

Mid-Year report



International Federation
of Red Cross and Red Crescent Societies

Angola

Appeal No. MAAAO001

31 August 2010

This report covers the period
01/01/2010 to 30/06/2010.



New boats made in Luanda for the CVA disaster risk reduction project. Photo: Angola Red Cross

In Brief

Programme outcome: Based on the strategic aims under [Strategy 2020](#)¹, the Angola Red Cross Society (CVA²) aims to achieve the following outcomes: saving lives of vulnerable people, enabling safer and healthy living, strengthening capacities of communities to respond to disasters, reducing impact of natural and manmade disasters, enhancing the capacity of staff to deliver quality service to vulnerable communities, developing community resilience, enhancing community livelihoods and promoting social inclusion, peace and harmony.

Programme(s) summary

Since the beginning of the year, CVA has only received funding support for the disaster management and National Society Development (NSD) components of the plan through the International Federation of the Red Cross and Red Crescent (IFRC). The IFRC Southern Africa Regional Representation Office (SARRO) continued providing technical support in developing programmes and ensuring that the required capacity is in place.

A major milestone for the National Society during the reporting period was the local launch of the [Zambezi River Basin Initiative \(ZRBI\)](#). The overall goal of the initiative is to reduce the impact of challenges facing communities along the ZRBI, and improve the quality of their lives and livelihoods, through comprehensive and sustainable disaster management, branch development, and health and care programmes.

¹ Strategic aim 1: Save lives, protect livelihoods, and strengthen recovery from disasters and crises

Strategic aim 2: Enable healthy and safe living

Strategic aim 3: Promote social inclusion and a culture of non-violence and peace.

² CVA, Portuguese acronym for Angola Red Cross

Through its organisational development (OD) activities, CVA resuscitated 18 provincial branches and conducted workshops on governance and how to prepare for provincial assemblies. The OD activities were mainly supported by the Swedish Red Cross through the IFRC.

CVA's programmes have an integrated approach which is centred on the HIV and AIDS programme. The HIV and AIDS programme is implemented under the Southern Africa Regional HIV and AIDS programme, which is a component of the IFRC's Global Alliance of HIV ([MAA63003](#)).

Financial situation: The total 2010 budget is CHF 2,555,625 (USD 2,236,903 or EUR 1,712,921), of which has not been covered during the reporting period.

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

No. of people we help: CVA reached an estimated 13,688 people through awareness raising and training on community-based disaster risk reduction and preparedness interventions and more than 38,000 people through various HIV and AIDS interventions.

Our partners: Within the Movement, CVA is in partnership with IFRC, ICRC and the Norwegian, Swedish, German and Spanish Red Cross Societies. Outside the Movement, CVA works with UN agencies (UNICEF, WHO, UNDP and Global Fund), DFID, IOM, OXFAM, DFID, World Vision, the National Commission for De-mining and Humanitarian Assistance of Mine Victims (CNIDAH), Handicap International, the National Civil Protection Commission, the National Malaria Forum and the Country Coordination Mechanism (CCM), the private sector and government ministries.

Context

Angola went through a two-decade conflict, which killed or wounded hundreds of thousands of people, displaced another 1.2 million people and destroyed towns and cities, severely damaged the economy and left huge tracts of farmland untended and unproductive. The Lusaka Protocol, signed by Angolan Government and UNITA rebel forces on November 20, 1994, brought only an uneasy peace. Drought, the presence of 15 million landmines, and the collapse of traditional distribution and trading networks have left large segments of the population without access to basic goods and services, including food, clean water and health care.

Since 2002, Angola started to recover the devastating conflict that left the country deeply distressed, divided and heavily handicapped with land mines. The infrastructure has been depleted, and the institutional and basic service delivery systems are poor. Despite efforts made by the government on revamping socio-economic and physical infrastructure such as road networks, power supply, communication, education system and health facilities, there is still a long way on rebuilding the country beyond Luanda and some provincial capitals as well as creating alternative solutions to rural-urban migration. There are delays in the nationwide development as a direct impact of the global economical crisis.

Angola remains in the lower end of the human development index (HDI) for southern Africa, ranking 162 on a global index of 179 countries, though improvements are noted. There have been some significant issues related to the limited access to health services, poor water and sanitation conditions, malnutrition and constant threats of diseases outbreaks. This explains the challenges confronting Angola in the near future and that it will not be easy to reach out to many people.

The main causes for mortality rate for children under five years, relate to high percentage of neonatal deaths (22 percent), pneumonia (25 percent), diarrhoeal diseases and malaria, each (19 percent). Hardships in rural areas lead to rural-urban migration particularly among the youth, now living outside educational possibilities and facing a life on the roads – drug and alcohol abuse increased crime and domestic violence.

To date, approximately six million Angolans live in Luanda in cramped conditions in suburbs near the city centre. The Angolan economy is by large dependent on the oil revenue but slowly the agricultural sector is growing, largely through support to farming, fishing associations and small scale loans. However, most of the rural population lives on subsistence farming and fishing along the riverbanks where access is easier but in competition with hippos, crocodiles and elephants. The need for development, hereunder the hydro-electric plants that ever so often floods the farmed areas, causes loss of potential income and food sources for the poorest of Angolan Population.

Progress towards outcomes

Disaster Management

Programme component: Disaster Preparedness	
Outcome 1	Relief stock are pre-positioned at provincial level for timely response in the event a disaster.
Outcome 2	ARC has efficient mechanism and improved capacity in skilled human resources, financial and material resources for optimal disaster preparedness.
Programme component: Disaster Response and Recovery	
Outcome 1	Improved disaster response mechanism to meet the needs of those affected by disaster.
Outcome 2	ARC capacity for the provision of assistance in the restoration of sustainable livelihoods in population affected by disasters is improved.

Achievements

With support from DFID Institutional Support (IS3) funding through the IFRC secretariat, CVA started the development of the disaster management master plan (DMMP). A draft will be approved after taking into consideration the finalized government's DM policy.

CVA carried out community sensitization sessions on mine awareness through drama groups among the communities at risk. The National Society also conducted two workshops on participatory planning targeting communities vulnerable to disasters. Eight participating communities developed disaster management plans during the workshop. Training was also conducted on First Aid and basic disaster management targeting community action teams.

Three meetings were convened with the National Civil Protection Unit to enhance partnerships on development of community-based early warning systems. CVA also conducted training workshops targeting communities in drought and flood prone areas on management and maintenance of boats used during floods.

Programme component: Disaster Risk Reduction (DRR)	
Outcome 1	Communities have in place local risk reduction strategies building on traditional coping mechanisms as well as contemporary knowledge on the cause and effect of common natural phenomenon due to climate change.

Achievements

CVA received assistance and support from IFRC in finalising the development of a food security strategy for the National Society.

Programme component: Zambezi River Basin	
Outcome 1	The risk and impact of disasters among communities living along the Zambezi River basin is reduced through community preparedness.
Outcome 2	Access to adequate and nutritious food commodities increased among communities along the Zambezi River basin.
Outcome 3	The number of deaths, illnesses and impact from diseases reduced among communities along the Zambezi River basin.
Outcome 4	National Society capacity to implement disaster preparedness, response and recovery operations is increased.

Achievements

The ZRBI seeks to reduce the impact of disasters and other challenges on communities living along the Zambezi river basin, aiming to improve the quality of their lives and livelihoods through comprehensive, sustainable and integrated capacity enhancement in disaster management, branch development and primary health and care programmes.

The initial phase of the programme focused on strengthening the capacity of CVA in implementing disaster preparedness, response and recovery operations along the Zambezi River. This was a preparatory phase where the capacities of the local Red Cross branches were strengthened to ensure effective implementation, programme ownership, sustainability and integration with other local community activities.

One of the key achievements of this programme during this reporting period was the official launch of the ZRBI in Luanda on 19 February 2010 at a ceremony attended by representatives from the government Civil Protection Unit. Similarly the ZRBI was launched at provincial level in Moxico Province and in Cazombo municipality at which Red Cross provincial and municipal offices were established to oversee and coordinate the implementation of ZRBI. The presence of the Red Cross has been widened with the set-up of offices and branches in areas where the Red Cross had not previously operated. This will aid the capacity of the Red Cross in reaching out to those communities that could previously not be reached.

Health and Care

Programme component: Community-based Health and First Aid (CBH&FA)	
Outcome 1	Communities which are able to cope with health and disaster challenges achieved through implementation of CBH&FA, traditional and commercial First Aid activities.
Outcome 2	Women, men and children protected from malaria through adequate surveillance, preparedness, prevention and response measures.
Outcome 3	Women, men and children protected from tuberculosis (TB) through adequate surveillance, preparedness and response measures.
Outcome 4	Access to immunization services (especially measles and polio) to children and mothers improved in ARC targeted areas.
Outcome 5	ARC has capacity to mobilise a pool of voluntary non-remunerated blood donors.

Achievements

The focus on the health and care programme has over the years been on the HIV and AIDS programme, which is reported under a separate appeal. The National Society reached over 38,000 people with various HIV and AIDS interventions. The HIV and AIDS programme is reported under a separate appeal covering the following programme component areas: [MAA6300310myr](http://www.ifrc.org/appeals/annual06/logframes/Africa/MAA6300310myr)

A proposal on malaria programme has been developed with support from IFRC and should funding be secured, implementation is scheduled to start in the third quarter of 2010.

Programme component: HIV and AIDS (Refer to Link http://www.ifrc.org/appeals/annual06/logframes/Africa/MAA63003AO.pdf)	
Outcome 1	Prevent further infections through targeted community-based peer education and information, education, and communication (IEC) activities, and promote uptake of services including voluntary counselling and testing (VCT) and parent to child transmission prevention services (PPTCT).
Outcome 2	Scale-up community home-based care and support for vulnerable children with holistic support to address education, food and nutrition, psychosocial support, social inclusion, and economic support.
Outcome 3	Address stigma and discrimination with targeted communication and advocacy activities.
Outcome 4	Build the National Society capacity to plan, implement, and manage the programme.

National Society Development

Programme component: Leadership and Management Development

Outcome 1	ARC governance and management strengthened ability to effectively lead the organisation and its service delivery.
-----------	---

Achievements

CVA has resuscitated their provincial structures, and with funding support from Swedish Red Cross channelled through the IFRC, conducted a workshop for provincial secretaries and senior management in March 2010. The objective of the workshop was to induct participants on governance issues and facilitate the comprehensive development and implementation of the National Society Strategic Plan.

Programme component: Well-functioning Organisation

Outcome 1	ARC has well defined policies and guidelines in programming, finance, logistics and human resources management for the effective management of the National Society.
Outcome 2	Financial management system, procedure and tools are in place, effectively and systematically used.
Outcome 3	ARC has a well functioning internal and external communication system, supported by a reliable information technology infrastructure.
Outcome 4	ARC has capacity in planning, monitoring, evaluation and reporting (PMER) and programme design, monitoring, evaluation and reporting meet standards stipulated in the Federation's "Performance and Accountability Framework".

Achievements

CVA used the platform of the provincial secretaries' workshop held in March, to induct new secretaries on National Society policies and procedures, human resources and finance systems, volunteer management and membership service. During the reporting period, CVA recruited an OD officer who attended induction on OD facilitated by the OD team at the IFRC, regional office in Johannesburg.

Constraint or Challenges

The main challenge has the flow of funding to the National Society, which consequently delayed the implementation of some planned activities. High staff turnover at the programme management level also derailed planned activities.

Working in partnership

As auxiliary to government, CVA has been recognised as a major partner of government in emergency operations as well as in disaster risk reduction activities, where CVA is taking a leading facilitating role through the VCA approach. Partnership with the National Civil Protection Commission facilitates rapid response to emergencies. In various areas, CVA has cooperation agreements with UN agencies such as UNICEF, WHO, UNDP and Global Fund.

With technical support of the ICRC, CVA coordinates with National Commission for De-mining and Humanitarian Assistance of Mine Victim (CNIDAH), UNICEF and Handicap International in the mine awareness programme.

The secretary general represents the National Society at the Country Coordination Mechanism (CCM), which coordinates HIV interventions in Angola. This cooperation is expected to continue in the future and as CVA re-establishes itself through change process, aimed to take a leading role in its humanitarian mandate. Currently, the German and Spanish Red Cross are working bilaterally/unilaterally in Angola in response to HIV and AIDS and capacity building in disaster management, emergency health support and specific social programmes directed at youth rehabilitation and work training.

Contributing to longer-term impact

CVA suffers the consequences of prolonged emergency operations, which require effective response. Without the commitment of the volunteers, little could be achieved in terms of the relief assistance. The strengthening of provincial structures will counteract the discrepancies in disaster response capacities through engaging into programmes that build community resilience to disasters and reduce impact of disaster through effective mitigation.

Looking ahead

In the next three years, CVA will be absorbed with the implementation of activities under the ZRBI. The overall goal of the initiative is to reduce the impact of challenges facing communities along the ZRBI, and improve the quality of their lives and livelihoods, through comprehensive and sustainable disaster management, branch development, and health and care programmes.

The CVA leadership will continue to strengthen the capacities of provincial branches and ensure full operation of the provincial structures. The aim is to build on synergy and synchronisation of programmes. The improvement in governance and management at branch level becomes the premise for the envisaged programme development. Support from the IFRC will be sought to improve collaboration and co-ordination utilizing the Cooperation Agreement Strategy approach that aligns National Society' needs, strategic directions, capacities and priorities as well as support received from partners.

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	
<p>For further information specifically related to this report, please contact:</p>	
<ul style="list-style-type: none"> • In Angola: Walter Bombo Guange Quifica, Secretary General, Email: mailto:vquifica@yahoo.com Phone: Office: +244.222.39.32.84, Mobile: +244.92.23.13.242; Fax +244.222.372.868 • In IFRC Southern Africa Region: Ken Odur, Regional Representative, Johannesburg, Email: ken.odur@ifrc.org, Phone: +27.11.303.9700, Fax: + 27.11.884.3809; +27.11.884.0230 • In IFRC Africa Zone: Dr Asha Mohammed, Head of Operations, Johannesburg, Email: asha.mohammed@ifrc.org, Phone: +27.11.303.9700, Fax: + 27.11.884.3809; +27.11.884.0230 <p><i>For Resource Mobilization and Pledges enquiries</i></p> <ul style="list-style-type: none"> • In IFRC Africa Zone: Ed Cooper; Resource Mobilization and Performance and Accountability Coordinator; Johannesburg; Email ed.cooper@ifrc.org; Phone: Tel: +27.11.303.9700; Fax: +27.11.884.3809; +27.11.884.0230 <p>For Performance and Accountability (planning, monitoring, evaluation and reporting (enquiries):</p> <ul style="list-style-type: none"> • In IFRC Africa Zone: Theresa Takavarasha; Performance and Accountability Manager, Johannesburg; Email: terrie.takavarasha@ifrc.org; Phone: Tel: +27.11.303.9700; Fax: +27.11.884.3809; +27.11.884.0230 	

International Federation of Red Cross and Red Crescent Societies

MAAAO001 - Angola

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAAAO001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	1,066,007	430,947	283,224	32,325	443,122	2,255,625
B. Opening Balance	19,768	0	14,242	0	-344,544	-310,534
Income						
<u>Cash contributions</u>						
<i>DFID Partnership grant</i>	112,556					112,556
C1. Cash contributions	112,556					112,556
<u>Outstanding pledges (Revalued)</u>						
<i>DFID Partnership grant</i>	110,674					110,674
<i>Netherlands Red Cross (from Netherlands Government)</i>	-732					-732
C2. Outstanding pledges (Revalued)	109,942					109,942
<u>Inkind Personnel</u>						
<i>Danish Red Cross</i>					37,117	37,117
C5. Inkind Personnel					37,117	37,117
C. Total Income = SUM(C1..C6)	222,499	0	0	0	37,117	259,616
D. Total Funding = B + C	242,266	0	14,242	0	-307,427	-50,918
Appeal Coverage	23%	0%	5%	0%	-69%	-2%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	19,768	0	14,242	0	-344,544	-310,534
C. Income	222,499	0	0	0	37,117	259,616
E. Expenditure	-91,720		-12,208		-88,173	-192,100
F. Closing Balance = (B + C + E)	150,547	0	2,034	0	-395,600	-243,019

International Federation of Red Cross and Red Crescent Societies

MAAAO001 - Angola

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAAAO001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		1,066,007	430,947	283,224	32,325	443,122	2,255,625	
Supplies								
Shelter - Relief	17,352							17,352
Construction Materials	15,000							15,000
Clothing & textiles	23,400							23,400
Seeds,Plants	25,000							25,000
Water & Sanitation	59,200							59,200
Medical & First Aid	178,250	96					96	178,154
Teaching Materials	110,955							110,955
Utensils & Tools	9,760							9,760
Other Supplies & Services	2,640							2,640
Total Supplies	441,557	96					96	441,461
Land, vehicles & equipment								
Vehicles	50,000							50,000
Computers & Telecom	11,600							11,600
Total Land, vehicles & equipment	61,600							61,600
Transport & Storage								
Storage		2,205					2,205	-2,205
Distribution & Monitoring	39,900	729					729	39,171
Transport & Vehicle Costs	102,350	7,308				12,242	19,550	82,800
Total Transport & Storage	142,250	10,243				12,242	22,484	119,766
Personnel								
International Staff	182,000					53,053	53,053	128,947
National Staff	75,794					-13,787	-13,787	89,581
National Society Staff	196,244	27,372		261		31,595	59,228	137,016
Consultants	27,500							27,500
Total Personnel	481,538	27,372		261		70,862	98,494	383,044
Workshops & Training								
Workshops & Training	567,850	716					716	567,134
Total Workshops & Training	567,850	716					716	567,134
General Expenditure								
Travel	31,890	12,375		44		175	12,594	19,296
Information & Public Relation	61,760	1,467				846	2,313	59,447
Office Costs	5,000	579				2,708	3,287	1,713
Communications	26,860	902				3,497	4,399	22,461
Professional Fees	93,000					6,550	6,550	86,450
Financial Charges	4,000	-963		-3,287		1,350	-2,900	6,900
Other General Expenses	191,705	253				-152,759	-152,506	344,211
Total General Expenditure	414,215	14,614		-3,243		-137,634	-126,263	540,478
Programme Support								
Program Support	146,616	6,409		870		2,458	9,737	136,879
Total Programme Support	146,616	6,409		870		2,458	9,737	136,879
Operational Provisions								
Operational Provisions		32,270		14,320		140,245	186,836	-186,836
Total Operational Provisions		32,270		14,320		140,245	186,836	-186,836
TOTAL EXPENDITURE (D)	2,255,625	91,720		12,208		88,173	192,100	2,063,525
VARIANCE (C - D)		974,287	430,947	271,016	32,325	354,950	2,063,525	