

# Angola

15 August 2017

**1,495 Congolese refugees have been successfully relocated** from Mussungue reception centre to Lóvua settlement.

Upon arrival in Lóvua, **all refugees received medical support, relief items and a one-day ration of food.**

**Malaria continues to be the main cause of morbidity with a total of 285 cases recorded during the reporting week.**

## KEY FIGURES

**75%**

Of Congolese refugees in Angola are women and children

**33,132**

Biometrically registered Congolese refugees in Dundo area (14 August 2017)

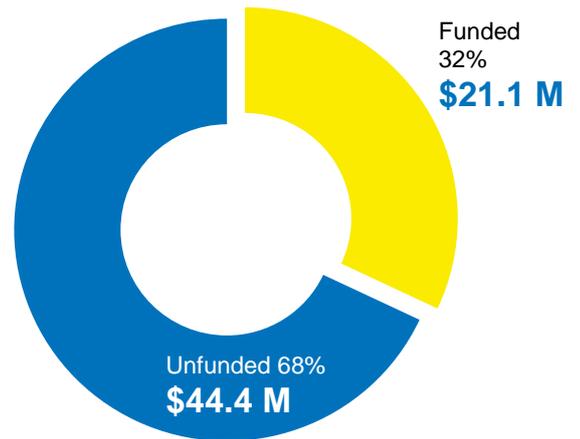
**50,000**

Inter-agency planning figure for Congolese refugees from the Kasai region in northern Angola by the end of the year

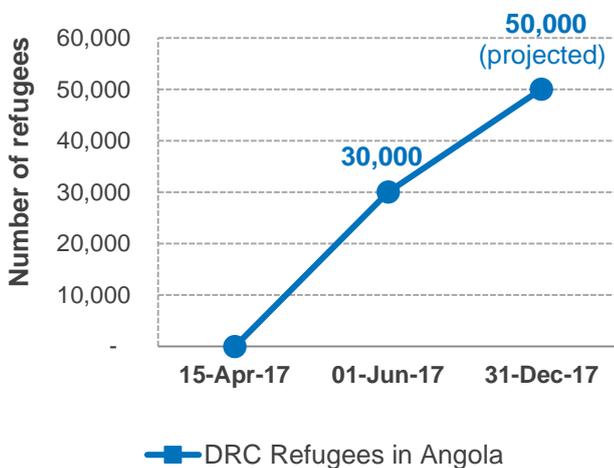
## FUNDING (AS OF 8 AUGUST)

**USD 65,507,610**

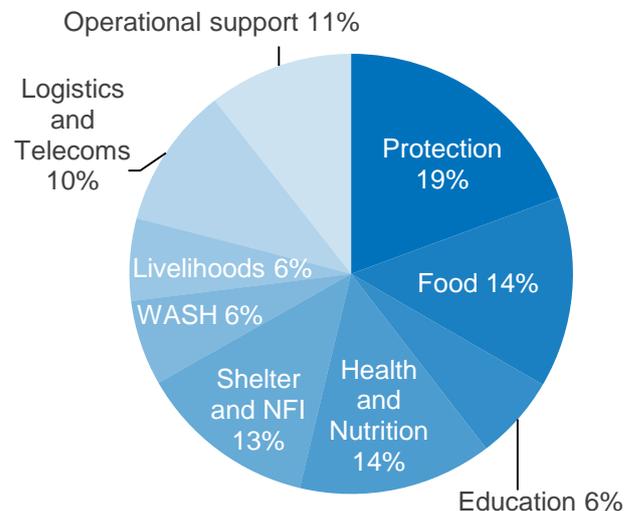
requested for Angola Inter-agency Refugee Response

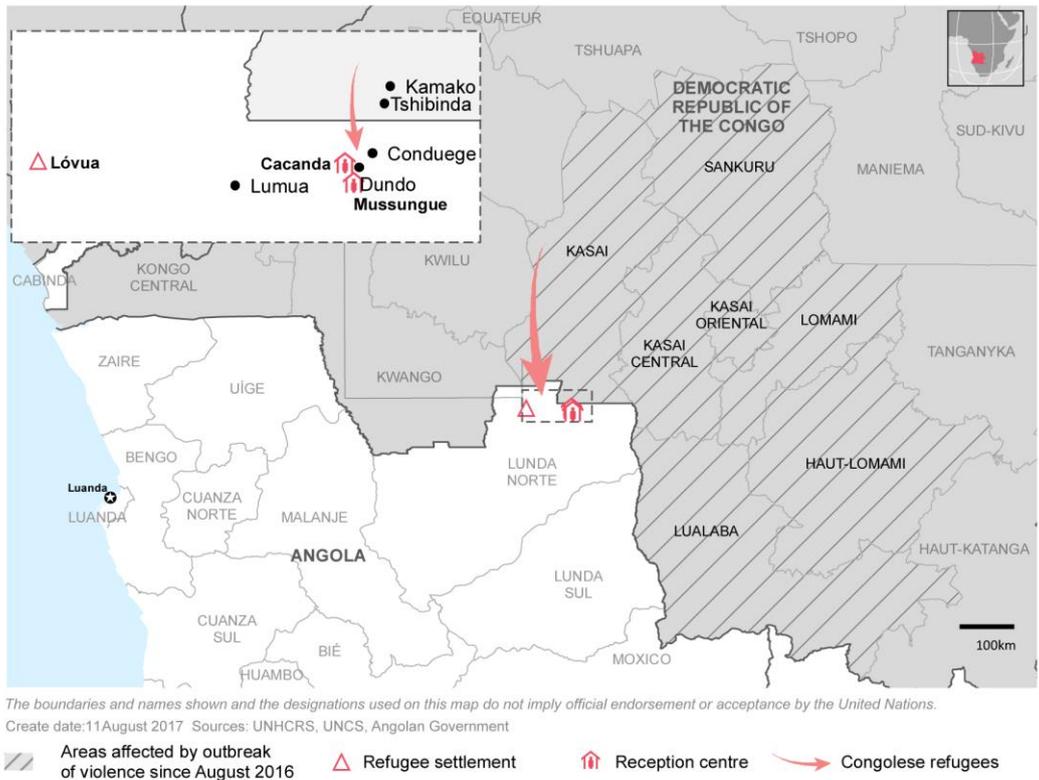


## POPULATION TRENDS



## FINANCIAL REQUIREMENTS





## Operational Context

Violence and ethnic tensions, in the Kasai region of the Democratic Republic of the Congo (DRC), has forced over 33,000 Congolese to seek safety in Angola’s Lunda Norte Province. Some 75 per cent of the registered refugees are women and children.

While the conflict continues and refugees report incidents of indiscriminate violence, sexual and human rights abuses, and a shortage of basic items, the number of newly arrived refugees has decreased significantly since early July. According to recently arrived refugees, who reached Angola through entry points in the bush, access to border areas through the main roads is limited. As the security situation remains fluid in the Kasai region, humanitarian organizations are preparing to provide protection and assistance up to 50,000 Congolese refugees who may seek asylum in Angola by the end of 2017.

Relocation of Congolese refugees in Lunda Norte to Lóvua settlement, 94km west of Dundo, is ongoing. A total of 1,495 refugees, from Mussungue reception centre, were successfully relocated to Lóvua over six days between 8 and 13 August. Upon arrival in Lóvua, all refugees received medical support, a package of relief items and a one-day food ration, consisting of meat and sardines, donated by the Government of Angola (GoA). There are currently no refugees in Mussungue reception centre.

This relocation was carefully planned as an inter-agency exercise in consultation with all partners on the ground and shared with the Government and local authorities. Several

messaging initiatives were conducted with the refugee and host community populations to address cultural/ethnic protection concerns in the relocation plan.

Once finalized, Lóvua site will consist of nine zones with nine villages each, and each village will have 72 plots making it possible to host up to 360 refugees. The overall capacity of the site will be 30,000 refugees with the possibility of expansion. Some 200 refugees from Mussungue and Cacanda reception centres as well as 50 workers from among the host community were hired to assist with the manual clearing of the site.



*Refugee families receiving their relief items after relocation from Mussungue reception centre to Lóvua settlement. © UNHCR / Rui Padilha.*

## Achievements



### PROTECTION

#### Achievements and Impact

- As of 14 August, a total of **33,132** refugees from DRC have been biometrically registered in Lunda Norte Province of Angola.
- As part of the relocation plan, five relocation convoys successfully departed from Mussungue centre to the new settlement in Lóvua. Establishment of the arrival centre in Lóvua and reception of refugees was undertaken as an inter-agency exercise. In total, 1,495 refugees were relocated from Mussungue reception centre in Dundo to Lóvua over a period of six days (8 – 13 August).
- Refugee families are transferred from the arrival centre in Lóvua to their allocated plot of land where they will construct their shelter. All Lóvua residents received new addresses and registration forms reflecting their allocated plot.
- Protection teams were fully engaged in the relocation exercise, from Mussungue to Lóvua, mainly focusing on the organization of the convoy whilst identifying refugees with specific protection issues and supporting refugee families upon arrival in the newly-established settlement. In addition, the protection team supported with the tent allocation process providing physical support to the most vulnerable.
- Joint key information messages continue to be delivered to the refugee community.
- Protection assistance as well as access to food, shelter, drinking water, sanitation and hygiene facilities is provided to refugees in Lóvua.
- During the visit of the Minister of Social Assistance and Reintegration (MINARS) to Lóvua settlement on 11 August, the Minister expressed his satisfaction and gratitude for the work carried out by all partners involved in the relocation and the assistance provided to refugees. Minister Gonçalves Muandumba witnessed the refugee arrival process, including settlement of families in village 1, where he was welcomed by the new residents.
- Protection partners remain present in both reception centres in Dundo. Key information regarding the relocation exercise and tentative timeframe of the movements are communicated via radio. Particular attention is given to address queries and preoccupations from the host community. Refugees in both Mussungue and Cacanda has expressed a keen interest to be relocated to the new settlement in Lóvua, including refugees who are currently living in the host community.
- **Sexual and Gender Based Violence (SGBV):** Identification of SGBV focal points among the refugee population as well as for persons with specific needs, including SGBV survivors is on-going. Terms of reference have been drafted to improve the multi-sectoral coordination on SGBV response.
- Training of protection partners on SGBV continues including on individual case management for which there is a new database; this database also serves as a tool to store, analyse and share information on SGBV.

- **Child protection:** Currently one Child Friendly Space (CFS) is operating in Cacanda reception centre benefiting 901 children, and another CFS has been established and is operational in village 1 of Lóvua settlement. The setting up of new CFSs is on-going in village 3 to accommodate children from villages 2, 3 and 4.
- Protection mechanisms have been reinforced for the 31 unaccompanied minors (UAM) who will be relocated from Cacanda to Lóvua, such as establishment of community based protection mechanisms, which will enable to identify families willing and able to take care of UAM, and by making sure that all UAMs have their best interest assessment conducted before the relocation.
- A community radio has been installed in Lóvua's village 1 and made available to all partners. Currently the broadcasts relate mainly to the prevention of domestic violence, postnatal care and promotion of hygiene and sanitation practices.
- Protection partners continue to support the police team on site namely with material to facilitate night surveillance.

#### Identified Needs and Remaining Gaps

- Concerns regarding the peaceful coexistence of the different tribes in the refugee community due to recent tensions.



### FOOD SECURITY AND NUTRITION

#### Achievements and Impact

- General food distribution took place for the first time in Lóvua settlement. A total of 1,481 refugees received their one-month food rations (maize meal, beans, vegetable oil and salt) on 14 August.
- In addition, 8,845 tons of sausages were made available by the GoA and are being distributed (together with canned sardines) in Lóvua, complementing the evening meal in the arrival centre.
- **Nutrition:** Sector partners distributed Super Cereal Plus to 116 children aged between six months and two years as part of the blanket supplementary feeding to prevent malnutrition.
- In Cacanda, the nutritional situation remains stable; among the 1,468 children under the age of five who were screened, none had Severe Acute Malnutrition (SAM) and 0.5 per cent had Global Acute Malnutrition (GAM).
- In Lóvua, all children under five years of age were screened for malnutrition upon arrival. Among these, no cases were identified for SAM, three cases of Moderate Acute Malnutrition (MAM) were identified and 0.9 per cent GAM.
- During the five days of relocation, 308 children under the age of five were assessed through the joint food sector team. 280 children aged between six months and five years were screened for malnutrition, of which three were found malnourished (with MAM).

**HEALTH****Achievements and Impact**

- Upon arrival in Lóvua, all refugees received medical support.
- **Primary health care and medical consultations:** General consultations have increased by 15 per cent (from 1,230 to 1,417). In Cacanda, the consultations increased (from 991 to 1,029) while in Mussungue the number has decreased due to the movement of the population to Lóvua settlement (new outpatient department has been set up in Lóvua). Among 1,417 consultations, 27 per cent were children under five years of age. Follow-up consultations decreased; by 8 per cent in Cacanda (against 20 per cent last week) and by 14 per cent in Mussungue (against 30 per cent last week). In Lóvua, for the population, which moved from Musssungue, the rate of follow-up consultations stood at 9 per cent.
- Malaria continues to be the main cause of morbidity with a total of 285 cases during reporting week.
- **Sexual reproductive health:** In Cacanda, 28 women were seen for antenatal care.
- **Sexual gender based violence (SGBV):** One case of SGBV was identified after 120 hours from the incident and was subsequently provided with adequate medical and psychosocial support. Health workers are involved in the identification and support of other victims (silent cases).
- Health promotion and sensitization on mental health issues was reinforced at the community level to ensure information on the availability of free medical and physiological services.
- **Immunization:** No epidemics have been reported in the reception centres or in the surrounding host communities. All children under five years of age were screened for vaccinations in Lóvua. Upon arrival all unvaccinated children and women of reproductive age were registered to be vaccinated.
- **Mental health:** Mental health partner started its activity in Lóvua with the newly trained psychosocial community health workers, in supporting refugees during and after the relocation. Partners work in close coordination with the protection actors present on site.
- Mental health activities included eleven consultations and six group sessions to provide regular support to patients seeking psychological counselling. In Chitato Hospital (which serves Dundo), psycho-stimulation activities and group sessions were provided to parents of malnourished children to explain children's nutritional health needs and illness symptoms and response, and to provide information about healthy nutrition to avoid recurrence of the situation.



## WATER AND SANITATION

### Achievements and Impact

- **Cacanda:** WASH partners ensured a water supply of 18 litres per person per day. Workers recruited from the refugee population continue to assist the WASH partners.
- **Lóvua:** Latrines, showers and water bladders have been installed in the arrival area. Installation of WASH facilities in villages 1 and 2 has been completed, while works are ongoing in villages 3 and 4. An extra water tank was placed at the main road close to village 2. Each established village has eight separated latrines and eight showers for women and men respectively.
- WASH partners continue to conduct hygiene education sessions through partners to address hand washing and proper use of sanitation facilities.



## SHELTER AND NFIS

### Achievements and Impact

- Establishment of the first four villages (three in Zone A and one in Zone B), has been completed and villages are occupied.
- The arrival centre in Lóvua now consists of six overnight communal shelters, one communal kitchen, a registration area, protection desk, distribution hangar, logistics hub and fencing.
- A shelter strategy has been drafted whereby each refugee family is provided with a shelter/WASH kit composed of materials and tools that will allow for construction of a family shelter and WASH facilities. Due to delays in the supply of shelter materials, refugees are currently receiving tents.
- So far, 365 new tents have been distributed and installed out of which 110 were installed under targeted assistance to persons with specific needs.

### Identified Needs and Remaining Gaps

Cacanda reception centre in Dundo is at its maximum capacity without the option to extend the area, resulting in sub-standard shelter conditions for many new arrivals. This will be addressed through relocation of refugees from Cacanda reception centre to Lóvua in the coming weeks.



## ACCESS TO ENERGY

### Achievements and Impact

- Activities regarding energy for lighting and cooking needs are fully integrated in Lóvua arrival centre. Community lighting has been installed in the latrines/shower and overnight shelter areas. Firewood from the collection of dead wood generated from the clearing of the site is being distributed for cooking purposes.
- A strategy ensuring safe access to energy and fuel for refugees in Lóvua settlement has been prepared and shared for review with partners. The strategy consists of three progressive stages: emergency, installation and operation of the settlement
- 60 solar streetlights were procured and are expected in Luanda by 24 August. The solar streetlights mapping will be done through a participative approach through consultation with refugees and partners. Focus will be put on communal areas (including social and recreational), markets for livelihoods support, child and women friendly spaces, and communal sanitation areas.



## ENVIRONMENT

- Tree marking for the protection of species of interest with environmental benefits is ongoing in Lóvua. The host community is involved in the identification of endemic trees (i.e. an endemic species is one that is restricted to a specific area such as an island or continent or even a group of mountains) that are used for traditional medicine and consumption of their fruit. Refugees received training on recognition and preservation of such species.

### Identified Needs and Remaining Gaps

- Tree marking continues, however due to the current process of relocation and installation of tents in areas not completely cleared, refugees are removing trees without taking into consideration the species, age, benefit of the trees present on their plots. This is having a clear impact on the forest integrity preservation. Awareness raising initiatives are being organized such as key messages, awareness raising groups, and information boards on the important local tree species

## Working in partnership

- Humanitarian and development partners, working on the ground and in the country on various projects, are actively supporting the Government of Angola to ensure an adequate response to the needs of the Congolese refugees. A weekly inter-agency coordination meeting is held in Luanda. In Dundo, weekly inter-agency meetings ensure a comprehensive and integrated operational response to the refugee situation. Sectoral working group coordination meetings on Protection, WASH, Health/Nutrition and Communication with Communities are also organized weekly in Dundo. A security management system as well as logistics working group will soon be established.

### **Partners in the response:**

- Angolan Red Cross Society
- CARITAS
- CICAJ - Centro de Investigação Científica e Assessoria Jurídica
- FAO - Food and Agriculture Organization of the United Nations
- IOM - International Organization for Migration
- JRS - Jesuit Refugee Service
- LWF - Lutheran World Federation
- MAG - Mine Advisory Group
- MdM - Médecins du Monde
- MSF - Médecins Sans Frontières
- NCA – Norwegian Church Aid
- PIN - People in Need
- UNAIDS - The Joint United Nations Programme on HIV/AIDS
- UNDP - United Nations Development Programme
- UNDSS - United Nations Department for Safety and Security
- UNFPA - United Nations Population Fund
- UNHCR - United Nations High Commissioner for Refugees
- UNICEF - United Nations' Children's Fund
- UNRCO - United Nations Resident Coordinator's Office
- WFP - World Food Programme
- WHO - World Health Organization
- WVI - World Vision International

The [Angola Inter-Agency Refugee Appeal \(April – December 2017\)](#) is available on the [Angola Operational Data Portal](#). Agencies are very grateful for the financial support provided by donors who have contributed to their activities with unearmarked and broadly earmarked funds, as well as for those who have contributed directly to the operations in Angola.

**Special thanks to the Central Emergency Response Fund** for their contributions to the inter-agency refugee response in Angola.

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#### Financial requirements by agency:

Organization	Total (USD)
FAO Food and Agriculture Organization of the United Nations	1,030,000
IOM International Organization for Migration	1,869,438
JRS Jesuit Refugee Service	1,574,790
MAG Mine Advisory Group	585,000
UNAIDS The Joint United Nations Programme on HIV/AIDS	400,000
UNDP United Nations Development Programme	2,550,000
UNDSS United Nations Department for Safety and Security	830,000
UNFPA United Nations Population Fund	1,367,414
UNHCR United Nations High Commissioner for Refugees	36,705,352
UNICEF United Nations' Children's Fund	8,499,703
UNRCO United Nations Resident Coordinator's Office	100,000
WFP World Food Programme	9,100,000
WHO World Health Organization	895,913
<b>Total</b>	<b>65,507,610</b>

#### CONTACTS

**Markku Aikomus**, Senior Regional External Relations Officer  
[aikomus@unhcr.org](mailto:aikomus@unhcr.org), Tel: +27 81 797 7456

**Margarida Loureiro**, External Relations/Reporting Officer  
[loureiro@unhcr.org](mailto:loureiro@unhcr.org), Tel: +224 945 416 383

**Rui Padilha**, Associate Information Management Officer  
[padilha@unhcr.org](mailto:padilha@unhcr.org), Tel: +224 949 097 329

#### LINKS

[Angola Operational Data Portal](#)