ABIDJAN (regional)

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



ICRC regional delegation ICRC sub-delegation ICRC office/presence C ICRC regional logistics centre

KEY RESULTS/CONSTRAINTS

In 2013:

- people affected by the 2011 post-electoral conflict in Côte d'Ivoire, including returnees and women heads of households, rebuilt their livelihoods, notably using ICRC support to resume farming activities and start small businesses
- in Burkina Faso, Malian refugees and their hosts saw the hunger gap period through thanks to the timely provision of food rations and essential household items, and the upgrade of water and sanitation infrastructure
- in western Côte d'Ivoire, people enduring psychological/emotional trauma induced by post-conflict stress or sexual violence benefited from specialized treatment at six-ICRC supported health facilities
- in Côte d'Ivoire and Togo, detainees eased their living conditions, through infrastructural upgrades in prisons done by the pertinent authorities with ICRC help, even as the latter country reviewed its agreement with the ICRC
- Ivorian medico-legal personnel were well equipped to support the authorities' campaign to identify remains of people who died during the 2011 conflict, as they had benefited from ICRC specialized training and forensic material
- Benin, Burkina Faso, Côte d'Ivoire, Ghana and Togo signed the Arms Trade Treaty, while taking steps – with ICRC help – to implement other treaties regulating the sale and use of arms

EXPENDITURE (in KCHF)	
Protection	3,075
Assistance	5,440
Prevention	2,075
Cooperation with National Societies	1,682
General	-
	12,272

of which: (Overheads 749
IMPLEMENTATION RATE	
Expenditure/yearly budget	93%
PERSONNEL	
Mobile staff	37
Resident staff (daily workers not included)	216

In the countries covered by the delegation, established in 1992, the ICRC supports the authorities in implementing IHL, encourages armed/security forces to respect that law and visits detainees. It works with and supports the development of the region's National Societies. The delegation focuses on responding to the protection and assistance needs of people, including refugees, affected by the lasting consequences of the crisis in Côte d'Ivoire that began in 2002 and the 2011 postelection conflict, and by the consequences of armed conflict/ other situations of violence in the greater region.

YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action HIGH

PROTECTION	Total
CIVILIANS (residents, IDPs, returnees, etc.)	
Red Cross messages (RCMs)	
RCMs collected	805
RCMs distributed	505
People located (tracing cases closed positively)	114
People reunited with their families	90
of whom unaccompanied minors/separated children	80
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)	
ICRC visits	
Detainees visited	13,485
Detainees visited and monitored individually	618
Number of visits carried out	261
Number of places of detention visited	73
Restoring family links	
RCMs collected	141
RCMs distributed	70
Phone calls made to families to inform them of the whereabouts of a detained relative	244

ASSISTANCE		Targets	Achieved				
CIVILIANS (residents, IDPs, retu	rnees, etc.)						
Economic security, water and habitat (in some cases provided within a protection							
or cooperation programme)							
Food commodities	Beneficiaries	6,000	9,606				
Essential household items	Beneficiaries	18,000	4,507				
Productive inputs	Beneficiaries	18,000	19,013				
Work, services and training	Beneficiaries	600	18,900				
Water and habitat activities	Beneficiaries	61,500	145,387				
Health							
Health centres supported	Structures	6	6				
WOUNDED AND SICK							
Hospitals							
Hospitals supported	Structures		1				

CONTEXT

Supported by the international community, Côte d'Ivoire continued recovering from the 2011 post-electoral conflict. In April, local and regional elections concluded peacefully. Some progress was made in the reconciliation process; the conditional release of some detained members of the former regime led to direct talks between the ruling and opposition parties. The process of disarmament wore on slowly; some former fighters were re-integrated into the armed forces or resumed livelihood activities with State support. With the stabilizing security situation in the west, more Ivorian refugees returned from Liberia. However, land tenure issues, competition for scarce resources and immigration caused violence and displacement.

In Burkina Faso, UNHCR camps moved south, away from the Malian border. Malian refugees who remained in that area and their host communities required humanitarian aid, particularly during the hunger gap period, as local resources were insufficient to meet all needs. Hygiene conditions deteriorated as water infrastructure came under pressure from the growing numbers of people and livestock.

Togolese authorities detained opposition leaders in relation to fires at two major markets, sparking protests. Nevertheless, elections passed off peacefully in July.

Benin, Burkina Faso, Côte d'Ivoire, Ghana and Togo participated in the UN Multidimensional Integrated Stabilization Mission in Mali.

ICRC ACTION AND RESULTS

The ICRC helped refugees, IDPs and vulnerable residents across the region meet their urgent and long-term needs. In Côte d'Ivoire and Burkina Faso, the ICRC and the National Societies concerned provided direct assistance to such people, while helping volunteers strengthen their capacities in various areas: first aid, restoration of family links, hygiene promotion and economic security.

In western Côte d'Ivoire, the ICRC/Red Cross Society of Côte d'Ivoire provided IDPs and vulnerable residents/returnees with household essentials, and support for livelihoods and water/health systems; this helped them cope and aided their recovery from the trauma of the 2011 conflict. Female heads of households covered their families' basic needs with income earned through small businesses. Returnee/resident farmers diversified their sources of food and income by consuming/selling produce cultivated with ICRCprovided agricultural supplies and equipment. Farmers and people in rural areas had enough clean water and better protection from hygiene-related diseases, thanks to upgraded water infrastructure maintained by trained local committees and the beneficial effects of hygiene promotion and vaccination campaigns. People needing medical attention, including pregnant women, children and victims of sexual violence, maintained their good health with preventive, ante/post-natal, curative and basic psychological care at six ICRC-supported health structures.

In Burkina Faso, Malian refugees, aided by household essentials from the Burkinabé Red Cross Society and the ICRC, settled into host communities. Refugees and their hosts saw the hunger gap period through and faced fewer health risks owing to the timely provision of food, free veterinary services and upgrades to water/ sanitation infrastructure. ICRC delegates visited detainees in Benin, Burkina Faso, Côte d'Ivoire and Togo, including people held for security reasons. Afterwards, the authorities received confidential feedback for improving detainee treatment and living conditions. In Ivorian prisons, the authorities and the ICRC monitored detainees' health/ nutritional status and treated malnourished detainees. Wounded or sick inmates were looked after in infirmaries supported by the ICRC with medical supplies; others benefited from the reduction in health risks brought about by upgraded water/sanitation facilities. In early 2013, as 32 decommissioned prisons were reopened, the Ivorian authorities strove to adapt the penitentiary system to expanded needs; with ICRC input, they revised penitentiary policies and addressed core problems in detainee health and prison infrastructure.

Malian refugees in Burkina Faso, families in Côte d'Ivoire awaiting news of their relatives and others separated from their families by conflict, detention or other circumstances restored/maintained contact through Movement family-links services. In connection with the 2011 conflict, Ivorian authorities and the ICRC discussed the needs of the families of people who went missing and the importance of clarifying the fate of their relatives. In April, the Ivorian authorities launched a campaign to exhume and identify the remains of people who died in relation to the 2011 conflict, aided by local medico-legal personnel who had received technical and material ICRC support. The authorities were also encouraged to adopt legislation on missing persons and their families; to this end, a study was conducted on the compatibility of domestic legislation with international laws and practices. At a workshop where the study was presented, ministries concerned considered the ICRC's proposals in this regard.

The ICRC and the five countries covered by the delegation discussed ratification and implementation of IHL treaties. Within the year, all five had signed the Arms Trade Treaty. Troops deployed in western Côte d'Ivoire, the Burkina Faso-Mali border and in Mali itself learnt more about IHL principles and neutral and impartial humanitarian action through ICRC information sessions. Briefings for civil society representatives and in-depth media coverage helped rouse general interest in IHL and support for Movement action.

CIVILIANS

As Côte d'Ivoire continued to stabilize (see *Context*), the ICRC received fewer reports of IHL violations in relation to violence, mines and former combatants. Nonetheless, documented cases were shared with parties concerned, to prevent recurrence. In December, the effect of weapon bearers' presence on access to health facilities in the west was assessed, helping guide planning for 2014.

Malian refugees and conflict-affected Ivorians restore contact with relatives

In coordination with ICRC efforts in Mali (see *Mali*), Malian refugees in Burkina Faso, including unaccompanied minors, regained contact with their relatives thanks to family-links services offered by the Burkinabé National Society, with logistical/communication support from the ICRC.

Similarly, although most families separated by the 2011 Ivorian conflict had already re-established contact, some people still restored family links through these services, offered by the Ivorian National Society/ICRC in cooperation with the authorities and

UNHCR. Around 80 unaccompanied children and 10 vulnerable adults rejoined their families, including some located through a photo tracing campaign (see *Liberia*).

Ivorian authorities and the ICRC dialogued on the importance of informing families of the fate of relatives missing since the 2011 conflict, and these families' other needs. The authorities were encouraged to update legislation applicable to missing people and their families and define a framework for providing State support to the families. Following the completion of a detailed study on the compatibility of current legislation with international laws and practices, the Justice Ministry and other ministries considered the ICRC's recommendations in this regard at a workshop.

The authorities and the ICRC also regularly discussed exhuming and identifying the remains of people buried in unmarked gravesites and setting up an office dedicated to the task, including during an exhumation/identification campaign conducted by the special commission charged with investigating alleged IHL/human rights violations during the 2011 conflict. Medicolegal personnel supporting the campaign were trained in antemortem data collection and identification techniques and supplied materials for forensic investigation by the ICRC. With the families' consent, cases lodged with the ICRC were shared with the authorities, facilitating investigations. In April, a first batch of 40 bodies were exhumed, 22 of which were identified; the authorities returned five bodies to the families, helping them find some closure.

Malian refugees in Burkina Faso meet urgent needs

The Ivorian National Society stepped up its presence in western Côte d'Ivoire by constructing/upgrading four branches, while the Burkinabé National Society extended its reach in northern Burkina Faso with ICRC help.

In Burkina Faso, some 420 Malian households (2,500 people) living outside UNHCR camps settled into host communities, aided by ICRC-provided household essentials. They and other refugees and host communities, with ICRC help, saw the hunger gap period through; roughly 9,000 people (1,500 households) received food rations, while some 2,000 of them accessed sufficient water for their personal needs or their livestock, from ICRC-upgraded water points. Around 2,500 local and refugee herders (18,900 people) maintained their livestock's health and productivity through free veterinary services provided with livestock authorities. Despite crowding with livestock and the limited sanitation infrastructure, people maintained good hygiene and reduced their health risks, partly because of newly constructed showers and latrines and hygiene promotion campaigns.

Residents and IDPs in western Côte d'Ivoire continue rebuilding their lives

In western Côte d'Ivoire, 2,015 people (331 households) – mainly returnees struggling with land tenure issues – met their immediate needs through the provision of household essentials by National Society volunteers; some also received one-off food rations. Over 3,100 IDPs and residents returning to damaged homes/ water infrastructure reintegrated into their communities, aided by ICRC-supplied roofing materials and chlorine tablets for purifying well water.

Vulnerable residents and returnees, with ICRC help, rebuilt their livelihoods and bolstered their resilience to violence. Some 3,000 households (18,000 people), mainly returnees, supplemented their sources of food and income by consuming/selling maize and rice they had cultivated with seed, tools and technical advice from the National Society/ICRC. Farmers resumed working coffee/cacao farmland rehabilitated during cash-for-work activities in 2012. Over 110 female heads of households (755 people) covered their families' basic needs with money earned from small businesses they had established using ICRC training and funds. Roughly 93% of the 200 women benefiting from this initiative since 2012 reported a significant increase in income.

Over 65,900 people in rural areas had enough clean water and better protection against hygiene-related diseases owing to the construction/repair of water points, which were maintained by local water committees trained and supplied with tools and spare parts by the ICRC. For example, some 8,600 reduced their exposure to hygiene-related diseases thanks to the construction of latrines and wells and hygiene promotion campaigns by the National Society/ ICRC teams. Another 68,600 people in suburban areas likewise strengthened their resilience to diseases such as cholera.

People cope with conflict-related psychological trauma thanks to basic care in Ivorian health centres

Children and pregnant women in the isolated areas of northern Bloléquin, where health services were largely absent, and in areas covered by four community health centres (see below) were vaccinated against polio and other illnesses by ICRC-supported health teams.

CIVILIANS		BURKINA FASO	CÔTE D'IVOIRE
Economic security, water and habitat			
Food commodities	Beneficiaries	9,000	606
Essential household items	Beneficiaries	2,492	2,015
Productive inputs	Beneficiaries		19,013
Work, services and training	Beneficiaries	18,900	
Water and habitat activities	Beneficiaries	2,054	143,333
Health			
Health centres supported	Structures		6
Average catchment population			306,752
Consultations	Patients		53,297
of which curative	Patients		38,566
of which ante/post-natal	Patients		9,574
Immunizations	Doses		151,606
of which for children aged five or under	Doses		146,827
Referrals to a second level of care	Patients		495
Health education	Sessions		223

Nearly 53,300 patients – of whom pregnant women – reduced health risks and recovered from their illnesses/injuries after receiving ante/post-natal and curative care at four community health centres and two hospitals regularly supported by the ICRC with upgrades to sanitation infrastructure, medical supplies, professional guidance and fuel for transporting people needing specialized treatment to the regional hospital, which also received ad hoc support. Of these people, some 226 were treated for post-conflict stress or the consequences of sexual violence by 44 doctors, midwives and nurses trained to deal with mental illnesses.

Communities themselves became more involved in ensuring that people suffering psychological distress could benefit from proper care and a suitable home environment. At information sessions, over 47,500 people learnt about mental illness, available care and referral procedures. Around 80 community first-responders underwent training in psychological first aid.

Victims of sexual violence faced fewer obstacles in proving abuse, as the Ivorian Order of Physicians, with ICRC encouragement, urged its members to lower the prices of requisite medical examinations.

PEOPLE DEPRIVED OF THEIR FREEDOM

Region's authorities use the ICRC's confidential feedback in improving detainee treatment

Detainees in Benin, Burkina Faso, Côte d'Ivoire and Togo were visited by the ICRC in accordance with its standard procedures; security detainees, women, children and other vulnerable inmates were monitored individually. In Côte d'Ivoire, delegates also visited people in solitary confinement and those held by the police/*gendarmerie*, intelligence services or the military. People detained by Togolese authorities for their alleged role in the 2009 coup attempt or in setting fires (see *Context*), detainees held by Burkinabé authorities in relation to the 2011 mutiny and people sentenced by the International Criminal Tribunal for Rwanda serving their sentences in Benin, also received visits. The respective authorities used the ICRC's confidential feedback to improve treatment and living conditions for detainees.

Detainees contacted their relatives via telephone calls or RCMs or received parcels through Movement family-links services. At their request, foreign detainees had their consular representatives notified of their situation.

Ivorian authorities cope with the expanded needs following the reopening of 32 prisons

In Côte d'Ivoire, penitentiary authorities maintained a system to monitor the food supply chain and detainees' diet. Following body mass index checks, over 800 detainees with acute malnutrition recovered their health through therapeutic and supplementary feeding; at one prison, 540 moderately malnourished detainees maintained their health through a complementary feeding programme. In 15 prisons, some 600 inmates with vitamin-deficiency illnesses were treated directly; 2,000 inmates in six prisons received vitamin/mineral supplements. Roughly 5,000 detainees benefited from kitchen upgrades (see below). Partly through such measures, the overall rate of acute malnutrition remained below 15%, despite an increase in the prison population.

Over 10,300 detainees had improved living conditions and reduced health risks following repairs to kitchen/water/sanitation infrastructure and cleaning/pest-control campaigns. Some 8,270 also benefited from sleeping mats and hygiene and recreational items. Sick or injured detainees recovered at infirmaries supported by the ICRC with technical advice and medical supplies or through medical interventions, as in the case of 89 inmates.

After 32 prisons decommissioned during the violence in 2011 conflict were reopened in early 2013, the Ivorian authorities, with ICRC input, revised the penal code and penitentiary policies and assessed the state of prison infrastructure, with a view to redefining domestic detention standards. At two workshops, prison directors, officials from the Health Ministry and other ministries concerned shared best practices with the ICRC and identified practical solutions to core issues related to health, construction/maintenance/ upgrade of prison infrastructure and budget.

PEOPLE DEPRIVED OF THEIR FREEDOM		BENIN	BURKINA	CÔTE	TOGO
ICRC visits				D'IVOIRE	
Detainees visited		13	11	10,785	2,676
	of whom women			451	71
	of whom minors			281	1
Detainees visited and monitored individually		13	11	564	30
	of whom women			9	
	of whom minors			9	
Detainees newly registered			1	370	25
	of whom women			5	
	of whom minors			7	
Number of visits carried out		1	4	236	20
Number of places of detention visited		1	2	61	9
Restoring family links					
RCMs collected				141	
RCMs distributed		1		69	
Phone calls made to families to inform them of the whereabouts of a detained relative			1	230	13
People to whom a detention attestation was issued				2	1

PEOPLE DEPRIVED OF THEIR FREEDOM Economic security, water and habitat		BENIN	CÔTE D'IVOIRE	TOGO
Food commodities	Beneficiaries		540	
Essential household items	Beneficiaries		9,113	
Water and habitat activities	Beneficiaries		10,350	2,412
Health				
Number of visits carried out by health staff		1	170	13
Number of places of detention visited by health staff		1	34	8

In Togo, planned upgrades to prisons' water/sanitation facilities were scaled back as the penitentiary authorities reviewed the terms of their agreement with the ICRC. Nevertheless, some 2,400 detainees in four prisons improved their living conditions with ICRC-supplied cleaning material. Inmates in the Lomé central prison were protected against outbreaks of disease by urgent sanitation measures carried out with the authorities.

AUTHORITIES, ARMED FORCES AND OTHER BEARERS OF WEAPONS, AND CIVIL SOCIETY

Soldiers deploying to Burkina Faso or Mali or deployed in western Côte d'Ivoire learn more about IHL

With the Ivorian military focused on reorganization, activities with its IHL office were limited to campaigning for support for domestic integration of IHL among influential actors in Côte d'Ivoire and in the region. Nonetheless, over 2,300 soldiers, including auxiliary troops in western Côte d'Ivoire, learnt more about their responsibilities under IHL through information sessions. Another 2,100 troops – among them Burkinabé soldiers deployed near Burkina Faso's border with Mali and Burkinabé and Ivorian and Togolese forces deploying to Mali or Côte d'Ivoire – added to what they knew about IHL. Through information sessions and workshops, some 840 police/*gendarmerie* agents acquired a better grasp of IHL/human rights principles applicable to their duties, such as international standards governing the use of force during arrests.

One military officer from every country in the region attended courses in San Remo and some 180 Ivorian officers took part in similar courses in Côte d'Ivoire; in addition, 20 Ivorian military and *gendarmerie* instructors bolstered their ability to teach IHL. In Benin, Burkina Faso, Ghana and Togo, 165 students at military/ *gendarmerie* academies learnt more about IHL and internationally recognized law enforcement standards. Burkina Faso's national officers' school and the Ivorian military's IHL office received IHL material. Benin's armed forces established their own IHL office.

All the countries in the region sign the Arms Trade Treaty

The region's authorities, including officials handling weaponrelated issues, discussed ratification/implementation of IHL treaties at ICRC information sessions and conferences, for example on treaties relating to weapon proliferation (see *Nigeria*) and, in Togo, on the implementation of the Convention on Cluster Munitions in Africa. All five State covered by the delegation signed the Arms Trade Treaty. Togolese and Ivorian officials, with ICRC help, worked on the draft of a regional treaty regulating the proliferation of small arms and light weapons.

Beninese, Ivorian and Togolese authorities reviewed their respective penal codes; while doing so they took into account the ICRC's views on incorporating sanctions against IHL violations in domestic law. Ghanaian authorities and the Ivorian Justice Ministry also heeded the ICRC's advice while drafting a law on the emblem, ratifying the Rome Statute and implementing the Convention on Cluster Munitions.

Burkinabé and Togolese authorities discussed strengthening their respective IHL committees with ICRC help. The Togolese IHL committee had new members, appointed by the authorities.

Over 3,000 influential civil society members learn about IHL and the Movement's neutral action

Civil society members throughout the region, including student

magistrates, members of human rights groups and youth leaders, learnt about IHL/humanitarian issues of specific interest to them and broadened their exposure to the Movement through briefings and other events organized by the pertinent National Society with the ICRC. Medical personnel learnt about best practices in situations of insecurity through a white paper produced by the Ivorian Order of Physicians with ICRC input; this was in line with the goals of the Health Care in Danger project. Beninese, Ivorian and Togolese students participated in national moot court competitions in their respective countries. With ICRC support, an Ivorian university introduced an IHL course. Local authorities, particularly in western Côte d'Ivoire and in the area near Burkina Faso's border with Mali, were made aware of IHL and the ICRC's activities.

Journalists were informed of the complexities of reporting on humanitarian action through IHL courses in Côte d'Ivoire and in Togo. In-depth television and print coverage familiarized the public with Movement activities. As the country recovered from the events of 2011, people in Côte d'Ivoire learnt more about the ICRC's activities.

RED CROSS AND RED CRESCENT MOVEMENT

The five National Societies in the region improved their emergency response capacities with ICRC help: they shared best practices during workshops and trained volunteers in family-links services, first-aid and hygiene promotion. Burkinabé volunteers provided assistance/family-links services for Malian refugees and host communities in Burkina Faso, while Ivorian volunteers helped meet the needs of conflict-affected people, including those in remote communities (see *Civilians*). In Togo, trained volunteers were present at election-related events and protests, to tend to victims of violence.

The National Societies organized dissemination sessions and other related events, notably in line with the World Red Cross and Red Crescent Day, with a view to raising public awareness of neutral and impartial humanitarian action and the Movement's emblems. In Côte d'Ivoire, private health care facilities discussed the proper use of the red cross/red crescent emblem with the National Society and the ICRC.

Where necessary, the National Societies reformed their managerial and financial practices, and strengthened their statues with help from the International Federation and the ICRC. However, the Benin Red Cross's financial/organizational issues remained unresolved despite an external audit.

Movement partners met regularly to coordinate their activities.

MAIN FIGURES AND INDICATORS: PROTECTION	Total		
CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages (RCMs)		UAMs/SCs*	
RCMs collected	805	177	
RCMs distributed	505	111	
Names published in the media	41		
Reunifications, transfers and repatriations			
People reunited with their families	90		
including people registered by another delegation	84		
Tracing requests, including cases of missing persons			Minors
People for whom a tracing request was newly registered	221	42	28
People located (tracing cases closed positively)	114		
including people for whom tracing requests were registered by another delegation	24		
Tracing cases still being handled at the end of the reporting period (people)	265	42	40
UAMs/SCs*, including unaccompanied demobilized child soldiers			Demobilized children
UAMs/SCs newly registered by the ICRC/National Society	26	7	
UAMs/SCs reunited with their families by the ICRC/National Society	80	36	
including UAMs/SCs registered by another delegation	74		
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period	26	9	
Documents			
Official documents relayed between family members across border/front lines	1		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)			
ICRC visits		Women	
Detainees visited	13,485	522	282
Detainees visited and monitored individually	618	9	9
Detainees newly registered	396	5	7
Number of visits carried out	261		
Number of places of detention visited	73		
Restoring family links			
RCMs collected	141		
RCMs distributed	70		
Phone calls made to families to inform them of the whereabouts of a detained relative	244		
People to whom a detention attestation was issued	3		

* Unaccompanied minors/separated children

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat (in some cases provided within a protection or cooperation programme) ¹				
Food commodities	Beneficiaries	9,606	29%	47%
Essential household items	Beneficiaries	4,507	12%	17%
Productive inputs	Beneficiaries	19,013	31%	51%
Work, services and training	Beneficiaries	18,900	30%	50%
Water and habitat activities	Beneficiaries	145,387	28%	37%
of whom IDPs	Beneficiaries	37,859		
Health ²				
Health centres supported	Structures	6		
Average catchment population		278,940		
Consultations	Patients	53,297		
of which curative	Patients		10,486	28,080
of which ante/post-natal	Patients		9,574	
Immunizations	Doses	151,606		
of which for children aged five or under	Doses	146,827		
Referrals to a second level of care	Patients	495		
Health education	Sessions	223		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat (in some cases provided within a protection programme) ³				
Food commodities	Beneficiaries	540		
Essential household items	Beneficiaries	9,113		
Water and habitat activities	Beneficiaries	12,762		
Health ⁴				
Number of visits carried out by health staff		184		
Number of places of detention visited by health staff		43		
WOUNDED AND SICK				
Hospitals				
Hospitals supported	Structures	1		

1. Burkina Faso, Côte d'Ivoire

2. Côte d'Ivoire

3. Côte d'Ivoire, Togo

4. Benin, Côte d'Ivoire, Togo