



angola

The ICRC has been present in Angola since 1975, from the start of the conflict that devastated the economy and left civilians dependent on humanitarian aid. Following the Luena peace agreement in April 2002, a certain degree of normality returned, although the presence of landmines and ERW remains a major problem. The ICRC, supported by the Angola Red Cross Society, operates a tracing network to enable family members still separated by the conflict to re-establish links. It also works with the National Society to reduce the impact of mines and ERW. The delegation supports the Sao Tome and Principe Red Cross in developing its activities.

EXPENDITURE IN CHF

Protection	7,368,482
Assistance	6,709,180
Preventive action	2,146,148
Cooperation with National Societies	842,724
General	-
	▶ 17,066,535
	of which: Overheads 1,041,620

PERSONNEL

35 expatriates
302 national staff

KEY POINTS IN 2004

- ▶ The ICRC relayed some 50,000 RCMs between returnees and their relatives and reunited over 100 children with their families.
- ▶ The ICRC and the Angolan Red Cross worked with communities to identify areas affected by ERW, passing the information on to mine-clearance agencies and alerting civilians to the dangers.
- ▶ The ICRC supported three physical rehabilitation centres, which provided free services to amputees (mostly mine victims) and produced some 1,700 prostheses and orthoses.
- ▶ The ICRC supplied 6 health posts with supplementary medicines and medical materials; it rehabilitated the structure of one of them and built two new water points; it supported national schemes to train birth attendants and to prevent malaria.
- ▶ The ICRC built or rehabilitated 128 springs supplying water to over 130,000 returnees in the rural Planalto region and trained village water committees to maintain them.
- ▶ The ICRC encouraged the government to take tangible measures to implement the Ottawa Convention – which it had ratified in 2002 – including finalizing national legislation.

CONTEXT

In 2004, two years after the end of the 27-year conflict, dates were set for legislative and presidential elections (2006 and 2007 respectively) by the ruling Popular Movement for the Liberation of Angola (MPLA). The government said that before the elections took place, it would like a new constitution and electoral law approved by the National Assembly and a national census carried out. The opposition was keen to have a law on TV and radio coverage modified.

The former armed opposition, the National Union for the Total Independence of Angola (UNITA), struggled to transform itself into a political opposition party. Meanwhile, its demobilized fighters were awaiting reintegration into society and financial support. Former members of the Angolan Armed Forces (FAA), by contrast, were not demobilized as agreed under the Luena Accord.

In the disputed enclave of Cabinda, the government maintained a heavy military presence (since 2002), to flush out and prevent sporadic attacks by the Front for the Liberation of the Cabinda Enclave (FLEC). Several arrests took place of civilians seen as sympathetic to the separatists.

Much of the country's economic growth was linked to increased oil production and the high price of oil. There was little investment in livestock farming, agriculture or manufacturing. As major donors began cutting back contributions to relief operations, Angola failed to gain their support for significant development assistance,

falling short of their requirements for economic reform and financial transparency.

Some 52,000 Angolan refugees were voluntarily repatriated by UNHCR to transit camps in Angola. Over a quarter of a million refugees had returned to Angola since the end of the conflict in 2002, while an estimated 170,000 were still in the Democratic Republic of the Congo (DRC), Zambia, Namibia, Republic of the Congo, Botswana and South Africa. Conditions in Angola were difficult for both returnees and residents. Provincial water departments and health posts/hospitals had limited means to cover needs. Only a small portion of the government's budget was allocated to social services.

Angola remained the country in Africa worst affected by mines. A number of national and international organizations had conducted mine-clearance activities over the previous ten years, but large areas remained contaminated. In 2004 the government's National Intersectoral Commission for Demining and Humanitarian Assistance to Mine Victims (CNIDAH), with the support of the United Nations Development Programme, drafted demining plans, which it intended to submit to donors in 2005. Despite underlining its willingness to meet the deadlines for demining and destruction of its stockpiles under the terms of the 1997 Ottawa Convention on the Prohibition of Anti-Personnel Mines, the government had yet to finalize national legislation implementing the Convention.

ICRC ACTION

The ICRC continued its family-links programme for Angolan returnees, particularly for children separated from their parents. In 2004 the number of Red Cross messages (RCMs) relayed and families reunited remained significant but lower than in previous years, as more people returned home or resettled.

The ICRC worked with the Angolan Red Cross to restructure the tracing network and make it more efficient. It also advised the National Society on how to reform its internal processes and improve its operational capacity generally.

As part of its protection work, the ICRC continued to ensure that the treatment and living conditions of detainees in Cabinda complied with international standards. It visited places of detention and recommended improvements where necessary. The RCM service was made available to detainees visited.

Mine-risk education was a key priority. With the help of the Angolan Red Cross, the ICRC conducted a number of mine-awareness sessions for returnees. It also gathered information from villagers on the location of mines and passed it on to the authorities and demining organizations, encouraging them to clear or mark the areas.

The ICRC, which for several decades (on and off depending on the conflict) had helped to improve water supply in Angola, continued to rehabilitate or construct spring catchments in rural areas. It provided health posts with medicines and medical materials and trained Ministry of Health staff, but began phasing out this support.

To promote international humanitarian law (IHL), the ICRC extended its network of contacts among the relevant government ministries to ensure that all the major IHL treaties were adopted and implemented (in particular the Ottawa Convention). It held regular exchanges with the president's legal adviser, relations with whom were established following years of patient negotiation.

CIVILIANS

Protecting civilians

The ICRC maintained regular contacts with the civilian authorities in Cabinda to discuss the humanitarian situation in the enclave and to familiarize them with the ICRC and its mandate. It also held information

sessions for the local inhabitants and gathered allegations of ill-treatment of civilians by weapon bearers. It urged the authorities to ensure respect for civilians.

The ICRC and the Angolan Red Cross identified areas where mines and explosive remnants of war (ERW) posed a danger to returnees and residents. They submitted the information to the CNIDAH to be included in a national action plan and began mine-risk activities for civilians in the worst-affected areas, such as Bié and Benguela.

Restoring family links

The ICRC and the Angolan Red Cross relayed tens of thousands of RCMs during the year, mostly for returnees wishing to maintain family links. They restructured the tracing network to reflect changing needs and to avoid dangerous areas, leading to the closure of some posts.

In cooperation with the Ministry of Social Assistance and Reintegration (MINARS), the ICRC and the Angolan Red Cross monitored the welfare of children separated from their parents, reuniting them with their families wherever possible. Cases of children in areas where posts were being closed were dealt with as a priority. The ICRC and the National Society also traced the relatives of vulnerable adults – the elderly or disabled, widows or abandoned women – left in the vicinity of UNITA quartering areas or in former transit camps for internally displaced people (IDPs).

As part of its tracing activities, the ICRC compiled and distributed the third edition of the *Gazette* listing some 13,000 people being sought by their relatives. Radio stations in several provinces were encouraged to broadcast regularly the names on the list. A fourth edition of the *Gazette* was in progress.

- 47,295 RCMs collected and 52,232 delivered
- 214 new cases of children separated from their parents registered, including 2 former child soldiers
- 107 children, including 1 child soldier, reunited with their families; each child given a kit consisting of clothing, hygiene items, a blanket and one-month's food ration
- 397 tracing cases involving children, including 9 demobilized child soldiers, pending
- 19 vulnerable women registered; 4 vulnerable women reunited with their families within Angola and 2 repatriated to Namibia

- 6,795 tracing requests received for publication in the *Gazette*, 312 cases resolved; 18,115 cases pending

Protecting foreign ex-fighters

The ICRC continued to monitor the situation of some 400 former Congolese and Rwandan fighters (and some 300 of their dependants) who were awaiting repatriation. It sought to elicit a decision on their fate from the authorities and to prevent them from being expelled along with other foreigners suspected of exploiting Angola's resources. At the end of the year there was no change in the situation, although 18 of the fighters had left the country of their own accord.

Improving water and habitat

The ICRC continued to rehabilitate or construct spring catchments and handed some over to the local authorities. At the same time it carried out an assessment to find an organization capable of taking over the maintenance of all the springs it had built or rehabilitated since 2000 and trained village water committees to maintain them.

As a temporary measure, the ICRC built a clean-water system and latrines at Huambo transit centre for some 10,000 Angolan returnees based there from September to December. The system was dismantled after their departure and the centre closed.

- 128 springs constructed or rehabilitated in Bié and Huambo provinces
- 132,600 returnees provided with access to clean water in their villages of origin
- water stocks maintained to cover the needs of 3,000 people in the event of an emergency
- 327,000 litres of clean water provided to returnees at a transit centre in Huambo

PEOPLE DEPRIVED OF THEIR FREEDOM

Activities for detainees

The ICRC continued to monitor the living conditions and treatment of security detainees in Cabinda, urging the authorities to make improvements where necessary. It also offered its RCM service to the detainees.

- 6 visits to 2 places of detention carried out
- 5 detainees registered and visited for the first time in Cabinda
- 6 detainees in total being individually monitored at the end of the year

WOUNDED AND SICK

Supporting primary health care

The ICRC continued to support six health posts, providing them with supplementary medical supplies and regular supervision (including on-the-spot training) until the end of December. To ensure a smooth handover of this programme, the ICRC made a last donation of medicines and medical materials to cover the first few months of 2005. The ICRC received assurances from the Ministry of Health that it would cover these provisions in future. Other humanitarian organizations such as Médecins Sans Frontières Spain and an Italian non-governmental organization, Intersos, arranged to supervise the posts in 2005.

In 2004 the ICRC made some ad hoc donations of medical supplies to Lubango referral hospital and the paediatric ward of Huambo hospital, but did not provide the regular assistance of previous years. After rehabilitating the structure of the Catholic mission health post (serving 3,000 people) and building new water points at the mission and the Colui health post, the ICRC handed over responsibility for these projects to the authorities.

In close collaboration with the Huila provincial health department, the ICRC distributed impregnated mosquito nets to hundreds of families who had a pregnant woman or child of less than five years old (the most vulnerable groups) in their midst. Whilst distributing the nets, it provided the families with information on malaria prevention.

Along with UNICEF, the ICRC assisted the Ministry of Health in Huila province in carrying out a national measles immunization campaign. It also supported the ministry in training traditional birth attendants in safe child delivery.

- ▶ 6 health posts (covering 52,000 people in Huila province) provided with medicines and medical materials; three-month ad hoc supplies provided to 2 hospitals
- ▶ 1 of these health posts (Catholic mission in Missao) rehabilitated; two new wells with hand pumps constructed at the mission and Colui health post (rehabilitated by the ICRC in 2003)
- ▶ 4,500 families in Dongo commune (Huila) given impregnated mosquito nets

- ▶ logistical support (transport of measles vaccines and vaccinators) provided to the Expanded Programme on Immunization
- ▶ 30 traditional birth attendants in Galangue commune (Kuvango municipality) given six days' training and a medicine kit to assist in child delivery

Assisting amputees and other disabled people

The ICRC continued to support three physical rehabilitation centres. Working closely with the National Programme for Rehabilitation, it provided technical assistance, equipment and on-the-job prosthetics and management training, supplemented staff salaries and reimbursed patients' transport costs. It screened potential beneficiaries at the transit centre in Huambo and flew in amputees from Cabinda and Uige. In December it withdrew its aircraft used for this purpose, informing the authorities that alternative transport arrangements would need to be made for amputees in future.

- ▶ 1,627 prostheses delivered, including 1,229 for mine victims
- ▶ 474 new patients fitted with prostheses
- ▶ 125 orthoses delivered, 81 new patients fitted with orthoses
- ▶ 249 wheelchairs and 6,159 crutches (units) delivered
- ▶ 4 technicians sponsored to attend training courses
- ▶ in 24 years, 29,527 prostheses provided for amputees (65% for mine victims)

AUTHORITIES

Promoting accession to IHL treaties, dissemination

With the political establishment focused on the upcoming elections and the drafting of a new constitution, little attention was paid to the ratification of IHL treaties. The ICRC was nonetheless granted regular meetings with the president's legal adviser to discuss this and other issues. It also held various information sessions for government representatives at the start of the year and sponsored two officials to attend a pan-African IHL seminar in Pretoria.

The ICRC set particular store by the adoption by Angola of national legislation implementing the Ottawa Convention. The government sent a low-level delegation to the Nairobi Summit for a Mine-Free World (see *Nairobi*). However, it did express

willingness to meet its obligations under the treaty within the given timeframe.

The ICRC held regular information sessions on IHL for community, political and religious leaders, traditional authorities, teachers and NGOs in various provinces.

- ▶ 3,415 community and political leaders, traditional authorities, religious leaders, health authorities, teachers and NGO representatives attended dissemination sessions
- ▶ some 4,900 members of the public took part in dissemination sessions

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Promoting IHL among the armed forces/police

During the year the minister of defence expressed interest in ICRC proposals to integrate IHL into military instruction, although no formal directive was issued.

The ICRC held information sessions on IHL/human rights standards and humanitarian principles for the armed and police forces throughout the year.

- ▶ 4,198 officers and troops attended IHL dissemination sessions
- ▶ 135 FAA instructors attended IHL dissemination sessions
- ▶ 1,034 members of the police force attended sessions on IHL/human rights standards

CIVIL SOCIETY

Reaching the general public

To elicit support for its activities, the ICRC nurtured its contacts with the various media organizations. It regularly sent out press releases and newsletters and gave interviews when requested. The media in turn often referred to the ICRC and its activities and broadcast information on mines or lists of missing persons.

The ICRC supported a proposal made by the British Red Cross to the British Broadcasting Corporation (BBC) to film stories on tracing activities for a fundraising appeal. The programmes shown in the United Kingdom prompted a good response, and all funds raised were channelled into the ICRC's Angola Emergency Appeal. BBC Radio Four, a UK-based news and current affairs station, also produced a 30-minute programme on tracing activities in Angola.

NATIONAL SOCIETY

Developing the capacity of the National Society

With the International Federation of Red Cross and Red Crescent Societies, the ICRC held meetings with the Angolan Red Cross on the reform of its internal processes and the creation of provincial assemblies. It also provided guidance on the level of financial support that the provincial assemblies could expect from the ICRC and the International Federation. The transport costs of branch representatives attending training or assembly meetings were covered.

The ICRC provided staff training to strengthen the operational capacities of the National Society. Training for the Huambo branch in particular enabled it to carry out relief programmes in February in partnership with the World Food Programme (WFP).

In conjunction with the Sao Tome and Principe Red Cross, the ICRC constructed one washing facility and two water sources in the district of Cantagalo and installed a water source and fountain in Mé-Zochi.

Restoring family links

The ICRC provided 10 Angolan Red Cross provincial branches with equipment and tools to enable them to work more independently and to enhance tracing activities. As a result, there was a general improvement in the way the National Society processed tracing cases, followed up on children separated from their parents and supported the ICRC's efforts to reunite families.

The ICRC worked with the Angolan Red Cross to restructure the tracing network and increase its efficiency. By the end of the year 46 posts were closed – mainly owing to access problems caused by mines but also to lower demand for the service – and others were reinforced at transit centres, at other key gathering points and at Red Cross offices. The ICRC trained provincial tracing coordinators, particularly in the Safer Access approach (see *glossary*), and set up selection processes to improve the recruitment of staff and follow-up of tracing activities.

Developing mine-action capacity

During the year dozens of people were killed or injured by mines. Most of them had been collecting fruit or farming, or were children tampering with ERW. Red Cross volunteers made dozens of visits to the affected communities to gather information on incidents and to promote the

precautions to be taken. The information gathered was passed on to the CNIDAH to be incorporated into its national mine-action plan.

The ICRC sponsored an Angolan Red Cross national coordinator to participate in the annual ICRC mine action workshop in Sweden in June to increase the National Society's understanding of the International Red Cross and Red Crescent Movement's approach to mine action. An ICRC delegate went to Lusaka (Zambia) and Kinshasa (DRC) to strengthen the coordination of mine action activities in the region for Angolan refugees.

During the year the delegation held a series of mine-risk education seminars for the benefit of dozens of Angolan Red Cross volunteers in the provinces of Benguela and Bié. This included a three-day train-the-trainer workshop in October for provincial branches to help them build teams of mine-action instructors who could train volunteers in affected villages and additional Red Cross volunteers (according to needs). In November and December 38 Red Cross volunteers were given training in processing mine-incident forms.

- 400 communities visited by volunteers in areas affected by mines, and nearly 1,000 sessions on the dangers of mines held for some 16,000 people
- some 14,000 children attended Angolan Red Cross theatre performances, dances and puppet shows on the dangers of mines
- 30 seasonal calendars produced for use as tools for discussion on mine-related issues in affected communities and to help them identify people at risk; 30 maze games printed for children illustrating behaviour that could endanger them
- car stickers produced and distributed in support of a CNIDAH campaign to reduce road-related mine incidents