

# Angola

22 November 2017

633 individuals, 121 households, were successfully relocated to Lóvuá. They received tents and moved to their allocated plots. **A total of 4,132 persons are currently living in Lóvuá.**

The Super Cereal and Super Cereal Plus **programme is reinforced with nutrition education, including daily cooking demonstrations.**

Refugees benefited from **psycho-social support**. Children attended group activities with **sensory and cognitive stimulation, creativity, reward, and stress management.**

## KEY FIGURES

**75%**

of Congolese refugees from Kasai in Angola are women and children

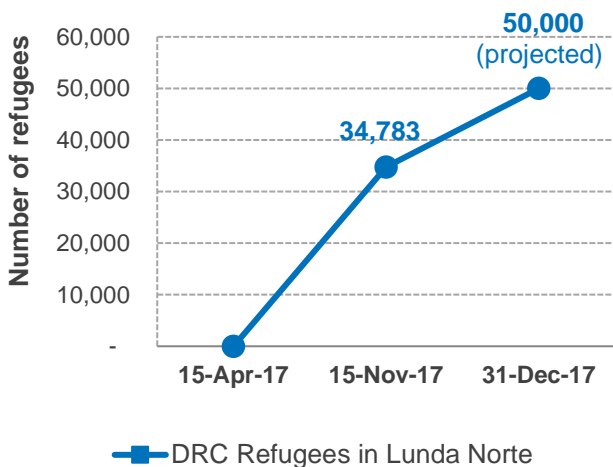
**34,783**

Biometrically registered Congolese refugees in Lunda Norte Province. **26,983 refugees** currently have active status to receive food assistance.

**50,000**

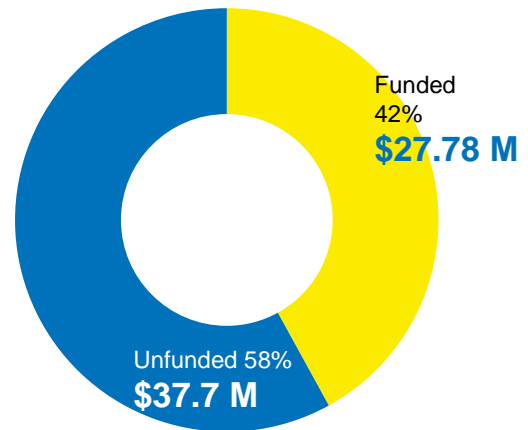
Inter-agency planning figure for Congolese refugees from the Kasai region in northern Angola by the end of the year

## POPULATION TRENDS

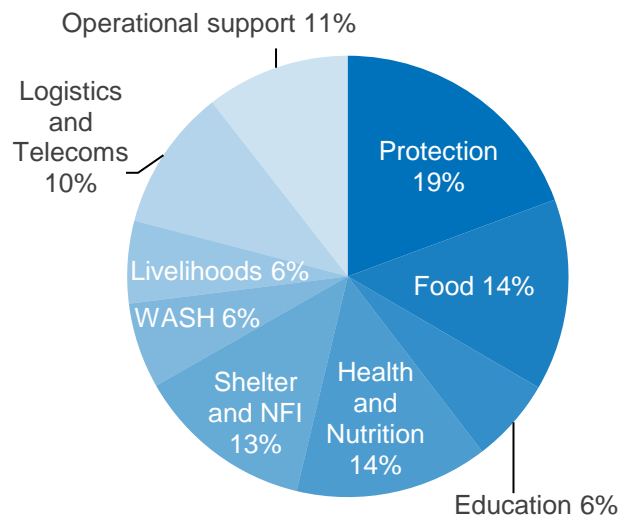


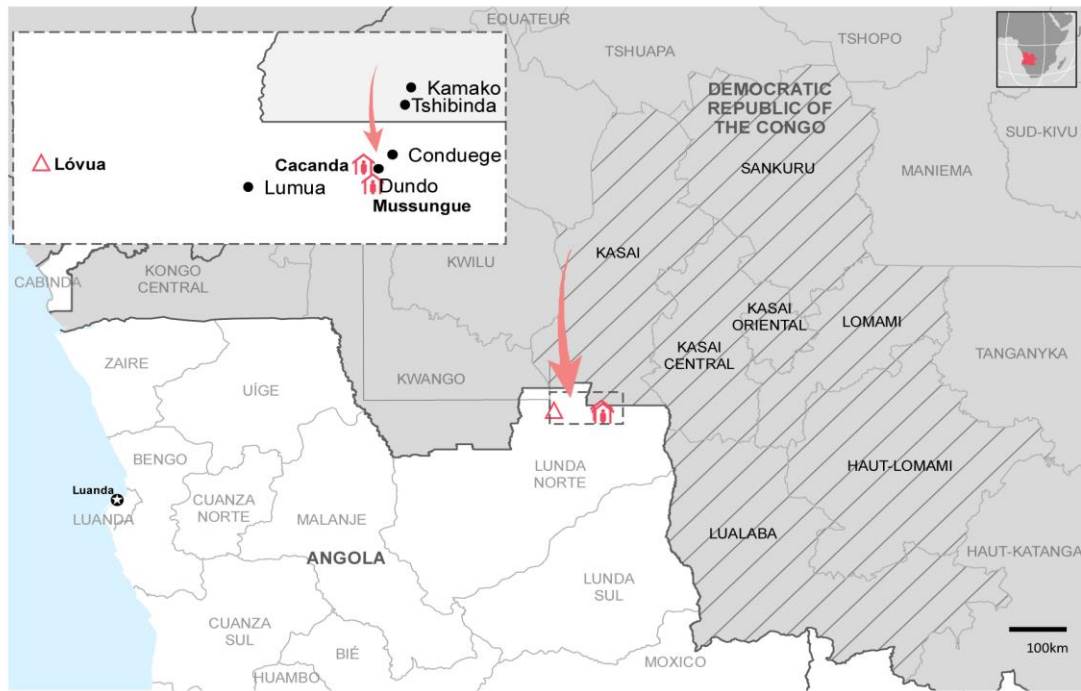
**USD 65,507,610**

requested for Angola Inter-agency Refugee Response



## FINANCIAL REQUIREMENTS





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: 11 August 2017 Sources: UNHCRS, UNCS, Angolan Government

Areas affected by outbreak of violence since August 2016
  Refugee settlement
  Reception centre
  Congolese refugees

## Operational Context

The outbreak of violence in the Kasai region of the Democratic Republic of the Congo (DRC), in March 2017 triggered the internal displacement of some 1.4 million persons and the flight of over 34,000 refugees into Lunda Norte Province, Angola. Refugees have reported generalized violence, mass killings, mutilations, burning of property, destruction of villages, schools and churches, rape of women and girls and human rights abuses, as well as food shortage and the lack of access to basic services and goods. The Emergency Relief Coordinator declared an IASC System-Wide L3 Emergency Response for DRC focusing on the Kasai region, Tanganyika and South Kivu provinces, effective 20 October for a period of six months.

The DRC-Angola border, a main artery for trade between the two countries, continues to be closed to trade and commerce despite the Government of Angola (GoA) open door policy to welcome Congolese nationals fleeing as a result of the conflict. Since July, new arrivals have significantly decreased due to protection related challenges of Congolese refugees in accessing the border with Angola, as well as the recent relative stabilization of the security situation in Kasai. As the situation continues to remain volatile in the Kasai region, humanitarian agencies in Angola have developed a response plan to assist an influx of 50,000 refugees by end December. The interagency humanitarian response for the Congolese refugees covers the areas of protection, emergency shelter, food security and nutrition, non-food items, water, sanitation, hygiene, health, including mental health, and education until the end of 2017.

The relocation of refugees from Cacanda reception centre to the new settlement of Lóvua started on 8 August. Since then, 4,132 Congolese refugees from Mussungue and Cacanda reception centres have been relocated. Lóvua was initially assessed as having capacity for 30,000 refugees.

## Achievements



### PROTECTION

#### Achievements and Impact

- **Registration:** Out of the 34,783 individuals biometrically registered, 26,983 individuals (6,495 families) were present at food distribution.
- **Child protection:** Protection partners met with the 33 unaccompanied and separated children in Cacanda reception centre to give details on the upcoming relocation to Lóvua and their integration into foster families.
- **Education:** 729 children attended the child friendly space informal education classes on a daily basis in Cacanda and Lóvua.
- **Sexual Gender Based Violence (SGBV):** During an SGBV retreat participants from the refugee community, Government of Angola, Armed Forces and Justice authorities, as well as humanitarian partners, concluded the terms of reference for the SGBV Case Conferencing Committee and established an inter-agency task force with the aim of formulating key SGBV activities vis-à-vis SGBV prevention, response and survivors identification, in particular with regard to children, survival sex, involvement of men and persons with disabilities.



*Refugee children in Cacanda celebrating the relocation from that reception centre to Lóvua settlement, November, 2017*

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### FOOD SECURITY AND NUTRITION

### Achievements and Impact

- **Nutrition:** A total of 1,706 children (6 to 59 months) were screened for malnutrition in Cacanda and Lóvua. Cacanda presented four cases of Severe Acute Malnutrition (SAM) and six had Moderate Acute Malnutrition (MAM). Lóvua has no cases of SAM and GAM.
- **General Food Distribution (GFD):** 3,417 individuals, out of 3,500, have received food in Lóvua. In addition to the blanket supply of Super Cereal to all beneficiaries including children 6 to 23 months, delivery of Super Cereal Plus to 24-59 months children identified with MAM, is being reinforced with nutrition education, awareness-raising mobilization, daily cooking demonstrations, community-based follow-up of MAM-affected children, as well as referral of children with SAM at both distribution points.



### HEALTH

### Achievements and Impact

- **Primary health care and medical consultations:** In **Cacanda**, the main cause of **morbidity** was malaria (58 per cent), followed by parasitosis (15 per cent), upper respiratory tract infections (13.8 per cent) and acute watery diarrhoea (4.4 per cent). 25 cases of tuberculosis are being followed and three new ones were detected. In **Lóvua**, the main morbidity was linked to upper respiratory tract infections (17.5 per cent), followed by osteomuscular pain (24 per cent) and parasitosis (16.4 per cent). Eight cases of tuberculosis continue being monitored.
- **Sexual & reproductive health (SRH):** Antenatal (ANC) and postnatal (PNC) care services continue. In Cacanda, 22 women received ANC consultations; 18 received first consultations and 16 were screened for HIV. 17 refugees received PNC consultations. In Lóvua, one PNC consultation took place.
- **Mental health and psycho-social support:** 76 families in Lóvua and one in Cacanda benefited from psycho-social support. In addition, children's group activities on sensory and cognitive stimulation, fantasy, creativity and reward, sensory stimulation and stress management continue in Lóvua settlement.



### WATER AND SANITATION

### Achievements and Impact

- **Sanitation:** Household sanitation construction continues in Lóvua along with hygiene promotion campaigns, solid waste management and vector control activities by refugee mobilizers and hygienists' teams. The distribution of soap and jerrycans has been completed in Lovua settlement and is currently ongoing in Cacanda reception centre.
- Four theatre shows raising awareness about Diarrhoea and Cholera Prevention took place in Cacanda.



## SHELTER & SITE PLANNING

### Achievements and Impact

- **Relocation:** On 15 November, 633 individuals (121 households) were successfully relocated from Cacanda. Relocated refugees received tents and an individual plot per household. 4,132 persons are currently living in Lovua.
- **Site Planning:** A new site layout for Lóvua was proposed, reflecting a revised capacity of 20,000. The new design highlights the need to develop 32 additional villages, and space for public infrastructure such as schools, and health centres.
- **Shelter:** 126 tents, provided by GoA, were distributed during the relocation. An additional 500 tents from partners have arrived to provide temporary accommodation pending the construction of the planned 350 emergency shelters. The design of the emergency shelters has also been revised to ensure stronger housing to refugees during the raining season.

### Working in partnership

- Humanitarian and development partners, working in the country on various projects, are actively supporting the Government of Angola to ensure adequate and effective response to the needs of the Congolese refugees. A weekly inter-agency coordination meeting is held in Luanda. In Dundo, weekly inter-agency meetings ensure a comprehensive and integrated operational response to the refugee situation. Sectorial working group coordination meetings on protection, WASH and health/nutrition are also organized weekly in Dundo.

### Partners in the response:

- Angolan Red Cross Society
- CARITAS
- CICAJ - Centro de Investigação Científica e Assessoria Jurídica
- FAO - Food and Agriculture Organization of the United Nations
- IOM - International Organization for Migration
- JRS - Jesuit Refugee Service
- LWF - Lutheran World Federation
- MAG - Mine Advisory Group
- MdM - Médicos del Mundo
- MSF - Médecins Sans Frontières
- NCA - Norwegian Church Aid
- PIN - People in Need
- 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
- WVI - World Vision International

The [Angola Inter-Agency Refugee Appeal \(April – December 2017\)](#) is available on the [Angola Operational Data Portal](#). Agencies are very grateful for the financial support provided by donors, who have contributed to their activities with un-earmarked 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 their contributions to the inter-agency refugee response in Angola.

**Special thanks to China, Denmark, Italy, Portugal, the United States of America and private donors in Italy and in the United States of America** for their contributions to UNHCR's operations in Angola.

**Special thanks to the United States of America** for their contribution to WFP's operation in Angola.

#### Financial requirements by agency:

Organization	Total (USD)
FAO Food and Agriculture Organization of the United Nations	1,030,000
IOM International Organization for Migration	1,869,438
JRS Jesuit Refugee Service	1,574,790
MAG Mine Advisory Group	585,000
UNAIDS The Joint United Nations Programme on HIV/AIDS	400,000
UNDP United Nations Development Programme	2,550,000
UNDSS United Nations Department for Safety and Security	830,000
UNFPA United Nations Population Fund	1,367,414
UNHCR United Nations High Commissioner for Refugees	36,705,352
UNICEF United Nations' Children's Fund	8,499,703
UNRCO United Nations Resident Coordinator's Office	100,000
WFP World Food Programme	9,100,000
WHO World Health Organization	895,913
<b>Total</b>	<b>65,507,610</b>

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**LINKS**

[Angola Operational Data Portal](#)