I. EXECUTIVE SUMMARY

For the first time in over five years of socio-political crisis in Cote d’Ivoire, one can observe positive signs across the country. The signing of the Ouagadougou Political Agreement (OPA) in March 2007 contributed to improvement in the security situation in the Centre, North and West of Cote d’Ivoire, and prompted the voluntary return of thousands of Internally Displaced People (IDPs), most notably vulnerable persons with extremely fragile livelihood, to their areas of origin.

Within this context, humanitarian actors agreed, during the Cote d’Ivoire 2008 Consolidated Appeal Process (CAP), upon focussing their activities on providing effective and coordinated support to ongoing return movements, especially in the western region of the country where the situation of internal displacement is really acute.

However, funding level of the Cote d’Ivoire CAP continued to fall short of overall requirements. None of the sectors in the Appeal benefited from any funding as of February 2008 [Source: Financial Tracking Service (FTS)].

The growing return movements of IDPs in the western region of Cote d’Ivoire therefore necessitated the request for United Nations Central Emergency Response Fund (CERF) support to facilitate the resettlement of returning populations.

CERF funds have helped reinforce the existing protection and monitoring mechanism (peace committees) to perform reconciliation approaches in synergy with local authorities in the western region. It has also permitted to satisfy basic needs for returnees and their host families that were not possible under other funding. Consequently, humanitarian actors recorded over 75,000 IDPs who voluntarily return to their places of origin located in the western regions of Moyen Cavally and 18 Montagnes. In August 2008, the IDPs Transit Centre (CATD) of Guiglo (West), which hosted 7,900 IDPs and was managed by IOM since 2003, was officially closed with the support of the humanitarian community and the government in collaboration with the local authorities.

Despite the marked progress in the humanitarian situation, a Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey jointly conducted in July 2008 by WFP and UNICEF in collaboration with the National Nutrition Programme (PNN) revealed up to 17.5 percent Global Acute Malnutrition (GAM) rate amongst the populations in the north. In response to this survey, FAO, UNICEF and WFP submitted two joint emergency projects in support of children under five years who are malnourished or at risk of becoming malnourished in the northern regions of Côte d’Ivoire.
The rapid availability of the CERF funds contributed to the establishment of an early detection and referral system in some parts of the north and was used to support 84,202 beneficiaries of which 7,002 malnourished children under five years. Pregnant and lactating women were sensitized for adequate food intake by voluntary community workers during home to home visits. This has contributed to the reduction of forthcoming cases of malnourished children in localities covered by the CERF project.

In 2008, CERF allocated a total of $12,075,031.50 to enable the humanitarian community in Cote d'Ivoire to provide a timely assistance to the most vulnerable populations in the crisis-affected areas.

<table>
<thead>
<tr>
<th>Total amount of humanitarian funding required and received during the reporting year</th>
<th>REQUIRED: $58,099,693</th>
<th>RECEIVED: $25,263,422</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total amount requested from CERF</td>
<td>$14,146,045</td>
<td></td>
</tr>
<tr>
<td>Total amount of CERF funding received by funding window</td>
<td>RAPID RESPONSE: $5,072,073</td>
<td>UNDERFUNDED: $7,002,958.50</td>
</tr>
<tr>
<td>Total amount of CERF funding for direct UN agency / IOM implementation and total amount forwarded to implementing partners</td>
<td>GRAND TOTAL: $12,075,031.50</td>
<td></td>
</tr>
<tr>
<td>UN AGENCIES/IOM:</td>
<td>$8,947,843.50</td>
<td></td>
</tr>
<tr>
<td>NGOs:</td>
<td>$1,062,088</td>
<td></td>
</tr>
<tr>
<td>GOVERNMENT:</td>
<td>$12,075,031.50</td>
<td></td>
</tr>
<tr>
<td>OTHER:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Approximate total number of beneficiaries reached with CERF funding</th>
<th>TOTAL</th>
<th>under 5 years of age</th>
<th>Female (If available)</th>
<th>Male (If available)</th>
</tr>
</thead>
<tbody>
<tr>
<td>641,947</td>
<td>11,390</td>
<td>139,545</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Geographic areas of implementation targeted with CERF funding | Western Côte d’Ivoire particularly areas of return (axis of Guiglo-Bioléquin-Toulepleu) and IDPs Transit Centre (CATD) of GuigloCentre and Northern regions |

II. BACKGROUND

From March to December 2007, over 61,000 persons displaced during the conflict had voluntarily returned to their areas of origin, but the social and economic infrastructure remained fragile, and land and nationality disputes continued to pose serious threats to social cohesion, stability and the still fragile peace process.

Once back home, the returnees found basic social infrastructures that had been destroyed or were not functioning, no judiciary system was in place, and finally there was no way to provide for their needs. Return operations therefore required well coordinated, multi-sectoral interventions to ensure, not only a dignified and safe return but also a sustainable reintegration.

At the same time, the humanitarian community in Cote d’Ivoire expressed concern about general child malnutrition, with pockets of high prevalence of acute malnutrition, particularly in the north of the country. Consequently, UN agencies working in the food security and nutrition field requested CERF funds for emergency interventions to counter malnutrition in these areas.
Against this background, in February 2008, Cote d’Ivoire was among countries eligible for the CERF Underfunded Emergencies (UFE) grant as per the Emergency Relief Coordinator’s (ERC) decision to allocate USD 7,000,000 to the country. Consequently, the Humanitarian Coordinator (HC) informed the wider humanitarian community in Cote d’Ivoire and convened two special meetings of the Inter-Agency Humanitarian Coordination Committee “IAHCC” (IASC at the country level) on 12 and 19 February 2008.

The meetings recommended the use of the CERF allocation in support of ongoing humanitarian activities in line with Côte d’Ivoire 2008 Common Humanitarian Action Plan (CHAP) that is to address the humanitarian and protection needs of internally displaced populations (IDPs) in the western region of Cote d’Ivoire.

Based on the criteria and guidelines received from CERF Secretariat on the use of funds in CAP countries as well as on CERF country prioritisation and selection procedures, main criteria for the selection of eligible project proposals were retained:

- Relevance of project proposals to the identified needs and response strategy;
- Level/degree of implementation of projects using the previous CERF allocation;
- Operational capacities of agencies on the ground, with specific attention to the complementarity of activities between funded projects in responding to needs in an integrated manner.

The Humanitarian Coordinator also recommended projects from sectors other than protection to the ERC. These projects in the agriculture/food security and nutrition, coordination and support services, education, health and water and sanitation sectors were therefore designed to reflect current humanitarian needs of IDPs and host families.

Furthermore, in the second half of 2008, two joint WFP/FAO and WFP/UNICEF projects were financed under the CERF Rapid Response window to counter malnutrition in the north.

III. Implementation and results

Rapid response window

Agriculture/Food Security and Nutrition

The submission for the first time of joint UN agencies proposals allowed for increased inter-agency collaboration (for example, joint FAO/WFP and WFP/UNICEF project proposals). Each project’s activities were carried out according to criteria established within the Agriculture/Food Security and Nutrition cluster in order to avoid gaps and overlaps of activities.

The CERF funds have jointly allowed FAO and WFP to assist the most vulnerable households affected by the rise of food prices in the west, north and centre of Côte d’Ivoire, by providing agricultural kits (seeds, low land rice seeds, vegetable seeds, and agricultural tools) and food assistance.

FAO provided agricultural inputs to 5,300 vulnerable households (47,700 persons) in the west, centre and northern areas of the country, for them to
resume farming activities, thus improving the food security situation at the household level during the lean season (the lean season is July to September in the north and May to September in the west).

Special attention was given to newly returned families, HIV/AIDS-affected people, and female–headed households. Figures indicated that about 50 percent of total beneficiaries were women and 28 percent were recent returnees.

WFP undertook general food distributions to a total of 5,600 households in the west (1,680 households), north (3,360 households) and centre (560 households), which enabled them to meet their basic nutritional needs without using distress strategies to cope with the food insecurity.

In the last quarter of 2008, a rapid response CERF allocation was granted to UNICEF and WFP to jointly assist 160,500 beneficiaries, most notably under-five year children who were severely malnourished or moderately malnourished, pregnant and lactating women, and caretakers of severely malnourished children in therapeutic centres by providing therapeutic and supplementary feeding commodities. Thanks to CERF funds 110 therapeutic feeding centres for inpatient and 100 ambulatory feeding centres for outpatient were reinforced. These 110 feeding centres were operational (basic equipment) for malnutrition management in the following localities: Tengrela, Odienne, Ferke, Mankono, Bouna and Korhogo.

UNICEF and WFP assisted the Ministry of Health (MoH), the National Nutrition Programme (PNN) and non-governmental organizations (NGOs) in implementing a rapid response to address the results of a 2008 SMART nutrition survey which revealed alarming rates of malnutrition in the country’s North. The project was implemented in collaboration with international humanitarian NGOs including ACF and the state-run PNN. International NGOs treated severely malnourished children using essential commodities provided by UNICEF through CERF funds while the PNN was in charge of the development of technical materials, training of health agents and monitoring of Therapeutic Feeding Centres (TFCs).

The recovery rate of children in the eight TFCs was 84.3 percent and the recovery rate of children in the 29 Supplementary Feeding Centres (SFCs) was 78.8 percent, both above the international programme standard indicators of at least 70 percent in SFP.

**Underfunded emergencies window**

**Agriculture/Food Security and Nutrition**

At the beginning of 2008, the nutrition situation of vulnerable populations, particularly among children under-five, had worsened as a consequence of the socio-political crisis, notably in the western and northern parts of Cote d’Ivoire.

With the CERF grant, FAO supported 4,196 vulnerable households (37,764 persons) with agricultural kits with a particular interest in the regions with a large number of recent returnees. Access to quality seeds, tools and fertilizers benefited in priority to 3,523 female–headed households through improvement of their nutritional diet and incomes.

Percentage of beneficiary households grouped by vulnerability type (Source: FAO)
At the same time, WFP provided food assistance for a four-month period to IDPs and HIV-affected people, vulnerable mothers and children under-five, as follows:

- **17,000** (5780 female and 11220 male) IDP and returnee beneficiaries received general food distribution totalling 1,140 metric tonnes of food thus improving resettled IDPs access to food.
- **5,000** beneficiaries in nutrition programmes (1,382 malnourished girls under five, 1,328 malnourished boys under five, 1,850 pregnant and lactating women, and 440 caretakers of patients in therapeutic feeding programmes) received 348mt of CSB, oil, and sugar from March to June 2008 thus reducing malnutrition.
- **42,000** persons affected by HIV/AIDS (3,000 OVC households and 5,400 PMTCT and PLWHA households) with 1,350mt of food thus improving health status.

The CERF contribution to UNICEF Côte d’Ivoire was used to improve the nutritional status for children and families affected by acute undernutrition in the northern and western parts of Cote d’Ivoire.

In the west, the CERF grants have allowed extension of assistance to children with severe acute undernutrition in Danané, Duékoué, Guiglo, Man and Bangolo after the withdrawal of some international NGOs from these areas at the end of 2007.

In both regions, children under five who suffered from acute malnutrition were adequately treated in hospitals through therapeutic feeding centres (TFCs), contributing to under five mortality reduction in these areas. Training of 90 health agents in six health districts (Odienne, Boundiali, Beoumi, Bouake, Guiglo, and Man) and provision of feeding products, essential drugs and anthropometric materials to three TFCs and 19 SFCs have increased access to adequate care of malnourished children.

The MoH through the PNN and international humanitarian NGOs were involved in the implementation process through training of health agents and community workers, early detection followed by treatment of severely acute malnourished children in TFCs. International humanitarian NGOs specifically Médecins Sans Frontières (MSF) Belgium contributed providing treatment to severe acute malnourished (SAM) children in TFCs while WFP treatment of moderate acute malnourished cases contributed to lowering the number of SAM.

**Coordination and Common Services**

The CERF funds were particularly effective as a rapid funding mechanism to ensure the continuity of the United Nations Humanitarian Air Service (UNHAS) which was to cease at the end of May 2008 if no funding was made available. With the CERF funds, UNHAS provided safe, cost- and time-effective transport for 12,609 humanitarian staff, 25 immediate medical evacuations and transport of 57 metric tonnes of fragile and perishable humanitarian goods (vaccines and medical equipment) in addition to supporting ad hoc missions by donors, UN, and NGOs in and between the four West Africa coastal countries (Côte d’Ivoire, Guinea, Liberia and Sierra Leone).

**Education**

Thanks to CERF funds, 3,397 children from 13 primary schools in the localities of Sangouiné, Mahapleu, Danané Zouhan Hounien, Bin Houye and Kouibly (west), benefited from improved school infrastructure. These schools were equipped with furniture which allowed children to pursue their education in an adequate learning environment.
Health

The availability of the CERF funds made it possible for UNICEF to reinforce the new treatment protocol for malaria, using the artemisin-based combination therapy (ACT) for case management and sulphadoxin-pyrimethamine (SP) for Intermittent Preventive Treatment in pregnant women. The project covered the four most exposed health districts (Bangolo, Duékoué, Guiglo and Toulepleu) in the west where thousands of IDPs have recently returned.

UNFPA provided 45 maternities in the CNW areas, with high quality emergency obstetric and neonatal care (EONC) and reproductive health kits for caesarean, episiotomies and general anaesthetics. The data tools reveal that 15,400 pregnant women delivered in the 45 maternities concerned by the project and 800 caesareans were managed.

The Ministry of Health and Public Hygiene was directly involved for the transport of equipments to health centres.

Multi-sector

IRC worked closely with IDPs to further satisfy certain primary needs for the people already returned and continue to raise awareness among those who have not yet returned on their rights and especially on the need for social cohesion.

From 4 to 7 November 2008, IRC organized a Go and Talk Visit, in order to inform IDPs on the Guiglo-Bloléquin axis about the current situation in their villages of origin. The visit reached 826 people (445 men, 331 women, and 50 children).

The CERF funds have permitted IRC to satisfy certain primary needs such as Non-Food Items, school equipment and supplies, and fixing of school and health centres for returnees that were not possible under other funding, including continued activities with the various community committees. This has made it possible to facilitate further returns and support to returnees and their communities.

Protection

Most notably, CERF funds have allowed for the continuation of existing protection projects in the west.

United Nations High Commission for Refugees (UNHCR) maintained a robust monitoring system during 2008 which contributed to promptly bringing to the attention of main stakeholders all the key protection challenges involving IDPs as well as returnees in the west. UNHCR’s involvement facilitated IDPs return in areas that were primarily considered as inaccessible due to social cohesion problems. Following the incident that prompted the return movement of approximately 500 IDPs from Zeaglo and other localities to CATD, Guiglo, during the first half of 2008, the protection monitors based in Blolequin played a pivotal role in supplying information, on a quasi-daily basis, to the Protection Cluster lead so as to keep the HC and the IAHCC abreast of developments in the region. The monitoring team also played a vital role in assisting with efforts to resolve similar inter-community violent conflicts in the Blolequin department. The daily presence
of protection monitors in these conflict-ridden and conflict-prone localities has been instrumental in either reducing tensions or attenuating the effects of the conflict. Furthermore, the deployment of protection monitors has ensured that information reaches the key actors as promptly as possible, enabling timely and effective action.

UNHCR also supported the process of issuance of basic registration documents to children who were not registered at birth in Guiglo. A total of 76 separated/unaccompanied children were identified and 150 other children with specific needs were assisted and durable solutions found for them. The project also facilitated the issuance of 300 birth certificates to children, which made it possible for 133 IDP children to attend school. UNHCR partners initiated several sensitization campaigns as well as specific interventions with regard to reported Sexual and Gender-Based Violence (SGBV) cases in the IDP areas.

International Organization for Migration (IOM) was able to reinforce its existing protection and monitoring mechanism to perform reconciliation approaches in collaboration with humanitarian actors (UN Agencies and international NGOs) and local authorities’ joint efforts to support the return dynamics. IOM organised IDPs voluntary return operations in June, July, August and October 2008 which resulted in the return of 1,066 IDPs to their places of origin located in the western regions of Moyen Cavally and 18 Montagnes. The return operations initiated by IOM contributed to the effective closure of the IDPs Transit Centre (CATD) of Guiglo in August 2008.

The CERF funds were also used to maintain the Danish Refugee Council’s (DRC’s) social cohesion activities with Peace and Protection Committees (PPCs) in the Tabou region (Sub west). Inter-community dialogue including further involvement from women and other vulnerable groups was promoted to resolve local conflicts and build social cohesion in the area.

NRC continued to collect information on the humanitarian situation and protection issues of concern through its monitoring project. The project which started in the west in 2007 had been initiated by NRC following recommendations from the national protection cluster and was implemented in close collaboration with UNHCR. As a result, 1,059 birth certificates were provided to children of age 9-13 attending NRC’s catching up programme (Classes passerelles).

Water, Sanitation and Hygiene

UNICEF constructed and re-built 50 hand-dug wells and installed 50 pumps so that 90,000 people, of whom 28,000 were returnees, in 44 villages in the west had better access to drinking water.

1. Monitoring and evaluation

CERF project implementation was monitored within clusters through regular meetings. Project assessments and in-depth monitoring were individually undertaken by beneficiary agencies. During 2008, the HC’s missions in the north and west of Cote d’Ivoire also assisted in the evaluation of activities on the ground.

FAO

Operational ad hoc meetings have been organised by the FAO Emergency Coordination Unit with implementing partners involved in the distribution of agricultural inputs during the 2008-2009 lean season in order to achieve a coordinated and complementary response.

Regional Food Security and Nutrition coordination groups have been set up in Man, Guiglo, Odiénné, Korrhogo and Bouaké. The groups have principally discussed the selection of vulnerable priority zones, the appropriate input support, state of implementation, additional needs to be covered, activity planning as well as strategic coverage of interventions to ensure
complementarity of capacity and usage of available inputs. A monitoring and evaluation mission was organised by the Food Security and Nutrition Working Group in the middle of the 2008 agricultural season. Furthermore, a financial and technical contribution was made, in collaboration with WFP, to the Food Security Monitoring System (FSMS) in two regions of the country for three cycles of analysis.

Finally, in order to improve the efficiency of the sectoral coordination group, the FAO Emergency Coordination Unit started to set up a GIS system based on the “Dynamic Atlas” programme in early 2007. This simple application allows for the collection and mapping of information on agriculture, cattle breeding, food security, nutrition, etc. and for this information to be distributed on CD-ROMs to sectoral partners.

IOM

The IOM office in Abidjan supervised the implementation of project activities on a daily basis. The IOM field office in Duekoué (sub office) collected, monitored and analyzed information on a daily basis by installing, in four main villages, a cohesion development agent. The agent was in charge of promoting inter-ethnic dialogue, restoring social cohesion, and reporting on protection issues. IOM also deployed a field staff person in the main return areas to make sure that actions undertaken in collaboration with local authorities and peace committees effectively reached targeted beneficiaries.

IRC

The project capitalized on the methodology used by the Return and Reintegration Program’s Monitoring and Evaluation Manager. The data collected by the focal points was used as a baseline. The project also used data from the Primary School Inspectorate (IEP) regarding students. Information was channelled from the project staff presents on the Guiglo-Bloléquin axis to the IRC main office staff for analysis with the view of depicting the exact status of the IDPs (areas of origin and current geographical settlements) in the regions of Moyen Cavally and 18 Montagnes. The project staff was trained on the method of collecting and filling out data collection forms. An ACCESS and EPI-Info-based software that was developed by the IRC Return and Reintegration Program was also used in this project. Information has been regularly communicated to OCHA.

UNHCR

Several monitoring and evaluation missions were carried out by UNHCR and UNHCR’s partners. The Humanitarian Coordinator also undertook some field missions whereby UNHCR’s work was evaluated and recommendations for improvement made. A joint evaluation of the Protection Cluster was also conducted in October/November 2008 in the main IDP areas with the participation of the key agencies involved.

Two-day mid-year and two-day year-end evaluation workshops were held during the reporting period, with the full and active participation of field-based colleagues.

In its capacity as the Protection Cluster lead agency, UNHCR held regular coordination meetings on a monthly basis with the participation of concerned agencies/organisations, which assisted in the regular evaluation of the operations underway as well as in taking corrective action, where necessary.

WFP

WFP through its field staff and cooperating partners collected data on a monthly basis in the intervention zones to check progress on the activities, improve existing data collection, and
monitor food security and nutrition situations. In addition, an evaluation has been conducted in the last quarter of 2008 by the Country Office with the participation of international consultants.

Data collected on a monthly basis by the cooperating partner and food aid monitors were disaggregated by type of interventions and beneficiary sex and age groups. Data were entered in a database at sub-office level and consolidated into the central monitoring and evaluation database of the Country Office. Food commodities were tracked through the Commodity Movement Processing and Analysis System (COMPAS) to ensure the transparency of the food commodities movement. Food Basket Monitoring (FBM) was regularly carried-out to ensure that each beneficiary had received the full ration according the ration allocation of each type of intervention and a Post Distribution Monitoring (PDM) identified food utilization by the beneficiaries. WFP and partners ensured that the caretakers of malnourished children learnt the important nutritional messages given at the centres, such as when caretakers have an active role in the nutrition education and the care of the children.

UNICEF

Therapeutic feeding centres for in and out patients were monitored by Health District Teams every two months. Figures from feeding centres were included in national health monitoring and reporting system (SIG Vision). The National Nutrition Program (PNN) has also posted four national coordinators in the north were the nutritional situation was more critical according to SMART survey conducted in July 2008. Those national coordinators were in the following localities: Odienne, Sueguela and Bouna. Regular field visits were also carried by staff from the central level including Ministry of Health and UNICEF.

2. Complementary initiatives

UNHCR

Several other agencies/organisations received funding from other sources and their activities covered sectors such as the inception/empowerment of peace committees, income-generating activities, basic needs and essential services (with the rehabilitation of basic infrastructure) and other development-oriented activities. This was crucial as it complemented the protection-specific activities carried out by UNHCR and its/other partners. USAID also funded monitoring activities in the west, which went a long way in buttressing the efforts expended in this domain.

IRC

IRC has complementary funding from USAID’s Office for Foreign Disaster Assistance (OFDA) for a project focussing on IDPs return areas, including the Kouibly area, which has seen very little humanitarian intervention. The OFDA project provides targeted support to peace committees on conflict management and mitigation, and is working to improve the economic integration of youth into the local economy.

IOM

The continuum of protection activities and humanitarian assistance was partly funded by traditional donors, namely Norway and OFDA/USAID.

FAO

Thanks to the support of other donors, notably Sweden (OSRO/IVC/701/SWE) and Belgium (OSRO/IVC/702/BEL), FAO was able, during the 2008 rainy season, to provide assistance to a total of 12,830 vulnerable households during its principal distribution in April and May 2008. 3,545 of these households have received support because of CERF funding.
During the lean season, support from Belgium (OSRO/IVC/702/BEL), Sweden (OSRO/IVC/702/BEL) and the FAO Technical Cooperation Programme allowed FAO to reach a total of 14,200 vulnerable households (cf Annex 1) of which 5,300 received assistance with CERF funding.

3. Gender-mainstreaming

FAO and WFP gave special attention to newly returned families, HIV/AIDS affected people, and female-headed households. Most notably, FAO projects in favour of increased access to quality seeds, tools and fertilizers, benefited 3,523 female-headed households (80% of total beneficiaries) through improvement of their nutritional diet and incomes. In addition, WFP provided food assistance to 9,012 women and girls (about 41% of total beneficiaries in nutrition programmes).

In the west, inter-community dialogue including further involvement from women was promoted by DRC to resolve local conflicts and build social cohesion in the western region. About 29% of Peace and Protection Committees’ (PPCs) members are women.
### IV. RESULTS

<table>
<thead>
<tr>
<th>Sector/Cluster</th>
<th>CERF projects per sector</th>
<th>Amount disbursed (US $)</th>
<th>Number of Beneficiaries (by sex/age)</th>
<th>Implementing Partners and funds disbursed</th>
<th>Baseline indicators</th>
<th>Expected Results/Outcomes</th>
<th>Actual results and improvements for the target beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agriculture / Food Security and Nutrition</td>
<td>08-FAO-011 CIV-08/A03 Provision of agricultural inputs to assist vulnerable rural households affected by the conflict in Côte d’Ivoire</td>
<td>351,547</td>
<td>25,500 vulnerable farmers, including IDPs, returnees, malnutrition affected households, HIV/AIDS affected households, households with limited harvest. (CERF: 3,515 vulnerable households)</td>
<td>WFP, International and national NGOs, Ministry of Agriculture, Ministry of Animal Production and Water Resources</td>
<td>4,196 households (37,764 persons) received agricultural kits and training during the rainy season</td>
<td>• Support to 3,515 vulnerable households with agricultural kits • Training with a particular interest in the Regions with a large number of recent returnees</td>
<td>Majority of the beneficiaries were women (50 percent) gathered in grouping household and returnees (28 % percent) • The daily food ration received by households during the rainy season period was improved and additional incomes increased by the sale of surplus of production • The productions of the beneficiaries was 312 tons of rice and 284.9 tons of low land rice and maize • The project prompted the redeployment of the state-owned National Agency for Rural Development (ANADER) in the project areas</td>
</tr>
<tr>
<td>Agriculture / Food Security and Nutrition</td>
<td>08-FAO-024 Provision of agricultural inputs and food rations to assist vulnerable rural households affected by the conflict and the soaring prices in Côte d’Ivoire</td>
<td>495,185</td>
<td></td>
<td>ANADER; Ministry of Agriculture; CARITAS; CARE; IOM; Local NGO MUDESSA</td>
<td>1,600 households (9,600 persons) will receive an agricultural kit for the realization of low land rice, and vegetables. These cultures are possible in dry season in irrigated perimeters.</td>
<td>• 5,300 households (47,700 persons) received agricultural kits and training during the 2008-2009 lean season: 1,600 households were provided with low land rice kits and 3,700 households received kits for the culture of vegetables. • A provision of 479 kg of vegetables was received by each beneficiary household in order to improve their nutritional status and income • Majority of the beneficiaries were women (50 percent) gathered in grouping household and returnees (28 % percent)</td>
<td></td>
</tr>
</tbody>
</table>
will receive an agricultural kit for the realization of market garden production during 2008-2009 off season.

- 25.8 tons of rice vegetable seeds, 120 tons of fertilizer and 15 900 tools are distributed.

- The productions of the beneficiaries will be 1000 tons of lowland rice, 127 tons of niebe, 240 tons of okra, 530 tons of hot pepper, 630 tons of eggplants, 550 tons of tomatoes, 700 t of onions, 500 t of carrots, 700 tons of cabbages.

- The daily food ration for 5300 households is improved and the additional incomes are increased by the sale of surplus of production

- The nutritional status among IDPs beneficiaries is maintained.

- Improved access to food for resettled IDPs and returnee refugees.

<table>
<thead>
<tr>
<th>households and recent returnees (28 percent) in the west</th>
</tr>
</thead>
<tbody>
<tr>
<td>The productions of the beneficiaries was 1,200 tons of rice, 700 m² of vegetables</td>
</tr>
</tbody>
</table>
| **Food** | 08-WFP-026 CIV-08/F01 Assistance to populations affected by the Cote d'Ivoire Protracted Crisis PRRO 10672.0 | 2,799,998 | 64,000 food insecure persons | • Provide 2,838 MT of food assistance to 64,000 persons (4200 HIV affected households, 5,000 nutrition beneficiaries, 17,000 beneficiaries of general food distribution) from March to June 2008.  
• Improved access to food for resettled IDPs and returnee refugees.  
• Reduced level of malnutrition among targeted children under-five and pregnant /lactating women in targeted area  
• Improved nutrition & health status of beneficiaries under ARV/TB treatment and of beneficiaries in PMTCT programmes  
• 17,000 (5780 female and 11220 male) IDP and returnee beneficiaries received general food distribution received totalling 1,140 MT of food thus improving resettled IDPs access to food.  
• 5,000 beneficiaries in nutrition programmes (1,382 malnourished girls under five, 1,328 malnourished boys under five, 1,850 pregnant and lactating women, and 440 caretakers of patients in therapeutic feeding programmes) received 348 MT of CSB, oil, sugar from March to June 2008 thus reducing malnutrition.  
• 42,000 persons affected by HIV/AIDS (3,000 OVC households and 5,400 PMTCT and PLWHA households) with 1,350 MT of food thus improving health status. |
<p>| <strong>Agriculture / Food Security and Nutrition</strong> | 08-WFP-059 Provision of agricultural inputs and food rations to assist vulnerable rural households affected by the conflict and the soaring prices in Cote d'Ivoire | 1,517,274 | 28,000 food insecure beneficiaries (14,392 female; 13,608 male) | • 28,000 beneficiaries total (14,392 female, 13,608 male) received 1,399 mt of food commodities over three months (July-September):1,680 households in the Denguélé region (North);1,680 households in the Savanes region (North);1,120 households in the Moyen Cavally region (West);560 households in the Vallée du Bandama region (Centre);560 households in the 18 Montagnes region (West). |</p>
<table>
<thead>
<tr>
<th>Project Code</th>
<th>Project Title</th>
<th>Funding</th>
<th>Description</th>
</tr>
</thead>
</table>
| 08-WFP-105   | Extended coverage and access to essential therapeutic and nutritional care for children suffering from acute malnutrition within communities and health facilities | 410,588 | - Cure rates of children in therapeutic and supplementary feeding programmes is within the Sphere standards.  
- 7,500 moderately malnourished children received a supplementary food ration of 250g CSB, 25g fortified vegetable oil, and 20g sugar per day through treatment in supplementary feeding programmes  
- 1,500 caretakers of severely malnourished children in therapeutic feeding centres to increase treatment completion and cure rates, and to prevent defaulters and excess mortality due to malnutrition.  
- Provided 2100 kcal rations (75 MT) to 1,936 caretakers of severely malnourished children in 8 therapeutic feeding centres  
- Provided 1240 kcal rations of CSB, fortified oil, and sugar (135 MT) to 5,066 moderately malnourished children in 29 centres  
- 84.3 percent recovery rate for children in therapeutic feeding centres, 78.8 percent recover rate of children in supplementary feeding centres  

| 08-CEF-020-E | Providing care for children with acute under nutrition in Western Côte d’Ivoire | 191,530 | - Malnourished children are treated in therapeutic feeding centres (TFCs) with application of Sphere standards of malnutrition management  
- Cure rates > 75 percent,  
- Death < 10 percent,  
- Default < 15 percent  
- Recovery length < 4  
- 30 health agents were trained for malnutrition management in feeding centres in 2 health districts; Guiglo and Man  
- Therapeutic foods and essential drugs were provided to 3 therapeutic feeding centres and 16 supplementary feeding centres for malnutrition management: Man, Guiglo Duekoué, Danane and Bangolo  
- 1,200 voluntary community health workers were trained for early screening and... |
<table>
<thead>
<tr>
<th>Project Code</th>
<th>Project Title</th>
<th>Beneficiary Count</th>
<th>Beneficiary Details</th>
<th>Achievements</th>
</tr>
</thead>
</table>
| 08-CEF-020-F | Improved nutrition of children through treatment of malnourished children in health facilities and within communities in northern Côte d’Ivoire | 279,270 | 7,500 severely and moderately malnourished children, 14,000 pregnant women, 550 HIV positive persons | - Malnourished children are treated both in therapeutic feeding centres (TFCs) and within the community;  
- Pregnant and lactating women moderately malnourished are treated in the community;  
- 550 HIV positive persons receive supplementary feeding.  
- National protocol for acute malnutrition management was elaborated  
- Communities were sensitized for early referral of malnourished children to therapeutic feeding centres in 5 health districts  
- 60 health agents were trained for malnutrition management in feeding centres in four health districts: Odienne, Boundiali, Behoumi and Bouake  
- Therapeutic foods and essential drugs were provided to 3 therapeutic feeding centres and 3 supplementary feeding centres for malnutrition management: Odienne, Boundiali and Bouake |
| 08-CEF-082 | Extend coverage and access to essential therapeutic and nutritional care for children suffering from acute malnutrition within communities and health facilities | 583,926 | 15,000 severely malnourished children, | - Prevalence of wasting is reduced (<10 percent) among children under five in targeted area.  
- Sphere standards of malnutrition management are applied in therapeutic feeding centres  
- Cure rates > 75 percent,  
- Death < 10 percent, Default < 15 percent  
- Recovery length < 4 weeks and Weight gain > 8g/kg/day  
- 10 therapeutic feeding centres for inpatient and 100 ambulatory feeding centres for outpatient are operational (basic equipment) for malnutrition management in 5 health districts: Tengrela, Odienne, Ferke, Mankono and Bouna.  
- Therapeutic foods and essential drugs were provided to 110 feeding centres for malnutrition management  
- 142 health agents were trained for malnutrition management in feeding centres in 5 health districts |
| Coordination And Support services | 08-WFP-048 WA-08/CSS08 WFP Humanitarian Air Support Service – SO 10061.3 | 582,455 | 12,609 humanitarian passengers from 272 organizations | • Provide and facilitate safe and reliable air transport capacity to 12,000 humanitarian passengers and perishable cargo.  
• Respond to security and medical evacuation cases | • Over the period January through to December 2008 scheduled flight services in the region and 12,609 passengers transported 57 Mt tonnes of urgently needed humanitarian cargo and responded to 25 medical evacuation cases. |
| --- | --- | --- | --- | --- | --- |
| Education | 08-CEF-020-B CIV-08/E02 Equipment of school infrastructures with school furniture | 169,060 | 6,000 children in 20 schools | Caritas, Solidarités, IRC | • Learning conditions improved in the classroom  
• Rate of schooling and quality of education increase in the targeted schools  
• School environment and hygienic conditions improved  

The learning conditions were improved for 3,397 pupils  
The teaching conditions were improved for 78 teachers  
13 schools were equipped with school furniture |
| Health | 08-FPA-011 CIV-08/H04 Increasing access to, and use of high quality of Emergency Obstetric and Neonatal Care (EONC) with appropriate community involvement in the west, Sub west, centre and north of Côte d’Ivoire (UNFPA) | 383,060 | 328,170 women of childbearing age of the 14 regions of implementation are the primary beneficiaries and 79,000 pregnant women are expected to have quality care. Other obstetric surgical interventions are expected. The tears of the périnée | Ministry of Health (MoH); UNICEF; WHO; Regional Health manager | • Emergency Obstetric and Neonatal Care (EONC), Family Planning [FP], syndromic management of Sexually Transmitted Infections [STIs] and prevention of care of sexual violence including psychological support, prevention of STI/HIV and unwanted pregnancies services are  

All the 45 maternities of the project provide EONC services  
15 doctors and 125 nurses and midwives were trained in EONC and Ante Natal Care  
110 community health workers and traditional birth attendants were trained to recognise the danger signs during childbearing. 45 maternities received Reproductive Health kits for caesarean, kits for episiotomies and Diprivan for general anaesthetics.  
The fistula centre in the West region was provided with 350 kits to manage fistula interventions  
The data tools revealed that 15,400 pregnant women have delivered in health |
expected are of 13,500 and caesareans expected are of 2,000. A total of 14 Health Districts as concerned: Bouaké, Béoumi, Katiola, Sakassou, Vavoua, Man, Bangolo, Biankouma, Tabou, Tiebissou, Dimbokro, Daoukro, M'bahiakro et Danané and 45 maternities (8 Referral and 37 Basic) are the implementation sites.

- Train 15 doctors and 125 nurses and midwives in EONC and Ante Natal Care
- Train 110 community health workers and traditional birth attendants to recognise the danger signs during childbirth
- Provide Reproductive Health essentially in kits for caesarean, kits for episiotomies and Diprivan for general anaesthetics to 45 maternities to ensure clean delivery, clinical delivery assistance and to perform caesarean sections and other obstetric surgical interventions
- Provide 350 kits for the centre of fistula management
- Provide tools and pamphlets for campaigns of sensitisation on EONC and registers for data collecting

available in 45 maternities of the implementation sites

facilities of the project site during eight month and 800 caesareans were managed.
| Health | 08-CEF-020-D CIV-08/H06 Improve management of malaria in four health districts (Bangolo, Duékoué, Guiglo and Toulepleu) | 240,750 | 184,262 Children under-five and 16,000 pregnant women | MoH; local health committees | 184,262 children under-five and 16,000 pregnant women have access to malaria treatment according to new treatment standards; 55,000 children under five are treated for malaria with ACT combination therapy; 16,000 pregnant women received their intermittent preventive treatment against malaria with the SP. Supply of 114,000 pills of SP and 264,125 pills of ACT; Production of 6,000 posters on the new treatment of malaria and 2,098 posters on malaria prevention; Recruitment of a technical staff 3,614 children were treated with ACT during the first three months; 4,609 pregnant women received intermittent preventive treatment against malaria with the SP during the first three months. |
| Multi Sector: Protection/ Shelter/ Education/ Water and Sanitation Protection | 08-UDP-007 CIV-08/MS/03 Providing emergency relief and reliable information for IDPs in Western Cote d’Ivoire | 613,935 | 120,000 IDPs and returnees in the Moyen Cavally (Guiglo-Bloléquin) and 18 Montagnes (Zou and Diéouzon) regions 969 returnees 50 teachers (46 men, 4 women) 150 members of water and sanitation committees, plus the population of their villages. | NRC | Approximately 4,000 IDPs on the Guiglo-Bloléquin axis have increased access to information on the conditions in their home areas and have a better understanding of their rights and conflict mitigation tools. 2,000 returnees have access to a functional and rehabilitated health centre and 100 returnee children benefit from a rehabilitated school. With the sensitizations on the sites of movements (Duékoué-Guiglo-Bloléquin) and the improvements brought on the sites of return IRC registered 3,275 returnees to the villages of Zou and Diéouzon sub-prefectures. The rehabilitation of the health centre and lodging for the doctor is complete. The health centre serves the populations of four villages – Zérégbo, Gan, Koulaoué, and Bably. 200 emergency shelters built for vulnerable returnees. IRC distributed NFI kits to 304 families, directly benefiting 769 beneficiaries. 50 certified and volunteer teachers were trained on the Healing Classrooms approach. Nine schools equipped with benches and desks. |
**300 NFI kits distributed for the most vulnerable returnees under the supervision of community peace and reconstruction committees**

**35 teachers of NRC’s bridging classrooms are able to provide and sustain an appropriate psychosocial and academic support to war affected children through the IRC Healing Classrooms methodology**

**Nine schools are equipped with benches and desks and 2,700 school kits distributed**

**25 water and sanitation committees have been trained (including village mechanics) and are able to assure the maintenance of pumps.**

| Protection/ Human Rights/Rule of Law | 08-HCR-012 CIV-08/P/HR/RL04 “Support to IDP return/resettlement in safety and with dignity, and durable reintegration in South-Western Côte d’Ivoire” | 155,471 | Returning IDPs and receiving populations of 43 villages in Tabou as well as the population in Tabou Ville – among these specifically 516 members (366 men and 150 women) of PPCs, and 5,959 IDPs | Ministry of National Education | A majority of IDP from the Tabou region can return to their area of origin safely and with dignity | The majority of returnees are granted access to housing, basic social services and farm land | A large number of IDPs have decided to return in some communities (e.g. 834 persons in Campement Congojan (many men, few women), in Niplou it is estimated that at least 400 persons have returned). | A PPC has been established in Campement Congojan, and dialogue is being facilitated between Campement Congojan and Dehoulinke (the hosting village) | No evidence of secondary displacement witnessed during the reporting period |
and receiving community members (3,690 women/girls and 2,269 men/boys) participating in training and sensitization.

- No returnees are into secondary displacement as a result of human rights’ violations, outbreak of violence or aggression
- Ethnically mixed communities in Tabou live and work together again
- Inter-ethnic conflicts and other types of dispute are resolved peacefully
- Vulnerable groups (ex-banished, women, IDPs) are fully involved in the PPCs and in the implementation of the project.
- Communities are sensitized about conflict resolution practices and UNSCR 1325.
- Victims of SGBV have safe access to appropriate referral mechanisms for medical, psycho-social and judicial assistance
- Increasing willingness to develop joint income generation projects observed. 32 projects have been achieved during the project period
- Increased demand for engagement of DRC field agents and further training shows a willingness to resolve conflicts peacefully of the 516 members of PPCs, of which 29 percent are women. PPCs include all ethnic groups of the individual communities (see table above for details)
- 81 re-trainings conducted for PPC members
- 1,603 persons trained (947 men and 677 women), some of them several times upon request. These participants included at least 90 percent of existing PPC members plus other community members wishing to participate
- Six re-trainings conducted for women’s groups.
- 1,521 women and 1,051 men have received training on UNSCR 1325.
- The trainings included 100 percent of women group members plus other women and men from the communities.
- 1,165 girls and 1,725 boys from in 16 schools have received a training on Non discrimination and Human Rights
- Study conducted reveals that an appropriate referral system is in place, but that it is not being used as the cost of XOF 30,000 required as payment for the medical examination is prohibiting women to access the referral system
- A comprehensive brochure of the referral system was produced and disseminated during sensitization campaigns
- 32 persons were trained as trainers in SGBV sensitization
32 awareness sessions on SGBV and the referral system were conducted (10 in Tabouville neighbourhoods and 22 in rural communities). 1,506 persons attended the awareness sessions.

- 10 awareness sessions on SGBV and the referral system were conducted in secondary schools, and was attended by 438 girls and 342 boys

A three month SGBV sensitization campaign was conducted on the radio in Tabou.

| Protection/ Human Rights/Rule of Law | 08-IOM-010 CIV-08/P/HR/RL15 Continuum of assistance and protection of vulnerable populations in particular IDPs within the areas of return (axis of Guiglo-Boléquin-Toulepleu) and the CATD of Guiglo | 216,675 | 38,000 inhabitants including 18,000 returned IDPs and 20,000 natives benefitting from the protection activities (early warning, return kits, NFI...). Concerning the return kits and NFI, upon arriving in villages of return, IDPs are hosted in host families during at least one week in order to repair if required their houses and other accommodations with the plastic sheeting included in the return kits provided by IOM. In this regard, one kit is comprised of plastic sheeting, tarpaulins, blankets, kitchen kits, and agriculture |
| OCHA; UNHCR; WFP; UNICEF; UNFPA; FAO; UNOCI; SC-UK; GTZ; IRC; and National counterparts (local and traditional authorities and peace committees) | 1,567 IDPs returned from CATD and over 7,000 spontaneous returns |
| | 38,000 inhabitants including 18,000 returned IDPs and 20,000 natives are benefitting from the protection activities (early warning, return kits, NFI...). Concerning the return kits and NFI, upon arriving in villages of return, IDPs are hosted in host families during at least one week in order to repair if required their houses and other accommodations with the plastic sheeting included in the return kits provided by IOM. In this regard, one kit is comprised of plastic sheeting, tarpaulins, blankets, kitchen kits, and agriculture |
| | Organisation of massive voluntary returns of 1,066 IDPs from June to July, including the transfer for enrolment of more than 100 children in school. |
| | This dynamic also enhanced facilitating the spontaneous returns of about 4,000 IDPs within the areas of Boléquin. |
| | 239 kits distributed to the IDPs and 226 kits to host families |
| | Effective closure of the Temporary Assistance Centre (CATD) on July 31st, 2008 which has been managed by IOM since December 2003. |
| Protection/ Human Rights/Rule of Law | 08-UDP-005 CIV-08/P/HR/RL13 | 292,682 | UNHCR; Local partners; other Protection Cluster members |

- 200 localities (100 with CERF funding) are assessed and Flash Reports with Protection Alerts for each of these localities are shared with the Protection Cluster;
- 6-8 comprehensive and comparative reports are produced and shared with the humanitarian community, the Government and local authorities;
- Identity documents are procured for 75 percent of students in areas with NRC community schools;
- 4,000 identity documents requested, 3,000 thousand resolved

- 248 identity documents requested out of 99 resolved and 58 underway
- Comprehensive and comparative reports were produced and handed on to UNHCR in his capacity as Protection cluster lead for dissemination within the humanitarian community, donors and government.
<table>
<thead>
<tr>
<th>Protection/ Human Rights/Rule of Law</th>
<th>08-CEF-020-A CIV-08/P/HR/RL02B Protection from sexual violence and support to girls' and women's rights during the peace and reconciliation phase in Côte d'Ivoire</th>
<th>134,820</th>
<th>10,429 for &quot;door to door&quot; sensitization activities (1,413 boys under 18 years, 2,106 girl under 18 years, 2,890 men, 4,020 women)</th>
<th>70,771 for other community awareness raising activities</th>
<th>Ministry of Family, Ministry of Justice, MSHP, Local and International NGOs</th>
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<td>* A national plan against SGBV approved and implemented by all stakeholders;</td>
<td>* Targeted communities aware of girls' and women's rights and the consequences of SGBV;</td>
<td>* Victims who have reported sexual violence treated and provided with legal assistance</td>
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<td>* Conducive conditions for safe and dignified returns created;</td>
<td>* Prompt and coordinated response to cases of threat to the physical integrity of displaced and returnee populations undertaken;</td>
<td>* Deployment of 20 monitors and 3 supervisors in 41 villages served not only as a violent conflict prevention measure but also contributed towards the effective return of IDPs and the sustainability of returns, through the creation of a favourable protection environment.</td>
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<td>* Prompt and decisive action taken on sexual</td>
<td>* Returnee populations have Protection/ Human Rights/Rule of Law unimpeded access to basic rights, including the right to food – through access to plantations, etc;</td>
<td>* Under the leadership of UNHCR, the Protection Cluster mobilised coordinated efforts with regard to communal incidents of violence in the covered areas, especially in Blolequin, where access to plantations was problematic. Special Task Forces were set up to monitor and find solutions to the problems. This helped in mitigating the conflict and material assistance was provided to the victims, in a concerted and coordinated manner.</td>
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<td>violence</td>
<td>* Post-return monitoring also induced further IDP returns.</td>
<td>* Local partner ASA identified 76 separated/unaccompanied children and 150 other vulnerable children for specific assistance and find durable solutions. It also maintained a campaign against statelessness and initiated concrete steps,</td>
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and gender-based violence cases;
- Improved inter-community relations;
- More targeted and speedier interventions by human rights and other actors and underlying causes of conflict better addressed

including preparing cases for public hearings. It also made it possible for 133 IDP children to attend school and also facilitated issuance of 300 birth certificates.

- Authorities were approached to facilitate access to files of IDPs refused during itinerant hearings
- UNHCR provided support to local authorities to establish 739 birth certificates for refugee children
- UNHCR participated in the Sub Regional Conference on gender issues and supports the development of a national strategy for the fight against SGBV and other campaigns against GBV.
- Prevention activities by community members have been implemented in Guiglo by CARITAS as well, and in Tabou, through the social centre, on a community-based approach.

- Local radio stations were also used in the awareness campaigns. Systems of reference exist through the GBV committees and all the known victims were assisted by them.

- The challenges are important in the fight against SGBV, especially in the high-risk areas in western parts of the country that were targeted. However, further challenges remain, with regard to bringing perpetrators to justice and a smaller number of victims prefer out of court settlements or remain quite due to the social stigma or the fear of revenge by their aggressors.

- Partners covered the vulnerable persons in such areas as SGBV, awareness and prevention of HIV/AIDS, and promoting community projects. UNHCR staff based in all the three zones (Abidjan, Guiglo and Tabou) monitored the operations.

- Partners carried out community projects in all three main areas of return in order to make returns sustainable.
| Water, Sanitation and Hygiene | 08-CEF-020-C CIV-08/WS01 Improve access to safe drinking water for rural communities of the departments of Duékoué, Bangolo, Kouibly, Danané and Zouan-Hounien affected by the war | 222,560 | 90,000 people of whom 28,000 returnees | Local NGOs (IFS and Organisation pour le Développement des Activités des Femmes [ODAFEM]) $187,204,13 | - 50 improved hand dug wells are dug in 30 villages;  
- The ratio of people per water point is reduced to less than 500 persons;  
- At least 80 percent of water committees are set up and functional;  
- At least 80 percent of water committees have a minimum amount of 60,000 F CFA in their account;  
- At least 97,000 people of whom 20,000 children and 50,000 women have access to safe drinking water;  
- The prevalence of water related diseases is reduced. |
| Health | 08-CEF-051 Emergency response to Yellow Fever outbreak in Abidjan City | 2,065,100 | | | - Funds were returned to CERF. |
| | | | | | - No evidence of secondary displacement witnessed. Engagement of partner field agents and trainings shows a willingness to resolve conflicts peacefully. |
| | | | | | - 44 villages have been identified according to objective criteria’s;  
- 44 water committees are created in 44 villages;  
- 90,000 persons benefited from the project;  
- More than 200 sensitizing meetings are held in the communities;  
- 44 conventions of partnership are signed aiming at the involvement and the participation of the community in the project;  
- 50 well-sites are identified and materialized among which 45 wells are dug;  
- 5 wells are cleaned, lined and collecting posed platforms around the wells are carried out;  
- 50 India pumps procured and ready to be installed on the wells. |
V. **CERF IN ACTION**

**Agriculture/Food Security and Nutrition**

*Extract from an Ivorian Daily «Fraternité matin» - 29 October 2008*  
*(Author : A. Hala following an AFRICA N°1 mission)*

“When we see your vehicle with its long antenna gliding over our village, we feel as if the ‘Good God’ is coming. We owe our survival to FAO and the National Rural Development Support Agency (ANADER)”, the chief of Diotrou village (Sub-prefecture of Nidrou, 20 km from Man) speaks Yéo Seydou, the Head of FAO Sub-office in Man.

... No one needs his eyes to witness the important role the FAO has played in favour of local populations. FAO has granted grinding mills and other agro-tools. The ongoing actions are indeed to encourage and regain hope for returned populations in the villages they fled during the crisis.

Today, a large number of them feel happy to resume their agricultural activities..... thanks to this United Nations’ Agency.

According to FAO managers, “this is a short term programme aimed at injecting quality vegetable seeds so as to improve the availability and accessibility to food produce in crisis-affected areas and strengthen beneficiary households’ living conditions as well as their capacity to be auto-sufficient in the long run”.

The CERF funds have contributed to the establishment of a malnutrition management system including early detection, referral and treatment both in health centres and within communities in the northern area. Children under five who suffered from acute malnutrition were adequately treated, largely contributing to under five mortality reduction.
Multi-Sector

Testimony: Comments from a returnee who has become village chief

“When IRC contacted us as IDP focal points for a training, I was sceptical. At the completion of the training, I got basic knowledge about human rights and social cohesion. Thus, I met some of my village fellows currently residing in Bloléquin and shared with them the training consigns. We then organized ourselves as an IDP corporation and raised funds from self channels that enable us to organize IDP return convoys. We organized three convoys that returned nearly 400 people to the village. A few weeks later, the village people had to elect a representative. I submitted my candidature and I was elected, as the village fellows trusted me. I would like to thank the peace committee, which I found when I returned home and which set people to cohabite peacefully.

Protection

Testimony from Mr Dabil Issa and Mrs Koita Philomène from the village of Dalagri, Department of Tabou (Southern-East)

- The implantation of DRC in the village was a surprise at first because no NGO had come to our village before and we were very sceptical.
- And then, the well was re-built. Before we were drinking backwater and we had diseases like diarrhoea and dysentery. The well is of good quality and drinking water is available for all.
- In addition, since DRC has started conflict resolution activities and engaged with community leaders, many disputes have been settled and everyone is involved.
- Women have also been trained on their rights and domestic issues. There is more harmony now and fewer women are beaten.
The main success stories can be captured by the following illustration from the project as a continuum of IOM activities of protection and social cohesion promotion supported by CERF’s funding (provision of potable water and protection projects):

The project contributed to the return operations in the Cantons Néao (June 2008), and Boo (July, August and October 2008) including the Reconciliation Workshop organised in May 2008 by government counterparts, in collaboration with the humanitarian community and local authorities.

A combination of reconciliation efforts previously made and safe drinking water provided through the hydraulic pumps as well as food, tools and seeds distribution and, finally, 70 bicycles to Peace Committees (PPCs) to implement the project, have contributed greatly to improve relations between native and non-native populations. However, reconciliation efforts have to be continued in the long run through promoting social cohesion and basic social infrastructures rehabilitation.
## ANNEX: ACRONYMS AND ABBREVIATIONS

<table>
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<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ACF</td>
<td>Action Contre la Faim</td>
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<tr>
<td>ACT</td>
<td>Artemisin-based Combination Therapy</td>
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<td>ANADER</td>
<td>National Agency for Rural Development</td>
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<td>ASA</td>
<td>Afrique Secours Assistance</td>
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<td>CAP</td>
<td>Consolidated Appeal Process</td>
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<td>CHAP</td>
<td>Common Humanitarian Action Plan</td>
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<td>CNW</td>
<td>Centre-North-West</td>
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<td>COMPAS</td>
<td>Commodity Movement Processing and Analysis System</td>
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<td>DRC</td>
<td>Danish Refugee Council</td>
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<tr>
<td>EONC</td>
<td>Emergency Obstetric and Neonatal Care</td>
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<td>ERC</td>
<td>Emergency Relief Coordinator</td>
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<td>FAO</td>
<td>Food and Agriculture Organization</td>
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<td>FBM</td>
<td>Food Basket Monitoring</td>
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<td>FP</td>
<td>Family Planning</td>
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<td>FSMS</td>
<td>Food Security Monitoring System</td>
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<td>GAM</td>
<td>Global Acute Malnutrition</td>
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<tr>
<td>IAHCC</td>
<td>Inter-Agency Humanitarian Coordination Committee</td>
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<td>IASC</td>
<td>Inter-Agency Standing Committee</td>
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<td>IDPs</td>
<td>Internally Displaced People</td>
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<td>IEP</td>
<td>Primary School Inspectorate</td>
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<td>IOM</td>
<td>International Organization for Migration</td>
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<td>IRC</td>
<td>International Rescue Committee</td>
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<td>MoH</td>
<td>Ministry of Health</td>
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<td>MSF</td>
<td>Médecins Sans Frontières</td>
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<td>MT</td>
<td>Metric Tonnes</td>
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<td>NGOS</td>
<td>Non-Governmental Organizations</td>
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<td>NRC</td>
<td>Norwegian Refugee Council</td>
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<td>OCHA</td>
<td>Office for the Coordination of Humanitarian Affairs</td>
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<td>OFDA</td>
<td>Office of United States Foreign Disaster Assistance</td>
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<td>OPA</td>
<td>Ouagadougou Political Agreement</td>
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<tr>
<td>OVC</td>
<td>Orphans and Vulnerable Children due to HIV and AIDS</td>
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<tr>
<td>PDM</td>
<td>Post-Distribution Monitoring</td>
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<tr>
<td>PLWHA</td>
<td>People Living With HIV and AIDS</td>
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<tr>
<td>PMTCT</td>
<td>Prevention of Mother to Child Transmission (of HIV)</td>
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<td>PNN</td>
<td>National Nutrition Programme</td>
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<td>PPCs</td>
<td>Peace and Protection Committees</td>
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<td>SAM</td>
<td>Severe Acute Malnutrition</td>
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<tr>
<td>SFCs</td>
<td>Supplementary Feeding Centres</td>
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<tr>
<td>SGBV</td>
<td>Sexual and Gender-Based Violence</td>
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<td>SMART</td>
<td>Standardized Monitoring and Assessment of Relief and Transitions</td>
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<td>SP</td>
<td>Sulphadoxin-Pyrimethamine</td>
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<td>STI</td>
<td>Sexually Transmitted Infections</td>
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<td>TFC</td>
<td>Therapeutic Feeding Centres</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNHAS</td>
<td>United Nations Humanitarian Air Service</td>
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<tr>
<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>UNOCI</td>
<td>United Nations Operation in Cote d’Ivoire</td>
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<tr>
<td>Acronym</td>
<td>Full Form</td>
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<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
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<tr>
<td>UNSCR</td>
<td>United Nations Security Council Resolution</td>
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<tr>
<td>WFP</td>
<td>World Food Programme</td>
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