This is especially evident in younger people: while 52% of children and adolescents (0-14 years old) and 45% of young people between 15 and 29 years old are below the poverty line, both populations show strong limitations in their access to basic services, low school infrastructure and educational completion of their homes. This reinforces a cycle of exclusion and vulnerability.

¹ This summary compares the key findings of the [3 reports](#) of the Humanitarian Observatory of the Argentine Red Cross (April 2024, December 2024 and April 2025)

² [Infobae](#) (15/3/2025)

In the case of the elderly, despite the increase in the minimum pension, basic pensions continue to be below the CBT when extraordinary bonuses are not considered. More than 5.4 million older people receive incomes of less than \$400,000, which reveals the fragility of the pension system. Added to this is a 261.6% increase in the National Institute of Social Services for Retired and Pensioners (PAMI) basket of medicines, well above the inflationary average. This deterioration in living conditions generated a growing mobilization of the sector, with weekly protests in different cities, many of them repressed with strong security devices, which shows the level of social tension that this segment of the population is going through.

Finally, although no specific research (public or private) has been generated, a large part of the conditions described continued to impact the health sector. Cuts in the public health budget and limited access to medicines aggravated the general health situation of the population. Food insecurity, a product of the increase in the social gap that affected the poorest communities, had a direct impact on the health of these people, increasing their vulnerability to diseases and adverse health conditions.

In this report, despite some signs of macroeconomic recovery, key social indicators show a persistence of structural inequalities. Improvements in employment and poverty must be analyzed from a complex perspective, considering the evolution of variables on job quality, informality, and loss of purchasing power. The most vulnerable populations – children, the elderly and informal workers – continue to be the most affected by the crisis, and the State's responses, although they show some reinforcement in social programs, have not managed to reverse the effects of the deterioration accumulated since 2023.

Comparative table of the country situation in April 2024 and April 2025.

Axis of analysis	April 2024 ³	December 2024 ⁴	April 2025 ⁵
Inflation and purchasing power	Accumulated inflation at 276.2% (February 2024); real minimum wage 20% below inflation.	Year-on-year inflation of 289.4% (November 2024); insufficient minimum wage to cover the Basic Basket.	Year-on-year inflation of 55.9% (March 2025). March 2025 inflation: 3.7% (highest in 7 months). ⁶ Insufficient minimum wage to cover the Basic Basket. Deepening of inequality in income distribution (Gini coefficient at 0.430).
Poverty and destitution	Poverty: 41.7% (19.4 million people); Indigence: 11.9% (5.5 million).	Poverty: 52.9% (increase of 32%); indigence: 18.1% (97% increase).	Poverty: 38.1% (decrease of 28%); Indigence: 8.2% (decrease of 54.7%). The Universal Child Allowance - AUH (conditional social protection paid by the State) increased above inflation. Deepening structural poverty
Total Basic Basket (CBT)	Individual Cost: \$223,593; family: \$690,902 (February 2024).	Individual cost: \$324,099; family: \$1,001,466 (November 2024); year-on-year variation of 156.5%.	Individual cost: \$342,370 Family Cost: \$1,057,923 (February 2025) Year-on-year change of 42.4%

³ **Argentine Red Cross.** (2024, April). Economic and Social Crisis and Emergency: Current Situation in the Argentine Republic. Humanitarian Observatory of the Argentine Red Cross.

⁴ **Argentine Red Cross.** (2024, December). Economic and Social Crisis and Emergency: Current Situation in the Argentine Republic. Humanitarian Observatory of the Argentine Red Cross.

⁵ **Argentine Red Cross.** (2025, April). Economic and Social Crisis and Emergency: Current Situation in the Argentine Republic. Humanitarian Observatory of the Argentine Red Cross.

⁶ <https://chequeado.com/el-explicador/la-inflacion-de-marzo-de-2025-fue-del-37-y-acumulo-86-en-lo-que-va-del-ano/>

Unemployment and job insecurity	Unemployment: 5.8%; 35.7% of those employed without pension contributions; economic slowdown.	Unemployment: 6.9%; 36.7% of those employed without contributions; cumulative loss of 32,957 jobs in the industry.	Unemployment: 6.4%; 36.1% of those employed without contributions. Annual loss (Dec 2023-Dec 2024) of 182,000 formal jobs
Children and adolescents (NNyA)	69% of children and adolescents in multidimensional poverty; 3.5 million stopped eating main meals.	Child poverty: 59.3%; child indigence: 33.8% (141.4% increase compared to 2023).	Child poverty: 51.9% Child indigence: 11.5% ⁷ Deepening multidimensional poverty
Health and food	severe food insecurity in 28.9% of very poor households; 45.8% drop in drug sales.	Increased severe food insecurity; budget cuts in key health programs.	State cuts in infrastructure and health programs continue. Restrictions on social coverage of medicines for retirees and pensioners. Increased food insecurity.

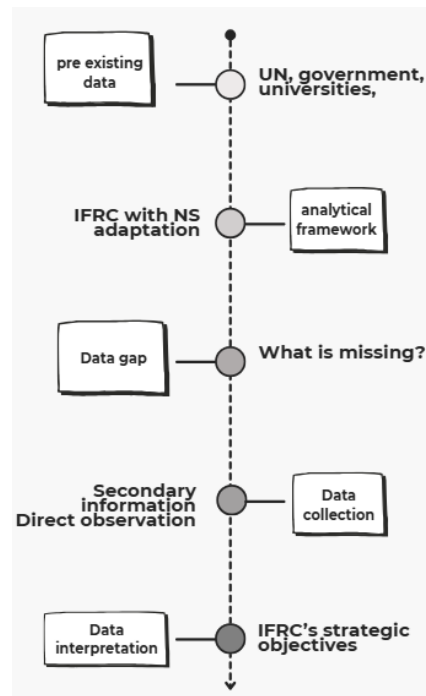
Summary of response

1. Multisectoral Emergency Needs Assessment

Coordinated work has been carried out between the Humanitarian Observatory (OH) and the National Risk, Emergency and Disaster Monitoring Team (ENMO) of the Argentine Red Cross for the planning and development of the Multisectoral Emergency Needs Assessment. Because the economic crisis has different characteristics from traditional disasters such as floods or wildfires, it was necessary to adapt the National Society's standard Emergency Needs Assessment (ENA) processes. This methodological adjustment, together with the required planning, initially generated delays in the implementation of the assessment.

It was also identified that the conventional tools, sources and data for measuring the country's economic context do not adequately reflect the impact of the crisis on families, since they are based on macroeconomic variables that do not incorporate multidimensionality and its consequent deepening of inequalities and social stratification. In this regard, it was necessary not only to adapt the National Society's assessment instruments, but also to adjust them to ensure that the real impact of the crisis on communities is represented.

⁷ <https://chequeado.com/el-explicador/la-pobreza-bajo-al-381-y-la-indigencia-al-82-en-el-primer-ano-de-milei/>



Multi-sectoral assessment planning. Source: Argentine Red Cross.

In the first instance, a secondary data analysis was carried out not only from the OH reports, but also considering complementary sources (reports from official bodies, the media and academia), which made it possible to identify gaps in key information to guide the collection of primary data (real and territorially differentiated impact of the economic crisis, coverage of needs by other actors, interventions by the National Society, etc.). Within these adaptations, the analysis framework was adjusted to respond to specific questions of the evaluation, with the aim of deepening the information in critical areas of the operational strategy and detecting gaps in emerging needs in the community environment.

The findings of this assessment will further inform community engagement and accountability strategies by identifying context-specific communication preferences and accountability gaps, enabling the Argentine Red Cross to refine its feedback channels, strengthen community participation in programme design, and ensure more inclusive and responsive decision-making processes at the local level.

At the close of this report, the multisectoral evaluation has been implemented through interviews with key informants in **32 cities** in **14 provinces** and **1 autonomous city**, covering a wide spectrum of territories affected by the economic crisis:

Buenos Aires Metropolitan Area Region (AMBA)

Autonomous City of Buenos Aires; Avellaneda, Campana, Esteban Echeverria, La Plata, Luján, Moreno, San Martín, San Fernando, San Isidro, Tres de Febrero and Tigre (Province of Buenos Aires).

Northwest Argentine Region (NOA)

Rosario de La Frontera, Salta (Province of Salta); San Miguel de Tucumán (Province of Tucumán) and San Salvador de Jujuy (Province of Jujuy).

Northeast Argentine Region (NEA)

Clorinda (Province of Formosa); Corrientes (Province of Corrientes); Posadas (Province of Misiones); Santa Fe (Province of Santa Fe).

Central Region

Luján; Mar del Plata, Necochea, San Nicolás, Tandil (Province of Buenos Aires); Córdoba, Río Cuarto (Province of Córdoba); Santa Rosa (Province of La Pampa).

Cuyo Region

La Rioja (*Province of La Rioja*); Mendoza, San Rafael (*Province of Mendoza*); San Juan (*Province of San Juan*).

Patagonia Region

Neuquén (*Province of Neuquén*).

In this process, **86 interviews** were conducted with key informants, including community leaders, institutional representatives, and strategic partners.

The Assessment coordination team is currently conducting a general analysis of the data collected, the preliminary results of which are presented in this report⁸. In the 6-month Operations Update, the locality-specific analysis will be deepened for a more detailed understanding of the impact of the crisis in each territory.

2. Distributions of Hygiene and Dengue Kits

Within the framework of the humanitarian response, progress has been made in the distribution of Hygiene and Dengue Kits to meet the priority needs of the affected communities. So far, supplies have been sent to the branches in Córdoba, Corrientes, Esteban Echeverría, La Plata, Moreno, San Andrés, Santos Lugares, Saavedra and Villa Crespo. In addition, **13 distributions have been carried out** (3 Provinces and the City of Buenos Aires) in the towns of Córdoba, Corrientes, Esteban Echeverría, La Plata, Moreno, San Martín, Tres de Febrero and the City of Buenos Aires, providing direct assistance to **414 people**. These actions have made it possible to strengthen hygiene and disease prevention conditions in the prioritized territories.

3. Anthropometric assessment activities

As part of the health strategy and in view of the needs identified, anthropometry kits have been sent to 29 branches, with the aim of facilitating anthropometric assessment activities and monitoring the health status of the communities served. In this framework, the Undersecretary of Health of the Central Headquarters carried out training on the use of the kits, in which 147 volunteers participated, along with 5 rented personnel, from 24 branches and the Central Headquarters. Currently, the branches are in coordination with the Undersecretary of Health for the planning of activities in the field, ensuring an effective implementation of anthropometric evaluations in the prioritized territories. Currently, 3 activities have been carried out, reaching a total of **127 boys and girls** between 6 and 12 years old in the towns of Neuquén, San Juan and San Rafael (3 Provinces).

4. Active purchasing processes

First Aid Items: First Aid supplies have continued to be received and will be distributed to all National Society branches involved in the implementation of actions within the framework of this Appeal.

5. Contact with potential donors.

During the period of this report, the scope of the appeal was presented via letter to the Turkish Red Crescent. In that communication, an invitation was also extended to consider their participation and support for the humanitarian response, with the aim of strengthening collaboration within the framework of this effort. A response is expected in the coming days, which could open new forms of cooperation.

⁸**Argentine Red Cross.** (2025, March). Emergency Needs Assessment: General Partial Report. Emergency Secretariat of the Argentine Red Cross. https://drive.google.com/open?id=10-HWcn4Dgt5YZEaYgbqU7afhPGZbsBU4&usp=drive_fs

Needs analysis

An updated needs analysis is presented based on the results obtained in the Multisectoral Emergency Needs Assessment carried out by the Argentine Red Cross in response to the current economic crisis. This analysis is structured around two humanitarian sectors identified as priorities: Health and Livelihoods, in addition to considering other basic needs and cross-cutting aspects such as security, housing and emotional well-being.

1. Health Needs

The economic crisis has significantly exacerbated the difficulties in access to and quality of health services at the national level. Interviews with key informants have revealed multiple challenges, including:

- **Infrastructure and Human Resources:** There is a marked insufficiency in health infrastructure, especially in rural and peri-urban areas, where primary health care centers have critical shortages of medical supplies, essential medicines and trained personnel. In urban areas, the saturation of hospitals and health centers generates long waiting times and a deficit of hospital beds.
- **Access to Medicines and Specialized Care:** The high cost and shortage of essential medicines represent a significant barrier for the population, especially in regions such as the NEA and AMBA. Likewise, the difficulty in obtaining medical appointments and accessing specialized care deepens the gaps in health.
- **Mental Health:** Mental health needs have increased considerably, particularly in communities exposed to recurrent emergencies and in saturated urban contexts. The lack of specialized services leaves people affected by stress, anxiety and other psychosocial effects derived from the economic crisis, material losses and recurrent adverse events without an adequate response.
- **Vulnerable Groups:** Older adults, children, adolescents, women heads of household, informal workers, people with disabilities and indigenous peoples are groups particularly affected by difficulties in accessing adequate and timely health services.

2. Livelihood Needs and Basic Needs

The economic impact of the crisis has generated significant deterioration in the living conditions of communities, mainly reflected in the loss of formal jobs, growth in informal work and increased dependence on social subsidies. The interviews conducted indicate that 61.4% of the participants perceive a significant worsening in their economic situation, which directly affects the ability to cover basic needs such as food, housing and education.

- **Employment and Labor Informality:** The loss of formal jobs and the closure of businesses have increased informal work as the main subsistence strategy. "Odd jobs" and temporary jobs predominate especially in urban and peri-urban areas of the AMBA, NOA and NEA. This situation generates economic insecurity and limits access to basic services such as food, health, housing and education.
- **Food Security:** A considerable increase in food insecurity has been observed, with many families reducing the frequency and quality of daily meals. Community kitchens have significantly increased their demand, reflecting the seriousness of the food problem.
- **Access to Social Programs:** Although programs such as the Universal Child Allowance (AUH) and the Food Card are still active, growing difficulties are reported to be in accessing them due to bureaucratization, reduced coverage and insufficient amounts in the face of the reduction in purchasing power.
- **Housing and Basic Services:** Housing precariousness (including the impossibility of accessing housing) and difficulties in accessing basic services such as drinking water and sanitation are recurrent, especially in the NEA and NOA.
- **Training and Job Training:** There is an urgent demand for training programs in trades with real prospects of labor insertion. Current initiatives often lack continuity, sufficient resources, and effective articulation between institutional actors.
- **Vulnerable Groups:** Older adults, women heads of household, informal workers are groups particularly affected by the difficulties in accessing decent and sustainable livelihoods.

Operational risk assessment

The operational risk assessment remains in force.

Risk	Probability	Impact	Palliative measures
1. Situations of political tension with the National Government	Medium	High	<ul style="list-style-type: none">• Maintain open and regular communication with the government to manage expectations, report on the progress of operations and avoid misunderstandings that could generate tensions.• Ensure collaboration with local and regional authorities, which can facilitate the execution of operations.
2. Duplication of efforts among humanitarian actors	Medium	Medium	<ul style="list-style-type: none">• Establish coordination mechanisms with local and international actors, and ensure clear and continuous communication to avoid duplication.
3. Exhaustion and fatigue of staff and volunteers.	Medium	High	<ul style="list-style-type: none">• Implement a staff turnover system and provide psychosocial support for the well-being of the teams.
4. Emergence of new situations generated by the current crisis, such as contexts of social tension	High	High	<ul style="list-style-type: none">• Provision of contribution mechanisms for the attention of these situations, including the mobilization of response teams to them.• Activation of response mechanisms due to the floods experienced in Bahía Blanca during 2025.
5. The number of people affected is really large	High	High	<ul style="list-style-type: none">• Review the strategy and evaluate the possibility of expanding it.


B. OPERATIONAL STRATEGY


Update on the strategy

The operational strategy remains aligned with the initial objectives, prioritizing health care, livelihoods and PGI. By early June 2025, with the completion of the multisectoral assessment, adjustments to this strategy could be in place.

C. DETAILED OPERATIONAL REPORT

STRATEGIC SECTORS OF INTERVENTION

 Livelihoods		Female > 18: 0	Female < 18: 0
		Male > 18: 0	Male < 18: 0
Objective:	Communities in disaster and crisis affected areas restore and strengthen their safety, wellbeing and longer-term recovery through shelter and settlement solutions		
Key indicators:	Indicator	Actual	Target
	# of people reached with livelihood training activities to strengthen the family economy.	0	10,200 people
	# of people trained in the "mobile classroom" in itinerant activities.	0	300 people
	# of people reached with essential income-generating services/information.	0	10,200 people
	# of families (and individuals) reached with essential services/information for employment opportunities, including self-employment.	0	10,200 people
	# of families (and individuals) reached who have completed training in improved production practices.	0	10,200 people
<p>Through the available funds, as the results of the multisectoral assessment have been obtained in 32 communities, other areas with impact on their local livelihoods have been prioritized. This makes it possible to guarantee a contextualised response to the identified needs.</p> <p>Likewise, actions in the field of health are being prioritized based on the preliminary results of these assessments, incorporating criteria of vulnerability and accessibility, in order to ensure effective articulation with the components of livelihoods, promoting a comprehensive approach to the affected communities.</p>			

 Health & Care (Mental Health and psychosocial support / Community Health / Medical Services)		Female > 18: 132	Female < 18: 60
		Male > 18: 228	Male < 18: 85
Objective:	Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods		
	Indicator	Actual	Target

Key indicators:	# of people receiving psychological and psychosocial support (MHPSS) in emergency situations.	0	1,520 people
	# of people assisted in the mobile health units sent to vulnerable communities.	0	1,840 people
	# of kits distributed and people reached with humanitarian aid.	414	1,500 people
	# of children aged 0 to 5 years reached by neurodevelopmental stimulation activities in community kitchens, educational institutions and other community spaces.	0	6,800 people
	# of children from 6 to 12 years old with anthropometric evaluation carried out in community kitchens, educational institutions and other community spaces.	127	6,800 people
	# of children ages 6-10 with vaccination compliance assessment for school enrollment.	0	5,400 people
	# of people receiving first aid.	0	500 people

The pre-positioning of the anthropometry kits in the branches of the Argentine Red Cross has been completed, which allowed the implementation of this component of the strategy to begin.

In this line, **three anthropometric evaluation activities** have been carried out in communities in the towns of Neuquén, San Juan and San Rafael (the latter is still in the process of reporting). These actions were carried out in community kitchens, educational institutions and other neighborhood reference spaces, reaching a total of 127 children between 6 and 12 years old, contributing to the early identification of nutritional risks and the strengthening of community health surveillance. 20 volunteers and 2 rented personnel participated.

People reached with anthropometric evaluation.			
Location	Male	Female	Total
Neuquén	70	46	116
San Juan	4	7	11

In addition, **13 humanitarian aid distribution activities** were carried out in the communities of Villa Crespo, La Plata, San Andrés, Moreno, Córdoba, Esteban Echeverría and Corrientes. Within the framework of these actions, a total of 414 personal hygiene kits and 401 dengue prevention kits were distributed, contributing to improving sanitary and prevention conditions in contexts with high levels of vulnerability. 108 volunteers participated.

People assisted with hygiene kit by location			
Location	Men	Women	Total
Villa Crespo	1	5	6
Santos Lugares	13	24	37
San Andrés	91	68	159
Moreno	29	7	36

Córdoba	62	19	81
Esteban Echeverría	42	8	50
La Plata	13	2	15
Corrientes	17	13	30
TOTAL	268	146	414

People assisted with dengue kit by location			
Locality	Men	Women	Total
Villa Crespo	1	5	6
Santos Lugares	9	15	24
San Andrés	91	68	159
Moreno	29	7	36
Córdoba	62	19	81
Esteban Echeverría	42	8	50
La Plata	13	2	15
Corrientes	17	13	30
TOTAL	264	137	401



Protection, Gender and Inclusion

Female > 18:

Female < 18:

Male > 18:

Male < 18:

Objective:

Communities identify the needs of the most at risk and particularly disadvantaged and marginalized groups, due to inequality, discrimination and other non-respect of their human rights and address their distinct needs

Key indicators:

Indicator

Actual

Target

of sectoral or PGI assessments conducted using PGI Minimum Standards.

1

1

of people reached by PGI.

0

1500

of people trained in the implementation of PGI's Minimum Standards.

0

200

of referrals made (GBV, Child Protection or others).

0

100

The Minimum Standards for Protection, Gender and Inclusion (PGI) have been incorporated into the planning and implementation process of the Multisectoral Assessment, ensuring an approach that is sensitive to the specific needs of the most vulnerable people and promoting data collection to guide a more inclusive and evidence-based response.

Enabling approaches



National Society Strengthening

Objective: *Communities in high-risk areas are prepared for and able to respond to disaster*

During the reporting period, virtual training was designed and implemented with 147 volunteers and 5 rented personnel from 24 branches and the headquarters, focused on the proper use of equipment in the Health area and the guidelines for the development of activities in the territory. This training strengthened the capacities of the branches when making distributions in communities affected by the economic crisis.



Community Engagement and Accountability

Objective: *Communities in high-risk areas are prepared for and able to respond to disaster*

Key indicators:	Indicator	Actual	Target
	<i># of people trained in operational communication and CEA.</i>	0	400
	<i># of feedback instances received and responded to.</i>	58	2500
	<i># of accountability documents prepared and disseminated to stakeholders.</i>	0	2

As part of the commitment to accountability and continuous improvement of interventions, feedback tools and satisfaction surveys have been applied to participants in different activities. In the province of Corrientes, 6 satisfaction surveys were carried out linked to training and community awareness activities. Likewise, 13 surveys were applied in the context of anthropometric evaluation activities, and 39 more surveys related to the distribution of personal hygiene and dengue prevention kits, in Corrientes and San Andrés.

On the other hand, 11 satisfaction and feedback surveys were carried out aimed at participants of face-to-face internal training carried out in the Moreno and Posadas branches. These actions make it possible to strengthen active listening mechanisms and adjust intervention strategies based on the perceptions and needs expressed by communities and operational teams.

Overall, CEA mechanisms have played a critical role in ensuring that affected communities are meaningfully engaged in coordination and decision-making spaces throughout the response to Argentina's economic crisis. By integrating two-way communication channels—such as feedback forms and satisfaction surveys—into all stages

of the operation, communities were able to express concerns, influence targeting criteria, and guide activity design. These tools enabled the National Society and IFRC to adapt interventions in real time, improving the relevance and fairness of assistance, particularly for marginalized groups. Furthermore, focal points actively participated in multisectoral coordination meetings, ensuring that community perspectives were systematically considered in planning and review processes. This inclusive approach strengthened transparency, accountability, and community trust, while reinforcing the institutionalization of CEA as a core pillar of the operation.



Coordination and Partnerships

Objective:

Communities in high-risk areas are prepared for and able to respond to disaster

No additional activities were implemented during the reporting period beyond those reported in [Operations Update 1](#).



Secretariat Services

Objective:

Communities in high-risk areas are prepared for and able to respond to disaster

During the implementation period, the IFRC Southern Cone Delegation supported the National Society in the following areas

- Guidance in compliance with financial procedures, ensuring transparency and accountability.
- Adaptation of the Appeal monitoring process, integrating IFRC and National Society information sources into a single dashboard.
- Advice on the development of the terms of reference for the multisectoral assessment.

D. FUNDING

At the close of this report, the National Society received a first disbursement from the DREF fund of CHF 300,000. Currently, more than USD 100,000 are in the process of execution within the framework of the current purchase processes.

Contributions have also been received from the Japanese Red Cross (CHF 29,437) and Monaco Red Cross (CHF 9,399) for lessons learned, final evaluation and audit.

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Reference documents

Click here for:

- [Emergency Appeal](#)
- [Operational Strategy](#)

How we work

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