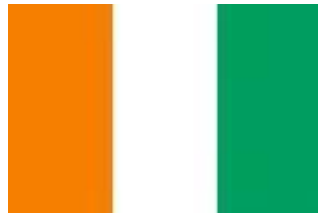


## 12. Country profile: Côte d'Ivoire



### 1. Development profile

Following independence in 1960, Houphouët-Boigny served as president for the next three decades and during the 1990s, Côte d'Ivoire was one of Africa's most stable and wealthy nations. His successor was overthrown by a coup in 1999 and civil war ensued from 2002 to 2003, which resulted in the country being split in two parts, divided by the 'green line'. The southern region is controlled by the government, and the northern regions controlled by the 'Forces Nouvelles', a coalition of rebel groups<sup>1</sup>. During the civil war, socioeconomic conditions rapidly deteriorated: at least 700,000 people were displaced; the percentage of the population living under the poverty line increased by 10 percent; and schools in the northern regions ceased operation for two years.<sup>2</sup> A peace agreement was reached in January 2003, but there was a resurgence of protests and violence in November 2004. The situation became increasingly perilous when scores of ex-rebel leaders who had been integrated into the government resigned. A second round of peace negotiations was initiated by Thabo Mbeki, the President of South Africa, and the situation was gradually ameliorated. Elections were planned (after being delayed six times) for March 2010, but recent protests and disagreements led to the disbandment of the government and the electoral commission. A new government has been established and protests have been called off.<sup>3</sup>

Côte d'Ivoire's ranking on the Human Development Index has steadily declined since the 1980s. The civil war increased the poverty rate from 38.2 percent to 49 percent; caused massive population displacement; increased unemployment; and led to a drastic deterioration in access to social services.<sup>4</sup> Food security is an increasingly acute problem, with an estimated 33 percent of children under five suffering from moderate malnutrition and a further 15 percent suffering from severe malnutrition. Under-five and infant mortality rates are some of the highest in the world.<sup>5</sup> HIV prevalence rates have

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<sup>1</sup> WFP. (2009, October.) *Assistance to Populations Affected by the Cote d'Ivoire Protracted Crisis*. Retrieved from World Food Programme: <http://www.wfp.org/content/assistance-populations-affected-c%C3%B4te-d%E2%80%99ivoire-protracted-crisis>

<sup>2</sup> World Bank. (2009, September). *Cote d'Ivoire: Country Brief*. Retrieved from World Bank: <http://web.worldbank.org/WBSITE/EXTERNAL/COUNTRIES/AFRICAEXT/CDIVOIREEXTN/0,,menuPK:382617~pagePK:141132~piPK:141107~theSitePK:382607,00.html>

<sup>3</sup> IRIN. (2010, March). *Cote d'Ivoire: Milestones on the Road of Crisis*. Retrieved from Integrated Regional Information Networks: <http://www.irinnews.org/Report.aspx?ReportId=88295>

<sup>4</sup> World Bank (2009).

<sup>5</sup> UNICEF. (2009, August). *Cote d'Ivoire*. Retrieved from United Nations Children's Fund: <http://www.unicef.org/infobycountry/cotedivoire.html>

also increased from 2.2 percent in 2002 to 4.7 percent in 2008. At least 500,000 children were not able to attend school during the crisis, and the education system “is still weak due to lack of accredited teachers and poor infrastructure”<sup>6</sup>. It is tragically estimated that at least 3,000 children are being used as soldiers.<sup>7</sup> Relatively high per capita income has not translated into significantly higher standards of living than its neighbouring countries. Areas that were controlled by rebel forces during the war are in especially dire straits. In many northern towns, there are no banks, forcing people to travel long distances to get paid or simply to move to other parts of the country. Violent crime is a serious problem in rural and urban areas, and as recently as 2008, clashes between the government and rebels have made many people afraid to express their opinions of the social situation in the country.

The civil war also had disastrous implications for the Ivoirian economy. Real GDP growth was -0.4 percent over the period from 2000 to 2006, which is significantly below the 4.1 percent average for the rest of the West African Economic and Monetary Union (UEMOA) as well as well below the sub-Saharan average of 4.9 percent.<sup>8</sup> As concerns about stability grew in the international community, external investments decreased and private sector activity was halted. When the nation was partitioned, financial, transportation and other infrastructure was paralyzed. The socioeconomic situation is beginning to recover, and growth – bolstered by construction, investor confidence, successful elections and the consolidation of the peace process – was estimated at 3.7 percent in 2009.<sup>9</sup>

Côte d’Ivoire now boasts the largest economy in the West African Economic and Monetary Union, with 36 percent of the organisation’s GDP, and exerts great influence over the regional economy, especially in terms of its “role in transit trade for landlocked neighbouring countries”.<sup>10</sup> The nation is also home to a large number of immigrants (who make up an estimated 26 percent of the population), and thus provides an important source of worker’s remittances.<sup>11</sup>

Côte d’Ivoire began producing cocoa in the colonial era and has since become the largest exporter of cocoa in the world. Despite this dependence on its main cash crop, “it has a relatively diversified agricultural economy as well as significant manufacturing and services sectors”.<sup>12</sup> Coffee, oil, gas and palm oil are also important exports. Agriculture remains the main source of employment, providing jobs for about 68 percent of the population.<sup>13</sup> However, poor infrastructure and a corrupt police force make the transportation and sale of agricultural goods difficult, and the lack of modernisation in the agricultural sector is inevitably leading to a decline in output relative to other nations.

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<sup>6</sup> WFP (2009).

<sup>7</sup> Ibid.

<sup>8</sup> World Bank (2009).

<sup>9</sup> Ibid.

<sup>10</sup> Ibid.

<sup>11</sup> Ibid.

<sup>12</sup> Ibid.

<sup>13</sup> CIA World Factbook. (2010, February). *Cote d’Ivoire*. Retrieved from United States Central Intelligence Agency: <https://www.cia.gov/library/publications/the-world-factbook/geos/iv.html>

Socioeconomic indicators <sup>14</sup>	
Population (millions)	20.59
GNI per capita, PPP (current USD)	1,580
GDP (current USD) (billions)	23.41
GDP composition by sector 2005 (%)	Agriculture -24 Industry- 25 Services- 51
GDP growth rate (%)	2.2
Percent below poverty line (%)	42
Inflation (%)	8.1
GINI index	48
Adult literacy rate (%)	51.3
Life expectancy (years)	58
Child dependency ratio	72.6
Elderly dependency ratio	7.0
HIV prevalence (%)	3.9
Overseas development aid per capita (current USD)	8.01
Net official development assistance (USD millions)	165
Remittances as % of GDP	0.92
2009 Human Development Index (HDI) ranking	163

## 2. Vulnerability analysis

### 2.1 External shocks

The 2008 global economic crisis had wide-ranging effects on the Ivoirian economy. Perhaps most notably, Ivoirians are extremely vulnerable to fluctuations in food and commodity prices, especially since about fifty percent of the population scrapes by on \$1.25 USD per day.<sup>15</sup> The rise in food prices in 2008, during which Côte d'Ivoire was in a programme with the IMF, led to violent demonstrations and a social crisis. In order to mediate the effects of the crisis, the government took urgent measures by reducing the value-added tax (VAT) from 18 percent to 9 percent and suspending customs duties on certain essential commodities from April to June 2008, which resulted in large income losses to the state of Côte d'Ivoire.<sup>16</sup>

<sup>14</sup> World Bank. (2010, September). *Country Profiles*. Retrieved from World Bank: <http://web.worldbank.org/WBSITE/EXTERNAL/DATASTATISTICS/0,,contentMDK:20535285~menuPK:1192694~pagePK:64133150~piPK:64133175~theSitePK:239419,00.html>

<sup>15</sup> Medilinks. (2009, December). *Cote d'Ivoire: Bridging the Aid Gap Post-Conflict*. Retrieved from Medilinks: <http://medilinkz.org/news/news2.asp?NewsID=29749>

<sup>16</sup> IMF. (2009, May). *Cote d'Ivoire: Poverty Reduction Strategy Paper*. Retrieved from International Monetary Fund: [planipolis.iiep.unesco.org/.../Cote%20Ivoire/Cote\\_dIvoire\\_prsp\\_2009.pdf](http://planipolis.iiep.unesco.org/.../Cote%20Ivoire/Cote_dIvoire_prsp_2009.pdf)

## **2.2 HIV/AIDS**

Côte d'Ivoire has the highest HIV prevalence rate in Western Africa, and “the deterioration of social and health conditions, due to the persisting crisis, likely contributed to the rise in HIV transmission”.<sup>17</sup> While it is estimated that nearly 190,000 people need anti-retroviral drugs, only 50,000 of them are currently receiving treatment. The crisis limited the government's ability to deal with the epidemic. Existing interventions are largely concentrated in major urban centres, namely Abidjan, and there is a shortage of health workers. The high cost of drugs is prohibitive, and many people remain untreated.<sup>18</sup>

## **2.3 Foreign aid and remittances**

Since the crisis ended, the nature of aid demand in the country has changed. While emergency aid is no longer necessary, humanitarian assistance remains vital to the welfare of much of the population. Several organisations that were providing aid have pulled out since the conflict ended. The Office for the Coordination of Humanitarian Affairs (OCHA) has pulled out of several regions, and many aid agencies are struggling to find funding. The global perception of Côte d'Ivoire is not congruent with the reality on the ground.<sup>19</sup>

## **2.4 Political instability**

The crisis caused significant population displacement and the estimated 800,000 citizens who were uprooted do not have consistent access to food sources or land.<sup>20</sup> The Northern provinces, which were held by rebel groups, are behind other areas of the country. Education ceased during the conflict and has not recovered. Teachers and government staff fled to the southern regions. It is estimated that four out of five children in the north are illiterate; the net enrolment rate for girls is only 21 percent, and four out of five women are illiterate.

The results of a survey conducted in 2008 revealed that the 2002 crisis has also had a negative outcome on the households' living conditions. Nearly half of the total population felt affected directly by the crisis, where 70.1 percent of them mentioned feeding problems and 28.4 percent said they lost their economic activity. Looking at income levels, the survey showed that 67.6 percent of the population suffered from salary reductions, compared to only 6.5 percent who received salary increments.<sup>21</sup>

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<sup>17</sup> WFP. (n.d.). *Cote d'Ivoire*. Retrieved from World Food Programme: <http://www.wfp.org/countries/c%3%B4te-divoire>

<sup>18</sup> WHO. (2005, December). *Cote d'Ivoire*. Retrieved from World Health Organization: <http://hivinsite.ucsf.edu/global?page=cr09-iv-00>

<sup>19</sup> Medilinks (2009).

<sup>20</sup> WFP (n.d.).

<sup>21</sup> IMF (2009).

### 3. Monitoring and evaluation

As identified in the Poverty Reduction Strategy Paper, the monitoring and evaluation system must meet the following conditions:

- It must have enough authority and legitimacy to efficiently interact with ministries who are responsible for planning, budgeting and data collection.
- It must be located in a strategic way to be close to decision making, data collection and processing channels.
- It must be placed under the authority of a ministry with full commitment to the PRSP.<sup>22</sup>

The main bodies of the monitoring and evaluation system are:

- The National Steering Committee (NSC), which is the decision-making body of the Poverty Reduction Strategy (PRS) institutional monitoring framework.
- The Permanent Technical Secretariat for monitoring the PRS (PTS-PRS), which is the technical operational body in charge of the monitoring and evaluation of implementation of the PRS and reports to the NSC.<sup>23</sup>
- The National Supervision Committee (CNS), which supervises the activities of PTS-PRS.

### 4. Social assistance programmes overview

\*All currency conversions are based on 17 February 2010 rates:

- 1 XOF = 0.00204 USD
- 1 EUR = 1.369 USD
- 1 GBP = 1.57161 USD.<sup>24</sup>

*Note:* the World Food Programme's "Protracted Relief and Recovery Operation (PRRO) 10672.0" consists of four components, described in the following four tables, which are designed to alleviate food insecurity: Relief (SO1), Food for Recovery (SO2), Nutritional and HIV/AIDS-related interventions (SO3), and Food for Education (SO4).

The project was planned for 18 months, reaching 981,000 beneficiaries at a total cost of \$41,239,517 USD, but was prolonged with an additional 6 months, with the budget increased to \$79,658,506 USD.

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<sup>22</sup> Ibid.

<sup>23</sup> Ibid.

<sup>24</sup> *Currency Converter*. (n.d.). Retrieved from OANDA: <http://www.oanda.com/currency/converter/>

Programme #3: in-kind transfer	<b>Programme name</b>	<b>Relief Operation (SO1)<sup>25</sup></b>
	<b>Programme overview</b>	<ul style="list-style-type: none"> <li>One of four components of the World Food Programme's "Protracted Relief and Recovery Operation (PRRO) 10672.0".</li> </ul>
	<b>Programme objective</b>	<ul style="list-style-type: none"> <li>To provide life-saving assistance through general food distributions to targeted beneficiaries who are critically food-insecure.</li> <li>To maintain the nutritional status of Internally Displaced People (IDP) and to decrease the food expenditure of the households.</li> </ul>
	<b>Programme components</b>	<ul style="list-style-type: none"> <li>General emergency distribution to IDPs and returned refugees in camps (until the closure of the camps in June 2008).</li> <li>General emergency distribution to resettled IDPs and returnee refugees during the lean season (three months).</li> </ul>
	<b>Programme duration</b>	1 July 2007 - December 2008 (August 2009).
	<b>Programme coverage</b>	48,177 beneficiaries.
	<b>Beneficiary determination process</b>	<ul style="list-style-type: none"> <li>The lean season food distribution focused in the West of the country on returnees recently resettled and in the rest of the country on peasants whose harvest was affected by bad weather and lack of food stocks (with preference for Returnees and poor households).</li> <li>Vulnerability criteria considered: <ul style="list-style-type: none"> <li>the conditions of beneficiaries (i.e. if they were IDPs returned to their villages).</li> <li>the state of harvest (i.e., if it had been affected by the climate).</li> </ul> </li> </ul>
	<b>Finance</b>	\$724,599 USD.
	<b>Programme barriers</b>	<ul style="list-style-type: none"> <li>The improvement of the country situation (i.e. the closure of IDP camps) and shortage in the project's food pipeline limited the number of activities implemented.</li> <li>In response to the reduced availability of resources, some activities were downsized or interrupted.</li> </ul>
	<b>Socioeconomic impacts</b>	<ul style="list-style-type: none"> <li>The nutritional status of the beneficiaries' returnee IDPs was maintained (even if the late deliveries reduced effectiveness).</li> <li>As a transient operation it was apparently successful, but limited to a smaller number of beneficiaries than planned.</li> </ul>

<sup>25</sup> Table drawn from WFP (2009).

Programme #4: in-kind transfer	<b>Programme name</b>	<b>Food For Recovery (SO2)<sup>26</sup></b>
	<b>Programme overview</b>	<ul style="list-style-type: none"> <li>The second of four components of the World Food Programme's "Protracted Relief and Recovery Operation (PRRO) 10672.0".</li> </ul>
	<b>Programme objective</b>	<ul style="list-style-type: none"> <li>To protect livelihoods, support rehabilitation of productive assets and enhance resilience to shocks.</li> </ul>
	<b>Programme components</b>	<ul style="list-style-type: none"> <li><b>Food for Agriculture (FFW):</b> Rehabilitation of secondary rural access roads, small bridges, irrigation systems and wells, the distribution of a WFP seed protection rations in complement to FAO seeds, tools and fertiliser.</li> <li><b>Literacy and Agriculture (FFT):</b> Literacy, food processing, food conservation techniques, marketing cash/food crop, and gender awareness (due to lack of resources this was only performed in a limited way and suspended).</li> </ul>
	<b>Programme duration</b>	<ul style="list-style-type: none"> <li>July 2007 - December 2008 (August 2009).</li> </ul>
	<b>Programme coverage</b>	<ul style="list-style-type: none"> <li>15,327 beneficiaries.</li> </ul>
	<b>Finance</b>	<ul style="list-style-type: none"> <li>\$2,338,131 USD.</li> </ul>
	<b>Administrative framework</b>	<ul style="list-style-type: none"> <li>The initiatives mobilise local professionals, engineers, and entrepreneurial resources.</li> <li>Project formulation and supervision was assured by the key funding agency, often ONUCI.</li> <li>Communities participated by being part of the identification of the activities, organising local labour and providing part of the raw materials.</li> </ul>
	<b>Monitoring and evaluation</b>	<ul style="list-style-type: none"> <li>The evaluation team examined the PRRO activities throughout the North and South zones, where all major partners, like the Government, NGOs and beneficiaries, were interviewed.</li> <li>The evaluation also addressed issues such as gender, partnership and protection.</li> </ul>
	<b>Programme barriers</b>	<ul style="list-style-type: none"> <li>The number of activities implemented was limited due to shortages and delays in the project's food pipeline and closure of IDP camps.</li> <li>The coordination of several partners often resulted in substantial delays in the interventions.</li> <li>The programme only reached 31 percent of the target demographic.</li> </ul>
	<b>Socioeconomic impacts</b>	<ul style="list-style-type: none"> <li>Rehabilitation of infrastructure in West and North-West regions. including bridges, wells and rural roads.</li> <li>Vocational training helped war-affected children to reintegrate in the job market.</li> </ul>

<sup>26</sup> Ibid.

Programme #2: in-kind transfer	<b>Programme name</b>	<b>Nutrition and HIV &amp; AIDS Interventions (SO3)<sup>27</sup></b>
	<b>Programme overview</b>	<ul style="list-style-type: none"> <li>▪ The third of four components of the World Food Programme's "Protracted Relief and Recovery Operation (PRRO) 10672.0".</li> <li>▪ WFP provides food support in combination with ART.</li> </ul>
	<b>Programme objective</b>	<ul style="list-style-type: none"> <li>▪ To support the improved nutrition and health status of children, pregnant and lactating women, people living with HIV/AIDS and other vulnerable groups.</li> </ul>
	<b>Programme components</b>	<ul style="list-style-type: none"> <li>▪ Provides support to: <ul style="list-style-type: none"> <li>○ Moderately malnourished children in <i>supplementary feeding centres</i>.</li> <li>○ Caretakers of severely malnourished children in <i>therapeutic feeding centres</i>.</li> <li>○ Pregnant and lactating women in <i>maternal and children health centres</i>.</li> </ul> </li> <li>▪ Provides: <ul style="list-style-type: none"> <li>○ Supplementary feeding programmes in areas with high malnutrition rates.</li> <li>○ Take-home rations to people diagnosed with malnutrition.</li> <li>○ Take-home rations for pregnant women from month six to six months after the child is born.</li> </ul> </li> <li>▪ Delivers HIV prevention and nutrition rehabilitation assistance to People living with HIV and AIDS, Prevention of Mother to Child Transmission and OVC. <ul style="list-style-type: none"> <li>○ Delivers HIV prevention and nutrition rehabilitation adherence.</li> <li>○ Assists vulnerable people living with HIV/AIDS with a family ration for nine months or host families of HIV orphans for ten months.</li> <li>○ Awareness raising, risk reduction and prevention education has been incorporated.</li> <li>○ Assistance to pregnant and nursing HIV-positive mothers living in food insecure areas through Prevention of Mother-To-Child programmes.</li> </ul> </li> </ul>
	<b>Programme duration</b>	<ul style="list-style-type: none"> <li>▪ July 2007 to December 2008 (August 2009).</li> </ul>
	<b>Programme coverage</b>	<ul style="list-style-type: none"> <li>▪ 66,508 beneficiaries.</li> <li>▪ An estimated 190,000 people need anti-retroviral therapy (ART), but only 50,000 are receiving treatment.</li> <li>▪ Coverage for supplementary feeding of moderately malnourished children was higher than planned, at 9,434 instead of 6,000.</li> <li>▪ Coverage for caretakers of children in TFC and for mother and child health matched targets.</li> </ul>
	<b>Beneficiary determination process</b>	<ul style="list-style-type: none"> <li>▪ Prioritised HIV-affected people living in food insecure areas and in Abidjan outskirts.</li> <li>▪ Criteria for beneficiary selection for the PLWHA/ART programme: HIV test and food security index.</li> <li>▪ Targeted moderately malnourished children and pregnant and lactating women at risk of malnutrition, starting from the 6th month of pregnancy.</li> </ul>
	<b>Finance</b>	<ul style="list-style-type: none"> <li>▪ \$2,630,397 USD.</li> </ul>

<sup>27</sup> Ibid.



	<b>Administrative framework</b>	<ul style="list-style-type: none"> <li>▪ WFP and UNICEF collaborate with the <i>Programme National de Démobilisation, Désarmement et Réinsertion</i> and local and international NGOs.</li> <li>▪ The food is provided to implementing partners, who ensure food distribution to beneficiaries.</li> <li>▪ Nutrition aid is provided through supplementary feeding centres and mother and child health centres.</li> <li>▪ The project assisted mothers of children cared for by therapeutic feeding centres in hospitals or mobile clinics, which was managed by local and international NGOs along with the Ministry of Health.</li> </ul>
	<b>Legislative framework</b>	<ul style="list-style-type: none"> <li>▪ The 2006-2010 <i>National Strategic Plan for HIV and AIDS</i> made provision for an expanded access of HIV positive patients to ART.</li> </ul>
	<b>Programme barriers</b>	<ul style="list-style-type: none"> <li>▪ <b>Exclusion of the poorest:</b> The poorest might not be able to afford the ART treatment due to the cost but can still receive the WFP food aid.</li> <li>▪ <b>Negligent beneficiary selection:</b> Some implementing partners were more interested in meeting numerical targets than in assisting the truly moderately malnourished.</li> <li>▪ <b>Time duration:</b> Most implementing agencies were not aware of WFP standards for the duration of time for food assistance, resulting in the phasing out from food assistance was done according to partners' assessment of the general situation of the beneficiaries and not according to a specific standards or specific criteria. This led to some beneficiaries receiving food assistance for long periods of time.</li> <li>▪ <b>Difficulties in adherence:</b> Some caretakers struggled to adhere to the full-time treatment necessary for children healing from moderate malnutrition.</li> <li>▪ <b>Disrupted food delivery:</b> Disrupted food delivery undermined components of the project.</li> <li>▪ <b>Lack of resources and experience:</b> Several nutritional centres were not assisted by updated nutrition and health professional staff, which led to a recovery rate of beneficiaries that was just over the threshold.</li> </ul>
	<b>Socioeconomic impacts</b>	<ul style="list-style-type: none"> <li>▪ Food aid is improving the nutrition status of women and children, maintaining the nutritional status of the HIV/AIDS affected people, and encouraging host families to shelter OVCs and fostering OVC access to vocational training session.</li> </ul>

Programme #1: in-kind transfer	Programme name	<b>Food for Education (SO4)<sup>28</sup></b>
	Background	<ul style="list-style-type: none"> <li>▪ The last of four components of the World Food Programme's "Protracted Relief and Recovery Operation (PRRO) 10672.0".</li> <li>▪ Almost all primary teachers fled the Northern region after the 2002 crisis, which resulted in the education system in the North stopped for almost two years. The educational is still weak due to the lack of teachers but also due to poor infrastructures.</li> <li>▪ Net primary enrolment ration was estimated at 59 percent for male and 51 percent for female at the national level but only 26 and 31 percent in the Northern regions (MICS study 2006).</li> <li>▪ Illiteracy rates are 85-90 percent in the Northern rural areas, where four women out of five are illiterate.</li> </ul>
	Programme objective	<ul style="list-style-type: none"> <li>▪ Support access to primary education and reduce gender disparity. <ul style="list-style-type: none"> <li>○ Increase enrolment and attendance rates.</li> <li>○ Enhance retention.</li> <li>○ Narrow enrolment gap between boys and girls.</li> </ul> </li> </ul>
	Programme components	<ul style="list-style-type: none"> <li>▪ Hot meals served during lunch break in each school day of 2007/2008 to 580,000 children (about 27 percent of children enrolled in 2006/2007).</li> <li>▪ Food was to be provided to 3,600 volunteer teachers in the North where teachers were lacking in 2007-2008.</li> <li>▪ The project also funded de-worming of pupils, construction and use of improved energy cooking stoves by schools, and HIV/AIDS awareness courses to pupils.</li> </ul>
	Programme duration	<ul style="list-style-type: none"> <li>▪ 2007 to December 2008 (August 2009).</li> </ul>
	Programme coverage	<ul style="list-style-type: none"> <li>▪ The project provided food assistance to 3,013 primary schools, where 65% were located in the Northern regions.</li> <li>▪ The project supplied 80-90 percent of the canteens in public schools North of the Green line and less than 50 percent South of the line.</li> </ul>
	Finance	<ul style="list-style-type: none"> <li>▪ \$9,060,258 USD.</li> </ul>
	Administrative framework	<ul style="list-style-type: none"> <li>▪ Implemented by the <i>Direction nationale des cantines scolaires</i>.</li> </ul>
	Monitoring and evaluation	<ul style="list-style-type: none"> <li>▪ The evaluation team concentrated its analysis on a sample of visited schools.</li> <li>▪ The evaluation team is providing reliable data for examining and validating the project by specifying the number of both individual recipients and family members' beneficiaries of the food aid (family rations).</li> </ul>

<sup>28</sup> Ibid.

	<p><b>Programme barriers</b></p>	<ul style="list-style-type: none"> <li>▪ The take-home rations for girls (about 60,000) which originally were a part of the project were not implemented, due to lack of resources.</li> <li>▪ Some of the poorest children cannot attend school due to school fees.</li> <li>▪ Available resources were uneven to fully match the broad set of objectives.</li> <li>▪ The number of assisted beneficiaries was close to the goal of the project even though the level of achievement was unbalanced across activities.</li> <li>▪ Local procurement can contribute to contain the increased costs of commodities and transport, which hampered food procurement and delivery.</li> <li>▪ Demand for more food aid is expected, especially in the North where the development progress is slower, due to high rates of food insecurity.</li> <li>▪ In view of the project extension, a greater role of Implementing partners and beneficiaries in streamlining field activities is forecasted.</li> <li>▪ School enrolment data did not: <ul style="list-style-type: none"> <li>○ Show the distribution of pupils by grade.</li> <li>○ Allow comparison between assisted and non assisted schools and only permitted limited comparison between different periods in assisted schools.</li> </ul> </li> </ul>
	<p><b>Socioeconomic impacts</b></p>	<ul style="list-style-type: none"> <li>▪ The total enrolment grew by 19.3 percent between academic years 2006/2007 and 2007/2008 and by 13.6 percent between 2007/2008 and 2008/2009.</li> <li>▪ No substantial changes in the difference in enrolment growth by gender.</li> <li>▪ The theoretical probability of a girl to reach the final primary grade improved from 43 percent to 75 percent between 2006/2007 and 2007/2008.</li> <li>▪ Improvements in retention by girls.</li> <li>▪ Vulnerable peoples' access to social services improved.</li> <li>▪ The food aid provided to malnourished children and HIV affected people improved their access to care and social services.</li> <li>▪ Improvement in both boys and girls attendance rates and in the proportion of female pupils in the assisted schools.</li> </ul>

Programme #5: social insurance	Programme name	Old Age, Disability and Survivors <sup>29</sup>
	Programme components	<ul style="list-style-type: none"> <li>▪ <b>Old-age pension:</b> The pension is equal to 1.33% of the insured's average earnings in the 10 best years multiplied by the number of years of paid and credited coverage before January 1, 2000 plus 1.70% of average earnings for each year of coverage after January 1, 2000. <ul style="list-style-type: none"> <li>○ The minimum pension is equal to 50% of the legal monthly minimum wage (36,607 CFA francs (\$74.73 USD)).</li> <li>○ The maximum pension is equal to 50% of the insured's average earnings in the 10 best years.</li> <li>○ Early pension: The pension is reduced by 5% for each year that the pension is taken before the normal retirement age. The minimum early pension is equal to 50% of the legal monthly minimum wage.</li> <li>○ Child's supplement of 10% of the insured's pension is paid for each child younger than age 16 (up to 30%).</li> </ul> </li> <li>▪ <b>Old-age allowance:</b> A lump sum is paid based on average earnings and the number of years of coverage.</li> <li>▪ <b>Foreign worker settlement:</b> A lump sum is paid of 3.2% of the covered earnings during the entire coverage period.</li> <li>▪ <b>Disability pension</b> (paid monthly): The pension is equal to 1.33% of the insured's average earnings in the 10 best years multiplied by the number of years of paid and credited coverage before January 1, 2000, plus 1.70% of average earnings for each year of coverage after January 1, 2000. <ul style="list-style-type: none"> <li>○ Child's supplement: 10% of the insured's pension is paid for each child younger than age 16 (up to 30%).</li> </ul> </li> <li>▪ <b>Survivor pension</b> (paid monthly): 50% of the deceased's pension is paid to a widow(er). If there is more than one widow, the pension is split equally. <ul style="list-style-type: none"> <li>○ Early pension: The pension is reduced by 5% for each year the pension is taken before age 50.</li> </ul> </li> <li>▪ <b>Orphan's pension:</b> Each eligible orphan receives 20% of the deceased's pension <ul style="list-style-type: none"> <li>○ If all full orphans' benefits combined exceed 100% of the deceased's pension, the pensions are reduced proportionately.</li> <li>○ Full orphans are eligible for the pension entitlements of both parents.</li> <li>○ The pension is paid monthly.</li> </ul> </li> </ul>
	Programme coverage	<ul style="list-style-type: none"> <li>▪ Employed persons in the private sector (self-employed persons excluded).</li> <li>▪ Special system for civil servants.</li> </ul>
	Beneficiary determination process	<ul style="list-style-type: none"> <li>▪ <b>Old-age pension:</b> Age 55 with at least 15 years of contributions (retirement from covered employment is necessary). <ul style="list-style-type: none"> <li>○ Early pension: A reduced pension is paid from age 50 with at least 15 years of contributions.</li> <li>○ If the insured has insufficient years of contributions to qualify for the pension at retirement age, he or she can continue to work until age 60 to meet the qualifying conditions or buy up to 24 months of contributions.</li> <li>○ Child's supplement is paid for each child younger than age 16.</li> <li>○ The pension is payable abroad.</li> </ul> </li> </ul>

<sup>29</sup> Table text from ISSA. (2009, August). *Social Security Programs Throughout the World: Africa 2009*. Retrieved from International Social Security Administration: <http://www.socialsecurity.gov/policy/docs/progdesc/ssptw/2008-2009/africa/ssptw09africa.pdf>

		<ul style="list-style-type: none"> <li>▪ <b>Old-age settlement:</b> Paid if the insured does not qualify for the old-age pension at age 55 but has at least 2 years of contributions.</li> <li>▪ <b>Foreign worker settlement:</b> paid to an insured foreign worker with less than 2 years of contributions who leaves the country permanently (In the absence of a reciprocal agreement).</li> <li>▪ <b>Disability pension:</b> Paid if the insured has at least 15 years of contributions and is assessed with a loss of earning capacity of at least 66.7%. <ul style="list-style-type: none"> <li>○ Child's supplement is paid for each child younger than age 16.</li> </ul> </li> <li>▪ <b>Survivor pension:</b> Paid if the insured was a pensioner or met the qualifying conditions for a pension at the time of death. <ul style="list-style-type: none"> <li>○ Eligible survivors are: <ul style="list-style-type: none"> <li>○ A widow(er) age 50 or older and married to the deceased for at least 2 years.</li> <li>○ Full orphans younger than age 16.</li> <li>○ If the widow(er) has a dependent child younger than age 16, the age and length of marriage requirements are waived.</li> </ul> </li> <li>○ Early survivor pension: Paid to a widow(er) from age 45.</li> <li>○ The widow(er)'s pension ceases on remarriage.</li> </ul> </li> </ul>
	<b>Finance</b>	<ul style="list-style-type: none"> <li>▪ <b>Insured person:</b> 3.2% of covered earnings. <ul style="list-style-type: none"> <li>○ The maximum monthly earnings for contribution calculation purposes are equal to 45 times the legal monthly minimum wage (36,607 CFA francs (\$74.73 USD)).</li> </ul> </li> <li>▪ <b>Employer:</b> 4.8% of covered payroll. <ul style="list-style-type: none"> <li>○ The maximum monthly earnings for contribution calculation purposes are equal to 45 times the legal monthly minimum wage.</li> <li>○ Paid monthly or quarterly depending on the number of employees.</li> </ul> </li> </ul>
	<b>Legal framework</b>	<ul style="list-style-type: none"> <li>▪ 1999 (social insurance), with amendment in 2000.</li> </ul>
	<b>Administrative framework</b>	<ul style="list-style-type: none"> <li>▪ Ministry of Family, Women, and Social Affairs provides administrative and technical supervision. Ministry of Economy and Finance provides financial supervision.</li> <li>▪ Managed by a tripartite board, the combined Social Insurance Institute and National Social Insurance administers the programme.</li> </ul>

Programme #4: social insurance	Programme name	Sickness and Maternity <sup>30</sup>
	Programme components	<ul style="list-style-type: none"> <li>▪ <b>Maternity benefit:</b> The monthly benefit is paid for 6 weeks before and 8 weeks (may be extending to 11 due to complications) after the expected date of childbirth and is equal to 100% of the insured's last earnings.</li> <li>▪ <b>Worker medical benefits:</b> Medical care is provided by community health centres. Employers must provide medical services for their workers.</li> <li>▪ <b>Salaried pregnant women:</b> Access to free medical care in public hospitals or receive 5,000 CFA francs (\$10.21 USD) to a private clinic or other establishment. From the third month of pregnancy, the cost of medical care and medicines are reimbursed.</li> <li>▪ <b>Dependent's medical benefits:</b> Health care is provided to the insured's dependents at community health centres.</li> </ul>
	Programme coverage	<ul style="list-style-type: none"> <li>▪ Employed women, including temporary, fixed-term, and daily public-sector workers. Voluntary coverage is possible.</li> </ul>
	Beneficiary determination process	<ul style="list-style-type: none"> <li>▪ <b>Cash maternity benefits:</b> The insured must have at least 3 months of insured employment.</li> </ul>
	Finance	<ul style="list-style-type: none"> <li>▪ <b>Employer:</b> 0.75% of covered payroll. <ul style="list-style-type: none"> <li>○ The maximum monthly earnings for contribution calculation purposes are 70,000 CFA francs (\$142.90 USD).</li> <li>○ Paid monthly or quarterly depending on the number of employees.</li> </ul> </li> <li>▪ <b>Self-employed person:</b> Voluntary contributions.</li> </ul>
	Legal framework	<ul style="list-style-type: none"> <li>▪ 1999 (social insurance), with amendment in 2000.</li> </ul>
	Administrative framework	<ul style="list-style-type: none"> <li>▪ Ministry of Family, Women, and Social Affairs provides administrative and technical supervision. Ministry of Economy and Finance provides financial supervision.</li> <li>▪ Managed by a tripartite board, the combined Social Insurance Institute and National Social Insurance Fund administers the programme.</li> </ul>

<sup>30</sup> Ibid.

Programme #5: social insurance	Programme name	Work Injury <sup>31</sup>
	Programme components	<ul style="list-style-type: none"> <li>▪ <b>Temporary disability benefits:</b> 100% of the earnings are paid in the initial period. Thereafter are 50% of earnings paid up to the 28th day after the accident and 66.7% afterwards.</li> <li>▪ <b>Permanent disability pension:</b> The pension is equal to 100% of the insured's annual earnings if the insured is assessed with a total disability. <ul style="list-style-type: none"> <li>○ If the assessed degree is at least 10%, the minimum annual earnings for benefit calculation purposes are 950,553 CFA francs (\$1,940.50 USD).</li> <li>○ If the insured requires the constant attendance of others to perform daily functions, 40% of the insured's annual earnings used for benefit calculation purposes are paid.</li> <li>○ If the assessed degree of disability is 75% or more the pensions are paid monthly; otherwise, quarterly or annually.</li> <li>○ If the assessed degree of disability is more than 10%; the pension may be partially paid as a lump sum after receiving the pension for 5 years. If the assessed degree of disability is 10% or less the total remaining pension may be paid as a lump sum after receiving the pension for 5 years .</li> </ul> </li> <li>▪ <b>Partial Disability:</b> According to the assessed degree of disability, a percentage of the full disability pension is paid.</li> <li>▪ <b>Workers' medical benefits:</b> Benefits include medical and surgical care; the cost of hospitalisation, medicines, appliances, funeral transportation, and rehabilitation; and all other necessary costs.</li> <li>▪ <b>Survivor pension:</b> The annual pension is equal to 30% of the deceased's annual earnings. The pension is split equally if there is more than one widow, but the widow(er) must have been married to the deceased before the accident occurred. <ul style="list-style-type: none"> <li>○ If the widow(er) does not have an eligible dependent child, the survivor pension ceases on remarriage and a lump sum is paid.</li> <li>○ Remarriage allowance: A lump sum is paid equal to 3 years of pension.</li> </ul> </li> <li>▪ <b>Orphan's Pension:</b> The annual pension is equal to <ul style="list-style-type: none"> <li>○ 15% of the deceased's annual earnings for each of the first two orphans younger than age 16 (age 21 if the orphan is a student or has an incurable disease).</li> <li>○ 10% for each additional eligible orphan.</li> <li>○ 20% for each full orphan.</li> </ul> </li> <li>▪ <b>Dependent parent's and grandparent's pension:</b> Each dependent parent and grandparent receives 10% of the deceased's earnings. <ul style="list-style-type: none"> <li>○ All survivor benefits combined must not exceed 85% of the deceased's earnings; otherwise, the pensions are reduced proportionately.</li> </ul> </li> <li>▪ <b>Funeral grant:</b> 25% of the legal annual minimum wage is paid as a lump sum.</li> </ul>

<sup>31</sup> Ibid.

	<b>Programme coverage</b>	<ul style="list-style-type: none"> <li>Employed persons, seamen, members of cooperatives, non salaried managers of cooperatives and their assistants, chairmen and managing directors of certain companies, apprentices, technical college students, and prisoners working in prison workshops.</li> <li>Self-employed persons: Voluntary coverage for all work injury benefits (except the temporary disability benefit).</li> </ul>
	<b>Beneficiary determination process</b>	<ul style="list-style-type: none"> <li><b>Work injury benefits:</b> No minimum qualifying period and accidents that occur while commuting to and from work are covered.</li> </ul>
	<b>Finance</b>	<ul style="list-style-type: none"> <li><b>Employer:</b> 2% to 5% of covered payroll (according to the assessed degree of risk). <ul style="list-style-type: none"> <li>The maximum monthly earnings for contribution calculation purposes are 70,000 CFA francs (\$142.90 USD).</li> <li>Paid monthly or quarterly depending on the number of employees.</li> </ul> </li> <li><b>Self-employed person:</b> Voluntary contributions (according to the assessed degree of risk).</li> </ul>
	<b>Legal framework</b>	<ul style="list-style-type: none"> <li>1999 (social insurance), with amendment in 2000.</li> </ul>
	<b>Administrative framework</b>	<ul style="list-style-type: none"> <li>Ministry of Family, Women, and Social Affairs provides administrative and technical supervision. Ministry of Economy and Finance provides financial supervision.</li> <li>Managed by a tripartite board, the combined Social Insurance Institute and National Social Insurance Fund administers the programme.</li> </ul>

Programme #6: social insurance	<b>Programme name</b>	<b>Family Allowances<sup>32</sup></b>
	<b>Programme components</b>	<ul style="list-style-type: none"> <li><b>Birth grant:</b> A lump sum of 18,000 CFA francs (\$36.75 USD) is paid for each of the first three children when born.</li> <li><b>Family allowances:</b> 4,500 CFA francs (\$9.186 USD) are paid quarterly for each child.</li> <li><b>Prenatal allowance:</b> 13,500 CFA francs (\$27.56 USD) (paid in three instalments).</li> <li><b>Maternity Allowance:</b> 18,000 CFA francs (\$69.75 USD) (paid in three instalments from birth to 12 months of age).</li> </ul>
	<b>Programme coverage</b>	<ul style="list-style-type: none"> <li>Employed persons in the private sector with one or more children (self-employed persons excluded).</li> </ul>
	<b>Beneficiary determination process</b>	<ul style="list-style-type: none"> <li><b>Family allowances:</b> Paid for children between age 1 and 14 (age 18 if an apprentice, age 21 if a student or disabled) with a parent employed for at least 3 consecutive months and currently working at least 18 days or 120 hours a month.</li> <li><b>Prenatal allowance:</b> The mother must undergo three prescribed medical examinations during the pregnancy.</li> <li><b>Birth grant:</b> Paid for up to three children born in the insured's first marriage or maybe in the second marriage if the insured's first spouse dies. The mother and child must undergo prescribed medical examinations.</li> </ul>

<sup>32</sup> Ibid.



		<ul style="list-style-type: none"> <li>▪ <b>Maternity Allowance:</b> The child must undergo six prescribed medical examinations before age 1.</li> </ul>
	<b>Finance</b>	<ul style="list-style-type: none"> <li>▪ <b>Employer:</b> 5% of covered payroll <ul style="list-style-type: none"> <li>○ The maximum monthly earnings for contribution calculation purposes are 70,000 CFA francs (\$142.90 USD)</li> <li>○ Paid monthly or quarterly depending on the number of employees.</li> </ul> </li> </ul>
	<b>Legal framework</b>	<ul style="list-style-type: none"> <li>▪ 1999 (social insurance), with amendment in 2000.</li> </ul>
	<b>Administrative framework</b>	<ul style="list-style-type: none"> <li>▪ Ministry of Family, Women, and Social Affairs provides administrative and technical supervision. Ministry of Economy and Finance provides financial supervision.</li> <li>▪ Managed by a tripartite board, the combined Social Insurance Institute and National Social Insurance Fund administers the programme.</li> </ul>