



DJIBOUTI

UNHCR
2014-2015
GLOBAL APPEAL



UNHCR's planned presence | 2014

| | |
|--------------------------|-----------|
| Number of offices | 3 |
| Total personnel | 44 |
| International staff | 8 |
| National staff | 32 |
| UN Volunteers | 4 |

Overview

Working environment

- The political and security situation in Djibouti is currently stable. However, the country has limited natural resources and is struggling to recover from six consecutive years of drought. These challenges have had a negative socio-economic impact on the host community and the people of concern to UNHCR.
- Djibouti plays a considerable role in international efforts to restore peace in Somalia and has been party to discussions for reaching a political settlement. Djibouti has grown as a regional hub for international forces combating terrorism and piracy in the Gulf of Aden, the Red Sea and the Indian Ocean.
- Djibouti has a high national unemployment rate, placing further economic pressure on the country. Work opportunities and prospects of local integration for refugees are limited, which has implications on their livelihood opportunities.

- Djibouti is host to over 21,000 refugees, mainly from Somalia, who mostly reside in Holl Holl camp, which reopened in 2011, and Ali Addeh camp.
- Given its geographic location and environmental conditions, as well as the socio-economic and security situation in the region, Djibouti has also increasingly become a transit country for mixed migratory movements to other countries such as Yemen.
- In 2014-2015, the Government of Djibouti will continue to provide land for the establishment of refugee camps, and the *Office National d'Assistance aux Réfugiés et Sinistrés* (ONARS) will manage water, food distribution and security.

People of concern

Djibouti hosts over 25,000 people of concern to UNHCR, including over 21,000 refugees and more than 4,200 asylum-seekers. This population includes Somalis, Ethiopians and Eritreans, the majority of whom fled as a result of conflict and violence in their countries of origin, with women and children representing over 70 per cent of the refugee population in the two camps.

Planning figures

| Type of population | Origin | Dec 2013 | | Dec 2014 | | Dec 2015 | |
|--------------------|----------|------------------|---------------------------|------------------|---------------------------|------------------|---------------------------|
| | | Total in country | Of whom assisted by UNHCR | Total in country | Of whom assisted by UNHCR | Total in country | Of whom assisted by UNHCR |
| Refugees | Eritrea | 400 | 400 | 610 | 610 | 760 | 760 |
| | Ethiopia | 510 | 510 | 480 | 480 | 600 | 600 |
| | Somalia | 20,190 | 20,190 | 21,580 | 21,580 | 22,080 | 22,080 |
| | Various | 20 | 20 | 10 | 10 | 10 | 10 |
| Asylum-seekers | Eritrea | 900 | 900 | 780 | 780 | 840 | 840 |
| | Ethiopia | 3,230 | 3,230 | 3,950 | 3,950 | 4,430 | 4,430 |
| | Somalia | 40 | 40 | 40 | 40 | 40 | 40 |
| | Various | 50 | 50 | 60 | 60 | 80 | 80 |
| Total | | 25,340 | 25,340 | 27,510 | 27,510 | 28,840 | 28,840 |

| Response |

Needs and strategies

In 2014, the Office, together with its partners, will focus on life-saving activities in Djibouti while providing protection and assistance to people of concern and improving the operational context in the country. Building on the work completed in 2013, this will be achieved in 2014 through focus on five priority areas: health and nutrition; water and sanitation; education and self-reliance/livelihood activities; sexual and gender-based violence (SGBV); and durable solutions.

Mortality rates of children are below the UNHCR standard, and there is a need to reduce the high prevalence of acute malnutrition and anaemia among children of 6-59 months. To this end, UNHCR will focus on improving health standards and immunizations, especially among children. In addition, strengthening the growth monitoring activities for all children below five-years old and improving the coverage of measles immunizations to 95 per cent will be priority activities.

In the area of water and sanitation, there is a need to increase the average supply of potable water from 11 to 20 litres per person per day, to increase family latrine coverage in the camp from 70 per cent in 2013 to 80 per cent in 2014 and to improve the hygiene and sanitary conditions in both Ali Addeh and Holl Holl camps.

UNHCR will focus on both increasing the percentage of children enrolled in primary school as a priority in 2014 and raising the ratio of teachers with professional teaching qualifications. In addition, the Office will engage with the Government of Djibouti on the development of a curriculum meeting refugee needs. This will include addressing problem areas and creating opportunities for secondary and tertiary education, as well as vocational training.

With respect to self-reliance, the implementation of income-generating activities will be improved. Moreover, a link between vocational training and livelihood activities involving refugees and host communities will be established as a means of fostering *de facto* local integration.

In the absence of possibilities for local integration as a durable solution, UNHCR will continue its efforts to advocate for resettlement as the most viable durable solution for refugees. The Office has planned for the return of 500 refugees to Somalia after the completion and collection of intentions of return in 2013.

Main objectives and targets for 2014

The following matrix contains examples of some of the main activities planned in 2014. Using a selection of objectives from UNHCR's programme plans for the 2014-2015 biennium, it is designed to illustrate:

- what – under the global needs assessment planning and prioritization process – has been planned (**Planned activities**) for particular groups of people of concern (**People of concern**);
- the identified needs that can be covered if full and flexible funding is made available (**2014 comprehensive target**); and
- the needs that may not be met if funding falls short of the ExCom-approved budget (**Potential gap**). The estimation of a potential gap is based on the country operation's own assessment of the likely impact of a global funding shortfall. Calculations are based on various criteria, including the particular context, strategic priorities and

experience of resource availability for the respective area of activity in previous years.

Activities under objectives on child protection (including best interest determination), education and prevention and response to sexual and gender-based violence (SGBV) are core areas which are given priority in the allocation of funding (**priority area**). In order to ensure the necessary flexibility in the allocation of funds, UNHCR relies on unrestricted contributions from its donors.

It should be understood that in some cases, targets for activities or delivery of services may not be reached for reasons other than a funding shortfall, e.g. lack of access to people of concern, cases not reported, changing circumstances, security problems, insufficient capacity to implement all programmes planned, etc. In the Global Report 2014, an explanation of why any target may not have been reached will be provided.

| PLANNED ACTIVITIES | PEOPLE OF CONCERN | 2014 COMPREHENSIVE TARGET | POTENTIAL GAP |
|---|-------------------|---------------------------|----------------------|
| Basic needs and essential services | | | |
| Health of the population improved | | | |
| The presence of adequate staff and the participation of the community in the overall management of health services will help to improve the health status of people of concern by increasing awareness, prevention and treatment of health issues. | | | |
| Crude mortality rate (per 1,000 population per month) | Refugees | 0.10 | 0.40 |
| Extent to which people of concern have access to primary health care | Refugees | 100% | 0 gap |
| Population has optimal access to education | | | |
| Currently, only primary education is offered in the camps, where an increase in enrolment rates is needed and will remain a priority for UNHCR. Access to secondary and tertiary education and vocational training will reduce the exposure of refugee youth to crime and other harmful activities. | | | |
| Percentage of primary school-aged children enrolled in primary education | Refugees | 100% | priority area |
| Percentage of teachers with professional teaching qualifications | Refugees | 70% | 65% |
| Population has sufficient basic and domestic items | | | |
| The monthly and regular distribution of core relief items (CRIs) improves refugees' living conditions. The provision of CRIs will enhance the protection of refugees, for instance by reducing exposure to sexual and gender-based violence (SGBV) through the provision of kerosene, thereby reducing the need to gather firewood. | | | |
| Percentage of households whose needs for basic and domestic items are met | Refugees | 100% | 60% |
| Percentage of women with sanitary supplies | Refugees | 100% | 0 gap |
| Population lives in satisfactory conditions of sanitation and hygiene | | | |
| The combined sanitation and hygiene activities will include an increase in the number of latrines, which will positively impact refugees' living conditions in the camps. | | | |
| Number of people of concern per hygiene promoter | Refugees | 500 | 500 |
| Percentage of households with drop-hole latrine or drop-hole toilet | Refugees | 95% | 15% |

Shelter and infrastructure established, improved and maintained

Under challenging climatic conditions, long-lasting shelter will enhance the protection of refugees by providing safety from harsh weather conditions, in addition to reducing the risk of insecurity and sexual and gender-based violence.

| | | | |
|--|----------|-------------|------------|
| Number of people of concern per shelter | Refugees | 5 | 2 |
| Percentage of households living in adequate dwellings | Refugees | 100% | 95% |

Nutritional well-being improved

Supplying food supplements will contribute to reducing acute malnutrition, severe acute malnutrition rates and prevalence of anaemia in children and women of reproductive health age (15-49 years). Among the refugee population, based on a survey where over 35 per cent of children suffer from anaemia, UNHCR aims to reduce this level to at least 20 per cent by the end of 2014.

| | | | |
|--|----------|------------|------------|
| Prevalence of anaemia in children (6-59 months) | Refugees | 20% | 10% |
|--|----------|------------|------------|

Supply of potable water increased or maintained

The construction and rehabilitation of water infrastructures will increase the average supply of safe drinking water to refugees.

| | | | |
|---|----------|------------------|-----------------|
| Number of people of concern per usable well/handpump | Refugees | 250 | 2,050 |
| Average number of litres of potable water available per person per day | Refugees | 20 litres | 7 litres |

Security from violence and exploitation

Risk of sexual and gender-based violence (SGBV) is reduced and quality of response improved

In 2014, the partnership with the *Union Nationale des Femmes Djiboutienne* to strengthen SGBV response and prevention mechanisms will continue. This will, through activities such as sensitization campaigns and information dissemination, further build the capacity of the community, and men in particular, for active participation in prevention and survivor support.

| | | | |
|---|----------|-------------|----------------------|
| Extent to which known SGBV survivors receive appropriate support | Refugees | 98% | priority area |
| Extent to which community is active in SGBV prevention and survivor-centred protection | Refugees | 100% | priority area |
| Number of awareness-raising campaigns on SGBV prevention and response conducted | Refugees | 12 | priority area |

Community empowerment and self-reliance

Self-reliance and livelihoods improved

Self-reliance activities such as sewing, soap making, creating small businesses, plumbing, masonry, and computer literacy will empower refugees and host communities economically by offering livelihood opportunities while fostering peaceful coexistence.

| | | | |
|--|----------|-------------|------------|
| Percentage of people of concern (18-59 years) with own business/self-employed for more than 12 months | Refugees | 80% | 70% |
| Percentage of young people aged 15-24 years enrolled in certified livelihoods training | Refugees | 100% | 90% |

Durable solutions

Potential for resettlement realized

Increasing the capacity of resettlement staff will assist UNHCR in meeting resettlement quotas allocated to the operation.

| | | | |
|--|----------|-------------|------------|
| Percentage of women and girls at risk among those who departed for resettlement | Refugees | 100% | 80% |
| Percentage of people of concern identified in need of resettlement who have departed for resettlement | Refugees | 100% | 70% |

| Implementation |

Partners

Implementing partners

Government agencies:

Ministry of Interior (ONARS), Ministry of Urbanism, Housing and Environment

NGOs:

Association pour la protection de l'enfance et pour l'épanouissement de la Famille, Care Canada, Lutheran World Federation, *Union Nationale des Femmes Djiboutienne*

Others:

IGAD, UNDP, UNFPA, UNICEF, WFP

Operational partners

Others:

IOM, Norwegian Refugee Council

Coordination

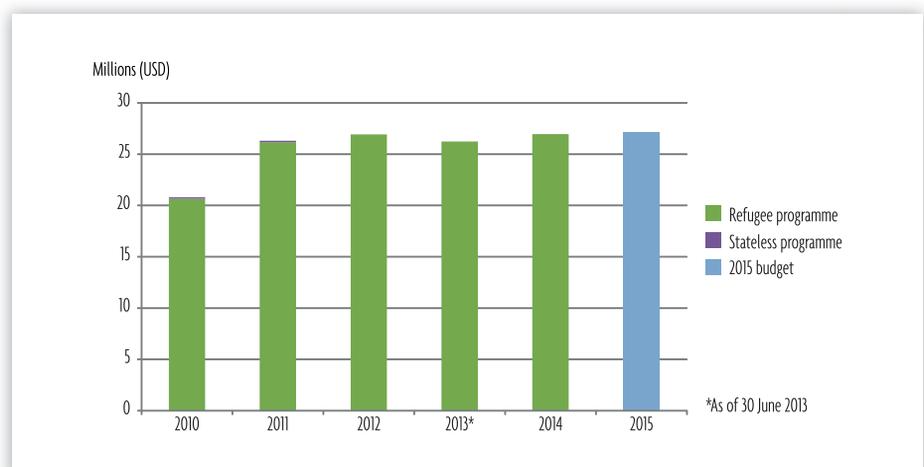
UNHCR maintains close cooperation with the Government, other UN organizations, and national and international NGOs in order to deliver protection and assistance in all major sectors to refugees in a collective and comprehensive manner.

The Government counterpart, ONARS, is UNHCR's main implementing partner in the camps and will continue to oversee camp management, security, water and food distribution. The Ministry of Urbanism, Housing and Environment implements environmental activities and continues to provide mud stoves to refugee communities. WFP will continue supplying food rations to refugees in the camps and ensure that the basic nutritional needs of refugees are covered. UNICEF will maintain its significant contribution to coping with the drought by trucking water and implementing complementary nutritional and educational activities. Other efforts by implementing partners include SGBV-prevention and response activities, primary education services, income-generating activities, as well as HIV/AIDS prevention campaigns for refugees.

| Financial information |

Over the last four years, the financial requirements for UNHCR's operation in Djibouti have grown from USD 20.8 million in 2010 to a revised 2013 budget of USD 26.2 million, in order to address the needs of the people of concern, many of whom were affected by the 2011 famine that caused an outflow from Somalia. In 2014, the financial requirements for the operation are set at USD 27 million, with the entire budget allocated to the refugee programme. A shortfall in 2014 funding would present critical gaps prohibiting UNHCR from addressing activities related to water supply, secondary education, vocational training, self-reliance and shelter.

Budgets for Djibouti | 2010–2015



2014 budget for Djibouti | USD

| Budget breakdown | PILLAR 1 Refugee programme | Total |
|---|----------------------------------|-------------------|
| 2013 revised budget (as of 30 June 2013) | 26,238,538 | 26,238,538 |
| Favourable protection environment | | |
| Access to territory and <i>refoulement</i> risk reduced | 811,650 | 811,650 |
| Subtotal | 811,650 | 811,650 |
| Fair protection processes and documentation | | |
| Registration and profiling | 504,766 | 504,766 |
| Status determination procedures | 435,366 | 435,366 |
| Civil registration and status documentation | 606,650 | 606,650 |
| Subtotal | 1,546,783 | 1,546,783 |
| Security from violence and exploitation | | |
| Prevention and response to SGBV | 493,366 | 493,366 |
| Protection of children | 561,650 | 561,650 |
| Subtotal | 1,055,017 | 1,055,017 |
| Basic needs and essential services | | |
| Health | 5,461,917 | 5,461,917 |
| Reproductive health and HIV services | 462,232 | 462,232 |
| Nutrition | 652,917 | 652,917 |
| Food security | 92,266 | 92,266 |
| Water | 2,854,085 | 2,854,085 |
| Sanitation and hygiene | 1,284,117 | 1,284,117 |
| Shelter and infrastructure | 2,667,092 | 2,667,092 |
| Basic and domestic items | 1,197,816 | 1,197,816 |
| Services for people with specific needs | 1,057,010 | 1,057,010 |
| Education | 1,985,017 | 1,985,017 |
| Subtotal | 17,714,468 | 17,714,468 |
| Community empowerment and self-reliance | | |
| Natural resources and shared environment | 751,650 | 751,650 |
| Self-reliance and livelihood activities | 1,322,201 | 1,322,201 |
| Subtotal | 2,073,851 | 2,073,851 |
| Durable solutions | | |
| Voluntary return | 416,650 | 416,650 |
| Resettlement | 611,917 | 611,917 |
| Subtotal | 1,028,567 | 1,028,567 |
| Leadership, coordination and partnerships | | |
| Coordination and partnerships | 405,201 | 405,201 |
| Donor relations and resource mobilization | 142,100 | 142,100 |
| Subtotal | 547,301 | 547,301 |
| Logistics and operations support | | |
| Logistics and supply | 603,632 | 603,632 |
| Operations management, coordination and support | 1,575,632 | 1,575,632 |
| Subtotal | 2,179,265 | 2,179,265 |
| 2014 total budget | 26,956,902 | 26,956,902 |