

ANGOLA

INTEGRATED COMMUNITY HEALTH AND DEVELOPMENT PROGRAMME

CHF 3,091,000
146,000 beneficiaries

Programme no 01.19/99

The Context

Since gaining independence from Portugal in 1975, Angola has suffered from almost constant conflict. Although the 1994 Lusaka Peace Accord has helped the country to move into rehabilitation and development, the fragile free-market economy is still suffering from the effects of the civil war. Despite international support, inflation is still rampant. Agriculture continues to be hard hit, with millions of mines making arable land unfit for farming. The country's infrastructure (roads, bridges and railways) is still war-damaged. Health and education make up a mere three percent of the government's annual budget. In addition, a high rate of unemployment and continued movements of internally displaced people (IDPs) and refugees leave Angola in a dangerously fragile condition.

In April 1997, a United Government of National Reconciliation was formed, though clashes between the government and UNITA continued. The peace process moved steadily forward until May 1998. Then, both sides mobilised, and skirmishes began for strategic advantage should war break out again. Continued U.N. sanctions have failed to slow down re-arming UNITA, strengthening its intent to solve the conflict by arms.

Security in this war-torn country dictates where the Red Cross can operate. Against this backdrop, the Federation supports the Angola Red Cross (ARC) in 18 communities in 7 provinces, out of a total of 270 communities

and 18 provinces.

The Operation

With the peace process disintegrating, ARC and the Federation are maintaining the strategy of rehabilitation and development through the Integrated Community Health and Development Programme (ICHDP) in order to prepare for emergency health needs that would develop if the war flares up again. The ICHDP concept in Angola was based on Project Delegations, where a Participating National Society (PNS) works in a specific area while global co-ordination lies with ARC and the Federation. This method will be replaced by a unified approach in 1999, giving the Federation the overall management in order to meet the objectives set during the

year. A trimmed-down team of eight delegates (down from 15 in 1998) will provide the same services in a more efficient manner. The Federation and ARC will co-operate with the ICRC on relief operations benefiting IDPs.

Objectives

The overall objective of the 1999 programme is to strengthen ARC at headquarters and the provincial levels to allow it to implement its Community-Based Health Care, Mine Awareness Education, Disaster Preparedness and Institutional Resource Development programmes targeting 146,000 beneficiaries (women, under-fives and the elderly) in seven provinces in 1999. Specific objectives include:

- To improve the health conditions of vulnerable communities through community-based health care programmes including health education on water and sanitation, mine awareness, First Aid training and branch activities.
- To maintain and consolidate the current health network (16 posts in seven provinces) through strengthening the ties with the ARC branches and the communities they serve.
- To strengthen the management and governance capacities, structures and operational links of the ARC at both national and provincial levels.
- To reinforce the capacity of ARC staff and volunteers at national and provincial levels to manage programmes and to plan and secure future financial sustainability.

Plan of Action

- Health

The emphasis of the Community-Based Health Programme will be on preventive care and health education, reproductive health and HIV/AIDS education. The preventive care programme will be in addition to the existing curative care provided at 16 health posts located in seven provinces. Because of their central location in communities where IDPs traditionally gather, the health posts could also serve as distribution points for non-food items. Health problems related to water quality continue to be a major complaint at the health posts. If sufficient funding becomes available, a priority water and sanitation programme is planned for 1999, calling for the recruitment of an ARC staffer to co-ordinate training as well as the rehabilitation and/or drilling of wells.

- Mine Awareness

The Mine Awareness programme, from which 30 instructors graduated in 1998, will train an additional 60 in 1999, who will in turn teach 60,000 people in the southwestern Cunene province how to avoid, identify, mark and report the presence of anti-personnel mines by the end of 1999. In addition, these instructors will be trained in disaster preparedness (DPP), focusing on the response to natural hazards and acting as provincial DPP cadre.

- Institutional and Resource Development

The year 1999 will be the last of the three-year Programme Framework aimed at assisting ARC in building a stronger National Society. After the 1998 Extraordinary General Assembly, ARC has started to implement the new volunteer governance structure at the provincial branch level. The Federation's priority will be to assist this process and to provide policy support to programmes, financial development, disaster preparedness and administration. On the resource side, management of the Viana Training Centre will be handed over to ARC for its own use and as a revenue generating project. Individual provincial revenue generating and cost-recovery programmes will be developed or strengthened if already in place. Sustainability will be ensured, thus giving ARC a multi-tiered revenue generation capacity. In line with the 1997 Seville Agreement, ICRC will assist with structural development projects such as setting up an ARC Dissemination Section, as well as with strengthening the Tracing Section of the National Society.

- Training

The current programme training ARC Volunteer First Aiders will be augmented by an additional six Training of Trainers courses in order to make the training programme available both in the provinces and at the Viana Training Centre. A Basic Volunteer Training Course (BVTC) programme will be implemented by 40 instructors, who are to recruit and train 800 volunteers in all 18 provinces during 1999. The BVTC will consist of classes on the Red Cross Movement and First Aid. Trained volunteers will assist the provincial branches to provide Red Cross services in the communities.

- Provincial Activities

In the four provinces formerly covered by PNS project delegations (Benguela, Bié, Cuanza Sul, Uige), activities as outlined in the ICHDP will continue under the Federation management in order to maintain the programmes more efficiently and consistently. In provinces where the Red Cross can no longer work because of security issues, the Federation/ARC will attempt to maintain those programmes through alternative means.

Resource Planning

Funding for the ICHDP will be sought through the membership of the Angola Working Group, consisting of member PNSs. Funding proposals for general programmes and specific projects will be submitted to traditional donors such as USAID, ECHO and CIDA. Efforts by the ARC to secure local funding will continue. The delegation will provide monthly situation reports, as well as an annual report. The ARC will use its community health and mine awareness programmes for publicising its activities in the media.

Capacity

- The National Society

The ARC has 233 staff members and 527 active volunteers with Branch Offices in 17 out of 18 provinces. It works actively with the Federation and PNSs in seven provinces.

- The Federation

The Federation currently has five delegates and one locally-hired expatriate, as well as seven PNS project delegates. In 1999, there will be a single Federation Delegation with seven delegates and one locally-hired expatriate. The Federation delegation works within the Southern Africa Regional network and co-operates and collaborates closely with the Federation Regional Delegation based in Harare.

Co-operation

The Federation delegation operates within the framework of the Southern Africa Partnership of Red Cross Societies (SAPRCS), seeking assistance from the regional delegation in Harare as required. In the spirit of the Seville Agreement, the ARC and the Federation will co-operate closely with the ICRC in preparing the health posts and health services to respond to any medical needs might war flare up again. As the Ministry of Health's auxiliary, ARC will ensure that it is included in all emergency health response planning.

The delegation will co-ordinate its activities with the participants in the UN Consolidated Appeal process. It works with the UN on several health issues, such as vaccinations and epidemic response. The Federation and ARC are members of the Angolan Government/UN mine awareness co-ordination (INAROE), NGOs in Angola Co-ordination (CONGA), as well as the United Nations Co-ordination of Humanitarian Actions in Angola (UCAH).