



Years In Service

# Africa Humanitarian Action

SERVE EDUCATE EMPOWER

ANNUAL REPORT

# 2018



## **CREDITS:**

AHA acknowledges the contributions (information and images) provided from staff members working in the Head Office, Country Offices and in the Field.

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This report provides a concise overview of the varied activities of Africa Humanitarian Action (AHA) in the countries it served during 2018.

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*Activities in*

<b>14</b>	Cameroon
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# Africa Humanitarian Action

Africa Humanitarian Action (AHA) is a pan-African international non-governmental organisation that provides effective humanitarian relief and recovery as well as advocacy services. Founded in 1994 in response to the atrocities in Rwanda, AHA has supported over 18 million people in 20 African countries to regain their health, dignity and wellbeing.

AHA is guided by universal principles and values. Upholding independence, impartiality and integrity, AHA advocates on humanitarian issues. AHA takes responsibility for its actions and is accountable to those with whom it works and its programme supporters.

The strength of AHA is in its African roots and reach. AHA is inclusive and makes use of the diversity and resources of the people with whom it works as it endeavors to deliver sound programmes and outcomes. AHA embraces change and innovation as it seeks results that last.

Affected populations are at the forefront of all AHA activities, which ensures that its field offices respond appropriately to people's needs in a timely and effective manner. Each field office is supported by a Country Office, which is backed by the Head Office team in Addis Abeba, Ethiopia.

AHA's Head Office is guided by the secretariat headed by the President, who works with an executive board that sets strategic priorities, and monitors and evaluates performance standard and results. The board is appointed by AHA's International Assembly of Trustees, whose members determine policies and ensure quality and accountability to affected populations and to donors.



# ***Vision***

*An African continent whose local institutions can empower and sustain its peoples and communities in human security, thereby promoting peaceful development and prosperity.*

# ***Mission***

*AHA will, without distinction to the root causes of the needs:*

- a) Respond to crises, conflicts and disasters in Africa with regard to refugees, returnees, internally displaced persons, migrants, and their host communities; and make them better prepared to deal with their concerns themselves;*
- b) Inform and advise the international community, governments, the civil society, and the private sector on humanitarian issues of concern to Africa; and promote collaboration among them accordingly.*
- c) Support institutional and organisational development efforts within its own sphere of competence, prioritising countries where it operates or specifically has been solicited to do so.*
- d) Study, explore and further develop its experiences and promote them to the benefit of other African organisations and civil society.*



# Assembly of Trustees

## Chair

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## Co. Chair

Dr. Sheikh M. H. Al Amoudi, business leader and philanthropist, Saudi Arabia

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Mrs. Patricia Hajabakiga - Rwanda  
Amb. Teferra Shiawl, diplomat - Ethiopia  
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# Partners & Supporters *Since 1994*

## AHA's partners and supporters include:

Active Learning Network for Accountability and Performance (ALNAP)  
Africa Development Bank Group (AFDB)  
Africa Initiative for Relief & Development (AIRDA)  
Africa Union Commission (AU)  
Dan Church Aid (DCA)  
Danish Refugee Council (DRC)  
Engendered Health Ethiopia  
European Civil Protection and Humanitarian Aid Operations (ECHO)  
Government of Angola  
Government of Burundi  
Government of Cameroon  
Government of Chad  
Government of DR Congo  
Government of Ethiopia  
Government of Guinea (Conakry)  
Government of Kenya  
Government of Liberia  
Government of Namibia  
Government of Rwanda  
Government of Siera Leone  
Government of Somalia  
Government of South Sudan  
Government of Sudan  
Government of Switzerland  
Government of the United States of America  
Government of Uganda  
Government of Zambia  
International Council of Voluntary Agencies (ICVA)  
International Medical Corps (IMC)  
International Officer for Migration (IOM)  
Liberia Refugee Repatriation and Resettlement Commission (LRRRC)  
Lutheran World Federation (LWF)  
Norwegian Refugee Council (NRC)  
Pathfinder Ethiopia  
Reproductive Health Uganda (RHU)  
Special Emergency Activities to Restore Children's Hope (SEARCH)  
Swedish Refugee Aid  
The Bureau of Population, Refugees, and Migration (BPRM)  
UBS Optimus Foundation  
UK Department for International Development  
UN Children's Fund (UNICEF)  
UN Economic Commission for Africa (UNECA)  
UN Food and Agricultural Organisation (FAO)  
UN High Commissioner for Refugees (UNHCR)  
UN Officer for the Coordination of Humanitarian Affairs (OCHA)  
UN Population Fund (UNFPA)  
UN Women  
UN World Food Programme (WFP)  
UN World Health Organization (WHO)  
US Agency for International Development (USAID)  
World Bank

# President's Message

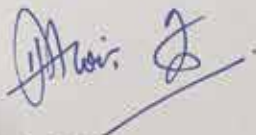
The coming year marks AHA's 25th anniversary. We plan to commemorate this milestone in Kigali, Rwanda. We will review our achievements and trials in the provision of humanitarian assistance to the most affected populations in Africa since our start there in 1994. We have worked tirelessly to ensure that basic, comprehensive life-saving health care is provided to refugees, IDP's under our care.

Over the years, AHA's core field work covered mainly the domains of health and nutrition - SGBV, HIV AIDS, immunization and WASH; child protection and food assistance as well as community livelihood strengthening projects. AHA was also called upon into primary education and shelter assistance. AHA has worked to ensure that returnees are well integrated back into their communities. We have been tested in challenging situations and hostile environs. Despite the often-felt institutional fragility, for lack of capacity strengthening resources, we have endeavored to contribute in building up African civil society and have ceaselessly tried to bring our humble voices to the exchanges within the global humanitarian community.

This year we have worked in fewer country-based programmes. AHA has reached over 950,000 refugees IDPs and returnees, as well as host communities in six countries. We have met, and in some cases exceeded, targets set at the beginning of the year. Also in the course of 2018, following an in-house study, AHA resolved to expand its engagement in the migration sector. AHA has since been actively engaging donors and partners to implement programs for integrating migrants and returnees into their countries of origin. There are currently two programs in the pipeline with IOM in Ethiopia and the European Returnee Integration Network (ERIN) in Sudan. In the area of preparedness, we partnered with the International Medical Corps (IMC) to develop standardized training tools for emergency responders and launched pilot trainings.

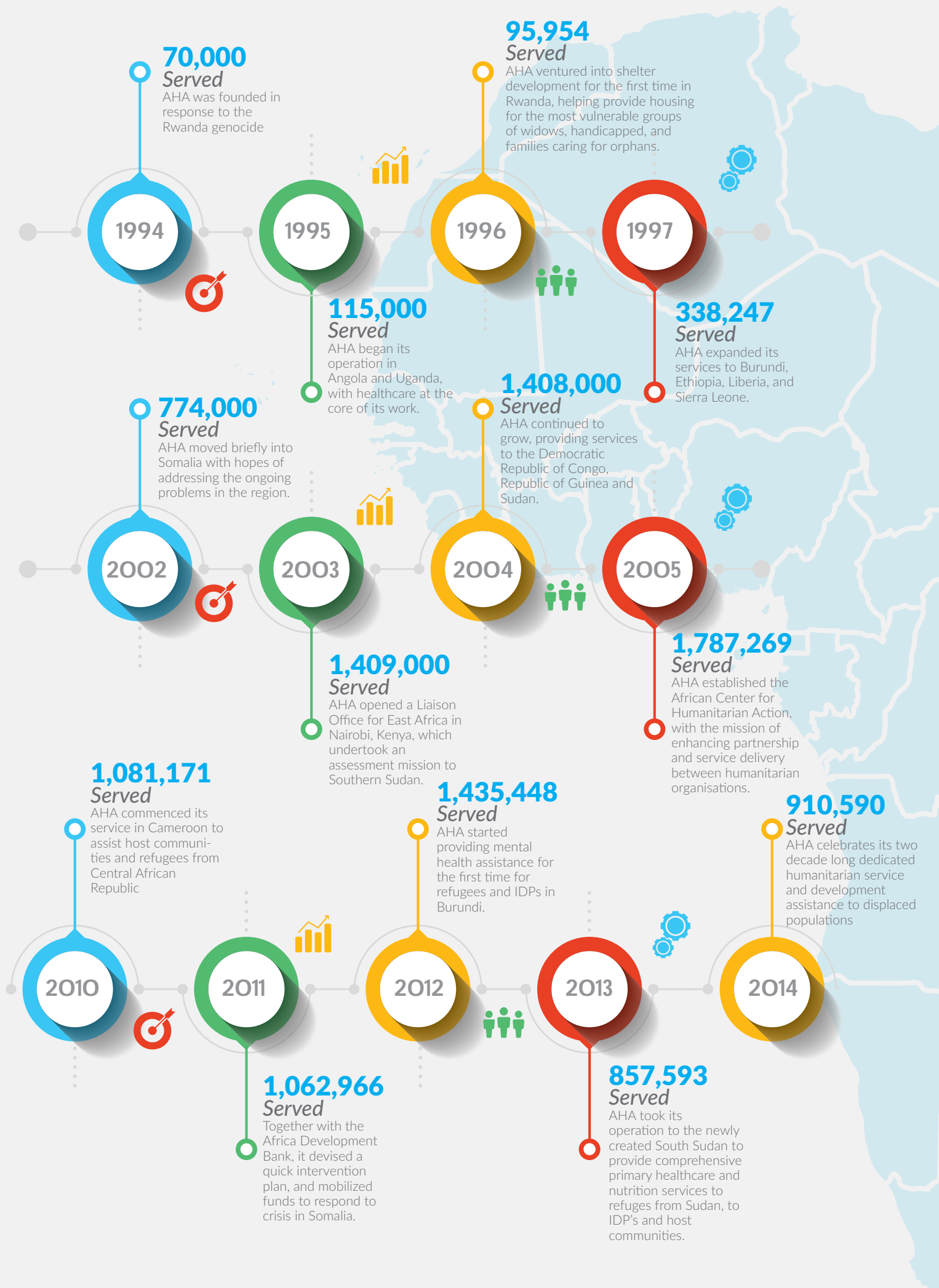
This is the 24th year that I am contributing a message for our annual report, and I have taken this opportunity to look back at our previous issues. Obviously, we have been religiously adhering to didactic country by country activity reports with photos and, at times, elaborate graphics. I believe we should be able to dwell more on impact in our future issues, and come out more frequently in electronic formats.

The hurdles to overcome are still plenty. But, AHA remains committed to tackling humanitarian response issues in the continent with unwavering perseverance. As AHA approaches its 25th Anniversary, we are wiser and better positioned to continue to address the continents humanitarian calls.



Dawit Zawde





**205,477  
Served**

AHA revised financial and personnel management procedures and its field operation guidelines to ensure further organisational accountability and transparency.

1998

1999

**238,999  
Served**

AHA executed an emergency intervention in response to the Algerian Earthquake while initiating Family Planning/Reproductive Health and HIV/AIDS projects in 30 rural locations of Ethiopia.

**384,557  
Served**

With a new determination for growth, AHA called on financial support from larger institutions as it expanded even further into the African continent, branching into Zambia.

2000

2001

**2,456,529  
Served**

AHA secured a consultative status with the United Nations Economic and Social Council (ECOSOC). In addition, AHA signed a memorandum of partnership with the African Development Bank, to build AHA's institutional capacity.

**232,335  
Served**

AHA diversified its services in Namibia after receiving full responsibility of Osire Refugee Camp management by UNHCR.

**3,657,253  
Served**

AHA launched its Volunteer Programme to enable young humanitarians better understand the challenges facing the African continent.

2006

2007

**983,200  
Served**

AHA produced its toolkit on the "Responsibility to Protect: from Non-interference to Non-Indifference".

2008

2009

**2,894,386  
Served**

AHA celebrates its 15th Anniversary and forges forward in its mission of providing humanitarian assistance to alleviate human suffering in Africa.

**826,038  
Served**

AHA expanded its operational footprint in the Republic of Djibouti to help with the influx of refugees from Yemen.

2015

2016

**1,780,547  
Served**

AHA secured registration in the United Republic of Tanzania.

2017

2018

**992,196  
Served**

AHA expanded its engagement to include Migration, Developed a training tool for emergency response and launched a pilot training with IMC and MM. AHA head office endorsed strategic policy guideline titled "AHA beyond 25" which was the result of the internal review conducted in 2017.



## GUINEA

2004

📍 Conakry

## SIERRA LEONE

1997

📍 Kambia District

## CHAD

2005-2006

📍 Hajer Hadid, N'Djamena

## LIBERIA

1997-2017

📍 River Cess  
📍 Bomi,  
📍 Gbarpolu,  
📍 Nimba,  
📍 Grand gedeh,  
📍 Montserrado  
📍 Grand Cape Mount

## NAMIBIA

2001-2017

📍 Ossire Refugee Camp  
📍 Kassava Transit Camp  
📍 Onambutu Camps  
📍 Katwitwui-Oshikango  
Border Post

## ANGOLA

1995- 2006

📍 Moxico Province  
📍 Zaire Province  
📍 Uige Province  
📍 Luanda Province

## ZAMBIA

2000-2010

📍 Kaoma District  
📍 Shangombo District  
📍 Meheba refugee Settlement  
📍 Lusaka

## Camp Management and Logistics

- Camp management
- Non-food items- (NFI)
- Demining/awareness
- Warehouse management

## CAMEROON

2010-2018

📍 East Region

## Education

- Preliminary School
- Health training school
- Non-formal and pre-school education

## Shelter & Infrastructure

- Emergency shelters
- Transitional shelters (Construction & rehabilitation)
- Infrastructure (Health facilities, School, Dam construction & rehabilitation)

## Livelihood

- Farming
- Skill training
- Revolving fund (CBI)
- Income generating activity

20  
COUNTRIES

Interve

25  
YEARS

## Food Security & Nutrition



- General food distribution
- Supplementary and blanket feeding
- Therapeutic feeding



## Health Care



- Preventive and curative health services
- RH and HIV/AIDS
- TB and Malaria control
- Mental health

- Water
- Hygiene and Sanitation



## WASH

- Child protection
- SGBV -Prevention & Response
- Integration/re-integration



## Protection

### ALGERIA

1999

• Northern Algeria

### SUDAN

2000-2018

- North Darfur regional state
- Dar Al Salam, Kabkabiya, Al Fasher Rural, Dar Zaghawa, Korno, Kutum, Saref-Omra, Tina, & UmBaru- Locality
- Shangal Tobay, Shadad and Korma, IDP Camp

### DJIBOUTI

2015-2016

- Ali Addeh
- Holl Holl
- Markazi

### ETHIOPIA

1997-2018

- Addis Abeba – Head Office
- Afar Region
- Tigray Region
- Somali Region
- Oromia Region
- SNNP Region

### SOMALIA

2011-2012

- Mogadishu

### SOUTH SUDAN

2013-2018

- Ruweng/Unity State,
- Pariang & Jam Jang County
- Ajuong Thok Refugee Camp

### KENYA

2003

- Nairobi

### UGANDA

1995-2018

- Kyaka II Refugee Settlement, Kyegegwa District,
- Rwamwanja Refugee Settlement, Kamwenge District

### RWANDA

1994-2019

- Gisenyi, Muhoror, Nkamira, Kijote, Nyarushishi Transit Center
- Bugesera & Nyanza Reception Centers
- Huye & Kigali urban project
- Kiziba, Kigeme & Mugombwa refugee camps
- Kibuye hospital
- Rulindo District

### BURUNDI

2002-2015

- Gasorwe-Kinama Camp,
- Musasa Camp,
- Bwagiriza Camp
- Kavumu Camp

ntions



# Activities: Head Office

## ***Institutional Review***

As we prepare to celebrate our 25 years of service, we embarked on an institutional review in 2017 with a mission to assess past and future activities. Accordingly, the president launched an enquiry and received more than 80 contributions from different stakeholders.

These responses were compiled into a document named AHA beyond 25 and later presented for a review at the Executive Board Meeting held in January 2019. The document which consists of four sections; purpose, activity, organisation and resource were thoroughly discussed by the different participants comprising of AHA trustees, Board members, AU representative, partners and the private sector.

Based on the outcome of the discussion and recommendation from the meeting, the Executive Board passed two main decisions: a) to review the organisation's statutory documents and prepare draft amendments that are in line with the strategic recommendations outlined in the "AHA Beyond 25" document. B) to proceed with a plan to hold the 2019 General Assembly and 25-year Anniversary in Kigali, Rwanda, in 2019.

## ***Emergency Response Preparedness***

As part of the global emergency response and recovery partner engagement, AHA continued working with IMC and Mercy Malaysia (MM) to strengthen the global emergency response capacity. In the reporting period, AHA along with the consortium members focused

on creating a centralized repository of existing training resources and validating, revising and alignment of the training tools with the competency framework and Operation Readiness programme. The consortium also developed a pre - and post - assessment tool and conducted successful pilot testing that involved AHA, IMC and MM clinical and non clinical staff.

## ***Migration Response***

1) ***Migration Policy Development*** - AHA mindful of the emerging challenges of migration facing the continent and to mitigate the sufferings of migrants, we engaged in an internal and external consultative process on how to lend our programming and advocacy capabilities to promote the principles of humane and orderly migration from, within and out of Africa, ensuring asylum space throughout the process.

A longstanding observer member of IOM, AHA now aims to advance coherent, evidence-based migration policies, and contribute towards solutions in the operational challenges through programming that upholds the dignity and wellbeing of migrants. AHA will position itself in discussions and policy formulation processes at all levels in Africa and beyond to address challenges of migration.

2) ***Returnee Reintegration*** - AHA-Ethiopia in partnership with IOM is planning to implement programme for Ethiopian returnees from Southern Africa. The main objective of the programme is to provide sustainable income generating activities while responding to the immediate needs of the returnees in terms of health, nutrition, water and sanitation, education and protection.

# Public Advocacy

## National

AHA working alongside existing local structures, and international partners - bilateral, multilateral, and NGOs, shares its vast experience on matters relating to refugees, returnees, IDPs and asylum seekers. We continue to advocate on the different platforms towards an environment of sustainable and self-reliant development for refugees, returnees, internally displaced persons, and the host community. AHA works in partnership with UNHCR and relevant government sector offices and routinely cooperates with local organisations in carrying out its activities and policy advocacy goals.



## Regional

AHA builds on its established collaboration status with African inter-governmental bodies such as the African Union (AU), and creates linkages with research organisations towards addressing the root causes of human vulnerability. Based on this established collaboration, AHA has been able to promote, facilitate and participate in dialogue and improve relations amongst governmental organisations, the UN system, local/international NGOs, and civil society.

AHA is currently a member of the steering committee for the AU's theme of the year: 'The Year of Refugees, Returnees and Internally Displaced Persons: Towards Durable Solutions to Forced Displacement in Africa'. AHA has attended several regional consultative meetings and high-level events towards the development and organisation of this commemorative events.



In 2018, AHA was an invited panellist at the 6th Annual Humanitarian Symposium held in Nairobi, Kenya. AHA shared its vast experience on 'The Role and Contribution of Civil Society organisation as part of the multisector vision of achieving participation and ownership by affected populations in humanitarian responses'.

## International

AHA continues to play an important role in the international humanitarian policy advocacy arena. In March 2018, AHA was once again elected to become ICVA's Board member for a period of three years. Since then, AHA has been actively participating in all important board functions. AHA is also a member of two sub committees within the ICVA board namely: Policy and Advocacy Committee, as well as Membership Committee. AHA hosts ICVA's regional representation in Addis Ababa. Similarly, AHA regularly attends international humanitarian policy dialogues to deliver an African perspective.







5<sup>th</sup>  
ANNIVERSARY

1994-2019

# Activities in Cameroon



## 105,333

Total Beneficiaries  
Refugees & Host community



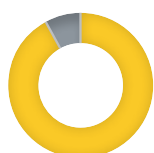
NUTRITION



PRIMARY  
HEALTH CARE

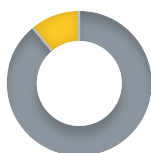


REPRODUCTIVE  
HEALTH AND HIV/AIDS



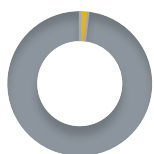
## 97,000

Consulted at  
the OPD



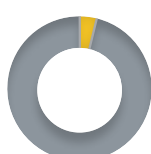
## 12,600

Children under-  
five screened for  
nutritional status



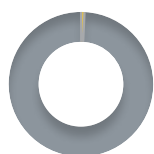
## 363

Screened for TB



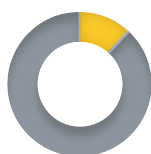
## 2,752

Deliveries



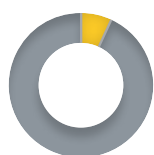
## 8

Clinical care for  
GBV victims



## 13,000

Blanket feeding  
for children



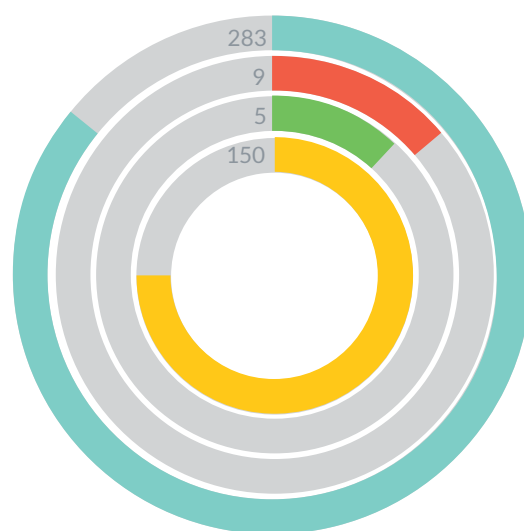
## 4,600

Families  
Sensitization on  
IYCF



## 1,900

Therapeutic feeding  
for children



Field Staff  
Country Office Staff  
International Staff  
National Staff



## 2,572,800



**Lolo, Mbile, Gado and  
Ngarisingo**

Districts - Garoua Boulai, Betare  
Oya, Bertoua, Batouri, Ndelele  
and Yokadouma



AHA Cameroon worked closely with the Ministry of Health and provided quality health care service for 105,333 refugees and 16,794 host communities. AHA improved the health services through staff capacity development; mentoring newly recruited community healthcare workers; construction and rehabilitation of health facilities; and supplying medical equipment to health facilities.



# Activities in Ethiopia



## 104,122

Total Beneficiaries  
Refugees & Host community



WASH



SGBV



SHELTER



REPRODUCTIVE  
HEALTH AND HIV/AIDS



PRE-SCHOOL AND ADULT  
EDUCATION



## 1058

Received pre-school  
and adult education



## 28,000

Sensitized on  
hygiene



## 141

Latrines  
constructed



## 123

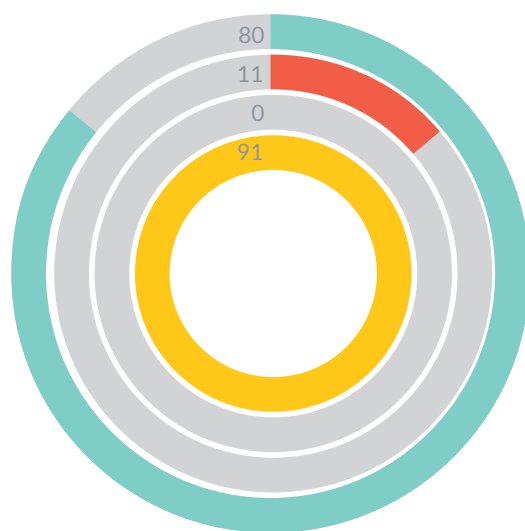
Shelter  
Constructed

## 28

Rehabilitation of  
water points

## 300

Beneficiaries received training  
on SGBV



- Field Staff
- Country office Staff
- International Staff
- National Staff



## 1,027,746



Afar Region,  
Aysaita and Barahle refugee camps



AHA Ethiopia implemented various programmes in the Afar region for total of 28,481 refugees and 75,641 host communities. The 2018 project aimed at improving the overall living condition of Eritrean Afar refugees residing in Aysaita (15,486) and Barahle (12,995) refugee camps. AHA improved and sustained existing services, and ensured basic services were provided. With regard to the contribution/impact of the refugee programmes to the local hosting community, AHA provided potable water to the local host community adjacent to the camps and involved the local host community in various activities of HIV/AIDS, SGBV, child protection services as well as skilled labour and work opportunity within the refugee camps. In the reporting year, AHA has undertaken the handover and closeout process of shelter programmes in Dollo ado refugee camp, Somali region.

# Activities in Rwanda



**61,717**

Total Beneficiaries  
Refugees, Host community & Returnees



NUTRITION



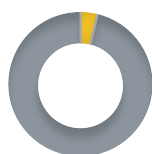
REPRODUCTIVE  
HEALTH AND HIV/AIDS



CAPACITY  
BUILDING

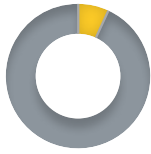


PRIMARY  
HEALTH CARE



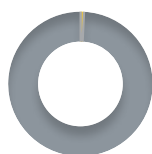
**2,019**

Treated for Malaria



**3,814**

Beneficiaries in  
supplementary feeding  
programme



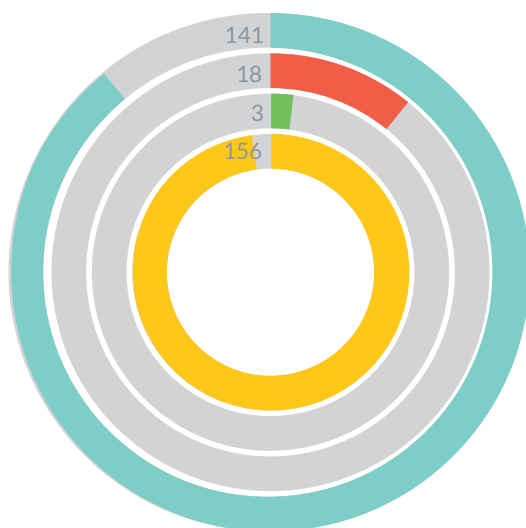
**47**

Treated in  
Therapeutic feeding  
programme



**6,879**

Counselled and  
tested for HIV



- Field Staff
- Country Office Staff
- International Staff
- National Staff



**2,106,155**



Kiziba, Kigame and Mugombwa Refugee camps  
Kijote and Nyarushishi Transit Centers  
Bugesera and Nyanza Reception centers  
Kiglai and Huye districts

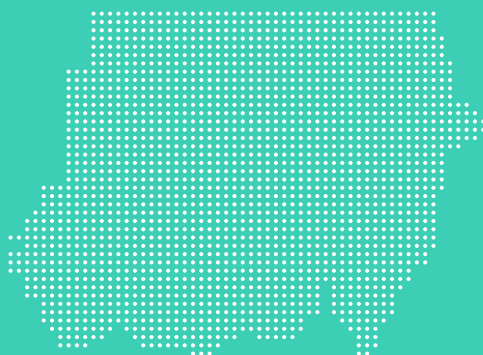


AHA has been operating in Rwanda since 1994. We have since played a major role in improving the health care service provided to beneficiaries. In 2018, AHA Rwanda delivered comprehensive primary health care services to refugees, returnees and host community.

In the primary health care, AHA Rwanda among other activities, increased the immunization coverage to 95% and provided indoor residual spray for 2,016 households. We strengthened the nutritional screening, supplementation and therapeutic programmes for under 5 children and lactating and pregnant mothers. Patients with chronic illnesses similarly benefited from blanket feeding programme. In the reproductive health programme, counselling and testing for HIV/AIDS were further strengthened. Safe motherhood services including antenatal care, delivery, and postnatal care reached over 95% of the beneficiaries in all the refugee camps. In addition, epidemic preparedness activities are put in place in transit and reception centers to prevent and respond to a possible epidemic cases.



# Activities in Sudan



## 400,581

Total Beneficiaries  
Returnee's, IPD's & Host community



FOOD SECURITY  
AND LIVELIHOOD



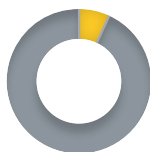
REINTEGRATION OF RETURNEES

## 90

Protection committee members trained  
on peace building and conflict resolution

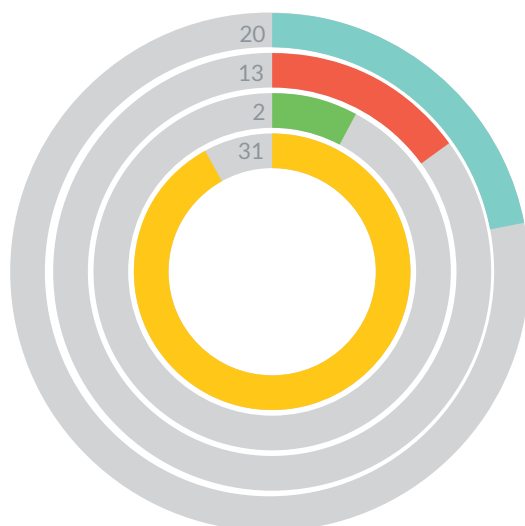
## 3,524.41<sub>MT</sub>

Distribution of food ration



## 35,926

Returnees  
reintegrated



Field Staff  
Country Office Staff  
International Staff  
National Staff



## 1 Primary school

Constructed



## 2 Police stations

Constructed



## 472,304.70

## 6 Grinding machines

Installed

## 360 goats have been provided to 120

selected vulnerable/  
destitute returnee families



North Darfur regional state  
Shangal Tobay, Shadad and  
Korma IDP Camps.





AHA Sudan provided humanitarian services for a target population of 400, 581 comprising of IDPs, returnees and host community. The programmes focused on returnee reintegration; protection & promoting peaceful coexistence among returnees; and general/emergency food/nutrition assistance to IDPs and host community. In 2018, AHA constructed police posts and primary school. To enhance smooth learning process, grinding mill machines were planted in six schools in six localities. AHA also conducted training on community based peace building and conflict resolution, and awareness raising campaigns on returnees and local community rights.

# Activities in South Sudan



## 49,111

Total Beneficiaries  
Refugees & Host community



NUTRITION



PRIMARY  
HEALTH CARE



HYGIENE  
PROMOTION



### 37,593

Trained on  
Hygiene



### 9,108

Supervise hygiene  
related activities  
in schools



### 35,579

Nutrition programme  
beneficiaries (OTP,  
TSFP, IYCF, Screening)

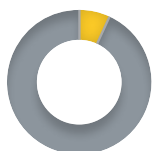


### 618

Mental Health and  
Psychosocial Support

### 1,465

Constructed new drop-hole  
covers



### 2,528

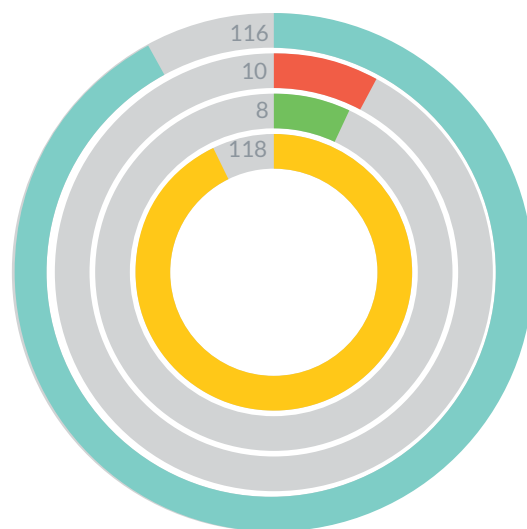
Sensitized on sexual  
and reproductive  
health information

### 2,055

New rubbish pits  
constructed

### 103,785

Consultation at OPD,  
Reproductive Health, HIV/AIDS  
& TB



- Field Staff
- Country Office Staff
- International Staff
- National Staff



### 3,669,386



Ruweng/ Unity State,  
Jam Jang County,  
Ajuong Thok Refugee Camp



In 2018, AHA South Sudan services benefited a total of 49,111 refugees and host communities. The programmes include preventive and curative primary health care, hygiene promotion, comprehensive reproductive health care, nutrition and psychosocial programmes. Some of the achievements include: effective treatment of 7,567 malaria, 3,803 diarrhoea and 9,013 pneumonia cases among under 5 children in the community by community health workers; 12 school and 19 youth friendly health education sessions on reproductive health; community awareness creation sessions on HIV/STI testing and counselling; ensured availability of psychotropic drugs for the treatment of mental health illnesses; and provided tuberculosis prevention, diagnosis and management services.

# Activities in Uganda



**271,332**

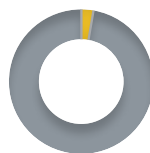
Total Beneficiaries  
Refugees & Host community



NUTRITION



PRIMARY  
HEALTH CARE



**5,071**  
live births

**100%**

Proportion of births attended  
by skilled HW

**291,450**

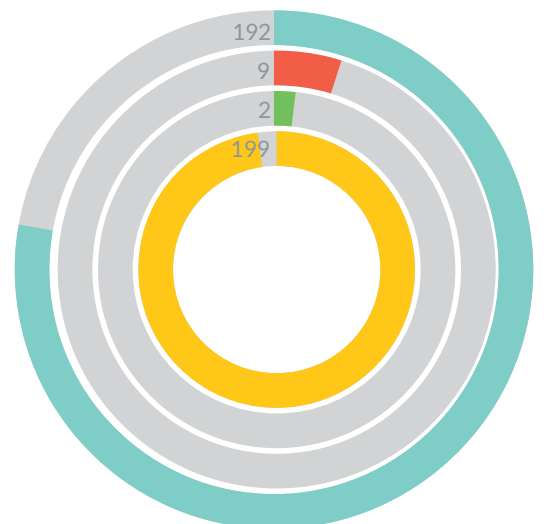
Total Number of  
consultations

**100%**

Rape survivors who received  
PEP in <72 hours

**93.6%**

Immunization coverage for  
measles



- Field Staff
- Country Office Staff
- International Staff
- National Staff



**2,254,460**



Kyaka II Refugee Settlement, Kyegegwa District,  
Rwamwanja Refugee Settlement, Kamwenge District

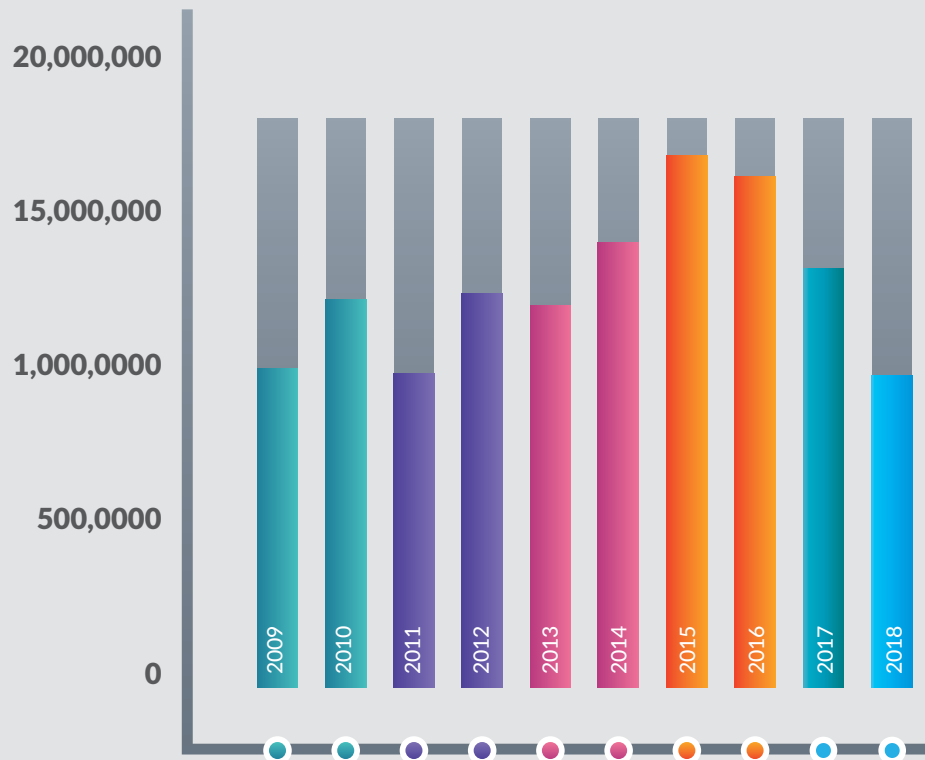




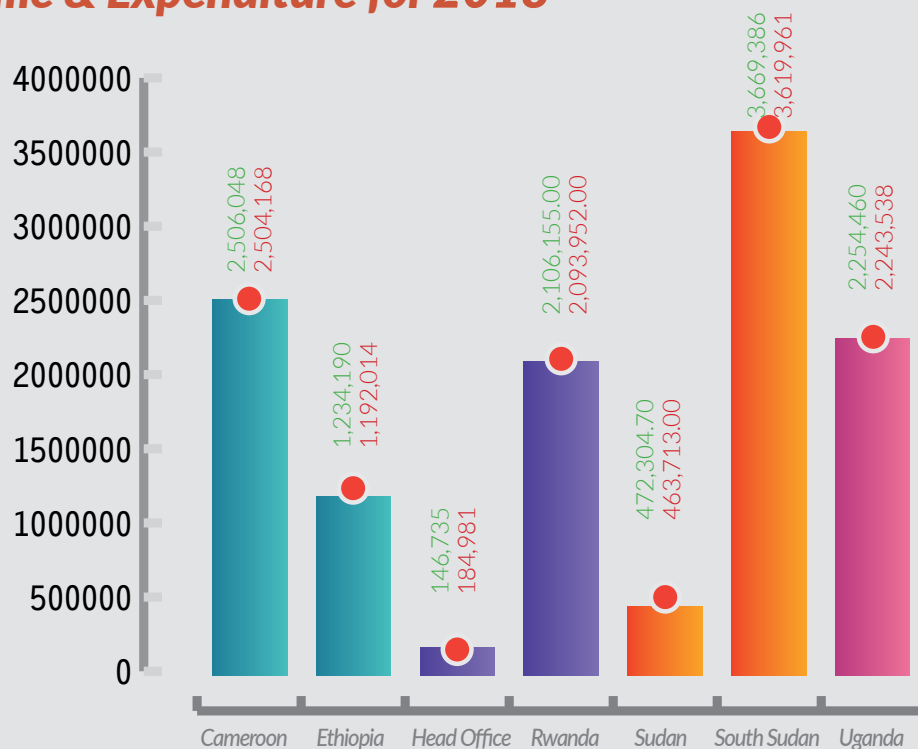
AHA Uganda supported 140,232 beneficiaries through a wide range of health care services. The programme benefited both refugees and the host community. In 2018, AHA Uganda addressed the inadequate access of government primary health care services by providing services in a range of sectors to PoCs through 5 health centres and 12 health outposts. In collaboration with the Village Health Teams (VHTs), AHA strengthened surveillance for potential disease outbreak like Cholera and Ebola leading to a successful prevention of outbreaks. In addition, AHA provided both preventive and curative nutrition programme including IYCF/e activities to children through the establishment of 3 breast feeding corners and mother baby pair counselling.

# Finance and Audit

## Income for 10 years



## Income & Expenditure for 2018



## 27





## *Footprints:*

Algeria  
Angola  
Burundi  
Cameroon\*  
Chad  
Djibouti  
DR Congo  
Ethiopia\*  
Guinea  
Kenya  
Liberia  
Namibia  
Rwanda\*  
Sierra Leone  
Somalia  
South Sudan\*  
Sudan\*  
Tanzania  
Uganda\*  
Zambia

### *\* Countries served in 2018*

- AHA is a registered Charity in Switzerland.
- AHA is a registered Public Charity in the US and a tax exempt non-profit organization under the US Internal Revenue Code 501 (c)(3).
- AHA is a long time partner NGO to the UNHCR and an awarded partner agency of the AU.
- AHA is a member of ICVA and observer member of the IOM
- AHA is an NGO with Special Consultative Status with the UN Economic and Social Council (ECOSOC).







*We welcome your support*

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# AHA