

# Report 2006-2007



International Federation  
of Red Cross and Red Crescent Societies

## Angola

Appeal No. MAAAO001

This report covers the period of 01/01/2006 to 31/12/2006 of a two-year planning and appeal process.

In a world of global challenges, continued poverty, inequity, and increasing vulnerability to disasters and disease, the International Federation with its global network, works to accomplish its Global Agenda, partnering with local community and civil society to prevent and alleviate human suffering from disasters, diseases and public health emergencies.



Angola Red Cross volunteers provide psychological support to children in an internally displaced persons (IDP) camp. International Federation.

### In brief

**Programme Summary:** Since February 2006, Angola Red Cross (ARC) has been responding to a cholera outbreak by providing clean water, sanitation, health and hygiene education and distributing relief items. In February 2006, the Federation released CHF 200,165 from its Disaster Relief Emergency Fund (DREF) to support social mobilization and to initiate water and sanitation (WatSan) activities in areas affected by the cholera outbreak. A preliminary Emergency Appeal was launched on 18 May 2006 for CHF 1,206,656 to assist 30,000 beneficiaries. After an assessment by the Field Assessment Coordination Team (FACT), the appeal was revised in June 2006, its budget was adjusted upwards to CHF 1,392,404 and the number of beneficiaries was increased to one million.

On long-term programming, Angola Red Cross provided primary health and care services through its 23 basic health posts in peri-urban and rural areas in eight provinces. The activities included community-based health care (CBHC), hygiene education, reproductive health, HIV and AIDS prevention and promotion of behavioural change.

The third general assembly the National Society was successfully held on 5 and 6 October 2006, during which a new governing board was elected and a new statute, strategic plan and organigram were approved. The general assembly was historic as it was the result of a three-year transition process, which was sometimes difficult due to a high turnover of staff, response to epidemics, funding limitations and limited capacity at headquarters.

**Goal:** Angola Red Cross aims to improve the general health conditions of vulnerable communities, whilst building and expanding upon its capacity and volunteer base. Angola Red Cross has made bold steps towards becoming a well-functioning national society and is recognized and respected as a key national actor in the humanitarian sector by community members, the government, local and international humanitarian agencies.

**Needs:** Total 2006-2007 budget CHF 1,627,714 (USD 1,338,581 or EUR 1,004,762), out of which 19.8 per cent covered. There are no changes made to the 2007 appeal plan/budget since the ARC will be consolidating its activities. The British Government's Department for International Development (DFID) will support 100 per cent of the disaster management activities for 2007.

**Click here to go directly to the attached financial report.**

For more detailed information on the 2006 activities, please see Programme Update 1 and 2:

Programme Update no. 1: <http://www.ifrc.org/docs/appeals/annual06/MAAAO00101.pdf>

Programme Update no. 2: <http://www.ifrc.org/docs/appeals/annual06/MAAAO00102.pdf>

**No. of people we help:** Angola Red Cross reached a cumulative total of 1,545,876 people directly through its long-term and emergency operations in 2006. In 2007, Angola Red Cross plans to reach another one million people through community-based health and care, disaster management and community empowerment projects.

**Our Partners:**

<b>Movement partners</b>	<b>Summary of activities</b>
ICRC	Tracing and mine awareness community programme.
French Red Cross	Health and care.
Netherlands Red Cross	Disaster management.
Spanish Red Cross	Social rehabilitation programme.
Swedish Red Cross	Health and care and organizational development.
<b>Other Organizations</b>	
Consortium; Royal Netherlands Embassy (RNE), Swedish International Development Agency (SIDA)/ Swedish Red Cross and Development Cooperation Ireland (DCI), through the Federation.	HIV and AIDS.
Angolan Government	HIV and AIDS, community based-health.
American Embassy/United States Agency for International Development (USAID)	HIV and AIDS.
National organization for people living with HIV	Coordination in HIV and AIDS.
National Civil Protection Service	Disaster management.
World Food Programme (WFP)	Food aid, HIV and AIDS.
United Nations High Commission for Refugees (UNHCR)	HIV and AIDS.
World Health Organization (WHO)	Health and care.
Médecins Sans Frontières (MSF)	Health and care.

## Current context

Since February 2006, a cholera epidemic affected 16 of 18 Angola's provinces. In mid-May 2006, with the end of the rainy season, the number of new cases declined drastically and there were only a few cases from June to August 2006. However, with the onset of the rainy season in September 2006, the cholera cases gradually increased to about 100 per day. The outbreak has been aggravated by the poor water supply and sanitation infrastructure in crowded high density suburbs in peri-urban areas.

The high demand for humanitarian assistance and human resource capacity towards the cholera outbreak affected the implementation of the other programmes of the National Society. Most of the HIV and AIDS peer educators and volunteers were deployed to conduct cholera social mobilization activities and to distribute water chlorination tablets in most of the affected provinces. The General Assembly, which had been postponed several times, was finally held in October 2006 while the operational timeframes for HIV and AIDS and organizational development activities were extended. The Federation regional delegation in Harare coordinated the response to the cholera disaster, and

assisted ARC by deploying support staff and a Field Assessment and Coordination Team (FACT) to conduct an assessment. In September 2006, the Federation deployed a water and sanitation (WatSan) delegate to support Angola Red Cross in carrying out WatSan activities within the cholera intervention. The National Society (NS) assigned a health coordinator to be in charge of the cholera operation at the national level.

## Progress towards objectives

### Health and Care

**Goal:** Sustainable improvement in the general health conditions of vulnerable communities, whilst building and expanding upon Angola Red Cross capacity and volunteer base.

**Objective:** Angola Red Cross basic health care provision to targeted communities (with emphasis on refugees/returnees, former internally displaced people and demobilized combatants) is improved and contributes to the mitigation of priority health problems.

In 2006, Angola Red Cross reached over one million people with sensitization on health and hygiene practices, in response to the cholera epidemic. Access to safe water, improved hygiene and sanitation, and strengthened dialogue with community leaders in the affected community are some of the achievements of Angola Red Cross, since February 2006.

In collaboration with the Ministry of Health, community-based health and care (CBHC) services were provided to 694,557 people in eight provinces where Angola Red Cross has health posts. A total of 924,745 children aged under five years (nine months to five years) were vaccinated against polio and measles and were given vitamin A, Albendazol and insecticide treated mosquito nets (ITNs) during national measles and polio campaigns. With volunteers trained in social mobilization, community first aid, health and hygiene activities, Angola Red Cross contributed to the improvement of the quality of life of more than 500,000 beneficiaries reached with the following: health and hygiene education; door-to-door campaigns for monitoring hygienic practices; training in water chlorination; distribution of information, education and communication (IEC) materials, soap and jerry cans. Angola Red Cross health post provided effective services to their surrounding communities.

Lack of capacity at the headquarters and inadequate funding– compounded by lack of technical support to branches – hindered the development of the health and care programme in 2006. In order to bridge the capacity gaps in 2007, Angola Red Cross is planning to streamline communication lines between its headquarters and branches and will recruit experienced and competent staff at the headquarters.

### Disaster Management

**Goal:** The vulnerability of the population living in areas affected by disasters is reduced.

**Objective:** The vulnerability of the targeted communities in disaster prone and affected areas is reduced, and their capacity to respond to disaster is strengthened through implementation of disaster prevention, preparedness and response strategies by Angola Red Cross.

During 2006, a lot of time was spent responding to the cholera epidemic and therefore no community-based disaster management training was conducted, due to a shortfall in funding. However, the response increased the capacities of volunteers in community-based first aid and active case finding in all the affected provinces. At the headquarters, Angola Red Cross has limited capacity to implement disaster management activities; this affected planning and implementation of activities as well as supervising the work of volunteers.

## Organizational Development

**Goal:** Angola Red Cross is a well-functioning National Society and is recognized and respected as a key national actor in the humanitarian sector by the community, government, local and international humanitarian agencies.

**Objective:** Angola Red Cross structures, systems, procedures and the human resources at all levels are developed and strengthened, to better respond to the needs of the most vulnerable communities and to deliver quality humanitarian services.

A new governing board was elected and new statutes, strategic plan and new organogram were approved during the third Angola Red Cross general assembly. A new secretary general was recruited to manage the change process at the management level. The election of the new governing board, implementation of the new statute, management structures, systems, procedures and implementation of a new strategic plan is a positive move towards becoming a well-functioning national society.

With the recruitment of a new secretary general and a new finance director, development and cooperation has increased and establishment of finance and human resources regulations and procedures has begun. The National Society will focus on restructuring its headquarters, finalizing the recruitment of a programme director as well as a youth and volunteer director. Angola Red Cross needs financial resources to recruit and train new staff and volunteers, and to establish a strong volunteer base. The NS also requires financial and human resources to facilitate monitoring and evaluation of activities.

## Working in partnership

Angola Red Cross maintained effective coordination with the Ministry of Health, World Health Organization (WHO), World Food Programme (WFP), the Joint United Nations Programme on HIV and AIDS (UNAIDS), United Nations High Commission for Refugees (UNHCR), United States Agency for International Development (USAID), World Bank, the Global Fund to Fight Aids, Tuberculosis and Malaria (GFATM) as well as other national and international humanitarian agencies.

Partnerships have been strengthened, with the recruitment of a new secretary general, through direct dialogue and permanent engagement at the field and national level.

Through the cholera emergency operation, Angola Red Cross and the Federation strengthened partnerships with key stakeholders such as United Nations Children's Fund (UNICEF), WHO, MSF and the government. UNICEF provide relief items, some funds for training, and supported design and printing of IEC materials; WHO shared information and epidemiological data; MSF supported with field level situational reports; and the government trained staff and volunteers and provided logistical support.

## Contributing to longer-term impact

During 2006, Angola Red Cross worked with the communities affected by an ongoing cholera epidemic to contribute to reducing the impact of this epidemic in the communities. In 2007, Angola Red Cross will streamline activities in health emergency responses into the long-term community-based projects so as to strengthen the capacity of the communities. This is aimed at reducing the impact and number of deaths, in line with the second Global Agenda Goal.

The Angola Red Cross developed a five year (2006 to 2010) Integrated HIV and AIDS programme. The National Society's HIV and AIDS programme ([MAA63003AO](#)) is part of the Southern Africa regional HIV and AIDS programme, which is a component of the International Federation's Global HIV and AIDS Alliance. The Appeal for the Southern Africa regional HIV and AIDS programme ([Appeal](#)

[MAA63003](#) was launched on 1 November 2006. Through the programme, the International Federation is scaling-up its response to HIV and is committed to reducing vulnerability to HIV and its impact through:

- Preventing further infections;
- Expanding care, treatment, and support;
- Reducing stigma and discrimination.

The Angola Red Cross HIV and AIDS programme targets to reach five million people with HIV prevention, and 6,400 people living with HIV (PLHIV) and 16,000 orphans and vulnerable children (OVC) with care, treatment and support by 2010. The integrated programme is seeking a total of CHF 6,296,865 over a period of five years.

## Looking Ahead

During 2006, health and care, organizational development and disaster management were not sufficiently funded through the annual appeal. For 2007, Angola Red Cross – with support from the Federation – will scale-up capacity for preparedness and response to recurrent health emergencies in the country, streamline communication with branches and increase volunteer training activities, with emphasis on vulnerability and capacity assessment (VCA) and community-based disaster management.

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