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# Emergency appeal operation update

## Angola: Food insecurity

 International Federation  
of Red Cross and Red Crescent Societies

**Emergency appeal n° MDRAO005**  
**GLIDE n° TC DR-2012-000092-GO**  
**Operation update n° 1**  
**27 November 2012**

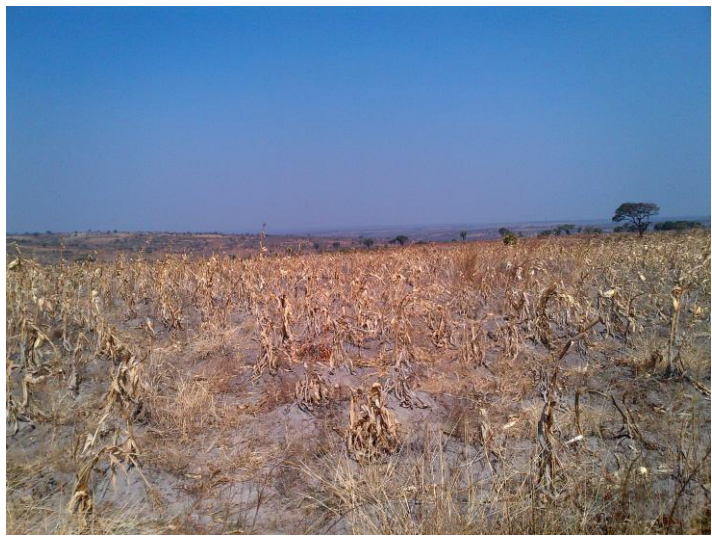
**Period covered by this Ops Update:**  
**13 – 26 November 2012**

**Appeal target (current):** The Emergency Appeal seeks CHF 1,562,562 in cash, kind or services to support the Angola Red Cross (CVA) in delivering immediate assistance to 12,000 households (60,000 beneficiaries) for 9 months, and will be completed by the end of August 2013.

**Appeal coverage:** 0%; [<click here to go directly to the updated donor response report; or here to link to contact details >](#)

**Appeal history:**

- This [Emergency Appeal](#) was initially launched on 13 November 2012.
- CHF 100,000 is being released from the Federation's Disaster Relief Emergency Fund (DREF) to support the national society to respond.



**Failed maize crop in Chinguari District, Bie – Photo by CVA**

**Summary:** Drought is currently affecting 10 coastal and central highland provinces of Angola. Agricultural production has dramatically decreased and increasing water shortages have been reported. It is estimated that agricultural production will decrease by more than 400,000 tons nationally and an estimated 366,780 households (1,833,900 people) will be affected across the ten provinces.

The rapid assessment conducted by the National Department of Nutrition in May 2012 confirmed that most of the population, especially in rural areas, is affected by the drought. The total number of acutely malnourished children in the ten affected provinces is currently estimated at 533,000.

The assessment carried out by the RDRT team confirmed that the situation is serious and requires immediate attention before it escalates out of hand in the coming 3-4 months. In some areas, families are sharing with livestock, few water sources which are also highly contaminated. Consequently, the possibility of outbreak of water related diseases is very high.

The Ministry of Agriculture reported a 60% decrease of average rainfall amount over the planting season resulting in 30% drop in crop production especially of cereals like maize. Total crop failure reported was recorded in some regions especially of bean crops and other drought tolerant tubers. With more than 70% of the population living below the poverty datum line, the impact will be devastating.

To date no funds have yet been received for this appeal and implementation is consequently delayed. Donors are strongly urged to provide the necessary support, as needs are critical and persistent. In particular, the window for

preparing fields and planting new crops is short and needs to be capitalized on to help ensure success for the next planting season.

## The situation

The situation remains the same as at the [Emergency Appeal](#) launch.

## Coordination and partnerships

There has been no change in coordination and partnerships since the launch of the Emergency Appeal.

## Red Cross and Red Crescent action

CVA with the support of IFRC carried out a rapid assessment to determine the extent and impact of the drought, and design different possible crisis response interventions. A five member team, including RDRT staff from Mozambique Red Cross skilled in relief, food security and nutrition, plus southern Africa regional staff and CVA staff undertook a week long assessment in July. The objective of the assessment was to measure the impact of drought in affected provinces of Angola and determine the nature and level of assistance required.

There have been no contributions received for appeal activities to date, though the DREF funds are being processed and implementation will shortly be able to take off.

## Progress towards outcomes

Relief distributions (food)	
<b>Outcome: 3,000 families of the drought-affected people in Kwanza Sul (1,000 Municipality of Porto Amboim, Ebo and Sumbe), Bié (1,000 Municipality of Cuemba, Nhaleia and Nhaleia and Huambo (1,000 Municipality of Bailundo and Chica chiloanga) are provided with emergency assistance for a period of three months and assessment conducted to determine if further assistance is required</b>	
1. Outputs (expected results)	2. Activities planned
3,000 households (15,000 people) are provided with appropriate non-food items and support on food.	<ul style="list-style-type: none"> <li>Develop beneficiary targeting strategy and registration system to deliver intended assistance for 15,000 targeted beneficiaries in Kwanza Sul, Huambo and Bie.</li> <li>To distribute food in Kwanza Su, Bie and Huambo for 3,000 targeted households.</li> <li>To distribute agriculture inputs in Kwanza Sul, Bie and Huambo for 3,000 targeted households</li> <li>Monitor and evaluate the relief activities and provide reporting on relief distributions.</li> <li>Asses needs for potential further assistance</li> </ul>

Emergency health	
<b>Outcome: Number of deaths, illnesses and impact from diseases reduced among affected communities through provision of preventive measures and curative services at the community-level to 12,000 families (60,000 beneficiaries) in the provinces of Kwanza Sul (3,000), Bie (4,500 families) and Huambo (4,500 families) for nine months.</b>	
3. Outputs (expected results)	4. Activities planned
<ul style="list-style-type: none"> <li>Diseases, epidemics in disaster affected areas are reduced.</li> <li>In the absence of health posts, emergency first aid provided to the victims in disaster affected areas;</li> <li>Health status of 12,000 families from affected</li> </ul>	<ul style="list-style-type: none"> <li>Mobilize and recruit 180 volunteers at community level for the prevention of common diseases and epidemics</li> <li>Refresher training of 180 volunteers and 3 branch staff using the CBHFA curriculum for 3 days</li> <li>Provide first aid and referral to the health facilities.</li> <li>Purchase 30 volunteer's first aid kits (11 for Bié, 11 for Huambo and 8 for Kwanza Sul).</li> <li>Conduct health promotion, education and sensitization activities to 12,000 families in the all affected provinces.</li> </ul>

communities is improved.	<ul style="list-style-type: none"> <li>• Develop community-based care and support structures through volunteers for the chronically ill, children, pregnant woman and other vulnerable members of the communities along of the Provinces of Huambo, Kwanza Sul and Bié.</li> <li>• Provide home based care and support to malnourished children from 12,000 families through volunteers, or referral to Health Facilities (therapeutic or supplementary feeding centers);</li> <li>• Carry out CBHFA activities, in target community areas based on respective priorities</li> <li>• Conduct social mobilization for routine vaccination, polio vaccination, malaria prevention and hygiene promotion in the targeted area from the tree Province;</li> <li>• Refer pregnant women for ante-natal care for IPT (intermittent preventive treatment) and tetanus vaccination;</li> <li>• Distribution of 1,000 LLITN to pregnant and lactating mothers</li> <li>• Conduct house to house visits through volunteers to check weight cards, nutrition status and vaccination of children and refer cases to health centers for vaccination or therapeutic feeding.</li> <li>• Printing and distribution of 3,000 IEC materials on disease prevention (booklets and posters)</li> <li>• Attend to common diseases through first-aid volunteers with support of national health staff.</li> </ul>
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#### Water, sanitation, and hygiene promotion

**Outcome: The risk of waterborne and water related diseases is reduced through provision of safe water, adequate sanitation as well as hygiene promotion to 12,000 families (or 60,000 beneficiaries) in Kwanza Sul, Bie and Huambo provinces (specify geographical areas as appropriate to the operation) for 12 months.**

5. Outputs (expected results)	6. Activities planned
<ul style="list-style-type: none"> <li>• Safe water is provided to 12,000 families collecting water from non-safe sources.</li> </ul>	<ul style="list-style-type: none"> <li>• Procurement and distribution of 300,000 Water Purification Tablets or “LIXIVIA” for water treatment for 60,000 people during 1 month.</li> </ul>
<ul style="list-style-type: none"> <li>• Appropriate sanitation, hygiene and information related to excreta disposal, solid waste disposal and drainage, is provided to 12,000 families (60,000 people) in Kwanza Sul ( Ebo, Porto Amboim and Sumbe), Bie ( Municipality of Cuemba, Nhaleia and Chinguara); Huambo (Bailundo, Chika chiloanga) for 9 months.</li> </ul>	<ul style="list-style-type: none"> <li>• Training of 180 volunteers in vector control</li> <li>• Vector control campaigns by volunteers and staff.</li> <li>• Volunteers conduct dissemination of information on hygiene promotion.</li> <li>• Conduct promotion activities on waste disposal and drainage system</li> </ul>
<ul style="list-style-type: none"> <li>• The health status of the 12,000 targeted families is improved through behaviour change and hygiene promotion activities.</li> </ul>	<ul style="list-style-type: none"> <li>• Conducting weekly hygiene and health promotion campaigns among the affected population focusing on behaviour change targeting affected families in the communities.</li> <li>• Printing 3,000 information, education and communication (IEC) materials (booklets, posters) and distribution IEC material on hygiene promotion (posters, flyers, etc), manuals, educational materials, etc</li> </ul>

#### Food Security, nutrition and livelihoods

**Outcome: Food security of 3,000 drought affected vulnerable families is met by the end of intervention response.**

7. Outputs (expected results)	8. Activities planned
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<ul style="list-style-type: none"> <li>• 3,000 households (1,000 in Kwanza Sul, 1,000 in Bié and 1,000 in Huambo) are provided with food security starter packs</li> <li>• Households are provided with appropriate extension services and agricultural inputs and livelihoods restored.</li> </ul>	<ul style="list-style-type: none"> <li>• Coordinate with agriculture extension service and FAO on training of basic drought tolerant agricultural techniques to 45 volunteers and lead farmers.</li> <li>• Distribute food security starter packs (maize, beans, sweet potatoes and cassava) for 3,000 affected families in the province of Kwanza Sul, Bié and Huambo.</li> <li>• Training of 30 staff and volunteers in Food Security Assessment and Evaluation (FSAET).</li> <li>• Conduct final evaluation.</li> </ul>
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### Disaster Risk Reduction

<b>Outcome: The affected targeted community's resilience to disasters is protected and restored.</b>	
<b>9. Outputs (expected results)</b>	<b>10. Activities planned</b>
<ul style="list-style-type: none"> <li>• Drought affected communities are better prepared to predict, respond and recover to weather induced emergencies.</li> </ul>	<ul style="list-style-type: none"> <li>• Build capacity of community based disaster risk reduction committees.</li> <li>• Develop Standard Operating Procedures (SoPs), contingency plans and community based early warning systems.</li> <li>• Train staff and volunteers on use of Vulnerability Capacity Assessment (VCA) guidelines and tools.</li> <li>• Conduct VCA (baselines assessments) in targeted communities.</li> <li>• Develop community hazard maps for each of the communities</li> <li>• Train staff and local leaders on climate change adaptation techniques.</li> <li>• Promote sustainable use of natural resources through land use management and use of appropriate technologies in energy renewable technologies like solar, water harvesting and wind.</li> </ul>

### Logistics

<b>Outcome: Relief operation is supported and delivering a range of relief items in line with the operational priorities in a cost effective and timely manner.</b>	
<b>11. Outputs (expected results)</b>	<b>12. Activities planned</b>
<ul style="list-style-type: none"> <li>• The operation has coordinated mobilization of relief items and efficient dispatch of goods to the final distribution points.</li> </ul>	<ul style="list-style-type: none"> <li>• IFRC to provide logistical support through a delegate for three months to establish warehouse and build capacity of CVA logistics unit</li> <li>• IFRC logistics delegate to support the tendering and selection process for seeds and food purchases along with national society counterpart</li> <li>• Establish the best sourcing strategy for relief materials so cost efficient and timely delivery of relief is ensured.</li> <li>• Support and ensure appropriate procurement procedures and standards are in place</li> <li>• Control efficient supply movements to the end user.</li> <li>• Preposition stocks in strategic areas as appropriate and viable</li> </ul>

### Progress and Challenges:

As the operation has only recently been initiated, to date, only assessment and planning activities have been undertaken.

A draft plan of action (PoA) is being prepared and shared internally for feedback and will be ready for publishing soon.

## Contact information

### For further information specifically related to this operation please contact:

- **Angola** : Secretary General; Mr. Valter Bombo Guange Quifica, Direct Phone: 00 244 192 912 6171; email: [vquifica@yahoo.com](mailto:vquifica@yahoo.com)
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## How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.