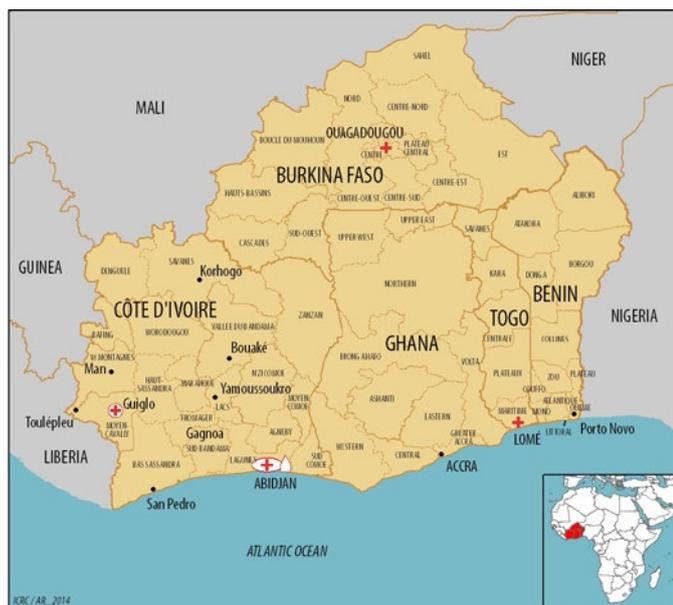


# ABIDJAN (regional)

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



ICRC / AR\_2014  
 ◉ ICRC regional delegation ◉ ICRC sub-delegation + ICRC office/presence  
 △ ICRC regional logistics centre

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 post-elections conflict, and by the consequences of armed conflict/other situations of violence in the greater region.

## YEARLY RESULTS

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

## KEY RESULTS/CONSTRAINTS

In 2014:

- ▶ thousands of detainees had improved living conditions after the completion of infrastructural upgrades in Ivorian prisons, one in Burkina Faso, and a Togolese prison where work had been put off since 2013
- ▶ in western Côte d'Ivoire, people hastened their recovery from illnesses with treatment in 6 ICRC-supported health facilities, including basic psychological care for those suffering emotional distress
- ▶ tens of thousands of Malian refugees in Burkina Faso, and vulnerable people in western Côte d'Ivoire, obtained enough water for personal consumption and livelihood purposes at upgraded water points
- ▶ about 10,000 people, including 7,000 military/security troops, were urged, through information sessions and workshops, to support IHL and neutral, impartial and independent humanitarian action
- ▶ IDPs in Côte d'Ivoire and people wounded during unrest in Burkina Faso met their urgent needs through timely aid by the Red Cross Society of Côte d'Ivoire and the Burkinabé Red Cross Society, respectively

EXPENDITURE (in KCHF)	
Protection	2,733
Assistance	5,316
Prevention	1,896
Cooperation with National Societies	1,270
General	-
<b>Total</b>	<b>11,215</b>

of which: Overheads 684

IMPLEMENTATION RATE	
Expenditure/yearly budget	<b>97%</b>

PERSONNEL	
Mobile staff	34
Resident staff (daily workers not included)	185

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Red Cross messages (RCMs)</b>	
RCMs collected	343
RCMs distributed	311
Phone calls facilitated between family members	1,937
People located (tracing cases closed positively)	40
People reunited with their families	10
<i>of whom unaccompanied minors/separated children</i>	9
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	14,849
Detainees visited and monitored individually	445
Number of visits carried out	204
Number of places of detention visited	60
<b>Restoring family links</b>	
RCMs collected	137
RCMs distributed	111
Phone calls made to families to inform them of the whereabouts of a detained relative	401

ASSISTANCE	2014 Targets (up to)	Achieved
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>		
<b>Economic security, water and habitat (in some cases provided within a protection or cooperation programme)<sup>1</sup></b>		
Food commodities	Beneficiaries 6,000	1,346
Essential household items	Beneficiaries 6,000	1,079
Productive inputs	Beneficiaries 36,000	570
Cash	Beneficiaries 900	
Work, services and training	Beneficiaries	13,668
Water and habitat activities	Beneficiaries 87,720	88,514
<b>Health</b>		
Health centres supported	Structures 5	6
<b>WOUNDED AND SICK</b>		
<b>Hospitals</b>		
Hospitals supported	Structures 2	2

1. Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.

## CONTEXT

In Côte d'Ivoire, the government took steps to calm the political situation. It transferred security detainees – including those held in connection with the 2011 post-electoral conflict – from temporary detention facilities to permanent places of detention, and granted other detainees provisional releases. The president pardoned several thousand detainees. However, tensions remained high owing to the forthcoming presidential elections and the trials of political figures; some detainees protested judicial proceedings through hunger strikes. Many prisons remained overcrowded.

The Ivorian truth and reconciliation commission shared its completed findings with the government. However, many weapon bearers had yet to be demobilized or reintegrated into the military, and arms still proliferated. In western Côte d'Ivoire, armed elements attacked villages, causing deaths and displacing hundreds of people.

Political protests across the region sometimes ended in violence. In Burkina Faso, hundreds were wounded – some suffered gunshot wounds – during clashes between security forces and protesters. A transitional government was put in place after the president left office. Some 30,000 Malian refugees reportedly remained in northern Burkina Faso, putting pressure on scarce resources. Thousands of Ivorian refugees remained in Ghana.

No cases of Ebola were reported in the five countries covered.

## ICRC ACTION AND RESULTS

The ICRC, with the region's National Societies, pursued efforts to help vulnerable people recover from past conflict or withstand prolonged displacement. Malian refugees and communities hosting them in northern Burkina Faso, and vulnerable people in western Côte d'Ivoire, including IDPs, obtained sufficient water for their personal consumption and livelihood activities at upgraded water points. In these areas, with ICRC support: herders maintained their livestock's health and productivity through free vaccination services; widows supported their families more easily with income from small businesses; and returnees rebuilt/repared their homes. In western Côte d'Ivoire, people recovered from/protected themselves against illnesses through care in six ICRC-supported health structures. Those suffering psychological trauma, including in relation to the 2011 conflict and/or to sexual violence, could ease their distress through basic psychological care in these structures and with help from community support groups.

Families separated by armed conflict, detention or other circumstances restored/maintained contact through Movement family-links services. Hundreds of Malian refugees in Burkina Faso called/sent RCMs to their relatives in Mali. In Côte d'Ivoire, people received news of relatives who went missing during the 2011 conflict: unaccompanied minors located their families through poster and radio campaigns and tracing services; the national medico-legal institute, which assists in exhuming and identifying human remains in unmarked gravesites, drew on ICRC material/technical support. Families sent parcels to detained relatives.

Detainees throughout the region received visits from the ICRC, conducted according to its standard procedures. People held in connection with past conflict, political unrest, incidents of violence in western Côte d'Ivoire, and other security reasons were paid special attention. Confidential feedback, based on these visits,

helped the penitentiary authorities improve detainee treatment and living conditions. Ivorian penitentiary authorities drew on ICRC technical expertise to make system-wide improvements to prison services, notably by: redefining minimum penitentiary standards; incorporating health care for detainees in national health policies; and organizing workshops that facilitated coordination and the sharing of best practices between prison directors and health and other penitentiary staff. Malnourished/sick inmates at selected prisons, identified through an ICRC-supported monitoring system, recovered their health more easily with ICRC-provided food supplements and medicines. Inmates at Burkinabé, Ivorian and Togolese prisons had better living conditions and better access to clean water after upgrades to water/sanitation infrastructure and ventilation systems carried out with the ICRC's direct support.

The region's authorities and military/security commands, the ICRC and other parties concerned maintained dialogue on pressing issues: allegations of abuse, the treatment of detainees, and IHL ratification/implementation. The authorities, aided by ICRC technical expertise, advanced ratification of weapon-related treaties; thousands of military/security officers, students and members of civil society added to their knowledge of IHL through information sessions. In line with the goals of the Health Care in Danger project, troops in western Côte d'Ivoire were reminded of their responsibility to facilitate access to health care; people were also informed of the protection due to medical personnel during armed conflict.

National Societies, particularly the Burkinabé Red Cross Society and the Red Cross Society of Côte d'Ivoire, were key partners in implementing the activities mentioned above, and strengthened their capacities with ICRC help. In addition, they responded to emergencies, notably: in Burkina Faso, people wounded during protests had on-site treatment or were evacuated to hospital by volunteers; in Côte d'Ivoire, people were briefed on methods for preventing the spread of Ebola fever.

Coordination with government bodies, Movement partners, UN agencies and other humanitarian organizations helped maximize impact and avoid duplication.

### CIVILIANS

In western Côte d'Ivoire, people reported abuses, including sexual violence, to the ICRC. These allegations – related to roadblocks hindering access to health care, attacks on villages, and military operations, for example – were shared with parties concerned to prevent recurrence (see also *Actors of influence*). Coordination with UN agencies and the Red Cross Society of Côte d'Ivoire ensured better monitoring of communities.

### Conflict-affected minors in Côte d'Ivoire and Malian refugees restore contact with relatives

The region's National Societies reinforced their capacities with ICRC training and supervision. All five enhanced, through a regional workshop, their family-links services linked to natural disasters and migration.

In Burkina Faso, the National Society extended its network with ICRC logistical/technical support and carried out family-links activities with the ICRC. In this way, some 1,900 refugees in Burkina Faso phoned or sent RCMs to their relatives in Mali. In the wake of protests, National Society volunteers helped over 40 people locate their companions and 9 children rejoin their families.

CIVILIANS	BURKINA FASO	CÔTE D'IVOIRE	GHANA	TOGO
<b>Red Cross messages (RCMs)</b>				
RCMs collected	171	168		4
<i>including from UAMs/SCs*</i>	55	18		
RCMs distributed	102	206		3
<i>including from UAMs/SCs*</i>	13	14		
Phone calls facilitated between family members	1,936	1		
Names published in the media		18		
Names published on the ICRC family-links website		21		
<b>Reunifications, transfers and repatriations</b>				
People reunited with their families		10		
<i>including people registered by another delegation</i>		10		
<b>Tracing requests, including cases of missing persons</b>				
People for whom a tracing request was newly registered	13	64		3
<i>of whom women</i>	4	21		
<i>of whom minors at the time of disappearance - girls</i>	1	14		
<i>of whom minors at the time of disappearance - boys</i>	2	12		1
<i>including people for whom tracing requests were registered by another delegation</i>		25		
People located (tracing cases closed positively)	24	16		
<i>including people for whom tracing requests were registered by another delegation</i>		6		
Tracing cases still being handled at the end of the reporting period (people)	77	160		4
<i>of whom women</i>	11	26		
<i>of whom minors at the time of disappearance - girls</i>	3	21		
<i>of whom minors at the time of disappearance - boys</i>	2	15		1
<i>including people for whom tracing requests were registered by another delegation</i>		35		
<b>UAMs/SCs*, including unaccompanied demobilized child soldiers</b>				
UAMs/SCs newly registered by the ICRC/National Society	29	1		
<i>of whom girls</i>	15			
UAMs/SCs reunited with their families by the ICRC/National Society		9		
<i>of whom girls</i>		5		
including UAMs/SCs registered by another delegation		9		
UAM/SC cases still being handled at the end of the reporting period	17	2	7	1
<i>of whom girls</i>	10	1	2	
<b>Documents</b>				
Official documents relayed between family members across borders/front lines		2		

\* Unaccompanied minors/separated children

CIVILIANS		BURKINA FASO	CÔTE D'IVOIRE
<b>Economic security, water and habitat<sup>1</sup></b>			
Food commodities	Beneficiaries	746	600
	<i>of whom IDPs</i>		600
Essential household items	Beneficiaries	746	333
Productive inputs	Beneficiaries	570	
Work, services and training	Beneficiaries	13,668	
Water and habitat activities	Beneficiaries	8,110	80,404
	<i>of whom IDPs</i>		28,197
<b>Health</b>			
Health centres supported	Structures	2	6
Average catchment population		230,892	
Consultations	Patients	66,434	
	<i>of which curative</i>	49,390	
	<i>of which ante/post-natal</i>	12,272	
Immunizations	Doses	130,202	
	<i>of which for children aged five or under</i>	125,946	
Referrals to a second level of care	Patients	638	
Health education	Sessions	123	

1. Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.

In Côte d'Ivoire, members of some families continued to use National Society/ICRC family-links services to maintain/restore contact with each other or for news of relatives missing since the 2011 conflict. Some unaccompanied minors located their families: through a poster campaign, a radio campaign and tracing services; unresolved cases were put on the family-links website (familylinks.icrc.org). However, reunifications had to be put on hold because of the Ebola epidemic (see *Liberia*) and the government's temporary suspension of repatriations. In the west, following attacks on villages, IDPs and those who fled to Liberia phoned/sent RCMs to their families.

The medico-legal institute in Côte d'Ivoire maintained – with ICRC material/technical support – its efforts to exhume and identify the remains of people who died during the 2011 conflict; one member of its staff supplemented his training in 2013 with skills learnt at a regional workshop on managing human remains (see *Nigeria*). Based on the findings of a needs assessment, the ICRC urged the authorities to provide assistance to families of missing people (see *Actors of influence*).

### **Refugees in Burkina Faso and vulnerable people in Côte d'Ivoire improve their living conditions**

In northern Burkina Faso, some 2,280 herding households (13,668 people), including Malian refugees, maintained/boosted the health and productivity of nearly 370,000 of their livestock through free vaccination services provided by livestock authorities, the National Society and the ICRC. These people and others benefited from improved infrastructure: roughly 6,500 people had access to water for themselves and their livestock, and some 900 made use of latrines and showers upgraded/constructed by the National Society/ICRC; over 1,600 were also encouraged to practice good hygiene through information sessions. Such efforts helped reduce pressure on resources and the risk of disease for people and their livestock. However, administrative constraints greatly limited planned activities, as did some security constraints following political instability.

In western Côte d'Ivoire, nearly 16,200 people in rural areas, including IDPs and families hosting them, obtained clean water at water points constructed, upgraded or chlorinated by the ICRC and maintained by ICRC-supported water committees. These people and others – some 64,200 in total – were encouraged to apply good hygiene practices and water treatment techniques at information sessions conducted with the National Society.

Conflict-affected people eased their recovery with ICRC help: some 1,500 returning refugees rebuilt/repared their homes with ICRC-provided roofing materials; and 120 widows supplemented their income through small businesses established with cash grants and management training, which helped them support their households (720 people).

### **People in western Côte d'Ivoire cope with common illnesses and psychological distress**

People protected themselves or recovered from illnesses, thanks to improved preventive and curative care in four health centres and two hospitals provided by the ICRC with medical supplies and supervision, including in applying Ebola-prevention measures. In the areas covered by the four community health centres, 50,000 young children and pregnant women were vaccinated by local ICRC-supported health teams. Patients needing specialized treatment travelled to more advanced facilities with ICRC help. A fifth ICRC-supported health centre made preparations to begin

serving people in isolated areas in northern Bloléquin that were underserved by health services.

With ICRC supervision and technical support, staff in the six abovementioned structures integrated mental health into their consultations. Thus, 130 patients eased their emotional distress – arising from post-conflict stress or violence, including sexual violence – through basic psychological care and/or were referred to specialized institutions. Five communities also set up psychosocial support groups with ICRC help, giving these people the opportunity to share their experiences with peers in similar positions. Over 16,000 people in 14 villages were encouraged to refer potential patients to the abovementioned services or other available care through group and door-to-door sessions by community workers.

### **People wounded during protests and attacks receive aid promptly from National Societies**

In western Côte d'Ivoire, following attacks on their villages, over 2,170 IDPs from Ancien Prozi and Fetai sheltered in a camp set up with the French Red Cross and the Ivorian National Society. There, they maintained their hygiene thanks to tents, showers and latrines installed by the ICRC. Some also used ICRC material assistance to cope with their difficult situation: 600 IDPs received food, and 45 households (270 people) were given food and household essentials. A dozen households (63 people) fleeing violence in the Central African Republic set up temporary shelters with household essentials.

In Burkina Faso, nearly 350 people wounded during protests were treated on site by the Burkinabé Red Cross; about 50 of them were evacuated to hospital. In Ouagadougou, volunteers made use of ICRC vehicles and communication equipment. The National Society and two referral hospitals drew on ICRC supplies to maintain their medical stocks. In the north, some 70 returnee households (750 people) who had fled intercommunal violence met their urgent food and shelter needs with food rations and household essentials from the National Society.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **Security detainees in Côte d'Ivoire improve their situation following ICRC feedback to the authorities**

Some 14,850 detainees throughout the region received visits from the ICRC, conducted according to its standard procedures. Nearly 450 security detainees and vulnerable inmates were monitored individually. In Côte d'Ivoire, they included: people in solitary confinement; those held in connection with the 2011 conflict and with attacks in the west; people extradited from Liberia; and others held by intelligence services, the military and the police/*gendarmérie*. People detained in Togo in connection with the 2009 coup attempt or market fires in 2013 were also visited. In Burkina Faso, soldiers detained for alleged participation in the 2011 mutiny attempt, and with the 2013 attack on the presidential palace, received visits; the ICRC was granted access to people arrested during protests in 2014.

Detainees made use of the ICRC's family-links services to contact their relatives; some received parcels from their families. Foreign detainees notified their consular representatives of their situation.

The authorities drew on the ICRC's confidential feedback to improve detainees' treatment and living conditions. In Côte d'Ivoire, this contributed to changes in the situation of security detainees (see *Context*). Staff were also briefed on medical ethics applicable to people on hunger strike.

## Ivorian penitentiary authorities strive to improve and standardize penitentiary services

Ivorian penitentiary authorities and the Health and Justice Ministries drew on ICRC expertise to make system-wide improvements to prison services, notably by standardizing the prison menu and re-defining minimum standards for penitentiary infrastructure and equipment. A special committee began to revise the penitentiary health information system with a view to incorporating it in the national system; the ICRC provided technical advice. At workshops organized by the Health and Justice Ministries, the penitentiary authorities and the ICRC, prison directors and ministry officials shared best practices in providing food and health care, maintaining prison infrastructure and planning the 2015 budget; the workshops also helped some 30 prison health personnel coordinate their efforts.

The penitentiary authorities, with ICRC help, maintained a system for monitoring the food supply chain and detainees' nutritional status. Over 800 detainees found to be acutely malnourished following body mass index checks benefited from therapeutic and supplementary feeding programmes. Around 1,000 inmates were treated for vitamin-deficiency illnesses; another 2,200 inmates were given vitamin/mineral supplements. Detainees also recovered from other illnesses or injuries through care in infirmaries supported by the ICRC with ad hoc technical advice and medical supplies; some 20 had hospital treatment.

Nearly 8,400 detainees improved their living condition using ICRC-provided items, such as sleeping mats, cups, plates and hygiene items; some also made use of the books and other recreational materials provided. Over 11,500 detainees had more hygienic living conditions after infrastructural upgrades, fumigation campaigns and measures taken by hygiene committees; the ICRC provided support for these efforts. Upgrades delayed by the rains will be completed in 2015.

In Burkina Faso, nearly 730 detainees at the Ouagadougou prison had better access to fresh air after ventilation systems were upgraded; at the military prison, ICRC-supported upgrades by the authorities ensured that inmates were better protected from the sun when they went outdoors. The authorities requested and received the ICRC's assessment of a new high-security prison. ICRC-supplied medical materials were used to treat injuries for several detainees. In Togo, around 2,420 detainees at the Lomé prison had better access to clean water after the completion of upgrades put off since 2013.

## ACTORS OF INFLUENCE

### Over 7,000 officers further their understanding of IHL and human rights norms

Some 1,700 military officers and 800 among the *gendarmérie* in Côte d'Ivoire, and 2,500 military and 1,200 security officers in Burkina Faso and Togo reinforced their knowledge of IHL through information sessions and advanced IHL courses in San Remo, Italy for three senior officers; personnel deploying abroad were briefed on provisions applicable to peacekeeping. Troops stationed in western Côte d'Ivoire, particularly those manning roadblocks, were reminded of their responsibility to facilitate access to health care. Nearly 800 Ivorian and 370 Togolese police officers learnt more about international norms on the use of force. Troops were also encouraged to facilitate ICRC action in Côte d'Ivoire, Guinea-Bissau, Mali, Sudan and elsewhere.

Some 60 Beninese, Burkinabé, Ivorian and Togolese military IHL instructors participated in train-the-trainer workshops; one Burkinabé IHL instructor attended an advanced course in France, thereby enlarging regional capacity to teach student officers. The Ivorian military reviewed its IHL teaching programme with help from an ICRC assessment of its training institutions.

PEOPLE DEPRIVED OF THEIR FREEDOM	BURKINA FASO	CÔTE D'IVOIRE	TOGO
<b>ICRC visits</b>			
Detainees visited	8	12,144	2,697
<i>of whom women</i>		324	116
<i>of whom minors</i>		315	1
Detainees visited and monitored individually	8	419	18
<i>of whom women</i>		7	
<i>of whom boys</i>		5	
Detainees newly registered	7	137	4
<i>of whom women</i>		2	
<i>of whom boys</i>		2	
Number of visits carried out	6	188	10
Number of places of detention visited	3	49	8
<b>Restoring family links</b>			
RCMs collected		135	2
RCMs distributed		110	1
Phone calls made to families to inform them of the whereabouts of a detained relative		401	

PEOPLE DEPRIVED OF THEIR FREEDOM	BURKINA FASO	CÔTE D'IVOIRE	TOGO
<b>Economic security, water and habitat</b>			
Food commodities	Beneficiaries	540	
Essential household items <sup>1</sup>	Beneficiaries	4,009	
Water and habitat activities	Beneficiaries	726	2,423
<b>Health</b>			
Number of visits carried out by health staff		165	
Number of places of detention visited by health staff		35	

1. Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.

### **Ivorian medical personnel learn more about the protection due to them during armed conflict**

People capable of facilitating humanitarian action, or of encouraging others to do so, gained a better grasp of humanitarian principles and the Movement's neutral, impartial and independent approach through information sessions, regular meetings and regional events (see *Dakar*). Over 900 representatives of civil society – including members of faith-based NGOs, local authorities, armed groups and youth groups – were briefed on the Movement's activities and the use of its emblems. Around 1,000 students of law or political science discussed IHL topics at similar sessions; some students at an Ivorian university furthered their IHL research using ICRC-provided reference materials.

During an ICRC-organized workshop in Côte d'Ivoire, 30 medical professionals, legislators, military/security officers and humanitarian workers discussed issues covered by the Health Care in Danger project and exchanged best practices in ensuring the protection of health services during armed conflict. This information became more widely available after the distribution of 5,000 copies of a document outlining best practices for medical staff in uncertain security conditions; the document was prepared in 2013 and printed in 2014 by the Ivorian Order of Physicians with ICRC support.

The media helped broaden support for the Movement by covering assistance activities and events commemorating Movement milestones. In Côte d'Ivoire, the media, via radio shows in particular, helped promote family-links services and the ICRC's mental-health programme (see *Civilians*) to people in remote areas. Journalists were urged to report accurately on humanitarian matters at two ICRC-organized workshops.

### **State authorities advance IHL implementation, with Burkina Faso ratifying the Arms Trade Treaty**

The region's authorities made use of ICRC expertise in ratifying IHL and weapon-related treaties – such as the Arms Trade Treaty and a regional convention on small arms – and in incorporating them in domestic legislation. Burkina Faso authorities ratified the Arms Trade Treaty, reviewed IHL provisions in the draft penal code, and sent officials from the Justice Ministry and other bodies involved in arms regulation to a regional workshop (see *Nigeria*). The Ivorian authorities composed a draft bill on the protection of the emblem, and considered including families of the missing in another bill that provided compensation for victims of armed conflict. The region's authorities and the ICRC also discussed issues of concern for the organization, particularly the proper treatment of detainees.

With ICRC technical support, State bodies boosted their capacity to facilitate IHL ratification/implementation. Following briefings on IHL, new members of Togo's national IHL committee assumed their duties more easily, and Ivorian parliamentarians and the Burkina Faso national IHL committee reinforced their IHL expertise. A representative of the Ivorian Justice Ministry attended an experts' workshop on issues covered by the Health Care in Danger project (see *Brussels*).

At a conference abroad, State representatives discussed good practices regarding private military/security companies (see *Dakar*).

### **RED CROSS AND RED CRESCENT MOVEMENT**

The region's National Societies, with ICRC support, increased their capacities to provide assistance, restore family links and respond to emergencies. National Society volunteers from across Africa honed their first-aid skills at a workshop in Burkina Faso organized with ICRC backing. The Burkina Faso and Ivorian National Societies conducted joint activities with the ICRC, and drew on its support to respond to incidents of violence (see *Civilians*). The Togolese Red Cross was on hand at political protests and updated its contingency plan for the elections in Togo in 2015.

All five National Societies fostered support for the Movement and stimulated interest in voluntary service among the public through events linked to important Movement occasions, the Burkina Faso, Ivorian and Togolese National Societies drawing on ICRC technical support. The Red Cross Society of Côte d'Ivoire raised public awareness of health risks connected to the Ebola epidemic.

The Benin Red Cross carried out structural reforms and appointed new leadership.

MAIN FIGURES AND INDICATORS: PROTECTION		Total			
<b>CIVILIANS (residents, IDPs, returnees, etc.)<sup>1</sup></b>					
<b>Red Cross messages (RCMs)</b>			<b>UAMs/SCs*</b>		
RCMs collected		343	73		
RCMs distributed		311	27		
Phone calls facilitated between family members		1,937			
Names published in the media		18			
Names published on the ICRC family-links website		21			
<b>Reunifications, transfers and repatriations</b>					
People reunited with their families		10			
	<i>including people registered by another delegation</i>	10			
<b>Tracing requests, including cases of missing persons</b>			<b>Women</b>	<b>Girls</b>	<b>Boys</b>
People for whom a tracing request was newly registered		80	25	15	15
	<i>including people for whom tracing requests were registered by another delegation</i>	25			
People located (tracing cases closed positively)		40			
	<i>including people for whom tracing requests were registered by another delegation</i>	6			
Tracing cases still being handled at the end of the reporting period (people)		241	37	24	18
	<i>including people for whom tracing requests were registered by another delegation</i>	35			
<b>UAMs/SCs*, including unaccompanied demobilized child soldiers</b>			<b>Girls</b>		<b>Demobilized children</b>
UAMs/SCs newly registered by the ICRC/National Society		30	15		
UAMs/SCs reunited with their families by the ICRC/National Society		9	5		
	<i>including UAMs/SCs registered by another delegation</i>	9			
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period		27	13		
<b>Documents</b>					
Official documents relayed between family members across borders/front lines		2			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)<sup>2</sup></b>					
<b>ICRC visits</b>			<b>Women</b>	<b>Minors</b>	
Detainees visited		14,849	440	316	
			<b>Women</b>	<b>Girls</b>	<b>Boys</b>
Detainees visited and monitored individually		445	7		5
Detainees newly registered		148	2		2
Number of visits carried out		204			
Number of places of detention visited		60			
<b>Restoring family links</b>					
RCMs collected		137			
RCMs distributed		111			
Phone calls made to families to inform them of the whereabouts of a detained relative		401			

\* Unaccompanied minors/separated children

1. Burkina Faso, Côte d'Ivoire, Ghana, Togo

2. Burkina Faso, Côte d'Ivoire, Togo

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security, water and habitat (in some cases provided within a protection or cooperation programme)<sup>1,2</sup></b>				
Food commodities	Beneficiaries	1,346	23%	36%
	<i>of whom IDPs</i>	600		
Essential household items	Beneficiaries	1,079	8%	12%
Productive inputs	Beneficiaries	570	80%	20%
Work, services and training	Beneficiaries	13,668	30%	50%
Water and habitat activities	Beneficiaries	88,514	30%	40%
	<i>of whom IDPs</i>	28,197		
<b>Health<sup>4</sup></b>				
Health centres supported	Structures	6		
Average catchment population		230,892		
Consultations	Patients	66,434		
	<i>of which curative</i>		11,187	38,203
	<i>of which ante/post-natal</i>		12,272	
Immunizations	Doses	130,202		
	<i>of which for children aged five or under</i>	125,946		
Referrals to a second level of care	Patients	638		
Health education	Sessions	123		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)<sup>3</sup></b>				
<b>Economic security, water and habitat (in some cases provided within a protection programme)</b>				
Food commodities	Beneficiaries	540		
Essential household items <sup>1</sup>	Beneficiaries	4,009		
Water and habitat activities	Beneficiaries	14,665		
<b>Health<sup>4</sup></b>				
Number of visits carried out by health staff		165		
Number of places of detention visited by health staff		35		
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported <sup>5</sup>	Structures	2		

1. Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.

2. Burkina Faso, Côte d'Ivoire

3. Burkina Faso, Côte d'Ivoire, Togo

4. Côte d'Ivoire

5. Burkina Faso