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# ANGOLA Humanitarian Situation Report



## SITUATION IN NUMBERS

### Highlights

- An estimated 1.42 million people are affected by the drought crisis, including 756,000 children. Of this estimation, 800,000 people are located in the provinces of Cunene, Namibe and Huila.
- As of February 2017, the total number of cumulative suspected cases in the ongoing cholera outbreaks stands at 306. Soyo – 184; Cabinda – 100 and Luanda – 22. A total of 11 deaths have been reported: Soyo – 8; Cabinda – 3 and Luanda – 0. Four of the five confirmed cases in Luanda had links to the outbreak in Soyo.
- Heavy rains and flooding are affecting Cunene province, resulting in an increased risk of waterborne diseases and probability of displaced populations. UNICEF is currently assessing the situation with a cross-sectoral team.
- In 2016, with support from UNICEF, 17,762 children under five with severe acute malnutrition (SAM) were treated through therapeutic treatment programmes and 118,000 people provided with access to safe water. In coordination with the Ministry of Health, UNICEF also supported 330,898 children in three targeted provinces with the measles vaccine.

### Situation Overview & Humanitarian Needs

Severe droughts continue to affect the seven southern provinces of Cunene, Huila, Namibe, Benguela, Cuando Cubango, Cuanza Sul and Huambo. The most affected are the three border provinces of Cunene, Namibe and Huila where UNICEF is focusing its comprehensive response. El Niño has resulted in significant food production losses of almost 90 per cent; leaving 800,000 people food insecure. Severe Acute Malnutrition (SAM) rates remain high at 3.6 per cent for Cunene and Cuando Cubango, higher than the reported national average of 1 per cent (DHS, 2016). The same report indicated an acute malnutrition rate of 11 per cent and stunting prevalence rate between 20-29 per cent (DHS, 2016). In 2016, the estimated caseload of children with SAM in the seven most affected provinces was 95,877. In 2016, UNICEF has reached over 17,000 children under five with SAM through therapeutic treatment programmes.

Approximately 30 per cent of existing boreholes are non-functional mainly due to a lack of maintenance and missing spare parts. People continue to use unclean water for drinking, washing and cooking; including sharing water sources with animals, resulting in increased cases of diarrhoea and other water borne diseases. The drought and flash-floods are exacerbating migratory movements of whole communities, including cross-border

**1.42 million**

People affected by drought

**756,000**

Children affected by drought

**95,877**

Total children under 5 with SAM in the 7 most drought affected provinces

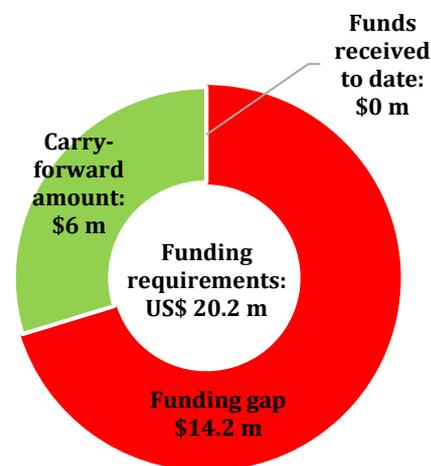
**17,762**

Children under 5 with SAM treated through therapeutic treatment programmes assisted by UNICEF

**306**

Suspected cases of Cholera in 3 affected provinces

### Funding Status



\*Funds available includes funding received for the current appeal year as well as the carry-forward from the previous year.

movements, which raises child protection concerns - from sexual abuse of girls exposed while walking long distances to fetch water to child labour or reduced school attendance.

An increase of cholera cases, mainly in the provinces of Zaire and Cabinda, has been reported since January 2017. In response to the ongoing cholera outbreaks the Ministry of Health, with support from technical partners, including UNICEF has stepped up surveillance, health promotion and prevention activities as well as appropriate case management as part of a comprehensive response plan.

## Humanitarian leadership and coordination

The Government of Angola, through the provincial and municipal administrations, is leading the response to the ongoing cholera outbreaks in the three provinces of Zaire, Cabinda and Luanda. The implementation of the national cholera outbreak response plan is being coordinated by the Government under the leadership of the Ministry of Health and the Provincial Health Directives, with support from WHO, UNICEF and Médecins Sans Frontières.

The national emergency and disaster management group, under the leadership of the Ministry of Interior and in close collaboration with the national civil protection department, continues to coordinate partner support and long term emergency response planning. A Drought Emergency Team was created to support the Government's coordination of humanitarian partners from the UN and NGOs. The UN's Disaster Management Team also supports the Government's response to urgent lifesaving needs, while provincial coordination mechanisms were established for Cunene and Huila and Namibe in order to ensure joint coordinated emergency response in the most affected areas.

The provincial coordination mechanisms include UN agencies, government institutions, national and international NGOs and the Red Cross. An interagency El Niño humanitarian response plan was developed with interventions requiring US\$40 million in the following sectors: Food/Agriculture; Water, Sanitation and Hygiene (WASH), Health and Nutrition.

## Humanitarian Strategy

UNICEF's humanitarian strategy includes responses to the drought, preparing and responding to the floods during the rainy season, and response to the cholera outbreak. UNICEF's primary partner in humanitarian response in the country is the Government of Angola; and in the absence of a cluster coordination system, UNICEF has relied on sector working groups such as: Health and Nutrition (vaccinations, management of severe acute malnourished cases through community-based management of acute malnutrition (CMAM) centres, social mobilization and HIV testing); Child Protection, Education and WASH.

UNICEF's strategy incorporates assessments, analyses, planning, monitoring, reporting and coordination (including through chairing the UN Disaster Management Team). UNICEF also co-leads the WASH, Health and Nutrition sector partnerships with Government Ministries. UNICEF's humanitarian strategy includes coordination, technical assistance, the provision of life-saving supplies, logistics, communication for development and social mobilization, as well as advocacy with policy makers and administrators.

## Summary Analysis of Programme Response Water, Sanitation and Hygiene (WASH)

UNICEF's Community-Led Total Sanitation intervention has reached 157,640 people (including 36,490 children), who were trained to build, maintain and appropriately use the designed toilets. UNICEF also provided emergency water and sanitation items to families with malnourished children. Items included buckets/water containers, water purification tablets, and family hygiene and dignity kits, benefiting 70,770 people. UNICEF worked with community leaders and community workers (ADECOS) to reach 108,790 people with hygiene and sanitation messages since the beginning of the emergency response in January 2016. Approximately 118,000 people have been provided with safe water through the rehabilitation of 236 water pumps and are now more resilient to dry conditions.

Accordingly, UNICEF has already reached the targets established in the CERF project for WASH in the context of the droughts associated to El Niño. However, at moment Angola is facing a changing scenario with heavy rains and floods in southern regions, which increases the probability of displaced populations and waterborne diseases in affected areas. Weather forecasts confirm that heavy rains will continue in the coming weeks, worsening the flood scenario and consequences for vulnerable families and their children.

## Nutrition and Health

Nutritional supplies and equipment (i.e. weight-for-height chart, basic medicine, arm bands to measure mid upper arm circumference, etc.) have been delivered to health facilities in the most affected areas. In the three affected provinces of Namibe, Cunene and Huila, 721 health technicians received training on the Management of Acute Malnutrition. Monitoring of children presenting at health facilities continues and in 2016, over 17,000 children under five with SAM were admitted and successfully treated and discharged from therapeutic treatment programmes with UNICEF support.

UNICEF continues to provide logistics support at the municipal level to ensure that therapeutic foods (RUTF, F-75, F-100) and medicines (including antibiotics, ReSoMal, Vitamin A, Albendazole and Oral rehydration Salts with Zinc tablets) reach health centres in a timely manner. UNICEF conducted training for 30 trainers who will in turn train and manage 394 community agents for social mobilisation activities. In addition, UNICEF supported the Ministry of Health with combined preventive health messages reaching 145,000 people in the provinces Huila, Namibe, Benguela and Cunene.

As part of the emergency response in the drought-affected provinces, the Ministry of Health, in collaboration with UNICEF and other partners, were implementing an integrated measles vaccination, Vitamin A supplementation and de-worming campaign which commenced on 15 December 2016. Of the total 749,846 targeted children between the ages of 6 – 59 months, preliminary results show that 330,898 (44 per cent) received measles vaccination, while 330,005 (44 per cent) had Vitamin A supplementation. Final coverage rates are expected to be released before the end of March 2017. UNICEF C4D supported the social mobilization for the campaign with 30,000 leaflets, 5,000 posters for health posts and trainings for 220 social mobilizers in 3 provinces, reaching about 249,000 people in 25 municipalities.

## Education

UNICEF is working in close collaboration with the Ministry of Education and the National Commission for Civil Protection to support the sector response to drought, floods and diseases (cholera and mosquitos transmitted diseases such as Yellow Fever, Malaria, Dengue and Zika). UNICEF provided 520 school-aged children, including adolescents, with temporary learning spaces equipped with education and recreation kits. 226 school community members (education authorities, school principals, teachers and parents associations) were trained on cholera prevention and response at school level (WASH in Schools).

In 2016, 430 teachers in the provinces of Cunene, Huila and Namibe and 204 teachers in Luanda have been trained to integrate emergency prevention and disaster risk reduction in the education curricula and promote emergency preparedness actions through school club activities within the school and surrounding communities.

UNICEF will support the development of the education sector contingency plan, based on the findings and recommendation of the rapid assessment of the impact of emergencies and opportunities for preparedness, response and recovery (PRR) and support integration in the Education Sector. A teachers training package for education in emergency situation will also be adapted and translated into Portuguese to support the alternative education training program in the areas affected by emergencies.

## Funding

UNICEF Angola is grateful to donors including the Russian Federation, the Japanese Consumers' Co-operative Union, GAVI, UNOCHA's central emergency response fund, and those who fund UNICEF's global core resources for the contributions that have been received in Nutrition, WASH, Education, C4D and Communication to date. UNICEF Angola requires a further US \$20.2 million to meet the humanitarian needs of women and children in the country in 2017. Without additional funding, UNICEF will not be able to meet the urgent needs of the population in the critical sectors of Nutrition, WASH, Health, Education and Child Protection.

Funding Status as at February 2017*				
Appeal Sector	Requirements	Funds received	Funding gap	
			\$	%
Nutrition	3,724,000	0	3,724,000	100%
Health	11,450,709	4,873,863	6,576,846	57%
Water, sanitation and hygiene	1,500,000	282,242	1,217,758	81%
Child Protection	2,090,500	0	2,090,500	100%
Education	500,000	0	500,000	100%
Coordination, PME & Comms/C4D	1,000,000	875,708	124,292	12%
<b>Total</b>	<b>20,265,209</b>	<b>6,031,813</b>	<b>14,233,396</b>	<b>70%</b>

\*The figures are provisional and subject to change due to the 2016 year-end financial closure in late January.

\*\*Funds available include funding received against the current appeal as well as carry-forward funds from the previous year (approximately US\$ 4.76 million).

## Annex 1 SUMMARY OF PROGRAMME RESULTS 2017

SECTOR	UNICEF and IPs	
	Target	Total Results
<b>WATER, SANITATION &amp; HYGIENE</b>		
Children with temporary access to safe water supply (household water treatment, chlorination of systems, water trucking)	46,000	3,400
Children with permanent access to safe water supply (construction/rehabilitation of water points)	47,300	0*
Children with access to proper sanitary facilities	45,000	0*
<b>EDUCATION</b>		
Children accessed formal or alternative education through direct support and systems strengthening in humanitarian context	150,000	0*
Children and members of the school committees informed by the teachers about DRR	75,000	0*
<b>HEALTH</b>		
Children 0-11 months vaccinated for measles	165,120	0*
Pregnant women counselled and tested for HIV	103,200	0*
<b>NUTRITION</b>		
Children with SAM 6-59 months to be admitted into therapeutic treatment programmes	48,700	0*
<b>CHILD PROTECTION</b>		
20,000 children have access to some form of psychosocial support (in school settings)	15,000	0*
100,000 children and families will benefit from ongoing work to mobilize and strengthen social support networks in the aims to prevent and address violence	100,000	0*

\*Data is not yet updated. Update to be provided in the next report.

## Annex 2 SUMMARY OF PROGRAMME RESULTS 2016

SECTOR	UNICEF and IPs	
	Target	Total Results
<b>WATER, SANITATION &amp; HYGIENE</b>		
# of people provided with access to safe water (7.5-15L per person per day)	120,000	118,000
# of people provided access to appropriately designed toilets	45,000	157,640
# of people reached with hygiene and sanitation messages	45,000	108,790
# of people provided with emergency sanitation and hygiene items	45,000	70,770
<b>EDUCATION</b>		
# school-aged children including adolescents provided with temporary learning spaces equipped with education and recreation kits and trained on Disaster Risk Reduction (DRR)	5,000	520*
# of teachers trained on DRR	600	634
<b>HEALTH</b>		
# of children 6 months to 59 months vaccinated for measles	672,377	330,898
# of people vaccinated for Yellow Fever	3,639,933	1,722,499**
# of people reached with preventive messages and information on Yellow Fever	6,700,000	6,910,231
<b>NUTRITION</b>		
# of children with SAM 6 – 59 months old to be admitted into therapeutic treatment programmes	37,835	17,762
# of caregivers of children 0-23 months with access to infant young child feeding (IYCF) counselling	707,765	152,824
# of health providers trained on severe acute malnutrition (SAM)	1,200	721

# of CMAM or OTP centres to be revitalized	310	285
# of people reached with key nutrition messages	2,940,000	2,028,315
<b>CHILD PROTECTION</b>		
# of children provided with psychosocial support services	15,000	0***
# of children provided with alternative care services	1,500	0***

\*Reprogrammed regular resources to achieve these results.

\*\*Data from Huila and Cunene provinces.

\*\*\*Due to funding shortages these interventions have not been implemented to date.

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contact for  
further  
information:**

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