

ABIDJAN (regional)

COVERING: Benin, Burkina Faso, Côte d'Ivoire, Ghana, Togo



ICRC / AR, 2011
 (Red circle with cross) ICRC regional delegation (Red circle with cross) ICRC sub-delegation (Red cross) ICRC office/presence (Red triangle) ICRC regional logistics centre

EXPENDITURE (IN KCHF)	
Protection	2,959
Assistance	15,699
Prevention	2,485
Cooperation with National Societies	2,304
General	1
Total	23,447
of which: Overheads 1,424	

IMPLEMENTATION RATE	
Expenditure/yearly budget	86%

PERSONNEL	
Expatriates	42
National staff (daily workers not included)	247

KEY POINTS

In 2011, the ICRC:

- ▶ coordinated an effective Movement response to the armed conflict in Côte d'Ivoire, strengthening support to the National Society as the ICRC's primary partner
- ▶ with the National Society, provided 111,254 people in Côte d'Ivoire with food, 125,477 with household necessities, and 7,364,910 with adequate water, sanitation and/or housing, including 247 families whose homes were rebuilt
- ▶ with the National Society, addressed the health/medical needs of conflict-affected people in Côte d'Ivoire, donating supplies to 78 health facilities and carrying out 77,092 consultations via 9 mobile clinics
- ▶ despite disruption to penitentiary services in Côte d'Ivoire, registered 551 people newly detained in connection with the post-election crisis, while working to ensure detainees' access to adequate food, hygiene and medical care
- ▶ mobilized weapon-clearance operations in Abidjan, while alerting local residents to the dangers of explosive remnants of war
- ▶ as conditions in Côte d'Ivoire normalized, helped returnees re-establish themselves, notably by helping rebuild/renovate conflict-damaged housing and rehabilitate neglected plantations

In the countries covered by the delegation, established in 1992, the ICRC supports the authorities in implementing IHL, encourages armed and security forces to respect IHL, and visits detainees. It also works with and supports the development of the region's National Societies. In Côte d'Ivoire, the delegation focuses on responding to the protection and assistance needs of people affected by the lasting consequences of the crisis that began in 2002 and the election-related conflict in 2011.

CONTEXT

Côte d'Ivoire entered 2011 in political crisis after disputed elections in 2010 left it with two presidential claimants, Laurent Gbagbo and Alassane Ouattara, and two governments. Reinforcing existing social divisions, the conflict opposed armed forces loyal to the respective candidates, with both sides helped by volunteers and, allegedly, Liberian fighters. Western regions also experienced intercommunal violence. Multiple arrests, casualties and summary executions were reported. The UN Operation in Côte d'Ivoire (UNOCI) struggled to fulfil its mandate.

Four months of fighting and lawlessness, reaching the level of armed conflict by March and culminating in a fierce battle for control of Abidjan, devastated public infrastructure, homes and livelihoods. Penitentiary facilities were decommissioned and their inmates released. Internationally imposed restrictions triggered shortages of cash, fuel and medical/chemical supplies, further hampering essential services. Many thousands of people fled to safer areas within the country or abroad, mainly Liberia.

High-intensity confrontations subsided in April with the arrest of the former president, assisted by UN/French peacekeepers in accordance with UN Security Council resolution 1775. President Ouattara's government, installed in May, embarked on efforts to restore security and public services, revive the economy, restructure the armed/security forces and foster national reconciliation. Despite isolated clashes, security improved progressively, enabling the displaced to begin returning home. Conditions remained challenging, however, particularly in conflict-razed western regions. Legislative elections took place in December without major incident.

In Burkina Faso, violent protests erupted in February linked to high unemployment and shrinking purchasing power, causing casualties and arrests. The president appointed a new government, tightened military command structures and took measures to appease socio-economic grievances, restoring calm. Benin's president was re-elected in March. In Togo, the long-awaited trial arising from an attempted coup in 2009 saw 11 people handed substantial sentences. Intercommunal violence resurfaced in northern Ghana in December.

ICRC ACTION AND RESULTS

As conditions in Côte d'Ivoire deteriorated, the Abidjan delegation adapted its operational priorities and scaled up its activities to address the corresponding surge in humanitarian needs. The ICRC led the Movement's response to the crisis, with the Red Cross Society of Côte d'Ivoire as its primary partner and in

Main figures and indicators		PROTECTION	Total		
CIVILIANS (residents, IDPs, returnees, etc.)					
Red Cross messages (RCMs)					
RCMs collected			842	UAMs/SCs*	242
RCMs distributed			915		211
Reunifications, transfers and repatriations					
People reunited with their families			43		
		<i>including people registered by another delegation</i>	40		
Tracing requests, including cases of missing persons					
People for whom a tracing request was newly registered			201	Women	23
People located (tracing cases closed positively)			98		Minors
		<i>including people for whom tracing requests were registered by another delegation</i>	40		
Tracing cases still being handled at 31 December 2011 (people)			132		38
UAMs/SCs*, including unaccompanied demobilized child soldiers					
UAMs/SCs newly registered by the ICRC/National Society			47	Girls	
UAMs/SCs reunited with their families by the ICRC/National Society			42		Demobilized children
		<i>including UAMs/SCs registered by another delegation</i>	39		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2011			31		18
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ¹					
ICRC visits					
Detainees visited			10,946	Women	
Detainees visited and monitored individually			921		23
Detainees newly registered			857		22
Number of visits carried out			247		
Number of places of detention visited			115		
Restoring family links					
RCMs collected			106		
RCMs distributed			106		
Phone calls made to families to inform them of the whereabouts of a detained relative			411		
People to whom a detention attestation was issued			31		

* Unaccompanied minors/separated children I. Benin, Burkina Faso, Côte d'Ivoire, Togo

Main figures and indicators		ASSISTANCE	Total	Women	Children
CIVILIANS (residents, IDPs, returnees, etc.)					
Economic security, water and habitat					
Food ²		Beneficiaries	111,254	60%	26%
		<i>of whom IDPs</i>	111,254		
Essential household items ³		Beneficiaries	125,692	60%	26%
		<i>of whom IDPs</i>	125,477		
Agricultural, veterinary and other micro-economic initiatives ²		Beneficiaries	74,712	40%	
		<i>of whom IDPs</i>	33,540		
Water and habitat activities ²		Beneficiaries	7,364,910	40%	30%
		<i>of whom IDPs</i>	350,000		
Health ²					
Health centres supported		Structures	9		
Average catchment population			1,503,706		
Consultations		Patients	77,092		
		<i>of which curative</i>		17,889	41,035
		<i>of which ante/post-natal</i>		1,307	
Immunizations		Doses	284,870		
		<i>of which for children aged five or under</i>	284,322		
		<i>of which for women of childbearing age</i>	548		
Referrals to a second level of care		Patients	970		
Health education		Sessions	428		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ²					
Economic security, water and habitat					
Food		Beneficiaries	1,227		
Water and habitat activities		Beneficiaries	5,000		
WOUNDED AND SICK ²					
Hospitals					
Hospitals supported		Structures	78		
Water and habitat					
Water and habitat activities		Number of beds	270		

2. Côte d'Ivoire only 3. Côte d'Ivoire, Togo

coordination with the International Federation. In March, it increased the delegation's budget and appealed for additional funds. It maintained flexibility, enabling it to meet the emergency

needs of the worst affected and, as conditions normalized, to support early recovery. Increased support to the National Society strengthened its response capacities.

With abuses commonly reported, the ICRC boosted its efforts to promote respect for civilians. Continuous dialogue with and representations to relevant authorities, weapon bearers and civil society members on both sides of the political divide served to remind them of their responsibilities under applicable law. Humanitarian messages were reiterated via the media. Although heavy fighting occasionally impeded access to victims, wide acceptance of the Movement's humanitarian role facilitated National Society/ICRC operations countrywide. Several times, the ICRC acted as a neutral intermediary to help transport medical/chemical supplies across front lines.

Initially, ICRC/National Society teams set about alleviating precarious living conditions faced by IDPs and host communities in conflict-torn parts of Abidjan and western regions. Besides distributing food and household essentials, they installed tents and water/sanitation facilities in areas lacking appropriate infrastructure. ICRC-equipped National Society-run mobile clinics made community health services available. As security improved, efforts turned to supporting reconstruction and livelihood recovery, for example by helping repair/rebuild housing and water/health infrastructure unusable owing to damage/neglect or by distributing agricultural inputs to farmers. Cash-for-work programmes employing local labour to rebuild homes/rehabilitate plantations contributed to household incomes and community infrastructure.

To ensure the care of the weapon-wounded, the ICRC donated essential medical supplies to health facilities, bolstered National Society first-aid services and trained Ivorian medical professionals in war surgery. To prevent injury by explosive remnants of war (ERW) in Abidjan, ICRC weapon-contamination experts mobilized ordnance-clearance operations, backed by a public risk-awareness campaign.

ICRC/National Society personnel in Côte d'Ivoire and abroad (mainly Liberia) cooperated to reconnect relatives dispersed by the post-election crisis, including separated/unaccompanied children. To help families receive timely information regarding missing relatives, they provided practical support to the authorities in managing human remains.

ICRC delegates visited detainees in Côte d'Ivoire whenever feasible, pursuing efforts to improve food, health care and hygiene provision in functioning facilities. When regular penitentiary facilities closed, they redirected their attention to people newly detained in improvised facilities. Later, as the new administration prepared to resume penitentiary services, delegates worked with them to tackle longstanding systemic shortcomings, focusing on avoiding previous patterns of malnutrition and morbidity. Elsewhere, detainees in Benin, Burkina Faso and Togo also received ICRC visits.

While prioritizing its response to the Ivorian crisis, the ICRC continued to strengthen National Society capacities regionwide, providing training/materials to facilitate emergency response, communication and public health activities.

Coordination with other humanitarian actors ensured needs were met while avoiding duplication.

CIVILIANS

During the Ivorian post-election crisis, civilians made over 1,500 calls on an ICRC telephone hotline to request help or register allegations of arrests/abuses. Such allegations formed the

basis of representations to the relevant authorities and community members to encourage them to take appropriate preventive/corrective measures.

As the crisis worsened, both nominated administrations and their respective armed components were reminded by the ICRC of their obligations under applicable law (see *Authorities and Armed forces and other bearers of weapons*). These covered, particularly, the respect due to medical/humanitarian missions, proper conduct during law enforcement operations/arrests, and best practice when handling human remains.

The delegation continuously monitored civilians' welfare, paying attention to intercommunal relations, activity by weapon bearers and population movements, and documenting allegations of new abuses. Newly appointed military commanders and other weapon bearers remained receptive to ICRC representations.

Dispersed relatives seek family news

In Côte d'Ivoire and worldwide, people sought help from National Society/ICRC personnel to reconnect with relatives with whom they had lost contact owing to the Ivorian post-election crisis. Such services were particularly valuable to IDPs and Ivorians seeking refuge abroad, including separated/unaccompanied children. By year-end, 42 such children had rejoined relatives thanks to cooperation between Movement components and other humanitarian actors.

During the crisis, people reported difficulties in clarifying the whereabouts of relatives unaccounted for and in recovering the remains of family members. Facing security constraints and overwhelming demand, the authorities responsible for managing human remains received ICRC guidance/practical support in ensuring the safe and timely transfer of the dead to mortuaries. National Society personnel helped collect, identify and bury the dead using ICRC-supplied body bags and vehicles.

IDPs, vulnerable residents and returnees regain access to adequate water, sanitation and shelter

In 2011, 7,364,910 people benefited from water, sanitation or shelter initiatives implemented jointly by the National Society/ICRC. National Society personnel underwent tailored training, and four branches acquired new ICRC-constructed offices, better equipping them to undertake such work.

Prior to the intensification of the crisis, a new drinking fountain afforded 1,500 urban dwellers easier access to clean water. In western areas, 14,600 rural residents enjoyed a healthier living environment after upgrading local water/sanitation infrastructure and promoting good hygiene practices alongside National Society personnel. Further such initiatives were put aside, allowing National Society/ICRC teams to address the urgent needs of crisis-affected communities.

At the height of the conflict, with insecurity impeding travel and restrictions paralysing chemical imports, the water authorities sought support in ensuring service delivery. Residents of Bouaké and Korhogo (some 3 million people) avoided interruptions to water supply when the ICRC helped deliver required products to treatment plants, acting as a neutral intermediary to transport them across front lines. An arrangement between the European Union (EU, see *Authorities*) and the ICRC permitted the import of 4,000 metric tonnes of chemicals, sufficient to purify water for Abidjan's 5-million-strong population for six months.

In Abidjan and western towns, including Duékoué and Guiglo, some 43,000 IDPs gathered in public/religious buildings had access to ICRC-constructed shelters, latrines, showers and water points, easing precarious conditions. To ensure facilities remained functional, they received maintenance materials and training. Those in the busiest sites could draw continuous clean water from high-capacity storage tanks installed and refilled regularly with trucked-in water. Such infrastructure was gradually dismantled as IDPs began returning home.

In central/western areas, damage to water infrastructure left communities reliant on open sources prone to contamination, while deterring IDPs/refugees from returning home. Here, 228,800 people benefited from the chlorination of around 11,400 wells, and 77,000 from hand-pump repairs, assuring them of a safe supply. Among them, 247 returning families (some 1,500 people) had help to rebuild/renovate damaged homes as part of reconstruction efforts. Some 320 local artisans conducted the work with ICRC-supplied materials/supervision, revitalizing the labour market and providing workers with household income.

IDPs, residents and returnees obtain essential health care

To combat disruption to health services, in addition to first aid (see *Wounded and sick*), IDPs, residents and returnees had access to primary health care at ICRC-supported National Society mobile clinics. Touring Abidjan and western regions lacking functioning health infrastructure, nine such clinics carried out 77,092 consultations. From September, clinic patients could also obtain routine immunizations (284,870 doses administered). Moreover, National Society health posts at IDP sites, and 17 health facilities in Abidjan, received basic medicines/medical materials. Two health centres forced to close during the fighting later reopened following ICRC renovations.

IDPs, residents and returnees receive relief and support to recover self-sufficiency

Across Abidjan and the west, 125,477 people (20,550 households), including IDPs taking refuge from the fighting and returnees seeking to re-establish themselves, received items such as blankets and utensils to help cover immediate household needs. Some 111,254 people (18,566 households) experiencing food shortages received a two-week food ration and/or high-calorie biscuits.

As security improved, efforts turned to supporting livelihood recovery in hard-hit western regions. Thus, 6,862 IDP/host families (41,172 people) with access to farmland received seed and hoes, enabling them to produce and sell staple crops. Meanwhile, 33,540 returnees (5,590 households) helped reclaim neglected

coffee/cocoa plantations through cash-for-work programmes. With ICRC training/supervision, they restored 10,700 hectares to working order and were remunerated accordingly, boosting their income and rendering the plantations profitable again.

Abidjan residents supported in surviving the residual effects of conflict

ERW left from high-intensity hostilities in Abidjan posed a localized threat to civilians. Encouraged by ICRC weapon-contamination experts, mine-action actors present cooperated to clear hazardous devices. To reduce accidents and permit the safe return of IDPs/refugees, local residents learnt how to behave safely through an extensive publicity campaign run in parallel by ICRC-trained National Society/NGO volunteers.

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in Benin, Burkina Faso, Côte d'Ivoire and Togo received visits from the ICRC, according to its standard procedures, to monitor their treatment and living conditions. Among them were 551 newly detained, by either party, in connection with the Ivorian post-election crisis (including the former president arrested in April), and 304 held in connection with Burkinan disturbances. Detainees in Benin serving sentences under the International Criminal Tribunal for Rwanda also received visits (see *Nairobi*).

During visits, detainees used ICRC family-links services to communicate with relatives/consular representatives. As needed, they received hygiene and/or leisure articles for their general comfort.

Feedback from ICRC visits was shared confidentially with the authorities concerned, including recommendations for improvements.

Ivorian detainees' urgent needs addressed during and after the crisis

In Côte d'Ivoire, both during and after the crisis, the authorities received ICRC support in ensuring detainees' access to adequate food, health care and hygiene. As the situation evolved, the delegation adapted its activities, suspending any that had lost immediate relevance.

Malnutrition being a longstanding concern, vulnerable detainees had their nutritional health monitored and, where necessary, received ICRC-supplied high-calorie biscuits or food rations to supplement their meals until they recovered their health. This initiative, interrupted with the prison closures (see below) and reactivated on a limited scale as facilities reopened, benefited 1,227 inmates. Detainees also received required medical treatment

PEOPLE DEPRIVED OF THEIR FREEDOM	BENIN	BURKINA FASO	CÔTE D'IVOIRE	TOGO
ICRC visits				
Detainees visited	7	304	10,615	20
Detainees visited and monitored individually	7	304	590	20
		5	9	
			23	
Detainees newly registered		304	551	2
		5	9	
			22	
Number of visits carried out	1	3	101	12
Number of places of detention visited	1	3	35	5
Restoring family links				
RCMs collected		3	81	22
RCMs distributed		3	84	19
Phone calls made to families to inform them of the whereabouts of a detained relative			411	
People to whom a detention attestation was issued			23	8

thanks to donations of drugs/supplies to 16 operational facilities. They faced fewer general health risks following urgent repairs to malfunctioning water/sanitation infrastructure, as in Daloa where the sewage system was unblocked.

When penitentiary facilities closed in March, occasioning the release of the prison population (see *Context*), delegates turned to addressing the needs of people newly detained in improvised facilities. Where necessary, inmates received food and ICRC-administered medical attention. High-calorie biscuits originally intended to expand the nutritional initiative were redirected to IDPs facing food shortages (see *Civilians*).

From August, penitentiary facilities began reopening. This provided an opportunity to address systemic shortcomings that had long undermined detainees' well-being. Accordingly, the authorities benefited from ICRC advice and practical support in ensuring reopening facilities were adequately prepared, to help avoid previous patterns of malnutrition/morbidity. In particular, they received a one-off donation of drugs/consumables to cover the needs of 500 detainees for three months, and explored with nutritional experts means of establishing a reliable, sustainable food-supply chain. Five prisons had ovens repaired/installed, boosting meal-preparation capacities.

WOUNDED AND SICK

During the crisis in Côte d'Ivoire, besides providing community health services (see *Civilians*), National Society teams established first-aid posts countrywide backed by ICRC funds, fuel and equipment. Despite insecurity occasionally preventing access to victims, their efforts enabled thousands of wounded people to receive prompt treatment. Where insecurity/shortages of supplies threatened their services, health authorities called on ICRC support. Accordingly, 78 health facilities in Abidjan and the west received drugs and medical/surgical materials. Several times, the national pharmacy and the national centre for blood transfusion obtained logistical support in delivering urgent supplies to hospitals.

Communities in far western regions regained access to adequate medical/surgical services after the ICRC renovated three hospitals (270 beds) rendered unusable during the fighting. To enhance national surgical capacities, 20 health professionals honed their skills in treating weapon-wounded patients at a Health Ministry/ICRC seminar.

AUTHORITIES

In Côte d'Ivoire, representatives of nominated governments, intergovernmental organizations and key embassies remained in continuous contact with the ICRC regarding the humanitarian consequences of the crisis and reconstruction/reconciliation efforts. Besides impressing upon all stakeholders the need to safeguard civilians' rights (see *Civilians*), such dialogue proved essential in gaining their support for the Movement's neutral, impartial and independent humanitarian work. All authorities involved in hostilities received formal notification regarding their obligations under applicable law and, particularly, the rules to respect during non-international/international armed conflict, as appropriate. Alerted to the impact of import restrictions on public services, the EU granted the ICRC special authorization to ship water-treatment products from Europe to Abidjan (see *Civilians*).

The crisis and, subsequently, preparations for legislative elections, slowed progress on IHL implementation. Nevertheless, the

new Ivorian administration expressed interest in working with the ICRC to incorporate mechanisms for the repression of IHL violations into national legislation.

Governments elsewhere in the region also demonstrated willingness to pursue the ratification/implementation of IHL instruments, drawing on ICRC expertise, training support and reference materials. The Burkinan national IHL committee co-hosted with the ICRC briefings for officials on priority treaties and submitted a revised military justice code for National Assembly approval. In Benin and Togo, efforts to reinvigorate the national IHL committees garnered ministerial support and commitments to action. Ghana and Togo ratified the Convention on Cluster Munitions and the African Union Convention on IDPs respectively. To encourage further advances, a Ghanaian official enhanced his knowledge at a Movement IHL event abroad.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

In Côte d'Ivoire, the need to build respect among all weapon bearers for IHL, international human rights law and humanitarian workers remained pressing. During the fighting, daily contact with combatants on both sides deepened their understanding of the Movement's neutral, impartial and independent humanitarian approach. Their broad acceptance proved critical in securing National Society/ICRC access to victims despite prevailing suspicion towards international organizations. As violence escalated, military components of all parties involved were notified of their obligations to conduct hostilities according to applicable law.

As conditions stabilized, efforts commenced to promote humanitarian principles among all weapon bearers with an influence in restoring security. This included contributing to training the reconstructed armed forces, combining troops previously fighting on opposing sides. Thus, some 1,400 military, *gendarmerie* and police officers learnt about their respective responsibilities through ICRC courses at national training academies. A further 1,900 weapon bearers gained an insight into basic IHL principles at ICRC field presentations, accompanied by National Society-run first-aid training.

Regionwide, military authorities benefited from ICRC advice, sponsorship and materials to enhance IHL instruction standards. Some 40 Togolese IHL instructors refined their teaching techniques at an ICRC workshop, and 2 senior officers built on their IHL expertise at advanced workshops abroad. IHL units in Benin and Togo, having updated their officer handbooks with ICRC technical input, printed/circulated these widely. Peacekeeping schools similarly welcomed ICRC support in integrating IHL into training, with Beninese, Ghanaian and Togolese contingents attending predeployment briefings.

CIVIL SOCIETY

Across the region, community/religious leaders, trade unions, NGOs and, particularly, politically active Ivorian youth/student groups gained a better grasp of humanitarian principles and the Movement's distinctive approach at ICRC briefings and roundtables. This widened acceptance of National Society/ICRC teams at community level, facilitating access to victims in Côte d'Ivoire.

Media representatives took advantage of ICRC field trips, seminars and information sessions, strengthening their capacities to report accurately on humanitarian topics. Many seeking credible information about developments in Côte d'Ivoire sought out National

Society/ICRC press releases/interviews. The ensuing coverage increased public awareness of the Movement's response and the respect owed to those not, or no longer, participating in hostilities. Local radio stations helped ensure such messages reached remote communities.

Broadening IHL knowledge at university level, over 500 Beninese, Ivorian and Togolese students learnt about the ICRC's role as the guardian of IHL at presentations, backed by reference materials donated to their university libraries. The 4th West African Regional International Humanitarian Law Competition, organized in Abidjan by the Ivorian Justice Ministry/ICRC, saw students from nine countries practise applying IHL through a scenario inspired by the post-election crisis. To boost IHL teaching capacities, a Ghanaian lecturer attended a regional course with ICRC funding.

RED CROSS AND RED CRESCENT MOVEMENT

In line with contingency plans, the ICRC coordinated the Movement response to the Ivorian post-election crisis, with the National Society as its primary partner. To ensure effective action, the Ivorian Red Cross, the International Federation and the ICRC signed a joint declaration and established a coordination committee. With ICRC guidance and strengthened training, logistical and material support, the National Society assisted over 16,000 victims (see *Civilians* and *Wounded and sick*). Similar support enabled 69 branches to mobilize first-aid cover surrounding December's legislative elections.

Ivorian volunteers were among some 900 regionwide to benefit from ICRC-financed courses, thereby improving their capacities to assess needs, manage projects, facilitate family contact and/or promote public health. Branches in volatile areas received first-aid equipment and/or relief goods. This enabled them to assist, for example, victims of violence in Burkina Faso, and 215 irregular migrants in Togo. Those in flood-prone districts helped prepare communities against water-borne diseases by running hygiene-awareness sessions.

To better prepare them to promote the Movement/humanitarian principles, volunteers enhanced their presentation skills at ICRC workshops. An Ivorian Red Cross campaign promoting correct use of the Movement's emblems resulted in several State health facilities adopting alternative symbols.

ICRC-sponsored National Society representatives participated in Movement meetings, facilitating information sharing and strengthening their governance and income-generation capacities.