ANNUAL REPORT 2023
World Health Organization in Angola: Accelerating movement to Health for All
Executive Summary

The year 2023 was important for health and well-being in Angola. In his State of the Nation address on 16th October 2023, the President of Angola, João Manuel Gonçalves Lourenço GColIH highlighted the significant investments made in health by the country, with an overall goal of accelerated enhancement of capacity to provide needed essential services for every person in Angola. The WHO in Angola was aligned with this vision and prioritized actions that would facilitate its attainment, within the context of the WHO’s own results framework.

Strategically, WHO in Angola completed its 5-year cooperation strategy with Angola, which provides a blueprint of how it will support the health sector in Angola to attain its strategic objectives. These are defined in the areas of strengthening health systems, facilitating integrated care, disease prevention and control, health security, and ensuring well-being through healthier populations.

Specific achievements were made in the area of Universal Health Coverage. In HIV, the Dolutegravir treatment protocol was adopted, and a study of mother-to-child HIV transmission to better target the services initiated. A “Zero Malaria Starts with Me” campaign was rolled out, to maintain the push toward malaria control. The country also agreed on a new Tuberculosis control strategy, to accelerate better TB intervention coverage and uptake. Services targeting Neglected Tropical Diseases, such as Guinea worm were expanded across the country. In recognition of the growing non-communicable disease threat, the development of an NCD control strategy was initiated, and the hospital’s capacity to respond to the increasing burden was significantly expanded.

In the area of maternal health, the specific focus was on the re-vitalization of the integrated management of childhood illnesses (IMCI) initiative as a means for coordinated and comprehensive services for children. Support to the monitoring of maternal and perinatal deaths was also provided. Efforts towards MNT elimination were also enhanced, and a strategic plan was developed. A program to reduce the number of children who have not received any vaccinations (zero dose campaign) was also started, which should improve the overall childhood vaccination status. Two rounds of a national polio vaccination campaign were successfully conducted during the year, together with efforts to enhance the polio surveillance capacity.

In the area of health emergencies, the country was at the end of the COVID-19 pandemic. However, vaccination for COVID-19 continued with WHO support. In addition, the country conducted a COVID-19 Acter Action review to document lessons with the pandemic response. A Joint External Evaluation exercise was also conducted which highlighted the status of the health security capacity in the country. Specifically, infection prevention and control initiatives were supported as part of improving the overall quality of care provided to the people of Angola.

Finally, engagements were made in the area of well-being to improve healthy cities and road safety, particularly in collaboration with the Luanda province, which is the most densely populated part of the country.

The year presented several opportunities for greater collaboration with the Government and the health partners, which will lead to marked improvements in health and well-being in the medium to long term. By the end of 2023, the health sector was in a better place, and ready to play its role as stipulated in the National Development Plan of the country.
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Preface

As we present WHO Angola Report 2023, it allows us to reflect on the past year’s achievements and look forward to improving the health and well-being of the Angolan people. In 2023, we worked with the Government of Angola to fortify the nation’s health system and ensure that every Angolan family has access to high-quality health services.

This edition offers an overview of the key initiatives undertaken by WHO in support of Angola’s health sector. Our efforts were channeled into three main programmes: Universal Health Coverage, Health Emergencies, Health Well-being, which make up WHO’s 3 Billion target to improve the health of billions by 2025.

The year 2023 stands as a testament to the solid results we have achieved. Yet, it is not the end, but a stepping stone towards our goal of Universal Health Coverage. This aim calls for the involvement of civil society, both the public and private sectors. Together, we strive to enhance routine vaccination services, expand the reach of integrated health services across all localities, and strengthen primary health care, encompassing communicable, chronic, and non-communicable diseases.

Our journey is made possible due to our exceptional partnership with the Angolan government, particularly the Ministry of Health and various ministerial departments. Their proactive response to WHO’s initiatives has created a conducive environment for both programme development and strategic action implementation, significantly improving health outcomes in Angola.

Despite facing challenges in access, coverage, and quality of health services, Angola is making significant strides towards universal health coverage. This progress is underpinned by strategic and structural interventions essential for meeting both national and international health targets aligning with Angola’s National Development Plan 2023-2027, the National Health Development Plan 2012-2025, and other key national and international frameworks, including the Sustainable Development Goals and WHO’s 13th General Programme of Work for 2019-2025.

This cooperative spirit and shared vision are crucial in advancing our collective health goals. Through these collaborative efforts, we are not only addressing current health challenges but also laying the foundation for a healthier, more resilient Angola.

In this report, we share with you our highlights, learnings, challenges, and our hopes for the future. We invite you to join us in celebrating these achievements and to support us as we continue to work towards a healthier Angola.

Dr. Humphrey Karamagi
WHO Representative in Angola
Country Cooperation Strategy 2023-2027

As part of its efforts to align with the needs of Angola, WHO finalized its Country Cooperation Strategy (CCS) 2023-2027 with the Government of Angola last year. 5 strategic partnerships for the CCS were identified through national consultations with stakeholders, guided by evaluations of previous strategies, the National Health Development Agenda, WHO’s 13th General Programme of Work (GPW 13), and the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2020-2022. Key challenges include limited quality health services, inefficient referral systems, and uneven distribution of healthcare resources, exacerbated by the COVID-19 pandemic’s impact on essential health services.

Highlights of the strategic priorities include:

- **Strengthening Health Systems**: This aims to improve coverage and quality of health services using a primary health care approach.
- **Equitable and Integrated Health Service**: Focuses on life-cycle health improvement using evidence-based strategies, from preconception to old age.
- **Disease Prevention and Control**: Prioritizes quality, equitable, and integrated services for both communicable and non-communicable diseases.
- **Health Security and Disaster Preparedness**: Emphasizes managing public health emergencies like COVID-19, emerging diseases, and applying the International Health Regulations (2005) for stronger health security.
- **Multisectoral Approaches for Healthier Populations**: Involves strengthening partnerships and coordination with other sectors to contribute to the Sustainable Development Goals (SDGs).
On 16 May 2023, Angola and WHO in Angola celebrated WHO’s 75th anniversary. This special occasion, celebrated in Luanda with key health partners and government officials, underscored WHO’s commitment to reinvigorating Primary Health Care. The focus remains on ensuring universal access to affordable, equitable, and sustainable healthcare, pivotal in safeguarding individuals and families from the financial burdens of health inequities.

Dr. Dalva Ringote, the Minister of State for Social Affairs, praised WHO’s impact, stating, “WHO’s mandate has consistently demonstrated the power of unity in addressing the daily threats to global health and safeguarding our populations.” The minister further emphasized Angola’s reliance on WHO’s leadership in tackling health challenges and realizing the vision of Health for All.

Reflecting on WHO’s inception 75 years ago, this anniversary symbolizes the collective resolve of nations to achieve good health and well-being for everyone, everywhere. This commitment, as relevant today as it was over seven decades ago, is central to the mission of ensuring Health for All.

In Angola, the collaboration with WHO has been important since the Basic Agreement’s signing in 1976. The country has been an active participant in shaping global and local health policies, strategies, and actions. This partnership has fostered significant strides in reducing maternal and child mortality, combating public health emergencies, and achieving milestones like polio eradication and controlling epidemics like Marburg hemorrhagic fever and yellow fever.

The launch of WHO’s 75th-anniversary celebrations, to continue until 2024, witnessed participation from government members, UN agency representatives, the Diplomatic Corps in Angola, and key health partners. This event not only commemorates the remarkable progress in public health but also highlights the current challenges and future aspirations for “Health for All.” It serves as a call to action to address today’s and tomorrow’s health challenges, reinforcing WHO’s role as a beacon of hope and guidance in the quest for a healthier world.
Universal Health Coverage: Essential Interventions

This section summarizes achievements in the areas of Universal Health Coverage: Essential Interventions, showcasing how WHO assisted Angola in addressing health challenges. This includes the fight against HIV, signified by strategic initiatives like the Global Alliance to End AIDS in Children by 2030 and the implementation of the Dolutegravir (DTG) Treatment Protocol. The section further discusses comprehensive responses to malaria, the profound impact of non-communicable diseases, and the persistent struggle against tuberculosis and neglected tropical diseases. Moreover, it highlights the role of immunization and surveillance in safeguarding public health, spotlighting significant campaigns against polio, and the proactive management of vaccine-preventable diseases through robust monitoring and community engagement strategies.

HIV-AIDS

The Human Immunodeficiency Virus (HIV) remains a significant public health challenge in Angola. According the Integrated Multisectoral Health Survey (IIMS, 2016), the prevalence rate of HIV among the population aged 15 to 49 stands at 2%. This rate shows a gender disparity, with 2.6% prevalence in women compared to 1.2% in men.

Global Alliance to End AIDS in Children by 2030

Angola is among the 12 African countries participating in the “Global Alliance to End AIDS in Children by 2030.” WHO, as a member of the Technical Group, has played a critical role in formulating the operational plan for this initiative and WHO is actively involved in monitoring its implementation in collaboration with other UN agencies.

The initiative's primary goal is to eliminate new HIV infections among children and ensure the survival of their mothers. It specifically targets pregnant women and their children living with HIV, spanning from pregnancy through to the end of the breastfeeding period. In 2023, the initiative successfully mobilized funding, with $66,667 from the Unified Budget, Results and Accountability Framework (UBRAF) and $250,000 from the United States Agency for International Development (USAID). The UBRAF funds allowed for joint implementation by various UN agencies to contribute to reducing HIV-related morbidity and mortality and integrating HIV control activities into primary health care.

The partnership between the Angolan government and WHO is crucial in combating HIV in Angola. Key efforts include implementing updated protocols, training healthcare professionals, and conducting research. These steps are important for enhancing HIV prevention, diagnosis, and treatment in the country.

Dolutegravir (DTG) Treatment Protocol

In 2021, Angola adopted the treatment protocol recommended by WHO, with dolutegravir (DTG) in adults and later in children. To disseminate the protocol and train health professionals, WHO collaborated in the drafting of the “Antiretroviral Treatment Standards
WHO supported the National AIDS Institute (INLS) in implementing the new HIV Counselling and Testing Protocol, which includes the new HIV testing algorithm using rapid tests recommended by WHO for low-prevalence countries (<5%). 109 technicians from the provinces of Cuanza Norte (19), Huila (18), Moxico (16), Bié (15) and Cuando Cubango (15), Lunda Norte (14), Namibe (12) benefited from training sessions, which improved the capacity of technicians to diagnose HIV in their respective provinces.

Similarly, with WHO support, the viral hepatitis protocol was implemented in Huila, at Lubango Central Hospital and Irene Neto Maternity Hospital. 38 health technicians were also trained to ensure the correct implementation of this protocol.
WHO supported supervision relating to the implementation of the paediatric DTG and refresher training for health technicians on Antiretroviral Treatment Standards (ART) in several provinces, including Bengo, Zaire, Huila and Cuando Cubango. During these supervisions, 80 technicians received on-the-job training on the algorithm and interpretation of the results of Early Infant Diagnosis, and diagnosis of exposed children.

**Preparation of the Monitoring and Evaluation Plan for the Seventh National Strategic Plan**

The INLS developed the Seventh National Strategic Plan for the Response to HIV/AIDS, Viral Hepatitis and Other Sexually Transmitted Infections. As part of this plan, WHO assisted the INLS to draft a Monitoring and Evaluation Plan.

**Research plays an important role in the response to HIV.** In this context, a case study of Mother-to-Child HIV Transmission was carried out in Bié, Huila, Malange and Cabinda, together with the strengthening of epidemiological surveillance. This study included children born to mothers living with HIV who underwent IPD using the conventional platform (DBS Kit Collection). The data is currently being analysed, but some preliminary results include:

- a) Existence of services offering IPR and CV.
- b) Use of new technologies such as WhatsApp where the conventional route is not available.
- c) Participation of activists in the active search for mothers and children who are no longer in the system.
- e) Even though registration material had been distributed to the health centres implementing the Early Infant Diagnosis (EID) and Viral Load (VL) services, the clinical files were either not correctly filled in or not filled in at all.
- f) First samples were taken late and this meant that there a small window to identify positive cases early and treat them on time.

The final analysis of the study’s results will allow for better informed decisions to improve the Prevention of Mother-to-Child Transmission of HIV in Angola.
Malaria remains a critical public health concern in Angola, representing the primary cause of death in the country. To address this, the Angolan government has established a strategic objective: to diminish the incidence and fatality rates of malaria. To achieve this, the government has implemented various goals such as the widespread use of mosquito nets and insecticides, and also ensuring the provision of appropriate treatment for malaria cases.

WHO has been actively supporting the Angolan National Malaria Control Programme (PNCM), aligning its efforts with the government’s directives and the objectives outlined in the Strategic Plan for Malaria Control 2021-2025. WHO has also supported in the following ways:

- **Resource Mobilization:** WHO assisted in drafting the Global Fund proposal to Fight Malaria in Angola, totaling almost 48 million USD. This funding will significantly enhance the National Programme’s capacity to implement the strategies detailed in the Strategic Plan.

- **Technical Assistance and Data Analysis:** WHO provided vital technical support in data analysis and the preparation of comprehensive epidemiological reports on malaria. These reports, generated quarterly, semi-annually, and annually, assist the Ministry of Health in making informed logistical and strategic decisions.

- **Mid-Term Evaluation of the Strategic Plan:** In line with WHO guidelines, a mid-term evaluation of the Strategic Plan for Malaria Control 2021-2025 was conducted. WHO played a key role in this process, providing technical assistance in the development of the review protocol, adapting data collection methods, and coordinating international consultants.

- **Training Laboratory Technicians:** Recognizing the importance of accurate malaria diagnosis, WHO supported the training of 65 laboratory technicians in Luanda, enhancing the reliability of laboratory malaria diagnoses. Additionally, WHO donated equipment such as computers and printers to the Malaria Programme enabling the Programme to improve its data processing and information management capacities.

- **"Zero Malaria Starts with Me" Initiative:** WHO assisted in the planning and conceptualization of the "Zero Malaria Starts with Me" campaign. This initiative, founded on political engagement, private sector involvement, and community participation, aims to maintain malaria as a political priority, mobilize financial resources, and foster inclusive involvement from state leaders to community members and the private sector.

- **Surveillance and Monitoring Training:** Training sessions focusing on surveillance, monitoring, and data presentation were conducted in various provinces, including Bié, Bengo, Huila, and Moxico. These sessions aimed to enhance the capacity for effective malaria monitoring and response at the provincial level, thereby enabling data-driven decision-making.

- **Administration of Rectal Artesunate in the Community:** WHO contributed to developing the protocol for administering rectal artesunate in community settings, targeting severe malaria cases. This protocol facilitates early treatment during the transfer of patients with complicated malaria to healthcare facilities, allowing for immediate intervention.
Non-communicable diseases

The Ministry of Health has acknowledged the importance of non-communicable diseases (NCDs) and their impact on the nation’s health. In response to this challenge and a request by the Ministry to help formulate strategic plans to address NCDs, WHO allocated both financial resources and technical assistance to support this initiative. A total of $40,000 was dedicated to hiring a consultant and facilitating important meetings for the development and drafting of the plans. In collaboration with MINSA, WHO is leading the oversight of the Multisectoral Strategic Plan for NCDs in Angola.

This collaboration between WHO and MINSA showcases WHO’s dedication to enhancing health systems and advancing the prevention and management of NCDs within the country.
Angola ranks among the top 20 countries globally for tuberculosis (TB), both in case numbers and in the prevalence of drug-resistant TB (DR-TB). WHO collaborates with Angola through the National Tuberculosis Control Programme (PNCT), which is tasked with devising strategies for TB prevention and control. Despite not being a signatory to the United Nations High-Level Declaration (UNHLM-TB) to end TB by 2035 and not being a member of the TB Caucus, Angola prioritizes TB as a significant public health issue.

Until 2018, Angola faced challenges with limited TB service network coverage. However, substantial investments in the health sector have led to improvements. 289 health units, representing 9% of the 3,336 health units nationwide are equipped to provide TB services. Among these, 9 are dedicated TB dispensaries, 133 offer diagnostic and treatment services, 147 are treatment-centric, and there are 155 operational microscopy laboratories.

Out of Angola’s 164 districts, 111 are equipped to provide TB services, and 14 of the 18 provinces have the capability to diagnose Multidrug-Resistant Tuberculosis (MDR TB). Nonetheless, there is a notable gap in diagnostic capacity, leading to the underreporting of MDR-TB cases. Over the past five years, an average of 65,000 new TB cases have been reported annually in Angola.

In 2023, WHO was instrumental in supporting Angola with the epidemiological review of its TB programme, the development of the National Strategic Plan for TB 2018-2022, and the finalization of the new Strategic Plan for TB (PEN TB 2023-2027), which received consensus validation in October 2023. Furthermore, WHO has engaged in advocacy with various partners to support diverse components of TB control, including community, nutritional, and high-risk group aspects.
Neglected Tropical Diseases

WHO has been instrumental in working with the government to address the 16 prevalent neglected tropical diseases (NTDs) in Angola, categorized into those managed by Preventive Chemotherapy (NTD-PC) and those requiring Intensive Case Management (NTD-CM). WHO’s commitment to combating these diseases is reflected in its comprehensive approach, aligning with the National NTD Strategic Plan (PEN NTD 2021-2025).

Key initiatives include:

1. Training Initiatives: Over 100 health workers, including five from the national NTD program, received training in managing the new WHO Joint Application Package (JAP) tool and in the requisition of anthelmintic drugs.

2. Mass Administration of Medicines (AMM): WHO facilitated AMM campaigns in several provinces, including Bengo, Cuanza Norte, Cuanza Sul, Huambo, Bié, and Cuando Cubango. A significant aspect of this initiative was the implementation of the supervisor’s coverage tool to enhance the reach and effectiveness of the campaign.

3. Reverse Logistics: WHO also assisted with the reverse logistics of medicines post-campaigns, ensuring the efficient handling of donated medicines.

4. Trachoma Mapping: WHO conducted baseline trachoma mapping in 10 municipalities in Benguela, adding to the national data across three provinces.

5. Leprosy Elimination Project: The "Elimination of Leprosy in Angola 2023" project, supported by WHO, enabled active case searching in 10 municipalities across three provinces. This led to the detection of 57 new leprosy cases, the training of 230 technicians, and heightened community awareness about the disease.

6. Submission and Approval of Projects: WHO also facilitated the submission and approval of the "Elimination of Leprosy in Angola 2024" project and managed the timely completion of the Global Annual Report Form on NTDs (GNARF). It also submitted orders for anthelmintic drugs for 2024 through the ESPEN Portal.

7. Integrated Campaigns: WHO supported integrated campaigns for lymphatic filariasis, soil-transmitted helminths, and schistosomiasis, along with active searching for NCD-GC diseases such as leprosy, Buruli ulcer, HAT, Yaws, and Guinea worm disease. Emphasis was also placed on integrating AMM and active searching for Guinea worm disease in vaccination campaigns.
NTDs to be eradicated in Angola:

**GUINEA WORM**

In the ongoing battle against dracunculiasis (Guinea worm disease) in Angola, WHO continues to support the country’s efforts to eradicate this remaining neglected tropical disease. Despite the confirmation of human cases in three consecutive years (2018-2020) and a total of 43 cases (3 human and 40 animal infections) reported from 2018 to 2023, the challenge persists, particularly in the southern province of Cunene. This region, bordering the Republic of Namibia, has witnessed a significant rise in infections, notably a 357% increase in dog infections in 2023 compared to 2022, and a 75.9% increase in the notification of rumors.

WHO’s approach in Angola has been critical in addressing this public health challenge. Key actions undertaken include:

- **Normative and Technical Support:** WHO provided strategic guidance, coordination, capacity building, and monitoring support. This included training 156 community surveillance agents and creating a dracunculiasis database to monitor the epidemiological situation.

- **Implementation of Surveillance Measures:** Active case detection and immediate notification of all rumors or cases were prioritized. WHO also integrated dracunculiasis surveillance into other public health initiatives, like trachoma mapping in Benguela province and national polio vaccination days.

- **Public Health Measures in Cunene Province:** WHO supported the implementation of recommended public health measures, including treating water sources with larvicide, initiating case containment in endemic villages, and distributing over 10,948 drinking water filters to families.

- **Communication and Reward System:** Continuous community sensitization and information, education, and communication (IEC) activities reached over 9,337 people. These efforts helped in disease recognition and the effective implementation of the reward system.

- **Financial Support:** Between 2022 and 2023, WHO allocated $370,000 USD to fund dracunculiasis eradication activities in Angola.
In a mission led by Dr. Humphrey Karamagi, an assessment was conducted in Cunene to evaluate the health and development status of the province, particularly focusing on the outbreak of Guinea worm disease and the progress in eradication efforts. This mission was a collaboration between WHO, the Angolan Government, and the Carter Center.

The objective of the mission to Cunene was to address the challenges posed by Guinea worm disease. Central to its agenda was the thorough review of existing programs and health units specifically targeting the disease’s eradication. This involved detailed visits to various health facilities in the region, allowing the team to assess firsthand the current state of healthcare infrastructure and services.

Understanding the community perspective was another critical element, achieved through visits to communities directly affected by Guinea worm disease. These interactions provided valuable insights into the realities faced at the grassroots level and the extent of community involvement in the eradication efforts.

A strategic component of the mission was the formulation of recommendations and strategies. These aimed to refine and enhance the approach towards effectively combating the Guinea worm disease, ensuring that the plans are robust, feasible, and aligned with the ground realities.

Highlights of the Mission

- Engagement with Provincial Government: A meeting with the Cunene Provincial Government emphasized the need for collaboration and resource allocation, including human, logistical, and financial support from WHO.

- Health System Overview: The Provincial Director of Health presented an extensive overview of Cunene’s health infrastructure and needs, highlighting the challenges and requirements in various sectors, including transportation, data processing equipment, alternative energy sources, and staff training.

- Ondjiva General Hospital Visit: This visit allowed the team to understand the hospital’s role in community assistance, its capacities, and areas needing support.

- Local Partners Meeting: A gathering with representatives from the private sector, media, religious institutions, and other sectors facilitated discussions on strengthening partnerships and integrating interventions.

- Community Engagement in Onanime and Santa Clara: Visits to these areas showcased the degree of community engagement in implementing surveillance and eradication measures for Guinea worm. The mission interacted with community leaders, addressing key concerns such as identification equipment, transport, training, and cross-border management of rumours.

Throughout the mission, WHO’s role was highlighted in providing normative and technical support, strategic guidance, and advocating for multisectoral interventions, reinforcing the organization’s commitment to eradicating Guinea worm disease in Angola.

We thank The Carter Center for their support in facilitating this visit.
Immunization

The annual WHO and UNICEF estimates of national immunization coverage (WUENIC) estimates from 2000 to 2022 show that, since 2000, a considerable number of children have not been vaccinated, and the situation worsened in 2020 and 2021 due to the COVID-19 pandemic. In 2021, there were 36% more zero dose children compared to 2019. Angola registered a total of 1,984,069 zero-dose children, with 407,000 in 2019, 492,000 in 2020, 553,000 in 2021 and 532,069 in 2022. The total number of zero dose children during this period is higher than the number of newborns in Angola, estimated by the National Statistics Institute (INE) in 2022 at 1,132,062 children.

To reverse the situation, WHO, in coordination with other partners, supported the Ministry of Health in drawing up the Zero Dose Child Recovery Plan. The plan aims to help reduce morbidity and mortality attributable to vaccine-preventable diseases by recovering 70% of zero-dose and under-vaccinated children between 2019 and 2022.

WHO provided technical support to the Ministry of Health in developing the “MICS-Zero Doses” Project (GAVI support for countries that are not eligible or no longer receive GAVI support) to reduce the number of unvaccinated or under-vaccinated children. The aim is to increase routine vaccination coverage, specifically the Penta-3 indicator by 10%, and reduce the number of zero-dose children by 10%, in 22 municipalities in the 5 provinces with the highest number of unvaccinated children (Luanda, Bié, Huambo, Cunene and Kwanza Sul).

WHO played a key role in providing technical support for the implementation of the project, recruiting seven technicians, including a National Immunization Officer and a Data Manager, who will support the national activities at the central level, and five National Immunization Officers, who will strengthen the capacities of the Provincial Directorate and Municipal Health Directorates in the five provinces covered by the project.
In September and October 2023, the Government of Angola organized two comprehensive rounds of a national polio vaccination. This initiative, led by the Angolan government with the support of partners including WHO, the Global Polio Eradication Initiative (GPEI), UNICEF, Rotary and Centers for Disease Control and Prevention (CDC) resulted in the vaccination of over 5.6 million children in the first round and 6.2 million in the second. WHO played a critical role in this success, reflecting its commitment to global health security and the eradication of polio.

Coordination

WHO assisted in the development of the micro-plan for the Polio Vaccination Campaign with trainings held for technical staff from the country’s 18 provinces in two phases. The first phase took place in July with participants from the provinces of Bengo, Benguela, Kwanza Norte, Kwanza Sul, Huambo, Luanda, Malanje and Zaire. The second phase took place in July involving the country’s other provinces Bie, Cabinda, Cunene, Cuando Cubango, Huila, Lunda Norte, Lunda Sul, Moxico, Namibe and Uige.

WHO also trained 735 community leaders and 155 health professionals, equipping them with the necessary skills to identify measles cases and ensure vaccine blockade.

Regular coordination meetings and high-profile involvement facilitated by WHO significantly contributed to the campaign’s success. In provinces like Uige and Cunene, strategic alignments between provincial and national...
plans showcased WHO’s ability to foster a strong collaborative spirit.

**Logistical Solutions**

Logistics and innovative solutions were at the heart of the campaign’s success. WHO’s support in inventory management of cold chain equipment and the distribution of vaccines and materials played a crucial role. This was complemented by the implementation of the ODK tool, which improved real-time validation of training and campaign preparations, and simplified data management. WHO’s intervention in addressing logistical challenges, such as fuel shortages and rapid material distribution, was vital in maintaining the campaign’s momentum.

**Community Engagement**

Community engagement, a key strategy of the campaign, was significantly enhanced by WHO’s robust advocacy efforts and multi-sectoral collaboration. WHO’s support in intensifying engagement with key community groups, such as taxi drivers, motorbike riders, and traditional therapists, was important. The use of sound-equipped vehicles for broadcasting in Luanda, funded by WHO, further amplified the campaign’s reach and impact.

**Addressing Challenges**

WHO’s presence, guidance, and resources were critical in overcoming challenges such as vaccine hesitancy, logistic delays, and concurrent health issues. The deployment of independent monitors and evaluators, supported by WHO, ensured high-quality post-vaccination evaluation and monitoring.

**The Road Ahead**

Looking ahead, WHO continues to embrace modern solutions and foster international cooperation, enhancing real-time communication and responsiveness to emerging challenges. The “Café of Ideas” initiative, promoting stakeholder discussions, and the strategic use of digital communication platforms showcases WHO’s innovative approach to health campaigns.

WHO’s commitment to Angola’s polio vaccination campaign reflects its broader dedication to global health and the eradication of vaccine-preventable diseases.
Development of the National Immunization Strategy

The National Immunization Strategy (ENV) will replace the Comprehensive Multi-Year Plan formulated for the period 2016-2020, as part of the implementation of the Global Vaccine Action Plan (GVAP) for the Decade of Vaccines. WHO provided support in the evaluation of the preparatory phase, which involved setting up various bodies to manage the process, including the Coordination Committee, the Technical Committee and thematic groups.

Vaccination campaign against COVID-19

By 31 October 2023, 87.17% of eligible people had received the first dose of a COVID-19 vaccine and 50.67% were fully vaccinated. WHO supported the government with all COVID-19 interventions and at all levels.

COVID-19 was declassified as no longer a public health emergency of international concern by WHO. A transition plan has been drawn up by a joint and integrated MINSACDC team that aims to include vaccination against COVID-19 in routine and primary health care.

This plan is operational in many provinces, where they are already implementing the integration of COVID-19 vaccination into routine and primary health care.

Measles Elimination Plan

WHO has supported Angola in carrying out measles vaccinations and in updating the Case Management protocols, WHO has also worked on the training of health professionals and community leaders on measles vaccine and case management in six provinces (Bengo, Lunda Sul, Lunda Norte, Cuando Cubango, Moxico and Zaire).

WHO continues to monitor the measles profile at the provincial and municipal level, identifying areas of transmission, especially in municipalities bordering the Democratic Republic of Congo and Zambia.

Acute Flaccid Paralysis (AFP) Surveillance

WHO created a sensitization plan aimed at health professionals and community leaders, with a special focus on Acute Flaccid Paralysis (AFP) surveillance. This plan was implemented in 12 provinces (Huambo, Luanda, Lunda Norte, Lunda Sul, Uíge, Malanje, Cuando Cubango, Cuanza Norte, Cuanza Sul, Bié, Zaire and Huíla) resulting in the sensitization of 1,030 community leaders.

Expansion of Environmental Surveillance

WHO worked with the government to evaluate nine sampling sites for environmental surveillance in five provinces (Luanda, Benguela, Huambo, Lunda Norte and Malanje). In addition, we expanded environmental surveillance to two more provinces, Huíla and Uíge, totaling 12 collection sites in seven provinces.
Strengthening the Surveillance of Adverse Events Following Immunisation (AEFI)

WHO implemented several initiatives to assist the government with AEFI. Firstly, WHO assisted with the establishment of a dedicated Causality Committee tasked with the responsibility of investigating and analyzing AEFIs. To ensure their effectiveness, WHO organized an orientation workshop for committee members, equipping them with the necessary guidelines to conduct thorough investigations.

Recognizing the importance of skill development across the board, WHO conducted comprehensive training sessions for 23 technicians hailing from various provinces. This training aimed to sharpen their abilities in investigating AEFIs, ensuring a high level of competence across regions.

WHO also instituted supervision processes in several provinces (Malanje, Kwanza Norte, Kwanza Sul, Lunda Norte, Lunda Sul, and Benguela). This oversight guarantees that investigations meet the required standards and adhere to protocols.
Universal Health Coverage: Life Course

This section summarizes achievements in the areas of Universal Health Coverage and Life Course, particularly focusing on how WHO assisted the government in the areas of maternal and child health, the elimination of maternal and neonatal tetanus, hospital sector expansion, and health system reforms in Angola in 2023. The section highlights WHO’s support in training healthcare professionals, implementing effective health strategies, and revising critical health policies. Additionally, it underscores the organization’s role in guiding the development of strategic plans and evaluating national health programs, all aimed at improving the overall health and well-being of the Angolan population.

Maternal Health

In 2023, WHO support the Angolan government’s efforts to improve maternal and child health. One of the key initiatives was the training of 33 technicians in Integrated Childhood Illness Care, encompassing various health disciplines. This training, supported by WHO, aimed at enhancing the skills of health professionals at different administrative levels. It was a part of WHO’s priority activities, reflecting its commitment to improving child health and reducing mortality.

The implementation of the Integrated Management of Childhood Illness (IMCI) strategy in Angola, initially launched in the 1990s, received a significant boost. WHO’s guidance was critical in structuring this strategy, focusing on improving healthcare professionals’ skills, enhancing health service delivery, and promoting healthy practices in communities. The support from WHO was not just technical but also financial and logistical, enabling the first phase of training for national, provincial, and municipal trainers.
In maternal health, WHO’s contribution was significant in advancing the Maternal and Perinatal Death Surveillance and Response System (MMRDS). Despite a reduction in maternal, neonatal, and infant mortality rates, challenges remained in meeting the Sustainable Development Goals. WHO’s support was important in documenting and implementing processes to review, monitor, and respond to maternal and perinatal deaths. This approach aimed at preventing future deaths from preventable causes, aligning with the “Zero Mortality” perspective.

WHO also played a key role in the institutionalization of the VRM system, which is important for monitoring, understanding, and preventing maternal deaths, stillbirths, and early neonatal deaths. This initiative was part of WHO’s broader strategy to eliminate predictable maternal mortality and aligns with their Action Plan for Every Newborn.

Furthermore, WHO and UNICEF’s involvement was critical in evaluating the VRMMP. In 2023, a workshop in Luanda convened stakeholders to update guidelines, evaluation models, and data collection instruments. This workshop facilitated the validation of the first evaluation report of health facilities in Luanda and Moxico.

\[\text{Maternal and Neonatal Tetanus Elimination Plan}\]

Currently, Angola is one of 12 countries that have not yet reached the elimination target for maternal and neonatal tetanus, while 47 (80%) of the 59 high-risk countries for maternal and neonatal tetanus have reached the elimination target since the launch of the global initiative in the late 1990s, following a World Health Assembly resolution. This is defined as less than one case of neonatal tetanus per 1,000 live births in all municipalities in a country.

In this context, WHO provided technical assistance to MINSA in collaboration with UNICEF for the risk assessment and development of the strategic plan for the elimination of maternal and neonatal tetanus. WHO also assisted in developing the micro plan for three
Health Systems Development

Engagement with the Hospital Directorate

WHO in Angola has been instrumental in liaising with the hospital directorate to expand essential services offered through the hospital sector. This collaboration aims to enhance the quality and accessibility of healthcare services, addressing the evolving health needs of the Angolan population. By working closely with the hospital directorate, WHO has contributed to the strategic planning and implementation of services that are crucial for the health and well-being of individuals and communities across Angola.

Revision of the Basic Law of the National Health System

In 2023, WHO assisted the government in the revision of the Basic Law of the National Health System (SNS) in Angola. WHO’s involvement ensured a comprehensive and systematic approach, marked by significant advancements in both planning and execution stages. The revision process has been thorough, with key informants and essential documents identified for a detailed analysis. Six productive meetings were conducted in 2023, engaging nine key informants from various entities.
Institutional Development for regulation of Essential Medicines

In 2023, WHO also focused on aligning the Institutional Development Plan (IDP) activities with The Medicines and Health Technologies Regulatory Agency (ARMED)’s strategic objectives. This alignment involved a thorough review of the legal and regulatory framework that underpins the Health Regulation process in Angola. WHO conducted key meetings to monitor the implementation of the IDP across all departments, involving all functions subject to the IDP and interested parties. These efforts were supplemented by visits to the facilities of the three ARMED units. WHO also mapped the national health market, identifying its unique characteristics and peculiarities, thereby laying the groundwork for an intervention plan tailored to the local context. This comprehensive approach aimed at long-term sustainability of the IDP, strengthening ARMED’s regulatory authority and contributing to the advancement of health regulation in Angola.

WHO has also engaged with stakeholders such as the International Finance Corporation (IFC) to discuss ways to improve Angola’s pharmaceutical sector. This collaboration aims to address assist ARMED in resolving the regulatory challenges, fostering private sector investment, and improving the infrastructure to create a conducive environment for the pharmaceutical sector’s growth.

Elaboration of a new National Health Development Plan

WHO has played an important role in the evaluation of Angola’s National Health Development Plan (PNDS 2012-2025) and the development of a new plan aligned with the country’s National Development Plan. This process has involved extensive research, stakeholder debriefings, and technical meetings to define methodological approaches. The evaluation aims to comprehensively assess the performance and impact of the PNDS, providing a foundation for the next Health Sector Strategic Plan (2023-2027). This new plan will guide the strategic direction of Angola’s health sector for the next five years, focusing on improving health outcomes and strengthening health system resilience.
DEFINIÇÕES

Definições do caso para meningite bacteriana

Caso suspeito:
Quaisquer prontos com início rápido de febre (temperatura oral ≥ 38.5°C ou temperatura retal ≥ 38.0°C) e rigidez de nuca ou qualquer outra meningite, incluindo uma forma subclínica bacteriana.

Caso provável:
Quaisquer casos suspeitos com LCR macroscopicamente turvo, opaco ou purulento, ou LCR com conteúdos de leucócitos ≥ 10 leucócitos/mm³ ou o a isolamento de uma bactéria identificada para o tratamento de meningite, ou um resultado positivo na detecção de antígenos no LCR (por exemplo, no teste de uniaoção em laboratório).

Em bebês:
Contagem de leucócitos no LCR > 200 leucócitos/mm³, ou uma contagem de leucócitos no LCR entre 10 e 200 leucócitos/mm³ associada a um afeito grave de proteína > 200 mg/dl ou a um diâmetro (s/ódio de glúteo) ≥ 4 cm/UA.

Caso confirmado:
Quaisquer caso suspeito ou provável que seja confirmado laboratorialmente pelo crescimento de bactéria, MDR de patógenos bacterianos (Neisseria meningitidis, Streptococcus pneumoniae, Haemophilus influenzae tipo b) no LCR ou nas tais.

Organização Mundial de Saúde
Angola
Assessing Health Systems Development: Lessons from Huambo Province

In a mission led by Dr. Humphrey Karamagi, WHO visited Huambo province to evaluate the health and development status of the province, particularly focusing on the health systems development and hospitals. This mission was supported by the European Union.

Huambo presents unique public health challenges and WHO aimed to gain a deeper understanding of these challenges, strengthen collaborative networks, and identify strategies for improvement, particularly in hospital areas and health system infrastructures. To achieve this, WHO engaged with provincial leaders, health authorities, civil society, and health professionals at Huambo Central Hospital.

Key observations highlighted a network of health facilities grappling with endemic diseases, low vaccination coverage, and insufficient healthcare resources. Particularly noteworthy was the province’s struggle with neonatal tetanus, measles, and meningitis, compounded by vaccine shortages, inadequate transportation for health teams, and limited community awareness.

Huambo’s hospitals and health centers also face critical shortages in staff and essential medical supplies. The lack of ambulances and transport facilities further hinders effective healthcare delivery.

WHO’s Role and Assistance:
WHO has been instrumental in providing technical and financial support to address these challenges. Specific focus areas include:

1. Enhancing Vaccination Coverage: WHO is assisting in overcoming logistical hurdles that impede vaccination efforts, such as addressing vaccine storage issues and transportation needs.

2. Strengthening Disease Surveillance: WHO is supporting the improvement of epidemiological surveillance systems to enable early detection and management of diseases.

3. Enhancing Hospital Capabilities: Efforts are directed towards strengthening the infrastructure and resource availability in hospitals, particularly for managing acute diseases and emergency cases.

4. Community Engagement: WHO emphasizes the importance of community involvement in health initiatives, aiming to improve awareness and participation at the grassroots level.

The mission to Huambo Province underscored the need for comprehensive interventions to enhance the province’s health system. WHO’s support is important in guiding these efforts, focusing on strengthening hospital areas and the overall health system to address the province’s unique challenges effectively.

We thank the European Union for their support in facilitating this visit.
Health Emergencies

This section summarizes achievements in the areas of Health Emergencies, highlighting the support provided by WHO in enhancing Angola’s capacity for epidemiological surveillance, intelligence, as well as preparedness and response. It details the collaborative efforts in training technicians for the effective use of DHIS2 and the “Epidemic Intelligence From Open Sources” platform, aimed at strengthening early detection and response to public health threats. Additionally, the section covers the Integrated Disease Surveillance and Response (IDSR) strategy, focusing on the training of surveillance technicians and the improvement of public health event notification and case detection. This section also looks at preparedness and response to public health emergencies, including the comprehensive assessment of Angola’s readiness and the implementation of the National Programme for the Prevention and Control of Healthcare-Associated Infection. Finally, it discusses the after-action evaluation of the COVID-19 response, underscoring the multi-sectoral approach in reviewing and improving emergency preparedness and response strategies. This chapter reflects WHO’s commitment to supporting Angola in building a robust, responsive, and well-equipped health emergency management system.

Epidemiological Surveillance

The Ministry of Health, with the technical and financial support of WHO and the European Union, has been developing a programme to strengthen the training of technicians at the Epidemiological Data Processing Centre (CPDE) in DHIS2*. This is to ensure the input, extraction, analysis and visualization of accurate and up-to-date epidemiological data, which enables sound public health decisions to be made. In 2023, the first training on DHIS2 was carried out at the central level, which enabled the training of 20 technicians from the CPDE on processing and analysing health data, preparing and regularly disseminating key health information through national epidemiological bulletins.

Epidemiological Intelligence

To improve integrated disease surveillance and guarantee an adequate response to possible outbreaks, WHO supported the training of 20 epidemiological surveillance technicians in the use of the “Epidemic Intelligence From Open Sources” platform, an application built as a result of the joint initiative of various health actors, aimed at the early detection, verification and assessment of risks and threats to public health. The training provided health professionals with the knowledge to identify possible threats to public health at an early stage and strengthen the protection of the Angolan population.

The ”Epidemic Intelligence From Open Sources” platform is the first to be implemented in Angola to help technicians in the health sector develop a broad vision of what is happening locally and worldwide. It appears to be fundamental for strengthening epidemiological surveillance around the world, bringing together new surveillance networks and systems to reinforce the unified approach to risks. For this reason, 17 of the 54 countries in WHO African Region have already received the training to strengthen the rapid identification of public health threats.

Every year, WHO detects, investigates, monitors and actively responds to around 350 events, the equivalent of one event a day, of which around 100 occur in WHO African Region alone. WHO studies show that the earlier events are detected, the quicker they are responded to to mitigate the impact on the most vulnerable communities.

*DHIS2 is the world’s largest health information management system, used by more than 100 countries worldwide, including Angola, to collect and analyse health data.
Integrated Disease Surveillance and Response (IDSR)

Integrated Disease Surveillance and Response (IDSR) is a strategy for coordinating and integrating surveillance activities by focusing on the surveillance, laboratory analysis and response functions of the national disease surveillance system.

To reinforce basic knowledge and skills in Integrated Disease Surveillance and Response (IDS-R), in the detection, notification of cases and improved public health events, a total of 32 municipal Epidemiological Surveillance and EPI technicians from Lunda Norte and Zaire were trained. The training also covered technicians from the provinces and non-governmental organizations working in the Lôvua refugee camp in Lunda Norte. These activities received financial support from the European Union.

Preparedness and Response to Public Health Emergencies

The Ministry of Health carried out a preparatory self-assessment on its response capacity to potential public health emergencies in August with the participation of 43 professionals from 19 sectors. After this self-assessment, in September, the Ministry, in collaboration with WHO, carried out a comprehensive assessment of its readiness and response to health threats. 13 assessors from Spain, Mozambique, Portugal, São Tomé and Príncipe and international organizations assessed in collaboration with 60 Angolan experts from various ministries. The assessment centered on three main areas: prevention, detection and response capacity, under the umbrella of “One Health”. It sought to address areas such as antimicrobial resistance, zoonotic diseases, food safety and vaccination in prevention. About detection, the country’s laboratory systems, surveillance mechanisms and human resources were examined.

Meanwhile, the management of health emergencies, the interconnections between public health and security, the provision of health services and risk communication
were considered within the scope of response capacities. The main conclusions of the assessment revealed that Angola has seen significant improvements since the 2019 assessment. There is now better coordination with partners, an official National IHR Focal Point has been appointed and a National Health Security

Angola has demonstrated significant capacities for improvement. However, efforts are still underway to strengthen areas such as the training of human resources in the animal and human health sectors, and the management of health emergencies.

The recommendations put forward are varied and solid. They include updating the National Health Security Action Plan, integrating animal and environmental health components, strengthening human resources training in all health sectors, and developing standard operating procedures.

For the future, WHO emphasises the need for Angola to convene a meeting of all stakeholders to define priority plans, establish an effective system for implementing and evaluating IHR-related initiatives and take part in multi-sectoral exercises.

**Prevention of Hospital Infections**

In Angola, in May 2020, during the COVID-19 pandemic and following the confirmation of the first case involving a healthcare professional, the Surveillance, Prevention and Infection Control (VPCI) team was created as part of the Rapid Response Team, today called the Infection Prevention and Control Team (IPC). The national response to the pandemic had as its fundamental pillar the investigation of cases and contacts of health workers, and vulnerable and affected groups, to minimise the impact of the disease.

Since 2020, WHO Angola has supported the Ministry of Health in implementing and executing crucial actions to strengthen infection prevention and control. Among the various actions carried out in 2023, the following stand out:

Infection Prevention and Control training for 1,688 healthcare professionals in the context of COVID-19 and to strengthen IPC in healthcare facilities, carried out between 2020 and 2023.

Assessment of the minimum standards for the Prevention and Control of Healthcare-Associated Infections in 61 Health Units, using the Scorecard assessment tool.

Implementation of a pilot project to implement the IPC programme at the local level in the Cacuaco Municipal Hospital and Cardiopulmonary Disease Complex. As a result of working together on the IPC programme since 2022, the Cardiopulmonary Hospital has been able to successfully implement some of the essential components of IPC, which include: an IPC programme with a committee, with responsibility and accountability; drawing up some guidelines adapted to the local context; capacity building and training of healthcare professionals, as well as surveillance of healthcare-associated infections. At Cacuaco Municipal Hospital, a hospital infection control committee was set up, which has been working to implement concrete actions at the facility, based on all the essential components of the IPC.
The analysis of the results of the evaluation of minimum IPC standards and healthcare workers with COVID-19 revealed the need to improve IPC measures by implementing the essential components of the Infection Prevention and Control Programme. Therefore, to achieve these objectives, it became essential to implement an IPC Programme at the national level.

In 2023, MINSA, DNSP and WHO worked to implement the National Programme for the Prevention and Control of Healthcare-Associated Infection. As a result, two virtual awareness-raising sessions were held for stakeholders on the implementation and legalisation of the National Programme.

**After-Action Evaluation of the COVID-19 Response**

The Ministry of Health, through the National Health Directorate, held a COVID-19 After-Action Review Workshop in October 2023, in partnership with WHO from a collaborative, multi-sectoral perspective, involving all sectors of the country that were directly involved in the response activities. During the meeting, five technical areas were reviewed, namely Coordination, Surveillance, Case Management, Laboratory and Infection Prevention and Control.

The main objective of carrying out the COVID-19 After-Action Review in Angola is to ensure a review of the actions undertaken during the response to the pandemic, based on a transparent, objective, in-depth and multi-sectoral analysis of gaps and best practices aimed at identifying opportunities for learning and continuous quality improvement in emergency preparedness and response planning.
The specific objectives were to:

- Identify the main milestones in the chronology of the epidemic;
- Identify good practices, gaps and challenges observed in the response;
- Identify knowledge gaps related to research and innovation in the field of public health emergencies;
- Propose actions to be taken to strengthen preparedness, detection and response capacities for future epidemics.

The working group discussion was held in a 2-day workshop format, involving national participants (at the central and local level) representing the main sectors involved in COVID-19 response activities, including civil society, the military and private health professionals. The 60 participants were divided into 5 working groups of 8 to 9 people, according to their area of intervention in the COVID-19 response.
Health & Well-being

This section summarizes achievements in the areas of Health & Well-being, with a particular focus on the WHO’s support in the development and implementation of community health policies and strategic plans in Angola. It outlines the collaborative efforts between the Ministry of Health and WHO in organizing workshops for the validation of the Community Health Policy Strategic Plan and the drafting of the Training Manual for Community Health Agents. Additionally, the section highlights the engagement with the Luanda Provincial Government, discussing the implementation of the Healthy City initiative and strategies to improve road safety.

Elaboration and Validation of the Community Health Policy and Strategic Implementation Plan

The Ministry, with technical and financial support from WHO, organised a series of four workshops in Luanda in June, with stakeholders from all the social sectors and the social determinants of health. The event aimed to draw up and validate the Community Health Policy Strategic Plan. The activities defined in the Strategic Plan are currently being implemented and WHO has been monitoring them and providing all the necessary technical and financial support.

As part of WHO’s technical and financial support, in November the Ministry drafted the Training Manual for Community Health Agents, which involved the technical working group in different areas of public health programmes. The implementation of the pilot phase is scheduled for 2024/2025 after the financial and human conditions have been created.

Healthy City and Road Safety in Luanda

In September, a courtesy meeting was held with the Governor of the Luanda Provincial Government, Manuel Homem, which marked a historic moment as it was the first official meeting between the Governor of Luanda and WHO since the appointment of Manuel Homem. The meeting concentrated on exploring potential areas of collaboration, with particular emphasis on addressing NCDs. Furthermore, important issues such as road safety and the healthy city initiative were also deliberated. WHO is working with the provincial government on the implementation of the healthy cities initiative as well as on strategies to improve road safety in Luanda.
### Country Support

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<th>Category</th>
<th>2022</th>
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<th>Difference</th>
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Partnerships

In 2023, WHO significantly expanded its partnerships in Angola by co-leading regular meetings with development partners in the field of health, both generally and in specific areas such as nutrition. These meetings were actively attended by key stakeholders, including the Angolan government and various health development partners. This year saw the integration of new partners into the partnership platforms, such as the British and French embassies.

Coordination of Health Initiatives

The discussions for the creation of a surveillance sub-group led by the Ministry of Health marked an important step towards the coordination of health efforts in Angola. WHO also coordinated the establishment of a waste management sub-group which involves health partners who have projects that impact waste management. WHO’s leadership was instrumental in facilitating significant collaborations, such as the coordination between the Japan International Cooperation Agency (JICA) and the Ministry of Health for the JICA Technical Cooperation Project in Huambo and Huíla. WHO was also involved in presenting the new management of USAID to the Ministry of Health’s Head of External Relations demonstrating WHO’s response to the Minister of Health’s request for assistance in coordinating the activities of health partners.

A remarkable collaboration was developed with the European Union, providing crucial technological support to the Ministry of Health’s Office of Studies, Planning and Statistics (GEPE) through WHO. In addition, WHO information-sharing initiatives, such as the communication to the World Bank, resulted in an additional 40 million USD in funding for immunization in Angola.
SADC Health Ministers’ meeting in Angola: Focus on Health for All

In November, the Southern African Development Community (SADC) Ministers of Health and Ministers responsible for HIV/AIDS met in Luanda to share experiences and develop common solutions for pressing health issues such as malaria, tuberculosis, and HIV.

During the meeting, several important health instruments were ratified. These include strategies for post-COVID-19 public health preparedness, tackling the tuberculosis epidemic, malaria control, and initiatives aimed at harmonizing medicine regulations, improving sexual and reproductive health, and optimizing procurement and nutrition services, thus laying a foundation for a robust health infrastructure in the SADC region.

WHO, through its representative to Botswana, Dr. Josephine Namboze, recognized the strides made by SADC in advancing UHC. However, Dr. Namboze emphasized the journey ahead, urging continued collective action to ensure that every individual has access to essential health services. She advocated for building community resilience and transitioning towards a people-centered health system, highlighting the need for a comprehensive approach that addresses the myriad determinants of health, including social, environmental, economic, and health security factors.

The meeting also saw Angola assume the Presidency of the SADC Health Commission for the 2023-2024 period. This was marked by recognition of the region’s achievements in terms of combating HIV/AIDS and tuberculosis, as well as the challenges that persist in terms of malnutrition, gender inequalities, water and sanitation, drought and climate change, and poverty, among others, which impact the health of the region’s populations.
Participation in National and International Forums

WHO’s role in the health dialogue in Angola was highlighted through keynote speeches at the 2nd International Medical Congress of the UPRA and the 6th International Congress of the Order of Nurses. These presentations centered on the importance of revitalizing and increasing Primary Health Care (PHC) to guarantee universal accessibility of services.

Provincial Involvement and Field Visits

Recognizing the importance of local involvement, WHO carried out numerous visits to provinces such as Cunene, Huambo, Benguela and Bengo. These visits were important for understanding the reality on the ground and strengthening collaboration with government and development partners in the provinces. WHO also met with the Governor of Luanda for the first time since his election and is working with the Provincial Government to help it achieve healthy city status. The work in Cunene, particularly with the Carter Centre for Guinea worm eradication, is testimony to the importance of these provincial partnerships.
Parliamentary Involvement

The 147th Assembly of the Inter-Parliamentary Union (IPU) in Angola provided WHO with an avenue to strengthen its parliamentary involvement, in particular with the 6th Commission of the National Assembly. The field visit to the Dr Manuel Pedro Azancot de Menezes Maternal and Child Hospital in Luanda, coordinated by WHO, was a key event, in line with the IPU advisory group’s focus on Sexual and Reproductive Health and Rights. Participants, including representatives from UNICEF and UNFPA, demonstrated the multi-faceted nature of WHO partnerships.

Recognition of our partners

The progress made in 2023 would not have been possible without the support and collaboration of our partners. These include the Angolan Government, United Nations agencies, bilateral and multilateral agencies, civil society organizations and the private sector. WHO extends its sincere gratitude to all the partners who have contributed immensely to supporting the Government of Angola in developing the health sector. Their commitment and collaboration have been invaluable in our collective quest for a healthier Angola.
WHO and the Private University of Angola (UPRA) signed a Memorandum of Understanding on 3 August 2023. It is the first MoU signed between WHO and an academic institution in Angola. This underscores WHO’s dedication to reinforcing ties with academic institutions to foster health research and promote effective health strategies, particularly in Angola. UPRA’s involvement in this partnership is important as it enriches academic training, preparing future health professionals for global challenges and contributing significantly to society’s advancement towards a more equitable and resilient health system.

Case Study: The Polio Campaign in Angola

A example of this partnership is Angola’s national polio campaign. In an innovative approach, WHO involved 18 UPRA students as trainers for independent monitors, significantly enhancing the monitoring process. These students actively participated in the national polio campaign, assuming roles as trainers at the provincial level. This involvement not only provided them with invaluable experience but also demonstrated WHO’s faith in the youth’s potential to contribute meaningfully to health initiatives.

The WHO-UPRA partnership is an example of the impact of strategic collaborations in achieving health goals. It aligns with Sustainable Development Goal 17, fostering young leaders who will shape the future of the health sector in Angola. This collaboration not only enhances the capacity of future health professionals but also strengthens the overall health system, contributing significantly to global health objectives.
Conclusion

The WHO Angola 2023 Report encapsulates a year of remarkable achievements and advancements in the health sector of Angola, marking a significant milestone in the journey towards universal health coverage and overall public health improvement. This year was characterized by an effective collaboration with the Government of Angola and partners, including United Nations agencies, bilateral and multilateral agencies, civil society organizations, and the private sector. WHO also officially integrated academic institutions to the health sector dialogue.

Key achievements this year include the development of the Community Health Policy Strategic Plan, bolstering health surveillance and response capabilities, and advancing health systems development. Noteworthy efforts encompassed enhancing epidemiological intelligence, reinforcing disease surveillance and response, and improving maternal and child health services. These accomplishments have been underpinned by WHO’s commitment to continuous learning, quality improvement in emergency preparedness, and a focus on addressing public health challenges through strategic collaborations.

Looking ahead to 2024, WHO is committed to building on this momentum. The focus will be on the effective implementation of the Country Cooperation Strategy (CCS) 2023-2027, developed in alignment with national and international frameworks. Efforts will concentrate on addressing identified challenges such as enhancing the quality of health services, optimizing referral systems, and ensuring equitable distribution of healthcare resources. Particular attention will be given to fortifying training in various health sectors, managing health emergencies more effectively, and continuing to support the fight against HIV/AIDS in collaboration with global initiatives.

As we enter 2024, WHO Angola remains steadfast in its commitment to supporting the Government of Angola and its partners in achieving the ambitious goals set forth for improving health and well-being across the nation, echoing the core values and mission of WHO to promote health, keep the world safe, and serve the vulnerable.
Preventing and Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH)

WHO is committed to promoting a safe and respectful working environment for all its employees and partners. As part of this mission, in 2023 WHO held several sessions to publicize its Standards of Conduct, with particular attention to the prevention of sexual harassment.

During WHO technical meetings in Angola, sessions were held to disseminate WHO Standards of Conduct, with special emphasis on the prevention of sexual harassment. These sessions aimed to make all participants aware of the importance of mutual respect, a safe working environment and the prevention of sexual harassment in the workplace.

Similarly, during the training sessions of the polio vaccination campaigns, all stakeholders including vaccinators, independent monitor and partners were trained on WHO Standards of Conduct. WHO emphasized the need for everyone involved in the campaign to be aware of these standards and to strictly comply with them to guarantee a safe and respectful environment.

WHO’s Standards of Conduct were also disseminated at other events such as the WHO Joint External Evaluation Workshop. WHO’s policy is now to always include a session on its Standards of Conduct at any activity that involves presence.

WHO recognizes the importance of creating a safe and respectful working environment for everyone involved in its activities. Publicizing WHO Standards of Conduct, with a focus on preventing sexual harassment, is a key initiative to ensure that all parties involved are aware of their responsibilities and ethical commitments.

IN 2023 THERE WERE NO REPORTED PRSEAH CASES IN THE WHO OFFICE IN ANGOLA.