

**COTE D'IVOIRE**

**ANNUAL REPORT 2006 - SUMMARY**



**For external use**

**For every child**  
**Health, Education, Equality, Protection**  
**ADVANCE HUMANITY**

**unicef** 

## TABLE OF CONTENTS

<b>Abbreviations and Acronyms</b>		<b>2</b>
<b>I</b>	<b>COUNTRY SITUATION</b>	<b>3</b>
<b>II</b>	<b>COUNTRY SITUATION AND THE MDGs</b>	<b>4</b>
<b>III</b>	<b>PROGRAMME ANALYSIS AND RESULTS</b>	<b>4</b>
<b>IV</b>	<b>PROGRESS AND RESULTS OF COUNTRY PROGRAMME COMPONENTS</b>	<b>4</b>
<b>4.1</b>	<b>PROGRAMME COMPONENT : HEALTH / NUTRITION.</b>	<b>4</b>
<b>4.2</b>	<b>PROGRAMME COMPONENT: BASIC EDUCATION</b>	<b>7</b>
<b>4.3</b>	<b>PROGRAMME COMPONENT : CHILD PROTECTION</b>	<b>8</b>
<b>4.4</b>	<b>PROGRAMME COMPONENT: SOCIAL POLICY, MONITORING &amp; EVALUATION</b>	<b>9</b>
<b>V</b>	<b>ACKNOWLEDGEMENTS</b>	<b>10</b>

### Abbreviations and Acronyms

ACSD.....	Accelerated Child Survival and Development
AIS.....	AIDS Indicator Survey
ANC.....	Ante Natal Consultations
CCC.....	Core Commitments for Children
ECOWAS.....	Economic Community of West-African States
EPI.....	Expanded Programme on Immunization
EU.....	European Union
FAFN.....	Forces Armées des Forces Nouvelles ( <i>Armed Forces of the New Forces</i> )
FN.....	Forces Nouvelles ( <i>New Forces</i> )
GNI.....	Gross National Income
HD.....	Health District
IMCI.....	Integrated Management of Childhood Illnesses
ITN.....	Insecticide Treated Net
MDG.....	Millennium Development Goals
MICS-3.....	Multiple Indicator Cluster Survey-3
NGO.....	Non Governmental Organization
NID.....	National Immunization Days
OVC.....	Orphans and Vulnerable Children
PDR.....	Prevention, Demobilization and Reinsertion
PMTCT.....	Prevention of Mother to Child Transmission
SDB.....	Social Dashboard
STI.....	Sexually Transmittable Infections
UNFPA.....	United Nations Population Fund
UNDP.....	United Nations Development Programme
UNOCI.....	United Nations Organization in Côte d'Ivoire
WFP.....	World Food Programme

## I COUNTRY SITUATION

**Socio political situation:** Côte d'Ivoire continues to be affected by the protracted political-military crisis that broke out in September 2002, after the failed coup attempt against President Laurent Gbagbo. The country remains divided into a northern part (representing 60% of the territory), held by the Forces Nouvelles (FN) and a government-controlled South with in the middle a buffer zone (the Zone of Confidence) manned by 12,000 peace keepers.

In late 2005, the United Nations Security Council Resolution 1633 extended the mandate of the president for one year until 31st October 2006, and imposed the appointment of a new Prime Minister, "acceptable to all parties to the conflict". Charles Konan Banny was appointed Prime Minister on December 5<sup>th</sup> 2005.

Improvement of the socio political situation in the country seemed imminent during the first quarter of 2006, but this hope was short-lived. The disarmament, demobilization and identification processes were interrupted and when it became clear that elections were not going to take place by the end of October 2006, the Security Council adopted a new resolution 1721, extending the mandate of the president with one year and granting more powers to the Prime Minister.

A month later, the president proposed his alternative peace plan, including dismantling the confidence zone, direct talks with the ex-rebels of the Forces Nouvelles and general elections to be held in July 2007. Beginning 2007, a direct dialogue took place between representatives of the Government and of the Forces Nouvelles in Ouagadougou under the presidency of the ECOWAS, which resulted in the signing of a new Peace Agreement.

**Economic situation:** The postponement of the elections by another year and the current political climate continuously weaken the economy: poorly performing private sector, close-down of many factories, no new investments, accumulation of external debts, and failure of the government to fulfill the WB's debt conditionality, practically inexistent bilateral aid, and a cocoa production increasingly inferior in quality. Even if the elections are to be held in 2007, a fiscal deficit of 1.8% of GDP is reported for 2006, against a deficit of 1.7% in 2005. Public expenditures will remain high while the fiscal deficit is expected to increase, to reach 2.5% of GDP in 2007<sup>1</sup>.

**Humanitarian situation:** The humanitarian situation continues to deteriorate, particularly in the volatile West and North of the country. The repercussions on social services are multifarious: shortage of essential drugs, insufficient health facilities and resources. Shortages of drinking water, poor sanitary conditions and weak epidemiological surveillance systems defy the humanitarian efforts initiated to overcome the deterioration of basic health services and resurgence of diseases like yellow fever, cholera and meningitis. This precarious situation was compounded by the recent dumping of more than 500 tons of toxic waste in Abidjan, which resulted in 15 deaths (including 4 children) and several thousands of people falling ill.

The education sector is affected by the closing of 40% of all schools in the Center, North and West of the country, the absence of qualified teachers and the absence during two years of end of year exams in this same zone.

Côte d'Ivoire suffers from protection problems as well. Since the beginning of the crisis, there has been an important increase of human rights violations, in particular against women and children. It is estimated that in the whole country, approximately 4,000 children are associated to armed groups or forces, either for domestic activities or combat.

---

<sup>1</sup> *Country Report July 2006, The Economist Intelligence Unit Ltd. 2006.*

## II COUNTRY SITUATION AND THE MDGs

MDG	1990 <sup>2</sup>	Present <sup>3</sup>	Target
<b>MDG 1:</b> Prevalence of Underweight Children Under Five Years of Age	24%	17%	12%
<b>MDG 2:</b> Net Primary Enrollment Ratio % reaching grade 5	45,6 % 72,5 %	58% 94 %	100%
<b>MDG 3:</b> Ratio boys :girls in primary education	65,5 %	80 %	100 %
<b>MDG 4:</b> U5MR Infant MR Measles Immunization (<1 year)	157 103 56	194 117 72% <sup>4</sup>	52,3
<b>MDG 5:</b> Maternal mortality Skilled attendant at delivery	810 <sup>5</sup> 45 % <sup>3</sup>	600-690 (adjusted) 15% <sup>6</sup>	200
<b>MDG 6:</b> AIDS prevalence, female HIV/AIDS orphans	8,3% ♀ (2001) <sup>7</sup> 270.000 (2001)	4,7%, 6,4% ♀ 450.000	Halt and begin to reverse
<b>MDG 7:</b> Access to improved water sources	69 %	84 %	84,5 %

## III PROGRAMME ANALYSIS AND RESULTS

In 2005, a Mid-Term Review took place, providing recommendations for the two years to come. In 2006, the various sections considered these recommendations in the development of their annual work plans. In view of several considerations, such as the political situation, it was decided that the new programme cycle, which was to start in 2008, will be postponed for one year. For the year 2008, a short programme will be designed.

During the year 2006, several emergency situations occurred, which were addressed by UNICEF outside the scope of its regular programmes. For example: meningitis and yellow fever epidemics, to which UNICEF provided assistance through vaccination campaigns and technical support. UNICEF also provided drugs and technical support to fight the effects of toxic waste, and ensured in collaboration with other partners a sufficient water supply during the water shortage in Bouaké.

## IV PROGRESS AND RESULTS OF COUNTRY PROGRAMME COMPONENTS

### 4.1 PROGRAMME COMPONENT: HEALTH / NUTRITION.

The health/nutrition programme consists of two projects: (i) Primary Health Care/Bamako Initiative and (ii) Nutrition. The first project covers four sub-projects: (i) Reactivation of Health Districts, (ii)

<sup>2</sup> Source: WorldBank

<sup>3</sup> Source: State of the World's Children 2006

<sup>4</sup> Since 2006, the denominator of children under one changed from 3.95% to 2.95% ; this causes a positive adjustment in vaccination coverage

<sup>5</sup> Source: State of the World's Children 1998

<sup>6</sup> In 32 UNICEF-supported districts

<sup>7</sup> Impossible to compare figures because different survey methodology (sample)

Extended Programme of Immunization, (iii) PMTCT and (iv) WASH. The second project covers two sub-projects, namely (i) Young Child Feeding and (ii) Micronutrients.

The main purpose of the programme is the “reduction of maternal, infant and child mortality, and the improvement of survival, growth and development rates of children and women.”

### Planned results

1. 60% of children under five and 60% of pregnant women receive adequate, essential, quality curative and preventive care, in particular related to malaria and other illnesses, the zero case status of poliomyelitis is maintained, the number of neonatal and maternal tetanus cases is reduced, and the number of measles cases is reduced with 75%;
2. The growth delay is reduced by 1% among children under five, goiter prevalence among children from 6-12 years is reduced to less than 3% and anemia is reduced by 33% among pregnant women and among at least 50% of adolescents that attend school;
3. 80% of health structures in the intervention zones offer PMTCT and HIV/AIDS prevalence among adolescents and young people is reduced by 15%;
4. The prevalence of illnesses related to water and hygiene is reduced by at least 10% in the community and school environment, Guinea worm transmission is interrupted.

The activities carried out to attain these objectives allowed the establishment of the basis for scaling up of the ACSD strategy in 2007 through : (i) the introduction of a high impact prevention package for the reduction of the infant mortality rate in 38 UNICEF-supported health districts (out of 79 in total); (ii) Supplementary activities for Vitamin A supplementation for children aged between 6 and 59 months and Post-partum women; (iii) Improved monitoring activities with better reporting system, elaboration of supervision tools for the health management teams, and the creation of a Regional Team for Technical Support, supervising the health district management teams.

However, the implementation of the programme was essentially limited to the improvement of service delivery; effective use and demand for the services was less importantly addressed.

### Results achieved

The four programmes together have achieved the following results in the UNICEF-supported districts:

- Increase from 0 to 15% of pregnant women receiving an ITN;
- Increase from 0 to 7% of pregnant women receiving de-worming treatment;
- Increase from 0 to 27% of pregnant women receiving intermittent preventive treatment against malaria;
- Increase of assisted deliveries from 11% to 15%;
- The prescription rate of iron folate to pregnant women attained 35%;
- Increase from 0% to 21% children under one receiving de-worming treatment;
- Increase from 0% to 10% children under one receiving ITNs, under the condition of being fully immunized.

Vaccine	Vaccination coverage (jan-sept06)		Evolution of the proportion of additional children vaccinated in 2005 and 2006	
	National	38 districts	National	38 districts
BCG	71%	85%	-3%	+15%
DTP HepB1+OPV1	93%	90%		
DTP HepB3+OPV3	74%	69%	+2%	+10%
Measles	72%	71%	-10%	-1%
Yellow Fever	66%	65%	0%	+9%
TT2+	22%	31%	-8%	0%

- National Immunization Days against poliomyelitis resulted in the vaccination of 99% of children under five.
- Disease control efforts resulted in the interruption of the circulation of wild poliovirus, the number of confirmed measles cases reduced from 117 in 2005 to 11 in 2006<sup>8</sup>.
- Sensitization of 50,000 women in reproductive age on PMTCT;
- 12,000 pregnant women received group advice during their first ante-natal consultation; 3,860 of these (32%) accepted to test for HIV and benefited from an individual advice. Among those tested, 464 (12%) tested positive and 260 (56%<sup>9</sup>) women and children are under ARV treatment ;
- 50,000 people were sensitized in Abidjan mosques on HIV/AIDS prevention and benefits of PMTCT;
- 17 (20%) health structures of the intervention areas offer PMTCT services;
- 360,000 youngsters and adolescents benefited from advice and information services on STIs, HIV/AIDS in 10 districts;
- 4,500 adolescents visited and received advice in the 10 adolescent-friendly centers.
- Reduction by 50% of the number of Guinea Worm cases, against 52% in 2005, i.e. 10 notified cases in 4 villages in 2005, and 5 cases in 2006 in 1 village;
- More than one million people in more than 1,100 villages in 10 departments have access to safe drinking water;
- More than 30,000 people have access to sanitary installations thanks to the production of 220 SANPLAT stones and the construction of 220 latrines;
- At least 450,000 people of the regions of the West and South-West and in the Savannes Region have been sensitized on hygiene and observe basic hygiene rules;
- About 36,000 pupils of 120 primary schools have access to latrines, study in a healthy environment and observe basic hygiene rules.
- 92% of children 6-59 months received a first dose of Vitamin A through the National Immunization Days;
- 83% of children received a second dose of Vitamin A in 25 health districts through Local Nutrition Days;
- 100% of women in immediate post-partum received supplementary Vitamin A in 25 health districts;
- 146,204 pupils of primary schools have received Vitamin A supplementation and 246,204 have been de-wormed in the districts of Abidjan North, Bondoukou, San Pedro.

### **Constraints**

Vaccine stock-outs in health districts not supported by UNICEF induced a drop in the number of children vaccinated in 2006 as compared to 2005.

### **Lessons learned**

The partnership between UNICEF, the DHH, local NGOs and the involvement of local collectivities (regional councils), local authorities and beneficiary communities in decision taking and the implementation of the pump rehabilitation programme, contributed considerably to its success.

### **Future work plan**

Five high impact intervention packages for the reduction of infant mortality were identified and their geographic impact determined:

1. Expanded Programme on Immunization + (EPI+) with up scaling in 41 Health Districts

---

<sup>8</sup> Unfortunately, control of yellow fever and tetanus did not show progress in 2006: 2 cases of Yellow Fever and 16 neonatal tetanus cases were notified.

<sup>9</sup> This percentage is relatively low due to the fact that not all HIV-positive women come back to retrieve the test results or to come and give birth at the same centers.

2. Refocused Maternal and Neonatal Care (MNCr) in 41 Health Districts
3. Integrated Management of Childhood Illnesses + (IMCI+)
4. Prevention of Mother To Child Transmission (PMTCT) in 7 districts
5. Water, Sanitation, Hygiene and up scaling

#### **4.2 PROGRAMME COMPONENT: BASIC EDUCATION**

The goal of the Basic Education programme is to ensure that all children receive good quality basic education while eliminating disparities between girls and boys. The programme consists of two projects: (i) Basic Education in schools and (ii) Non-formal Education.

##### **Planned results**

1. The national educational offer is of an adequate quality in at least 200 schools;
2. All children and adolescents that are not integrated in the formal school system in the programme intervention areas, have access to basic knowledge and life skills.

##### **Results achieved**

The Back to School campaign 2005 resulted in an increased demand for education. As a result, 1,904 schools (against 815 in 2005) were opened, with an increase of 139.67% of the number of girls enrolled in comparison to 2005.

The precarious security conditions and the teachers' strikes hampered the achievement of the planned results.

An accelerated strategy on girls' education has been developed, involving all technical and financial education partners in Côte d'Ivoire. The document identifies 7 focus areas to eliminate gender disparities in primary, secondary and non formal education by 2015.

Communities have been mobilized in the areas most affected by the crisis, to raise their awareness on the importance of education and their responsibility as parents to ensure the respect of their children's right to access to education.

More than 28,000 children in the areas most affected by the crisis have access to education in a clean environment for the school year 2006-2007. The programme contributed to the restoration of the education sector through the rehabilitation of 62 schools and the installation and / or rehabilitation of sanitation infrastructure in 60 schools. 10 rehabilitated schools have been equipped with child friendly school furniture.

The organization of two exam sessions for the children in the northern part of the country is one of the major results achieved by the education programme in 2006. The exams of March 2006 allowed more than 60,000 children to validate their achievements. Another session was organized in September 2006 for the end of the school year 2005-2006. UNICEF has run the organization of the exams by taking the lead in the partners' advocacy team who pushed the Government and the Forces Nouvelles to organize the exams according to the Convention of the Rights of the Child, and ensured the organization and coordination of the partners' contributions. For the first time since 2002, the school year 2006-2007 started at the same date all over the country.

To increase the quality of the school programmes, life skills training sessions have been developed to train teachers in the 200 schools. In the framework of HIV/AIDS prevention amongst youngsters, the following results have been achieved:

- 612 peer educators and 108 teachers have been trained in 94 primary schools in the usage of the peer educators guidebook;
- 18,800 children have been correctly informed and are communicating on HIV/AIDS;

- 1,200 HIV/AIDS awareness raising booklets have been distributed to peer educators in 94 schools. (65% of all children in the 94 schools have acquired knowledge on HIV/AIDS in order to adopt correct attitudes to prevent HIV/AIDS).

### **Constraints**

The two teachers' strikes (May-June and November-December 2006) in primary schools and the deterioration of the security situation did not allow for the implementation of all activities as planned.

### **Future work plan**

1. Continue the rehabilitation of schools, providing school equipment and latrines by strengthening community participation and ownership for an increased sustainability of the achievements of the project.
2. Strengthen monitoring and evaluation activities in order to ensure that the children in the target schools benefit as much as possible from their environment and to ensure the quality of the courses so that their school performances will improve.
3. Ensure the implementation and monitoring of activities for girls' education.
4. The programme will further seek complementarity with other education partners in order to obtain a bigger impact and better visibility of the contribution of partners in the project for the renovation of schools.
5. Extend HIV/AIDS prevention as carried out in primary schools to secondary schools, and provide testing possibilities in health centers.

## **4.3 PROGRAMME COMPONENT: CHILD PROTECTION**

The Child and Adolescent Protection programme aims to contribute to the protection of children in general and adolescents in particular against all forms of abuse, violence, exploitation and discrimination. The programme consists of two projects: (i) Protection and social reinsertion and (ii) legal and judicial protection. UNICEF is actively involved in the implementation of SC resolution 1612, establishing a monitoring and research system on child rights' violations.

### **Planned results**

1. Assistance, support and socio professional insertion of children affected by the conflict and OVCs is ensured;
2. Mechanisms for recruitment of children during armed conflict and assistance to demobilized children are operationalized;
3. The legal, institutional and community framework for the promotion of child rights is strengthened.
4. Security Council Resolution 1612 is followed up and a functional Monitoring and Reporting System on the six grave violations of the rights of children affected by armed conflict is set up.

### **Results achieved**

- Direct assistance was provided to 7,188 children, more than 1,400 of which were formerly associated to armed groups. More than 3,000 children benefited indirectly from the activities of the programme;
- More than 6,000 adolescents associated to armed groups are sensitized on HIV/AIDS prevention;
- 20 Child Protection focal points appointed within FAFN;
- 600 OVCs benefited from psychosocial monitoring;
- 1,900 OVCs received pedagogic and educational support through the provision of school kits;
- 20,000 people were sensitized on sexual violence;
- 455 victims of sexual violence could be identified and assisted over the year;
- 78 children victim of trafficking were intercepted and reunited with their families;
- The youth parliament was reactivated;
- 20 Security forces officers trained on child trafficking;

- Registration of 3,774 children that were not declared within the legal timeframe;
- Pre-registration of 22,497 children;
- Sensitization of over 205,000 people on FGM;
- A widespread awareness of Resolution 1612 and related issues in the whole humanitarian, governmental and social context is achieved and action plans for the identification and demobilization of children associated with armed forces are adopted by the Forces Nouvelles and the Western militias;
- The draft of the first annual Report on Children and Armed Conflict in Côte d'Ivoire was presented and discussed at the Security Council in November 2006;
- The set up of an M&R pilot system in cooperation with all UN agencies.

### **Constraints**

- The volatility of the socio political situation slowed down the collaboration with the armed forces and groups.
- The absence of social and legal personnel in the confidence zone and in the FAFN-controlled area slowed down the efficiency of certain activities.

### **Future work plan**

1. Transition of PDR activities towards preventive approach, increasing the number of child-friendly spaces and building community child protection mechanisms against recruitment.
2. Attain sustainability of project achievements through the definition of an adjustment strategy towards community development initiatives.
3. Continue to advocate with present forces to prevent sexual violence and recruitment of children.
4. Advocacy for national laws on child trafficking and dangerous child labor, and regularization of unregistered children.
5. Strengthen OVC assistance by multiplication of local partners and strengthen their capacities.
6. Undertake a Child Protection study.

## **4.4 PROGRAMME COMPONENT: SOCIAL POLICY, MONITORING & EVALUATION**

This programme aims to provide a general methodological support to the sectorial programmes for the planning, implementation, monitoring and evaluation of the Country Programme. The two projects of this component are (i) Support to policy development and (ii) Monitoring of the situation of children and women.

### **Planned results**

1. The capacities of partner agents and planning services are strengthened in the area of human rights based programming and results based management, the participative approach, the CCCs and the monitoring of the 20/20 Initiative;
2. The emergency preparedness and response plan is updated and available;
3. DevInfo database is established and functional;
4. Relevant and up to date information is disseminated and used for advocacy purposes for decision taking and behavior change;
5. Situation analysis of children and women is updated with recent survey/study data;
6. Project and programme coordination mechanisms are operational at central and local level, particularly in the intervention zones;
7. The developed monitoring and evaluation tools are used to monitor and develop the performances of projects/programmes;
8. Partners of the programme are trained and updated in the fields of data collection, treatment, analysis and dissemination, monitoring and evaluation of project and programme performances.

### **Results achieved**

- Technical capacities of partners (governments and NGOs) are strengthened with regard to the human rights based approach to programming and results based management;
- The third monitoring report for the 20/20 Initiative was validated and information on this initiative shared;
- Disaggregated and updated data on the situation of children and women are available and will be made available to the users after validation of the results at the end of December 2006;
- The template for the DevInfo Côte d'Ivoire database has been created, the crucial phase of data processing was executed at 60% and the 1<sup>st</sup> draft of the database will probably be finalized by the end of the year;
- Technical capacities of partners of the Directorate-General of Planning and of social ministries have been strengthened in the fields of evaluation techniques and monitoring and evaluation tools;
- A pilot system for routine data collection on children and women is established;

### **Lessons learned**

The third Multiple Indicator Cluster Survey (MICS-3) benefited from the financial support of several donors, amongst whom the EU and UN agencies (UNDP, UNFPA, WFP). This project was funded in accordance with the comparative advantages and the different interests of the development partners. This inter agency and multisectorial cooperation is essential to obtain funding and should be applied to other initiatives.

### **Future work plan**

1. Update of the situation analysis on children and women based on survey data (EIS, MICS-3) and data analysis (Social Dashboard);
2. Consolidation of DevInfo Côte d'Ivoire.

## **V ACKNOWLEDGEMENTS**

We sincerely thank our donors for their generous contributions, which allowed UNICEF Côte d'Ivoire to obtain the above described results. In 2006, our main donors were:

- British National Committee
- CDC & Prevention
- CIDA
- ECHO
- European Commission
- European Union
- French National Committee
- Government of France
- Government of Norway
- Government of the Netherlands
- Government of Canada
- Government of Japan
- Government of the United Kingdom
- Government of South Africa
- Government of Ireland
- Ivorian-Canadian counterpart
- Orange Foundation
- SIDA Sweden
- United States National Committee