

Angola  
Consolidated Emergency Report  
2018



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Annex 1: Two Page Report on Global Thematic Humanitarian Response (189910)

Annex 2: Two Page Report on Improving Access to Safe Water, Basic Sanitation and Enhancement of Nutrition and Hygiene Practices, for the DRC Refugee Population and Host Communities in Lóvua Municipality, Province of Lunda Norte / Angola (USA, State, BPRM)

*Cover page photo:* Refugee children participating live in UNICEF-supported radio programme about cholera prevention. UNICEF/2018/MPrates

## Abbreviations and Acronyms

<b>ACO</b>	Angola Country Office
<b>CCCs</b>	Core Commitments for Children
<b>CERF</b>	Central Emergency Response Fund
<b>C4D</b>	Communication for Development
<b>CLTS</b>	Community-led Total Sanitation
<b>CTC</b>	Cholera Treatment Center
<b>CSO</b>	Civil Society Organizations
<b>DMT</b>	Disaster Management Team
<b>DRC</b>	Democratic Republic of Congo
<b>ECD</b>	Early Childhood Development
<b>EiE</b>	Education in Emergencies
<b>EPP</b>	Emergency Preparedness Platform
<b>ESAR</b>	Easter Southern Africa Region
<b>GBV</b>	Gender-Based Violence
<b>HAC</b>	Humanitarian Action for Children
<b>IEC</b>	Information, Education and Communication
<b>IYCF</b>	Infant Young Child Feeding
<b>KAP</b>	Knowledge Attitude and Practice
<b>MAM</b>	Moderate Acute Malnutrition
<b>MoH</b>	Ministry of Health
<b>MPA</b>	Minimum Preparedness Actions
<b>MPS</b>	Minimum Preparedness Standards
<b>SAM</b>	Severe Acute Malnutrition
<b>TUPPI</b>	Todos Unidos pela 1ª Infância
<b>UNICEF</b>	United Nations Children's Fund
<b>WASH</b>	Water, Sanitation and Hygiene

## 1. Executive Summary

Vulnerability to natural hazards in Angola, particularly drought and floods in the last three to four consecutive years have constituted a major challenge to government's existing disaster management structures and a hindrance to the hard-gained development achievements of the country. Compounded, disease outbreaks, including cholera and the refugee influx from the Kasai region of the Democratic Republic of Congo (DRC) in the northern province of Lunda Norte have further stretched government preparedness and response capabilities thus adding complexity to the humanitarian landscape.

In 2018, the humanitarian situation in Angola was both complex and diverse in its multiplicity of events. An estimated 700,000 people needed humanitarian assistance, including access to safe and clean drinking, among whom, over 408,000 were children. Eleven out of the eighteen provinces in Angola have cholera hotspots and three outbreaks were registered in 2018, leading to 1,262 suspected cases and 18 confirmed deaths. At its peak, there were 36,452 refugees in Lunda Norte, combining to a total of 69,343 refugees and asylum seekers in Angola by December 2018. The humanitarian context in Angola must be analyzed also, within the broader social and economic deprivations, including the financial crisis and the decrease of the oil prices. These two factors have worked negatively to (1) increase the vulnerability of the most at risk populations and (2) reduce the ability of the government to timely and adequately allocate resources to respond to humanitarian crisis.

UNICEF's humanitarian strategy in 2018 consisted of critical life-saving interventions in water, sanitation and hygiene (WASH), Health, Nutrition, Education, and communication for development (C4D). A stronger emphasis was also placed to bridge the humanitarian and development divide. Through the implementation of WASH, health, nutrition, education and C4D programme interventions, UNICEF achieved significant results for children, notably:

- 348,909 children under 5 years old screened for malnutrition;
- 74,852 children aged 6-59 months with SAM admitted into therapeutic treatment programmes;
- 175,941 provided with access to safe water as per agreed standards;
- 93,356 people reached with access to appropriate sanitation facilities;
- 3,130 children aged 6 months to 14 years vaccinated against measles;
- 491,905 people reached with key messages on hygiene practices;
- 755 school and over 1,700 teachers were trained on cholera prevention and mosquito borne diseases, indirectly benefiting 400,000 students;
- 839 children accessed education services in the province of Bie and Huíla
- Community radio was used as an Accountability to Affected Populations (AAP) mechanism as of the ACO refugee response. Until the end of 2018, around 200 refugees per week -half of them children- participated in live broadcast at the two radio stations.

Given limited funding in 2018, delays in the 2018/2019 rainy season and the poor agriculture harvest, UNICEF Angola anticipates a much more complex and challenging humanitarian outlook for 2019. The two government memos issued by the provincial government authorities in Cunene and Huíla provinces are evidence of a deteriorating crisis, with already over 1 million people in need of humanitarian assistance in the two provinces. Key humanitarian priority interventions and resource requirements for 2019 are already reflected in UNICEF's 2019 humanitarian action for

children (HAC) and registered in UNICEF's minimum preparedness actions (MPA) and minimum preparedness standards (MPS) under the emergency preparedness platform (EPP). Therefore, resource mobilization is a key UNICEF priority to enable timely implementation of humanitarian action in 2019, without which, UNICEF's ability to deliver results for children in humanitarian action is severely compromised.

UNICEF Angola Country Office, expresses profound gratitude to all the donors who made it possible for the country office to timely respond to the humanitarian needs of children and women most impacted by emergencies in 2018.

## 2. Humanitarian Context

Angola experiences drought, floods and diseases outbreaks cyclically. The El Niño triggered drought and its consequences to access to water, sanitation, hygiene, health, nutrition and education delivery in the last three to four consecutive years have constituted a major challenge to government's existing disaster management structures and a hindrance to the hard-gained development achievements of the country. Compounded disease outbreaks, including cholera and the refugee influx from the Kasai region of the Democratic Republic of Congo (DRC) in the northern province of Lunda Norte have further stretched government preparedness and response capabilities thus adding complexity to the humanitarian landscape.

Consequently, the humanitarian situation in Angola in 2018 was both complex and diverse in its multiplicity of events. An estimated 700,000 people needed humanitarian assistance, including access to safe and clean drinking, among whom, over 408,000 were children. Eleven out of the eighteen provinces in Angola have cholera hotspots and three outbreaks were registered in 2018, leading to 1,262 suspected cases and 18 confirmed deaths. At its peak, there were 36,452 refugees in Lunda Norte and combining, to a total of 69,343 refugees and asylum seekers in Angola. The humanitarian context in Angola must be analyzed also, within the broader social and economic deprivations faced by the population, including the financial crisis as a consequence of the decreases of oil prices. These two factors have worked negatively to (1) exacerbate the vulnerability of the most at risk populations; and (2) hamper the ability of the government to timely and adequately allocate resources to respond to humanitarian crisis.

To address the pressing humanitarian needs, UNICEF's humanitarian strategy in 2018 consisted of critical life-saving interventions in water, sanitation and hygiene (WASH), Health, Nutrition, Education and Communication for Development (C4D). Programme implementation was coordinated and aligned with government priorities and partners' and it sought, primarily, to promote synergies and complementarity—bridging the humanitarian and development nexus — addressing the immediate humanitarian response needs while investing in systems strengthening at subnational levels and promoting resilience of communities and social services and risk reduction.

In WASH, interventions focused on access to clean drinking water, proper sanitation and hygiene promotion. In health and nutrition, the focus was on screening and treatment of malnutrition on children under five. The focus on education was around ensuring continued access to education and increase the capacity of the schools to respond to education in emergency (EiE). This was done by building the capacity of the Ministry of Education through WASH in schools' initiatives and training of teachers on cholera and mosquito borne diseases prevention. C4D interventions

focused on the promotion of positive and healthy behaviors and accountability of affected population through community dialogue and participation.

Responding to humanitarian crises in 2018, was for UNICEF a major funding challenge. In 2018, the funding requirements for UNICEF Angola Humanitarian Action for Children (HAC) was estimated at \$13.2 million dollars. Of this amount, the HAC was only funded 23 per cent, constraining, therefore, both programmatic and operational capabilities to implement timely humanitarian actions. Despite large funding gaps, significant results have been achieved in some sectors owing to the generous contributions from donors and through meaningful and collaborative work with government and partners.

### **3. Humanitarian Results**

Results achieved through the implementation of humanitarian action by UNICEF Angola Country Office (ACO) in 2018 underscore both UNICEF's core commitments for children (CCCs) in humanitarian situations and its support to strengthen government's preparedness and response capacities to emergencies. In addition, results further demonstrate coordinated efforts between government and partners, and most importantly, they provide a strong evidence of the significance of the contributions made by donors. Through programmatic interventions in WASH, Health and Nutrition, Education, and Communication for Development (C4D), UNICEF was able to deliver on the following results:

#### **El Nino drought and flood response**

##### **WASH**

- UNICEF provided access to safe water to 87,500 people through the rehabilitation and installation of 175 water points and handpumps in Namibe, Cunene and Huíla, completed in 2018.
- 75,278 people benefitted from sanitation through the implementation of the Community-led Total Sanitation (CLTS) approach, in the drought-affected provinces of Cunene, Namibe and Huíla.
- 143,827 people in drought-affected areas were reached with key messages on safe hygiene practices

##### **Communication for Development**

- 800 women from faith-based organizations and women's groups of rural villages of Huíla province were engaged to promote positive family practices around hygiene and nutrition during church meetings, reaching approximately 3,600 families.
- Through training of teachers, an estimated 3,300 students, parents and education staff in Bié province were reached with messages on healthy nutrition practices, including the use of local products to prevent malnutrition.

##### **Nutrition**

- Through nutrition interventions, UNICEF supported community screening and referral of SAM and MAM cases to special nutrition centers. This included also regular household visits

conducted by 12 trained community health agents, who delivered 285 counselling sessions focusing on good feeding and hygiene practices to 4,028 people, mainly caregivers and children.

- Over 348,909 children were screened for malnutrition and 74,852 children under five were admitted with SAM for therapeutic feeding

## **Cholera outbreak**

### Health

- Health emergency supplies focused mainly on the response to the cholera outbreak in Uíge.
- Results under health interventions included stepping up surveillance, health promotion and prevention activities. In addition, health in emergency supplies were distributed in Uíge, which included 4 tents to setup cholera treatment center (CTC), 1,021 malaria rapid tests, and antimalarial drugs.

### Education

- UNICEF supported the MoE through WASH in schools' initiatives. The initiative led to 755 schools and over 1,700 teachers been trained on cholera and mosquito borne diseases prevention, indirectly benefiting 400,000 students.

### WASH

- Under the cholera outbreak response in Uíge and Luanda province, UNICEF distributed WASH emergency supplies, including 2,000 plastic buckets with tap, 10 water bladders of 5,000 liters each, and chlorine tests.
- 107,000 people in Uíge were given access to safe drinking water through the distribution of 1,970,000 water treatment tablets and installation of 8 water bladders of 5m<sup>3</sup> capacity each.
- 55 technicians from Uíge and Luanda were trained on the use of water quality monitoring instruments.

### Communication for Development

- At least 130,000 people have been engaged and reached with hygiene promotion messages in Uíge,
- UNICEF trained 2,250 mobilizers (religious and community leaders, scouts, health community agents and CSO members) on cholera prevention, reaching an estimated 330,000 people through door-to-door visits.
- 54,000 WASH-related information, education and communication (IEC) materials were distributed in Uíge and Luanda provinces to enhance community dialogue and effectively promote disease prevention and response. Five radio spots on cholera prevention were also produced in different languages and broadcasted on Uíge's radio, reaching an estimated 130,000 people living in the high-risk areas.
- Through health and as part of a wider ESAR cholera epidemiological study to map cholera hotspots in nine countries, UNICEF supported the realization of a study in Angola to map the areas and populations at risk of cholera, and the factors associated with its spread. Results of the study will be used to inform preparedness and response to outbreaks.
- Through the education component and in support of the health emergencies, UNICEF supported the Ministry of Education through WASH in schools' initiatives. The initiative led to



755 schools and over 1,700 teachers been trained on cholera and mosquito borne diseases prevention, and indirectly benefiting 400,000 students.

## **Ebola preparedness**

### Communication for Development (C4D)

- UNICEF trained 35 health promotion directors and supervisors from the provinces most at risk on risk communication and community engagement (RCCE) in the context of Ebola. The initiative targeted provincial and central level government representatives from health, Social Communication, Education and Environment, and Civil Protection of seven bordering provinces and Luanda and resulted in eight provincial operational RCCE plans to prepare and respond to an Ebola outbreak, which are ready to be implemented.
- 400 members of the school communities in Moxico and Uíge provinces were also targeted through training sessions on Ebola prevention for community schools.

## **Refugees response**

### Water, sanitation and hygiene (WASH)

- Through water, sanitation and hygiene (WASH) interventions, UNICEF and partners reached 18,078 refugees living in Lóvua settlement and 2,000 people living in host communities with access to safe water.
- UNICEF provided access to adequate sanitation through the construction of 1,271 household latrines and showers benefitting an estimated 18,078 refugees.
- 6 prototypes of latrines for people with disabilities were installed on a trial basis in the Lóvua Settlement and are currently in good use.
- Through a joint UNICEF and UNHCR intervention, 6,355 refugees benefitted from the distribution of latrine cleaning kits for 1,271 households.
- 462 communal latrines and showers were installed in the Lóvua Settlement to assist refugees during the first month of their arrival thereby providing them with access to safe and appropriate sanitation facilities.
- UNICEF trained 143 (48 women and 95 men) social mobilizers and hygienists in the Lóvua settlement on the use and distribution of *aquatabs*—water purification tablets in the settlement.
- 542,340 *aquatabs* (1 pill enough to treat 20 liters of water) were distributed to 18,078 refugees, enough to purify 10,846,800 liters of water collected from the rivers and rain harvested. The distributions of *aquatabs* is still on going.
- 41 WASH committees were established in 41 Lóvua settlement villages to support with the management of the water, sanitation and hygiene conditions of an estimated 14,760 living in those communities.
- 2,520 people from the host communities benefitted from 7 reinstalled water bladders, each with the capacity of 5,000 liters. The bladders are filled regularly through water trucking to ensure people have access to safe water and as per agreed standards of 20 liters per person, per day.



## Nutrition

- Through nutrition interventions, UNICEF screened 6,198 children under five for malnutrition and treated 19 children with severe acute malnutrition (SAM) in Lóvua settlement.
- 6,198 refugee children living in Lóvua settlement were screened for malnutrition and 19 admitted for SAM treatment and 309 for moderate acute malnutrition (MAM). In addition, UNICEF supplied 500 boxes of ready-to-use food supplement for treatment of all refugee children with MAM.
- The nutrition component also included counselling sessions for mothers on appropriate breastfeeding practices, WASH, and exclusive breastfeeding, which benefitted 5,348 people. 14 community kitchens, with provided demonstration of good and healthy cooking practices were organized with 2,651 participants.

## Communication for Development (C4D)

- Through communication for development (C4D) interventions more than 18,000 people were engaged through key hygiene promotion messages.
- UNICEF created an Accountability to Affected Populations (AAP) mechanism through two community radios to ensure the needs of the affected populations were accounted and the response was appropriate and timely.
- Four journalists, four comedians, and around 100 mobilizers from 45 villages in the settlement were trained on radio, participatory theatre, and children's participation approaches to promote dialogue and disseminate messages on WASH, nutrition, health, and peace education, with a strong focus on gender.
- 150 people (50 per cent children) participated in the two UNICEF supported radio broadcasts, weekly, while over 2,000 people engaged daily through the teams of mobilizers and comedians.
- 217 people were administered to a WASH Knowledge Attitudes and Practice (KAP) survey in the Lóvua settlement to further guide and adjust programme implementation. Results demonstrate that, 75 per cent of people know the importance of drinking safe water, 86 per cent use latrines to defecate, 79 per cent know that latrine use prevents diseases outbreaks, including cholera, and more than 80 per cent know why they must wash their hands on a regular basis with water and soap. The survey also revealed that the most common sources of information for the WASH related messages were through UNICEF supported social mobilisers and community radios.

## Health

- The health component of UNICEF's humanitarian response was minor nevertheless with significant results noted through UNICEF's support to provincial health directorates of Lunda Norte to vaccinate 3,130 children aged 9 months to 14 years against measles through outreach immunization service delivery in the Lóvua settlement.
- 3,130 refugee children were vaccinated against measles, rubella and polio under the national immunization campaign, and with UNICEF support.

## Education

- Through UNICEF technical support and advocacy, steps were taken to increase access to quality education in Lunda Norte province, where Congolese refugees are located. As a result, the Ministry of Education agreed to integrate refugee children in formal education and allocated 30 of the 60 new teachers assigned to Lovua municipality to the refugee

settlement which were integrated in the 2019 school year to conduct primary education classes.

- In preparation for the 2019 school year, UNICEF provided support to the local authorities to train 45 primary education teachers assigned to Lóvua municipality.
- Education in Emergencies (EiE) supplied materials, including 17 school tents of 72 square meters each, 26 early childhood development (ECD) kits, 57 school-in-a-box kits, 1695 school bags, 25 recreational kits, and 23 math kits, were sent by UNICEF to Lóvua for refugee and host communities out-of-school children as a preposition to support the integration of at least 2280 children in the 2019 school year.
- UNICEF supported establishment of a community-led Early Childhood Development (ECD) programme in Lovua municipality (TUPPI - Todos Unidos pela 1ª Infância), which will be operational in the coming months.
- A training was conducted to raise awareness of the importance of ECD and empower local authorities (administration officials, civil society organization, traditional and religious leaders, facilitators) with skills and tools to initiate the TUPPI project in Lovua. An inter-sectoral management team was established to coordinate the actions of the project and support the implementation. 14 Facilitators were trained to carry out the diagnosis of the families that will be part of the initiative, which will take place in the 1<sup>st</sup> trimester of 2019.

**Results Table<sup>1</sup>**

	Sector Response		UNICEF and IPS	
WASH	2018 Target	Total Results	2018 Target	Total Results
People provided with access to safe water as per agreed standards	170,000	175,941	170,000	175,941
People with access to appropriate sanitation,	170,000	93,356	170,000	93,356
People reached with key messages on hygiene practices	470,000	491,905	470,000	491,905
<b>Nutrition</b>				
Children aged 6-59 months with SAM admitted into therapeutic treatment programmes.	43,000	74,852	43,000	74,852
Children under 5 years old screened for malnutrition	275,000	348,909	275,000	348,909
<b>Education</b>				
Children with access to formal or non-formal early learning, pre-primary, primary or secondary education	5,000	839	5,000	839
Children receiving individual education/early learning materials	2,000	0 <sup>2</sup>	2,000	0
<b>Child Protection</b>				
Children reached with psycho-social support	1,000	0	1,000	0 <sup>3</sup>
Children registered unaccompanied/separated supported with reunification services	100	0	100	0
People reached with GBV prevention and response interventions	1,000	0	1,000	0

<sup>1</sup> Results table is based on 2018 HAC targets.

<sup>2</sup> ECD in emergencies has started in November 2018, the results are not available yet.

<sup>3</sup> Results were not achieved due to funding gaps. No funds were received to support CP programme interventions.

## Analysis of the results

Despite significant funding gaps, results achieved underscore donors' commitment and partly the use of UNICEF internal regular resources to support humanitarian interventions. However, with prolonged periods of drought and ill-funded humanitarian response and recovery, the situation is likely to deteriorate in the coming 6 months. This is already evident considering the prevailing drought situation in the southern provinces of Angola, and the nutrition crisis which continues to exacerbate the challenges these provinces. However, underachieved results under child protection and education demonstrates also the impact and significance of funding to achieving results for children.

## **CASE STUDY:** Using community engagement to build community resilience in refugee camps in Angola

### **The Issue**

In 2017, Angola's Lunda Norte Province became home to over 35,000 refugees (75% of whom are women and children) from the democratic republic of Congo, following fresh violence in the Kasai region. The sudden influx of people and two overcrowded reception centres compromised the hygiene and sanitation situation, increasing the risk of diseases outbreaks.

### **C4D Actions**

In response of this emergency context, in a first phase -from April 2017 to August 2017- UNICEF Angola supported community-based interventions in two reception centers aiming to improve refugees' sanitation, hygiene, health and nutrition practices by strengthening their social mobilization skills and resilience.

- Identification and training of sixty refugees and Angola Red Cross' volunteers on social mobilization, interpersonal communication (IPC), key lifesaving messages and family competencies.
- Engagement of neighboring communities and local associations.
- Family-to-family communication activities to promote key messages on the use of latrines and hygiene practices, breastfeeding, sexual abuse, and care for pregnant women.
- Training of refugees in community theatre methodologies. By equipping them with participative theater techniques, volunteers formed a group of comedians promoting key practices at the reception centers.
- Mass communication in Lingala, Thsiluba, Chokwe, French and Portuguese through community radios created at the reception centers. Pre-tested messages on WASH, child protection and the adoption of healthy behaviors comprised in the Facts for Live package were broadcasted.

From August 2017 to December 2018 activities took place in Louva settlement, which comprises 41 villages distributed in nine zones.

- Introduction of child-centered approaches both in community radios (development of a bi-weekly radio broadcast by and for children) and in social mobilization activities (establishment of a specific sensitization day targeting children).
- Recruitment and training of 82 new volunteer mobilizers, 50% women, who participated in the planning, content development and timeline of community mobilization activities.
- Capacity building sessions for village leaders on IPC, WASH, nutrition, education for peace, child protection and Facts for Life package were also organized at their request.
- Joint trainings<sup>4</sup> on Social and Behavior Change Communication (SBCC) for emergency preparedness.

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<sup>4</sup> Participants: Lunda Norte's Civil Protection, Angola Red Cross, and Louva municipal authorities, religious leaders, traditional leaders and, refugee social mobilizers.

## C4D Results

Behaviour	Before arriving to Angola <sup>5</sup>	After 4 months of intervention <sup>6</sup>	After 14 months of intervention <sup>7</sup>
Treating drinking water at household level	40%		57,8%
Cleaning water storage recipients with water and soap		78,3%	90,54%
Defecating in latrines (adults)	89%	87%	99%
Open defecation (children under 5)	16%	33%	10%
washing hands with water only (without using soap or ashes)	26%	32%	12%
Main Communication channels	Before arriving to Angola	After 4 months of intervention	
Knowledge on household water treatment	Mobilizers: 31,2% National radio: 57%	UNICEF Mobilizers: 57% Camp Radio: 58%	
Knowledge on safe disposal of faeces	Mobilizers: 41% National Radio: 60%	UNICEF Mobilizers: 61% Camp Radio: 63%	
Knowledge on handwashing	Mobilizers: 38% National Radio: 62%	UNICEF Mobilizers: 63% Camp Radio: 65%	

- The refugee social mobilizers gained the capacity and skills to train the settlement village leaders on IPC and community-based interventions focusing on key family practices, WASH, nutrition, conflict resolution and education for peace. The mobilizers also promoted dialogue among village leaders on how to manage community services for the most vulnerable children and women through a permanent participatory process.
- Until the end of 2018, around 200 refugees per week -half of them children- participated in live broadcast at the two radio stations.
- The comedians performed in the villages of the settlement camp, reaching around 1000 people per week with gender-sensitive key messages on WASH, nutrition, key family practices, and education for peace.
- The 82 social mobilizers engaged with the community mainly through door to door visits reaching more than 2000 people per day, covering all refugee population every month.

<sup>5</sup> Survey on **water, sanitation and hygiene (WASH)** knowledge, attitudes and practices (KAP) among the refugee population. August/September 2017

<sup>6</sup> Ibid.

<sup>7</sup> Survey on **water, sanitation and hygiene (WASH)** knowledge, attitudes and practices (KAP) among the refugee population. July/August 2018

## Take Away Lessons

- Resilience is enhanced through an integrated response linking emergency and development interventions. This approach strengthens the country's emergency response, ensures ownership among all different actors, and contributes to the pacific coexistence between refugees and neighboring communities.
- To ensure sustainability in emergency prone areas, multi-stakeholders social mobilization platforms should be trained not only on essential family practices, child protection and peace building, but also on communication for emergency preparedness and monitoring tools. Between December 2017 and May 2018, when UNICEF was temporally not present in the area, refugee mobilizers, radio staff and comedians continue to implement social mobilization activities to prevent health emergencies and epidemics.
- Community radio and comedians, combined with other specific mobilization activities designed for children are crucial to ensure their engagement, improve their active participation and empower them to become agents of change.



## Visibility



UNICEF-supported comedians performing on how to wash hands with soap for a group of refugee children from Lovua settlement. [UNICEF/2018/NWieland](#)



UNICEF-supported comedians explaining to a mother from Lovua settlement that handwashing can save children's lives. [UNICEF/2018/MPrates](#)

## 4. Results achieved from Humanitarian Thematic Funding

Through humanitarian thematic funding, Angola Country Office ensured 500 social mobilizers (among scouts and faith-based organization members) from Luanda were trained on cholera prevention and effective interpersonal communication with the support of IEC materials. Through UNICEF support, social mobilizers conducted daily door-to-door visits, distribution of IEC materials on cholera prevention, and engaged in other community dialogues in cholera affected neighborhoods in Luanda province during approximately one month, reaching an estimated 88,000 people. The results achieved through thematic funding are part of UNICEF's response to three outbreaks of cholera in Uíge and Luanda provinces.

In addition, UNICEF was able to provide quality of care for children with severe acute malnutrition in 54 in-patient and out-patient treatment facilities. This was achieved through provision of therapeutic supplies, financial, including technical support to four health directorates in Bié, Cunene, Huíla and Namibe provinces.

## 5. Assessment, Monitoring and Evaluation

Monitoring is a critical aspect of programme accountability and quality assurance for UNICEF. Monitoring and evaluation was performed through programme staff and in partnership and coordination with government entities. Government has instituted an emergency management team, including the UN disaster management team (DMT) provided a platform for discussion and evaluation of programme implementation and results. Data from the humanitarian situation report (SitReps) and programmatic visits also served as the basis for further analysis and evaluation. Where necessary, changes and adjustments to implementation were made to ensure inputs contributed to deliver project outcomes. Regular programmatic visits and spot checks were also conducted, and field reports and data were used to inform project decisions. UNICEF's internal emergency management team, the updating of the risk analysis and the emergency preparedness platforms further supported overall programme assessment, monitoring and evaluation.

## 6. Financial Analysis

UNICEF Angola's total humanitarian funding requirement for 2018 was \$13.2 million to meet the humanitarian needs of children and women in most drought affected communities, including to address the refugee situation in Lunda Norte, in Angola. Health, water, sanitation and hygiene (WASH), nutrition accounted for most of the funding requirement or \$10 million. By December 2018, UNICEF ACO had only received 23 per cent of the total humanitarian funding requirement or, UNICEF's 2017 humanitarian action for children (HAC) was underfunded by 77 per cent. The financial gap meant to UNICEF and partners, inadequate humanitarian response and delays in the timely implementation of critical and life-saving interventions for children, including women most affected by drought and its severe consequences. While the HAC serves a tool for fundraising, only rarely has it been adequately funded. The need for more predictable and flexible funding mechanisms is of great necessity, without which, UNICEF's ability to timely delivery on results for children during humanitarian situations is severely hampered.

**Table 1: Funding status against the appeal by sector**

UNICEF Angola Humanitarian Action for Children (HAC) Requirements for 2018			
Sector	2018 Requirements <sup>1</sup>	CER Funds Received (US\$)	% Funded
WASH	\$2,600,000	\$0,00	28%
Nutrition	\$2,000,000	\$0,00	5%
Health	\$6,400,000	\$0,00	14%
Education	\$500,000	\$0,00	11%
Protection	\$200,000	\$0,00	2%
Coordination, PME, Communication	\$1,460,000	\$0,00	3%
<b>Total</b>	<b>13,200,000</b>	<b>\$0,00</b>	<b>23%</b>

*\*Funds available include funds received against 2018 appeal and carry-forward from previous year*

Table 2 includes all resource partners and all types of funding received and available for emergency activities in 2018.

**Table 2 - Funding Received and Available by 31 December 2018 by Donor and Funding type (in USD)**

Donor Name/Type of funding	Programme Budget Allotment reference	Overall Amount*
<b>I. Humanitarian funds received in 2018</b>		
<b>a) Thematic Humanitarian Funds</b>		
See details in Table 3		
<b>b) Non-Thematic Humanitarian Funds</b>		
Japan	SM/180055	US\$ 215,780
USA	SM/180221	US\$ 187,230
Russia	SM/160627	US\$ 921,173
<b>Total Non-Thematic Humanitarian Funds</b>		<b>US\$ 1,321,183</b>
<b>c) Pooled Funding</b>		
<b>(i) CERF Grants</b>		
<b>(ii) Other Pooled funds</b>		

<b>d) Other types of humanitarian funds</b>		
<b>Total humanitarian funds received in 2018 (a+b+c+d)</b>		
<b>II. Carry-over of humanitarian funds available in 2018</b>		
<b>e) Carry over Thematic Humanitarian Funds</b>		
<b>f) Carry-over of non-Thematic Humanitarian Funds</b>		
<b>Total carry-over non-Thematic Humanitarian Funds</b>		
<b>Total carry-over humanitarian funds (e + f)</b>		
<b>III. Other sources</b>		
Set Aside	<b>GS170006</b>	US\$ 29,950
RR for emergency		US\$ 68,108
<b>Total other resources</b>		<b>US\$ 97,058</b>

\* *Programmable amounts of donor contributions, excluding recovery cost.*

\* *2017 loans have not been waived; COs are liable to reimburse in 2018 as donor funds become available.*

**Table 3: Thematic Humanitarian Contributions Received in 2018**

<b>Thematic Humanitarian Contributions Received in 2017 (in USD): Donor</b>	<b>Grant Number<sup>8</sup></b>	<b>Programmable Amount (in USD)</b>	<b>Total Contribution Amount (in USD)</b>
Portuguese Committee for UNICEF	SM/149910/1632	US\$2,512	US\$2,512
Global Thematic Response	SM/149910	US\$ 937,053	US\$2,695,162
Global Thematic Response	SM/189910	US\$ 95,971	\$95,971
<b>Total</b>			<b>US\$2,793,645</b>

*\*Global Thematic Humanitarian Funding contributions are pooled and then allocated to country and regional offices. For a detailed list of grants, please see the 2017 Annual Results Reports.*

<sup>8</sup> International Aid Transparency Initiative (IATI) requires all grants to be listed in reporting. <http://iatistandard.org/>

## **7. Future Plan**

UNICEF's 2019 HAC underscores the organization's core commitments for children (CCCs) in humanitarian situations and its continued support to government led humanitarian interventions and priorities for 2019. UNICEF's programmatic targets for 2019 HAC include interventions in WASH, Health, Nutrition, Education, Child Protection, and C4D to the most vulnerable groups of people, including children and women.

## **8. Expression of Thanks**

UNICEF Angola, on behalf of the children and women of Angola, expresses gratitude to the Government of (Japan, Russian Federation, United States, and the Portuguese Committee for UNICEF) for their generous contribution to the El Nino drought emergency response. Through this fund, UNICEF was able to provide critical assistance through a timely humanitarian intervention to the most affected and vulnerable populations.

## Annex 1: Two-Page Report on the Global Thematic Humanitarian Response

<b>Donor name:</b>	Global-Thematic Humanitarian Response
<b>Assisted country:</b>	Angola
<b>Grant reference:</b>	SM189910
<b>Total contribution:</b>	USD105,448
<b>Cumulative Expenditure*:</b>	\$105,448
<b>Commitments*:</b>	\$21.07
<b>Period covered by the report:</b>	01-01-2018 to 16 March 2019

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### a) Purpose of the Contribution

UNICEF Angola received this contribution to scale up **access to quality education** through support to the Ministry of Education (MoE) to implement the education in emergency (EiE) response plan, and for advocacy and social mobilization through **communication for development** (C4D). Activities included also communication for immunization and distribution of IEC materials on hygiene promotion, prevention, water treatment and financial support for prevention and response of cholera outbreaks in schools.

### b) Results

Access to quality education and EiE response capacity increased.

- UNICEF supported the MoE through WASH in schools' initiatives. The initiative led to 755 schools and over 1,700 teachers been trained on cholera and mosquito borne diseases prevention, indirectly benefiting 400,000 students.

Increased advocacy and social mobilization.

- 500 social mobilizers among scouts and faith-based organization members from Luanda were trained on cholera prevention and effective interpersonal communication.
- Social mobilizers conducted daily door-to-door visits and other community dialogues on cholera hotspots reaching an estimated 88,000 people.
- Through C4D, IEC cholera related materials were distributed in cholera affected neighborhoods in Luanda.

### Future plans for utilization of grant balance

N/A

None

*\* This figure is a provisional amount. Official expenditure figures will be provided by the UNICEF Comptroller after the closure of 2018 accounts.*

### d) Visibility

N/A

### e) Expression of Thanks

UNICEF would like to take this opportunity to express its sincere appreciation to Global Thematic Humanitarian Response for their generous financial contribution in support of children in Angola. On behalf of the entire UNICEF Angola team, we thank you for helping to advance our shared commitments to protecting the rights and improving the well-being of children in Angola.



## Annex 2: TWO-PAGE REPORT

Improving Access to Safe Water, Basic Sanitation and Enhancement of Nutrition and Hygiene Practices, for the DRC Refugee Population and Host Communities in Lóvua Municipality, Province of Lunda Norte / Angola

### **Contribution Summary**

<b>Donor name:</b>	USA (State) BPRM
<b>Assisted country:</b>	Angola
<b>Grant reference number:</b>	SM180221
<b>Total contribution:</b>	US\$1,932,560
<b>Programmable amount:</b>	\$187,229.79 (in 2018)
<b>Cumulative Expenditure*:</b>	\$265,086.49 (to 31 Mar 2019)
<b>Commitments*:</b>	US\$ 8,064.55
<b>Period covered by the report:</b>	1 January 2018 to 31 December 2018

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### **a) Purpose of the Contribution**

The outbreak of violence in the Kasai region of the Democratic Republic of the Congo (DRC) in March 2017 triggered the internal displacement of some 1.4 million people, and the forced migration of over 33,000 refugees into Lunda Norte Province, Angola, between April and June 2017.

Refugees have reported generalized violence, mass killings, mutilations, burning of property, destruction of villages, schools and churches, rape of women and girls and other human rights abuses, as well as food shortage and the lack of access to basic services and goods.

Currently, and based on the statistics from UNHCR, there are over 27,000 DRC refugees in Angola who receive food assistance and are likely to be relocated to Lóvua. At moment 19,951 have been relocated.

UNICEF Angola received this contribution to scale up **water supply** through support Local Authorities to implement the water distribution plan including water distribution network UNICEF through other funds has incorporated activities of communication for **development** and distribution of IEC materials on hygiene promotion, prevention, water treatment and financial support for prevention and response of cholera outbreaks at community level and in schools.

### **b) Results:**

#### **Lunda Norte DRC Refugees**

Current refugees' Biometric Statistic situation and target populations:

- 19,951 refugees are living in Lovua settlement relocated from Mussungue and Cacanda reception centers and Urban cities.
- 3,910 refugees (are living in Dundo town and surrounding Dundo urban areas) waiting for their relocation. This number of remaining refugees will be adding to the 56 Lovua settlement villages yet filled.
- 57 villages of 360 people capacity each have been filled with the 18,078 relocated refugees.
- 4 surrounding host communities to Lovua settlement of 2,000 population



No	CURRENT LOCATION	REFUGEES'	CHILDREN 0 TO 17 YEARS		ADULTS FROM 18 + YEARS		TOTAL	REMARKS
			Female	Male	Female	Male		
01	Lovua Settlement (43 villages occupied)		5,791	5,565	4,173	4,422	19,951	
02	Dundo Town and Surrounding Urban Areas		1,094	1,026	955	835	3,910	Waiting for relocation
<b>TOTAL PER GENDER AND AGE SEGREGATION</b>			<b>6,885</b>	<b>6,591</b>	<b>5,128</b>	<b>5,257</b>	<b>23,861</b>	

#### Planned:

- Geophysical survey within the area for potential drilling, aiming at identifying the best location to drill and get the best yield;
- Drilling of 4 boreholes and construction of 4 water supply solar system in locations to be determined jointly with other partners including UNHCR;
- Construction of elevated water storage tanks and respective standpipes for water collection: 3 in Lóvua refugee settlement and 1 in the host communities, specifications to be discussed and agreed.
- Extension of water distribution network to 53 villages in Lovua refugee settlement, the medical clinic at the arrival center, schools, child friendly spaces, women friendly spaces and in the 6 surrounding host communities.

#### Achieved:

In preparation to achieve the 4 mains activities above, we have realized the following tasks:

- The physical identification of 3boreholes in the settlement and one in the host community has been done (see the GPS Coordinates).
- Contracts for drilling and fiscalization companies for Lovua settlement water network had been done and signed.
- For mitigation and due to acute lack of resources for continuous water trucking from other partners on the ground, UNICEF provided resources for one-month water tracking benefiting 13,874 people in Lovua settlement and 2,000 in host communities with current average of 20 litres/person/day exceeding the Sphere minimum standards.
- A Consultant WASH Specialist were recruited for 2 months from July to August 2018 to support in conception of tendering documents for drilling boreholes and Lovua settlement water network distribution.
- Since September 2018 A WASH Specialist has been recruited to be permanent to the field (Dundo and Lovua) for monitoring and quality control during implementation of the activities.

#### Ongoing:

- Deployment of the drilling and fiscalization companies to Lovua settlement for commencement of geophysics and drilling activities
- Redesigning Lovua water distribution network according to the current number of refugees and host communities.

#### c) Future plans for utilization of grant balance

None.

*\* This figure is a provisional amount. Official expenditure figures will be provided by the UNICEF Comptroller after the closure of 2017 accounts.*

**d) Visibility (see main report above and separate two-page report)**

**e) Expression of Thanks**

UNICEF would like to take this opportunity to express its sincere appreciation to the people of the United States of America for their generous financial contribution in support of children in Angola. On behalf of the entire UNICEF Angola team, we thank you for helping to advance our shared commitments to protecting the rights and improving the well-being of children in Angola.

### **Annex 3: Donor Feedback Form**

Name of Report: Consolidated Emergency Report – Angola 2018

Reference number: SM149910

Link to the Form: [English version](#)