Africa Humanitarian Action



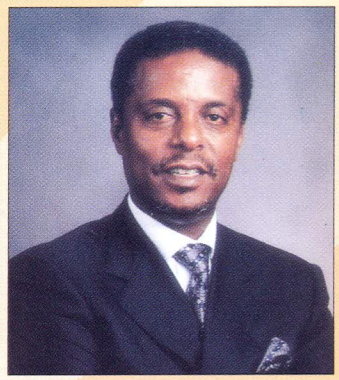
Annual Report 2004

Photographs by: Abraham Fisseha
Gedion Kifle
Evan Schneider (cover)

Contents

	page
Message from the President Ready for a New Decade	2
Purpose & aims	4
Objectives & activities	5
Country reports	
Angola, Burundi	6
Congo, Ethiopia	7
Guinea, Liberia	8
Namibia, Rwanda	9
Sudan, Uganda	10
Zambia	11
Finance	12
Report on the International Symposium	13
Organizational structure	14
Report on the Third Assembly of the International Trustees	15
Trustees & friends	16
AHA Offices	back cover

Ready for a New Decade



Dr. Dawit Zawde, President & CEO

Introduction

A little over ten years ago, Africa Humanitarian Action was born as an African humanitarian response to the genocide in Rwanda. Founded by a few farsighted African relief and development professionals, Africa Humanitarian Action was then a fledgling NGO handling only that one-country project.

At its *fifth anniversary*, Africa Humanitarian Action had made such significant progress that it was ready and able to respond to the crisis of war, hunger and disease in West Africa, even though we had to struggle to raise the necessary funds.

Commemorating our *tenth anniversary* last year, we noted with pride and a sense of fulfilment that Africa Humanitarian Action had earned wide-spread recognition as an experienced and well-functioning organisation, which permitted it to go into Darfur, Sudan swiftly in response once more to violence, displacement and desperate need.

Today our dedicated partners and staff supported by communities and local governments provide assistance and services across Africa to people affected by instability, crises and disasters. Africa Humanitarian Action is a regional and international agency with a long-term perspective to address Africa's needs.

African Growth and Development

Most of the challenges we African NGOs face are common to us all. Yet a gap – in communication and resource - had kept us apart preventing us from understanding our common interests or realising our combined strengths. After several years of hard work Africa Humanitarian Action has successfully brought together its partners in Africa and in the North with an African-set agenda. The event attracted representatives of hundreds of leading aid agencies and frontline NGOs.

In collaboration with the African Union (AU), Africa Humanitarian Action organised the International Symposium on "Building the Capacity and Resources of African Non Governmental Organisations" in Addis Abeba in December 2004.

The Symposium was supported by the Japan International Cooperation Agency, the Swedish International Development Agency, the United Nations High Commissioner for Refuges, the International Planned Parenthood Federation and other sponsors.

As we marked our tenth anniversary, we much appreciated the message from the United Nations High Commissioner for Refugees *"Africa Humanitarian Action has been instrumental in the movement to enhance the positive role played by national NGOs and civil society organizations across the continent and it successfully continues to link global humanitarian resources with grass-roots African actions.*

With crises in the DR Congo, Liberia, Rwanda, Sierra Leone and Sudan having brought extensive lessons to the global humanitarian system, the Symposium was a concerted effort to translate those and other lessons into ways to empower African NGOs to address these issues more effectively.

To support Africa's future, co-operation between the African Union and the international community has led to new partnership arrangements, notably the new partnership for Africa's Development. The Symposium offered conclusive evidence that the time is ripe for new partnerships with the non-governmental sector as well.

After careful deliberations the Symposium endorsed:

The imperative for African NGOs to have humani tarian response and intervention funds at their disposal. Symposium participants pledged to advocate that not less than 25% of all contributions to humanitarian action in Africa are channelled directly through African NGOs.

The need to provide for a minimum of 10% to cover both direct operational overheads and a contribution towards institutional core costs, in addition to direct programme support and costs.

The need for a platform for dialogue, research and training on humanitarian issues and actions in Africa, including organisational development and resource mobilisation.

Building on the Symposium, the creation of the *African Centre for Humanitarian Action* and other initiatives will not only increase the resources and capacity of African NGOs but raise their international standing.

The Third Assembly

The Third Assembly of International Trustees met in December 2004. It took note of the progress made in establishing national associations in the countries where we operate. Among six new trustees, four were representatives of our Country Associations in Angola, Ethiopia, Rwanda and Zambia.

The Assembly considered our programme results and the lessons gained in the first ten years of services. It set the strategic direction for our activities in 2005-2007.

The Assembly also marked the tenth anniversary of Africa Humanitarian Action with a reception hosted by Sheraton Addis, and recognised ten individuals who have rendered extraordinary services to Africa Humanitarian Action and the millions the organisation has helped in its first decade.

Activities

In 2004, Africa Humanitarian Action continued its health and social programmes for refugees and returnees in Angola, Burundi, Congo (DR), the Republic of Guinea, Liberia, Namibia, Rwanda, Sierra Leone, Uganda and Zambia. In Ethiopia, our Reproductive Health and HIV/AIDS programme progressed. In September, we launched an emergency intervention in Darfur and started planning for support to South Sudan in 2005.

These programmes and operations are highlighted in this annual report. Let me just note that for the tenth consecutive year, we have received a clean bill for all our programmes by our partners and auditors alike.

We continued our longstanding partnerships with UNHCR and Pathfinder International, and maintained our co-operation with the AU, UNECA, OCHA, IPPF and other African and international institutions and agencies. We thank them for their confidence, understanding and support.

Summing Up

At times we have to contend with unfair competition from better funded NGOs for intervention space. We still struggle with our partners over programme content and relevance, late payments, overheads, and much more. But, on the whole it's been a positive and productive year.

We felt assured and honoured by the message from the Chairperson of the African Union Commission, Alpha Oumare Konare: *"AHA has demonstrated the primacy of partnership that implied the need to work out new mechanisms to bridge the gap between the continental policy organ, the AU, the international donor community and the beneficiaries."*

We are determined that the much needed *African Centre for Humanitarian Action* will be up and running in the near future. We are convinced that African NGOs will benefit, as will our Northern NGO colleagues, and our UN partners OCHA, UNHCR, UNICEF, WFP and WHO.

We are also determined to involve the corporate sector with their innovative and progressive methods, already providing education, health and social services to many of Africa's citizens. I am sure there are many ways we could work together in a positive partnership in the humanitarian arena as well, including the launch of that vital new institution, the *African Centre for Humanitarian Action.*

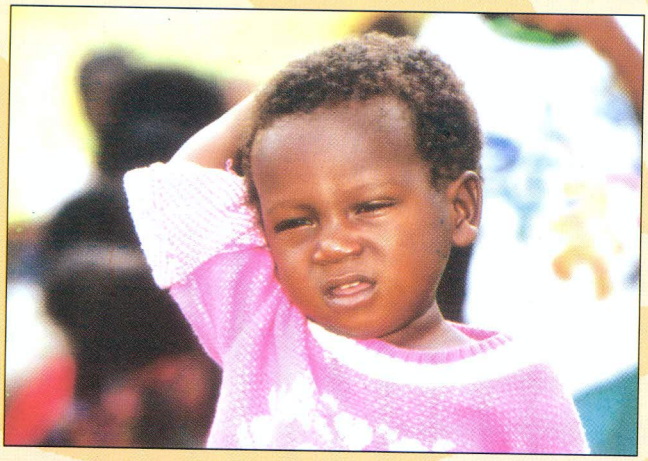
I would like to pay tribute to all those individuals and institutions who have continued to support Africa Humanitarian Action. I would also like to express my appreciation and thanks to our Trustees and Friends, and to our staff for their contributions and support to common efforts. You have all provided inspiration and sound advice.

Addis Abeba
July 2005

Purpose

Alleviating crisis in Africa is, first and foremost, the responsibility of Africans themselves. Africans must be seen not just working alongside their international partners, but taking leadership roles in providing assistance to their people.

Africa Humanitarian Action (AHA) is African in spirit, concept and composition. Our mission is to help restore Africa's self-esteem and change the image of a global backwater to that of a continent capable of handling crisis through credible African designed solutions.





Founded in 1994, AHA is an international humanitarian and development organization with a commitment to the advancement of African civil society.

- *AHA is engaged in the delivery of humanitarian and development assistance and services to African communities, in particular to refugee population created by instability and disasters.*
- *AHA aims to strengthen the capacity of local communities by empowering them through education, information and technical assistance.*
- *AHA promotes the rights, interests and empowerment of groups that are economically, socially and culturally disadvantaged or excluded, i.e. people living with HIV and AIDS, women, children, orphans, the elderly, and disabled persons.*
- *AHA is result-oriented with effective and economic response-capacity. It regularly improves its performance and standards by using experience and lessons gained to advance its competences, resources, relationships, and learning abilities.*

OBJECTIVES

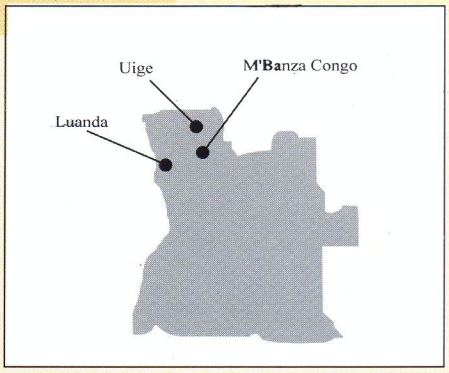
- To deliver emergency and recovery health care and related services to communities affected by conflict and disaster.
- To fight against HIV and AIDS, tuberculosis, malaria and other poverty related communicable diseases.
- To build local capacity in conflict prevention and disaster preparedness by equipping communities with the knowledge and skills required to deal with such situations.
- To promote African humanitarian organizations and the development of their institutional capacity.

ACTIVITIES

- Emergency & rehabilitation health services to refugees, displaced persons returnees and local communities, including rehabilitation of infrastructure.
- Training of local health and community workers and traditional practitioners. Capacity building uses indigenous knowledge and local resources.
- Introduction of health information systems to record morbidity & mortality patterns.
- Immunization for pregnant and lactating women, and children against vaccine-preventable diseases and epidemics.
- Pre and post natal care and education for families, including breastfeeding, nutrition, sanitation and hygiene including prevention and treatment of diarrhea.
- Reproductive health education, counseling on sexual behavior, contraception, birth spacing.
- Information and education on HIV and AIDS, tuberculosis, malaria and sexually transmitted diseases. Counseling, care and other support services for people living with AIDS.
- Supply of low cost pharmaceutical drugs and health equipment and supplies local health facilities.
- Provision of clean water and environmental sanitation and building of latrines, refuse-pits, drainage and bath shelters.
- Restoration of public health services and physical rehabilitation of destroyed facilities, including houses and access roads.
- Education in accident and injury prevention from land mines.
- Reintegration of child soldiers and assistance to victims of torture and violence.
- Maintain database of African professionals available for humanitarian and development work.

COUNTRY PROGRAMME REPORTS

ANGOLA



Program start date: 1996

Operation locations:

Moxico Province - Cazombo, Lunachi, Canda, Calunda, Cainda and Lumbela N'guimbo

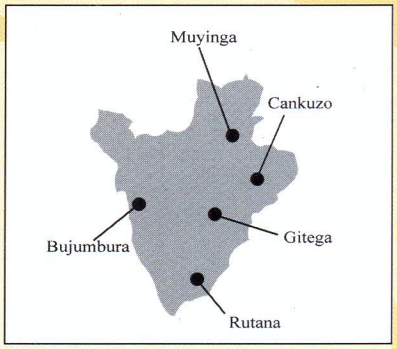
Zaire Province - MbanzaCongo, Kiowa, Cuimbi, Dia Dia and Buela

Beneficiaries in 2004: 96% Angola returnees from DRC, Zambia & Namibia (78,000 in Zaire Province 90,000 in Moxico Province) and 4% IDP's and local community

Main assistance & services: Primary and Secondary heath care, HIV/AIDS, STIs awareness, Primary education, and Local capacity building

Partners: CHEVRON Texaco, MINARS, OCHA, UNHCR, UNICEF, WHO.

BURUNDI



Program start date: 2002

Operation locations:

Northern Province - Muyinga (Gasorwe-kinama & Kobero transit camps), Cankuzo and Ruyigi

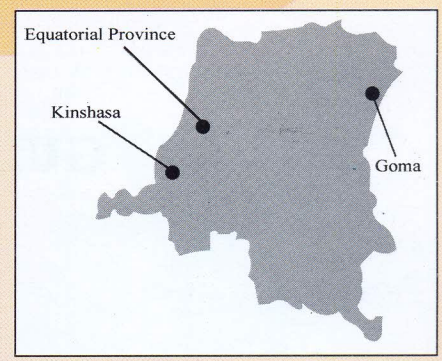
Southern Province - Rutana, Makamba, Gitego, Bururi and Rumonge

Beneficiaries in 2004: Some 150,000 Burundian repatriates from Tanzania and 5,700 Congolese refugees

Main assistance & services: Primary health services, Medical screening to Repatriates, Food Security & Nutrition services, Reproductive health, Water & Sanitation, HIV/AIDS/ STDs awareness, Primary & Secondary education, income generation activities, Immunization, camp Management and Social Services

Partners: GTZ, IMC, Mini-Sante, MSF/H, MSF/S, OMS, PAM, Province Sanitaire, UNHCR, UNICEF,WHO.

CONGO (DR)



Program start date: 2004

Operation locations:

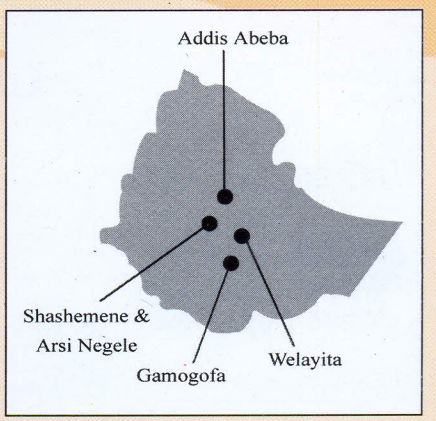
Equateur Province - Libenge, Gemena, Batanga, Zongo, Hop, Mbandaka, Amayiwa and Gabadolite

Beneficiaries in 2004: Some 20,000 Angolan refugees, Congolese returnees & nationals

Main assistance & services: Primary & secondary health care, Rehabilitation of health infrastructure, Medical screening & escort to repatriation team, Water & Sanitation, Nutritional surveys HIV/AIDS/STDs awareness

Partners: Government of Congo, UNDP, UNHCR.

ETHIOPIA



Program start date: 1997

Operation locations:

Oromia - Shashemane and Arsi Negelle woredas

SNNPRS* - Sodo Zuria, Bolosso Sore, Damot, Gale, Damot Wide, Humbo, Arba Minch, Gofa Zuria, Chencha, Mirab Abeya and Boreda woredas

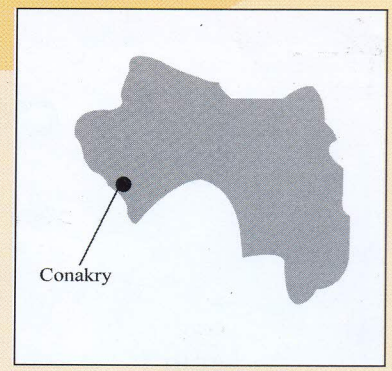
Beneficiaries in 2004: Some 620,000 Ethiopian nationals

Main assistance & services: Family planning, Reproductive health, HIV/AIDS/STDs awareness through IEC, training of community agents, local capacity building for PLWAs & OVCs

Partners: HIV/AIDS Prevention and Control Office, Pathfinder International.

** Southern Nations, Nationalities and Peoples Regional State*

GUINEA (REP)



Program start date: 2002

Operation locations:

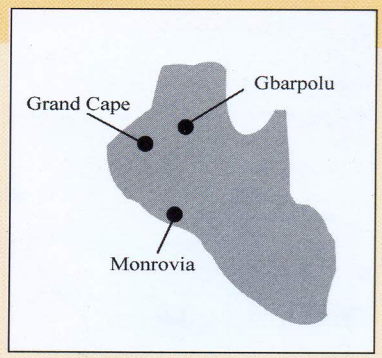
Conakry - N'zerekore, Kissidougou and Gbessia

Beneficiaries in 2004: Some 4,500 refugees from Liberia and Sierra Leone

Main assistances & services: Health assistance to urban refugees in Conakry, Coordination of referral cases, Primary education, Micro-finance, camp management and social/community Services

Partners: ARC, CICR, Government of Guinea, IOM, IRC, MSF, UNHCR.

LIBERIA



Program start date: 2001 (and restarted after a period of interruption in May 2004)

Operation locations:

Grand Cape Mount County - Bowater, Tubmanburg, Klay, Lofa Bridge, Sasstown and Sinje transit centers; Singe, Lofa, Dambella, Simbehum and Fanty town clinics

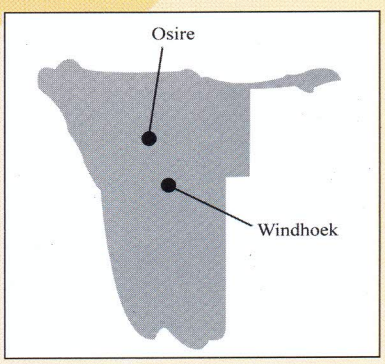
Gbarpolu County - Bopulu, Tarkpoima, Kungbor, Henry town and Gbangay

Beneficiaries in 2004: Liberian returnees, IDPs & nationals
140,000 returnees and nationals in Grand Cape Mount County
80,000 returnees and nationals in Gbarpolu

Main assistances & services: Preventive & Curative health services, rehabilitation of health infrastructure, family planning, EPI, HIV/AIDS/ STDs awareness, medical screening & escort of repatriates, and local capacity building

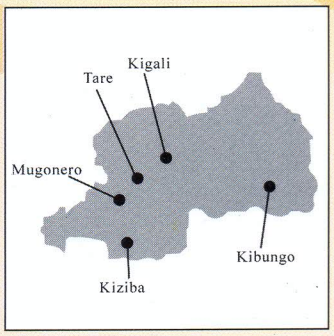
Partners: ABEN, Government of Liberia, LNRCS, LRRRC, OCHA, UNHCR, UNICEF, VOGANET, WHO.

NAMIBIA



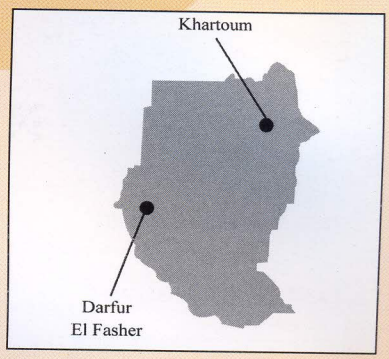
Program start date:	2001
Operation locations:	Osire refugee and Kassava transit camps
Beneficiaries in 2004:	Some 15,000 refugees and nationals 95% Angolan refugees 5% Burundian, Congolese & Rwandan refugees and nationals
Main assistance & services:	Preventive and curative healthcare, Health education, Water & Sanitation, Nutritional services, Family planning, HIV/AIDS/STDs awareness, medical screening and escort to voluntary repatriation, Home-based care, Health infrastructure rehabilitation, Immunization, Community and social services, local capacity building
Partners:	Africare, JRS, MOHA, MoHSS, UNHCR,WFP.

RWANDA



Program start date:		1994
Operation location:		
Gisenyi Province	-	Muhororo and Nkamira transit center
Kibuye province	-	Kiziba refuge camp and Kibuye hospital
Butare Province	-	Nyamure refugee camp
Beneficiaries in 2004:		16,000 Congolese refugees in camps & transit centers 32,000 locals in Kibuye hospital
Main assistance & services:		Primary & secondary health care, Immunization, Nutritional Services, Reproductive health, HIV/AIDS/STIs awareness, ambulance & logistics services, surgery and related training, local capacity building
Partners:		GLIA, Ministry of Health, UNHCR,WFP.

SUDAN



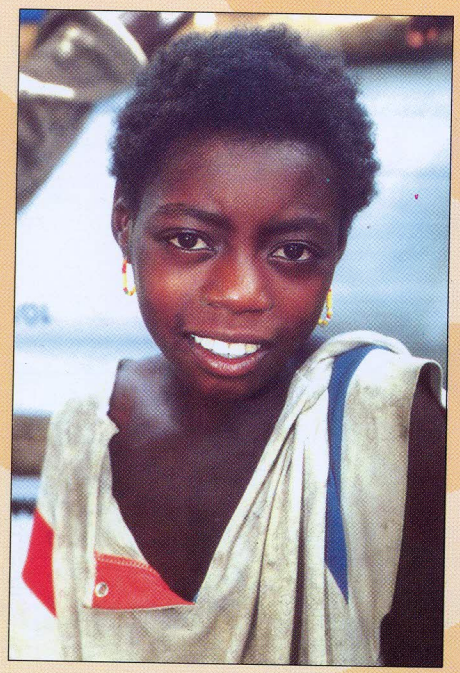
Program start date: 2004 (October)

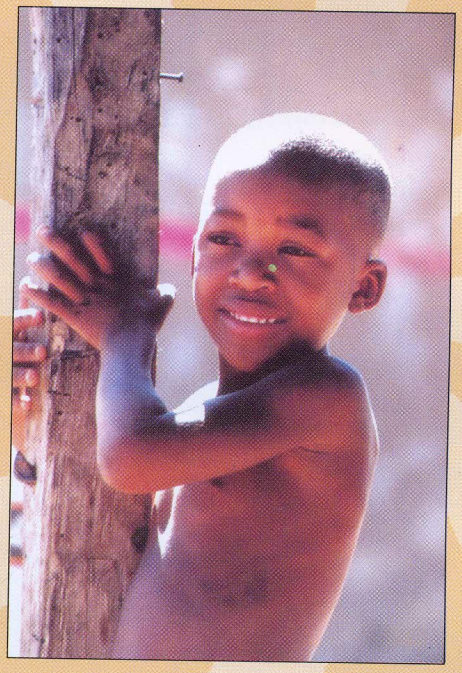
Operation locations:
North Darfur state - El fasher and Mellit town

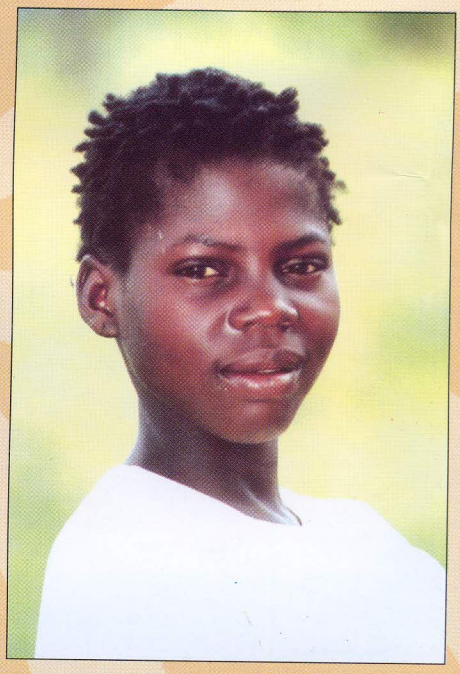
Beneficiaries in 2004: Some 52,000 comprising IDP & nationals

Main assistances & services: Primary & Secondary heath services, and general food distribution

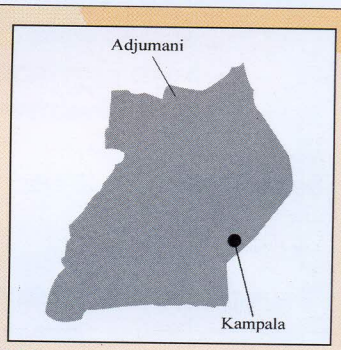
Partners: AU, Government of Sudan, WFP.







UGANDA



Program start date: May 1995

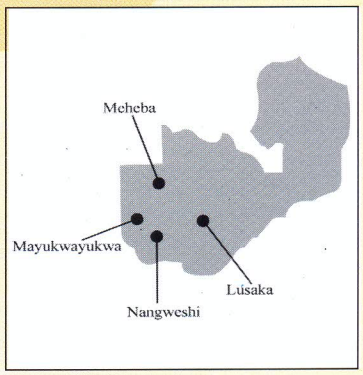
Operation locations:
Northern Uganda - Adjumani district

Beneficiaries in 2004: Some 100,000 Sudanese refugees (50%) & nationals (50%)

Main assistance & services: Health infrastructure rehabilitation, integrated health services, local capacity building

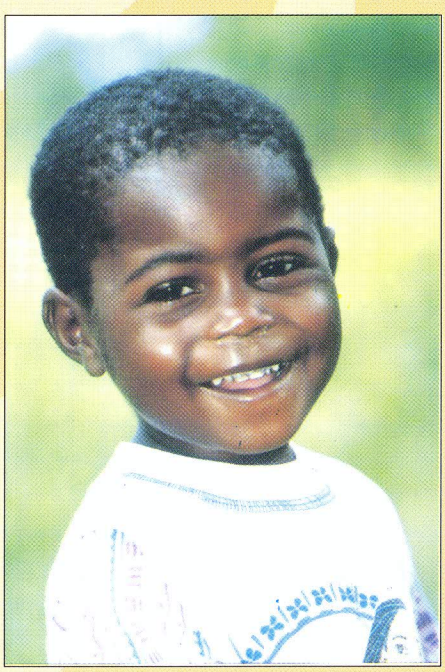
Partners: The District Health Office, HAP, MACI, UNFPA, UNHCR, UNICEF, WFP.

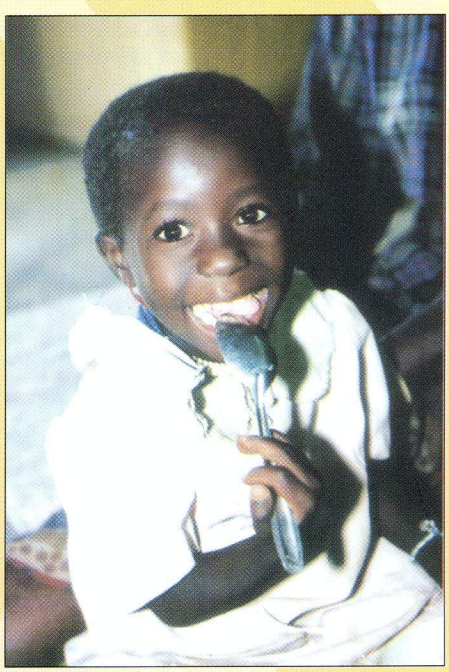
ZAMBIA



Program start date:	2000
Operation locations:	Mayukwayukwa, Nangweshi and Meheba refugee settlements Shibanga and Kinja clinics
Beneficiaries in 2004:	Some 30,000 refugees Mayukwayukwa -7,200 Angolan, 350 DRC and Rwandan refugees Nangweshi- 20,800 Angolan refugees and local host population
Main assistance & services:	Strengthening HIV/AIDS/STDs programs for refugees, Local integration of Angolan refugees, medical screening and escorting of repatriates, Reproductive health, SGBV assistance, Immunization, local capacity building, Nutritional services, water & sanitation and community services
Partners:	CARE, CMML, CORD, IOM, JRS, LWF,MOHA, Red Cross, UNHCR, UNICEF, WFP.







AHA operations and programme expenditure

In United Sates Dollars

Country/year	2003	2004	2005
ANGOLA	1,137,343	904,305	1,187,111
BURUNDI	508,240	725,067	808,838
CONGO, DR	-	173,525	612,570
ETHIOPIA	192,808	390,147	308,231
GUINEA, REP.	-	160,971	206,041
LIBERIA		537,010	731,603
NAMIBIA	1,024,966	768,303	1,213,804
RWANDA	392,025	336,458	374,213
SUDAN	-	100,000	362,000
UGANDA	432,203	413,322	485,768
ZAMBIA	915,438	983,192	593,052
HEAD OFFICE	163,810	401,703	421,816
Totals	4,766,833	5,894,003	7,305,047

2003 & 2004 audited figures *2005 budget projection*

External Auditors

A.A. Bromhead & Co.,
Chartered Accountants
(associates of KPMG)
Angola, Ethiopia, Rwanda, Zambia
Ernst & Young
Uganda
FenRaj Conseil
Burundi
Panell Kerr Forester
Liberia
Deloitte & Touche
Congo (DR)
Stier Henke Associates
Namibia



A brief report on the International Symposium

"Building the Capacity and Resources of African NGOs"

Africa Humanitarian Action (AHA) in collaboration with the African Union (AU) organized an International Symposium on "Building the Capacity and Resources of African Non- Governmental Organizations (NGOs)" in Addis Abeba, between 5-7 December 2004.

The purpose of the Symposium was to bring Donors, Humanitarian NGOs & other Civil-Society Organizations of humanitarian concern to deliberate on issues that relate to the common goal of self-reliance of humanitarian institutions, and transforming the image of the African civil society.

The Symposium saw the patronage and participation of several international dignitaries, and was chaired by Dr. Salim Ahmed Salim, Chairman of Africa Humanitarian Action.

The Symposium began with a welcome address from the Chairman, and an opening address from H.E. Girma Wolde Giorgis, President of the Federal Democratic Republic of Ethiopia (FDRE).

The proceedings of the Symposium included background papers, statements, plenary and group discussion notes, as well as the final resolutions of the Symposium.

The venue of the Symposium was the ECA Conference Centre where three major plenary sessions were held with three different but inter-related themes:

Theme 1:
Institutional co-operation between African NGOs & external partners–"current constraints and ways forward" – with a plenary keynote address from the Right Honorable Clare Short Member of Parliament for Development, (UK), followed by a plenary group discussion,

Theme 2:
"An African perspective on sustainable Humanitarian capacity," with a plenary keynote address from Professor Barney Pityana – Principal and Vice-Chancellor, University of South Africa, and also followed by a group discussion,

Theme 3:
Commitment to collaboration – "A new Partnership", also with a keynote address from Mr. Kamel Morjane – Assistant High Commissioner for Refugees on "An enriched Partnership", which was also followed by a group discussion on the subject.

The Symposium drew three major conclusions from the thematic deliberations and endorsed thus:

- The need for African NGOs to have response and intervention funds at their disposal, with not less than 25% of all contributions to humanitarian action in Africa directly channeled through African NGOs,
- The need to provide for a minimum of 10% of Project funds to cover both direct operational overheads and a contribution towards institutional core costs, in addition to direct program costs,
- The need for a platform for dialogue, research and training on humanitarian issues and actions in Africa, including Organizational development and resource mobilization.

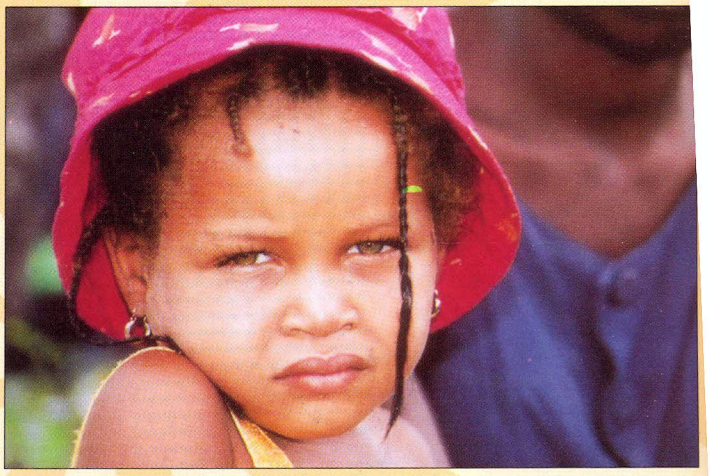
The plenary sessions came to a close with a speech from Ms. Yvette Stevens, Assistant Emergency Relief Coordinator – UNOCHA, with highlights and suggestions for the collaborative efforts to develop the humanitarian response capacity of African NGOs at different levels - amongst African NGOs, inter-Governmental Organizations, the United Nations and the Private sector.

The end of the Symposium saw the following key resolutions being made:

1. Commitment to good governance – Integrity, transparency, and competence of African actors in accordance with international standards,
2. Commitment to collaboration – Recognition of the important role played by local NGOs and in collaboration with the international community and the African Union (AU) in enhancing the African humanitarian capacity,
3. African resource mobilization – African NGOs and institutions to develop strategies for resource mobilization from African public and the private sectors,
4. International support for institutional development of African NGOs – Commitment of donor Government and other international organizations to build long-term capacity of southern NGO counterparts,
5. The "African Center for Humanitaria Action" – The creation of an independent pla form for Humanitarian action in partnershi with the international community, and whic Africa Humanitarian Action was to act as th project management for the establishment c the Center.

The Symposium ended with a vote of thanks t H.E. Girma Wolde Giorgis, President, FDRE and closing remarks and acknowledgements from Dr. Dawit Zawde, President & CEO o Africa Humanitarian Action.

Further information on the International Symposium can be obtained from www.africahumanitarian.org



ORGANIZATIONAL STRUCTURE

General Assembly

Board of Directors

President/CEO
Statutory Matters
Internal Audit
External Relations
Fund-Raising

Operations & Programs
Technical Support
Capacity Building
Monitoring & Evaluation

Finance & Administration
Finance & Control
Human Resources
Logistic Services
General services

Country Offices & Associations
Angola Burundi Congo (DR) Ethiopia Guinea (Rep)
Kenya Liberia Namibia Rwanda Sudan Uganda Zambia

Report on
The Third Assembly of the International Trustees

The Third Assembly of the International Trustees of AHA convened in Addis Abeba, on December 4, 2004 with Dr. Salim Ahmed Salim presiding. Fourteen trustees and eight of AHA's friends were in attendance, as well as guests and representatives of other humanitarian agencies and organizations.

An overview of the activities and challenges since the previous meeting in 2002 was delivered by Dr. Dawit Zawde.

The Assembly took stock of AHA's achievements and performance since the last meeting in 2002, including:

- AHA's continuation of UNHCR supported programmes in Angola, Namibia, Rwanda, Uganda and Zambia, in 2002-04,
- New responsibilities in Burundi, Liberia, Sierra Leone and Sudan,
- Expansion of the Ethiopia programme in cooperation with the AIDS Council and Pathfinder International,
- Continuing establishment of a national AHA Associations in countries of operation,
- Upgraded quality of staff and operational procedures, improved and expanded web site, follow up on the *"Strategy for Institutional Development"*.

Co-option of new trustees – the Assembly decided to co-opt Dr. Filomena Delgado (AHA Angola), Ms. Patricia Hajabakiga (AHA Rwanda), Mr. Getachew Kitaw (AHA Ethiopia) and Ms. Eularia Syamujaye (AHA Zambia).

Record of the 2nd Assembly -formally and unanimously adopted.

Audit reports – for Angola, Burundi, Ethiopia, Namibia, Rwanda, Uganda, Zambia and the Head Office for 2001,2002, and 2003 were tabled and unanimously adopted.

AHA Logo - revised logo unanimously adopted. The President to take steps to seek international protection.

Strategic Directions 2005-07

The following six strategic objectives were confirmed:

1. Continue the provision of relief and rehabilitation, reintegration and healthcare to distressed communities; help rehabilitate and rebuild health care delivery systems affected by natural and man-made disasters; strengthen local capacity.
2. Continues establishing AHA country Associations across Africa.
3. Strengthen institutional capacity and services to meet the needs of those affected by HIV/AIDS, TB and Malaria in Africa.
4. Endorse AHA's commitment to persue the "Building the Capacity and Resources of African NGOs".
5. Prepare and implement of plan and budget for 2005-07.
6. Consider an annual AHA appeal process and other mechanisms for raising operational and core funds.

Elections

The Assembly unanimously re-elected for the next three years:

Dr. Salim Ahmed Salim - *AHA Chair*
Sheikh Mohammed Al-Amoudi - *Co-Chair*
Dr. Dawit Zawde—*AHA President and CEO*
Dr. Costantinos Berhe-Tesfu—*AHA Vice President*
Mr. Nicolas Bwakira and Mr. Anders Wijkman—*Directors*
Dr. Getachew Demeke—*Chairman of Audit Committee*
Mr. Muktaru A.S Jalloh and Ms. Gillian Whittington—*members of the Audit Committee.*

The Assembly agreed that its next meeting should take place in July 2007 in Addis Abeba, Ethiopia.

TRUSTEES

Dr. Salim Ahmed Salim, *Chair*	Tanzania
Sheik M.H. Al-Amoudi, *Co-Chair*	Saudi Arabia
Dr. Dawit Zawde, President	Ethiopia
Dr. Constantinos Berhe-Tesfu, *V. President*	Ethiopia
Mr. Nicolas Bwakira	Burundi
Dr. Brigalia Bam	South Africa
Amb. Brownson Dede	Nigeria
Dr. Filomena Delgado	Angola
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Mrs. Patricia Hajabakiga	Rwanda
Mr. Jean-Pierre Hocke	Switzerland
Mr. Yohannes Kifle	Ethiopia
Mr. Getachew Kitaw	Ethiopia
Dr. Penuell Maduna	South Africa
Chief Olesegun Olusola	Nigeria
Rt. Hon. Clare Short	United Kingdom
Mrs. Eularia Syamujaye	Zambia
Mr. Anders Wijkman	Sweden

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