



Côte d'Ivoire

Claude Adjehi/CARE



Country Snapshot

Population:	20.6 million
Life expectancy at birth:	57 years
Adult literacy rate:	49%
Access to improved water source:	81%
GDP per capita (PPP)*:	US\$1,690
Infant mortality rate:	81 per 1,000 live births
Maternal mortality rate:	810 per 100,000 live births
HIV prevalence:	3.9%

Sources: UNICEF State of the World's Children Report 2010, *UNDP Human Development Report 2009

Program Overview CARE International began work in Côte d'Ivoire in 2000. The office was originally established to support the regional HIV/AIDS program, but CARE Côte d'Ivoire quickly changed its focus to the problems caused by the 2002 sociopolitical crisis. Although not at war, the country remains unstable and divided in two: the central, north, and west parts being under the control of the rebel group New Forces, and the south part being administrated by the Ivoirian government. CARE assists those people displaced by the civil unrest, who lack food and potable water in some regions, and face serious health issues in regions where formal health systems have essentially crumbled. CARE concentrates on regions deprived of basic public services with projects throughout the country in urban sanitation, rehabilitation, and social cohesion. CARE CI focuses programs on three sectors: health (malaria, HIV/AIDS); reconstruction (of destroyed basic infrastructure and fragile institutions); and governance (community development, social cohesion, microfinance, livelihood protection).

Health

Project CARA is CARE's project to prevent HIV/AIDS in conflict zones, and is part of CARE's broader emergency HIV/AIDS program. CARE concentrates on the areas under New Forces control because of their increased vulnerability following the crisis of 2002, but more recently has undertaken initiatives in the south as well. Through the project, now in its second phase, CARE cooperates with several local partner organizations in order to: increase availability and use of condoms for the sexually active population; improve understanding of HIV/AIDS and raise awareness of the infection in order to reduce its spread; build capacity of local aid agencies fighting against HIV/AIDS; and improve the quality of care for those people infected by HIV/AIDS. The project targets orphans, vulnerable youth, people infected with HIV, and almost 450,000 young girls and women.

In November 2009, CARE Côte d'Ivoire and the National Program for the Fight Against Malaria (PNLP), began a nationwide project for the prevention and treatment of malaria, which will save thousands of lives with special attention to pregnant

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women and children under five. This project aims to cover all 83 health districts in the country, distributing nearly nine million insecticide-treated mosquito nets, providing malaria prevention during pregnancy, and improving access to malaria treatment for the entire population.

Reconstruction

In order to rehabilitate and reintegrate ex-combatants, at-risk youth, and those involved in the conflict, CARE is implementing the Post-conflict Assistance Project. Two agencies were created to carry out the disarmament, demobilization, and reintegration of former combatants to enable them to return to civil life.

CARE contributes to these agencies' efforts through a program in Bouaké, Boundoukou, Duékoué, Man, and Korhogo. The reintegration program, begun in April 2009, aims to improve the quality of life of around 941,000 people through a two-year livelihoods protection program and the socio-economic reintegration of 2,240 at-risk youth, ex-combatants, and others associated with the conflict. CARE has put in place a community development mechanism based on experience gained from the 2008 GECOSAM sanitation project so that those involved in the conflict can be employed and trained in community maintenance and sanitation.

CARE carried out its social cohesion project in Bouaké, Sakassou and Béoumi in order to promote community-based reconciliation for farmers and herders in the region. Following several successful property conflict management interventions and the facilitation of the return of displaced populations, CARE expanded its activity. In October 2010, CARE completed a one-year social cohesion project to establish and strengthen trust between the indigenous farmers and the migrant herdsman in the centre of the country. CARE put in place conflict-resolution committees composed of members of belligerent communities and provided them with training and logistical support to bring peace to these two frequently conflicting groups.

Good Governance and Community Development

CARE's POWER (Promoting Opportunities for Women's Empowerment in Rural Areas) project has supported 476 women's associations, which promote solidarity and weekly savings plans. These village savings and loans associations are composed of 25 to 30 members who loan money on interest to other members of the group, while putting in place a social fund in order to give credit without interest in case of emergency. Members have earned around 68 million francs CFA (137,000 USD), which are used to invest in income-generating activities (sales of local products and produce, etc.). Eventually, these funds will give them access to external sources of credit. During weekly meetings of these groups, two members educate the group about prevention of sexually transmitted infections and HIV/AIDS.

In 10 cacao-producing communities in San Pedro and Daloa, CARE Côte d'Ivoire has implemented a project to improve access to basic social services (e.g. health, potable water, education) as well as promote human rights in the fight against the worst forms of child labor. Several women's savings and loan associations will be established, and the communities will participate in the construction of three wells and rehabilitation of 10 schoolrooms. The objective is to improve the quality of life in these 10 communities as part of CARE's strategy to fight poverty and injustice but also to ensure the well-being of the cacao workers and their families. Through several coordinated activities and initiatives (e.g., the construction of socio-economic infrastructure, strengthening of community systems) CARE aims to support a sustainable community development.

Major Donors

The U.S. President's Emergency Plan for AIDS Relief (PEPFAR), World Bank, Cargill, the Global Fund.

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