



# PARTICIPATORY ASSESSMENT 2021

## FULL REPORT

UNHCR Protection Unit

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## *Introduction*

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UNHCR Angola conducted a participatory assessment (PA) between 18<sup>th</sup> and 27<sup>th</sup> October 2021. This study is conducted using a qualitative method by organizing 32 focus group discussions. The study used the Age, Gender, and Diversity approach. Children (age 10-17), adults (age 18-39), and older persons (40 above) were targeted in this PA. Not only age, gender was also considered: women and men had separate discussions. In addition, various nationalities were considered. In this PA PoCs from 9 nationalities were reached out.

This PA was conducted in collaboration with staff members from Jesuit Refugee Service and Dom Bosco. The FGDs were conducted in community centres in Bairro Popular and Viana in Luanda.

The purpose of this PA is to feed into the programming for 2022 by assessing the gaps, needs, and proposed solutions by refugee community. The topics discussed in this PA are: security, GBV, PSN, child protection, access to basic services including education, livelihood, health, and WASH, and access to protection services. Questionnaires were developed separately for children and adults (see Annex 2) to have coherence across the FGDs.

In this PA, the questions focused on revealing the root causes of issues, coping mechanism, and proposed solutions and did not focus on confirming the already known gaps as operational challenges including issues of documentation/registration and RSD.

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## *Participants of this PA*

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In this PA, 32 FGDs were coordinated and implemented. However, not all questions sheets were submitted by the partners after their FGDs. This finding report is based on the 18 sessions for which answer sheets were submitted. Also, not all lists of participants were submitted by partners, and also not all questions sheets submitted by the partners did not have attendance lists attached, so a total number of PoCs who actually attended this PA cannot be confirmed exactly.

With the lists of participants collected, a total of 274 people are confirmed as the participants of FGDs of this PA. However, as this report is based on 18 sessions for which we have questions sheets to analyze, thus for the 18 sessions, a total of 199 people are confirmed as the participants of this PA.

In addition, some participants did not indicate their nationality on the attendance list, and it was difficult to count the exact number of participants desegregated by nationality. The breakdown is of the participants by nationality is as follows.

Children		
Nationality	Sex	No of Participants
DRC	F/M	7/23

Liberia	F/M	2/1
Rwanda	M	6
Burundi	M	1
<b>Total</b>		<b>40</b>

Adults		
Nationality	Sex	No of Participants
DRC	F/M	66/2 (including 40 women whose age is over 40)
Rwanda	M	35 (including 20 men whose age is over 40)
Burundi	F/M	6/6
Ivory Coast	M	5
Liberia	F/M	5/28
Sudan	M	1
Mauritania	F/M	1/1 (the age of this one man is over 40)
Guinea-Conakry	M	2 (the age of the 2 men is over 40)
RCA	F	1
<b>Total</b>		<b>159+</b>

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*Limitations of this Assessment*

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There are some limitations in this assessment.

First, inconsistency in reporting and submission of documents was observed. This can be because only 4 staff members (except for facilitators) attended the PA information session that was conducted on 15<sup>th</sup> October 2021, while 12 staff members (from UNHCR, JRS, and Dom Bosco)

participated in this PA. Thus, the inconsistency observed was caused by the fact that most of the staff members who participated in this PA missed the information session.

Second, it was also found difficult to bring the PoCs to Bairro Popular or Viana on specific dates. Though community leaders were informed daily about the schedule of FGDs, many PoCs randomly showed up and it was difficult to conduct FGDs based on nationality. Thus, most of the FGD sessions included people from different nationalities.

Third, a low turn-out rate was also confirmed regardless of involvement of community leaders prior to the FGDs. In particular, it was difficult to reach out to PoCs from Mauritania, Chad, Guinea-Conakry, Somalia, and Sudan though efforts were made to reach out to them.

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### *Background*

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The Angola government has stopped their registration and refugee status determination in 2015, after that, documentation of our persons of concern had expired. Due to the expired documentation, PoCs who used to have jobs lost their jobs, and whose status as refugee was guaranteed previously lost their status. Those who lost their legal status became target of arrest by police time to time, and those who had various access to their rights lost their access. For example, they used to have access to their bank account, bank saving, SIM card, and access to land, but due to expiration of their documents they do not any longer maintain their access to these services.

They also become targets of discrimination and exploitation in the society: they can be discriminated and exploited in public facilities such as in clinics and by police. Vulnerable PoCs started to fall under the poverty line, and they do not have ways to survive without relying on social assistance UNHCR provides through implementing partners.

Due to the documentation issues, children cannot go to schools, and they do not receive certificates even after completion of education. Due to poverty caused by the documentation/registration issues, PoC's health situations deteriorated, and in addition, they do not have enough foods to sustain their lives. They cannot even receive timely and enough health support as the needs for health services are increasing rapidly particularly after the state emergency was declared in 2020 during the COVID-19 pandemic. Needs for livelihood opportunity are also rapidly increasing, however, due to the limited funding situations the livelihood opportunities are limited to minimal.

Protection services provided by UNHCR and implementing partners have improved in 2021 by expansion of outreach activities near community centres and in remote areas, start of protection counselling by UNCHR, JRS, and Dom Bosco, and launch of information campaigns to enhance accountability. The number of home visits conducted has drastically increased in 2021 and distribution of NFIs to support the vulnerable families and identification of vulnerable families were enhanced.

As of October 31, 2021, Luanda hosts about 38,560 persons of concern from various countries including DRC, Ivory Coast, and Guinea. As UNHCR protection often meets with PoCs from DRC, Rwanda, Burundi, Liberia, and Sierra Leone, however it is difficult to meet with those from other nationalities, so this participatory assessment attempted to reach out to the PoCs from those nationalities by having

sessions with them in the community centres in Bairro Popular as well as in Viana. Initially, the FGDs were planned to take place also in remote areas (Annex 1) to reach out to more PoCs, but due to the time restriction FGDs were conducted in community centres.

This PA reveals how community is managing in this situation and developed their coping mechanism and also the detailed picture of how they manage their lives: challenges and issues, and their suggestions for improvement in 8 areas: GBV, child protection, PSN, Education, Health, WASH, livelihood, and access to protection services. This PA report clarifies their issues and recommendations to UNHCR and partners as the conclusions of each sector.

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### *Participatory Assessment Findings*

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## **1. Security, GBV, Child Protection, and Persons with Specific Needs**

### Children

In this section, issues related to security and safety for adults and children (GBV, CP, and PSN issues) are all covered. Time to time case of robberies and discrimination were reported to UNHCR during the protection counselling. Different questions were asked for children and adults, and the analysis is made separately for children and adults.

It became clear that refugee children are feeling unsafe in general at home and in their community due to fighting groups and robberies. Children who are out of school have even stronger concerns about insecurity in their community due to risks of physical and verbal violence, rape, gang group and alcohol abuse. Children are also feeling unsafe even in schools because they do not have any safe space to play balls, and because some students threaten and harm others in schools. They further mentioned that Viana community centre was used for them to play previously and they want more activities in Viana for children.

Also, it was observed that children consider that children living with their grandmothers who pick up garbage to support their family members and female orphans, are more vulnerable in their community. Some respondents also mentioned that they see some children not with clothes nor in education, but they also further mentioned that those children were supported by Dom Bosco.

There are also children who responded that children with disability are in need of help as their parents are not paying much attention to them. Also, they observed that children out of school are in need of support. They further mentioned that these people receive food assistance from community members. Thus, they believe that some exiting community support mechanism is working to support persons with specific needs.

### Adults in Viana

From the FGDs, various security concerns were revealed. Female respondents mentioned about their concerns that they do not feel supported by police and they observe sexual abuse including rape in their community. They further mentioned that they usually inform police, community leaders and JRS when they face violence. At the same time, they raised their concerns about discrimination of their children because of their names.

Mothers (over 40) from DRC in Viana mentioned that they have to find something to do to support their family members and if they cannot afford, children become disrespectful to the mothers and they feel at risk. Also, they fear young people who are alcoholic and they fight with a knife by blocking streets. According to them, they have a women group that advises and counsels the community members. The women group also organizes some activities for children.

The female respondents believe that women and children, especially single parents taking care of children and elderly women taking care of orphans, are more vulnerable in their community. They believe these particular groups are not assisted, and they further added that women in general are suffering and some are not assisted by UNHCR nor partners, though they reach out to UNHCR, churches, and community leaders when they have protection issues.

They also touched upon their exiting community support mechanism: the women in the community make home visits to the most vulnerable people and accompany sick people to clinics. Also, some women helped in counselling, awareness raising, feeding and sharing of used clothes. The women group Rwandan women organize try to support the vulnerable groups by reporting their issues to the community leaders and also try to solicit money to support each other, but they find it difficult to solicit that money.

Male respondents believe that lack of foods is the main security concerns. They further mentioned that they try to reach out to relevant partners and agencies when they have issues related to children and protection, but that they do not receive any solutions so they manage by themselves. It was believed by male respondents that elderly and sick people are more vulnerable in their community and they want to help those vulnerable groups through their dialogue.

Male respondents whose age is above 40 from Rwanda, feel mostly safe in their community. However, they showed some concerns about robbery and threats they face in their community. Especially, when they have business they feel that they are more at risk. They communicate with police and community leaders when they face issues of violence.

They also proposed that community patrol system to be implemented and also that the community can meet with young people to provide advice. Also, they can provide lectures on various topics. They were also concerned that children face physical assault, and when they face child protection issues they inform JRS, Dom Bosco, or UNHCR. They also believe that there should be playgrounds for children. They also believe that single mothers and sick people are more vulnerable in the community, and there should be more support for orphans and widows.

### Adults in Bairro Popular

Female respondents from DRC who came to Bairro Popular mentioned that they do not feel safe in their community, and they feel discriminated by Angolan people who call them “langa” and they face robbery. According to them, Angolan parents do not allow their children to play with refugee children. Some parents prefer to keep their children inside because they are concerned that they may face complicated issues if they play with Angolan children, though they are allowed to play freely in churches and schools.

They report issues of violence to police, churches, or JRS and when they face issues of schools they report to the school secretary or JRS. When it comes to issues of discrimination,

they do not think there are any ways to improve community security situation unless people's ways of thinking change.

In addition, they think that single mothers are more vulnerable in their community, and that they are assisted by UNHCR. They further think that those single parents should be assisted to start small business.

Mixed female groups from Liberia, DRC, Mauritania, and RCA feel safe in their community most of the time, and they do not inform anyone even if they face issues of violence. When they face child protection/protection issues they talk to JRS or UNHCR. They think that they should talk to young people who engage bad practices, and they think that if they have valid documentation, their security situations can improve. They believe that single people are more vulnerable.

Mixed group of men from Ivory Coast, Mauritania, Guinea Conakry, and Sudan, feel insecure in their community due to discrimination because of ethnic and language difference, criminal activities, and racism. They reach out to JRS, police, religious groups, when they face issues of violence. They also think that children do not have a place to play safely in their community. They reach out to JRS, police officers, community leaders when they have child protection and protection issues.

Also, they think that children, people with disability, sick people, older persons, and those who do not have jobs are more vulnerable in their community. Some believe that men in general are vulnerable. Some people believe the vulnerable groups are assisted and some do not. They also do not think they are capable to assist these groups as they do not have means to assist.

### *Observations and Recommendations*

In general, regardless of age, nationalities and locations, PoCs are feeling insecure in their communities, and they reach out to police, JRS, Dom Bosco, UNHCR, churches, and community leaders when they face protection issues, but some stay silent as they do not think these mechanisms are not reliable.

At the same time, older persons believe in their capacity to play more critical role to improve security in their community, as they proposed to have dialogue and sessions with young people. This is what partners and UNHCR can make use of to strengthen community capacity. Also, community patrol is one of the proposed solutions from the community to improve security situations, and this can be achieved if there are community volunteers who can monitor the issues of the community.

Also, as discrimination is one of the major concerns of children and adults, community reporting mechanism where children can raise their concerns should be established.

In addition, children are hoping to have more activities in Viana for them such as some training courses in dancing, music, painting, football, mechanics, and English. These courses could keep children and adolescents busy and prevent them from engaging criminal activities and nurture their sound mind. Community centres can be used for these purposes.

## **2. Access to Basic Services: Education**

This section deals with the issue of education. Though issues caused by documentation/registration issues are clear to the operation, this PA would uncover other

education issues such as causes of discrimination of refugee children by Angolan children in schools. The analysis is made separately for children and adults.

### Children

Children mentioned that parents are supportive for them to access education. Both male and female children are feeling equal in accessing education. Female students responded that they were supported in their education by their parents and they were advised to become an outstanding figure in the future. They are also advised to go home directly after school hours and they were advised to be selective in their friendship. They responded that when they face any issues of violence in their schools, they raise them to the school director or teachers.

Children in school raised several security issues. Female students are concerned about a high rate of delinquency, crime, students fighting against teachers, not doing their tasks, uncomfortable relationships with male students, teachers who do not perform well. They also raised the issues of harassment and bullying due to how they dress, their nationality, and their names. Those students do not use any internal complaint mechanisms as they do not think that the mechanisms are working properly. But when they face any gender issues, they talk to teachers or parents at home.

The male students also responded that they face discrimination in school as the majority of students in school are from Angola, who do not understand why refugee children are here in Angola and they harass refugee children saying that they are not Angolans. Also, some mentioned that children do not try to disclose that they are refugees as they may face insults in their community.

Both male and female students raised common educational challenges too. They want books and uniform as they have to borrow from other students and some want internet too for their further study. They also raised their concerns that they are too hungry to focus on study in schools.

### **Coping mechanism:**

Those who are out of school responded that they talk to their mother/grandmother when they face issues of violence as they think they have support only from their parents. Those in school responded that they report to parents only when they face issues, but some also mentioned that their parents cannot do anything to change their situations, so they do not report anywhere. Those students also responded that there are no educational sessions in their schools where they can raise their security concerns in school nor in community. They do not have any opportunities to learn about these issues.

There are also respondents from one session that whenever they have issues of violence, they are taken to teachers' room to receive solutions. Those students responded that they have classes of morale and civic education where they can discuss various themes on how to behave. Those students also talk to parents and friends, too.

### Adults

Adults raised the common issues regardless of their nationality or gender. First, they mentioned that they are concerned about gender issues in school including discrimination, bullying, and physical violence as principals and teachers also mistreat students badly. They



think that discrimination is caused because of their languages, and because refugees children look different from Angolan children.

They also raised the issues of school supplies and clothes they cannot afford for students, and also issue of lack of foods at home: students are too hungry to study in school. These issues are caused by lack of documentation which prevents parents from working and they do not have financial means to support children. Also, parents have debts in tuition payment and children are expelled from their schools, and parents cannot afford the costs of transport for their children to go to school.

In addition, after graduation from the primary school, children cannot continue to the secondary education, which is also raised as one of the issues they have. This is a confirmed fact; without presenting an Angolan ID, students cannot proceed to their secondary education even after completing the primary education.

### *Observations and Recommendations*

Parents are generally supportive for children to access education regardless of gender of their children. Though students think that schools are safe, but once they were asked about issues in school, it was revealed that they face discrimination of Angolan students. Across sessions, it was observed that refugee students are discriminated because of their names and how they dress. Some schools have some internal mechanism to address the student's concerns and they have sessions to address those behavior issues, but those who do not find that kind of internal mechanism they either talk to parents or do not talk to their issues to anyone.

Also, hunger issue of students is found as a common issue, and material issues (such as books and uniforms) are somehow eased by community mechanism (borrowing uniform/books from neighbors).

Adults also raised the same concerns about discrimination and issues of food/school supply. Though in general male children and female children are treated equally, but according to a Sudanese respondent, in his community male children are prioritized to access education. Thus, there is some community which prioritizes male children to female children in accessing education. The adults also raised that documentation issue is one of the causes of children not to go to school.

In this PA, the education issues caused by documentation issue is not touched because the issues are known to the operation: due to the documentation issue, students beyond Grade 7 cannot access secondary education. However, some adult group raised their concerns about this issue, and the fact that due to lack of documentation students face difficulties in receiving their certificates. These documentation issues are known to the operation already as the advocacy efforts need to be continued.

Based on the findings of this PA, below recommendations can be made.

First, solutions should be sought for the issues of lack of school materials (uniforms/shoes, books etc) and lack of food to study. These situations could be eased by shifting our programme to cash-based interventions, with which PoCs can use support for their own priorities.

Second, UNHCR and partners can support for the community to provide moral sessions for children (both refugee and Angolan children) if their schools do not provide.

Third, with education partner, community can agree on some mechanisms to receive children's concerns, through which the students who cannot raise their concerns in school can raise in the community to seek help. This is important given that discrimination towards refugee children in schools and out of school is quite serious, and the community mechanism can help children address their concerns.

Fourth, literary education for illiterate adults can be also promoted as the needs are confirmed. It is considered that if parents are literate and they can also promote education of their children and support them.

### 3. Access to Basic Services: Health

Health issue is one of the most critical concerns always raised by the refugee community. They raised their concerns about delay of medication and treatment though prescriptions are provided to JRS. In this situation, there should be some community mechanism through which they manage their health issues within their community. Thus, this PA focused on community mechanism and proposed solutions.

It was revealed that when they need urgent medical support they rely on JRS, state hospitals, and community medical stations. Some male respondents in Viana mentioned that they rely on JRS and UNHCR when they need urgent health support as they do not have any other coping mechanism. Plus, in their nearby clinic, PoCs are asked to pay AoA 500 for consultation fee or they have to proceed to a private clinic getting help of coordination, according to a Rwanda female group in Viana.

Thus, they propose that there should be some first aid medical system on which they can rely before they reach out to JRS. They would like to have some medical system near by their communities such as health commissions in schools and churches. Also, they proposed that they would like to have a pharmacy and some stock of medicine for common sickness, and that they wish to have JRS's laboratory near their community. It is clear that the community is hoping to have a more organized medical mechanism to support them, as a mixed male group answered that they would like to have support from an NGO which can strengthen health sector better.

As early pregnancy is one of the GBV and child protection issues often raised by the refugee community, this PA dealt with perception about family planning as one of the ways to prevent children from pregnancy.

Some ladies in Viana do not believe that family planning is beneficial unless their spouses are also educated in it. Male in Viana were positive about learning family planning. They want somebody in their community to be trained in family planning. However, one respondent from Sudan informed that in their community family planning is not well perceived, but he showed interests in learning more about family planning.

It was also uncovered that women leaders or some volunteers from NGOs came to their communities to advocate for family planning. Women group from Rwanda (over 40) also mentioned that women in Viana have been advocating for family planning individually or in group, especially for girls and adolescents.

### *Observations and Recommendations*

It was revealed that both women and men hope to have some first aid community mechanism such as having some stock of medicine for common sickness and having medical team in their community. Also, family planning is perceived positively by most of the refugee communities, and family planning education sessions for couples including spouses should be encouraged.

With the health partner, it would be beneficial to think how quickly the needs of the community can be addressed. The community is hoping to establish a first aid community mechanism through which they can be helped even before reaching out to JRS or clinics.

As part of GBV sessions, sessions about family planning can be incorporated as survival sex and early pregnancy are observed in the community. Particularly, the community, both women and men, have interests in learning more about family planning. It would be effective to identify the women groups advocating for family planning in Viana and work in collaboration with them or strengthen their activities.

#### **4. Access to Basic Services: WASH**

Questions about WASH included questions about latrine, water, and garbage/hygiene. The analysis was made separately for Viana and those who came to Bairro Popular as there can be different practices depending on whether they reside.

This PA uncovered that there are households which do not have latrines especially in Viana, and they have to buy water from market or those in the street coming to sell water (for example, one group mentioned that they pay 25AoA for 25L of water). Those who do not have latrines use plastic bags and buckets as latrine and throw the waste away with other garbage. It was also uncovered that those who do not have latrines do not wish to use community latrines. They also want UNHCR to negotiate with water tap companies to allow elderly women to be exempted from water payment.

PoCs in Viana do not sort garbage by type and they have some places to dump their garbage. Certain people especially vulnerable women collect and sell the garbage which can be recycled. It was observed that there are some cleaning campaigns organized in Viana, according to the activists working in the community. Plus, it was heard from female respondents that they would like to have some cleaning materials/protective kits to improve their waste management system by organizing cleaning campaigns. Also, it was heard from Rwandan group (over 40) that they would like to receive bags to sort their garbage to improve their waste sorting and recycling system. Rwandan women group confirmed the needs for sensitizing their community members in garbage sorting to prevent vulnerable women from putting themselves at risk by sorting garbage.

In Bairro Popular, most of PoCs have access to latrines and water though they buy water from those with a bike to sell water. At the same time, it was also observed that some households do not have latrines and they use a bucket as a latrine and throw away with other garbage. In Bairro Popular, it was heard from women from DRC that their dump sites are far from their houses and they dump their garbage in ditches, though they think that that the community should be sensitized in waste management. It was confirmed also in Bairro Popular

that certain people sort garbage and sell the garbage. A group of men proposed that they would like to educate their children and those who collect garbage in hygiene.

*Observations and Recommendations*

Absence of family latrine in Viana is observed as a critical issue. And the absence of latrine is not an issue only in Viana, there are families who do not have a latrine at home even in other parts of Luanda, using a bucket as a latrine. To improve WASH situations in refugee communities, supporting with household latrines is an area UNHCR and partners may wish to think of for their future programming. Water is mostly bought regardless of locations, so for vulnerable refugees this is a critical issue for their survival.

There is the exiting garbage system in the community: there are designated garbage sites, where garbage without being sorted is dumped and certain people come to collect materials that can be sold. Especially it was uncovered that that vulnerable refugee women are engaged in the garbage sorting and selling, so in order to prevent them from engaging the risky business, support for recycling system for their sustainable business is also recommended.

Also, there are refugees who would like to have dialogue with children and those engage with garbage business so that community dialogue can be also supported.

**5. Access to Basic Services: Livelihood/Self-reliance**

The livelihood opportunity is limited though it has been provided by Dom Bosco and JRS previously. This section clarifies how the community has managed the situation: community mechanism to manage urgent family needs, previous vocational training implemented, and proposals for the future livelihood activities.

Female respondents in Viana and in Bairro Popular and Rwandan male group mentioned that they make some items such as biscotos and bananas to sell to support their families. When then need cash urgently, they rely on churches, partners and UNHCR. Male respondents in Viana mentioned that they do not have any business and they rely on God, so they do not know who to rely on when they need cash urgently. A mixed group of men also answered that they go for begging if they need cash urgently.

Elderly Rwandese group and women from DRC responded that they go to family members, friends, JRS/HCR, and people who lend money with interest. Women from DRC would receive some offers, and ask others to support and manage with what they have to support their family members.

Through the FGDs, it was revealed that POCs are interested in vocational training in below areas:

<b>Female</b>	pastry, tailoring, decoration, hairdressing, Portuguese/English/French class, cooking, pastry, decoration, tailoring, and computer classes, nursing, literacy
<b>Male</b>	mechanics, electricity/repair of AC, information, tailoring, entrepreneurship/business (accounting and marketing), computer classes, construction

Regarding the vocational training PoCs have received previously, the PoCs who received consider those training sessions useful though some did not receive materials to start their business. At the same time, there are some women from DRC who believed that with the

vocational training and materials they received they feel they are paid off. Also, vocational training they received is considered useful, but due to documentation issue they cannot work using the skills, according to a mixed female group. Thus, it becomes clear that having the opportunities to use their acquired skills is most important for the vocational training to contribute to self-reliance.

When PoCs were asked what they would like to do to improve their community and if they can think of any projects, some female respondents answered that they would like to have small business to support those in need, and male respondents in Viana mentioned that they would like to start farming to help their community. Some Rwandan men want to have small business such as bakeries and agricultural activities or livestock projects. Thus, project funding schemes to start up their business is much needed by PoCs.

Women group from Rwanda proposed some projects. First, they want to have a soap production machine to sell soap. Second, they want to have popcorn machine and sell popcorn in schools and they wish to bake bread to sell if there are given an oven. Also, they proposed that women engage in garbabe picking should receive transport assistance so they can deliver collected materials for sale without waiting for the company to come collect from them.

#### *Observations and Recommendations*

It was observed that female respondents rely more on their social network or their own small business to support each other, and male respondents feel that they cannot rely on others. This may cause vulnerability to male single men who can isolate themselves. At the same time, it was observed that there are some community support mechanisms to get support such as through churches, family members, friends, and money lenders, apart from relying on UNHCR and partners. It is also observed that Liberians often engage in business.

Vocational training implemented in the past seems to be found useful by the graduates, but there are challenges to use their gained skills in practice. Training courses the livelihood partner offers can be diversified every year based on the needs and interests of the PoCs. Also, the livelihood partner can think of creating more opportunities for graduates of their vocational training to use their skills in practice not only equipping people with skills, so those who acquired skills do not have to waste their skills learned without using them. Thus, livelihood support (funding scheme for business) can be combined with vocational training, and graduates who have solid skills, trained business skills, and who fall under the vulnerability category, can be supported under the scheme.

In addition, it was found that PoCs have various ideas on how to improve their lives and the lives of community members, and soliciting their ideas and funding some projects should be promoted for their self-reliance.

## **6. Access to protection Services**

In 2021, the protection unit strengthened the outreach activities and conducted FGDs in various areas including Cazenga, information campaigns, and protection counselling. This section is about their access to protection services to improve accountability of UNHCR and partners by analyzing the needs of PoCs for accessing information about services.

Regarding the community centre, those who participated in this PA are mainly those who use the community centre often to get information or advice and to participate in activities.

However, participants from Sudan, Mauritanian, Guinea-Conakry responded that they do not come to the centre often. Others come for protection counselling and to get information.

When it comes to the helpline UNHCR has, it became clear that the number is not well informed to the community. It is likely that some people who know the numbers are using this number. Counselling schedule is neither well informed to the community though the schedule is posted on the notice board in the Bairro Popular community centre. More efforts to inform the number can be done.

Regarding the information dissemination from community leaders, male respondents mentioned that those who stay remotely do not receive information, and they do not think community leaders are delivering information properly, and they would like to have more direct information dissemination from partners and UNHCR. Rwandese women over 40 believe that they receive information from community leaders. Plus, they try to disseminate information at least to 3 people in their community. However, they find it difficult to disseminate. In Bairro Popular, women from DRC mentioned that they receive information from activists and they appreciate the work of activists, but they would like to receive directly from partners such as through SMS system. There are some areas where people receive information from leaders or activists and where PoCs do not receive information from them.

When PoCs are asked about preferred mode of communication, everyone wants more direct communication from partners and UNHCR. Thus, they appreciate our protection counselling, helpline system, and home visits. Some want website or SMS system for those who stay far from the community centres. At the same time, everyone participated in this PA agreed that they would like to have a volunteer mechanism where community volunteers conduct home visits, community patrol, and information dissemination and communicate with UNHCR and partners for case referral. Rwandan women group mentioned that they would like to have a complaint box to post their letters in the community centres.

### *Observations and Recommendations*

Community centers have been frequently-used platforms for certain nationalities to get advice and information. Helpline numbers and counselling schedules have not been informed widely, and information dissemination can be strengthened.

Most people appreciate direct information dissemination efforts made by UNHCR/Partners, and also feedback mechanism. Counselling is appreciated by the PoCs as their most preferred way to have direct communication with UNHCR and partners, and case management mechanism needs to be strengthened.

At the same time, volunteer system/network is highly appreciated by the community. All of the respondents agreed that they want volunteers who can represent their communities to raise their concerns to UNHCR and partners and receive information. UNHCR and partners can strengthen home visits through implementing volunteer network. There was also some concern from PoCs that they would like to reach out to UNHCR and partners during weekends too, and this volunteer network would be able to respond their needs of 24/7. Website, SMS and telephone system can be also strengthened for those who stay far from the centres.

Women centre, which UNHCR is working on refurbishing would be the ideal platform for women in Viana where they can have some child friendly space and where they can learn new things. In the centre women can also enhance information exchange in the community.

This comment was heard as one of the last comments from the Rwandan women group (over 40) that they would like to have a solar lantern as majority of elderly households do not have electricity. Though in 2021 solar lanterns were distributed to children in school, elderly households can be also benefitted from solar lantern distribution to be conducted in 2022.

## Terms of Reference: Participatory Assessment 2021

### Background:

Luanda has diverse POC population: 38,282 persons from more than 11 countries with geographical, social and economic diversity. It is part of community-based protection for urban programming to conduct a participatory assessment (PA) to identify their protection risks, underlying causes to understand their capacities and to learn their proposed solutions. The results of the PA can feed into the programming of the UNHCR Angola operation for 2022 and will be presented to the refugee community to enhance accountability.

### Proposed Methodology:

This PA focuses on qualitative assessment, targeting all nationality groups considering Age, Gender, and Diversity. UNHCR and partner staff member will engage focus group discussions in Viana and Bairro Popular. Question sheet and systematization format will be shared with the staff members who will conduct focus group discussions. The results will be compiled into a report for operational planning of 2022 and the feedback session will be conducted for community leaders once the report is compiled.

### Targeted group:

#### Focus group discussions in Viana/Bairro Popular/Cazenga (approximately 410ppl)

- This process requires 8 staff members in Bairro Popular and Viana every day.

Category	Age	Sex	Area	Target number
Children	10-13	F/M	Viana	10*4sessions (Viana)=40ppl (20- children)  *Covering 1) DRC and 2)Rwandese/Burundians  (male/female separately)
Adolescent	14-17	F/M	Viana	10*4sesssions (viana) =40ppl (21- adolesens)  *Covering 1) DRC and 2)Rwandese/Burundians (male/female separately)
Adults	18-40	F/M	Viana/BP	10ppl*8sessions=80ppl(22/23 in Viana)



				<p>*Covering 1) DRC and 2)Rwandese/Burundians (male/female separately)</p> <p>10ppl*16sessions (BP) (160ppl) (20-23)</p> <p>*Covering one nationality per session (combining a few nationalities) (male/female separately)</p>
People over 40	40 plus	F/M	Viana/BP	<p>10ppl*4sesion (24) =40ppl(Viana)</p> <p>*Covering 1) DRC and 2)Rwandese/Burundians (male/female separately)</p> <p>10ppl*4sessions (24) =40ppl(BP)</p> <p>*covering several nationalities per session (male/female separately)</p>
Women (Adults)	18 plus	F	Cazenga	10ppl from DRC

**Semi-structured discussions/house visits (spot checks) in Benfica/KM30Tande/Cazenga (approximately 20ppl)**

Category	Location	Target HH
Somali	Cazenga	2 HH
Ginuea	Cazenga	1 HH
Sierra Leone	Cazenga	1 HH
Rwanda/DRC	Benfica	3 HH
Rwanda	KM30- Tande	1FGD (4HH)
TBC	KM30- Other side	3 HH

**Proposed thematic areas for questionnaire:**

- Community Based protection/general protection (AAP)
  - a. GBV, child protection, PSN
  - b. Access to basic services (Education, Health, WASH)
  - c. Self-reliance/livelihood

**Proposed Work Plan:**

Activity	Timeframe
Develop questions for FGDs	By 8 <sup>th</sup> Oct
Inform the UNHCR staff members and partners	On 8 <sup>th</sup> Oct
PA preparation WS for UNHCR staff members/partners	13 <sup>th</sup> Oct
Conducting FGDs	18 Oct to 22 Oct (Viana/BP) 25 Oct to 29 Sep (remote areas)
Data compiling by staff	29 Oct (by staff member)
Data analysis	3 Nov
Reporting	5 Nov
Reporting WS in Viana/BP	TBC in Nov

**Advantages of this method:**

- Reduced risks of COVID-19 by reducing the number of the FGDs

**Disadvantages of this method:**

- Possible challenges of reaching out to the community members especially from minority groups

**Risks:**

- Wide spread of COVID-10 among POCs during this assessment

**Estimated Budget Breakdown:**

Refreshments for interviewees	500/persons*410ppl=205,000
PPE kits	3000*5bottles+ 2000*10box=35,000
Lunch allowance in Cazenga	1500/days*10ppl*1day=15000
<b>Total</b>	AoA 241,500 (nearly 400 USD)

UNHCR Angola Protection Luanda

September 2021

### **Questions to Children**

1. Do you feel safe in your community?
- 1.2 In case of no, where are you feeling unsafe? Why do you feel unsafe? Do you wish to have a space where you can play safely?
2. What kind of violence is common to face for children in your school? In your community?
3. Are your parents supportive for you to go to school?
- 3.1 Why do you think so? Are there any challenges? Why do you think it is happening?
4. In your school do you know if there are any reporting mechanism for you to raise your issues of violence?
- 4.1 Do you use it? Why you use or you do not use?
5. Do you have any opportunities or classes (both in school/ in your community) where you can discuss your concerns about security?
- 5.1 Who do you talk to when you have issues regarding violence?
6. Those in school, are there any issues for refugee children in school you are going? What are the issues?
- 6.1 Why do you think you face the issues? (Bullying/discrimination/meals/materials/lack of support from parents or teachers/uniform etc.)
7. If you are out of school, what do you usually do during the day? Do you stay at home, helping family or engaging with friends?
8. Do you know any children or your friends who are in trouble needing assistance but have not been assisted in your community?
- 8.1 Do you know how they are getting any support from any adults in neighbors?
9. Do you have any questions to us?

### **Questions to adults**

#### **a. GBV/CP/PSN:**

1. Do you feel safe in your community?
2. In what occasions do you feel at risk of violence?
3. When you face violence at home or outside who do you inform to get support?
4. What do you need to improve the security situations around you? What can the community do to improve?
5. Do you think children have places to play safely in your communities? What kind of places?
6. When you find any issues of your children or children in your communities who do you consult?
7. When you have difficulties and faced new protection issues, who do you talk to?
8. Which group of people do you think are more vulnerable in your community? Do you know any male single parents who are in need of help? (try to analyze who is not supported and who cannot raise their voice yet, not limited to male single parents)
9. Do you think those vulnerable people are assisted by partners or UNHCR in your community?
10. What do you think you can do or community can do to assist these people?

#### **b. Access to basic services: education**

1. What do you find as challenges for refugee children in school? (ask around any bullying, discrimination, lack of materials or uniform, language issues, transportation, meals etc.)

2. Why do you think they are happening? Why do they become issues? (try to analyze root causes of the issues by asking following up questions)
  3. Do both male children and female children have equal access granted by parents and schools? Do you find any challenges to go to primary school?
  4. Are mothers are encouraging children to go to school? Fathers? What prevents from children going to school?
  5. If women in your community are not educated, are they interested in learning literacy?
- c. Access to basic services: health**
1. Access to health services is a big challenge in Luanda, when you need urgent support who do you think you can rely on.
  2. What do you think of family planning in your culture? Do you wish to acquire more knowledge about it?
  3. Are there any community members specially women who are advocating for family planning? - how do they advocate? Who should advocate?
  4. How do you think your community can strengthen the management of health issues?
- d. Access to basic services: WASH**
1. Do you have access to latrines at home or in your community?
  2. Do you have access to water (drinking and washing) at home or in your community?- how are you getting? Are you buying regularly? Are there any authorized supplier?
  3. Where do you take your garbage in your community? Are you aware of distribution points of garbage containers?
  4. Are there any community cleaning campaign happening in your community? -how often?
  5. What is the waste management system in your community? (Do you separate garbage? Do you sell to someone or just dump somewhere? Is it common practice or business in your community that someone picks your garbage and sell to someone else?)
  6. How do you think you can and community can improve waste management system?
- e. Access to basic services: Livelihood/Self-reliance**
1. Given that livelihood support is limited, how are you supporting your family?
  2. How the situation is affecting negatively in COVID19?
  3. When you need urgent cash who do you usually talk to to get help?
  4. What are the courses/vocational training you may wish to take if offered?
  5. Have you ever benefitted from vocational training? When? Did you find it helpful?
  6. If you have received any training, did you find it useful to find or start a job/business
  7. Can you think of any livelihood projects or projects that the community can initiate to improve the situation?
- f. Access to protection services:**
1. Do you come to community centers often? How often? For what purposes?
  2. Do you think that community members are aware of the helpline number or protection counselling?
  3. Do you receive information from community leaders? – How do you receive information from them? How often?
  4. Do you know any community members who have not been receiving any information? – who are they?
  5. What would you propose UNHCR and partners for you to have more access to protection services?
  6. Do you find the role of activists impacting your community?

7. Do you wish to have someone volunteering who can lead the community to deliver community issues to UNHCR and partners?
8. What is your preferred mode to raise your protection concerns or complaints?
9. Do you have questions to us?