

Annual report



International Federation
of Red Cross and Red Crescent Societies

Angola

Appeal No. MAAAO001

30 April 2009

This report covers the period
01 January 2008 to 31
December 2008.



Offices from the Civil Protection, Angola Red Cross, IFRC and Local Authorities during a three-day workshop on vulnerability and capacity assessment at Makulumbi/Kwanza Norte

In Brief

Programme Purpose:

Angola Red Cross Society (ARC) programmes have been developed in line with its Strategic Development Plan 2006 to 2009. ARCS vision is to be the leading national humanitarian organization and auxiliary to the government in assisting the most vulnerable population, and its mission is to alleviate the suffering of the population by mobilizing the power of humanity and the International Federation of Red Cross and Red Crescent Societies' (IFRC) [Global Agenda](#), as well as to contribute to the [Millennium Development Goals](#) (MDGs). The purpose of the programmes is to ensure a holistic approach in providing humanitarian services to the most vulnerable people.

Programme Summary:

ARC has made progress in the internal reform process, which has demanded significant attention and support from the national governing board, senior management partners and stakeholders. The lack of a sitting governing board at national and provincial level is an impediment to recovery. The lack of experienced and trained human resources is also a major obstacle to meaningful organizational development (OD).

Recurrent disasters such as cholera and floods, coupled with poverty, malnutrition and poor health services, delay infrastructural and economic developments. ARC has sustained its auxiliary role by actively taking the lead in disaster response and participating during mine awareness campaigns, social mobilisation, hygiene promotion and national immunization programmes.

Financial Situation:

The total budget for 2008 was CHF 1,332,771, which was revised to CHF 535,741, of which 87 percent was covered by the end of 2008.

[Click here to go directly to the attached financial report](#)

Number of People We Help:

ARC programmes target five million people, focussing on people living in peri-urban areas, women and children under five years old, and internally displaced persons (IDP) following the 2008 floods. The HIV and AIDS programme ([MAA63003](#)) has a target of reaching five million people with HIV prevention interventions, 6,400 people living with HIV (PLHIV) and 16,000 orphans and vulnerable children (OVC) by 2010.

Our Partners:

Movement Partners	Summary of Activities:
International Committee of Red Cross (ICRC)	Tracing and community-based education for mine awareness. Support decreased during 2008 and will cease by early 2009
Danish Red Cross	Organizational development and support to the IFRC Representative position
German Red Cross (Bilateral)	Disaster preparedness, HIV and AIDS
International Federation of Red Cross and Red Crescent (IFRC)	Disaster response, organisational development
Spanish Red Cross (Bilateral)	Organisational development, HIV and AIDS and social programmes
Other Organizations:	
Royal Netherlands Embassy (RNE), through the IFRC	HIV and AIDS
British Government's Department for International Development (DFID)	Disaster management
Angola Government	Health and care, community-based health care (CBHC) (TB and Malaria). Salary support to ARCS staff, National Civil Protection, coordination of natural disasters
National Organization for People living with HIV	Coordination in HIV and AIDS
National network of non-governmental organizations working in HIV and AIDS	Coordination in HIV and AIDS
UNICEF	Health emergency
IOM	Disaster response
WHO	Coordination for emergency health
UNDP	Planning for Disasters Coordination
OXFAM GB	Disaster response, basic hygiene and sanitation in emergencies.
World Vision	Emergency response and malaria
Global Fund	HIV and AIDS
HP Billiton	Disaster relief
UNITEL	In kind support

Current Context:

Angola is recovering from a 27-year conflict that left the country deeply devastated and heavily handicapped, with landmines and undetonated explosives, a depleted infrastructure, poor institutions and a lack of basic services. According to the UNDP, more than two-thirds of the country's 16 million people live on less than one US dollar a day. Humanitarian advocacy is therefore extremely necessary for Angola and makes the ARC work more relevant.

In order to enhance service delivery to those most vulnerable, ARC is undergoing an institutional reform process set to revitalise its functionality by reviving branches and restructuring its organogram. There has been remarkable progress during the reporting period, evidenced by the recruitment of key management staff at the National Society headquarters. In addition, the new management team is committed to the change process, such that policies and systems are revised based on the absorption capacity and demand for humanitarian assistance in the country.

The IFRC provided technical support via the country representative and formal field visits by the Southern Africa Zone Office's (SAZO) programme team members. Support from partners also increased because of the interest generated by the reform process.

Progress towards Outcomes

There has not been much progress towards implementing the planned activities under the appeal due to limited donor response. However, the disaster management and HIV programmes had marked achievements within the bilateral programmes supported by the German and Spanish Red Cross Societies and in-country funds for malaria. The HIV programme also received funding support from the Royal Netherlands Embassy through SAZO.

Disaster Management

Expected Results

- Effective mechanism for disaster management is functioning at ARCS.
- Vulnerability of communities in disaster prone areas reduced through disaster risk awareness and capacity building in First Aid and mine awareness.

Achievements

ARC focused on the development of the draft disaster management (DM) strategic plan (Master Plan), the draft DM action plan, and the draft DM contingency plan for floods and cholera/epidemic outbreaks. The terms of reference and the concept paper of the Master Plan were formulated and disseminated to branch level.

The National Society has also carried out vulnerability and capacity assessments (VCA) in 12 communities (Kwanza Norte, Bengo, Kuando Kubango and six communities along the Zambezi River), reaching a total of 10,000 people. Effort has been expended on supporting and strengthening the functional community DM committees in order to enhance ownership and project sustainability. Community DM committees in Kwanza Sul received additional support in the form of refresher training courses, training for community finance management, and small-scale business workshops. The role of each DM committee member was clearly defined.

At national and provincial levels, ARC attended regular DM and task force meetings with government, national and international humanitarian organisations, and other stakeholders. The National Society also produced and distributed information, education and communication (IEC) materials on disaster risk reduction (DRR), at national and provincial levels. In addition, brochures, posters and case studies on DRR (e.g. tree planting) were finalised. A floods assessment was completed in Cunene Province, and 20 bicycles for all DRR target communities were purchased and distributed to the volunteers.

The National Society received an internal donation from a local company to the value of USD 100,000 to assist families in Cunene Province affected by floods during the first quarter of 2008. Activities included cholera prevention in two camps. Approximately 15,000 people were reached by the provision of clean water and sanitation facilities, health education and prevention campaigns on diarrhoea diseases.

The German Red Cross provided assistance for three months towards cholera prevention activities in Kwanza Sul (Port Amboim and Sumbe communities), targeting 55,000 persons for water point campaigns. The activities undertaken were health education, chlorination, distribution of oral rehydration solutions (ORS) and follow-up home visits. The DFID funded British Red Cross programme supported volunteer sanitation activities: cleaning garbage, identifying garbage collection points and advocating the continuation of these activities by local health authorities.

In the mine awareness programme, ARC collaborated with vulnerable groups including fishermen, shepherds, farmers and hunters. The landmine impact survey database has also been updated. Other activities included the production of IEC material (wall paintings and information boards) on mine awareness and other unexploded ordnances (UXOs).

Challenges

Due to the closure of the ICRC mission in Angola, technical and financial support for the tracing and mine risk reduction educational programme were terminated. A lack of trained staff and volunteers in support of effective DM /DRR activities and delayed funding for the DRR programmes put pressure on the limited human resources available to the DM coordinator.

ARC has an application pending with the National Institute for Mine Risk Programmes (CNIDAH) in support of the mine awareness and educational programme under DRR activities. This was further delayed due to the election and selection of new ministers and key directors, as well as awaiting budget approval for 2009.

Health and Care

Expected Results:

- Access to safe water and sanitation services improved in Kwanza Sul and Benguela provinces.
- Capacity level of ARC staff and volunteers in the management of water and sanitation improved.
- Community health service improved through ARC health posts.
- The health needs of people affected by natural and man-made disasters are catered for by the National Society.

Achievements

ARC served communities through its health posts network. The water and sanitation (WatSan) programme, which started as a recovery programme from the floods, is gradually being integrated into long-term health and care programmes. It is a relatively new intervention for the National Society, although WatSan needs are huge throughout the country. The IFRC country representation provided technical support to ARC in developing the WatSan programme and training human resources in the targeted provinces. The SAZO WatSan delegate has facilitated participatory hygiene and sanitation transformation (PHAST) training of trainers' workshops for Angola – including the specific training of a WatSan officer and the development of a PHAST kit.

A total 15,550 persons benefitted through the CBHC programme. Volunteers reached 1,161 communities with health education and sensitisation campaigns. A total of 2,410 persons benefitted from the ARC outreach programme for home-based care.

Cholera remains a serious public health issue (especially after the seasonal floods); therefore the National Society, in coordination with the SAZO health and care programme, planned to preposition cholera kits. SAZO coordinated a re-vitalized community-based First Aid (CBFA) in the region and ARCS adopted the new strategy as a roadmap for the development of health initiatives focusing on CBFA, CFA, blood donation, malaria prevention, avian & human flu prevention, immunization campaigns, water and sanitation, and hygiene prevention.

ARC played a role in the social mobilization component of the National Polio Campaign. Over 200 volunteers operating in ten of the 18 provinces were active through community social mobilization activities. Further, through community-based volunteers and in cooperation with World Vision, a malaria preventive programme began during 2008 and will be continued in 2009. The objective is to reduce malaria by 50 percent by rapidly scaling-up activities targeting the most vulnerable population.

Over the past two years, ARC has been the democratically elected president of the National Malaria Forum. As part of the responsibility, the National Society has advocated malaria eradication and facilitated the coordination of the National Malaria partner activities.

Challenges

Health and hygiene promotion activities need further strengthening and need to be rolled out to other branches in disaster prone provinces. The expected activities in WatSan have unfortunately not materialised due to funding shortfalls, although ARC continues to express an interest in developing capacity in this important area, linking WatSan activities to its on-going community health activities. The National Society needs more resources to develop the WatSan programme and to roll out into all 18 provinces. SAZO has started resource mobilisation by targeting traditional WatSan donors.

Organizational Development

Expected Results

- ARCS leadership governance and management is effective and empowered through structured capacity building.
- Financial skills of staff in finance departments are improved to meet the standard requirement of quality and timeliness.
- ARCS have in place well defined policies and guidelines in programming and human resources development.
- ARCS has functional and strengthened branch structures and an effective volunteer management system in accordance with characteristics of a well functioning national society.

ARC has succeeded in putting structures and systems into place at the national level, as well as expanding into ten branches. The key areas of success cover human resource structures, acquiring a departmental head and staff, and the implementation of new policies and strategies for staff, volunteers and youth. A tougher, clearer structure supports bringing staff and distant branches together as one organization.

The focus on financial and administrative improvement was strengthened with the implementation of the Navision finance system and the development of a finance manual to guide the process. However, progress was delayed due to a lack of funds for structural improvements, poor internet provision, a lack of good antivirus software and the general breakdown of computers. Towards the end of 2008, ARC received funding from a Spanish Red Cross donation to the SAZO, enabling the National Society to implement and improve the first phase of their information technology (IT) and communication plans.

Constraints or Challenges

ARC has experienced challenges in funding, relationship management, performance measurement and reporting. Of four director positions, only two have been filled. It is a challenge to attract suitable candidates for organisational development, and youth and volunteering, as well as staff for the planning, monitoring, evaluation and reporting (PMER) department. The main constraints in identifying suitable candidates are the competitive salaries offered by private companies, which the National Society cannot afford, and a lack of qualified applicants. The very high staff turnover also hampers consistent capacity building efforts. The late arrival of funds put pressure on the few technical staff available, along with the implementation of programmes with bilateral partners.

The implementation of all change processes are hampered by the limited involvement and presence of active and committed board members. The lack of involvement by the board delays partner meetings and the possibility of attracting urgently needed funds to further support the reconstruction process as indicated in the strategic plan for the period 2006 – 2009.

Distance and poor communication create a challenge in bringing 18 branches on board to work within the same objectives and strategies. A plan has been developed to divide the country into four zones, each covering four to five branches. The implementation of this plan is hampered by a lack of funding support and interested partners.

Working in Partnership

ARC participated in meetings of the Angola National Aids Services Organization (ANASO), to which ARC is vice chair. There is also collaboration with the National Institute for Fighting Aids (INLS), MoH and other NGOs engaged in HIV programmes. The activities of the National Polio Campaign involved close cooperation with National and Regional Health authorities. ARC is an active partner with the Government Organization for Civil Protection and other key agencies during emergencies.

The National Society holds a position as chair of the Malaria Forum in Angola, and member of the Global Fund Country Coordination Mechanism (CCM). The ICRC scaled-down their support for tracing and communication. Spanish Red Cross has been a unilateral partner with HIV and AIDS projects in two provinces (Bie and Benguela) and a street youth project in Benguela. The German Red Cross has a four year HIV and AIDS programme in Cunene Province and an eight month DM support to ARC National DM plan for Huila and Luanda Branch.

Further partnerships have been built with the Danish Red Cross for institutional development support for 2009. The IFRC is a partner in the HIV and AIDS Global Programme and DFID IS III project. Additional in-country partners are OXFAM, UNICEF, Care International where co-operation agreements exist, and with World Vision for malaria programmes.

Looking Ahead

By the end of the year, the restructuring process of the ARCS improved. The main success lay within human resources, with some key positions filled at director, coordinator and assistant level. However, capacity building within the organization, both at national and branch level, is still required to enable the ARC to become an attractive implementing partner for partners inside the country. Further assistance is needed to support the expansion into the provincial network.

The National Society programme portfolio is also taking shape for DM, health and HIV and AIDS programmes; however, OD and humanitarian values require additional inputs during 2009 by partners interested in supporting a recovering National Society.

How we work	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none"> • Reduce the numbers of deaths, injuries and impact from disasters. • Reduce the number of deaths, illnesses and impact from diseases and public health emergencies. • Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability. • Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
Contact information	
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International Federation of Red Cross and Red Crescent Societies

MAAAO001 - Angola

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2008/1-2008/12
Budget Timeframe	2008/1-2008/12
Appeal	MAAAO001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
A. Budget	286,686	0	66,502	0	182,553	535,741
B. Opening Balance	0	2,166	8,150	0	0	10,316
Income						
<u>Cash contributions</u>						
Danish Red Cross		0	0			0
DFID Partnership grant	280,928		-140,218			140,710
Norwegian Red Cross			0			0
Norwegian Red Cross (from Norway - Private Donors)		0				0
Norwegian Red Cross (from Norwegian Government)			0			0
Other					88,117	88,117
Swedish Red Cross			0			0
Swedish Red Cross (from Swedish Government)			0			0
C1. Cash contributions	280,928	0	-140,218		88,117	228,827
<u>Outstanding pledges (Revalued)</u>						
DFID Partnership grant			140,218			140,218
C2. Outstanding pledges (Revalued)			140,218			140,218
<u>Inkind Personnel</u>						
Danish Red Cross					71,391	71,391
C4. Inkind Personnel					71,391	71,391
<u>Other Income</u>						
Miscellaneous Income					17,213	17,213
C5. Other Income					17,213	17,213
C. Total Income = SUM(C1..C5)	280,928	0	0	0	176,721	457,649
D. Total Funding = B + C	280,928	2,166	8,150	0	176,721	467,964
Appeal Coverage	98%	#DIV/0	12%	#DIV/0	97%	87%

II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
B. Opening Balance	0	2,166	8,150	0	0	10,316
C. Income	280,928	0	0	0	176,721	457,649
E. Expenditure	-280,928	-219	-6,663		-176,721	-464,531
F. Closing Balance = (B + C + E)	0	1,946	1,487	0	0	3,434

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Selected Parameters	
Reporting Timeframe	2008/1-2008/12
Budget Timeframe	2008/1-2008/12
Appeal	MAAAO001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		286,686	0	66,502	0	182,553	535,741	
Supplies								
Shelter - Relief		175					175	-175
Construction Materials		10,875					10,875	-10,875
Clothing & textiles		221					221	-221
Food		2,327					2,327	-2,327
Other Supplies & Services		23,391					23,391	-23,391
Total Supplies		36,990					36,990	-36,990
Land, vehicles & equipment								
Computers & Telecom	62,179					76	76	62,103
Office/Household Furniture & Equipm.				-90		77	77	-77
Medical Equipment		278					278	-278
Total Land, vehicles & equipment	62,179	278		-90		153	431	61,748
Transport & Storage								
Storage		147					147	-147
Transport & Vehicle Costs	16,005	42,935		-990		25,340	67,285	-51,280
Total Transport & Storage	16,005	43,082		-990		25,340	67,433	-51,428
Personnel								
International Staff	125,400	105	205	7,275		64,468	72,053	53,347
National Staff	44,167	3,204		8,387		-7,751	3,840	40,327
National Society Staff	77,630	97,054				-65,669	31,385	46,245
Consultants						171	171	-171
Total Personnel	247,197	100,363	205	15,662		-8,781	107,449	139,748
Workshops & Training								
Workshops & Training	99,100	7,526				1,687	9,212	89,888
Total Workshops & Training	99,100	7,526				1,687	9,212	89,888
General Expenditure								
Travel	18,796	7,197		3,339		5,698	16,234	2,562
Information & Public Relation	13,000	13,446		3,180		853	17,479	-4,479
Office Costs	15,240	5,342				-27,040	-21,698	36,938
Communications	20,760	1,642				-8,894	-7,252	28,012
Professional Fees	6,240					3,973	3,973	2,267
Financial Charges	2,400	-8,167		-12,027		171,163	150,969	-148,569
Other General Expenses				-90		17	17	-17
Total General Expenditure	76,436	19,459		-5,508		145,771	159,723	-83,287
Programme Support								
Program Support	34,823	18,260	14	433		6,840	25,548	9,275
Total Programme Support	34,823	18,260	14	433		6,840	25,548	9,275
Operational Provisions								
Operational Provisions		54,970		-2,935		5,710	57,744	-57,744
Total Operational Provisions		54,970		-2,935		5,710	57,744	-57,744
TOTAL EXPENDITURE (D)	535,741	280,928	219	6,663		176,721	464,531	71,210
VARIANCE (C - D)		5,758	-219	59,839	0	5,832	71,210	