

Angola: Drought

Office of the Resident Coordinator Situation Report No. 4

(as of 13 July 2016)



This report is produced by Office of the UN Resident Coordinator in collaboration with humanitarian partners. It covers the period from 13 June to 13 July 2016. The next report will be issued on or around 13 August.

Highlights

- Food insecurity is predicted to worsen from August onward; 400.000 people will be in need of food and in-kind assistance.
- Severe acute malnutrition (SAM) and global acute malnutrition (GAM) rates are still critical and are expected to worsen in the coming months.
- Transhumance has started two months early. Lack of vaccination lead to livestock death of 140.000 heads since January 2016.
- Water availability is diminishing rapidly. Less than 20% of communities have access to safe water and adequate sanitation facilities.

1 m

People affected,
90% from rural
areas

585,000

People targeted for
assistance



Source: UNCS, Europa Technologies, ESRI
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Situation Overview

Southern Angola has been affected by recurrent cycles of droughts and floods since 2008. In 2015, 1.4m people in 7 provinces were affected by El Niño. About 78% live in three provinces of southern Angola, namely Cunene (with 56% people affected), Huila and Namibe. Agricultural and livestock losses were estimated to be about \$242.5m in 2015 and 500.000 head of livestock have died in this period.

This year, the National Institute of Cereals in the Ministry of Agriculture estimates a production deficit of 40%. According to the Provincial Directorates of Agriculture, food insecurity is predicted to worsen from August onward in Cunene and Huila provinces, possibly exacerbated by la Niña effects that could include flooding. The market is experiencing severe price increases and fluctuations, as a result of the increasing scarcity of food. In May-June 2016, FAO assessed that 1 million people are still affected and 400.000 will need food and in-kind assistance in the coming months.

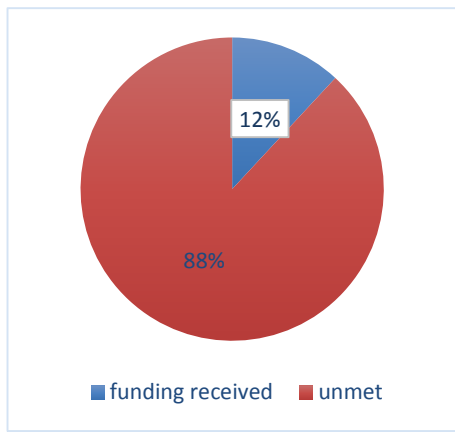
Water for livestock remains a challenge. Short and irregular rains did not sufficiently recharge the underground water table, resulting in water shortages for both household and livestock uses. The precarious situation is manifesting itself in the early start of the transhumance migrations which have started in early June, about two months in advance of its normal cycle.

As per the 13th July 2016, 3641 suspected yellow fever cases have been recorded, of which 872 are confirmed. The total number of reported deaths is 359, of which 117 were reported among confirmed cases. Suspected cases have been reported in all 18/18 provinces and confirmed cases in 16/18 provinces and in 80 of 125 reporting districts. Vaccination campaign occurred in 3 municipalities of Huila and in 2 municipalities of Cunene.

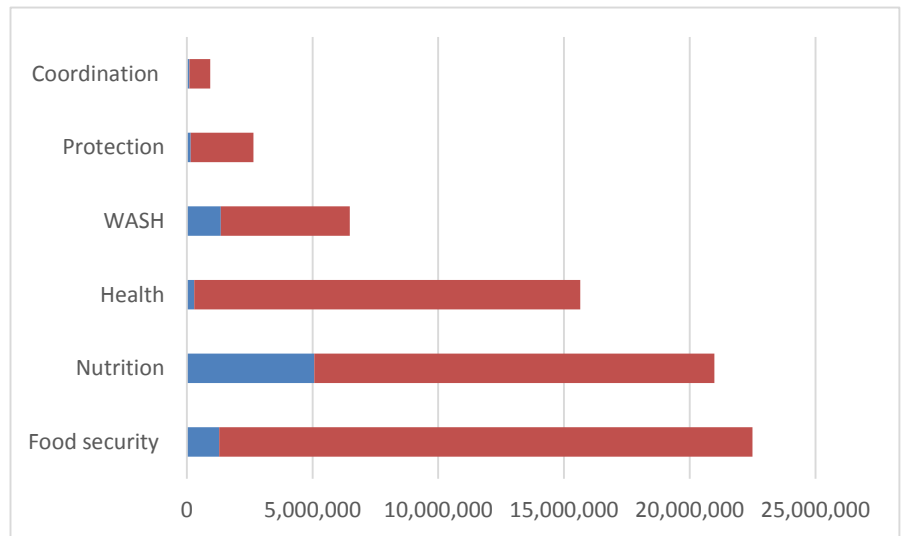
Funding

Angola UN and NGO El Nino response

US\$ 61 million requested



Funding by sector (in million US\$)



The diagrams above show the funding status for different sectors/clusters. The agriculture, nutrition and health sectors are particularly underfunded. However, data is often not available or comparable and the real needs for other sectors is likely to be higher than reported.

Humanitarian Response

UN agencies and NGOs are working closely with the Government of Angola to address the situation. From March to May 2016, World Vision International (WVi) undertook a SMART assessment of nutrition status of children under the age of 5 in Cunene and Huila provinces. From May to June, FAO and the Ministry of Agriculture (MINAGRI) jointly assessed the needs in terms of food, seeds, veterinary treatment and vaccines. UNICEF together with Provincial Directorates of Energy and Water (DPEA) almost completed the field assessment of manual water pumps.

The civil protection of Cunene is carrying out a need assessment in the six municipalities, with UNICEF funds.

Multiple national and international NGOs and the Red Cross have set emergency programs to respond to multi-sector rural community needs in the three provinces.



Food Security and Agriculture

Needs:

- As seed stocks were not refilled, the procurement of drought-resistant short-cycle varieties of maize, millet and sorghum in neighboring countries is urgently needed, before scarcity becomes a factor.
- Recover livelihood and food production capabilities among rural communities through provision of seeds, tools and training on family gardens for 170.000 families.
- 150,000 people reached with good livestock health practices and mineral salt licks.
- Improve food security, beneficiary groups information management and analysis.

\$22.5m

required to support
Food Security and
Agriculture

Response:

- FAO has trained a total of 84 trainers of farmers in family gardening techniques in the three provinces.
- FAO directly trained, and provided seeds and tools to 1577 families of the 3000 targeted in the three provinces, reaching the 53% of targeted beneficiaries and installing a total of 41 plant nurseries.

- AO and ISV has trained 22 CAHWs (Community Animal Health Worker) of the 342 foreseen. Multivitamin complexes were purchased for the participatory production of livestock mineral licks.
- 3 water reservoirs in Cunene and 2 boreholes in Huila were selected for rehabilitation; documentation has been completed and the tender launched.

Gaps & Constraints:

- Lack of vaccines for livestock and of rabies monitoring.



Health

Needs:

- Drugs and vaccines of Penta3, measles, rotavirus and YF for 15.134 children 0-59 months (DPS-WHO data) in three provinces.
- Health centers and hospitals equipped with basic essential obstetric care kits for more than 202,000 pregnant women.
- Training of 400 personnel on Community Management of Acute Malnutrition (CMAM).
- Strengthen disease surveillance systems.
- Support at national levels to standardize the training materials and national protocols.

\$15.6m

required to support health sector

Response:

- WHO finalized the training manual and will start training 400 health personnel in mid-July.
- Department of health of Huila and Cunene carried out the YF vaccination campaign in three municipalities in Huila and two municipalities in Cunene respectively, closely supported by WHO.
- UNICEF continues to provide support in the procurement and distribution of vaccines. The total doses of yellow fever vaccines received and dispatched in Angola since the start of the outbreak is 11,300,000.
- UNICEF has developed a training of trainer's program for national staff of the Minister of Education on YF campaigns and vector control; and is building rapid response teams to support ongoing scaling-up of social mobilization in high priority districts in 16 provinces targeted for vaccination, including Huila and Cunene.
- In support of the Yellow Fever campaigns in Huila and Cunene, WVi has donated 1,000 liter of diesel (500 liters in each province).

Gaps & Constraints:

- High turnover of health and nutrition personnel.



Nutrition

Needs:

- 44,511 children under-five are in need of treatment for severe acute malnutrition (SAM) with and without complications.
- Provision of Anthropometric Instruments to conduct nutritional assessment and register forms to ensure correct follow-up of program implementation.
- Reinforce community activities, to ensure a timely referral of children to health centers;
- Restoring Community Management of Acute Malnutrition (CMAM) Service centers
- Strengthen the nutrition surveillance systems at all levels.
- Strengthen supervision of in-patient treatment (IPT) programs in three provinces.

\$21m

required to support Nutrition

Response:

- Clear division of labor between WVi and UNICEF in terms of geographic response in Cunene (three municipalities each), Huila (WVi five and UNICEF nine municipalities) and Namibe (UNICEF all municipalities):

UNICEF:

- 100% of the required 33,476 cartons of RUTF, 6000 of RUSF, 528 of F75 and 235 of F100 have arrived in Angola and most of these supplies have already been delivered to the 3 affected provinces.
- SAM treatments were distributed to 7,933 children with SAM, representing the 21% of 37,835 children targeted.
- A total of 361 health workers have been trained on Management of Acute Malnutrition without complications (63 trainers and 169 health providers in Huila and 129 in Cunene) and 18 trainers for community health workers and 72 community workers.
- UNICEF, together with the Provincial Department of Health of Namibe, is carrying out a training of trainers of community health workers, were participated 26 trainers.

- A PCA with the local Red Cross is being prepared to strengthen social mobilization in the 3 affected provinces
- UNICEF continues to hold weekly coordination meetings with the Provincial and Municipal departments of Health in the 3 affected provinces.

WVi:

- In Cunene a total of 457 SAM children have been admitted in the program and 1,456 in Huila.
- 38 Community Health Agents were trained in the municipality of Cuvelai in Cunene province.
- In Cunene 700 children were screened and in Huila 2,500.
- 10 supervision visits were conducted to in- and outpatient nutrition centers with DPS staff in Cunene and 15 in Huila.

Gaps & Constraints:

- Lack of trained health personnel and reporting skills.

Protection

Needs:

- Training on GBV at community and health services levels for 756.000 people.

\$2.7m

required to support protection

Response:

- Through UNFPA, 35 social mobilizers from the Red Cross-Angola and civil protection attended 4,000 adolescents and youth of the provinces of Huila and Cunene with leaflets on SRH, GBV and HIV & AIDS.
- 960 more sanitary kits were distributed in Namacunde, Ombadja and Cahama, Cunene Province.

Gaps & Constraints:

- Lack of financial means to have a major impact.

Water, Sanitation and Hygiene

Needs:

- Provision of safe water to meet the daily needs of 147,500 people and their animals with at least 15 l/day.
- Promotion of Community-Led Total Sanitation (CLTS) approaches to reduce open air defecation and prevent water borne diseases especially among children under five.

\$6.5m

required to support WASH

Response:

- At the municipality level, the verification of 295 hand-pumps to be rehabilitated and the collection of information on boreholes continues.
- Activities related to CLTS implementation in the Provinces of Huila and Cunene are ongoing through UNICEF partners LWF and ADRA. Over 38,000 people of the 45.000 targeted have been reached with appropriate designed toilets to date.
- UNICEF has delivered 23,860 water containers; over 1.9 million water purification tablets; 1,738 family hygiene and dignity kits; 500 latrine slabs and over 4,640 WASH communication materials for vulnerable families in the three most affected provinces. 31.000 of 45.000 targeted people reached with hygiene items and 92.000 with WASH messages, of the 45.000 targeted.
- WVi has received private funding for the rehabilitation of 40 water points in Huila and Cunene.

Gaps & Constraints:

- Financial and logistic constraints of provincial directorates to cater for operations in the field.

General Coordination

An inter-ministerial Drought Emergency Commission led by the Ministry of Planning has been established to support the emergency efforts.

The UN Emergency Country Team and the Response Coordination Team are coordinating actions and optimizing efforts between UN agencies interventions and between UN and NGO' ones.

Monthly coordination groups are in place in the three provinces strengthening coordination and synergies between provincial government, the UN agencies, NGOs and the Red Cross. An interprovincial coordination meeting, led by the Government of Huila, will be held in mid-August to discuss resilience and long term scenarios together with all partners involved.

According to the request of the Ministry of Interior of 17th May, UNDP is supporting the National Civil Protection's efforts to carry out a Post Disaster Need Assessment in affected provinces, in partnership with EU and WB.

In late June the OCHA's Global Director of Operational Division, visited Angola to follow up on the OCHA support to Yellow Fever response and to the drought in the south. He met with key government entities at the central and provincial, as well as other key partners. The mission also visited Cunene province.

Background on the crisis

During 2015 El Nino affected Angola, causing droughts, which had already weakened people's capacity to cope with environmental disasters. The 78% of 1 m food-insecure people live in three provinces of southern Angola, characterized by nomadic pastoralist communities. Non-functional boreholes, sharing water with livestock, livestock disease outbreaks, high agricultural and livestock losses, and low purchasing power of rural people are quite common. In November critical under-nutrition rates were reported, above 7% of SAM rates and doubled GAM rates compared to January-June 2015 data, account for 58% of child morbidity and 38% of child mortality. In July 2016, production losses are estimated to be up to 40% and food insecurity is expected to rise again from August. SAM and GAM rates show a situation similar to June 2015, and caseloads are increasing again. Angola is facing a wide outbreak of YF, Huila and Cunene carried out YF vaccination campaign in three and two municipalities, respectively.

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