Angola

Several provinces in Angola are experiencing a nutrition crisis stemming from the combined impacts of an economic downturn, higher basic commodities prices, irregular rainfall, deteriorating quality and reach of basic services which are all contributing to an increased risk of severe acute malnutrition (SAM). By June 2018, the number of SAM children admitted for treatment in Huila, Cunene, Bie and Namibe provinces had surpassed the total number of admissions in 2017. Cholera remains a concern with three provinces having reported cholera outbreaks in 2018. The upcoming rainy season increases the risk of further disease outbreaks while confirmed Ebola cases in the Democratic Republic of Congo (DRC) necessitates the implementation of key preparedness activities. Access to safe water remains limited with over 700,000 people in need of clean drinking water, especially in the south. Following the influx of over 35,000 Congolese refugees registered in Lunda Norte, and with a new focus on integrated programming for refugee and host communities, access to basic services for host communities and refugees remains limited, increasing the risk of disease outbreaks. The anticipated numbers of refugees from the DRC has not yet materialized resulting in the decrease in targets related to child protection and education.

Humanitarian strategy

UNICEF continues to work with the Government for emergency response including with line ministries, civil protection departments, national and international NGOs. UNICEF focuses on system strengthening and investment in sub-national capacities to build resilience, increase access to quality basic services, and promote a transition from relief to development programming. Under the leadership of the Ministry of Health and provincial health directorates, the cholera outbreak response is supported by UNICEF, World Health Organization (WHO) and other partners. UNICEF continues to monitor nutrition and public health emergencies, especially measles and cholera while supporting with WHO local authorities to comply with treatment protocols, health norms, biosafety measures and stock management in hospitals and treatment centres. UNICEF continues to support the Government by providing essential drugs and vaccines, as well as nutrition, WASH and communication supplies. Within the agreed cooperation framework with the Government of Lunda Norte and in close collaboration with the United Nations High Commissioner for Refugees (UNHCR), World Food Programme (WFP) and other partners, UNICEF delivers WASH, Nutrition and Health and Hygiene Promotion services to both refugees and host communities. In addition, UNICEF supports the local government to improve services delivery and resilience building.

Results from 2018

As of June 2018, UNICEF had US$2.9 million available against its US$13.1 million revised appeal. In the first six months of the year, due to lack of funding, only 42,587 children under the age of 5 years were screened for malnutrition and 9,843 children were admitted for SAM treatment in UNICEF-supported treatment centers in Southern provinces. 158,500 people in humanitarian situations gained access to safe water. The cholera outbreak at the beginning of the year and the relocation of the Congolese refugee population to the Lovua settlement has led to an increase in the number of people reached with safe water and therefore the increase in the numbers targeted. 80,178 people had access to appropriate sanitation facilities. Hygiene promotion messages reached 287,433 people. 1,250 mobilizers were trained on cholera prevention in Uige and Luanda’s cholera affected communities through door-to-door visits, reaching over 185,000 people. 839 children in flood-affected communities accessed education services supported by UNICEF. Underfunding in most sectors has constrained UNICEF’s response, particularly for children reached with education and child protection services. New child protection indicators with a focus on gender-based violence and children reunification have been added to align with sectoral priorities and plans.
UNICEF 2018 target | UNICEF 2018 results
--- | ---
NUTRITION
Children aged 6-59 months with SAM admitted for treatment into therapeutic treatment programmes | 43,000 | 9,843
Children under 5 screened for malnutrition | 275,000 | 42,587

HEALTH
Children aged 6 months to 14 years are vaccinated against measles | 15,000 | 2,343

WATER, SANITATION AND HYGIENE
People with access to safe water as per agreed standards | 170,000 | 158,500
People reached with key messages on hygiene practices | 470,000 | 287,433
People with access to appropriate sanitation facilities | 170,000 | 80,178

CHILD PROTECTION
Children reached with psycho-social support | 1,000 | 0
Children registered unaccompanied/separated supported with reunification services | 100 | 0
People reached with GBV prevention and response interventions | 1,000 | 0

EDUCATION
Children with access formal or non-formal early learning, pre-primary, primary or secondary education | 5,000 | 839
Children receiving individual education/early learning materials | 2,000 | 0

Results are through 30 June unless otherwise noted.

Funding requirements
UNICEF has revised its appeal to US$13,160,000 to respond to the humanitarian needs of 470,000 people including 275,000 children likely to be affected by disasters such as the nutrition crisis, cholera and other disease outbreaks, and the refugee response needs as per the Inter-agency Refugee Response Plan. As of June 2018, only US$2,985,224 of emergency funding was available, representing a funding gap of 77 per cent. To be able to provide critical response, UNICEF has also used its regular resources and development funding. The significant funding gap will seriously hamper UNICEF’s ability to respond effectively to ongoing and future emergencies.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Orginal 2018 HAC Requirement (US$)</th>
<th>Revised 2018 HAC Requirement (US$)</th>
<th>Funds Available (US$)</th>
<th>Funding Gap (US$)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>2,000,000</td>
<td>2,000,000</td>
<td>93,828</td>
<td>1,906,172</td>
<td>95</td>
</tr>
<tr>
<td>Health</td>
<td>7,200,000</td>
<td>6,400,000</td>
<td>904,991</td>
<td>5,495,009</td>
<td>86</td>
</tr>
<tr>
<td>WASH</td>
<td>2,600,000</td>
<td>2,600,000</td>
<td>1,884,611</td>
<td>715,389</td>
<td>28</td>
</tr>
<tr>
<td>Child protection</td>
<td>900,000</td>
<td>200,000</td>
<td>3,165</td>
<td>196,835</td>
<td>98</td>
</tr>
<tr>
<td>Education</td>
<td>500,000</td>
<td>500,000</td>
<td>54,803</td>
<td>445,197</td>
<td>89</td>
</tr>
<tr>
<td>Coordination/Operational costs</td>
<td>1,460,000</td>
<td>1,460,000</td>
<td>43,826</td>
<td>1,416,174</td>
<td>97</td>
</tr>
<tr>
<td>Total</td>
<td>14,660,000</td>
<td>13,160,000</td>
<td>2,985,224</td>
<td>10,174,776</td>
<td>77</td>
</tr>
</tbody>
</table>

1 Mainly in Huila, Cunene, Bie, Namibe and Benguela provinces
2 Projection for 2018 based on 2017 Vulnerability Assessment Committee SADC
3 Biometric Registration Update as of August 2018, UNHCR
4 Projection for 2018 based on 2017 Vulnerability Assessment Committee results.
5 Calculated based on figures from the Angola Census 2014, taking 58.1 per cent for the child population.
6 People to be reached with key messages on hygiene practices. The total also includes the people to be reached with access to safe water and caregivers of children under 5 screened for malnutrition
7 Total includes 275,000 children under five to be reached through screening for malnutrition and 54,400 children (ages 6-18) to be reached WASH interventions
8 Cholera-related targets which was previously included in health are now included under the WASH interventions
9 The cholera outbreak and the relocation of the Congolese refugee population to the Lovua settlement has led to an increase in the number of people reached with safe water. However, it is still necessary to focus on providing sanitation facilities and improving hygiene practices.
10 There was a reduction in the indicator target due to the reduced capacity on the ground.

Who to contact for further information:
Abubacar Sultan
Representative - Angola
Tel: +244 226 430 870
Email: asultan@unicef.org

Grant Leaity
Deputy Director, Office of Emergency Programmes (EMOPS)
Tel: +1 212 326 7150
Email: gleaity@unicef.org

Carla Haddad Mardini
Director, Public Partnership Division (PPD)
Tel: +1 212 326 7160
Email: chaddadmardini@unicef.org