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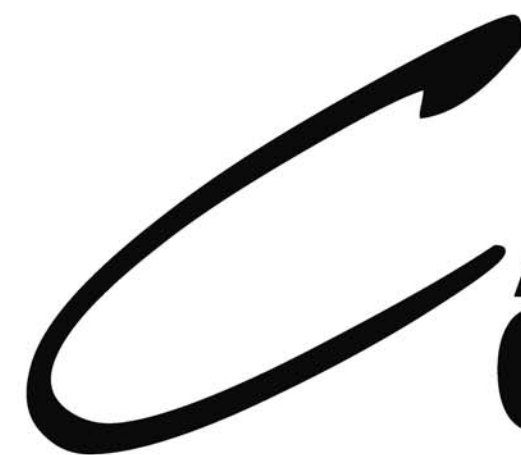


**MID-YEAR REVIEW**

**Consolidated Appeals Process (CAP)**







**+ Three**

**ôte d'Ivoire**

**200**



**MID-YEAR REVIEW**

**Consolidated Appeals Process (CAP)**



## Consolidated Appeals Process (CAP)

The CAP is much more than an appeal for money. It is an inclusive and coordinated programme cycle of:

- strategic planning leading to a Common Humanitarian Action Plan (CHAP);
- resource mobilisation;
- coordinated programme implementation;
- joint monitoring and evaluation;
- revision, if necessary; and
- reporting on results.

The CHAP is a strategic plan for humanitarian response in a given country or region and includes the following elements:

- A common analysis of the context in which humanitarian action takes place;
- An assessment of needs;
- Best, worst, and most likely scenarios;
- Stakeholder analysis, i.e. Who does what and where;
- A clear statement of longer-term objectives and goals;
- Prioritised response plans; and
- A framework for monitoring the strategy and revising it if necessary.

The CHAP is the foundation for developing a Consolidated Appeal or, when crises break or natural disasters occur, a Flash Appeal. The CHAP can also serve as a reference for organisations deciding not to appeal for funds through a common framework. Under the leadership of the Humanitarian Coordinator, the CHAP is developed at field level by the Inter-Agency Standing Committee (IASC) Country Team. This team mirrors the IASC structure at headquarters and includes UN agencies, and standing invitees, i.e. the International Organization for Migration, the Red Cross Movement, and NGOs that belong to ICVA, Interaction, or SCHR. Non-IASC members, such as national NGOs, can be included, and other key stakeholders in humanitarian action, in particular host governments and donors, should be consulted.

The Humanitarian Coordinator is responsible for the annual preparation of the consolidated appeal *document*. The document is launched globally each November to enhance advocacy and resource mobilisation. An update, known as the *Mid-Year Review*, is presented to donors in June of each year.

Donors provide resources to appealing agencies directly in response to project proposals. **The Financial Tracking Service (FTS)**, managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), is a database of donor contributions and can be found on [www.reliefweb.int/fts](http://www.reliefweb.int/fts)

In sum, the **CAP is about how the aid community collaborates to provide civilians in need the best protection and assistance available, on time.**

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## **1. EXECUTIVE SUMMARY**

The deterioration of the social-political crisis due to the events of 25 March have led to significant changes to the humanitarian strategy and planned response for the latter part of 2004. At the time of writing, the violently repressed demonstrations of 25 March 2004 was a major turning point in the implementation of the Linas-Marcoussis peace accord signed in January 2003. This led to the suspension of seven political groups from the Government and a near collapse of the peace accord. The planned demonstration was to call for the full and speedy implementation of the peace accords, however, President Gbagbo of Côte d'Ivoire said that it was a cover for an "armed insurrection". The violent repression on 25, 26 and 27 March led to the death of dozens of people, several hundred wounded and an undetermined number of people went missing. At the request of the Ivorian Government and international community, an International Commission of Inquiry arrived on 14 April to establish the truth about the events. The Commission's report was presented to the acting High Commissioner for Human Rights on 30 April 2004. In the meantime, the French press leaked a preliminary copy of the report provoking a violent reaction by the government calling the report "biased and dishonest". This could, however, lead to a complete interruption of the timid attempts to re-establish social services, including health and education, and the redeployment of public administration, to Forces Nouvelle (FN)-controlled areas because of the breach of trust. Furthermore, displacement continues unabated in the western part of the country creating tensions and uncertainty within the various communities.

The events described above mark a clear setback in the peace process thus the most likely scenario for the next six months is one of "compromised peace" which will probably directly result in the persistence of humanitarian needs, or perhaps a deterioration of the humanitarian crisis.

The revised humanitarian strategy is, therefore, geared towards "**emergency humanitarian assistance**", aimed at meeting the immediate and urgent needs of vulnerable groups, caused by the following factors:

- Deterioration of the «protection crisis» affecting civilian and vulnerable populations;
- A slow down, or even possible interruption of the redeployment of the public administration and basic educational and health services in areas under the control of the Forces Nouvelles;
- Interruption or slow down of the return of displaced populations, with the need for immediate assistance, as well as the risk of exacerbated inter or intra-community tensions;
- Slow down of development activities, particularly following the declaration of security phase 3 by the United Nations (UN);
- Possibility of the division of the territory persisting longer than expected.

In light of the above, the new challenge is to mobilise the adequate humanitarian response to the needs of the displaced populations, returnees and host communities. Preliminary surveys have revealed that nearly 80% of the displaced people have limited or no resources and are in a critical state of impoverishment. Vulnerable groups in zones under the control of the Forces Nouvelles will continue to receive assistance.

Priority elements of the humanitarian strategy will continue to be in the areas of protection and social cohesion, education, health and water and sanitation to consolidate past achievements and avoid, at all cost, that parts of the country sliding back into a humanitarian crisis.

The Consolidated Appeal (CA) for Côte d'Ivoire and three surrounding countries originally appealed for a total of US\$ 59.8 million. To date, only 6.5% of the requirements have been met. Though this has limited the ability of appealing agencies to respond to the needs, funding received through other partner agencies and core budgets enabled some progress to be made. In light of changes in the humanitarian context, five new projects have been included to respond to the priority sectors of protection, education, coordination and support (in the form of registering and surveying Internally Displaced Persons or IDPs), and agriculture. Other projects have been revised to reflect increased beneficiary needs, especially in the water and sanitation sector. The revised requirement for the Côte d'Ivoire Plus Three 2004 CA is therefore US\$ 61,104,666. Contributions to date total US\$ 3,913,273, leaving an **unmet requirement of US\$ 57,191,393**.

## **2. CHANGES IN THE CONTEXT**

### **2.1 POLITICAL SITUATION**

A coalition of seven signatories to the Linas–Marcoussis Accords organised a march to call for its full and speedy implementation stating that President Gbagbo of Côte d'Ivoire was not forthcoming in ensuring its execution. The planned march, which was not banned by the Government, was violently repressed resulting in the death of dozens of people, hundreds of wounded and an unknown number of missing people. The President claimed that the planned demonstration was a cover for an “armed insurrection”. Following these events, the coalition suspended the participation of its ministers in all cabinet and government council meetings.

At the request of the Government and the International monitoring committee, an International Commission of Inquiry was established by the Office of the High Commission for Human Rights (OHCHR) which arrived in Côte d'Ivoire on 14 April to establish the truth about the events. The Commission's report was presented to the acting High Commissioner for Human Rights on 30 April 2004. However, a preliminary report was leaked to the French press provoking outrage among high-level government officials, who have called the report “dishonest and ill-informed”.

One of the consequences of the violent repression was the declaration of phase 3 of the UN security plan for the Abidjan zone on 26 March 2004 and for the southern part of the country from 31 April.

Prior to this major crisis, several incidents had occurred within the Government, including the suspension of the participation of Ministers of the Forces Nouvelles from 23 September to 06 January 2003, the withdrawal of Democratic Party of Côte d'Ivoire (PDCI)-RDA Ministers since 15 March and the refusal of the Forces Nouvelles to participate in the launch of the DDR programme, which was scheduled to begin on the 08 March 2004.

Nevertheless, the Government of National Reconciliation, with the support of the international community, succeeded in redeploying elements of the public administration, including those administering schools, in the *Moyen Cavally* and *18 Montagnes* regions in the western part of Côte d'Ivoire. However, there is still a significant lack of personnel in all public sectors, including security, education and health.

On 04 April 2004, following the adoption of UN Resolution 1528 by the Security Council, the UN Peace-keeping Operation in Côte d'Ivoire (ONUCI) was officially established. The Operation will include 6,240 Blue Helmets, a civilian unit of 350 policemen and more than 1,000 administrative and professional staff. The ONUCI is mandated to support the implementation of the Linas-Marcoussis peace accords, which includes DDR and elections. A Security Council statement issued on Friday 30 April, warned that it would carry out sanctions against political leaders who do not adhere or support the full implementation of the peace accords.

### **2.2 ECONOMIC SITUATION**

The latest data provided by Union Économique et Monétaire Ouest-africaine (UEMOA) for the year 2003 indicates a 2.2% decline of the gross domestic product (GDP) in Côte d'Ivoire. Meanwhile, it is estimated by the African Union that the suspension of international financial loans and programmes linked to the World Bank, International Monetary Fund (IMF) and other institutions, the interruption of work days due to demonstrations and the overall direct impact of the crisis have had a direct effect on the industrial sector (with a decline of between 20% and 30% of production) and the tourism sector (a decline of 21% in air traffic). According to a report published by the International Monetary Fund, the decline in real per capita income was 15% from 1999 to 2003, while the number of people living below the poverty line increased from 38% in 2002 to nearly 45% in 2003.

Food production in Côte d'Ivoire also declined substantially in 2003, with losses of between 10% to 27% for plantain, rice, maize, sorghum and millet. The main cash crops followed the same trend and the decline in export of cocoa beans, coffee and cotton was estimated respectively at 14%, 29% and 25%. (Source: joint FAO/WFP mission report on “Crop and Food Supply.”) According to the same report, the primary reason for this decline includes the displacement of hundreds of thousands of farm workers and/or owners, which has led to the shortage of labour in plantations while others have been left completely abandoned.



The checkpoints, which were temporarily dismantled, have been reinstated since March. Studies and reports by the Office for the Coordination of Humanitarian Affairs (OCHA) Côte d'Ivoire and the Chamber of Commerce and Industry of Côte d'Ivoire (CCCI-CI) highlight the negative effects of this phenomenon on the Ivorian economy, notably the prevention of free movement of people and goods, shortages in the supply of products and impoverishment of farmers, who sell their products at very low prices, and at the same time are being forced to pay extortion fees.

### **2.3 SECURITY SITUATION**

The security situation deteriorated further on 25, 26 and 27 March 2004, following the violent repression of the march by civilian populations and residents of peripheral districts. The recognition by the authorities of the existence of parallel and unidentified armed elements aroused fear among the population, compelling some of them to create self-defence committees in some of the targeted neighbourhoods.

In the FN controlled zone the leadership struggle opposing Sgt. Ibrahim Coulibaly and the Secretary General of Mouvement Patriotique de Côte d'Ivoire (MPCI), Mr. Soro, has also created a climate of insecurity and tension in the Forces-Nouvelles-controlled areas. This climate of insecurity and tension culminated with the death of Sgt. Adams on 07 February 2004 in Korhogo and the arrest of about ten Ivorian rebels in Mali, who were planning to return to Côte d'Ivoire to avenge the death of Sergeant Adams. Furthermore, there have been several armed clashes between the different warlords in Man, Danané and Bouaké during the early months of 2004. However, in the last couple of months the security situation has improved considerably.

At the regional level, the DDR programme in Liberia has effectively started for the nearly 45,000 fighters identified among the three-armed factions, Liberians United for Reconciliation and Democracy (LURD), Movement for Democracy in Liberia (MODEL) and supporters of President Taylor. To ensure effective implementation of the programme, the Liberian border should be continuously patrolled so that the Western part of Côte d'Ivoire is not used as a venue for possible arms trafficking and a possible base for the rebels.

At the national level, the gradual deployment of 11,000 men, represented by the Blue Helmets and Licorne Forces, should help to offer better security to the populations, facilitate free movement of goods and people as well as accelerate the return of public administration.

### **2.4 HUMANITARIAN NEEDS AND PRIORITIES**

The political and security situation as described above has meant that the humanitarian community will have to continue to assist vulnerable populations. Initially the humanitarian community had envisaged a reduction of these needs as we were gradually but surely coming out of the crisis.

The new priorities include:

- greater protection for both urban and rural populations and vulnerable target groups;
- enhanced protection of IDPs and host communities due to their increased vulnerability;
- greater protection for refugees both in urban context and in the west of the country;
- right to education for nearly one million children who may not attend this school's academic year without the support of the humanitarian community;
- provision of water and sanitation, following the different missions that highlighted the problems facing more than 50% of households in most parts of the country;
- increasing needs in the health sector, with the resurgence of certain diseases and epidemics, the density of resettled populations and the alarming increase in Human Immuno-deficiency Virus / Acquired Immuno-deficiency Syndrome (HIV/AIDS) prevalence rates;
- contributing to strengthening social cohesion, which is a pre-condition for any lasting humanitarian action.

### **3. HUMANITARIAN CONSEQUENCES**

#### **3.1 REVISED STRATEGY**

The revised humanitarian strategy is geared towards “emergency humanitarian assistance”, with a view to meet the immediate and vital needs of the vulnerable groups that will probably persist in view of the political situation.

#### **3.2 PRIORITY SECTORS**

##### **Protection**

Some of the immediate actions to the 25 March crisis included the deployment of the Red Cross Movement and United Nations Mission in Côte d'Ivoire (MINUCI), who were present in the field during the events. However, they encountered some difficulties in reaching the victims and witnesses of the clashes, despite their respective mandates. On 29 and 30 March 2004, UNICEF conducted in collaboration with the Ministry of Education (MoE), a mission to assess the impact of the events among certain school centres in the Abobo district, where the populations suffered most from the repression.

On 31 March and 1 April 2004, the Humanitarian Coordinator issued a press release and held a press conference with all the representatives of humanitarian agencies and Non-Governmental Organisations (NGOs) to draw the attention of the authorities to its absolute duty of protecting civilian populations, and appealed to all the political actors to exercise restraint.

To ensure efficient coverage of all aspects of protection, the Inter-Agency Humanitarian Committee facilitated the creation of two additional sector groups: the extended protection group led by MINUCI in relationship with institutional parties and a pilot working group in charge of developing efficient strategies to ensure better protection of vulnerable groups. Meanwhile a sensitisation campaign initiated by the working group will be broadcast on local radio stations established in the peripheral districts of Abidjan.

As regard to refugees, United Nations High Commissioner for Refugees (UNHCR) is continuing efforts to have a refugee law adopted by the Ivorian parliament to enhance the level of protection for refugees. A distribution of refugee cards is also planned. Both processes are, however, being delayed by the current political impasse.

Moreover in the western part of Côte d'Ivoire, displacements continue due to intra and inter community clashes with important protection issues at stake. This situation calls for immediate interventions for national reconciliation and protection initiatives.

##### **Education**

The direct impact of the events was the closure of schools in Abidjan from 24 - 29 March 2004 and the brief return to Abidjan, for security reasons, of the Direction Régionale du Ministère de l'Education Nationale based in Bouaké. Meanwhile, the teachers are reluctant to return to their posts because of inadequate allowances paid to them and/or for security reasons. Hence, according to the Minister of Education, 423 out of 1,000 teachers have taken up their posts, representing less than 30% of teachers' needed.

The Forces Nouvelles organised a seminar in Bouake in mid- April 2004 in reaction to the slow redeployment of teachers and reopening of schools. This prompted a reaction by the Government and support by international organisations to ensure the reopening of primary schools.

##### **Health**

Medical staff from the Ministry of Health (MoH) deployed in the 23 districts under FN's control for the National Immunisation Days (NID) against polio have also returned to Abidjan after the events of 25 March. It was expected that they would stay on and resume their duties. However, for the first time since the outbreak of the crisis, a polio immunisation campaign was organised for the entire national territory.

Since the beginning of the crisis, WHO, Médecins sans Frontières (MSF France), MSF-Holland, United Nations Programme on HIV/AIDS (UNAIDS), Médecins du Monde (MDM), International Rescue

Committee (IRC), Solidarités, Cooperation and Relief Everywhere (CARE), United Nations Children's Fund (UNICEF), United Nations Population Fund (UNFPA), International Committee of Red Cross (ICRC), and many other NGOs have been very active in the field, working with the MoH. Their interventions and activities range from distribution of free drugs to medical consultation and care units in the Bouaké and Man Teaching Hospitals, and mobile clinic service and supply of health kits and materials.

However, health indicators are still a cause for concern:

- More than half of the health centres are out of service in the North and over-stretched in the South, because of the demographic pressure of people displaced by the war;
- Cases of meningitis and yellow fever, resulting in deaths, were regularly reported in the North zone;
- Access to clean water is limited and inadequate for 50% of households in the West of Côte d'Ivoire, an observation from the nutritional survey conducted by UNICEF;
- HIV/AIDS prevalence rate has reached alarming proportions: it ranges from 10% to 12% for men and above 12% among women, a rate, which, according to UNAIDS, may increase further due to the presence of high-density zones (sites for displaced people and camps for regrouping soldiers).

### **3.3 CHALLENGES**

The key challenges are:

Ensuring assistance and protection to refugees especially in the western part of the country, displaced people, host communities and populations wishing to return to their sites of origin (specific attention to the psychological aspects of the impact of displacement).

### **3.4 RESPONSE**

An action plan has been developed for the next six months, and it is organized around three major points:

- Identification of transition group as the resource group in charge of IDPs, with the support of an IDP adviser;
- Conducting a registration exercise, identifying and evaluating the needs of displaced people, in collaboration with the Institut National de la Statistiques (INS).
- Planning of the first national workshop on displaced people with a view to defining by consensus a strategic plan of action to be validated by the Government and humanitarian community;
- Conducting a registration of all refugees remaining in Côte d'Ivoire once the emergency resettlement programme is completed.

## **4. SCENARIO**

### **4.1 MOST LIKELY SCENARIO (COMPROMISED PEACE)**

The divide amongst political actors and the pre-conditions posed by the opposition parties set before rejoining the Government have constituted a serious setback to the peace process. The controversy over the mandate of the United Nations Operations in Côte d'Ivoire (ONUCI) with the demand by the supporters to President Gbagbo for the immediate disarmament of the former FN combatants, and the demand by FN for elections before DDR, is a perfect illustration of the conflict and the manipulation of the mandate of the UN in this environment. These contrasting views point to a situation of no compromise.

### **4.2 TRIGGERING FACTORS**

- Events of 25, 26, and 27 March 2004.
- Suspension of the participation of the (G7) Ministers.
- Start of an autonomous organisation in the Northern area.
- Support to militia.
- Radicalisation of positions as the elections gets closer.

### **4.3 MAIN CONTRIBUTING FACTORS**

- Military agreement on the end of hostilities in question.
- Increasingly difficult humanitarian access.
- Attack on ONUCI by the (young patriots).
- Sharp economic decline and increase in unemployment.
- Steady decline in agricultural production.
- Uncontrolled movement of militia in Abidjan and other urban areas.
- Increase in inter and intra community tensions.
- Settlement of IDPs outside their area of origin.

### **4.4 HUMANITARIAN IMPLICATIONS**

- Slow down and delay of the return of IDPs to their areas of origin and new displacements.
- Overburdening and saturation of host families and communities.
- Crisis of protection of civilians and vulnerable groups.
- Persistence, and even increase of humanitarian needs.
- Slackening of development activities in security phase 3.
- Lack of access to vulnerable groups.
- Limited access to clean water.
- Volatile security for displaced people in transit camps and sites.
- Increase in HIV/AIDS prevalence in zones with dense population, including military personnel.
- Possible new forced recruitments of refugees to participate to armed conflict in the West.
- Delayed return of Ivorian refugees from neighbouring countries.

## **5. STRATEGIC OBJECTIVES**

### **5.1 PROGRESS, ANALYSIS AND REVISION**

The strategy defined in the framework of CAP CI+3 2004 facilitated the accomplishment of the following objectives:

- Adapting humanitarian assistance to needs in the field, with the opening of sub-offices of the UN agencies and NGOs in the most affected regions in the West and North of the country;
- Strengthening the coordination mechanisms and advocacy strategies, particularly through the creation of a forum of consultation between the Inter-Agency Humanitarian Coordination Committee (IAHCC) and donor countries;
- Generalising inter-sectoral missions and interventions per zone (e.g. joint and multi-sectoral missions to Bouaké, Guiglo, Korhogo, Sakassou, Bondoukou and Bouna etc);
- Creating a restricted protection/communication group to develop strategies and action plans for the protection of vulnerable persons;
- Establishing a separate “water and sanitation” group to address the urgent needs;
- Creating a crosscutting group on “transition, conflict prevention and consolidation of peace” to meet the two-pronged strategy (for immediate vital needs; and recovery and reinsertion activities) and to establish a link between humanitarian assistance and development.

Three weaknesses identified:

- Inadequate humanitarian response to the needs of displaced people, their host families and communities.
- Lack of funding for projects in the priority sectors such as health and education. Nevertheless, these two sectors of humanitarian aid received funding outside CAP, based on the analysis and the strategy adopted by CAP, which serves as the framework.
- Weak network for communication and advocacy, particularly at the level of protection to better anticipate and be proactive.

For the next six months, the strategic objectives of the joint humanitarian action plan will aim at:

- Offering comprehensive assistance to displaced people and host communities at all levels;
- Responding to the increase of immediate and vital needs;
- Contributing to strengthen the protection and security of vulnerable populations, including refugees;
- Promoting social cohesion and national reconciliation;
- Supporting the capacity of the Government to respond to humanitarian crisis.

## **6. SECTOR PLANS**

### **6.1 HEALTH AND NUTRITION**

#### **Context**

Despite the difficulties encountered in assuring the supply of medicines to health structures and the problems regarding the deployment of medical staff, UN agencies, health-based organisations and NGOs have, under the coordination of WHO, assisted vulnerable populations with access to healthcare. UNICEF, WHO, ICRC, MSF, MDM, and several other NGOs have provided support to the Government in the redeployment of the medical and paramedical staff to strengthen the capacities of health facilities. Hence, hospitals in Bouaké, Man, Korhogo, Danané, and Séguéla are operational and functioning efficiently.

There has been a concerted effort to rehabilitate the health sector in the North and West zones of Côte d'Ivoire. It was on this basis that the immunisation campaign against poliomyelitis was organised for the entire national territory with the participation of all UN partners which made it possible to vaccinate and protect all children aged 0-5 years, representing a total population of 4,777,223 children. Several cases of wild poliovirus were discovered during this campaign. However, the event of 25 March 2004 and the days that followed created doubt on the revitalisation of the health system that the district teams put in place and left without personnel when they returned to Abidjan.

#### **Challenges**

Intensification of epidemiological surveillance in FN controlled zones:

- Support to reference hospitals of the health districts to improve access to healthcare;
- Revitalise HIV and AIDS surveillance in FN controlled zones.

Progress made so far include:

- Opening of 110 health centres in the North and West with the regular supply of drugs and assistance from ICRC
- Reopening of Man and Korhogo hospitals by MSF Belgium, the Bouaké hospital by MSF France, the Danané hospital by MSF Holland, MDM in Séguéla
- Organisation of immunisation campaigns against the different pockets of the measles epidemic.

#### **Objectives**

The main objectives are:

- Facilitate access to basic healthcare for populations in the North and West of the country by re-equipping and supplying drugs and other consumables to 80% of the rehabilitated care structures
- Vaccinate 80% of children and adolescents aged 6 months to 14 years against measles on the entire national territory
- Sensitise 80% of the high-risk populations (young people, soldiers) in the FN controlled zones on STIs/HIV/AIDS
- Improve the epidemiological surveillance system in order to prepare the response to epidemics among populations in the FN controlled zones

### **6.2 FOOD SECURITY AND AGRICULTURE**

The joint WFP/FAO crop and food supply mission (15 November to 12 December 2003), the inter-agency evaluation mission conducted in the Zanzan region (15-18 October 2003), as well as other evaluations carried out by ACF (Zouan-Hounien and Bin-Houyé in October 2003 and Korhogo, November 2003) and OXFAM (Tabou, November 2003) and the initial results of the nutritional survey conducted by UNICEF/WHO/PNN have indicated a mixed situation of food security across the country.

Despite the signs of easing due to the return of a significant number of displaced populations and the relative improvement of security conditions, specific groups are still faced with a real risk of food insecurity. This particularly concerns populations in the West of the country who are gradually returning to their places of origin – where violent fighting took place at the beginning of 2003 – and who are facing serious difficulties trying to re-establish their livelihoods. The 2003 agricultural season did not reach anticipated production rates since the planting was late for most in the region. Similarly, in the North of the country the collapse of the cash crop levels has affected the farmers who largely

depended on these crops. In this part of the country, the situation was all the more difficult since basic services, particularly health care, continued to be largely inadequate.

The food security situation may become critical for the most disadvantaged populations in the affected zones and will undoubtedly worsen during the lean season (from May/June). Food assistance will continue to be required at least until the next harvest season, which is at the end of 2004.

Moreover and despite the agricultural assistance provided in certain villages in the West, South West and North (Korhogo), the displaced populations and those returning to their villages have an increasing need for agricultural assistance (seeds, tools and materials, other agricultural inputs). Due to the improved security conditions in certain villages with the deployment of impartial forces and now with the arrival of the ONUCI, the populations are increasingly gaining access to their farms and are keen to resume their agricultural activities although there are persistent tensions in certain areas in the West as is the case of Zou sub-prefecture situated in the Bangolo department.

### **6.3 WATER AND SANITATION**

#### **Context**

There has little been progress in the improvement of access to clean water, sanitation and hygiene for the populations affected by the crisis. Though some progress has been made at transit sites for IDPs, IDPs living with families and host communities continue to have urgent needs. Given the current situation, it is important to continue providing humanitarian assistance, while creating conducive conditions for the return of the populations to their localities of origin by improving access to basic social services, including hydraulic and sanitation infrastructures.

#### **Progress made**

Humanitarian actions by various actors in the sector (WHO, UNICEF, OXFAM, IRC, Solidarités) in the reduction of the incidence of water-borne diseases among the affected populations living in transit sites in Abidjan, Yamoussoukro, Bouaké, Guiglo, Tabou and Man.

#### **Change of objectives**

In view of the deterioration of the hydraulic infrastructures, the major challenges in this sector are: (i) improving access to clean water and sanitary installations for displaced populations; (ii) promotion of hygiene in transit centres and host communities; (iii) ensuring availability of spare parts (for water pumps, filters etc.) at the central and peripheral levels (iv) strengthening the capacities of the field actors (worker repairers, project management committees); (v) empowering the communities to ensure efficient management of the projects; (vi) conducting advocacy for redeployment of staff in charge of clean water supply, hygiene and sanitation.

The new objectives include:

- Ensuring access to clean water at 100% of transit centres for displaced people and host communities in zones of influx of populations;
- Facilitating access to an adequate system for elimination of excreta for 80% of the population affected by the crisis;
- Promoting hygiene in transit centres for displaced people and host communities.

#### **Planned response**

The UN agencies and NGOs specialised in water supply and sanitation (UNICEF, WHO, OXFAM, IRC, SOLIDARITÉS, ICRC, Organisation for the Child, Woman and Family (ONEF) will continue to offer solutions to the urgent and vital problems of vulnerable populations by supplying water storage reservoirs, water purification products, sanitation materials, hygiene products, spare parts for rehabilitating water pumps, digging of wells and construction of latrines, showers and hand washing basins both for the displaced populations in zones under Government control and for people that remained in zones controlled by the Forces Nouvelles.

In the area of hygiene, the activity will involve promotion best practices at the community level, training and installing local committees in charge of health in transit centres for displaced people, refugees and in host communities. At the national level, the coordination of the interventions will be intensified. Technical support and Humanitarian Charter and Minimum Standards in Disaster Response

(SPHERE) norms relating to water supply and sanitation will also be provided to all humanitarian actors in collaboration with the Government services.

**Strategies**

The interventions will consist of: (i) providing services and supplying inputs for the rehabilitation of hydraulic and sanitation projects; (ii) strengthening capacities of the actors (Government and NGOs); (iii) empowering the communities, and making them aware of their responsibilities; and (iv) promoting advocacy and social mobilisation.

**Monitoring / Evaluation**

The interventions will be coordinated by the Water and Sanitation Sector Group, chaired by UNICEF and made up of UN agencies, Technical Services of the ministries concerned, La Société de Distribution d'eau de la Côte d'Ivoire (SODECI) and national and international NGOs. As a supplement to monitoring and evaluation, which will be done by the field actors, the Sector Group could also carry out external evaluation of certain activities.

**6.4 EDUCATION****Context**

In the conflict zones, schools remained closed in 2003 because of: (i) insecurity which resulted in the massive departure of the administrative staff and teachers; and (ii) occupation, destruction, and/or looting of many school infrastructures. However, the educational activities initiated by various coordination structures (NGOs, churches, *Forces Nouvelles*), have been organised on the basis of the national curriculum and have helped to enrol an estimated population of nearly 250,000 primary and secondary school children. Despite numerous operational difficulties (lack of functional relationship with the MoE, total lack of resources and allowances for voluntary teachers, shortage of manuals and teaching materials etc.), the quality of education provided was satisfactory to the point that the MoE resolved not only to validate the school year for the school children but also to organise a special session in February 2004 for official examinations, namely Centre Evangélique de Publication (CEP), Brevet d'Etudes du Premier Cycle (BEPC) and Baccalauréat (BAC) whose results were comparable to those registered in zones under Government control. Since then, teams known as "minimum administration" teams, have been put in place in Korhogo, Bouaké, Odienné and Man to constitute the regional national education directorate. They are functioning "more or less well" and pursuing without major resources, efforts to ensure optimal re-launching of the educational system. The main constraint is the slow and difficult redeployment of the teaching staff.

In the Government controlled zones, efforts were made in 2003 to ensure the educational reinsertion of about 75,000 displaced primary school children into "relay" schools. The 2003-2004 academic years was opened in two stages, i.e. on 6 October in the Southern part and 4 November 2003 in the Western part. However, thousands of children are still outside the school system. The MoE estimates between 14,000 and 20,000, the number of formerly displaced children who are waiting to register in establishments since November 2003.

**Challenges**

The main challenges are:

- Ensuring quality access to education through: (i) rehabilitation of educational infrastructure; (ii) equipping schools with furniture; (iii) installing canteens with school-feeding programmes;
- Ensuring quality supervision and apprenticeship through: (i) optimal redeployment of the educational personnel; (ii) equipping schools with teaching materials for teachers and kits for the school children;
- Contributing to the development of values among children and young people through the generalisation of educational curriculum on peace and tolerance, which might ease tensions and preventing future conflicts;
- Contributing to the assurance of children's right to education including child soldiers, traumatised children, seriously affected by the crisis through alternative educational arrangements (compensatory, non-formal, pre-vocational education, etc.).



**Progress made**

- School supplies were provided to 50,000 primary school children and teaching materials for 1,000 teachers in schools during the October/November 2003 academic year in the Government controlled zone (UNICEF).
- School supplies provided to 175,000 primary school children and teaching materials to 3,500 teachers in schools under the regional directorate of Man, Odienné, Korhogo and Bouaké in the zone controlled by the *Forces Nouvelles* since the February 2004 academic year (UNICEF).
- Supply of food rations to 375,000 primary school children, 80,000 of whom live in zones controlled by the *Forces Nouvelles* (WFP).
- Development of an educational curriculum on peace, training of 250 trainers and experimentation in 80 schools of five regional education Directorates in zones under Government control, pending final validation and generalization (UNICEF).
- Psychological care, support and supervision of nearly one thousand children and teenagers particularly affected by the war, especially in the zone under the control of the *Forces Nouvelles* (UNICEF/PROTECTION).
- Information, sensitisation and mobilization campaigns for members of the management committees of nearly 300 schools in three primary school inspectorates of the Abobo district on the rights of the child and education on peace, tolerance and values.

**6.5 MULTISECTOR (REFUGEES)****Context**

Access to refugees in areas held by non-governmental forces is still limited. The emergency resettlement programme originally scheduled to phase out early in 2004 will continue longer than foreseen as it has generated more rejected cases than anticipated. The gradual deployment of ONUCI forces has started and should offer security to the population, particularly in the western part of the country where most of the Liberian refugees reside while allowing humanitarian staff better access to rebel controlled areas.

**Challenges**

- Provide international protection and adequate assistance to Liberian refugees in Côte d'Ivoire through direct individual assistance in Abidjan and refugee settlements (Nicla camp, Tabou transit centre, Tabou town and villages) as well as community-based interventions aimed at strengthening the absorption capacity of hosting communities.
- Facilitate the voluntary repatriation of Liberian refugees should the situation continue to improve in Liberia.
- Advocate for the adoption of a Refugee Act by parliament.

**Progress made**

Ten thousand Liberian refugees in Nicla camp and Tabou transit centre continue to receive humanitarian assistance. Measures are being taken to preserve the civilian nature of these settlements. Individual and community-based assistance is being provided to some 44,000 Liberian refugees who are living in border villages in the *Zone d'Accueil des réfugiés* while host communities are supported with tools, seeds and other agricultural inputs, rehabilitation of wells, latrines, health centres and schools.

UNHCR continues the emergency programme to resettle more than 6,000 Liberian refugees. As of 15 March 2004, 2,950 had departed Côte d'Ivoire through this programme.

Needs assessment exercises have been conducted in 33 villages with high potential for Ivorian refugees to return, as a result of which construction of wells and latrines will begin in June 2004.

## **7. IMPACT OF THE IVORIAN CRISIS ON MALI, GHANA AND BURKINA FASO**

### **Burkina Faso**

In 2004 there has been a trickle of Burkinabé leaving Côte d'Ivoire, which is a considerable change from 2003 where 342,000-registered Burkinabé returned to Burkina Faso. There are even unconfirmed reports that many are returning to Côte d'Ivoire in time for this year's agricultural season, leaving dependants behind in Burkina Faso. Some Burkinabé even refused to leave Côte d'Ivoire and remain in transit centres in Guiglo. The latest events of 25 March 2004 did not cause further population movements to Burkina Faso, however the country team have focused on facilitating the community based reintegration of those who returned in 2003.

Of the US\$ 4.9 million appealed for programmes in Burkina Faso, no official contributions are reported. However with regular budgetary funds, resources mobilised locally, and funds channelled through other partners, some progress was made in facilitating the return and supporting the reintegration of Burkinabe returnees.

### **Progress made**

- Education: providing teaching and learning materials for 15,000 school children and carrying out sensitisation campaigns to promote the culture of peace and acceptance of returnee children in communities of return.
- Health: provision of vaccines; training of health personnel in districts of return on emergency health and water and sanitation response; establishing screening and referral systems for malnourished cases; sensitising on preventative measures for the spread of HIV/AIDS and STDs.
- Water and sanitation: water pumps were installed in the transit centres and hygiene kits were provided.
- Food and agriculture: the provision of food assistance was adequate through contributions to the WFP regional operation, however no funding was received for agricultural support in areas of return.
- Capacity building: through funds received outside the CAP, UNDP was able to support capacity building of government counterparts in humanitarian crises response, and developing a national socio-economic reintegration plan.
- A Sub-Committee on Humanitarian Assistance was formed with a technical advisory body composed of UN, Government and non-governmental partners.

### **Challenges**

- Obtaining reliable and accurate data on population movements and vulnerable groups.
- Limited government resources, including human, financial and logistical, to implement emergency programmes.
- Providing transportation of returnees to communities of return.
- Insufficient coordination
- Limited absorption capacity of host communities to absorb returnees due to an already poor basic social service infrastructure.
- Limited funds and resources to implement the goals and targets set out in the CAP.

### **Priorities for the rest of 2004**

In support of the reintegration of 80,000 Burkinabe returnees the priorities of the country team will be:

- Education: promote free education for repatriated children until their parents are involved in income generation activities.
- Health: continue vaccinations campaigns and provide basic medical assistance and psychosocial support.
- Communication: increase sensitisation campaigns on education, health promotion and culture of peace.
- Protection: improve conditions of repatriation movements, providing care and protection for women and children in reception and transit centres; promote prevention of sexual abuse and exploitation of women and children.

**Mali**

In 2004 population movements have been limited in comparison to 2003 where approximately 82,000 Malians returned to Mali from Côte d'Ivoire. The reinsertion of Malian returnees from Côte d'Ivoire is still ongoing and receives support through a national coordination committee chaired by the Foreign Affairs Ministry. A coordination mechanism composed of key humanitarian actors was also established under the leadership of UN Resident Coordinator providing leadership to ongoing efforts to streamline and reinforce existing coordination mechanisms within the governments and its financial partners. The Government has also indicated that it remains very concerned that the longer-term effects of the crisis could negate the year's development efforts towards reducing poverty. Mali continues to participate actively in Côte d'Ivoire's peace process and has cracked down hard on FN-combatants who have sought refuge in Mali. Mali has not received funding for projects under CAP 2004.

**Ghana**

Ghana has put a lot of effort into the political resolution of the conflict in Côte d'Ivoire. Regarding the events of 25 March 2004, the President of Ghana travelled to Abidjan for mediation between the different parties. The populations leaving Côte d'Ivoire during the crisis transited through Ghana. The influx has subsided considerably, however to reach Burkina Faso or Mali those travelling from the South still have to transit through Ghana. No funding was received for projects under CAP 2004 for Ghana.

## 8. CONCLUSION

The events of 25 March 2004 have created an unexpected and serious socio-political crisis in the country, which has nearly jeopardised the peace process initiated in January 2003. Therefore, the emphasis of the humanitarian strategy has shifted to an emergency humanitarian assistance programme, which is critical to preserve the achievements made so far in meeting humanitarian needs of the displaced and other vulnerable groups, including access to health and education.

This strategy will involve meeting the increasing needs identified, namely:

- Strengthening the protection of civilian populations and vulnerable groups;
- Promoting the right to education for nearly one million children;
- Accessing clean water in many parts of the country;
- Increasing access to healthcare systems and treatment;
- Continuing stabilisation of food security and malnutrition rates in the west.

The priority is to provide assistance and protection to displaced populations as well as host communities, which continue to host nearly 80% of the displaced population. Priority sectors are the protection of civilians, education of children, health and food security, with a particular emphasis on conflict prevention and peace education.

Finally, in anticipation of the foreseeable deterioration of the humanitarian situation in the coming months, a CAP for CDI 2005 will be necessary. It is envisaged that the strategy and requirements for humanitarian response in Burkina Faso, Mali and Ghana will be covered under the Regional CA 2005 for West Africa.

Project Code	Appealing Agency	Project Title	Original Requirements	Revised Requirements	Reason for Revision
<b>NEW PROJECTS</b>					
<b>CIV-04/MS05 NEW</b>	AFRICARE	Social and economic support to IDPs and their host communities	-	<b>194,690</b>	New project
<b>CIV-04/E03 NEW</b>	UNESCO	Training of children and adolescents at risk	-	<b>96,800</b>	New project
<b>CIV-04/CSS03 NEW</b>	UNFPA	Database on IDPs and their needs in Côte d'Ivoire	-	<b>264,301</b>	New project
<b>CIV-04/P/HR/RL12 NEW</b>	UNICEF	Prevention of abuse, violence and sexual exploitation of children and youth	-	<b>409,091</b>	New project
<b>CIV-04/H08 NEW</b>	UNICEF	Prevention of HIV/AIDS among youth and former child soldiers in Côte d'Ivoire	-	<b>420,455</b>	New project
<b>REVISED PROJECTS</b>					
<b>MULTISECTOR</b>					
<b>CIV-04/MS04</b>	IOM	Support for the return or resettlement of internally displaced TCNs and Ivorian Nationals in Côte d'Ivoire	<b>3,070,000</b>	<b>1,900,000</b>	The current context limits the scope for the full implementation of the project. The data and population figures have been modified based on assessments
<b>WATER &amp; SANITATION</b>					
<b>CIV-04/WS01</b>	UNICEF	Provision of safe water, sanitation and hygiene promotion	<b>1,250,000</b>	<b>2,326,705</b>	The number of beneficiaries has risen from 1,000,000 to 3,000,000

## 9. PROJECT SHEETS

<b>Appealing Agency</b>	<b>AFRICAN CARE, INCORPORATED (AFRICARE)</b>
<b>Project Title</b>	Social and economic support to IDPs and their host communities
<b>Project Code</b>	CIV-04/MS05
<b>Sector</b>	Multi Sector
<b>Goal</b>	Reduce the spread of STI/HIV/AIDS and food insecurity among IDPs and their Host Communities
<b>Objectives</b>	Improve the well being of the IDPs and host communities by providing life-sustaining services including food security and income generation activities. Raise awareness and mitigate the spread of STI/HIV/AIDS through community-based care volunteer teams.
<b>Themes</b>	Food Security and STI/HIV/AIDS
<b>Targeted Beneficiaries</b>	IDPs and host community
<b>Geographical Code</b>	Daloa region
<b>Implementing Partners</b>	NGOs and associations
<b>Project Duration</b>	June 2004 – December 2004
<b>Funds Requested</b>	<b>US\$ 194,690</b>

### Project Summary

There are an estimated 8,000 IDPs living in Daloa with host families and communities. These IDPs lack the financial means to provide themselves with basic necessities including food.

### Activities

**Agricultural Production.** Agricultural inputs and training on improved agricultural techniques will be provided to target groups, particularly women. Special technical guidance, training in seed production and quality seeds will be provided to 50 households. An estimated 30,000 beneficiaries, identified among vulnerable populations (indigenous and internally displaced), will receive agricultural inputs and extension services, which should enable the cultivation of 60 hectares of food crops during the following agricultural season.

**Income Generation Activities (IGA).** IGA groups will benefit through a revolving loan system that will be established in the current grant cycle. Steering committees will be formed to build their understanding of credit and business practice by: educating IGA members to collaborate among themselves in operating a rotary/revolving credit system; assisting groups on marketing their products; cost-analysis, assigning appropriate prices, and advertisement; monitoring, supervision and evaluation of group record keeping.

**Sexually Transmitted (STIs)/HIV/AIDS.** Focus is on increasing awareness of STIs and HIV/AIDS with a specific emphasis on the production of information, education and communication (IEC) materials and use of condoms. Africare will work to build community capacities to cope with this pandemic. Africare believes that cultural barriers including the Ivorian communities' tradition of silence on sex-related issues can be changed through large-scale meetings, training of youth peer educators, home-based care volunteers, and by a mass awareness campaign.

### Expected Output

The expected results are: 50 farm families (IDPs and host communities) received essential agricultural inputs and training; 60 hectares (50 food crop and 10 vegetable) put under production; 80% participation rate of women in agricultural income generating activities; at least 225 farmers trained; 30 micro-projects funded for US\$ 654 each; 150 trainers on STIs/HIV/AIDS trained; 30 peer educators and counsellors trained on STIs/HIV/AIDS and proper condom use.

FINANCIAL SUMMARY	
Budget Items	US\$
Personnel costs	91,123
Operating costs	103,567
<b>TOTAL</b>	<b>194,690</b>

<b>Appealing Agency</b>	<b>UNITED NATIONS EDUCATIONAL, SCIENTIFIC, AND CULTURAL ORGANIZATION (UNESCO)</b>
<b>Project Title</b>	Training of children and adolescents at risk
<b>Project Code</b>	CIV-04/E03
<b>Sector</b>	Education
<b>Theme</b>	Training of children and adolescents at risk
<b>Objective</b>	To provide quality training to young demobilised soldiers
<b>Targeted Beneficiaries</b>	200 young people at risk
<b>Implementing Partners</b>	Ministry of Technical Education and Vocational Training, ILO, and UNDP
<b>Project Duration</b>	June 2004 – December 2004
<b>Funds Requested</b>	<b>US\$ 96,800</b>

### Project Summary

The war in Côte d'Ivoire had caused profound disruptions in the social and economic sectors. With the recruitment of both boys and girls as part of the FN armed elements. Estimated at around 3,000 in 2003, these children are primarily dropouts and illiterate young people, who must be provided with options provided by vocational training, otherwise they will be at risk of taking to crime and prostitution. In this regard, it is envisaged to implement a programme of re-insertion of youth at high-risk. Given the relatively short duration of the project (six months), only 200 young people, including 100 girls, will initially be included in this programme. The Ministry of Technical Education and Vocational Training will select those who, will participate in the programme, under the authority of the International Labour Organization (ILO) together with the local authorities. This programme, which will start as a pilot project for six months, will cover the areas of Bouaké and Korhogo. If the experiment proves successful, it could be extended to the other regions.

### Objective

To facilitate the re-insertion of high-risk children and adolescents through training and education aimed at improving their skills.

### Activities

- Identifying young children and adolescents at risk and their needs in the regions concerned.
- Defining the training objectives and content, identification of trainers and reception structures.
- Formulating and implementing of programmes.
- Establishing a monitoring and evaluation mechanism.

### Expected output

- Training objectives and content defined.
- Training programme made available.
- 200 young people demobilised, including 100 girls selected and trained.
- A monitoring and evaluation team put in place to supervise the teachers trained.
- Periodic reports produced by the monitoring and evaluation team.

<b>FINANCIAL SUMMARY</b>	
<b>Budget Items</b>	<b>US\$</b>
Operating costs	88,000
Administrative costs	8,800
<b>TOTAL</b>	<b>96,800</b>

<b>Appealing Agency</b>	<b>UNITED NATIONS POPULATION FUND (UNFPA)</b>
<b>Project Title</b>	Database on internally displaced persons (IDPs) and their needs in Côte d'Ivoire
<b>Project Code</b>	CIV-04/CSS03
<b>Sector</b>	Coordination and Support Services
<b>Theme</b>	Collection of data on displaced people, information management
<b>Objectives</b>	To define the profile of displaced populations, their living conditions and impact on host families.
<b>Target Beneficiaries</b>	All actors involved in the management of the situation of displaced persons (Government, UNS, NGOs and other humanitarian agencies);
<b>Implementing partners</b>	Office for Coordination of Humanitarian Affairs (OCHA); National School of Statistics and Applied Economics (ENSEA); National Institute of Statistics (INS).
<b>Duration of the Project</b>	June 2004 – December 2004
<b>Funds Requested</b>	<b>US\$ 264,301</b>

### Project Summary

Being aware of the difficult situation of IDPs and host families, the Government, UN agencies and humanitarian NGOs are mobilizing themselves to find lasting solutions to this problem. UNFPA and OCHA, in partnership with the National Institute of Statistics, proposes to carry out a registration of IDPs in their places of reception and assess their needs in terms of education, employment, living conditions, and identify necessary actions to facilitate their return. The data obtained through this operation will be fed into a database on IDPs in Côte d'Ivoire, which can be accessed by all actors in the field.

### Objectives

- To define the profile of displaced populations, their living conditions and impact on the host families.
- To obtain information on the specific situation of displaced women and children; To collect information on availability, accessibility and functioning of basic services in host localities;
- To assess the perception of the host population on the presence of displaced people in their communities.

### Activities

Preparatory work; Collection of field data; Data processing and analysis; Development of a database; distribution

### Expected output

Identification and evaluation of the needs of IDPs would facilitate:

- Elaboration of the map of all reception sites and sites of origin of displaced persons;
- Knowledge of the geographical distribution of displaced persons;
- Knowledge of their profile (demographical and socio-economic traits);
- Collection of data on their eventual return to their localities of origin;
- Availability of data on living conditions: accommodation in host families, health, employment, and education of children.

<b>FINANCIAL SUMMARY</b>	
<b>Budget items</b>	<b>US\$</b>
Personnel costs	18,074
Operating costs	233,641
Project support indirect cost (5%)	12,586
<b>TOTAL</b>	<b>264,301</b>

<b>Appealing Agency</b>	<b>UNITED NATIONS CHILDREN'S FUND</b>
<b>Project Title</b>	Prevention of abuse, violence and sexual exploitation of children and youth
<b>Project Code</b>	CIV-04/P/HR/RL12
<b>Sector</b>	Protection/Human Rights/Rule of Law
<b>Theme</b>	Sexual violence, HIV/AIDS, STI
<b>Objective</b>	Prevent sexual abuse and provide care to adolescents victims of sexual abuse and to reduce the proportion of adolescents infected by STIs, including HIV/AIDS
<b>Target Beneficiaries</b>	Teenage girls, children, IDPs, women
<b>Implementing Partners</b>	Ministry of AIDS, Ministry of Health, National Committee of Demobilization, Disarming and Rehabilitation of ex soldiers, Youth associations and networks, UNFPA, AIMAS (for condoms), UN Theme Group on HIV/AIDS
<b>Project Duration</b>	June 2004 – December 2004
<b>Funds requested</b>	<b>US\$ 409,091</b>

### Project Summary

Before the crisis, HIV-AIDS represented the leading cause of mortality in adults. The prevalence rate is estimated at 12% for the entire population and 13% in pregnant women in urban areas. The actions initiated by UNICEF so far focus on STI and AIDS prevention among youths as well as the promotion of the rights of orphans and HIV/AIDS-vulnerable children. The abuse and sexual abuse dimensions have not been addressed for lack of funds. The advent of the conflict makes therefore the urgency of quick interventions to prevent, protect and provide care to victims of sexual abuse among adolescents even more relevant.

### Objectives

This project aims to prevent sexual abuse and provide care to adolescents victims of sexual abuse and to reduce the proportion of adolescents infected by STIs, including HIV/AIDS.

### Activities

#### Capacity building & Improved service delivery

- Training of 80 health workers for the provision of medical care to victims of rape and the keeping confidentiality.
- Training of 80 social workers to care provision and psychosocial monitoring.
- Supply of 5,000 rapid tests (Syphilis, pregnancy and HIV) and 10,000 STI and rape kits to eight health facilities to provide care to 2,000 female adolescents.

#### Communication for behavioural change

- Sensitisation of 120 policemen, 50 journalists and 100 soldiers.
- Production and reproduction of 5,000 leaflets and bills on paedophilia and sexual abuse.

#### Community empowerment and participation

- Community sensitisation and life skills development among 50,000 young people on the issue of paedophilia and sexual abuse conducted by adolescents peer educators.
- Monitoring and evaluation activities through supervision, coordination of regular data collections and analysis.

### Expected Outcome

- Provide medical, legal and psychosocial care to 5,000 victims of violence and sexual abuse.
- 10,000 adolescents with STIs are provided adequate medical care.
- 50,000 adolescents have access to information on STI/HIV/AIDS and HIV testing facilities.

FINANCIAL SUMMARY	
Budget Items	US \$
Operating costs	360,000
Indirect programme support cost (5%)*	49,091
<b>Total of Project</b>	<b>409,091</b>

\*The actual recovery rate on individual contributions will be calculated in line with Decision 2003/9 of the Executive Council of UNICEF dated 05 June 2003.



**CÔTE D'IVOIRE PLUS THREE**

<b>Appealing Agency</b>	<b>UNITED NATIONS CHILDREN'S FUND (UNICEF)</b>
<b>Project Title</b>	Prevention of HIV/AIDS Among Youth and Former child Soldiers in Côte d'Ivoire
<b>Project Code</b>	CIV-04/H08
<b>Sector</b>	Health
<b>Theme</b>	HIV/AIDS Prevention among young people
<b>Objective</b>	Contribute to the reduction of new HIV/ AIDS infections among former child soldiers and young people by promoting behaviour change through access to information, education to life skills and youth friendly health care
<b>Target Beneficiaries</b>	Ex-child soldiers, young people
<b>Implementing Partners</b>	Ministry of AIDS, Ministry of Health, National Committee of Demobilisation, Disarming and Rehabilitation of ex soldiers, Youth associations and networks, UNFPA, Agence Ivoirienne de Marketing Social (AIMAS) (for condoms), UN Theme Group on HIV/AIDS
<b>Project Duration</b>	June 2004 – December 2004
<b>Funds requested</b>	<b>US\$ 420,455</b>

**Project Summary**

The project will support ongoing government efforts to reduce the transmission of HIV/AIDS among young people by providing adequate information and services to young people and their families on HIV/AIDS prevention, especially among child former soldiers. It is expected that during the life of the project it will equip six Child and Youth-Friendly Health centres for VCT and STI treatment.

**Objectives**

This project aims to contribute to the reduction of new HIV/ AIDS cases among former child soldiers and young people in six regions in Côte d'Ivoire by promoting behaviour change through access to information, education to life skills and youth friendly health care.

**Activities**

- Train 1,000 young peer educators among former child soldiers and young people in life skill and HIV/AIDS to prevent STIs/HIV/AIDS.
- Conduct awareness on HIV/AIDS by 1,000 peer educators in ten towns among young people and child former soldiers.
- Produce and duplicate 10,000 leaflets, booklets and posters about STIs/HIV/AIDS.
- Train 50 health staff in ten centres to STI syndrome management.
- Train 50 medical social workers to HIV counselling.
- Provide 10,000 rapid HIV Testing and 10,000 STI kits to ten health centres to provide care for 10,000 children.

**Expected output**

- The production and distribution of communication packages on behaviour change of youth and former child soldiers.
- Strengthened life-skills of 20,000 former child soldiers and other young, and the provision of information on HIV/AIDS.
- 12,000 child former soldiers and other young people have access to VCT centres and have their IST treated.

<b>FINANCIAL SUMMARY</b>	
<b>Budget Items</b>	<b>US\$</b>
Operating costs	370,000
Project support indirect cost (5%)*	50,455
<b>Total of Project</b>	<b>420,455</b>

\*The actual recovery rate on individual contributions will be calculated in line with decision 2003/9 of the executive council of UNICEF dated 05 June 2003.

**ANNEX I.**  
**TABLE I. SUMMARY OF REQUIREMENTS AND CONTRIBUTIONS**  
**BY APPEALING ORGANISATION AND BY SECTOR**

<b>Consolidated Appeal for</b> <b>Cote d'Ivoire + 3 2004</b> Summary of Requirements and Contributions By Appealing Organisation as of 28 May 2004
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Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Appealing Organisation	Original Requirements	Revised Requirements	Contributions	Pledges	Carryover	Total Resources Available	Unmet Requirements	% Covered
Africare	-	194,690	-	-	-	-	194,690	- %
FAO	4,312,300	4,312,300	721,286	-	-	721,286	3,591,014	16.7%
IOM	8,342,392	7,172,392	408,240	-	-	408,240	6,764,152	5.7%
MINUCI - Human Rights Unit	236,170	236,170	-	-	-	-	236,170	- %
OCHA	2,440,047	2,440,047	404,292	-	-	404,292	2,035,755	16.6%
UNDP	8,810,514	8,810,514	-	-	-	-	8,810,514	- %
UNDP/UNESCO	500,000	500,000	-	-	-	-	500,000	- %
UNDP/UNSECOORD	898,476	898,476	-	-	-	-	898,476	- %
UNESCO	-	96,800	-	-	-	-	96,800	- %
UNFPA	1,744,000	2,008,301	-	-	-	-	2,008,301	- %
UNHCR	12,219,782	12,219,782	432,162	-	-	432,162	11,787,620	3.5%
UNICEF	18,558,342	20,464,593	-	1,947,293	-	1,947,293	18,517,300	9.5%
WFP	-	-	-	-	-	-	-	- %
WHO	1,750,601	1,750,601	-	-	-	-	1,750,601	- %
<b>Grand Total</b>	<b>59,812,624</b>	<b>61,104,666</b>	<b>1,965,980</b>	<b>1,947,293</b>	<b>0</b>	<b>3,913,273</b>	<b>57,191,393</b>	<b>6.4%</b>

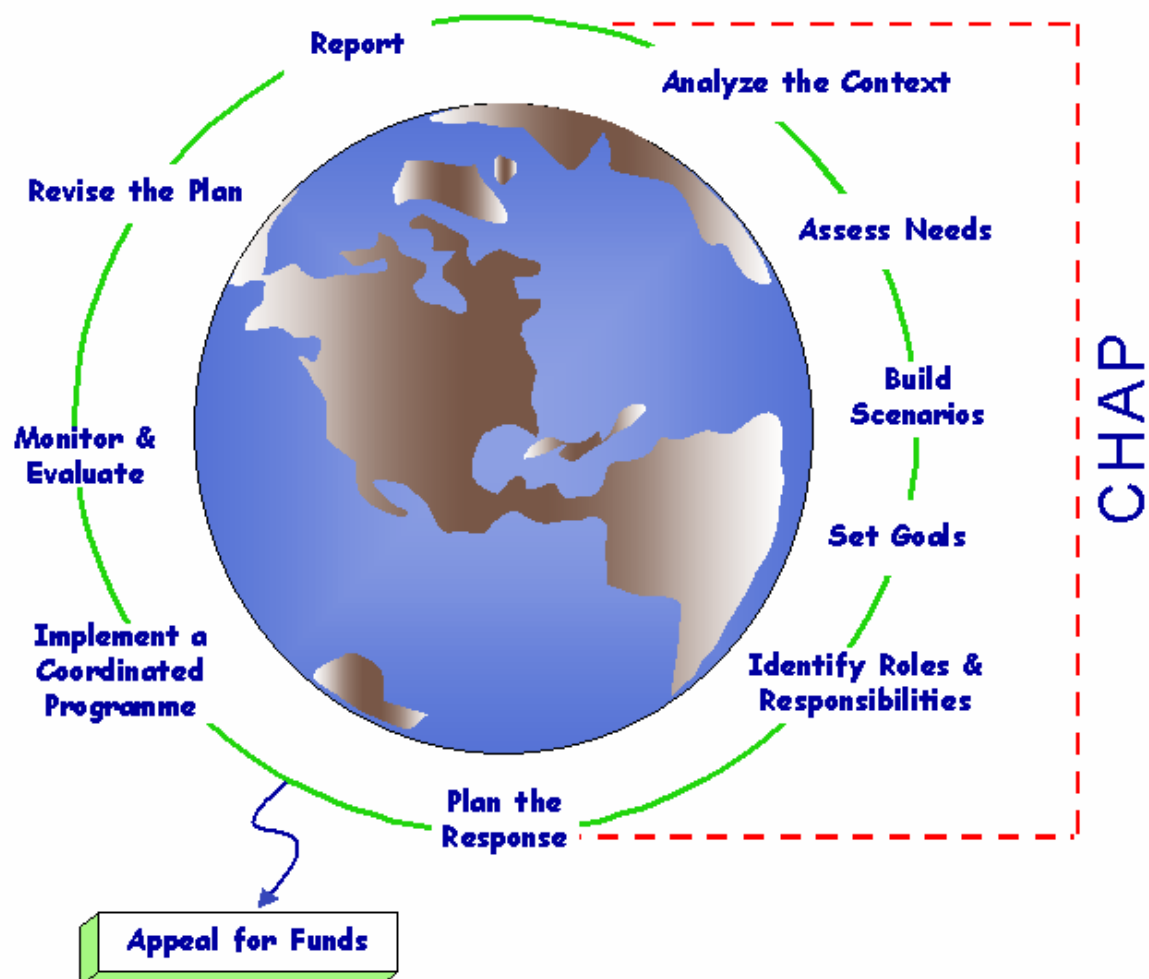
**Consolidated Appeal for  
Cote d'Ivoire + 3 2004**  
Summary of Requirements and Contributions  
By Sector  
as of 28 May 2004

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Sector Activity	Original requirements	Revised requirements	Contributions/ Pledges/ Carryover	Unmet requirements	% Covered
AGRICULTURE	4,312,300	4,312,300	721,286	3,591,014	16.7 %
COORDINATION AND SUPPORT SERVICES	2,247,774	2,512,075	404,292	2,107,783	16.1 %
ECONOMIC RECOVERY AND INFRASTRUCTURE	7,597,392	7,597,392	-	7,597,392	0.0 %
EDUCATION	3,443,864	3,540,664	-	3,540,664	0.0 %
FOOD	-	-	-	-	0.0 %
HEALTH	14,806,762	15,227,217	820,896	14,406,321	5.4 %
MULTI-SECTOR	15,289,782	14,314,472	840,402	13,474,070	5.9 %
PROTECTION/HUMAN RIGHTS/RULE OF LAW	9,400,365	9,809,456	-	9,809,456	0.0 %
SECURITY	898,476	898,476	-	898,476	0.0 %
UNATTRIBUTED	-	-	1,126,397	-1,126,397	0.0 %
WATER AND SANITATION	1,815,909	2,892,614	-	2,892,614	0.0 %
<b>Grand Total:</b>	<b>59,812,624</b>	<b>61,104,666</b>	<b>3,913,273</b>	<b>57,191,393</b>	<b>6.4%</b>

# The Consolidated Appeals Process:

*an inclusive, coordinated programme cycle in emergencies to:*



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