

**SPANISH RED CROSS RESPONSE PLAN TO  
THE EFFECTS OF  
DANA (AUTUMN 2024)**

Preliminary plan  
November 6, 2024

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### Notes:

1. The Red Cross has been responding to the effects of this event since the onset of the emergency. The response plan outlined in this document reflects actions already initiated.

2. Due to the fact that this is an ongoing emergency, the context data provided is the most up-to-date information available at the time of publication of this document. This information is subject to change.

3. Throughout the document, reference is made to the following concepts:

*Family units:* Family members that the person considers to be his/her family, whether or not they reside with him/her. In a broad sense, the family unit is the set of persons linked by conjugal, family, consanguinity or adoption, civil or affinity ties, or by affective ties. This allows each person to indicate his or her family unit, which will be unique to him or her.

*Resilience:* The capacity of people and communities exposed to disasters, crises and underlying vulnerabilities to anticipate the effects of shocks and stressors, prepare to cope with them, reduce their impact and then recover without compromising their long-term future.

## 1. Executive Summary

Between October 29 and 30, 2024, an isolated upper-level depression (hereinafter referred to as DANA) left a devastating trail across various communities in Spain. Particularly affecting the **regions of Valencia, Castilla-La Mancha, and Andalucía**.

The episodes of strong winds and torrential rains led to severe flooding, resulting in the loss of over 200 lives. The phenomenon also caused damage to homes, infrastructure, essential services, and agricultural fields, profoundly impacting the lives and property of thousands of people. This disaster affected **both urban and rural areas**, creating emotional and economic impacts on families and entire communities, leaving a significant number of people in a highly vulnerable situation.

In response to this disaster, the **RED CROSS RESPONSE PLAN TO THE EFFECTS OF THE DANA (AUTUMN 2024)** is launched, with an estimated scope of **75,000 family units** and an initial duration of **36 months**. This plan will provide a holistic response to address urgent and mid and long-term needs, enabling affected families and communities to cope the emergency, recover and increase their resilience. The plan will be implemented using the people-centred approach, leveraging their capacities, promoting autonomy, and fostering sustainable recovery.

The intervention strategy not only provides direct support but also promotes actions to strengthen community resilience, enhancing their capacity to cope with future disasters and creating a lasting model of assistance. Thus, the operation is structured into three phases forming a **continuum of intervention: the immediate response phase, the recovery phase and strengthening and resilience phase**.

The plan integrates various recovery-oriented actions, including the distribution of goods and financial assistance, the restoration of livelihoods and employment, training, mobilization and accompaniment, mediation, temporary shelter and emotional support, amongst others. Through a **multidisciplinary intervention strategy**, the plan aims to support both beneficiaries and their communities, promoting recovery by immediately addressing urgent needs, developing skills, providing support through the adaptation process, and seeking sustainable solutions that ensure long-term dignified conditions. In addition to actions aimed at the **general population**, this response plan will focus on those at **higher risk of vulnerability and exclusion**. This includes households with children, single-person households in extreme vulnerability, women facing social difficulties, people with disabilities, and the older people.



## 2. Context

The DANA that impacted the eastern and southern regions of the Iberian Peninsula has left serious consequences in the central area of the Valencian Community and eastern Castilla-La Mancha, severely affecting around 80 municipalities and an area of over 56,000 hectares. One week after the event, the **death toll has reached 215**. The first official figure published quantifies the number of **active missing persons reports at 89**, although 62 bodies are still unidentified. During the initial days, up to 40,000 people remained without electricity supply due to infrastructure damage, and over 3,000 needed shelter in emergency accommodations.



In the **Valencian Community**, the hardest-hit areas were the municipalities in the regions of La Plana de Utiel-Requena, L'Hoya de Buñol, L'Horta Sud, and Ribera Alta, where the flooding caused not only material damages but also loss of life. In La Plana de Utiel-Requena, the most affected municipalities were Camporrobles, Fuenterobles, Utiel and Requena, with the latter two experiencing the worst effects, including infrastructure collapses, flooded homes, and displaced people. Additionally, the municipalities of Llombai and Alfarp were severely affected due to the overflow of the Magro river, which rises before joining the Júcar River. In L'Horta Sud, the towns of Torrent and Paiporta were among the hardest hit, with entire neighbourhoods isolated, vehicles swept away by the water, and significant damage to local infrastructure. In nearly all affected areas, individuals were trapped in homes, commercial zones, or industrial areas due to intense rains or mudslides, vehicles and other objects. In the Hoya de Buñol region, Chiva and Cheste also suffered extreme weather, with rainfall reaching up to 445 litres per square meter. Ribera Alta experienced significant damage, especially in towns from Llombai to Cullera.

In **Castilla-La Mancha**, the municipalities of Mira and Letur were the most affected, with fatalities reported. Both are rural areas with an aging population of around 900 inhabitants, facing severe damage to public infrastructure and homes, as well as access difficulties that hinder assistance to vulnerable residents.

In **Andalucía**, the Dana caused one fatality in Alhaurín de la Torre, as well as several injuries and scattered material damage, particularly in Cádiz and Málaga. The Andalusian Regional Government deactivated the emergency flood risk plan on the afternoon of Friday, November 1<sup>st</sup>.

## Impact

According to preliminary assessments from the Copernicus program, more than **4,000 hectares of urbanized area may be potentially affected**. The Ministry of Transport reports damage of 80 kilometres of roads and another 80 kilometres of railway tracks that will not be operational again in the short term. The population of the affected municipalities reaches 845,000 people, and it is estimated that 190,000 could be directly affected. Based on these figures, journalistic sources have analysed that at least 77,000 homes could be affected. In agriculture, Agroseguro has reported that **the DANA has severely impacted crops currently in harvest**, particularly persimmons, citrus fruits, and some vegetables in the Valencian community; citrus and vegetables in the region of Murcia; vegetables in the province of Albacete; and citrus and vegetables, including those grown under plastic, in Almería. There may also be damage to the wood of perennial crops and livestock farms. Regarding commercial activity, the Chamber of Commerce estimates that around **4,500 businesses in the province of Valencia have suffered damage**, with approximately 1,800 potentially destroyed.

These circumstances have placed a large population group in a state of newly emerged vulnerability, threatening both their lives and their property and means of livelihood, in addition to those who were already at risk previously, whose vulnerability may have been exacerbated by the emergency.

### DATOS PRINCIPALES COMUNIDAD VALENCIANA

Situación 19:00 3/11/2024



**190.000**  
Población AFECTADA

**845.000**  
Tot. población de los municipios afectados



**69**  
MUNICIPIOS Afectados



**95%**  
recuperan el ACCESO A LUZ



**1.800**  
Establecimientos destruidos



**314.000**  
Viviendas en zonas con riesgo de inundación

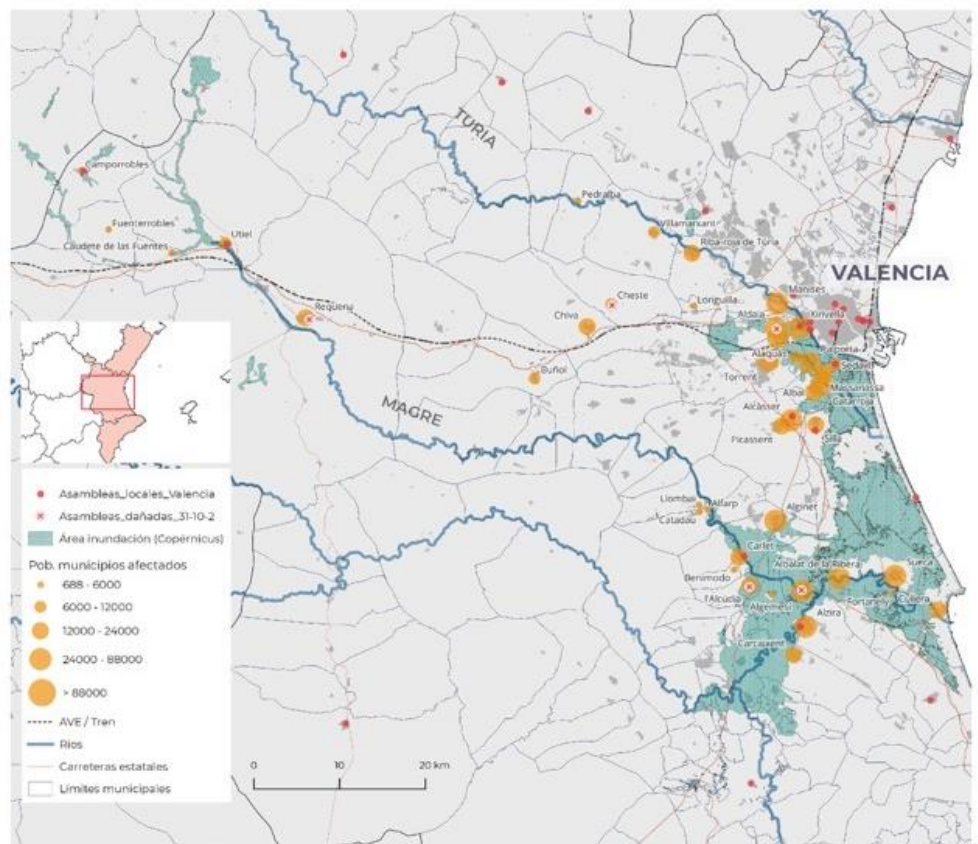


Cortes servicio ferroviario  
-Alta Velocidad Madrid Valencia

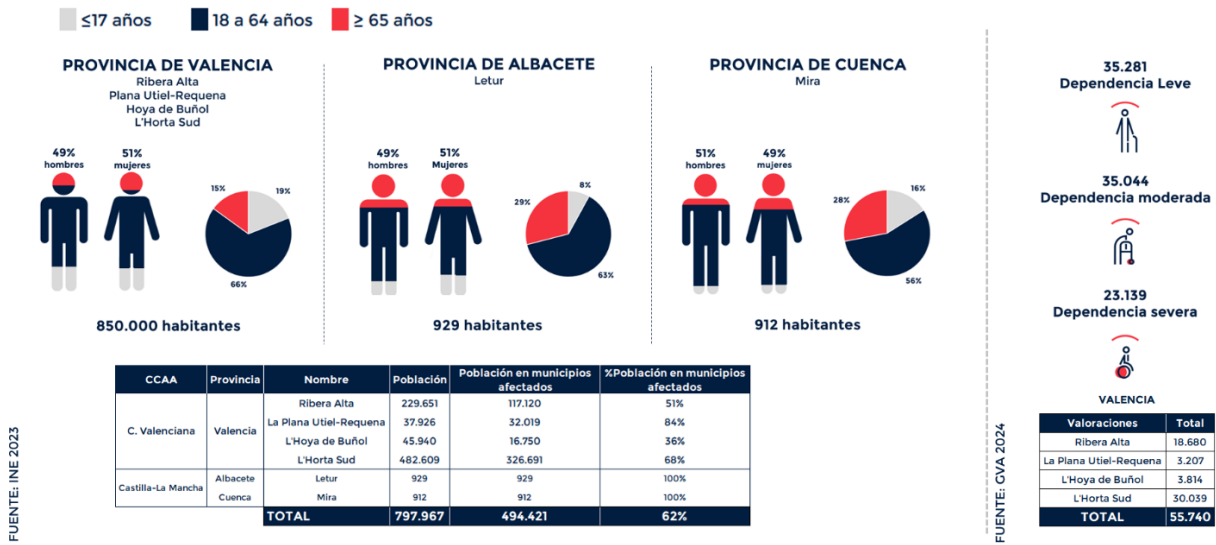
### VÍCTIMAS REPORTADAS



**214**  
Personas FALLECIDAS



## Demographic profile in the main affected areas



## Response

Based on the mechanisms of the National Civil Protection System, **regional authorities have assumed the operational management of the emergency in their respective territories.** Response operations have been joined by security and emergency forces from different administrative levels (municipal, provincial, and regional), essential service providers, as well as external support from other autonomous communities and the State; including the Military Emergency Unit (UME). Mechanisms for managing spontaneous volunteers have also been set.

Within the framework of this operation and under the umbrella of the territorial emergency plans, the **Red Cross has contributed with its local capacities and its basic and specialized emergency response teams.** Specifically, it has deployed Emergency Awareness and Information Teams (ESIE), Basic Emergency Response Teams (ERBE), and Immediate Emergency Response Teams (ERIE) specialized in Shelter and Logistics, Psychosocial Intervention, Communications, and Search and Rescue. This initial deployment has enabled support for evacuation, transportation, psychosocial support, and temporary shelter for displaced people, as well as cleaning and removing mud and debris, and distributing food and essential items.



### 3. Identified Needs

During the first 72 hours following the impact, the local Red Cross teams deployed on the ground conducted a **preliminary needs assessment**. This initial assessment along with the knowledge of the area and the population provided by the Red Cross local and regional branches in the affected area, has allowed them to guide the immediate response in coordination with authorities and to identify the areas that will require greater attention in the first weeks after the emergency.



## Immediate needs

- **Coverage of basic needs and restoring supply chains:** People need access to food, potable water, shelter (safe housing or temporary shelters), as well as hygiene and healthcare services. This support will be necessary until supply chains, especially food supply in isolated areas, are restored. In the meantime, in-kind assistance will be required, although it will later be appropriate to transition to cash assistance to help quickly recover and reactivate the local economy.
- **Search, rescue, and safeguarding of the physical and emotional well-being of survivors and responders:** While the search for missing persons continues, survivors need information, emotional support, and assistance in re-establishing contact. Alongside the completion of immediate response tasks, it will be crucial to protect the emotional health of those affected and the responding teams.
- **Restoring habitability of homes, community spaces, and functionality of public services:** Families will need support to restore safety and sanitation in their homes (cleaning, replacing damaged items, repairs). The functionality of public community spaces, essential services, and key infrastructure—such as access roads, water, electricity, telecommunications, and equipment—must also be restored. In certain areas, community mobilization will be important to supplement public services and speed up recovery efforts.

In addition to addressing population needs, there is also a need to restore the operational capacity of Red Cross branches in the disaster-affected area to enable them to resume full functionality and effectively carry out response tasks in this initial phase.

## Short and medium-term needs

Due to the constantly evolving context, the Red Cross will continue to **conduct real-time needs assessments** over the coming weeks, allowing the response strategy to be adjusted as necessary. Based on previous experience in managing post-disaster situations, it is expected that, in the med-term, the following needs will require intervention:

- **Restoration of livelihoods and transitional coverage of basic needs:** To prevent people from resorting to unsustainable coping mechanisms, it will be necessary in certain cases to support families basic needs (food, health, education, housing, and utility costs.) Support will also be required for the recovery of key productive sectors, especially those involving vulnerable or at-risk groups. People whose livelihoods are severely affected, such as those in agriculture or other impacted sectors, may need temporary diversification of their income sources.

- **Sustained Support for particularly vulnerable groups in the recovery process:** As in other post-disaster contexts, new risks may emerge (discrimination, violence, inequality of opportunities) that could affect the recovery capacity of at-risk groups, particularly older people, children, migrants, and women in vulnerable situations. This reality needs sustained support measures during the recovery process to promote the protection and empowerment of these groups
- **Social well-being and community reactivation:** Adapting to a new reality after the disaster (changes in the physical environment, in families, or in support networks) may require individual, group, and community support. It will be crucial to ensure social well-being and facilitate community-driven initiatives to reactivate social initiatives.
- **Strengthening community capacities to prepare for and respond to future crises:** Extreme weather events have been on a clear increasing trend for years. In view of this, it will be necessary to reinforce the capacities of the population to prepare for and respond to possible disasters, increasing the work related to disaster preparedness, with actions aimed at providing communities with knowledge, skills and resources to cope with this type of situation, strengthening the local response capacity of entities such as the Red Cross, and prevention actions such as nature-based solutions.

The implementation of Red Cross actions to address these medium- and long-term needs will also require resource mobilization and the sustained strengthening of internal capacities to ensure a quality local response.

## 4. Beneficiaries

The Red Cross intervention will prioritize the most vulnerable and at-risk groups among those affected, addressing both their urgent and mid long-term needs. Likewise, we will also work with the broader communities to strengthen their resilience and recovery capacity, and will support local and regional Red Cross branches affected by the disaster, restoring and reinforcing their operational capacity for this and future events

The intervention will focus on three main groups:

1. **Individuals** affected in different areas
2. **Communities** impacted by the disaster
3. **The Red Cross network** in the affected area

Within each group, key subgroups have been analysed to ensure that the intervention effectively addresses their specific needs:



**OLDER PEOPLE.** Older people are particularly vulnerable in flood disasters due to factors related to health, personal autonomy, mobility, dependency, or social vulnerability. Disaster impacts on health may require intervention, support, and monitoring of chronic illnesses, as well as access to medication. Mobility limitations can hinder access to resources and specific support measures, and social and emotional isolation can exacerbate the psychological impact. Special attention should be given to those who relied on tele-assistance services that may have been disrupted due to flooding, power outages, or phone line interruptions.



**CHILDREN AND ADOLESCENTS.** Children and adolescents are especially vulnerable during and after a disaster due to physical, emotional, educational, and social factors that can profoundly affect their development and well-being. This vulnerability is heightened in emergencies by the loss of safe spaces and their dependence on adults for care, protection, emotional support, and basic needs. Physical safety, health, emotional and psychological impact, lack of access to basic resources, and educational disruptions must be carefully addressed.



**PEOPLE WITH DISABILITIES.** People with disabilities face specific vulnerabilities in disaster situations, which can seriously compromise their safety, health, and access to essential resources. In addition to critical risks in the emergency phase, these circumstances further limit accessibility to necessary resources for well-being. The need for support and technical aids affected by the disaster for daily activities is a priority to ensure their autonomy, alongside addressing the emotional and psychological impacts of the experience.



**PEOPLE IN EXTREME VULNERABILITY.** Those facing multiple vulnerabilities are especially affected by disasters due to limited material and financial resources, making it harder to meet disaster-related needs. Housing impacts pose significant insecurity and risk for these individuals.



**HOMELESS PEOPLE.** Homeless individuals face numerous vulnerabilities, including lack of access to housing resources and basic material needs. Health concerns are also a factor, and the psychosocial impact of the disaster can worsen their situation, affecting emotional well-being in the short, medium, and long term.



**WOMEN IN SOCIAL DIFFICULTY.** Women face particular vulnerabilities in flood disasters, often dealing with economic instability, social exclusion, and, in some cases, gender-based violence. Socially assigned gender roles place additional responsibilities on women for the care and well-being of dependents, which can be physically and emotionally taxing, especially in emergencies. During the recovery phase, women may be more exposed to difficulties in restoring their autonomy, access to work or to the necessary economic resources, or even to a greater increase in violence, which, due to all of the above, limits their possibilities of making decisions and getting out of the situation, thus requiring comprehensive responses that address all of these risks. The emotional impact of the loss of their belongings, the impact on housing as a safe space and the exposure to unstable environments after the disaster require specific interventions.



**MIGRANT POPULATION.** Migrants face unique vulnerabilities in emergencies, being far from support networks, family, and familiar environments. Limited knowledge of available resources, language barriers, and, in some cases, irregular legal status, make it difficult for them to access public resources.



**PEOPLE WITH HEALTH ISSUES.** present significant vulnerabilities such as interruption of treatment or limited access to medication, difficulty in accessing health services, limitations in personal autonomy due to lack of mobility or psycho-emotional impact. These challenges can affect their health, as well as access and support to maintain the continuity of their treatment.



**ISOLATED RURAL COMMUNITIES.** Rural communities are exposed to specific vulnerabilities due to their geographic location, limited resources and socio-demographic characteristics. Limited access to emergency services, insufficient infrastructure to cope with the consequences of the disaster, economic dependence on the environment, as well as the psycho-emotional impact of the experience and consequences, must be specifically addressed.



**GENERAL POPULATION.** The disaster impacts not only the affected people, but also those who are not directly affected but are part of the community. On the one hand, they are exposed to effects on their emotional health and their livelihoods may be equally affected due to the socio-economic instability resulting from the disaster. On the other hand, it is clear that the population as a whole is exposed to hydrometeorological risks that must be warned, foreseen, mitigated and planned for; and in this task, community preparedness with broad and representative participation is fundamental.



**RED CROSS TEAMS.** Red Cross volunteers and staff intervening during the emergency will be exposed to realities and emotions that may impact on their emotional health and must be properly managed with the help of specialized staff. Intervention throughout the plan will also require volunteers to have the necessary knowledge and resources to be able to carry out their activity. It will be essential to replace affected operational assets, replenish inputs and strengthen capacity to continue to respond during and after the implementation of this plan. Likewise, it will be necessary to maintain and manage training, development and recognition of volunteer activity, as well as psychosocial support.



## 5. Response plan

### Operational Strategy

Following its humanitarian mandate to prevent and alleviate human suffering, the Red Cross has launched the **RED CROSS RESPONSE PLAN FOR THE EFFECTS OF THE DANA (autumn 2024)** to support and provide aid to individuals and communities affected by the DANA of Fall 2024.

This response plan, with an initial duration of 36 months, aims to support the recovery of people and communities in the affected areas with a holistic and coordinated approach, ensuring their physical, emotional, and social well-being. The plan includes immediate humanitarian aid, support for recovery, capacity-building to cope the situation, and assistance in restoring livelihoods, ensuring that communities achieve sustainable recovery post-emergency and are strengthened to face future crises. Throughout the process, there will be a focus on promoting the physical, mental, and social well-being of individuals, as well as empowering them to foster a recovery that enhances individual and community capacities.

To achieve this, a phased strategy has been outlined, moving progressively from the current emergency situation to recovery and resilience:



As each phase progresses, a comprehensive and coordinated intervention strategy will be implemented, involving contributions from all areas of expertise within the organization.

#### Adapting to context changes

This plan serves as a programmatic reference framework that will be adjusted according to the evolving context, new needs that may arise, or partnership opportunities that could extend its reach.

## Action Criteria

The Red Cross intervention is guided by the following criteria:



Orientación a la persona



Respuesta integral



Proximidad



Voluntariado



Participación



Orientación comunitaria



Vínculo



Buen gobierno



Eficacia y eficiencia



Perspectiva de género



Perspectiva de los Derechos de la Infancia



Perspectiva de los Derechos de las personas mayores



Innovación



Corresponsabilidad

## Operational objectives

### Operational Objectives

**GO.** Contribute to the recovery, resilience-building, and physical, emotional, and social well-being of people and communities affected by the DANA.

### Specific Objectives

#### Immediate response phase

**SO1:** Provide immediate protection and humanitarian assistance to affected individuals and response teams, addressing basic needs such as shelter, food, hygiene, health, and psychosocial support, with a focus on the most vulnerable groups.

#### Recovery phase

**SO2:** Support the recovery and return to normalcy of households, essential goods, and livelihoods.

#### Strengthening and resilience phase

**SO3:** Facilitate sustainable development and resilience in affected communities by strengthening and developing individual and community capacities.

## Expected outcomes and actions



### Relief Area

→ **We intervene** to help people overcome acute or chronic situations that endanger their lives, addressing emergency needs and promoting quicker access to assistance.

#### Expected outcomes:

**O1:** Immediate coverage of essential basic needs for the population and responders during the emergency is ensured.

**O2:** Return to normalcy is facilitated through participation in rehabilitation, environmental clean-up, infrastructure restoration, and providing support to the population.

**O3:** Early warning mechanisms and recommendations are developed to strengthen community capacities for disaster and emergency response.

#### Actions

Immediate response phase:

- Distribution of food, drinks, and essential goods: shelter, hygiene, and medication.
- Healthcare services and support in the medical transportation network.
- Psychosocial intervention and provision of psychological first aid.
- Setup and management of temporary shelter facilities.
- Restoration of communication networks.
- Assistance with cleaning homes and removing mud and belongings
- 

Recovery phase:

- Continued support for response actions until normalcy is restored: aid distribution, psychosocial support, and cleaning efforts.
- Establishment of information points for affected individuals to receive guidance and referral to Red Cross or other organizations' resources.

Strengthening and resilience phase:

- Continued support for response actions until normalcy is restored: aid distribution, psychosocial support, and cleaning efforts.
- Establishment of information points for affected individuals to receive guidance and referral to Red Cross or other organizations' resources.



## SOCIAL INCLUSION AREA

→ We work with individuals experiencing newly arising or pre-existing vulnerabilities worsened by the disaster, ensuring they have the opportunities and resources necessary to restore their participation and well-being in economic, social, and cultural spheres

### Expected outcomes:

**O1:** Coverage of basic needs for the most vulnerable individuals is supported.

**O2:** Comprehensive recovery of individuals and communities is promoted, reducing vulnerabilities and leveraging capacities.

**O3:** Community resilience and social engagement of individuals are strengthened.

### Actions

#### Immediate response phase

- Social follow-up for users of critical services (ATENPRO service users and older adults) who may have been affected.
- Reestablishment of contact between family members.

#### Recovery phase:

- Coverage of basic needs for food, hygiene, housing, utilities, and other essentials for affected individuals and families.
- Support for rehabilitation and repair of homes for vulnerable individuals.
- Social support for individuals facing extreme vulnerability or experiencing isolation.
- Assistance and social mediation in accessing rights and services.
- Support and intervention for individuals facing violence, discrimination, or exclusion, ensuring dignity, access to resources, participation, and safety for victims

#### Strengthening and resilience phase:

- Promotion and facilitation of social engagement and empowerment for the most affected individuals and families, providing comprehensive and sustained support to foster recovery.
- Promotion of community reactivation, social engagement, and participation.



## HEALTH AREA

→ **We provide support and guidance** in managing the health of individuals affected by the emergency, promoting their physical, emotional, and social well-being, and enhancing their functional capacity.

### Expected outcomes:

- 01.** Aid the most important necessities of the population.
- 02.** Reduce the physical and emotional impact within the community due to the ongoing emergency.
- 03.** Fortify the resilience and well-being of those affected

### Actions

#### Immediate response phase:

- Rapid health needs assessment, focusing on vulnerable individuals and response teams.
- Implementation of disease control measures in affected areas, including home and community monitoring in coordination with local authorities.
- Follow-up for individuals needing urgent disease management, in coordination with tele-assistance and emergency services.

#### Recovery phase:

- Psychosocial support for the community and responders.
- Regular assessment of psychosocial needs, supporting the community, volunteers, and technical staff.
- Deployment of therapeutic adherence activities, including medication reminders, appointment management, and accompaniment.
- Community health awareness and education.
- Promotion of healthy habits among the affected population

#### Strengthening and resilience phase:

- Health education and prevention about diseases related to contaminated water exposure and other risks.
- Creation of support and resilience groups where affected individuals can share experiences, support each other, and receive emotional assistance.
- Guidance and support in managing medical appointments and accessing public health resources, as well as integration into community activities that promote

physical and social well-being as individuals rebuild their lives, enhancing resilience and autonomy.



## EDUCATION AREA

→ **We promote equal opportunities in access to education** for vulnerable individuals affected by the floods, providing the necessary support and resources for them to continue their studies equitably. This includes the restoration of safe learning environments, educational materials, and support services to ensure continuity in education, minimizing the emergency's impact on their academic development.

### Expected outcomes:

**O1:** Immediate response actions for the recovery of educational infrastructure are strengthened.

**O2:** Actions to restore normal educational activities are promoted.

**O3:** Community capacities for risk prevention in similar situations are strengthened.

### Actions

Immediate response phase:

- Assistance and support for adapting school infrastructure.
- Facilitate access to basic training for immediate response activities for intervening personnel.

Recovery phase:

- Development of educational content and tools to address psychosocial support in classrooms with children, youth, and the educational community.
- Access to online platforms or provision of Red Cross facilities for educational groups needing resources.
- Psychosocial support in classrooms to help students and school staff process shared experiences

Strengthening and resilience phase:

- Climate resilience training (short courses on protecting and conserving critical resources) for the entire community.
- Educational microsite for training the public on emergency plans, identifying early warnings, and ways to channel solidarity effectively.



## LIVELIHOODS AREA

→ **We support affected individuals and communities in vulnerable situations to restore sustainable livelihoods, economic stability, and job opportunities.** Through activation and support in accessing labor rights and promoting equal recovery opportunities, we ensure fair and inclusive labor recovery.

### Expected outcomes:

**O1:** Projected job and entrepreneurship opportunities based on specific needs arising from the floods to support future community recovery and strengthening.

**O2:** Restoration of livelihoods through business recovery and access to new job opportunities for those who have lost them.

**O3:** Enhanced employability and skills for accessing both self-employment and salaried opportunities.

### Actions

Immediate response phase:

- Analysis of the impact and consequences of lost employment and livelihoods, both self-employed and salaried.
- Design of a medium- and long-term plan to support livelihood recovery in collaboration with public administrations and the private sector

Recovery phase:

- Information on labour rights related to force majeure situations and socio-labour resources.
- Support for unemployment processes, ERTE situations, financial compensation or special benefits, required steps and documentation, and assistance in finding new job opportunities.
- Labour mediation, facilitating tailored job placement and matching professional profiles to local labour market demands.
- Support for business recovery through specific self-employment aid, complementing other assistance or credit options.

Strengthening and resilience phase:

- Development of employment pathways, both self-employed and salaried, linked to local economic development.



## ENVIRONMENT AREA

**We promote sustainable and environmentally respectful practices** among communities affected by floods, reducing environmental degradation and its societal impacts. Through awareness and adaptation actions, we help mitigate future risks, fostering a more balanced relationship with the environment to prevent natural disasters and protect the well-being of people and ecosystems.

### **Expected outcomes:**

**O1:** Environmental risks compromising health and safety are reduced.

**O2:** Community and natural areas (parks, green spaces) are restored using nature-based solutions, and homes are retrofitted with energy-efficient measures (e.g., insulation and efficient appliances).

**O3:** Resilience of affected areas is strengthened with community participation.

**O4:** Increased environmental awareness and training for early response to environmental alerts.

### **Actions**

Immediate response phase:

- Rapid environmental assessment in affected areas to identify and reduce health and safety risks, such as contamination or hazardous waste (NEAT+).
- Distribution of eco-friendly supplies (Green Response IFRC) to ensure humanitarian and recovery operations minimize environmental impact.

Recovery phase:

- Ecological restoration of community spaces, including clean-up, ecological restoration, and planting native species along riverbanks, parks, and green infrastructure.
- Rehabilitation of homes with environmental standards, focusing on energy efficiency, resource optimization, and reducing environmental impact.

Strengthening and resilience phase:

- Promotion of community participation in environmental management, enabling communities to identify environmental risks and develop a local climate action plan, enhancing a sense of responsibility for environmental conservation.
- Implementation of actions to protect the environment and people through nature-based solutions.

→ **We work with children, adolescents, and young people** in vulnerable situations affected by the emergency, providing support and resources to ensure access to education and recreational activities. We aim to strengthen their individual and community capacities for their personal and social development.

### Expected outcomes:

**O1:** Immediate response actions for children, adolescents, and young people are strengthened.

**O2:** Recovery actions for affected children, adolescents, and young people are promoted through support and coverage of needs.

**O3:** Community capacity for youth resilience is strengthened, facilitating the adequate recovery of the most affected children and youth.

### Actions

Immediate response phase:

- Establishment of recreational and emotional well-being spaces for children and adolescents in emergency shelters.
- Promotion of protection for children and adolescents within emergency resources.
- Providing information to population, especially adolescents and youth, on the emergency situation through accessible channels.

Recovery phase:

- Support in providing educational, technological, and personal and social development materials for children, adolescents, and youth.
- Educational support for children, adolescents, and youth.
- Activities focused on leisure and personal and social development for children and adolescents.
- Training teachers in the detection of risk factors among students.

Strengthening and resilience phase:

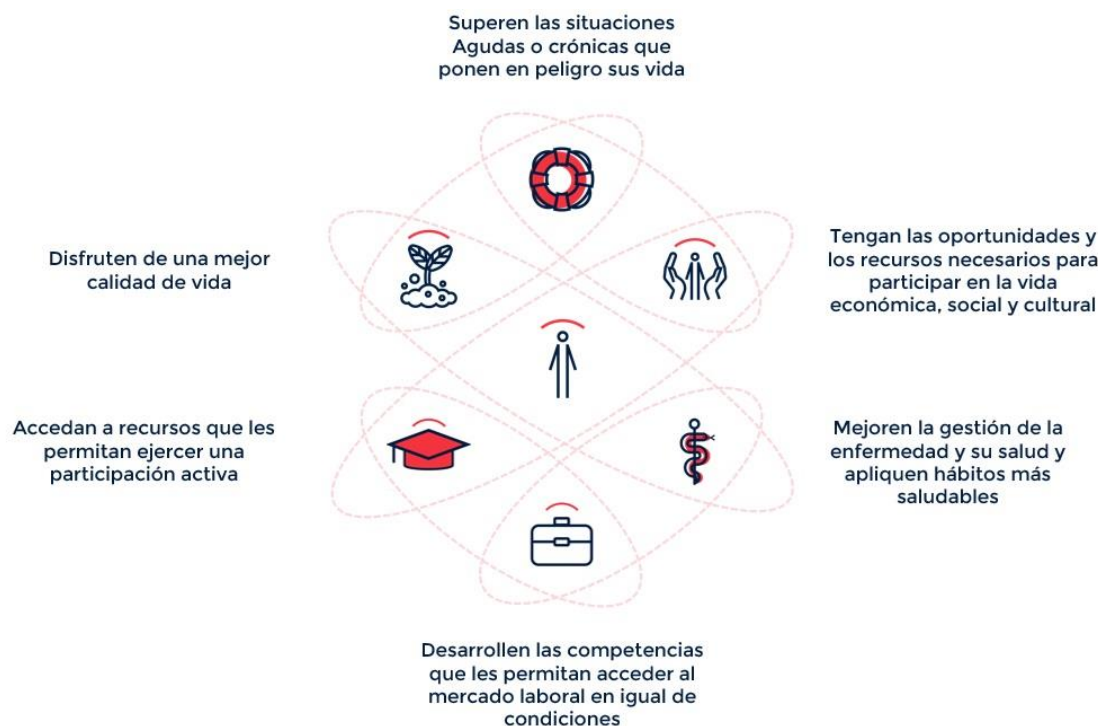
- Strengthening community capacity among children and adolescents through awareness-raising activities.

- Monitoring the availability of educational and developmental resources.
- Establishment of educational, recreational, and personal development spaces for children, adolescents, and youth most affected by the emergency.

## Intervention methodology

### Holistic response

This **response plan** recognizes the multidimensional needs arising from the emergency, integrating actions from all Red Cross knowledge areas (relief, social intervention, health, environment, livelihoods and education), which complement one another. This approach, centred on putting people at the core of decision-making, ensures coordinated work across all areas to meet individuals' needs effectively.



### Complementarity, coordination and alignment

This Red Cross plan is conceived from the recognition of the ownership of competencies held by public administrations, as well as the presence of other agents called to intervene in the immediate response and recovery after the emergency. Therefore, the management of this plan will pay attention to alignment with public policies, coordination among actors and the search for complementarity of aid, putting the best interests of the people at the centre of decision-making.

### Person-centred approach

The processes and methodological guidelines of the Red Cross' own framework "Person-centred approach" (MAP) will be applied, which is based on the following principles a) placing the individual at the centre of humanitarian commitment and as the protagonist of their own development; b) creating a personalized, consensus-based intervention plan; and c) developing holistic actions to address needs. Processes include: Reception, Immediate Response, Assessment, Intervention, Evaluation/Satisfaction, and Commitment.

### Community orientation

Certain transformations will require involvement beyond the individual level. A community intervention model will engage all community actors in finding and implementing solutions, promoting network-based collaboration.

### Knowledge management and data analytics

To facilitate evidence-based decision-making, technologies will be made available to the people and the operation. From the beginning of the intervention, data analytics tools will be available to collect the information recorded in the organisation's databases. In this way, the traceability of the aid and the commitment to record and follow up with the people assisted will be guaranteed.



## 6. Information and collaboration channels:

### Information:

900 22 11 22 | +34 913354455

[cruzroja.es](http://cruzroja.es) | [facebook](#) | [twitter](#) | [instagram](#) | [youtube](#)

Operation Accountability: [PowerBI](#)

### Open Access training content:

The Red Cross has compiled educational resources for the general public at:  
<https://www2.cruzroja.es/formate/recursos-formativos-dana>

### Collaboration channels :

900 104 971

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| BANK ACCOUNTS  |                               | BIZUM |
|----------------|-------------------------------|-------|
| SANTANDER      | ES44 0049 0001 5321 1002 2225 | 33512 |
| BBVA           | ES92 0182 2370 4600 1002 2227 | 33467 |
| CAIXABANK      | ES28 2100 0600 8502 0196 0066 | 04057 |
| SABADELL       | ES31 0081 5232 2800 0108 4716 | 04048 |
| BANKINTER      | ES75 0128 0010 9701 0012 1395 | 00087 |
| B. COOPERATIVO | ES86 0198 0500 8020 2205 3421 | 02727 |





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