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USAID/ANGOLA

HUMANITARIAN FIELD OFFICER

SUMMARY OF ACTIVITIES

FINAL REPORT FOR PPC/CDIE/DI

Contractor and author's name Kimberly Smith
Contract #654-0000-S-00-7045-00
Name of AID Project Office USAID/Angola
Date of Final Report June 12, 1998

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Under Contract #654-0000-S-00-7045-00, I served as USAID/Angola's Humanitarian Field Officer (HFO), October 10, 1997 until June 12, 1998, a position co-funded by USAID/Angola and USAID's Bureau of Humanitarian Response, Office of Foreign Disaster Assistance (BHR/OFDA). The scope of work for the HFO position encompassed a broad spectrum of duties (see Attachment 1). However, the main responsibilities centered on assessing a wide range of humanitarian conditions throughout Angola and evaluating USAID/Angola humanitarian response programs. Given my experience in Angola as Emergency Disaster Response Coordinator for BHR/OFDA, August 1995 to June 1997, much of my work as HFO focused on monitoring the emergency response programs supported by BHR/OFDA.

A large portion of my work as HFO involved meeting with the BHR/OFDA-supported grantees and evaluating their programs throughout Angola. I reviewed new project proposals and requests for amendments and extensions to existing grants to ensure compliance with USAID guidelines. Working closely with the other members of USAID/Angola's Relief to Rehabilitation Strategic Objective Team (SO#1), I provided comments and recommendations to USAID/Angola and BHR/OFDA on programmatic and budgetary issues and worked closely with the grantees as their grants were finalized or their programs were completed.

In addition to monitoring the BHR/OFDA programs, I worked with the other SO#1 team members on issues and activities relative to the SO, including the development of a child survival strategy, as well as general activities such as overall grant management, reporting on the humanitarian situation, participation in humanitarian coordination meetings, security meetings and sector specific meetings as necessary. I also supported the visit of a number of representatives of the U.S. Government from Washington, arranging their travel to review USAID-supported activities throughout the country and their meetings with members of the Government of Angola, other donors, and representatives of the humanitarian community in Luanda.

Together with the SO#1 team and the other USAID/Angola representatives, I assisted in writing the Results Review and Resource Request (R4) for FY 1999. Some of the major achievements of USAID funding to Angola in 1997 were a direct result of the USG's humanitarian program in Angola. Overall, the achievement of SO#1 was rated as fully successful -- the majority of USAID-supported programs under SO#1 surpassed their planned results. To cite a few examples, USAID-supported program administered

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vaccinations to 870,000 children and women of childbearing age, 2,300 adults from the civil society were trained to provide clinical and occupational therapy to 71,000 traumatized children, the demobilization of the quartered former UNITA troops was completed, food crop self-reliance was improved in many areas as more than 340,000 people were able to be phased-off USAID-funded general distributions, and 668 village and agricultural infrastructure rehabilitation projects were completed

In response to a reduced need for emergency interventions in Angola, the BHR/OFDA portfolio gradually decreased to approximately USD 800,000 (with an additional USD one million pending) in the first three quarters of fiscal year (FY) 1998, compared to USD 12.7 million in FY97 and USD 15.8 million in FY96 (See Attachment 2 for an overview of the BHR/OFDA program for Angola as of June 12, 1998, the completion date of my contract)

However, in general terms, progress in the political landscape in 1997 did not meet expectations which limited USAID's ability to achieve all of its planned results. The UN Department of Humanitarian Affairs reported that although approximately 60,000 internally displaced persons resettled in 1997, 1.2 million Angolans remain displaced, and increasing insecurity in certain areas of the country, such as Huila, Benguela and Lunda Norte provinces, caused the displacement of new groups of people who previously had not required assistance. The heightened insecurity in certain areas has restricted the humanitarian community's access to monitor the needs of its current beneficiaries and potentially vulnerable populations.

In addition, reports of landmine accidents have begun to rise and some believe many of the new accidents are due to newly-laid mines. This situation has further complicated Angola's history of more than three decades of almost constant internal conflict and one of the world's most serious landmine problems. In human terms this history has translated into more than 70,000 amputees, the majority of whom are women and children. USAID began supporting demining programs in FY95, and in 1997 alone, USAID-funded mine action programs increased farmer's access to more than 6,100 hectares of arable land and rehabilitated 900 landmine survivors through prosthetic and orthopedic programs. However, while USAID-funded mine awareness programs have saved hundreds of lives and prevented needless mutilation, increased reports of re-mining are undermining many of the successes achieved so far.

These and other similar issues were taken into consideration as USAID/Angola drafted its Strategy Update for the period FY98-2001. While there is consensus within USAID that emergency programs supported in Angola should continue to phase-down through the end of FY98, emergency needs in Angola should continually be re-evaluated. The peace process in Angola has moved more slowly than originally expected, and it is known for taking more than one step backward before a half-step forward. Many representatives of the humanitarian response community, as well as Angolans themselves, often question the stability of the gains made so far. Although it was anticipated that the country would witness some small-scale unrest and increased lawlessness and banditry as the unified

government extended state administration to areas formerly under UNITA control and the U N peacekeeping forces scaled down to a small observer mission, concentrated areas of fighting have spread over the past few months, calling into question the viability of Angola's long road to peace

During my work in Angola as HFO, I was part of a strong effort to link the different offices within USAID into one strategy for Angola, taking in account the unique perspective offered by each office I think the result was successful Angola has proven to be fertile ground for linking emergency interventions and transitional rehabilitative programs within one USAID program The future will continue to call on the different offices of USAID to collaborate and coordinate efforts in order to leverage potentially reduce funds from the USG for a country that is far from being on a sound road to recovery

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ATTACHMENT 1 SCOPE OF WORK

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USAID/AFR Included in USAID/BHR/OFDA's phase-out was the removal of its Emergency Disaster Relief Coordinator (EDRC) in Luanda, a presence since 1991. However, due to continued insecurity and the slow implementation of the Lusaka Protocol, there are residual humanitarian needs that require a short term humanitarian presence while the Mission focuses on the more long-term objectives.

B STATEMENT OF WORK

The primary duties of the Humanitarian Field Officer (HFO) include assessing a broad spectrum of the humanitarian conditions throughout Angola, reporting regularly to USAID/Luanda, SO#1 Team Leader and evaluating USAID humanitarian response programs.

The Contractor shall perform but not be limited to the following:

- 1 Visit USAID humanitarian assistance projects on a regular basis. Report on the implementation of USAID-funded NGOs' projects, implementation, completion of objectives, difficulties, accomplishments, etc.
- 2 Liaise with relief personnel in Angola to track humanitarian issues relevant to USG policy-makers, i.e., numbers and locations of displaced populations, geographic locations and status of NGO and UN relief activities, etc.
- 3 Assist USAID with liaison in Angola with UN agencies and the UN coordinating body, UCAH regarding humanitarian issues.
- 4 Review project proposals from NGOs, IOs and UN agencies, ensuring compliance with Guidelines and provide timely recommendations/comments to USAID on programmatic and budgetary issues via cable.
- 5 Periodically review each USAID-funded grant and make recommendations concerning amendments to program activities.
- 6 Represent the USG humanitarian interests at national and international meetings and conferences, as requested by supervisors.

7 When called upon, facilitate the travel for and brief official visitors to Angola

8 As directed by Supervisor, Coordinate and analyze with other donor senior representatives, UN agencies, NGOs/PVOs and local authorities assessment reports

9 As scheduled by Supervisors, Coordinate with the donor community to develop integrated programs

10 Close-out terminating OFDA activities in conformance with Agency regulations and procedures

11 Perform other related duties as assigned

C REPORTS

The Contractor shall prepare a final report summarizing activities and assessing accomplishments made during the contract period

ARTICLE II - PERIOD OF SERVICES OVERSEAS

Within 3 days after written notice of contract award from the Contracting Officer, and required clearances, including the doctor's certification required under General Provision 3, have been obtained, or unless another date is specified by the Contracting Officer, in writing, the Contractor shall provide approximately six months of service based in, Luanda, Angola, commencing on or about October 9 and ending on or about April 10, 1998. The Contractor's workweek will coincide with that of the USAID/Almaty, 40 hours per week

ARTICLE III - CONTRACTOR'S COMPENSATION AND REIMBURSEMENT IN U S DOLLARS

A Except to the extent reimbursement thereof is payable in the currency of the cooperating country pursuant to Article IV, AID shall pay the contractor compensation after it has accrued and reimburse him or her in U S dollars for necessary and reasonable costs actually

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ATTACHMENT 2 USAID/BHR/OFDA PROGRAM OVERVIEW

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USAID/BHR/OFDA/ANGOLA

Program Overview (as of June 12, 1998)

For more than the past nine years, USAID's Bureau for Humanitarian Response, Office of Foreign Disaster Assistance (USAID/BHR/OFDA) has been one of the major international donors supporting humanitarian efforts in Angola. Since fiscal year (FY) 1989, when USAID/BHR/OFDA began its emergency relief program in Angola, it has provided more than \$120 million to support life-saving humanitarian operations.

USAID/BHR/OFDA/ANGOLA Humanitarian Assistance Programs (FY 1989-98 to date)

FY 1989 (Civil Strife)	\$237,280
FY 1990 (Civil Strife)	\$4,188,402
FY 1991 (Civil Strife)	\$13,055,012
FY 1992 (Drought and Civil Strife)	\$14,197,077
FY 1993 (Displaced Persons)	\$12,419,001
FY 1994 (Civil Strife)	\$19,367,530
FY 1995 (Displaced Persons)	\$28,478,350
FY 1996 (Complex Emergency)	\$15,781,755
FY 1997 (Complex Emergency)	\$12,680,780
FY 1998 to date (Complex Emergency)	\$792,459
Total Assistance to date	\$122,603,754
FY 1998 Pending	\$983,802

USAID/BHR/OFDA's grant portfolio currently consists of programs that target children, vulnerable groups, internally displaced persons, quartered/demobilized former soldiers, war-affected residents and resettling families in the areas most affected by the war in the provinces of Bengo, Benguela, Bie, Huambo, Kwanza Sul and Cuando Cubango.

In FY 1998, USAID/BHR/OFDA intends to continue the phase-out of its emergency relief programs, focusing on the resettlement of displaced populations, emergency nutrition, basic health care, and humanitarian coordination.

USAID/BHR/OFDA's current implementing partners include five NGOs: Africare, Catholic Relief Services, International Medical Corps, Medecins Sans Frontieres/Belgium, Medecins Sans Frontieres/France, and three U N agencies: UNICEF, World Food Program, and U N Department of Humanitarian Affairs.

Attached is an overview of the current USAID/BHR/OFDA portfolio for Angola, separated into three main categories: 1) Emergency Feeding, Community Resettlement and Rehabilitation, 2) Emergency Nutrition and Basic Health Care, and 3) Humanitarian Coordination and Logistics.

I EMERGENCY FEEDING, COMMUNITY RESETTLEMENT & REHABILITATION

PVO **Catholic Relief Services**
Grant # AOT-G-00-94-00144-05
Period of Grant 25 July 1994 - 30 June 1998
Current Area of Activity Benguela Province
Total OFDA Funding to date \$8,854,209
Pending FY98 Funding Zero

Current Description Emergency food distributions to displaced and war-affected populations, resettlement activities including the distribution of seeds, tools, supplementary food, and food-for-work, support to health posts, nutritional surveillance in program areas and supplementary feeding to vulnerable groups

II EMERGENCY NUTRITION AND BASIC HEALTH CARE

(Also see health activities included in CRS listed under category I above)

PVO **Medecins Sans Frontieres/France**
Grant # AOT-1008-G-00-4193-00
Period of Grant 1 September 1994 - 30 June 1998
Current Area of Activity Benguela Province
Total OFDA Funding to date \$3,550,400
Pending FY98 Funding Zero

Current Description Therapeutic and supplemental feeding, nutritional surveillance, and basic health care services to populations in Cubal and outlying areas

PVO **Medecins Sans Frontieres/Belgium**
Grant # AOT-G-00-97-00230-00
Period of Grant 1 February 1997 - 31 August, 1998
Current Area of Activity Bie Province
Total OFDA Funding to date \$242,190
Pending FY98 Funding \$285,200 in contracts

Current Description Therapeutic and supplemental feeding and nutritional surveillance

PVO **Africare**
Grant # AOT-G-00-95-00189-00
Period of Grant 14 August 1995 - 31 August, 1998
Current Area of Activity Kwanza Sul and Bie provinces
Total OFDA Funding to date \$4,636,473
Pending FY98 Funding Zero

Current Description Mass vaccination campaigns to immunize children under five years of age against the major preventable childhood diseases [This grant previously included the distribution of seeds and tools to improve food security in remote areas, and the provision of humanitarian assistance at quartering areas in Bie and Zaire provinces However, these activities have been completed]

PVO	International Medical Corps
<i>Grant #</i>	AOT-G-00-95-00089-00
<i>Period of Grant</i>	28 February 1995 - 31 March 1998
<i>Current Area of Activity</i>	Kwanza Sul and Huambo provinces
<i>Total OFDA Funding to date (FY98)</i>	\$7,211,335 (\$792,459)
<i>Pending FY98 Funding</i>	\$698,602 in contracts

Current Description Training-of-trainers programs for immunization and maternal-child health care services Supervision of mass vaccination campaigns and TBAs

U N Agency	UNICEF
<i>Grant #</i>	AOT-G-00-97-00242-00
<i>Period of Grant</i>	1 October 97 - 15 June 1998
<i>Current Area of Activity</i>	country-wide
<i>Total OFDA Funding to date</i>	\$2,880,000
<i>Pending FY98 Funding</i>	Zero

Current Description Provision of vaccines and vaccination materials to support USAID/BHR/OFDA-funded NGOs implementing EPI programs

III HUMANITARIAN COORDINATION AND LOGISTICS

U N Agency	UNDHA Humanitarian Assistance Coordination Unit
<i>Grant #</i>	AOT-G-00-95-00175-00
<i>Period of Grant</i>	14 August 1995 - 30 June 1998
<i>Current Area of Activity</i>	Luanda, country-wide
<i>Total OFDA Funding to date (FY98)</i>	\$1,250,167 (\$500,000)
<i>Pending FY98 Funding</i>	Zero

Current Description General humanitarian coordination, Field Coordination, IDP Monitoring, and the Information and Logistics Units

U N Agency	World Food Program
<i>Grant #</i>	AOT-1008-G-00-5113-00
<i>Period of Grant</i>	23 June 1994 - 31 July 1998
<i>Current Area of Activity</i>	country-wide
<i>Total OFDA Funding to date (FY 98)</i>	\$6,000,000 (\$1,000,000)
<i>Pending FY98 Funding</i>	Zero

Current Description Light-aircraft operations and non-food item transport to support humanitarian activities country-wide