# **Angola**

15 June 2017

A steady flow of Congolese refugees fleeing intercommunal tensions and violence in the Kasai region, in the Democratic Republic of the Congo (DRC), continues into northern Angola.

Efforts are ongoing to meet adequate protection and assistance standards for over 26,600 refugees, with hundreds of new arrivals every day.

Preparations of the site allocated by the Government of Angola to host refugees in Lóvua, Lunda Norte, are progressing simultaneously.

#### **KEY FIGURES**

30,000

Newly arrived Congolese refugees, with some 300-500 new arrivals per day (Government of Angola)

26,645

Pre-registered Congolese refugees in Dundo area (15 June 2017) of which **14,595** have been individually registered

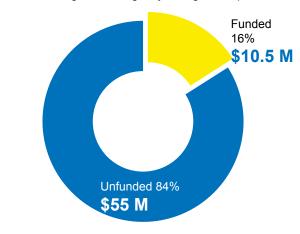
50,000

Are **expected** by the end of the year (inter-agency planning figure)

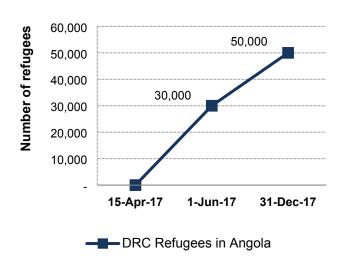
#### **FUNDING (AS OF 14 JUNE)**

## USD 65,507,610

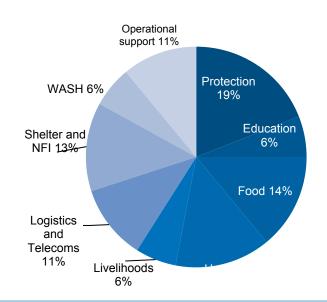
requested for Angola Inter-agency Refugee Response



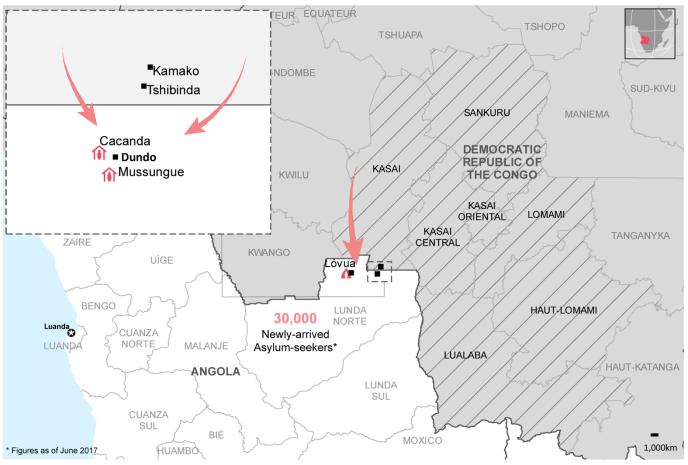
#### **POPULATION TRENDS**



#### **FINANCIAL REQUIREMENTS**



## **Update On Achievements**



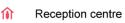
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Create date: 08 June 2017 Sources: UNHCRS, UNCS, Angolan Government



Areas affected by outbreak of violence since August 2016



Planned refugee camp



Congolese refugees

### **Operational Context**

As the security conditions in the Kasai Province deteriorate, hundreds of Congolese asylum-seekers, mostly children and women, continue to flee to northern Angola every day. Continued clashes, a shortage of basic items including food, as well as disorder and hunger, will likely continue to spark refugee influx with dire protection and life-saving needs. Refugees, including many unaccompanied and separated children as well as single-headed households, arrive mainly from Lupemba, Kandjaji, Chitatu and Mudjiadjia, with a few families from Kananga (Kasai region).

Protection assessments confirm brutal violence, with women and children arriving with severe wounds and reporting harassment, rape and killings. Survivors of indiscriminate violence are in urgent need of medical and psychosocial treatment, protection, shelter, food and basic items to live in safety and dignity. At present, safe and dignified return to the DRC is not possible.

Refugees are currently sheltered in two reception centres, which are already overcrowded. Recently, authorities approved the extensions of both reception centres to accommodate more tents, and provide additional communal latrines and showers. Preparations of the site allocated by the Government of Angola to host refugees in Lóvua, Lunda Norte, are progressing in coordination with the Ministry of Welfare and Social Reintegration (MINARS) and key humanitarian and development partners to allow for the relocation of affected population and enabling adequate protection and quality assistance to refugees.

MINARS, on behalf of the inter-ministerial committee set up by the Government of Angola, is coordinating the response to the unfolding crisis with the support from UNHCR. UN Agencies, partners, international and national NGOs are also actively supporting the ongoing refugee response in Angola.



Children fetching water for cooking, cleaning and drinking from one of Cacanda reception centre's 10 water tanks. UNHCR/Katja Rytkonen.

#### **Achievements**



#### **Achievements and Impact**

- A steady flow of Congolese refugees continues in Angola. By 15 June, UNHCR had pre-registered 26,645 Congolese refugees and biometrically registered over 14,500 individuals, providing them with a proof of registration by UNHCR and the Angolan authorities, and a briefing on their rights and obligations in Angola.
- General protection activities continue at both sites, including assessing the specific needs of persons of concern and allocating shelter in Mussungue and Cacanda reception centres accordingly.
- Child protection: Reunification of unaccompanied and separated children with their families continues, while sensitisation of the community on child protection as well as children's rights has begun in Cacanda reception centre. An average of 202 children in Cacanda and 190 children in Mussungue participate in recreational activities at child-friendly spaces daily.
- An action plan agreed with the caregivers and children to improve conditions and protection for unaccompanied children in residential care in Cacanda reception centre is in motion. The plan involves moving children into small group homes an interim measure while moving into full family-based care, with continued assessment of the best interests of the child; improving security of the child-friendly spaces and protection sensitivity of accommodation arrangements; as well as income generation activities for caregivers.
- In coordination with the humanitarian actors on the ground, the Government of Angola is registering and according birth certificates to babies born in Angola to Congolese refugee parents. The birth certificate does not guarantee naturalization.
- Sexual and gender-based violence (SGBV): Medical, safety, legal and psycho-social services are available for identified survivors of SGBV in the sites, while efforts are ongoing to meet adequate protection and assistance standards and taking quality service provision to scale, particularly in terms of prevention and psycho-social support.

#### **Identified Needs and Remaining Gaps**

- Additional programmes to strengthen community-based protection and psycho-social support interventions as well as referral pathways are needed.
- Given the extreme vulnerability of the refugees and the limitations of the current sites, issues related to sexual and gender-based violence (SGBV) are of great concern.
  Efforts are underway to ensure safety of affected population and to step up SGBV prevention and response mechanisms on sites.



#### **Achievements and Impact**

 Refugee children are receiving recreational-based lessons in the basics of Portuguese language. Through a community-based approach, refugees will be supported to organize lessons in French language in both sites.



#### **Achievements and Impact**

- Primary health care: Medical consultations increased by over 20% during the week (1,826 consultations) in Cacanda reception centre, of which almost 50% were sought for children. The outpatient clinic capacity was reinforced in the reception centres in view of the increasing needs and the mortality rate in Cacanda, which remains of concern at (w23) U5MR of 1.8/10.000/day. In Mussungue reception centre, the health clinic undertook 421 consultations for dressings (mostly for trauma), followed by malaria and parasitose/diarrhoea. Malaria represents the biggest proportion of morbidity, followed by non-bloody diarrhea, Acute respiratory tract infections and trauma (dressings). Mosquito nets were distributed at Mussungue reception centre as a genuine malaria prevention measure.
- **Secondary health care:** With more health actors establishing operational presence in Dundo, follow-up and coordination for referrals to secondary health care for further treatment are taking place when and as necessary but still need to be strengthened.
- Immunization: The national epidemiologic surveillance plan is being extended to refugees alongside the host population. Humanitarian actors will be supporting the local epidemiologic surveillance capacity with training on case definition and active case finding of yellow fever, measles, tetanus and acute diarrhoea. Community Health Workers continue sensitization of the refugee population and active case finding at both reception centres.
- Reproductive Health: Antenatal (ANC) and postnatal care (PNC) consultations continue to increase at both reception centres. Reproductive health services are being strengthened through planned provision of dignity kits to pregnant refugee women at both reception centres, as well as through institutional support to municipal hospitals at Chitatu and Dundo with reproductive health kits and training of midwives in collaboration with the provincial health directorate. Altogether, three children were interned at the pediatric in-patient department in Municipal Pediatric Hospital during the week. Additional room capacity in the Hospital of Chitato is being explored.

#### **Identified Needs and Remaining Gaps**

An overall shortage of emergency health kits for new arrivals continues and needs to be urgently addressed.

- Humanitarian actors are coordinating with the local health authorities to increase the vaccination capacity to make it available 2-3 days a week at both reception centres to ensure sufficient routine vaccination in the aftermath of the recently completed multi-antigene mass vaccination campaign.
- Health care services will need to be extended to the host community, as the local population also lacks basic services and sanitary education to demonstrate a healthy behaviour.



#### FOOD SECURITY AND NUTRITION

#### **Achievements and Impact**

- Nutrition: A slight decrease in Global Acute Malnutrition level was observed during the week. Nutritional monitoring and surveillance is ongoing, with treatment of children with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) ensured in ambulatory therapeutic feeding centres in both sites. A total of 9 children were admitted during the week in the in-patient therapeutic feeding centres (ITFC) at the onsite pediatric hospital. Plans to augment the treatment and follow-up capacity for MAM on both sites and establishment of a community kitchen are being planned.
- Communication for development activities to improve social behaviour of refugee population on nutrition-related practices in local languages is ongoing.
- Food security: Food distribution took place on 11 June in Mussungue reception centre where 2,541 refugees received oil, beans, salt, pulses, Supercereal Plus, as well as maize meal. Stocks are being completed in order to ensure emergency food assistance to refugees until end of July 2017.

#### **Identified Needs and Remaining Gaps**

Further procurement and delivery of ready-to-use supplementary food (RUTF), including Plumpy'nuts is required. With the provincial stocks being replenished, partners leading health and nutrition interventions are coordinating with the local health authorities to make it available for refugees.



#### **Achievements and Impact**

■ Water: With the current estimated population, refugees in Cacanda currently have access to 11 liters per day of water and to 20 liters per day in Mussungue. An average of 85,000 liters of water is being supplied daily to Cacanda and 36,000 liters in Mussungue through water trucking. Reinforcement of the water supply reliability, which has proven problematic, is ongoing, including through establishment of a monitoring

system in Cacanda to ensure that all water tanks are filled to their maximum capacity and by increasing the water storage capacity to 42,000 liters in Cacanda. The drilling of a borehole in Cacanda, which would ensure stable provision of water, has been completed with water-pumping tests ongoing. Partners are looking at ensuring provision of up to 136,000 liters of water per day in Cacanda to meet the humanitarian standards and in view of the continuous arrivals.

- Sanitation: With the planned communal latrines completed in Cacanda and Mussungue, interventions are focusing on shower construction. In Cacanda, latrine access stands at 38 persons per latrine, with 62 % of the estimated showers needs covered. In Mussungue, all required WASH infrastructure is in place with access standing at 32 persons per latrine. To improve the solid waste management, altogether 69 refuse bins will be installed on the two sites and equipment to ensure regular and proper collection of the garbage provided.
- Hygiene: Maintenance of WASH facilities and daily hygiene promotion, solid waste management and latrine cleaning sessions in both reception centres are ensured by refugee volunteers through Cash for Work (CfW) scheme. Information, Education and Communication (IEC) materials on cholera prevention and water treatment in French and Lingala have reached 15,731 people in Cacanda and Mussungue reception centres.

#### **Identified Needs and Remaining Gaps**

- Completion of the borehole and establishment of a basic water system in Cacanda will ensure a more reliable and less costly water supply for refugees in Cacanda.
- Planning of WASH-related activities in the new refugee site of Lóvua is ongoing in coordination with the Provincial Government.



#### **Achievements and Impact**

- Mussungue reception centre was extended by approx. 2.600sqm to decongest the site and to accommodate new arrivals pending the planned relocation of the refugee population to Lóvua. The additional space allowed installation of 36 new tents and provides adequate shelter for previously identified vulnerable households. In Cacanda, 5 tents were installed for unaccompanied children within the current set-up.
- Partners and the authorities agreed on the layout of the new Lóvua site's Arrival Centre, which will contain services for refugees, as well as a space to rest upon arrival before proceeding to the plot allocated to them. The relocation of the refugees is being planned in consultation with the refugees themselves, including go-and-see visits. The clearing work at the site will begin in the coming days, as well as planning of the site development according to different scenarios. A refugee relocation plan will be jointly

- consolidated by all actors and will highlight the gradual transfer of refugee families starting with the most vulnerable.
- On 11 June, buckets, mosquito nets and soaps were provided to refugees living in Mussungue reception centre. All refugees received soaps, each of the 927 families a bucket and altogether 1,300 mosquito nets were distributed - one per every two persons and one for every single household. Similar basic item distribution is planned to take place in Cacanda reception centre starting from 16 June.

#### **Identified Needs and Remaining Gaps**

With on average 300 to 400 new arrivals every day, conditions at the two congested reception centres remain difficult in terms of adequate accommodation and service provision.



#### TELECOMMUNICATION

- Within the framework of the Refugee Coordination Model, the emergency telecommunications sector is liaising with national commercial companies to expand their phone-calling coverage in Lóvua site and potentially increase services to include internet connectivity across this area.
- A dedicated ICT Officer has been deployed to support telecommunications needs of humanitarians responding in Dundo.

#### **Identified Needs and Remaining Gaps**

Unstable city power continues to be a challenge for the telecommunications response.
 Solar power solutions are being explored.

### 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 co-chaired by MINARS and UNHCR takes place in Luanda, as well as in Dundo in order to ensure a comprehensive and integrated operational response. Sectorial coordination meetings on WASH, Health-Nutrition and Refugee Protection are also organized weekly in Dundo.

#### Partners in the response:

- Angolan Red Cross Society
- FAO Food and Agriculture Organization of the United Nations
- IOM International Organization for Migration
- JRS Jesuit Refugee Service
- MAG Mine Action International
- MSF Médecins Sans Frontières
- 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

The Angola Inter-agency Refugee Appeal (April – December 2017) is available online. 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 its contribution of \$10.5 million to the refugee response in Angola to support protection, food, health, WASH, transportation, shelter and non-food items assistance.

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#### **LINKS**

**Angola Operational Data Portal**