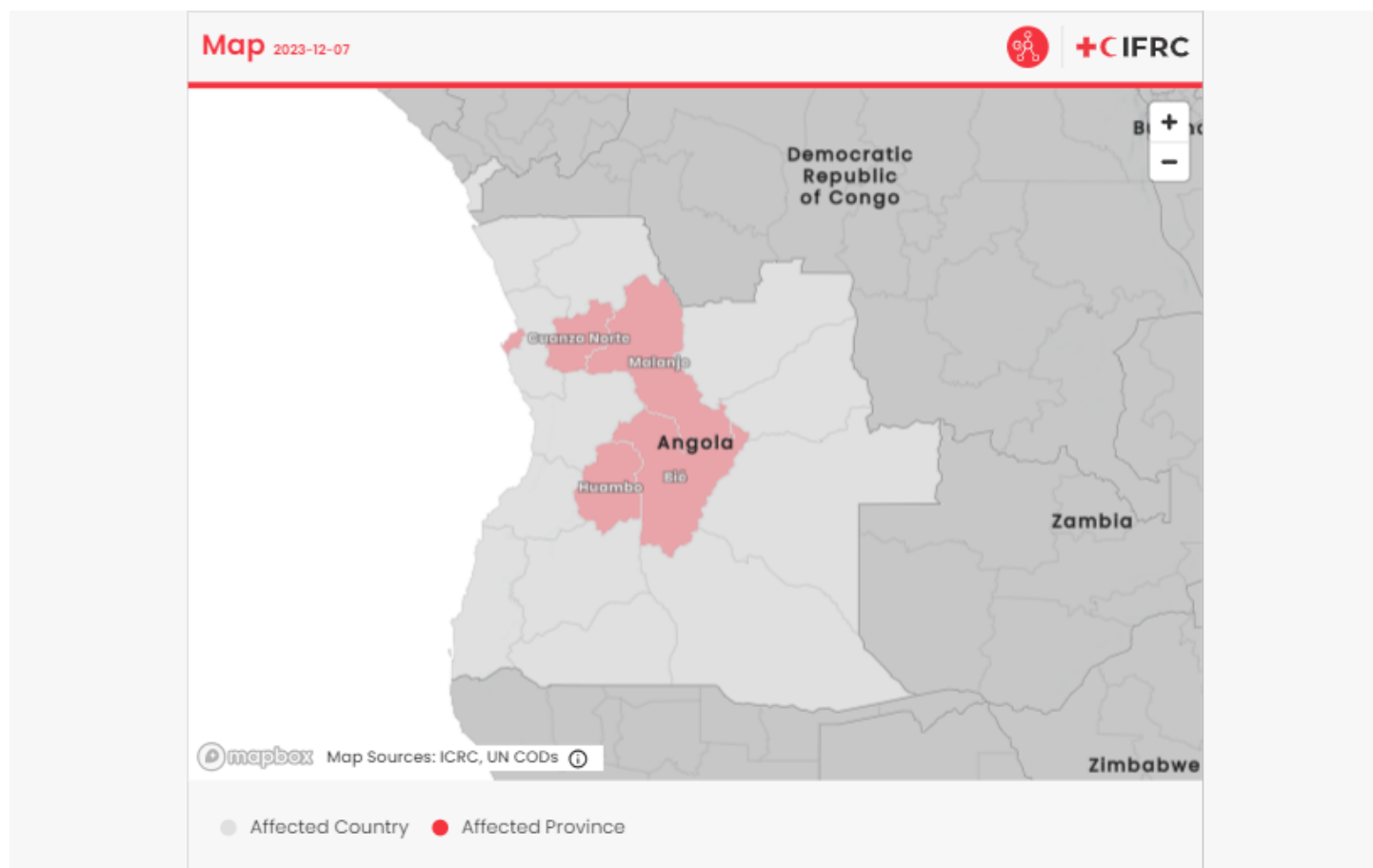




Volunteers doing assessment in Malanje

Appeal: <b>MDRAO008</b>	Country: <b>Angola</b>	Hazard: <b>Flood</b>	Type of DREF: <b>Response</b>
Crisis Category: <b>Yellow</b>	Event Onset: <b>Slow</b>	DREF Allocation: <b>CHF 200,224</b>	
Glide Number: <b>FL-2023-000249-AGO</b>	People Affected: <b>26,460 people</b>	People Targeted: <b>5,000 people</b>	
Operation Start Date: <b>2023-12-10</b>	Operation Timeframe: <b>3 months</b>	Operation End Date: <b>2024-03-31</b>	DREF Published: <b>2023-12-14</b>
Targeted Areas: <b>Bié, Luanda, Malanje</b>			

# Description of the Event



Map from IFRC\_GO alert on affected areas as of November 2023

## What happened, where and when?

Five days of cumulative heavy rains were witnessed in Angola which brought significant floods on 30th November. According to the Angolan Civil Protection and Fire service (SPCB) preliminary data, estimates 30 deaths, 5,292 affected households (26,460 people).

Besides, 10,895 households have seen their crops under water. In total, 15 of the 18 provinces are affected, with the most critical being Luanda, Huambo, Bie, Malanje and Cuanza Norte. The Government continues with assessments at country level.



Volunteers doing assessment in Malange

## Scope and Scale

The preliminary report of the Civil Protection and Fire Service indicate that the floods caused by heavy rain have:

- Killed more than 30 people and displaced around 5,000 families.
- Affected 15 of the 18 provinces of Angola, of which the provinces of Luanda, Huambo, Bie, Malanje and Kwanza Norte are reported to be the most affected.
- Over 5,292 homes have been destroyed.

The number of victims and damages continues to rise due to the amount of rainfall that has been recorded, causing rivers to overflow, and flooding neighbouring communities in the main city of Luanda, the capital.

The populations living in the urban areas have lost their houses, and basic sanitation is depleted. There is growing concern in the health sector due to scarcity of drinking water, contamination of water sources and the long-term stagnation of mixed water, and obstructed drainage routes can lead to the increase of water-borne diseases such as diarrhea, cholera and the proliferation of malaria and dengue, diseases that are considered endemic in Angola.

## Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	<b>Yes</b>
Did it affect the same population group?	<b>Yes</b>
Did the National Society respond?	<b>No</b>
Did the National Society request funding form DREF for that event(s)	<b>No</b>
If yes, please specify which operation	-

If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:

-

#### Lessons learned:

The NS did not conduct any floods response for years through the DREF support but there have been systemic learnings especially on the NS capacity and learnings on CVA approaches.

- CASH is today one of the most prominent and preferred flagship platforms in the Angola Red Cross's humanitarian aid actions. Cruz Vermelha de Angola has distributed cash as part of the Hunger Crisis Emergency Appeal.

- The NS is re-establishing its capacities as a humanitarian actor and there are still opportunities for learning that require IFRC's support to enable operational and technical implementation to be fully independent. There has been growing efforts on that through the hunger crisis response which will benefit this intervention, but there is need to complement from the rapid response.

- Cruz Vermelha de Angola can make use of capacity building in the area of needs assessment / vulnerability assessment. There are steps to be taken to be able to plan a more relevant/appropriate response.

## Current National Society Actions

National Society Readiness	<p>The National Society is currently present in all 18 provinces of Angola, with around 9,000 volunteers and 80 workers. In the three of the five provinces most affected by the current floods (Bié, Luanda and Malanje), Angola Red Cross (Cruz Vermelha de Angola (CVA)) has 18 workers and 1,291 active volunteers.</p> <p>The NS is mobilizing 90 of the active volunteers to support activities in the three priority provinces selected by the NS.</p>
Assessment	<p>The multi sectorial needs assessment is being carried out by the Angolan government, through Civil Protection and Fire service/Serviço de Proteção Civil e Bombeiros (SPCB).</p> <p>Volunteers are supporting the data collection for the losses and damages during the assessment. Some preliminary information from that field collection supported the planning under this DREF.</p>
Coordination	<p>There is an Internal operation coordination meeting led by the NS Secretary General, assisted by the Disaster Management (DM) Team from the National Headquarters (HQ). At this stage of the emergency the branches have a daily coordination meeting where they share daily operational update and challenges to the HQ.</p>
Resource Mobilization	<p>The Cruz Vermelha de Angola requested the support of the IFRC and ICRC to draw up the national resource mobilisation strategy and plan, including for emergency periods.</p>
Shelter, Housing And Settlements	<p>The NS has an ongoing support for shelter in targeted areas.</p> <p>The NS is still active assisting in settlement, though the RFL programme supported by the ICRC in two Refugees Camps, where one is based in Luanda.</p> <p>It is also collaborating with the SPCB, providing evacuation support in the provinces of Kwanza Norte and Malanje, with 15 ready volunteers, who have been trained by SPCB.</p>
Other	<p>Within the Drought Response Appeal, Cruz Vermelha de Angola implements health actions such as nutrition and endemic disease prevention in three Southern provinces of Angola.</p> <p>In Malanje, one of the selected areas to be supported, preventive health</p>



mobilization actions have been carried out. The NS is using the existing capacity of the trained volunteers to assist with WASH, RCCE and community sensitization.

## IFRC Network Actions Related To The Current Event

Secretariat	IFRC Maputo Cluster for Mozambique and Angola, has directly supported the NS since the start of the current floods in the country, through joint participation in coordination meetings with Civil Protection, data collection and processing, activation and preparation of the DREF proposal. The IFRC's direct, face-to-face technical support for the CVA will continue for the implementation, monitoring, coordination, closure, conclusion, and lessons learnt of this DREF.
Participating National Societies	There are no PNS supporting this response.

## ICRC Actions Related To The Current Event

NS's experience is based on the RFL programme, which assists refugees from the DRC in Angola, with the support of the ICRC. NS is integrating this initiative into its Disaster Management platform. There is a RFL support in Luanda.

## Other Actors Actions Related To The Current Event

National authorities	<p>Through Civil Protection and the service, the Government of Angola is leading the coordination of the operations to manage of the floods in the country. All the activities of search and rescue, needs assessment and any assistance to affected communities.</p> <p>The government is currently leading a needs assessment while situation is being monitored.</p>
UN or other actors	The Disaster Response Coordination Team (DRCT) is led by the United Nations Resident Coordinator in Angola and Cruz Vermelha de Angola is a permanent member, set up in the country in 2022, supported by the IFRC.

### Are there major coordination mechanism in place?

The National Society (NS) has part of protection agent in Angola and is working in coordination with the Government. This includes the assessment ongoing and the general operation coordination for this response.

Cruz Vermelha de Angola is working in coordination with Civil Protection and Fire service of Angola, through the operation and strategic meeting.

## Needs (Gaps) Identified



### Livelihoods And Basic Needs

The floods disrupted not only homes and infrastructure but also social economic stability of the communities, and their source of income. The local authorities estimates that 10,000 families lost their agriculture fields production.

The most affected crops are massango, massambala, paddy rice, vegetables and maize which were totally lost, aquaculture ponds were irretrievable, and more than 50 animals, including cattle and goats died, while livestock and poultry were swept away. This exacerbates the food insecurity issues experienced across various parts of the country.

The targeted provinces are identified as rural and urban, with poor terrains and intense weather conditions. Therefore, a loss of livelihood will undoubtedly have a significant influence on people's life. According to reports from the impacted areas, the restoration of livelihoods is one of the most pressing demands of the affected communities because further rain is expected to fall in the region, which may tend to increase the number of damages on agricultural breeding and products. Data on specific number of affected populations is currently under assessment process.



## **Shelter Housing And Settlements**

Preliminary report indicates that 16 social infrastructures were affected in Luanda and a total of 92 economic infrastructures (roads) were flooded or blocked. In the five most affected provinces, 5,292 homes were reported to have been damaged. There is a need to support shelter needs (covered under multi-purpose cash) as many individuals and families, still remain close to their homes and communities.

Support in Shelter cluster coordination has not been requested by ARC for this DREF operation as the provincial department of construction provides technical support in shelter repair and reconstruction (if any) as per the request from the local authorities. Most of the affected people come from informal settlements. Ongoing assessments of informal settlements and evacuations should be ongoing as needed.



## **Health**

The effects of the floods in the 3 provinces (Bie, Malanje, and Luanda) have caused significant impacts to the health sector. The situation has led to increased risk of waterborne diseases due to the contamination of water sources, disruption of sanitation facilities and the scarcity of clean, drinkable water which exacerbates the challenges especially for people living with chronic disease. Furthermore, local MoH fights disease such as malaria and cholera.

The country faces limitation of the prevention campaign and also the unavailability of IEC materials such as posters, leaflets on the prevention of water-borne diseases. Broadcasting radio messages to raise awareness, and health & hygiene promotion in communities is needed.

Malaria is always present in Angola throughout the year. With the increased rains, it remains one of the concerns of the authorities. Distribution of mosquito nets, Certeza, and hygiene items to help communities prevent themselves are essential.

Cholera cases are recurrent in some areas of Angola, the last outbreak being in 2017, while malaria is endemic, and cases are already reported to be higher than normal during this period.



## **Protection, Gender And Inclusion**

During floods, vulnerable groups including women, children, the elderly, and persons with disabilities, may have limited access to information and resources, making them more susceptible to exploitation and abuse. Protection and inclusion will be prioritized to ensure that the specific need of these groups is addressed. Raising awareness through targeted awareness campaigns, especially addressing gender-based violence and discrimination is needed. Besides the staff and volunteers will be briefed on the Code of Conduct and on preventing and responding to sexual exploitation, abuse, child protection as they implement flood response interventions. The operation will ensure that all NS staff, IFRC and volunteers involved sign the Code of Conduct. All trainings to be held will have a dedicated session on PGI to ensure that its implementation is reinforced.



## **Water, Sanitation And Hygiene**

Hygiene conditions, environmental sanitation and water availability in the affected population are significantly low, with low latrine coverage, raising the risk of exposure to a range of water-borne diseases. An estimated 60 per cent of the urban population has drinking water coverage, compared to 28 per cent in rural areas, and 52 per cent of the urban population has access to basic sanitation, while in rural areas only 24 per cent has access to basic sanitation.

The unavailability of drinking water in some rural areas and slums in urban areas is also a major concern. The main problems identified are:

- Limited access to drinking water in vulnerable communities has worsened the precarious hygiene and sanitation situation in these affected areas.

- Unavailability of water purifiers and suitable containers for storing water for use.
- Unavailability of personal hygiene items such as soap, toothpaste, toilet paper and sanitary towels for women and girls.

## Any identified gaps/limitations in the assessment

There is still significant gap of information for the livelihood sectors and the understanding on the best approach to cover the needs under the DREF criteria. From the learnings of the hunger crisis intervention, it was found important for the NS to carry out a more specific assessment that include a vulnerability assessment before any operation to ensure that the most-vulnerable people are adequately reached. With the overall food insecurity dynamic in the country, the current impact of floods requires to be more precise on the vulnerabilities criteria and the specific needs to leverage before proposing a response to the livelihood.

# Operational Strategy

## Overall objective of the operation

The overall objective of this operation is to assist 1,000 families (5,000 people), through addressing Humanitarian needs in Health, WASH, Livelihoods and Shelter through a multi-purpose cash intervention and health and hygiene promotion campaign in the three selected provinces (Bie, Malanje, and Luanda). This will improve their living conditions and complement the Angolan government's response efforts led by the National Civil Protection and Fire Service who are actively engaged in supporting evacuations and supporting shelter activities.

## Operation strategy rationale

During the proposed 3-month period, the DREF intervention will cover a two-pronged approach to address the immediate shelter, livelihood and basic needs of the affected populations as well as control and prevent the rise of water-borne diseases that are exacerbated by the floods.

To address immediate needs and provide relief to flood-affected families, NS is going for a multi-purpose cash assistance as the most effective intervention. Considering the particulars of the losses suffered by the beneficiaries, the Cash Assistance (CVA) will provide support and flexible leverages to the communities to address their needs in a diverse way, since the needs are distinct. This will allow the beneficiaries to better allocate the support to meet the needs/losses that they have witnessed.

With the installment of up to AOA 86,000/CHF 90 (multi-Purse cash using direct transfer by FSP) it may cover the purchase of goods such as food, basic needs, shelter tools for housing repairs. To estimate the value of the cash assistance that can meet the immediate needs of families' losses, depending on what they consider urgent, the NS has considered the minimum cost of various items based on market prices and has taken a percentage of the total, as not all families will need all parts of each kit. It will be a one-off distribution. This approach is preferred over distributing NFIs and food items as Angola Red Cross is cash ready and have experience with cash voucher assistance distributions, which is faster than having to procure and ship items given the immediate needs. This also avoids further issues with transportation of items across long distances at times when roads may be disrupted due to the ongoing floods. A cash risk update/viability and market rapid assessment will still be needed (as a rapid update) with the engagement of communities and community leaders.

The cash intervention is expected to have a minimum value that allow families to cover a selection of items including shelter repair equipment, basic food and hygiene needs. However, even if the livelihood is not covering crops and lands affected, it is considered that, depending on their priority, some families will give priority to agricultural losses as a sustainable solution to their livelihood. While the livelihood needs are briefly evaluated, they are not considered for now as a detailed planning will be adjusted based on findings and recommendations of the detailed assessment.

Community structures will be involved in the process of setting out the beneficiary selection criteria and choosing the beneficiaries, to ensure that only the most vulnerable families benefit. Through a community-based targeting approach the operation will target the most vulnerable for the cash transfers.

Rainfall can lead to contamination of water sources, increasing the risk of waterborne diseases such as cholera, while stagnant water from the rains can create breeding grounds for disease-carrying vectors like mosquitoes. For those reasons, Health and WASH services will be integrated in a combined approach to address health risks. The DREF will provide health and hygiene promotion interventions in communities, raising awareness through community visits, IEC material distribution, and a radio national campaign. Health promotion will focus on educating communities about safe water storage, treatment, and hygiene practices to prevent the spread of waterborne diseases, and raise awareness about vector-borne diseases, such as malaria and dengue fever, and encourages protective measures such as using bed nets and insect repellents.

The WASH and health activities will be oriented on empowering communities with knowledge and skills to enhance their ability to actively participate in health-related decision-making, reducing vulnerabilities during and after rainfall events. The defined approach will provide skills and financial resource to the community to adopt safe practice beyond this DREF. The first months, with disturbance of market and to ensure effectiveness of water access related actions, aquatab/water purification tab will be provided directly to the 1,000 HHs. This will allow the families to see the efficiency and usefulness while promoting the continuity through the cash installment. The rest of the kits will still be under the cash installment as there are no plans to reduce it further. Since the crisis is being felt across almost the entire country, radio campaigns will be broadcasted nationally during the period covered by the DREF, also making messages available in local languages, at the provincial and local broadcasters' levels. It is estimated that these messages will reach at least 10% of the population, and their transmission will give priority to times considered prime by the broadcaster.

Cruz Vermelha de Angola will deliver these activities through trained volunteers. Under the DREF, volunteers will be trained on EpiC/CBHFA and health & hygiene promotion, Cash and Voucher Assistance, and briefed on Protection Gender and Inclusion (PGI), and Community Engagement and Accountability (CEA). Given the distribution of volunteers across the country, and the large distances required to cover between provinces, each volunteer will be trained holistically in order to be able to participate in all activities as needed, in their communities.

## Targeting Strategy

### Who will be targeted through this operation?

The goal is to reach 1,000 HHs (5,000 persons) with this support. The CVA will select the most affected people in coordination with the Angolan Government Civil Protection and Fire services (SPCB) in the affected areas within Bié, Luanda, and Malanje.

Despite almost the entire country being affected by this crisis, the NS opted to identify 3 most affected provinces, by the floods as mentioned in the previous paragraph. The government has been focusing on addressing support in the city center of Luanda, and NS will focus on the sub-urban areas.

The selection followed vulnerability criteria evaluated for now and take into account the support also provided by Government. Further information's from assessment ongoing will inform on any adjustments.

The main target will be households that have had their homes destroyed by water and lost their means of subsistence. The selection criteria applied will also be:

- Households with female heads of household or children.
- Households with material and human losses.
- Orphans and vulnerable children.
- Female-headed households.
- Pregnant women.
- Older people.
- People living with disabilities.
- People with chronic diseases.
- More isolated households.

Beneficiary selection and targeting will be done through or in coordination with local authorities and community leaders, affected communities and working with community stakeholders to identify the most affected people. The PGI and CEA staff members will accompany the process to ensure that the most vulnerable members of the community have been prioritized.

### Explain the selection criteria for the targeted population

The selection criteria combine different factors:

- The evaluated impact of floods and their repercussions.
- The current gaps and level of severity among the provinces.

The government has been focusing on addressing risks in the city center of Luanda where at the time of assessment, there were more victims.

The needs identified will be based on and adjusted according to the assessment reports, that will be conducted by volunteers prior to the cash distribution.

The assessment mission in targeted areas will make it possible to collect more information and review the target based on actual



needs. Apart from multi-sector assessment, the NS will focus on livelihood assistance and market to provide a comprehensive response.

## Total Targeted Population

Women	2,600	Rural	50%
Girls (under 18)	-	Urban	50%
Men	2,400	People with disabilities (estimated)	-
Boys (under 18)	-		
Total targeted population	5,000		

## Risk and Security Considerations

Please indicate about potential operation risk for this operations and mitigation actions

Risk	Mitigation action
Fraud, corruption, integrity issues	<ul style="list-style-type: none"> <li>- Closely monitor the risk register to ensure mitigation measures are in place.</li> <li>- Robust operational and financial oversight and monitoring.</li> <li>-Staff code of conduct.</li> <li>-Fraud and corruption training/briefing.</li> <li>-Monitoring missions.</li> </ul>
Delay in operations or activities due to lack of funds, Standard Operation Procedures (SoPs)	<p>Training and capacity building.</p> <p>Update Standard Operation Procedures.</p>
Disrupted communication infrastructure may hinder information sharing and coordination.	<ul style="list-style-type: none"> <li>• Establish alternative communication systems, such as satellite phones and radio networks.</li> <li>• Train response teams in effective communication protocols.</li> </ul>

Please indicate any security and safety concerns for this operation

Angola has a significantly high level of crime. Crimes of opportunity, such as armed robbery, remain the primary threat to local Angolans and the expatriate community in Luanda. However, armed assaults and premeditated home invasions are also on the rise in the capital. There are regular violent incidents including sexual abuse and harassment, murder and kidnappings involving expatriates and Angolans in the province of Cabinda. Major roads between Luanda and the provincial capitals are improving but driving standards and some road conditions are poor and travel outside major towns is usually in convoys of two or more 4-wheel drive vehicles. Outside major towns, mines and unexploded ordnance remain a problem, including on roads, verges, and bridges, in buildings and in the countryside.

Lunda & Cabinda are in red security classification by IFRC.

To reduce the risk of personnel falling victim to crime, violence or road hazards, active risk mitigation measures must be adopted. This includes situation monitoring and implementation of minimum-security standards. IFRC security plans will apply to all IFRC personnel throughout the operation implementation. All RCRC personnel actively involved in the operations must have completed the respective IFRC security e-learning courses (i.e., Stay Safe Personal Security, Security Management, or Volunteer Security).

# Planned Intervention



## Community Engagement And Accountability

**Budget:** CHF 1,451

**Targeted Persons:** 5,105

### Indicators

Title	Target
# of volunteers briefed on CEA and RCCE	90
# of FGD at start of health & hygiene promotion activities	9
# of feedback systems created for distributions	1

### Priority Actions

1. CEA/RCCE capacity building for volunteers, and other stakeholders. Volunteers will be trained to assess the best communication channels for sensitization and distribution activities.
2. A feedback management system will be created with volunteer support through sensitization activities that make it possible to record community-wide rumors, questions, beliefs, observations, and suggestions relating to the common issues around the project topics. The system will make it possible to record community complaints and claims. Satisfaction surveys will also be implemented with the same purpose.
3. Engage community in innovative activities by including communities in promotion through FGD, sharing experience. To promote community-based disease control and health promotion, 3 focus groups will take place at the start of the operation per province (leadership, male, female) in each of the provinces, and during those sessions, volunteers will also take the chance to complement the market assessment that will be running in the areas.

As a cross-cutting approach, CEA actions above are blended under health/WASH. The media engagement and radio messages for instance will be integrated to several actions and hence, reflect on the costing under the main sectors. The trainings and focal points cost as indicated in the plan will all be a one package under NS Capacity Strengthening. This explains why under CEA, only the cost for feedback system will be applicable for the FGDs.



## Secretariat Services

**Budget:** CHF 24,690

**Targeted Persons:** 105

### Indicators

Title	Target
#of surge deployed for Operations Management	1
# of Ops field visits	3
# of IFRC field monitoring	2
# of volunteers insured	90

## Priority Actions

1. To help the NS workers with the implementation, IFRC will deport surge Operation Manager for 3 months.
2. IFRC staff will also provide virtual training for volunteers to reinforce the contents during the trainings that will be delivered prior to the interventions. Support will be expected to be done by the Health and Shelter, NSD and PMER experts.
3. Some monitoring visits might take place to monitor the DREF implementation.
4. To effectively communicate the urgent need for support and showcase the relief efforts in response to the floods in Angola, through the IFRC DREF campaign communication support will be provided to Cruz Vermelha de Angola visibility. IFRC to ensure that there is good media coverage of the various activities that will be carried out throughout the DREF. There will be sub-contracted photographers/videographers (photographers), who will have the assistance of the cluster's communications expert. Additionally, a social media campaign will be established.



## Health

**Budget:** CHF 5,848

**Targeted Persons:** 7,500

## Indicators

Title	Target
# of volunteers trained in EPIC/CBHFA/and health & hygiene promotion	90
# of Health and hygiene campaigns implemented in targeted areas	24
# of times of radio spots broadcast, for 3 months at national level	30
% of people reached with messages on waterborne deceases prevention at national level	15

## Priority Actions

1. Training of volunteers in CBHFA, Epic, and health & hygiene promotion.
2. Health and hygiene promotion in 24 communities (1 per week for 2 months in 3 provinces) for prevention and control of common communicable diseases. Hygiene kits will be procured and 1 kit will be made available for a team made up of 2 volunteers, so that they can use them in hygiene and health mobilization campaigns, to demonstrate ways of conserving water for consumption, water treatment, use of soap - for hygiene purposes, among others. 50% of volunteers visits will cover health messages and the others WASH messages.
3. Produce or replicate messages for radio, in collaboration with the MoH. Contract publication services for radio spots with greater coverage radio stations, at national level for a period of 2 months.
5. Reproduce and distribute IEC materials on community-based disease prevention, epidemic preparedness, and health promotion, complemented using social media. Material will be used during awareness campaign promotions by volunteers.

Training for health is integrated under NSS as one package trainings for volunteers while sensitization and necessary material will be done by same volunteers engaged in hygiene promotion and WASH services.



## Shelter Housing And Settlements

**Budget:** CHF 997

**Targeted Persons:** 5,000

## Indicators

Title	Target
# of people evacuated by NS	1,000
#of people reached with safe construction messages	5,000

## Priority Actions

- Some volunteers were trained by the Civil Protection Service and firefighters, and have been providing support to them in the rescue actions of flood victims. They are ready to continue providing support in rescue actions and will be on standby.
- Support by Civil Protection & Fire Department on evacuations will be provided as needed.
- Ensure during the awareness that safe construction messages are passed. The cost will be integrated to the volunteers field activities in other sectors.
- Support the families that will aim to prioritize the shelter, housing or access to essential households' items through the cash provided as MPC. The PDM conducted will evaluate the ratio of families that have received cash and confirm they prioritized shelter.



## Multi-purpose Cash

**Budget:** CHF 97,441

**Targeted Persons:** 5,000

## Indicators

Title	Target
# of households supported with multi-purpose cash after being identified	1,000
# of NS and volunteers trained in cash and voucher assistance	105
# of volunteers trained for data collection and PDM	30
% of beneficiaries who have indicated that are satisfied with cash distribution process	80
% of assisted HHs who report being able to meet the basic needs of their households, according to their priorities	80
PDM conducted and reported	3

## Priority Actions

Planned activities will be:

1. Market assessment for cash viability in the target areas will be implemented. The assessment will help identifying whether essential items, such as food, shelter materials, and hygiene products, are available in local markets, and if the cash intervention can be effectively used by beneficiaries to meet their needs.
2. Multi-purpose cash distribution to 1,000 families in need, in 3 provinces (Bie, Luanda and Malanje).
3. Staff and volunteers from the targeted branches will be trained to ensure they have relevant capacities to carry out the cash activities.
4. Establish a feedback system.  
A quick satisfaction survey will be conducted to the beneficiaries after the distribution (in the distribution area) to access the level of community involvement, led by NS during the process.
5. Post distribution monitoring (PDM) will be conducted after each disbursement (1 per province). The study will use a

combination of purposive and random selection. This mixed sampling design, will allow the team to capitalize time and resources, during the research which will take 2 days to cover a good range.

10 Volunteers will be trained in each of the 3 provinces to be capable to collect data in a flexible way, i.e., using digital forms, and when not possible physical forms will be adopted.



## National Society Strengthening

**Budget:** CHF 51,747

**Targeted Persons:** 105

### Indicators

Title	Target
# of staff and volunteers who have receive capacity building	105
# of follow-up visits performed by branch officials	6
# of reporting provided for this intervention	2

### Priority Actions

- Monitoring visits to the field, 2 per month for 2 months for 3 provinces.
- Branch activity monitoring and reporting.
- Skills for deployed team: as the trainings package for all trainings are provided at the same time to volunteers and NS staff in each of the 3 provinces, this has been added under this section.



## Water, Sanitation And Hygiene

**Budget:** CHF 18,049

**Targeted Persons:** 5,000

### Indicators

Title	Target
# of people reached by hygiene promotion activities in the response period	7,500
# of trained volunteers on basic hygiene and sanitation promotion	90
# of safe water demonstrations	24
#of families that received purification tabs for 1 month treatment	1,000

### Priority Actions

1. Training of volunteers for basic hygiene and sanitation promotion will be done simultaneously during training on health topics.
2. Safe water storage and treatment demonstrations will be done during each community health & hygiene promotion visit (1 per week for 2 months in 3 provinces).
3. The cash provided covers the essential WASH material and communities will be sensitized on the importance of these items to meet their WASH needs. Especially for items such as at least 1 bucket with lid (20L), 1 Washing powder 2kg, 4 bars of soaps, 3 toothpaste, 5 toothbrushes, Water-purifier tables, Pack of hygiene pads.
4. Aqua-tab distribution to 1,000HHs for 30 days with emphasis on the continuity by providing information on where to get the



purification tabs, community water purification techniques (traditional and with purification tabs).

The activities under WASH will be performed at the same time as activities under Health section of the DREF through integration of activities.



## Protection, Gender And Inclusion

**Budget:** CHF 0

**Targeted Persons:** 105

### Indicators

Title	Target
# of staff and volunteers trained in beneficiary selection criteria to meet the most vulnerable	105
# of staff and volunteers briefed on PGI and PSEA concepts	105
# of volunteers who have signed the code of conduct	90

### Priority Actions

1. Conduct training on beneficiary selection and processes with the integration of sectorial activities ensuring access and safety of the most vulnerable and marginalized, attended by NS staff and volunteers.
  2. Ensure that sex-age data will be documented with selection criteria including those with disabilities.
  3. Ensure all volunteers are briefed on PGI and PSEA concepts and fully implement in the daily activities, and during the awareness campaign, those topics will be covered by the volunteers.
- All briefings cost will be integrated under NSS.

## About Support Services

### How many staff and volunteers will be involved in this operation. Briefly describe their role.

The operation will engage 90 NS & volunteers in the various locations to support with planned activities in the 3 provinces.

### Will surge personnel be deployed? Please provide the role profile needed.

Surge personnel will be required in the areas: Operations Management for initial 2 months.

Adjustment on support needed will be revised depending on the main recommendations after the detailed assessment.

### If there is procurement, will it be done by National Society or IFRC?

The NS opted for most of the assistance to go for Cash-based intervention since that this has been found as a more cost-effective than in-kind assistance due to reduced operational costs associated with procurement, warehousing, and transportation, plus the fact that roads are damaged due to the rainfall resulting in difficulty in placing trucks in communities to transfer products, which may cause delays in aiding the people in need. Another advantage for adopting cash is that the NS is cash ready and has just concluded the implementation of CTP in the provinces of Huila and Cunene. The NS also has staff and volunteers well prepared to replicate the knowledge in the other provinces.

For remaining procurement, IFRC will lead the procurement process of the Hygiene Kits, and other procurement will be done by the National Society.

## How will this operation be monitored?

The IFRC Maputo country cluster delegation with the support from the regional office, will work in coordination with the National Society and provide support in the monitoring of the response. IFRC is able to conduct coordinated monitoring visits with key stakeholders. The monitoring process will focus on adherence to minimum standards in humanitarian service delivery, compliance to humanitarian principles guiding the Movement's humanitarian operations, timeliness in the delivery of supplies and services to beneficiaries, management of supplies during storage, accuracy, completeness, and timeliness of reporting among others.

## Please briefly explain the National Societies communication strategy for this operation

The National Society's communication strategy for this flood response operation includes use of social media platforms and updates to the organization's websites. These digital channels will serve as essential tools for real-time information sharing, community engagement, and resource mobilization.

The IFRC will provide crucial support through the communication team and will work closely with the National Society's communication team to optimize the use of social media platforms such as Facebook, Twitter, and Instagram. This collaboration will involve crafting impactful social media messages, sharing updates on relief efforts, and actively responding to community inquiries and feedback.

# Budget Overview



## DREF OPERATION

### MDRAO008 - Angolan Red Cross Floods

#### Operating Budget

Planned Operations		123,786
Shelter and Basic Household Items		997
Livelihoods		0
Multi-purpose Cash		97,441
Health		5,848
Water, Sanitation & Hygiene		18,049
Protection, Gender and Inclusion		0
Education		0
Migration		0
Risk Reduction, Climate Adaptation and Recovery		0
Community Engagement and Accountability		1,451
Environmental Sustainability		0
Enabling Approaches		76,437
Coordination and Partnerships		0
Secretariat Services		24,690
National Society Strengthening		51,747
TOTAL BUDGET		200,224

*all amounts in Swiss Francs (CHF)*

# Contact Information

For further information, specifically related to this operation please contact:

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**IFRC Appeal Manager:** Naemi HEITA, Head of Delegation, Maputo Office, naemi.heita@ifrc.org

**IFRC Project Manager:** Rachel Fowler, Operation Manager, rachel.fowler@ifrc.org

**IFRC focal point for the emergency:** Rachel Fowler, Operation Manager, rachel.fowler@ifrc.org

**Media Contact:** Edgardo Ricardo Junior, Partnership and Communication Officer, edgardo.ricardo@ifrc.org, +258847005033

[Click here for the reference](#)