

Stop child labour in cocoa-sourcing communities in Haut-Sassandra region

SUMMARY OF BASELINE STUDY RESULTS
IMPLEMENTATION GROUP 2 (33 communities)



1. Introduction

1.1 Purpose and Objectives

The study has been conducted in the districts of Issia and Daloa in the 33 selected communities that are part of the second group of project implementation. The primary purpose of the study was to establish the baseline situation of the project indicators among communities and targeted households in order to identify the needs, to confirm/adjust the project interventions, and to compare the situation at the end of the project.

The baseline focused on two levels of analysis: community and households/individuals. At community level the study aimed at identifying status, needs, presence, access and quality of the services available to the community, based on a set of indicators that will be measured at the end of the project evaluating the impact that the activities will have had on the development of the target communities.

At household level the study aimed at understanding the situation of the families and children in terms of level of education, child labour presence, and economic status, to identify the most vulnerable households and measure a set of indicators at the beginning and then at the end of the programme and establish the impact of the project in reducing the child labour risks.

The study specific objectives were:

- Assess the target communities of the second group of project implementation (33 communities) to identify the situation and the needs in terms of presence and quality of services, particularly related to child protection (institutional and not);
- Identify the most vulnerable households in relation to the risk of child labor, this group will be the main target of the project;
- Measure key indicators among the selected vulnerable households;
- Assess the status of the community in relation to the awareness-raising activities that will be conducted during project.

1.2 Methodology and tools

The study used a combination of *quantitative and qualitative methods*:

Community level:

- **Community profiling:** to identify community needs and access to key services, the International Cocoa Initiative (ICI) Foundation “Protective Cocoa Community Framework” (PCCF) Questionnaire was administered and Focus Group Discussion were organised with key informants such as Community leaders, secretary to the chief, president of youth, president of women, the secondary civil status agent, heads of community CPEs, associative group of farmers;
- **Child protection mechanisms assessment:** the Quality of Services questionnaire was used to assess quality standards of the 2 functional Social Centres in the project area (Issia, Saihoua);

Household/individual level:

- **Vulnerability assessment:** surveys at the household level to select the 925 most vulnerable families from a sampling frame of 1,397 households pre-identified by the stakeholders (local authorities and communities’ leaders). The families were selected according to vulnerability criteria;
- **Household survey:** a sample of the selected target vulnerable families (420) were interviewed to measure the project indicators and assess their situation and their level of knowledge and awareness on various topics;
- **Child Labor survey:** a questionnaire was used to interview a sample of (428) adolescents and children of the vulnerable families to measure the incidence and characteristics of child labour in the community and identify children to be included into the child protection system;
- **Nutrition assessment** to a sample of under-five children and adolescents of target families
- **Focus Group Discussions:** 24 FGDs were conducted in the 4 largest communities (6 each: women, men, girls/boys for both group ages of adolescents and children) with participants selected among the target families. The FGD gathered qualitative information on gender issues and gaps, women empowerment, needs of farmers, child labor key issues.

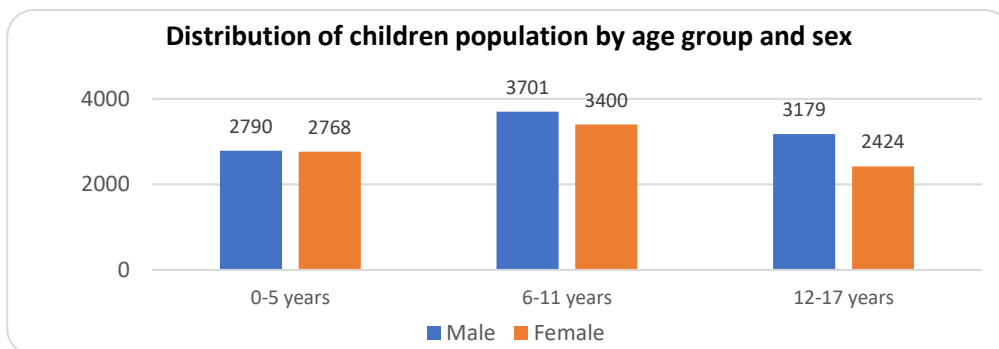
2. Community assessment results

2.1 Demographic and economic status

Population

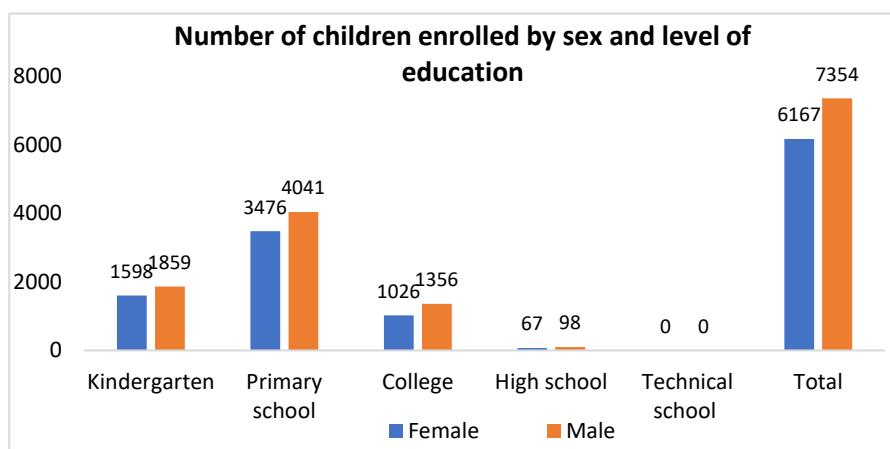
Through the PCCF tools, the study estimated a population of 35,013 individuals in the 32 communities (48% women, 52% men). Children population is estimated at 18,261 representing 52% of the population, of which 5,559 are 0 to 5 years old (16%); 7,100 are 6 to 11 (20%) and 5,602 are 12 to 17 years old (16%).

Sex	Adults	0 – 5 years	6 – 11 years	12 – 17 years	Total	Proportion by sex
Female	8,231	2,768	3,400	2,424	16,823	48.0%
Male	8,520	2,790	3,701	3,179	18,190	52.0%
Total	16,751	5,559	7,100	5,602	35,013	100.0%
%	48%	16%	20%	16%	100,00%	



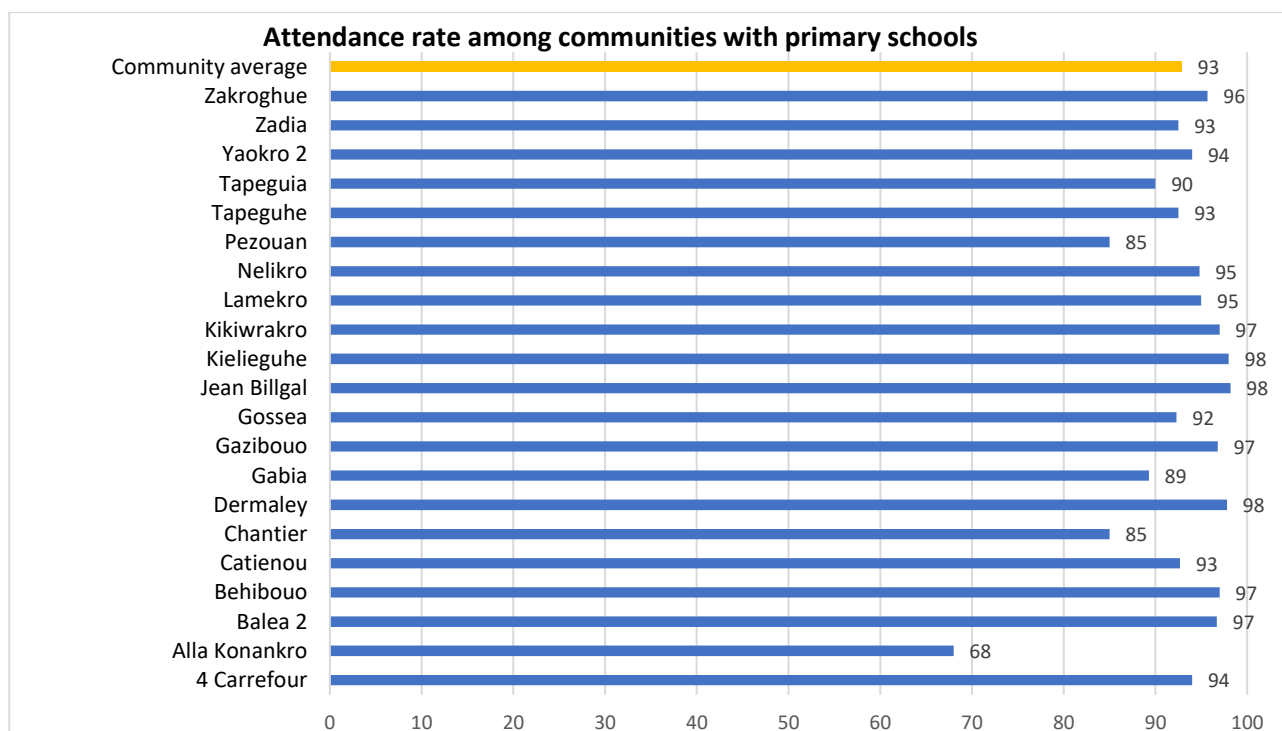
Children education

Data on education at community level have been reported by the teachers and collected from the school registers. There are an estimated 13,521 children enrolled in school at all levels.



Enrolment is higher in primary schools, but relatively lower in kindergarten, while secondary and technical schools show minimum numbers. These data, however, are based on the communities where schools are present and do not consider the children who were never enrolled, that are captured by the information collected at household level and show 24% of out of school children.

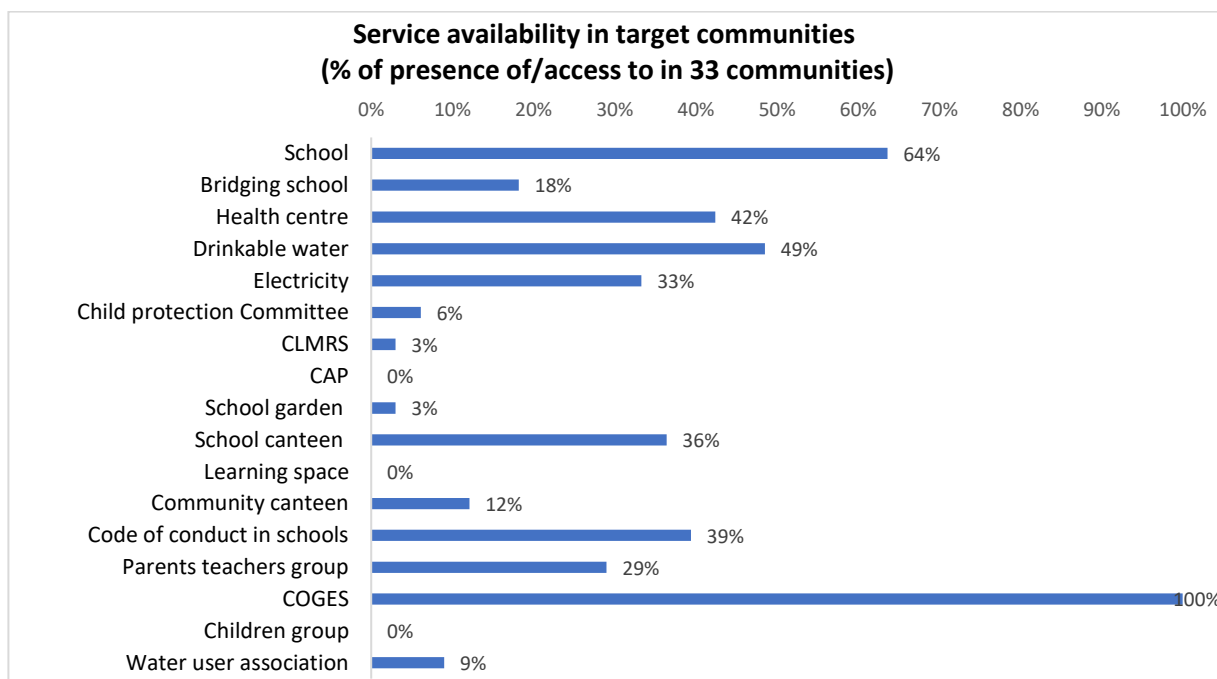
The attendance rate reported by primary school teachers is relatively high, with an overall average attendance rate of 93%. Differences among communities can be seen in the graph below, the Alla Konankro community is the one with the lowest school attendance rate at 68%.



2.2 Community status

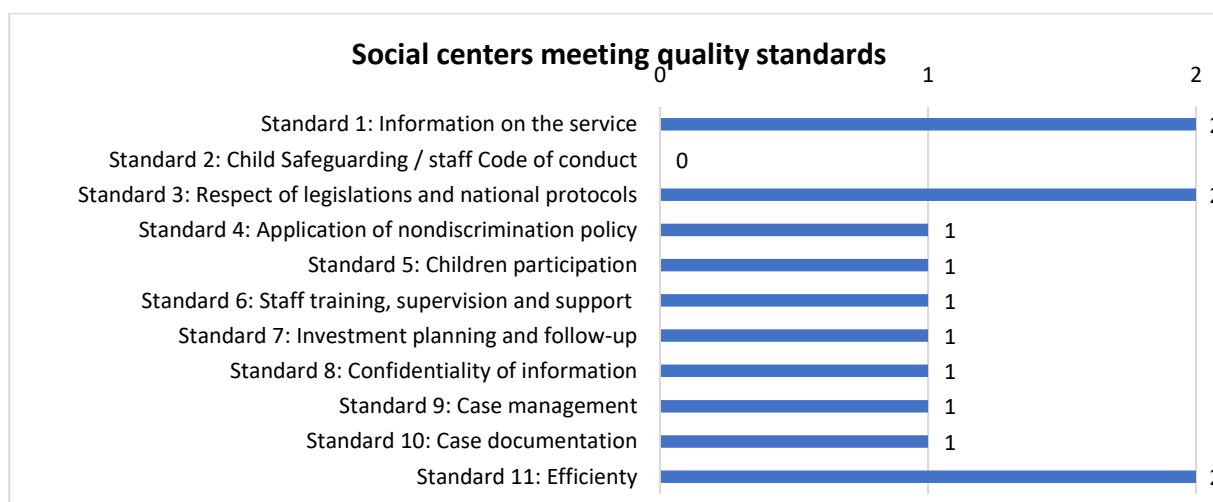
Overall, access to **basic social services by these communities is limited**, particularly to primary health services (only in 14 communities, 42%), electricity (in 11 communities, 33%), and drinking water (in 16 communities, 49%). **Primary schools are present in 21 communities (64%)**. In terms of presence of community groups, Associations of Parents and Teachers were found in six of the 21 communities with primary schools, and School Management Committees (COGES) in all the 21 communities. No Children's groups are present in the target area.

Child Protection Committees were recorded in two communities (6%) but they are not active, in fact although the members are trained and meet regularly, they have not identified nor referred cases directly.



2.3 Formal child protection services status

In the departments of Daloa and Issia there are two formal child protection services, one at Issia and one at Saioua. Using the “Quality of Service” Tool, interviews were conducted with managers and staff members of the social centers. The 11 required quality standards were scored assessing the level of evidence and efforts to meet each indicator, and consistency towards the standards.



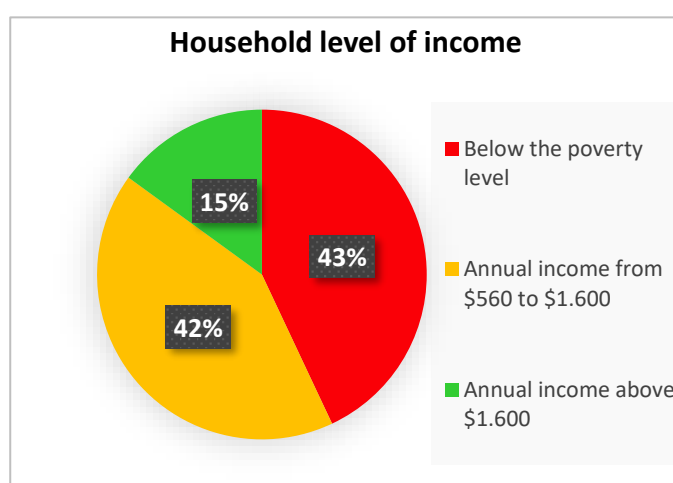
As shown in the above summary, Child Safeguarding policies are absent in both centres. Areas that need urgent action are training and supervision, involvement of children and consideration of their point of view, efforts for prevention activities, information on and accessibility of services, non-discrimination against children.

3. Households survey results

3.1 Vulnerability assessment and target selection

The selection of the 925 most vulnerable households of the second implementation group started from a list of 1,397 potentially vulnerable households initially identified by the social workers. The key criteria for selection were: Food and nutrition situation; Household health and education; Income/livelihoods; Shelter and housing; Expenses for children; Household responsibility; Special needs and other vulnerabilities, as well as Child labour risk/presence.

3.2 Households' income and sources of income

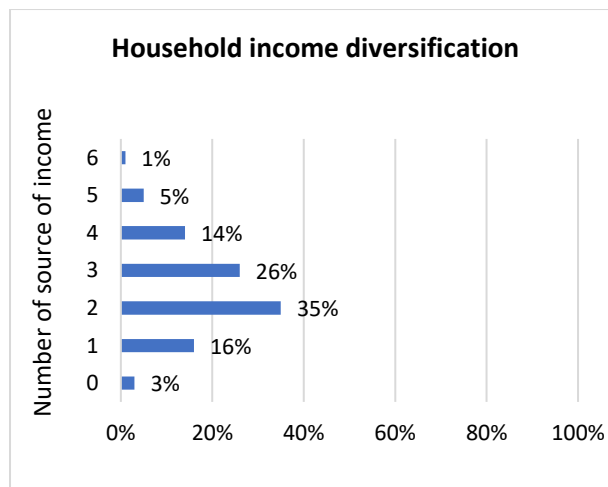
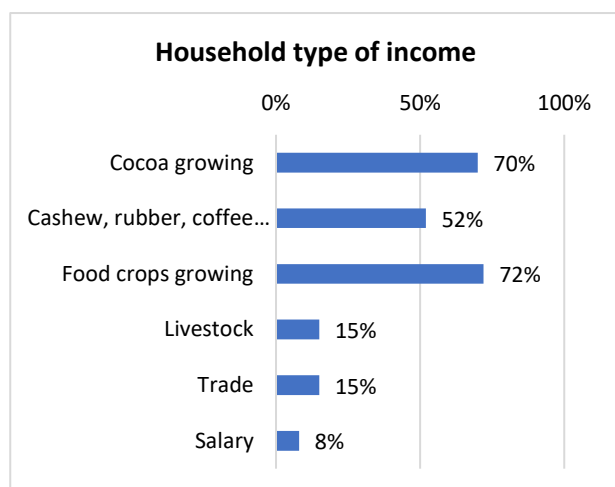


The surveyed families were asked to quantify their total annual income, considering all the members of the household and the different sources of revenue.

Almost half of the households (42%) reported an annual income below the poverty line, which is set at 345,520 CFA per year in Ivory Coast (560 USD).

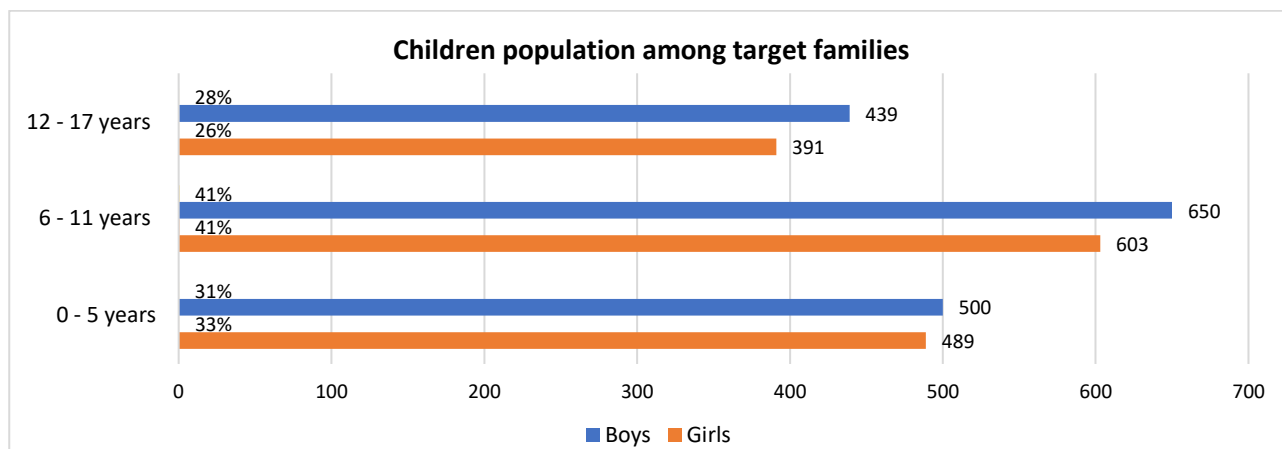
As shown in the graph below, most families derive their income mainly from cocoa farming (70%), food crops (72%) and growing of cashew, rubber and coffee (52%). Trade makes 15% of income as well as livestock. Only 8% of the income is based on a job salary.

The majority of vulnerable households (35%) has only two sources of income, while 26% have three and 16% have a single source of income.

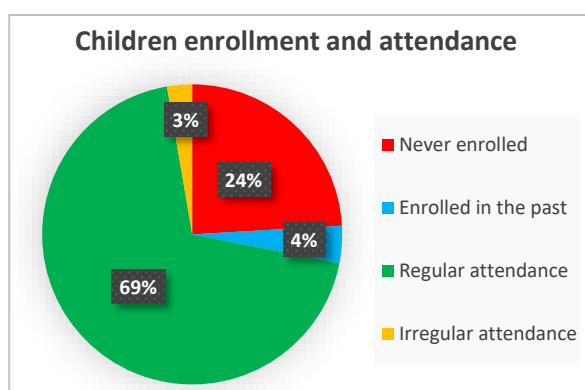


3.3 Children population and schooling

As shown in the graph below, there are 3,072 children among the 925 families surveyed, of which 1,589 (52%) boys and 1,483 (48%) girls. Children are distributed along age groups as follows: 989 (32%) children from 0 to 5 years, 1253 (41%) from 6 to 11, and 830 (27%) from 12 to 17 years.

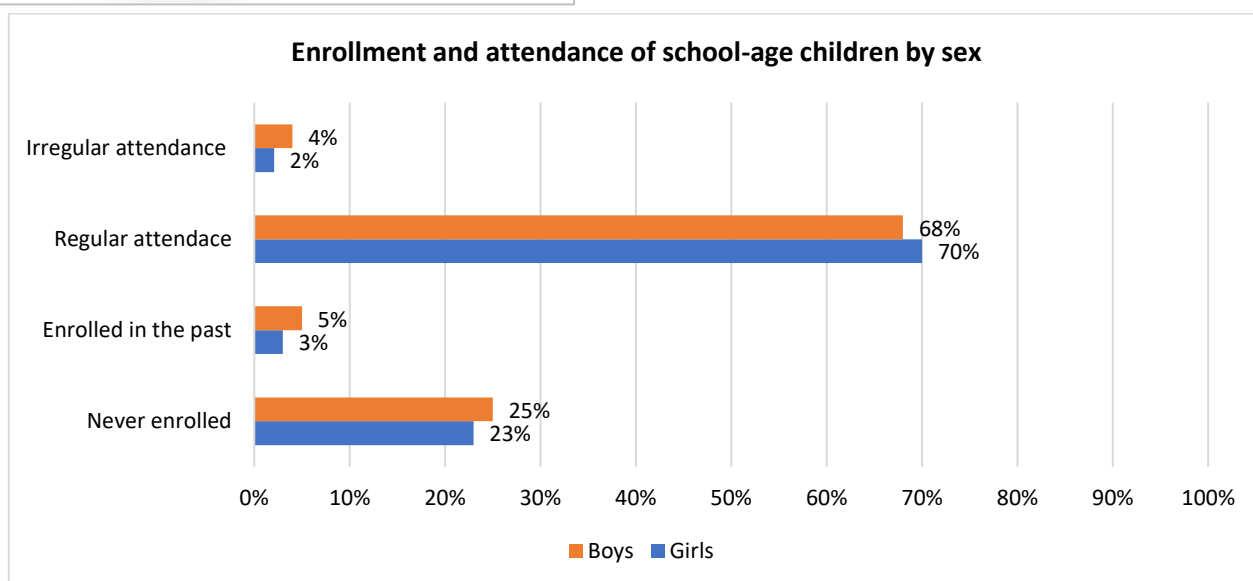


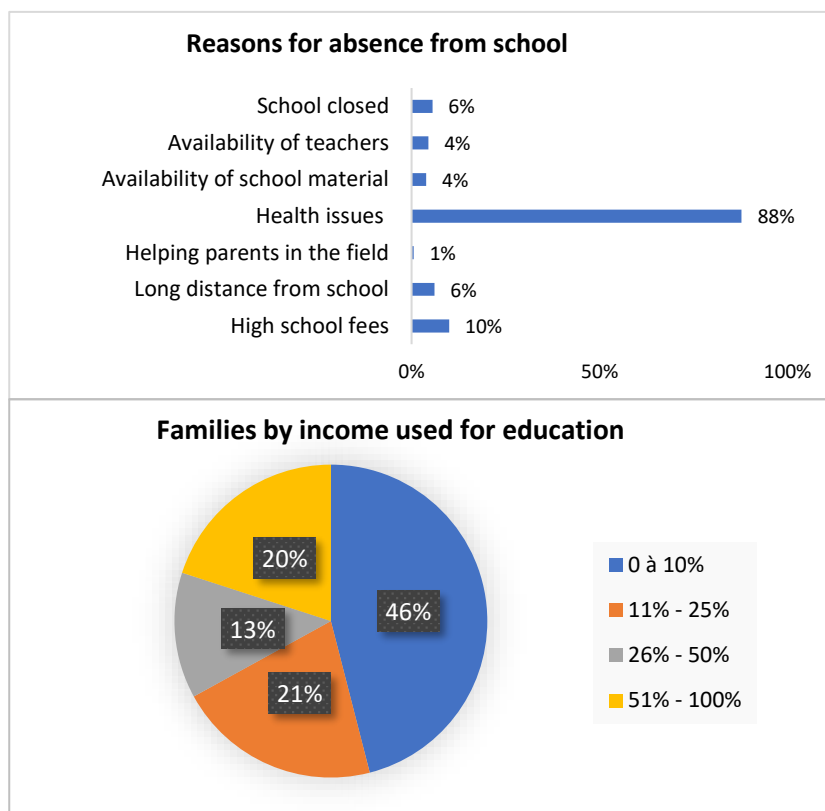
For the household interviews, a sample of 417 families was randomly selected among the 925 of the project target group. The status of school enrolment and attendance was assessed for the 958 children and adolescent in school age (6 – 16 years) among the 417 families surveyed.



Almost a quarter of children never had the chance to be enrolled in school (24% of school-age population) while 69% of school-age children attend school regularly.

As shown in the graphs below, the gender factor doesn't seem to make a significant difference in terms of enrolment, while it is notable a higher drop-out rate among boys (4% of boys who attend irregularly versus 2% of girls, and 5% of boys enrolled in the past, but not this year, against 3% of girls).





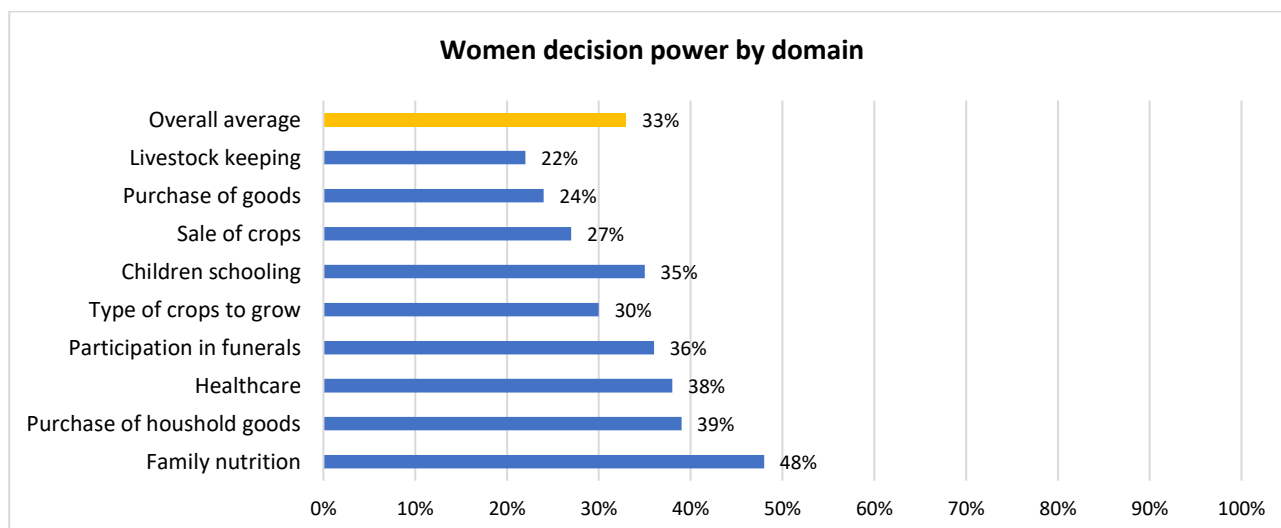
When asked about the reason for the children not being enrolled or not attending school regularly, most parents reported health issues, like illness, as the first cause (88%), followed by the difficulties in covering school expenses (10%) and distance from school or the fact that the school is closed (6%).

The fact that expenses are an obstacle for school attendance is confirmed by the proportion of family income used for education.

In fact, as shown in the graph, 20% of interviewed households reported that the schooling retains more than half of their income (at least 51%), and 13% of them from 26% to 50%, high proportions considering that almost half of the families have an income below the poverty line.

3.4 Women's involvement in decision-making

The household survey also aimed at assessing women's involvement in decision-making within the family. To do so, women were asked a set of questions to assess their involvement in taking decisions on different household domains, and the extent of their involvement.

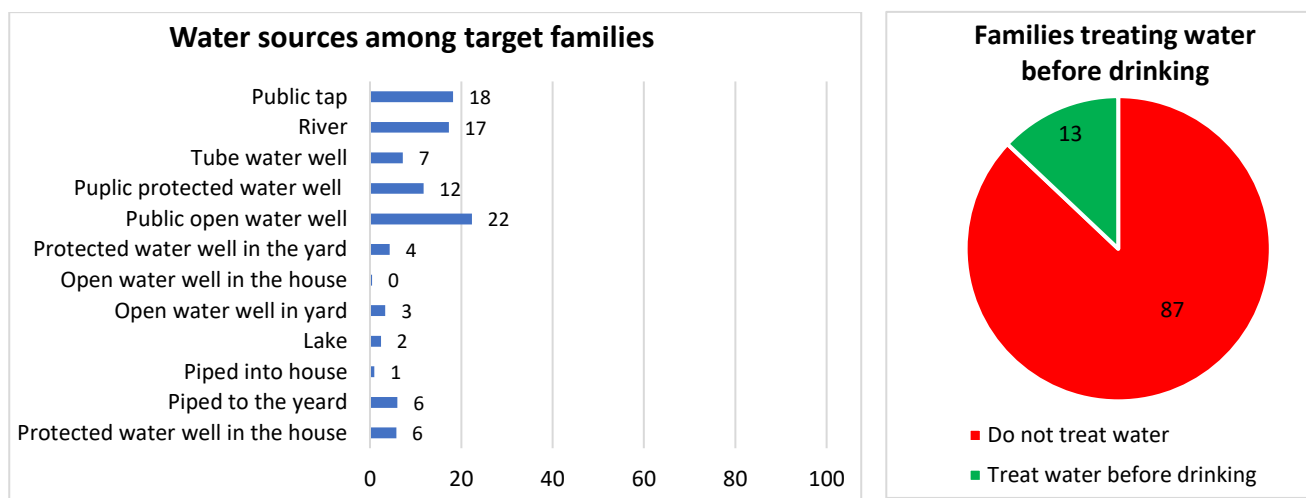


Based on the interviews, on average **only about a third of women (33%) reported to be somehow involved in decision-making in the household.** They are more involved in areas related to the family care tasks, such as food (48%), health care (38%) and the purchase of household goods (39%), while have even less power in taking economic related decisions. Decision-making power is very weak in the areas of livestock keeping (22%), purchase of goods (24%), the sale of crops (27%).

Moreover, when the women who reported to be involved were asked about the level of decision power, even a lower percentage (28% on average) answered to be involved to a large extent.

3.5 Water and Sanitation

The households' access to water supply was also assessed during the study, showing that **the majority of households do not have access to safe water**, with public open water-well being the most common source of water (22% of households) followed by public tap (18%) and the river (17%).

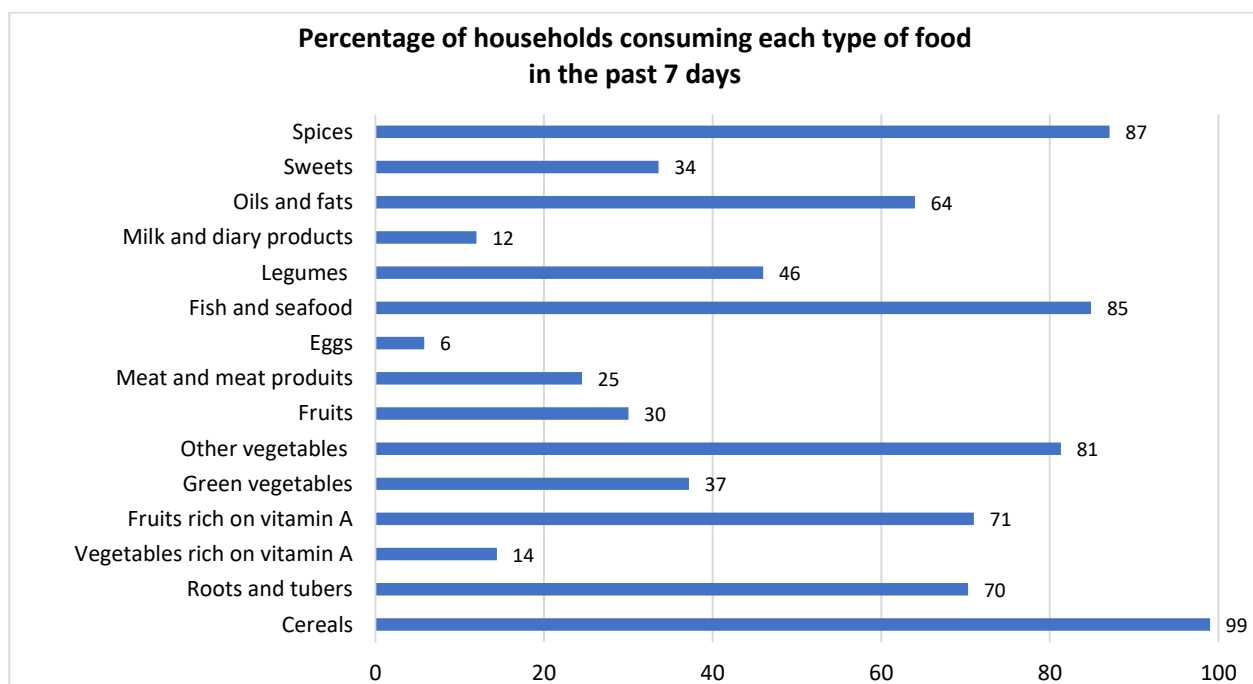


Nevertheless, in **87% of interviewed households drinking water does not undergo any treatment** before being consumed, putting family members, especially children, at risk of diseases.

4 Knowledge and practice on nutrition

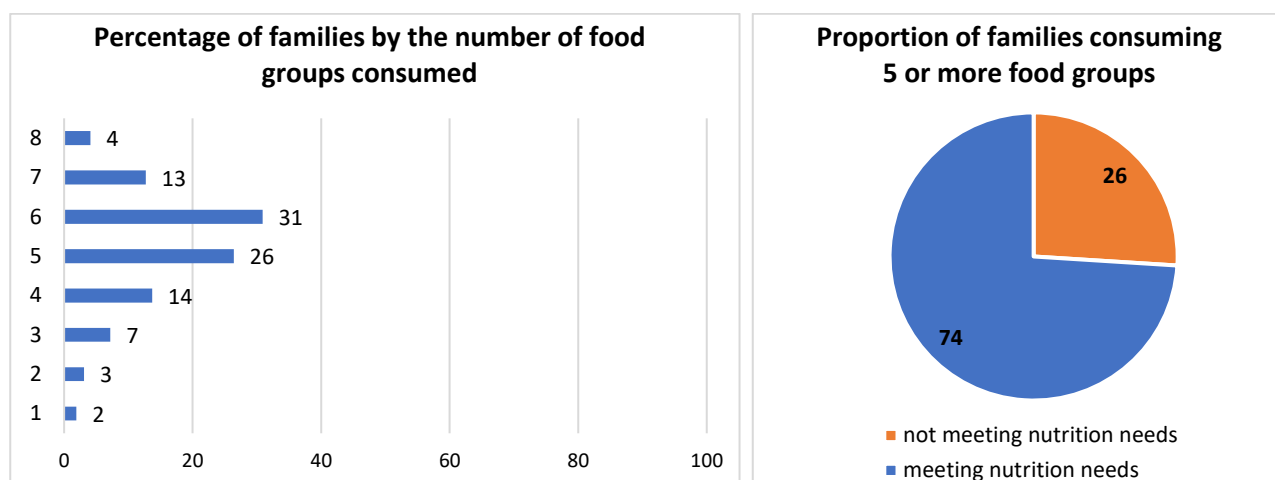
4.1 Household food consumption

Households were asked questions on the type of food consumed in the past 7 days, choosing among the categories shown in the graph below. Results show that the most consumed food groups among households are cereal (99%), fish and sea food (85%) and vegetables (81%). The least consumed foods are eggs (6%), milk or dairy products (12%), and vegetables rich in Vitamin A (14%).



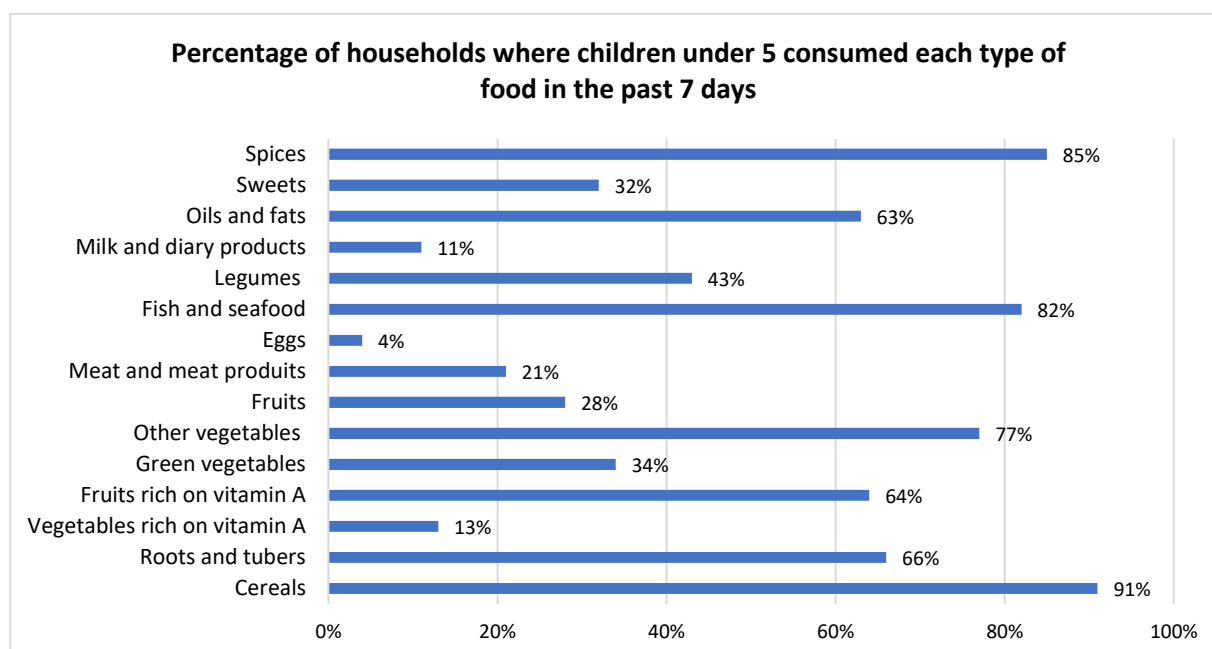
According to the World Health Organization (WHO) recommendations, five food groups, among seven suggested categories, are necessary to ensure optimal development in adults. The foods were then grouped into categories and the number and proportion of families consuming each group was calculated.

As shown in the graphs below, **the proportion of families who reported consumption of at least five food categories is 74%**. Thirty-one percent of the households have consumed six food categories over the last seven days and 13% reported seven categories, while only 4% all groups.

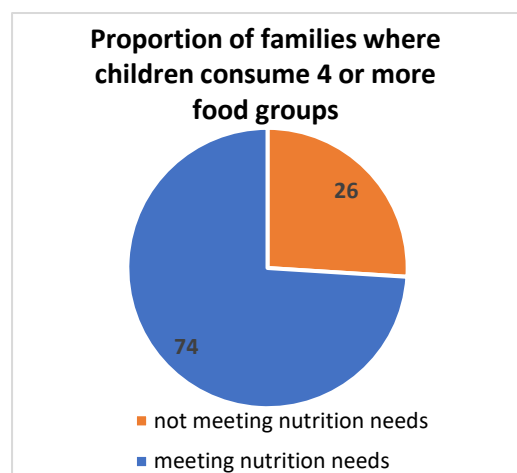
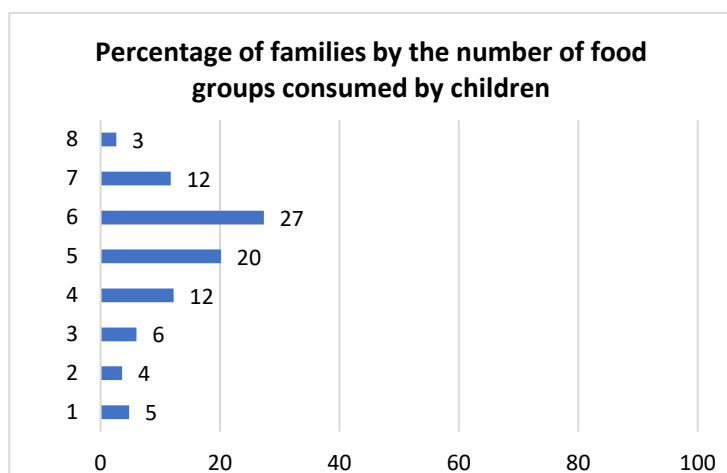


4.2 Children food consumption

The types of food consumed by children under 5 of the surveyed families were not much different from those consumed by adults (see graph below).



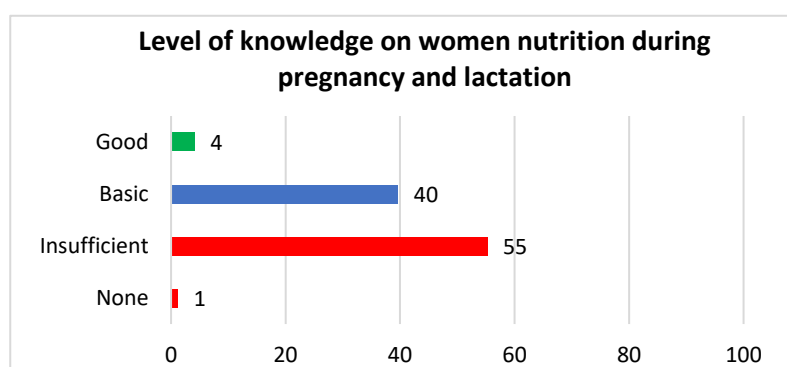
According to the World Health Organization (WHO) at least 4 food categories are necessary to ensure optimal development of children. In 74% of households the respondents reported that children consumed 4 or more food groups in the past 7 days. In the majority of households (27%) children consumed 6 food categories, 7 food categories in 12% and 3% of households all 8 food groups.



4.3 Household knowledge on nutrition

Knowledge on women nutrition during pregnancy and lactation

To assess the level of household knowledge of nutrition during pregnancy and breastfeeding, specific questions were asked to women of childbearing age present in the household during the data collection.

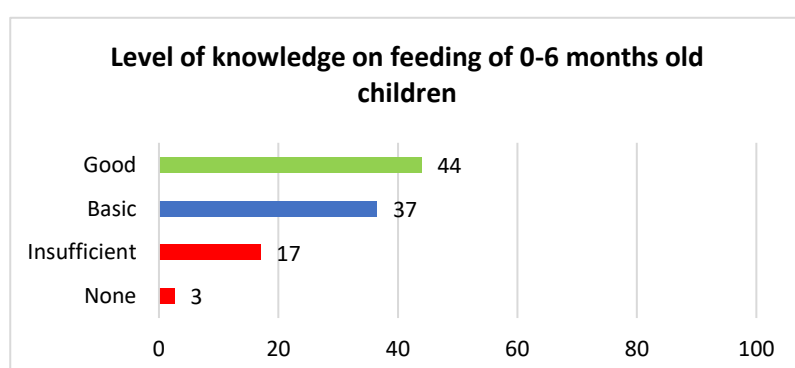


The level of knowledge was measured by assigning a score to correct and incorrect answers. Data analysis shows that the majority of respondents (55%) have insufficient level of knowledge, a great part (40%) have basic knowledge and only (4%) have good knowledge on this topic.

The main gaps in knowledge were found on the risks for children born from under-weight women (94% of incorrect answers), the women nutrition practice (66%), the types of supplements during pregnancy (64%), and the issues related to children born under-weight (52%).

Knowledge on infant feeding practice (0-6 months)

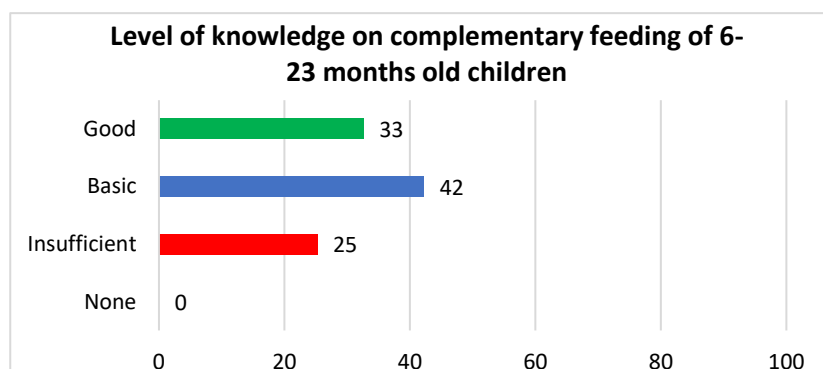
Families seem to have a better understanding on nutrition of children from 0 to 6 months with 44% of households demonstrating good knowledge and 37% basic knowledge.



Women are well aware of the importance of breastfeeding, that is practiced by 97% of interviewed women, however the rate of the recommended exclusive breastfeeding is very low (only 34%) indicating that 0-6 months old children are also fed with water, cereals, and dairy products.

Knowledge on complementary feeding of 6-23 months-old children

In general, the households surveyed demonstrated little understanding of complementary feeding to be started after 6 months until 2 years of age, with 58% of households showing insufficient knowledge, 36% basic, and only 6% good.



Majority of women understand the importance of continuing breastfeeding after 6 months (75%) and of the need of introducing complementary food (78%), but have gaps on specific information on when to stop breastfeeding (86% of incorrect answers) and on the best complementary food options (45% of incorrect answers).

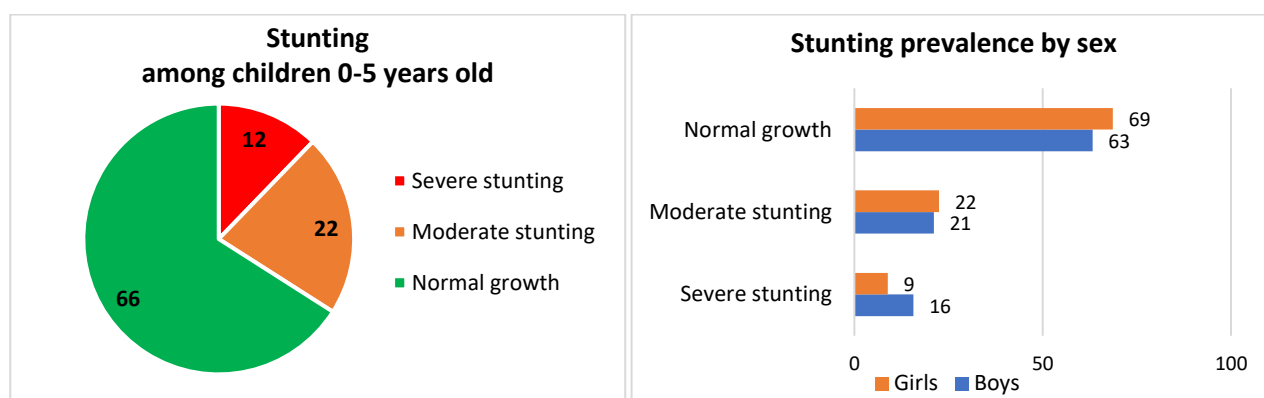
5 Nutrition status of children and adolescents

5.1 Prevalence of stunting in children under 5 years old

To measure the nutrition status of children and the impact on their growth, a nutrition assessment was conducted with the support of community health workers. The data collected related to anthropometric measurements (weight and height) and demographic characteristics (age and sex). In total, 335 children from 0 to 5 years were assessed among the target families.

Based on World Health Organization methodology, weight and height of children were analysed based on Standard Deviation from growth chart. As shown in the following graph, a **high proportion of children (34%) do not have a normal growth, with 22% of children affected of moderate stunting and 12% of severe stunting**, meaning that malnutrition and underweight have permanently affected their growth.

Comparing boys and girls, no significant differences were found, with the exception of severe stunting where boys seem to have a higher prevalence.

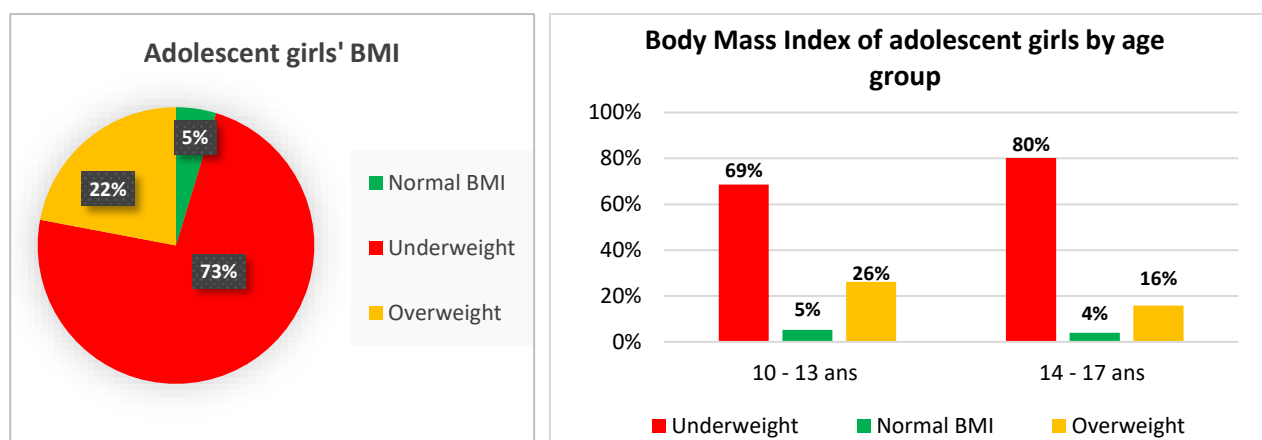


5.2 Body Mass Index of adolescent girls

Body Mass Index is a very important indicator to monitor adolescent girls' nutrition and health status. BMI was measured by taking height and weight of 254 adolescent girls (10-17 years old) among the surveyed families and calculating the BMI level using WHO method based on age ($BMI = \text{weight in kg} / \text{height}^2 \text{ in m}$).

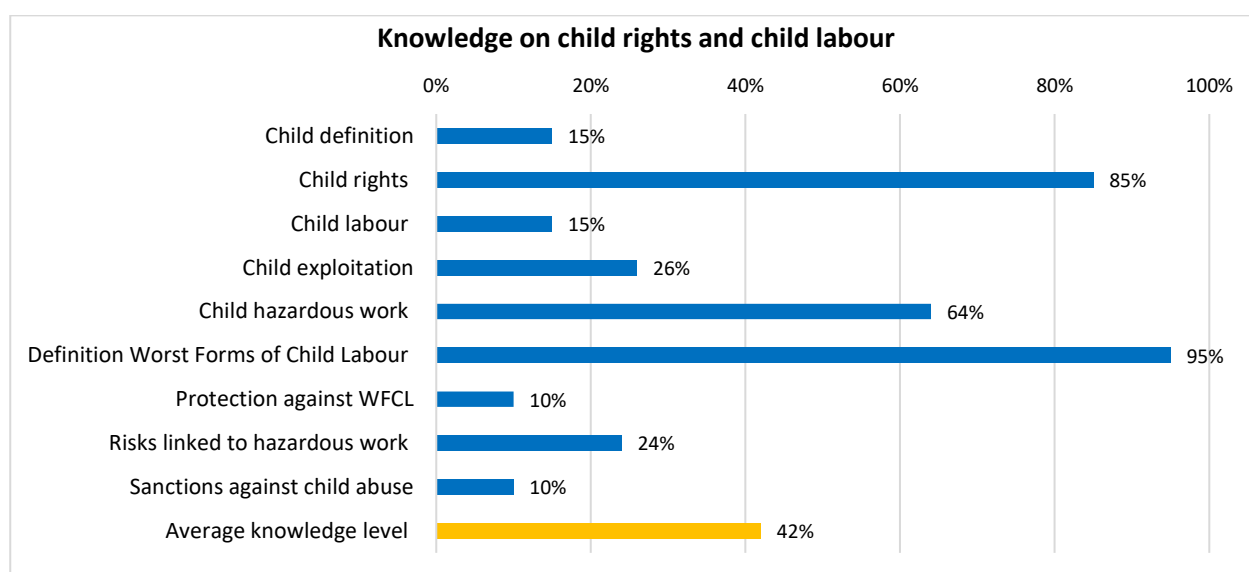
The data analysis showed that **the great majority of surveyed girls (73%) is underweight**, a high proportion (22%) is overweight and only 5% of girls present a normal BMI.

Looking at differences by age group, girls from 14 to 17 years seem to have a higher proportion of underweight (80%) than girls from 10 to 13 years (69%).



6. Knowledge of children's rights and child labour

The survey questionnaire had a dedicated section to assess parents' knowledge on child rights, child labour, related risks and protection mechanisms. The graph below shows the proportion of families that showed a good knowledge level for each topic, based on the correct answers given to a set of questions.



Good knowledge is reported on the definition the Worse Forms of Child Labour (WFCL, 95%) of child rights (85%) and hazardous work (64%). However, it seems that the effect of these concepts into the reality are not understood, in fact major gaps are found in the knowledge on the sanctions for people who do not respects child rights and on the protection system against the WFCL (10%), followed by the concepts and activities that define child definition and child labour (15%) and the risks linked to hazardous work (24%).

For example, most parents think that children do not have the right to express what they think and feel and are not capable of making decisions on their own, they confuse child labour, especially domestic work, with learning and socialization activities, and do not understand the difference between work and exploitation.

Major work needs to be done in terms of community sensitization and awareness raising on these topics.

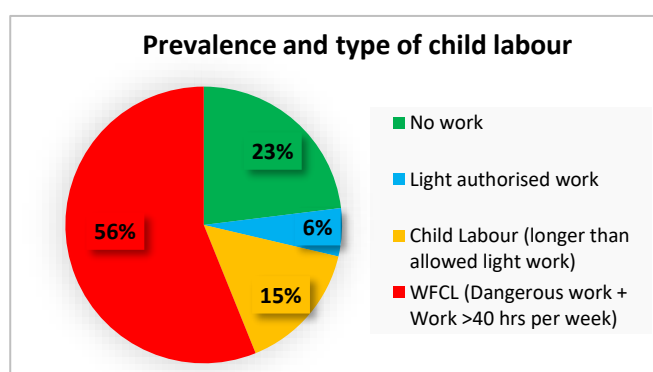
7. Child labour and worst forms of child labour

7.1 Child labour definition

The framework for the measurement of child labour is harmonized with the international conventions and the standards for child labour statistics adopted by the 18th International Conference of Labour Statisticians in 2008 and aligned with ILO and UNICEF Global Estimates of child labour in 2020, those of the National Institute of Statistics of Côte d'Ivoire in 2013, and with national legislation. The definition of child labour used for this study is aligned with the International Cocoa Initiative Foundation's methodology and analyses different dimensions such as light work, hazardous work and Worst Forms of Child Labour (WFCL). The criteria used to measure each type of labour are shown in the table below:

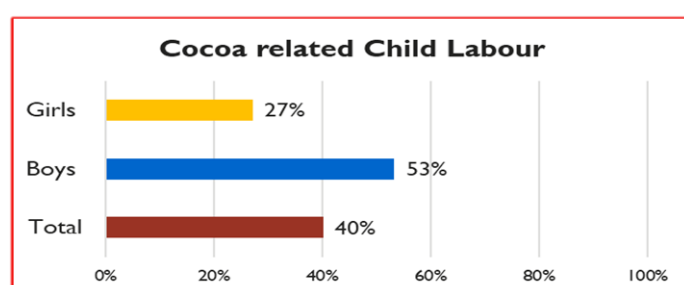
Light Work (no CL)	5-12 years	13-15 years	16-17 years
Light tasks in both domestic and agricultural contexts	≤ 1 hr per week	≤ 10 hrs per week	≤ 40 hrs per week
Child Labour			
Light tasks done for a duration longer than permitted	>1 hr ≤ 40 hrs per week	>10 hrs ≤ 40 hrs per week	
Worse Forms of Child Labour			
Dangerous tasks in both domestic and agricultural contexts	All ages, any duration		
Light tasks done for more than 40 hours per week	All ages, >40 hrs		

7.2 Overall extent and type of child labour



The Child Labour Survey was conducted among 428 children, with interviews to 283 children aged 5-12 and 145 adolescents aged 13-17, both boys and girls. Children were asked questions related to type and duration of their tasks in helping in the house and in the cocoa fields. The answers to these questions allowed to identify the category and extent of their work at home and in the agricultural context, using the criteria showed above.

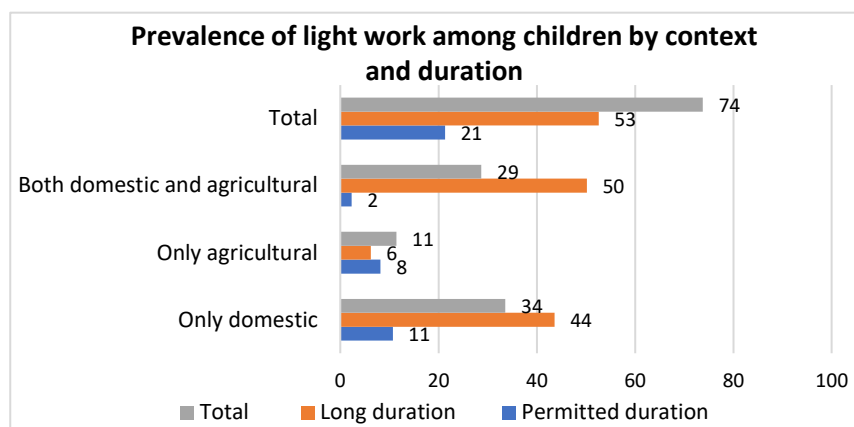
Based on the activities reported by children, it was found that the great majority of children (**71%**) are involved in at least one type of child labour and **56%** in WFCL, mostly because of undertaking hazardous activities. Only less than a quarter of children (23%) reported to do none of the activities asked in the questionnaire, only 6% are doing authorised light work, while 15% are doing light work but for a time longer than allowed, therefore they are considered to be in child labour.



Looking at cocoa related child labour, 40% of children reported to be involved in activities in the cocoa fields, mostly boys (53%)

7.3 Light work

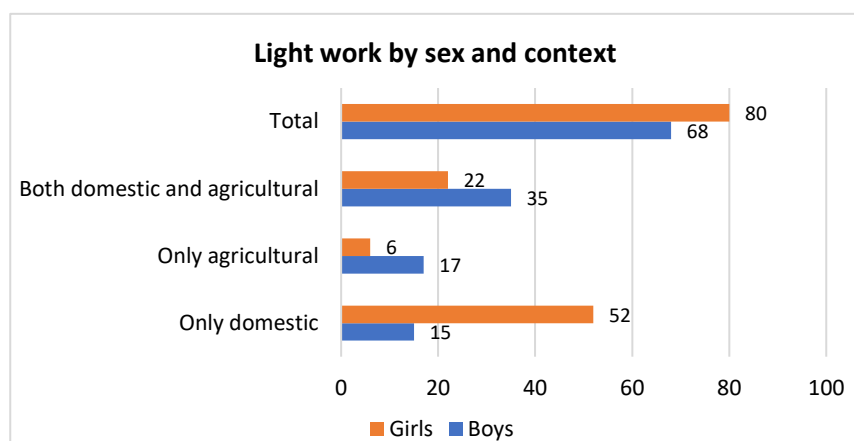
Overall, **74% of the children reported to do light work**, of which 22% is of authorized duration, 52% of longer duration (but less than or equal to 40 hours per week) and 0.5% (2 children) of more than 40 hours.



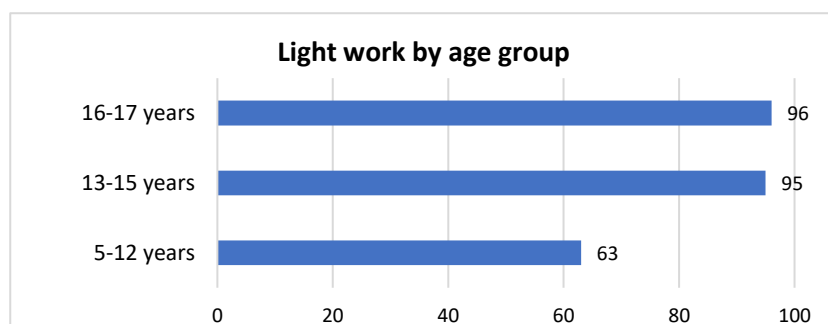
There is a **double prevalence of long-duration light work (53%)** considered child labour, compared to authorised duration (21%).

The analysis according to the context shows that 34% of children carry out light work only in the domestic context, 11% only in the rural context and 29% perform light work in both the domestic and rural setting.

The analysis by sex shows that light work is more widespread among girls than boys (respectively 80% and 68%) and that girls are more involved into domestic context while boys in the agricultural context.



In addition, the prevalence of light work of permitted duration is higher among boys (26%) than girls (17%) while **light work of longer duration is higher among girls (63%) than boys (42%)**.



The analysis by age group shows that the prevalence of light work among children increases with age.

Most common light tasks in the house:

- Cooking meals for the family
- Breaking fagots
- Doing the dishes/laundry
- Cleaning the house

Most common light tasks in the rural context:

- Filling sachets
- Planting
- Fermentation
- Organic fertilization

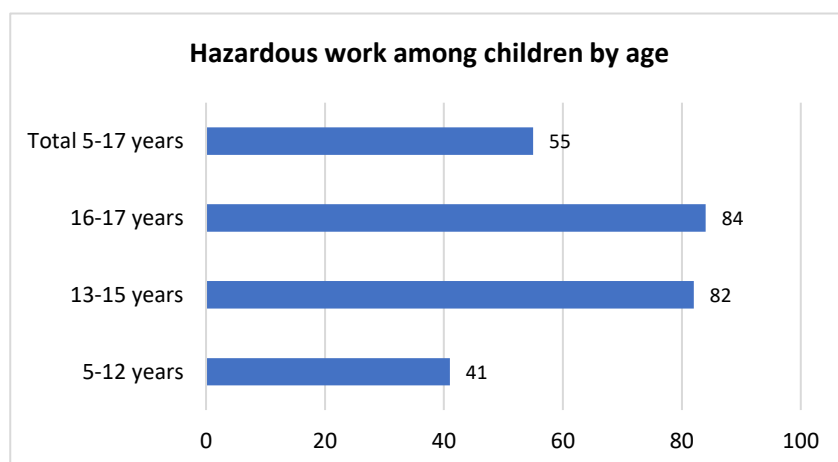
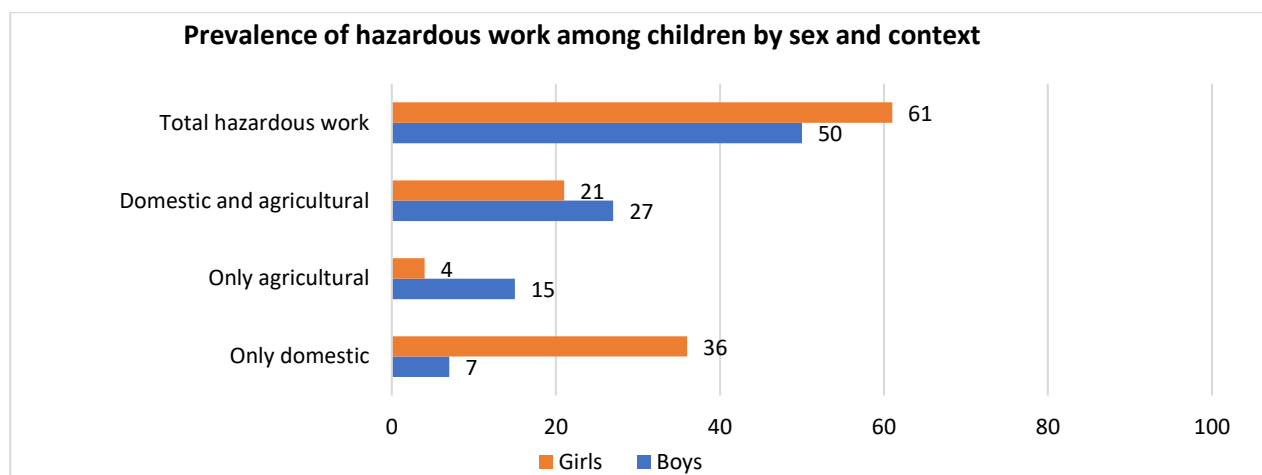
Children's work is not paid in almost all cases, and is carried out on average for two hours per day/13 hours per week.

7.4 Hazardous work

More than half of children (55%) reported to perform dangerous activities, with a higher prevalence among girls (61%) than boys (50%). This is due to the high percentage of girls doing work in the house.

Looking at context analysis, 27% of boys and 21% of girls perform dangerous activities both in the domestic and rural setting.

The percentage of children who reported to only perform domestic tasks is much higher among girls than boys (respectively 36% and 7%) while among those who reported to only do hazardous work in the rural context, boys are the majority (15% compared to 4% of girls).



The proportion of children who reported to have carried out dangerous activities increases with age: 41% for children aged 5-12 years, 82% for children aged 13-15 years and 84% for children aged 16-17 years old.

Most common dangerous tasks in the house:

- Carrying water
- Carrying firewood
- Boiling water
- Fetching water from well

Most common dangerous tasks in rural context:

- De-coating with machete or sharp tools
- Harvesting with a machete or a sickle
- Carrying heavy loads
- Clearing the field

Children's work is not paid in almost all cases, and is carried out on average for two hours per day/13 hours per week.

7.5 Worse forms of child labour

Children from 5 to 17 years old are considered to be involved in the **Worst Forms of Child Labour (WFCL)** if they meet at least one of the following criteria:

- they reported to perform **dangerous activities**
- they reported to perform activities for **more than 40 hours per week** (including light work)

As previously mentioned, **56% of the children surveyed resulted to be involved in the WFCL.**

Almost the totality of the WFCL are due to undertaking dangerous activities (55%) while only 1% of surveyed children reported to work for more than 40 hours per week.

As well as for the hazardous work, **there is a higher prevalence among girls (61%), who are more involved in WFCL in the domestic context, against 50% among boys who are more involved in WFCL in the rural context.**

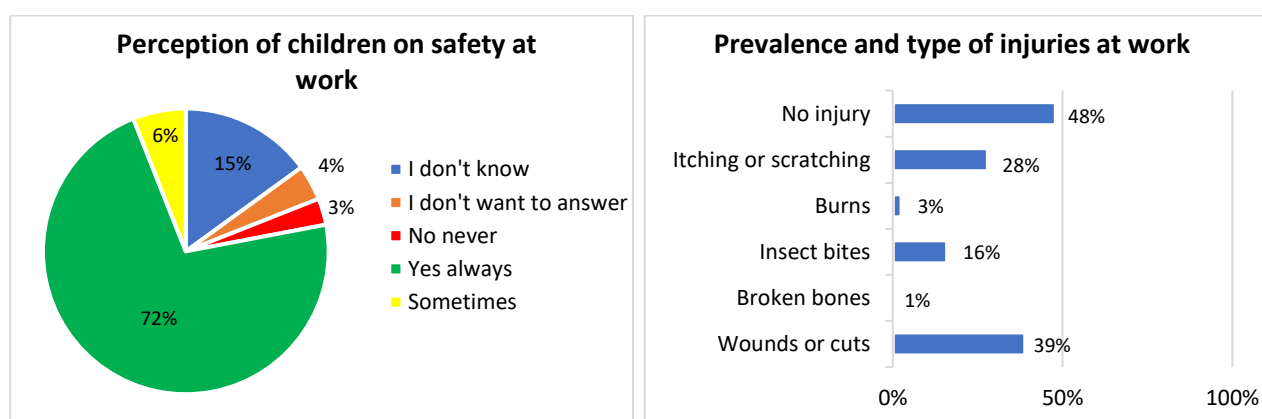
As shown in the table below, the percentage of children in WFCL increases with age.

Context	Sex	5-12 years	13-15 years	16-17 years	Total
Domestic only	Boys	2	11	26	8
	Girls	30	50	47	36
	Total	17	30	34	22
Agricultural only	Boys	6	26	41	15
	Girls	0	6	35	4
	Total	3	17	39	10
Domestic and Agricultural	Boys	25	40	19	28
	Girls	19	31	12	21
	Total	22	36	16	24
Total WFCL	Boys	33	77	85	51
	Girls	48	88	94	61
	Total	41	82	89	56

7.6 Working environment

Although 72% of interviewed children said they always feel safe while working in the fields, **more than half of them reported at least one injury while performing their tasks.**

The most recurrent injuries are wounds or cuts (39%), itches or scratches (28%) and insect bites (16%).



8. Findings from the Focus Group Discussions

Qualitative information was collected through 24 Focus Group Discussion (FGD) 6 in each of the 4 largest communities of the target areas, for adults, adolescents and children, divided by sex. The aim of the FGDs was to determine communities' perceptions and practices on children rights and abuse, child labour, protection mechanisms, and gender norms.

Perception on child labour



In the culture of the Ivorian people in general, child work is part of a socialization process, and learning agricultural tasks is considered an approach for making children responsible for their own lives, the survival of their families and, by extension, that of the community to which they belong.

The results of this study are partly in line with this view. In fact, according to the FGD participants, the presence of children in the plantations or in other household activities is part of their initiation to future life, through learning about the activities carried out by their ancestors, which they will have to continue. The perspective of preserving the family heritage thus underpins the involvement of children in work.

The views of adolescents and children are not that different as they consider their work as a way to support and their parents in carrying out their activities.

Type of work done by children

The FGDs confirmed the interviews' findings whereby children work almost daily in the domestic context and a little less in the rural context. In the domestic context, the tasks include washing dishes, sweeping the house, washing clothes, fetching water from the source, cooking, etc. The field work is anchored in the mentality since childhood, to the point where for the children *"a child must go to the field with his mother, draw water, wash his father's, mother's, grandfather's or uncle's clothes"*.

Sexual division of labour

The communities are unanimous that there is a difference between the work done by girls and boys because *'men and women do not have the same types of activities'*. The participants reported that girls are allocated to activities that do not require major physical effort, while boys to the work that needs more strength, particularly in the field. However, this is in contrast with what reported by the children in the interviews, where it found that the majority of dangerous and heavy works are done by girls in the house.

Occurrence of child labour

According to the actors we met, the phenomenon of child labour does not exist in their communities. In fact, the tasks performed by children are part of their learning process. *'Teaching a child to do something is not child labour. there is no such practice as child labour in our locality'*.

Adolescents reported that while domestic work that is carried out almost every day, the work in the plantations are done by children only on days when there is no school. They said they know that some jobs that are forbidden to children, for example *'drawing and carrying water for a long time'*, and that they don't feel safe when working with sharp objects.

Violence and exploitation of children

Adult participants admitted that violence exists in the communities in several forms, but they mostly referred to psychological violence *'we shout at the children'* and other abusive parenting practices.

In reverse, they all said that sexual violence and exploitation, physical abuse, and child marriage and forced marriage do not exist in their communities. However, some participants revealed situations of domestic violence even though they referred to this as to *'arguments between the spouses in their homes'*.

As for the adolescents and children, their lack of knowledge about violence and exploitation emerged from the discussions and contributed to their non-appreciation of these points.

Child protection in communities

FGD participants all agree that protection of children exists in the communities although it is not done through formal mechanisms but through family protection mechanisms (recourse to parents or elders in the community) or the system put in place by the village authorities (fines to be paid to the community and sensitization of the people who perpetrate violence). The community only refers the case to the policy when not able to find an internal solution.

Gender analysis of access and control of resources

The gender analysis was done from the perspective of access and control of services and goods on the part of girls, boys, women and men. Criteria included food shopping, household chores and childcare, family income, education, birth registration and health service. Overall, control of economic services and the management of family remain predominantly in the hands of men, particularly the family income and the means of subsistence/agriculture.



As for women, they mainly control the purchase of food for the family, household and childcare tasks, and the collection, handling, management, storage and treatment of water.

Participants said that other services are accessed and controlled by both men and women equally, such as school management committees and parent-teacher associations, family and school education, family

health care, community health services, family planning, farmers' organizations, water and sanitation points and means of transport.

Adolescents reported to have access to and control over all services and that girls and boys have equal access to different services, except for sexual/reproductive health services. For children is clear that they have no control over services in the household and community, both girls and boys.

Proposed actions

Within the framework of the project, the communities have proposed several actions to improve their living conditions. They are mostly interested in the financing of livelihood activities (business fund, livestock project), making inputs available to the farmers, increasing the value of crops by improving prices. In addition, they propose the establishment of apprenticeship centers for hairdressing, sewing, mechanics and ironwork.

Awareness-raising was also mentioned by the FDG participants as an activity to be carried out within the framework of the project, with specific focus on the role of parents in protecting children.

Children wished for adults to ensure protection to make them feel safe, giving them advice and taking them to school every day, and learning jobs for the future.

9. Recommendations

The priority areas identified by the study findings are the high rate of child labour including its worse forms, the high number of children who never enrolled into school, the low knowledge on specific aspects of child rights and abuse as well as on key nutrition and hygiene practices, and the need of increasing and diversifying families' income. The following recommendations have been suggested, in alignment with the previous baseline study and the planned project components:

To Save the Children:

- Sensitize producers to keep children in school, as non-schooling has been identified by this study as a factor favouring child labour as well as a consequence of it;
- Increase awareness among producers and household members on differences between socializing work and child labor, WFCL risks for children health and development, hazardous work, works to be abolished, child exploitation, consequences of child abuse, and child protection mechanisms;
- Support interventions to increase knowledge and promote good practice on hygiene and nutrition;
- Strengthen and support the Child Protection Committees (CPE) to ensure effective protection of children in the target communities. To this end, activities to animate the CPEs and referral actions could be initiated in order to make these entities operational in the fight against child labour;
- Advocacy with local administrative authorities for disadvantaged communities to support the construction of additional schools or classrooms, primary health centres, village pumps, electrification and the implementation of child protection projects;
- Supporting communities in the development of community action plans and their implementation.
- Support entrepreneurial capacity of vulnerable households through training, development of local financing systems and VSLA, income-generating activities and diversification of source of income.

To state actors:

- Improve the living standards of producer households by strengthening their knowledge on high-yield farming techniques;
- Strengthen the capacity of social services to deal with cases of abuse;
- Provide specific support to children living in producer households to retain them in school as long as possible, also by developing literacy and training programs within communities;
- Establish mechanisms for registering children with the birth and civil registry. This will facilitate the enrolment of children in primary school or learning centres;
- Encourage agricultural cooperatives to make agricultural inputs available to producers.

