**Regional Office financial needs for 2008**

<table>
<thead>
<tr>
<th>Sector</th>
<th>US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strengthening emergency response to natural disasters and other rapid onset emergencies (incl. contingency planning and regional surge response capacity)</td>
<td>1,091,400</td>
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<tr>
<td>Child survival and nutrition</td>
<td>7,489,478</td>
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<tr>
<td>Water, sanitation and hygiene</td>
<td>4,215,800</td>
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<tr>
<td>Education</td>
<td>1,147,975</td>
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<tr>
<td>HIV/AIDS</td>
<td>909,500</td>
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<tr>
<td>Child protection</td>
<td>2,196,800</td>
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<tr>
<td><strong>Total</strong>*</td>
<td><strong>17,050,953</strong></td>
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</table>

*The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.*
1. CRITICAL ISSUES FOR CHILDREN

Conflicts, natural disasters, and endemic poverty continue to create insecurity and instability in the West and Central African region. In West Africa alone nearly 1 million people have been displaced by conflict. The deterioration of the security environment can in turn have a severe impact on neighbouring countries.

As in previous years, undernutrition and a lack of food security continued to be primary concerns in West and Central Africa in 2007. Though regional and national efforts to address child undernutrition in the Sahel are a priority, nevertheless in 2008 an estimated 1.4 million under-five children will suffer from acute undernutrition in the Sahel, with over 380,000 suffering from severe acute undernutrition. Those affected will be at a much higher risk of disease and death. Burkina Faso has particularly high rates with 23 per cent of under-five children suffering from acute undernutrition.

In 2007, an unusually severe rainy season resulted in one of the worst cases of flooding in West Africa in ten years. Around 800,000 people in 14 countries (Benin, Burkina Faso, Côte d’Ivoire, the Gambia, Ghana, Liberia Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone and Togo) were affected by this natural disaster, which displaced thousands and caused widespread damage to crops and infrastructure, including schools.

Seasonal factors such as the rainy season, compounded by population movements, contribute to the high incidence of cholera in the region. Cholera is among the most recurrent epidemics and, since January 2007, cholera has been reported in five West African countries; Côte d’Ivoire, Ghana, Guinea, Senegal and Sierra Leone. The ‘meningitis belt’ of sub-Saharan Africa which extends from Senegal to Ethiopia has witnessed ongoing epidemics that contribute to morbidity and mortality rates, particularly amongst women and children, while adding an additional burden to national health services. Experts fear that in 2008 the meningitis season will be particularly severe.

HIV/AIDS, combined with conflict, affects an estimated 12.4 million people in the four countries of Côte d’Ivoire, Guinea Conakry, Liberia and Sierra Leone. These four countries have been marked by human rights violations. As with the conflict in the Democratic Republic of the Congo, these conflicts have been typified by considerable brutal and systematic sexual violence affecting women and children. The attacks themselves, along with the subsequent displacement of populations, create conditions where people are placed at risk from epidemics, and are more likely to be affected by HIV and AIDS as well as sexually transmitted infections (STIs).

Issues of human insecurity lead to complex subregional crises. While the number of refugees and internally displaced persons (IDPs) caused by past conflicts have significantly diminished in Liberia and Sierra Leone, reintegration of armed forces and those associated with them, such as girl mothers, is still needed. The disarmament, demobilization and reintegration (DDR) process in both countries has lessons learned for the programmes emerging in the Central African Republic (CAR), Chad and Côte d’Ivoire. While the peace process in Côte d’Ivoire continues to move forward, and power-sharing agreements have so far been adhered to, the consolidation of peace and stability, in part, rests on the implementation of the DDR and identification process.

Protection and population movements remain key issues in the region, as various kinds of population movements trigger child protection issues, such as when children are separated from families. Family tracing and reunification programmes (FTR) are essential tools which protect children and prevent further sufferings and trauma. Attention must be paid to the impact of armed conflict on children and should be complemented by efforts to ensure the effective participation of young people in policies and programmes in the subregion.

Political turmoil has sparked an internal conflict in CAR since 2005. This conflict has led to many changes of regimes in the country and the birth of many rebel groups, especially in the western part of the country bordering Cameroon. Because of fighting between armed rebel groups and government troops, a large number of refugees have fled CAR for the provinces of the East, and Adamawa in Cameroon. The total number of refugees so far is estimated at 32,000, among whom 30 per cent are children and about 8,500 school-aged children, although the process is continuing.

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1 Exact figure is 972,390. Source: UNHCR West Africa Displaced Populations Map, including refugees, IDPs and asylum seekers, found at http://www.reliefweb.int/rw/fullMaps_Af.nsf/luFullMap/AB115AB0C46233DE85257356004DACFD/$File/ocha_IDP_afr070913.pdf?OpenElement
2 Data from nutrition surveys conducted in Burkina Faso, Chad, Mali, Mauritania and Niger.
3 Based on the Multiple Indicator Cluster Survey (MICS) 2006 data.
2. KEY ACTIONS AND ACHIEVEMENTS IN 2007

Coordination and support services. Natural disasters and eruptions of conflict in the region can often be classed as 'sudden onset', and thus the level of preparedness is crucial for the quality of the response. Since 2006, UNICEF's Regional Emergency Rapid Response Fund (RERRF) has financed critical initial response funding gaps for emergencies in the region. The fund has allowed for technical and operational support to Country Offices and partners, and provided urgent human resource surge capacity to multiple emergency operations. In the first half of 2007, UNICEF chaired regional level inter-agency contingency planning exercise for Guinea +6 in support of the Regional Office for the Coordination of Humanitarian Affairs (OCHA). The initial emergency response to the onset of crisis in Guinea included the provision of medical supplies and water, sanitation and hygiene equipment. UNICEF also provided surge capacity human resource support to Guinea in the areas of child protection, IT Telecom and operations. Support to the Congo Brazzaville Office for cholera response included both material and surge support. Most recently assistance for critical supplies and personnel have been provided to Burkina Faso, Ghana, Mauritania and Togo, in response to the floods.

Child survival and nutrition. Undernutrition and food security concerns in the Sahel are being addressed on a regional and national level. In 2007, national protocols for the management of acute undernutrition, including facility- and community-based care, have been adopted in five Sahelian countries as well as Benin, Ghana and Togo. Moreover, community-based management of acute undernutrition is currently being implemented in high-prevalence regions of these countries, and efforts are under way to scale up the response. A second joint meeting of UNICEF and the World Food Programme (WFP) in early 2007 included UN representatives, UN Development Programme (UNDP) Resident Representatives, and donors from the region. Outcomes from the meeting included a renewed emphasis on a common leadership agenda to further strengthen synergies. At the regional level, the thematic approach applied within the framework of the UN Inter-Agency Consolidated Appeal Process (CAP) has provided a platform for discussions among partners.

In the Sahelian countries, UNICEF has provided therapeutic food, anthropometric kits and health supplies, strengthened the national nutrition surveillance system, conducted child survival surveys, and trained health and social workers.

Water, sanitation and hygiene. In 2007 the UNICEF water, sanitation and hygiene (WASH) programme responded to the flooding crises in West Africa through measures such as latrine construction, emergency water storage and treatment, water provision, among other initiatives. The WASH programme also responded to outbreaks of cholera across the region by undertaking assessments in multiple countries, as well as national communication campaigns for hygiene promotion and reduction of the incidence of waterborne diseases.

WASH cluster coordination was ensured in eastern Chad, Democratic Republic of the Congo (DRC) and Liberia among other countries.

Child protection. Building on lessons learned from the experiences of the Mano River Union, exemplified in the ECHO-UNICEF Programme of Cooperation Evaluation Report of October 2006, there has been increased attention on consolidating a coordinated and cross-border approach.

In particular, the Liberia DDR has been shared, and the findings call for a broader, comparative assessment of DDR processes. This is all the more crucial given that some countries are newly experiencing demobilization and reintegration of formal and non formal processes, namely CAR, Chad and Côte d'Ivoire.

In Guinea basic psychosocial training was provided to social workers and animators to enable better support for girls suffering from sexual abuse that occurred during the crisis.
3. PLANNED HUMANITARIAN ACTION FOR 2008

In collaboration with other UN agencies as well as NGOs, UNICEF will continue to respond to the needs of people affected by conflicts and natural disasters, as a core component of its regional humanitarian programme.

Strengthening emergency response to natural disasters and other rapid onset emergencies (incl. contingency planning and regional surge response capacity) (US$ 1,091,400)

Regional Emergency Rapid Response Project (US$ 481,500)
This project aims to continue to reinforce regional and country-level capacity in the areas of emergency preparedness and response in small-scale emergency contexts. Key activities are as follows:

- Support Country Offices to complete contingency planning processes when faced with an increased risk of emergency and/or to kick-start an initial emergency response;
- Strengthen a regional human resources surge capacity mechanism to allow rapid deployment of experienced emergency staff immediately before or at the onset of a crisis;
- Manage the Regional Emergency Rapid Response Fund (RERRF) in support of select countries’ initial emergency response planning process.

Strengthening of the emergency response to floods and other natural disasters (US$ 609,900)
Following the severe rainy season and subsequent flooding in 2007, the aim of this project is to identify best practices and lessons learned during the flood response, and support regional and country level preparedness for better response to floods and other sudden onset natural disasters that may arise in the coming year. Activities include:

- Finalize review of 2007 UNICEF flood response, including identification of best practices and key lessons learned;
- Define a common strategy with regional and country level partners for strengthening future responses to floods and other recurrent emergencies in 2008;
- Support Country Offices to advocate for and roll out a capacity-building strategy at country and district level, including but not limited to stockpiling of supplies, commonly agreed needs assessment modalities, coordination mechanisms, definition of roles and responsibilities and definition of performance benchmarks for assessing the response;
- Emergency response in the key areas of water and sanitation, health, nutrition, protection and education in select Country Offices severely affected by floods and other natural disasters.

Child survival and nutrition (US$ 7,489,478)

Regional support to emergency nutrition for child survival in the Sahel (US$ 898,800)
This project will support 1,130,700 under-five children suffering from acute undernutrition, and 251,900 children with severe undernutrition in the Sahelian countries through regional support to country programmes in the countries of Burkina Faso, Mali, Mauritania, Niger, and the northern regions of Benin, Ghana, and Togo. Activities will focus on:

- National guidelines: support the implementation of national protocols and guidelines for the management of acute undernutrition in children; particular attention will be paid to strengthening the response capacity of government and NGO workers;
- Information systems: strengthen the capacity of national nutrition and child survival surveillance systems to collect and analyse relevant data and information for timely and effective response;
- Supply and logistics: Strengthen the capacity of country programmes to ensure an uninterrupted pipeline of therapeutic and supplementary foods, micronutrient supplements and essential drugs, and anthropometric, monitoring and counselling tools for the management of acute undernutrition as well as complementary health and hygiene commodities;
- Nutrition for child survival: support the roll-out of national strategies to promote improved nutrition and child survival services and practices: early initiation of breastfeeding, exclusive breastfeeding in the first six months, and age-appropriate complementary foods and feeding practices from 6 to 24 months; vitamin A supplementation, deworming and measles vaccination; distribution of insecticide-treated mosquito nets for malaria prevention; promotion of handwashing with soap at critical times and
treatment of child diarrhoea with oral rehydration therapy and zinc; and prevention of maternal anaemia and low birthweight;

- **Sector leadership and coordination:** strengthen inter-agency coordination, synergy and accountability among UN agencies and humanitarian partners in nutrition and feeding as per IASC agreements for emergency preparedness and response.

**Emergency nutrition for child survival in North and Extreme North provinces of Cameroon as well as in Adamaua and East provinces for Central African refugees (US$ 3,638,267)**

This project aims to provide care and support for children suffering from acute undernutrition in Adamaua, East, North and Extreme North provinces of Cameroon, and will target 105,000 under-five Cameroonian children with acute undernutrition of whom 25,000 children with severe acute undernutrition, along with 2,000 under-five Central African refugee children with acute undernutrition of whom 500 children with severe acute undernutrition.

Activities will include:

- **Management of acute undernutrition**
  - Support the development and implementation of national policies and guidelines for the management of acute undernutrition, and the implementation of a training strategy for facility- and community-based care providers;
  - Ensure an uninterrupted pipeline of therapeutic foods, micronutrient supplements, essential drugs, anthropometric equipment and monitoring and counselling tools for the management of acute undernutrition;
  - Support national capacity to plan, implement and analyse nutrition and child survival surveys and data; strengthen information and early warning mechanisms; improve programme monitoring and evaluation systems; disseminate findings and information about the nutrition situation of children and their mothers for timely action and effective communication.

- **Prevention of acute undernutrition**
  - Infant and young child feeding: protect, promote and support early initiation of exclusive breastfeeding, exclusive breastfeeding in the first six months of life, and age-appropriate complementary foods and feeding practices from 6 to 24 months;
  - Nutrition and child survival commodities: ensure vitamin A supplementation, deworming, measles vaccination, and insecticide-treated mosquito nets for all under-five children;
  - Health and hygiene: ensure the prevention and control of diarrhoeal diseases through the intense promotion of handwashing with soap and oral rehydration therapy with zinc supplements;
  - Prevention of low birthweight (maternal anaemia control).

**Reinforcement of preparedness and response to meningitis epidemics in West African countries on the ‘meningitis belt’ (US$ 909,500)**

This project aims to reduce morbidity and mortality due to meningitis in the West African countries of Benin, Burkina Faso, Côte d’Ivoire, the Gambia, Ghana, Guinea, Mali, Niger, Nigeria, Senegal and Togo. Activities include:

- Increase and ensure the availability of polysaccharide vaccines in the short and medium terms to implement mass vaccination prevention and riposte campaigns;
- Increase and ensure the availability of first-line drugs for treatment in case of epidemics;
- Increase and ensure the availability of laboratory supplies and equipments for countries in case of epidemics;
- Carry out, if necessary, rapid risk-assessments at national level to optimize the prepositioning and use of vaccines, drugs and laboratory supplies;
- Help raising funds to support countries’ epidemic preparedness and response activities at the international and national levels.

**Protection of children and women victims of armed conflict in Forest Guinea (US$ 2,042,911)**

This project targets 932,000 Guinean women and children, Liberian and Ivorian refugees, in order to reduce morbidity and mortality of refugee and host women and children and reinforce their protection. Activities will include:

- Organize regional and district-level epidemic outbreak management services; provide essential medicines, basic medical kits, vaccines for district health facilities; disinfect and protect water sources; rehabilitate care for severely malnourished children;
- Provide legal clinic services and psychosocial support and access to basic services (shelter, food, education and health) to survivors of sexual abuse and exploitation;
Strengthen coordination of HIV/AIDS activities and support health structures-voluntary counselling and testing, prevention and care for HIV/AIDS and sexual violence survivors;

Contribute to the decrease in case fatality rates through availability of essential medicines, vaccines and medical material in health centres and hospitals; provide care for epidemic case management and its nutritional consequences in children; disinfect water sources.

**Water, sanitation and hygiene (WASH) (US$ 4,215,800)**

**Enhancement of emergency response preparedness for WASH cluster (US$ 738,300)**

This project will enhance the response at the regional level, and of WASH cluster partners and governments in at least four select countries prone to recurrent emergencies, including cholera, floods and droughts. Activities will include:

- **Preliminary activities**
  - Analyse the response level in the WASH sector to 2007 emergencies; gap and strengths, weaknesses, opportunities and threats (SWOT) sector analysis, both in select countries and at regional level;
  - Analyse relevant capacity-building and contingency plans developed in the WASH sector for other regions and clusters.

- **WASH cluster capacity mapping and building**
  - Organize regional and country inter-agency and governmental WASH cluster awareness workshops for selected countries, preferably in coordination with other clusters;
  - Identify institutional and human resource capacities and requirements, supply and information management systems, coordination mechanisms requirements;
  - Identify and assess potential WASH cluster coordinators in select countries;
  - Identify potential private partners for WASH stock manufacturing and long-term agreements;
  - Identify key academic institutions and development of a regional training plan.

- **WASH contingency plans development**
  - Establish partners’ duties and responsibilities;
  - Develop contingency plans in select countries;
  - Develop a regional WASH stockpiling strategy to support select countries.

**Development of an integrated WASH-nutrition approach to vulnerable communities (US$ 1,455,200)**

This project aims to improve the impact of nutrition interventions towards vulnerable communities by reducing behavioural risk practices and improving water supply and sanitation conditions. Handwashing with soap at critical times, sanitation, household water treatment and safe storage are proven to be among the most cost-effective methods to reduce the incidence of diarrhoea and the prevalence of water-based helminthiasis, both diseases that have been identified as strong limiting factors on optimal child nutrition survival and development. Activities will include:

- **Develop joint WASH-nutrition actions plans in targeted countries**
  - Collaborate with relevant national institutions and international/national NGOs, map vulnerable communities with high undernutrition and low-level WASH indicators;
  - Carry out detailed field surveys in select communities: gather available information on water quality and availability, sanitation facilities, age-appropriate food and feeding practices and hygiene;
  - Develop a WASH plan at the district level focusing on increasing water availability, the application of household water treatment and safe storage techniques, sanitation promotion, and communication for behavioural changes at community, school and facility levels;
  - Merge the strategy into integrated WASH-nutrition action plans;
  - Develop work plans, benchmarks and monitoring indicators;
  - Develop an information management system to capture bad and good practices.

- **Address needs in vulnerable communities**
  - Implement integrated action plans in select districts;
  - Monitor indicators and compile evidence-based information (lessons learned on good practices).

- **Draft joint WASH-nutrition guidelines.**

**Development of an environmental and behavioural risk reduction action plan for cholera (US$ 1,658,500)**

This project aims to reduce the occurrence and incidence of cholera outbreaks and improve emergency response in select hotspots within the cholera-affected countries of Côte d’Ivoire, Ghana, Guinea, Senegal and Sierra Leone.
Activities will include:

- **Identification of vulnerable communities and reservoirs**
  - Carry out a retrospective analysis of cholera outbreaks in the region and map vulnerable communities;
  - Identify reservoirs and priority geographic areas where an integrated WASH strategy could have a significant impact on cholera outbreaks and risk reduction;
  - Select one priority country and agree with relevant national institutions and international/national NGOs to develop a national action plan for priority geographic areas.

- **Identification of environmental health and behavioural risks**
  - Carry out detailed field surveys in select communities;
  - Gather available information on water quality, sanitation facilities, food preparation and distribution practices, basic hygienic practices and environment;
  - Rank risks and identify priority actions required to reduce environmental health and behavioural risks.

- **Set-up of risk reduction action plans**
  - Develop an integrated programme to improve water supply and sanitation infrastructures as well as their operation and maintenance;
  - Develop an integrated information education and communication programme for communities at risk.

- **Development of a preparedness contingency plan in selected countries**
  - Establish regional and national rosters of WASH emergency response teams;
  - Develop and implement WASH training packages for cholera emergency preparedness (contingency plans, initial assessment, decision-making process and monitoring);
  - Develop sectoral WASH contingency plans.

**Development of a regional online WASH cluster information and knowledge management network system (US$ 363,800)**

This project aims to develop a regional information knowledge and management network system for the WASH sector among cluster partners. Activities include:

- **Emergency preparedness**
  - Make an inventory of existing practices for recording emergency WASH activities by cluster partners;
  - Produce a regional online catalogue of standardized metadata;
  - Create a searchable internet platform and the option for further access to related databases;

- **Emergency management**
  - Make a diagnosis of past and ongoing experiences, including other regions, related to information exchange during emergencies, and how this applies to the coordination of interventions and the identification of priority needs;
  - Prepare a draft operational methodology to promote information-sharing during emergencies between WASH cluster partners. Finalize the methodology during a regional workshop with national focal points and cluster partners;
  - Pilot the methodology in two countries.

- **Post emergency lessons learned**
  - Promote joint monitoring and evaluation among cluster partners.
  - Make individual monitoring and evaluation reports available via internet platform;
  - Set up agreements among partners for appropriate procedures aiming at developing consolidated and adaptive guidelines for emergency responses.

**Education (US$ 1,147,975))**

**Education in support of CAR refugee children in Eastern and Northern Cameroon (US$ 591,575)**

This project aims to ensure that refugee children and host community school-aged children in the East and Adamaoua provinces have access to quality primary education. Activities will include:

- Undertake sensitization campaigns for refugees, host communities, Ministry of Education decentralized bodies and teachers to emergency education;
- Construct 58 temporary learning spaces;
- Construct 36 permanent classrooms (six schools of three classrooms and three schools of six classrooms);
- Train 94 teachers on teaching techniques and methodologies;
• Procure 2,000 school benches;
• Procure/distribute teaching and learning materials, textbooks and school supplies, and school-in-a-box kits;
• Procure recreational and early childhood development (ECD) kits;
• Monitor and evaluate emergency education activities in schools of the East and Adamaoua provinces.

**Inter-agency capacity-building for education in emergencies (US$ 556,400)**

This project focuses on capacity-building and a coordinated strategy on education in emergencies in order to prevent conflict and build peace. It highlights the role education can play in humanitarian interventions in all phases, including preparedness, response and recovery. It targets all Western African countries. Activities will include:

• Design and implement a regional inter-agency capacity-building strategy on education in emergencies, including to:
  - Document lessons learned on the role of education in emergencies, early recovery and peace building (especially life skills education and peace education as possible risk reduction strategies);
  - Establish a capacity-building strategy for the region and ensure training on preparedness and response plans (Minimum Package in Education in Emergencies, UNICEF training package), in partnership with the government, and training on the cluster approach for education in emergencies, post-crisis and transition;
  - With the existing capacities in lead organizations and cluster partners, establish partnerships at the country level to ensure the roll-out of the cluster approach;
  - Establish coordination, monitoring and reporting mechanisms for the capacity-building plan.

**HIV/AIDS (US$ 909,500)**

**Prevention of HIV/AIDS among groups of vulnerable adolescents (US$ 909,500)**

This project intends to facilitate the access of IDPs, refugees, and host communities to accurate information and services, and build the skills of adolescents and young women, in particular on HIV/AIDS. Countries include Côte d’Ivoire, Guinea, Liberia, and Sierra Leone. Activities will include:

• Support sensitizations programmes and communication on HIV prevention activities in general;
• Train peer educators on HIV knowledge, life skills, peace culture;
• Provide psychosocial support training to peer helpers and facilitators;
• Support the functioning of adolescent centres and the production of materials;
• Support people living with HIV/AIDS, provide medical care for STIs among young people at reference health centres;
• Support youth-specific services and train reference staff for health centres;
• Support coordinating and monitoring activities by partners;
• Provide psychosocial support training to peer helpers and facilitators.

**Child protection (US$ 2,196,800)**

**Improvement of current and future disarmament, demobilization and reintegration (DDR) processes through joint inter-agency, cross-border action (US$ 567,100)**

This project will build on the lessons learned and the methodology developed during the DDR processes in the Mano River Union to reinforce the capacities of the child protection stakeholders in formal or non formal demobilization and reintegration processes. Activities will include:

• Provide holistic and inter-agency training on children affected by armed conflict (CAAC) issues, as a means to achieve minimum quality standards for all the interventions;
• Disseminate existing reintegration guidelines and other relevant tools enabling the harmonization of inter-agency approaches and greater effectiveness;
• Set up cross-border and inter-agency information-sharing mechanisms to ensure optimal individual caseload monitoring, trend analysis and early warning;
• Conduct joint peer-review workshops promoting inter-agency and cross-country experience and good practice-sharing of current demobilization and reintegration processes (including gender awareness and inclusion of girls; non stigmatization of children; inclusion of gender-based violence (GBV); HIV/AIDS issues; role of education in DDR processes; mid-term impact of reintegration programmes).
Family tracing and reunification training (US$ 121,000)
The project will focus on improving the effectiveness and coordination of family tracing and reunification (FTR) programmes in Burkina Faso, Cameroon, CAR, Chad, Côte d’Ivoire, Guinea, Guinea-Bissau and Mali. Activities will include:
- Provide regional francophone training on FTR for agency staff in potentially concerned countries on good practices and lessons learned;
- Introduce standard tools and methodology for FTR work;
- Initiate effective emergency FTR preparedness plans and networks within targeted countries.

Community-based reintegration of 250 girl mothers associated with armed forces in Liberia and Sierra Leone (US$ 465,450)
This project aims to ensure long-term successful reintegration of 250 girl mothers and their children who are associated with armed forces in Liberia and Sierra Leone. Activities will include:
- Along with the girl mothers, design strategies and activities aimed at enhancing their reintegration;
- Implement small-scale projects to facilitate girl mothers’ reintegration, based on needs, assessment and identified strategies. Activities may include: vocational training and literacy classes; income generating activities; setting up early childhood centres for girl mothers’ children; and community based support;
- Identify and draft guidelines.

Child protection in emergency training in Côte d’Ivoire and Guinea (US$ 695,500)
Côte d’Ivoire and Guinea would be the first countries identified as part of a broader roll-out of child protection in emergencies and emergency preparedness, including psychosocial training of trainers (ToT) for public servants. Activities include:
- Conduct child protection in emergencies training for public servants and civil society;
- Organize psychosocial training of trainers (ToT) for Guinea public servants and civil society;
- Integrate child protection in emergency preparedness and response plans.

Inter-agency action-research project for child protection in mobility situations in the border areas between the Gambia, Guinea, Guinea-Bissau and Senegal (US$ 347,750)
This project entails conducting a joint diagnostic assessment of child protection issues for children in movement in the area, in order to identify common priorities and joint programmes. Activities will include:
- Conduct participatory, action-oriented, child rights-based research on child rights around two main axes to identify the root causes of mobility: child’s physical protection and security (including mine awareness, recruitment into armed or criminal group) and access to basic social services and economic opportunities;
- Coordinate research at regional level; conduct research with identical, efficiency-proved, method in the four country areas.