

COUNTRY STRATEGY

In support of the Government of Djibouti's priorities and in line with the UN Development Assistance Framework and WFP's corporate Strategic Plan, WFP's strategic focus in Djibouti is to contribute to the Government's efforts to improve food and nutrition security. In particular, focus will be on enhancing resilience of the rural, urban, and refugee populations to overcome and manage chronic stressors and shocks. WFP will support the Government build a national safety net system with a food and nutrition security lens, including well targeted and comprehensive curative and preventive nutrition approaches and establishing a nationally owned school feeding programme. WFP has been present in Djibouti since 1978.



Photo: © WFP

OPERATIONS

	Project Duration	Planned number of people	Total requirements (in USD)	Total received (in USD)	Total Funded (%)	6 Months Net Funding Requirements (in USD)*	Top 5 Donors
PRRO 200824 : Enhancing the resilience of chronically vulnerable rural, urban and refugee populations and reducing undernutrition in Djibouti	June 15 – Dec 17	75,600	39,340,108	7,556,226	19%	6,600,529	Japan, UNCF, European Commission, Canada and Multilateral
DEV 200498 : Support for National School feeding Program	Jan 13 - Dec 17	17,725	5,235,502	3,235,364	38%	110,663	Canada, Multilateral, Switzerland, Saudi Arabia and Private Donors

*October 2015 – March 2016

Summary of WFP assistance: WFP aims to reduce short term hunger among refugees and rural and urban communities affected by recurrent droughts and increasing food prices through targeted relief and early recovery interventions, while developing national and community capacities. Through its operations, WFP contributes to the Government's efforts to improve food and nutrition security.

The relief operation supports drought affected populations and refugees through improved food access (MDGs 1, 3 and 7). It consists of general food distribution for refugees and severely food insecure households. The recovery component targets moderately food insecure populations through food assistance for assets (FFA) activities. These activities allow vulnerable households to meet their immediate food needs while developing sustainable physical assets to protect their livelihoods and to increase their resilience to shocks. Malnourished children below five years, pregnant and nursing women, malnourished people living with HIV and tuberculosis patients under treatment are also assisted (MDGs 4, 5 and 6). In response to the livelihood deterioration of vulnerable groups in Djibouti City during the lean season (July – September), WFP is providing income transfers using food vouchers to food insecure households to meet their minimum food needs.

WFP's development project aims to improve access to basic education for all primary and pre-school children in rural areas, by providing hot morning and mid-day meals and a take home ration of vegetable oil for girls. The take home ration serves as an incentive for parents to send girls to school and discourages them from dropping out of school to get married. The objective is to increase school enrolment, attendance retention and school success for boys and girls in WFP assisted schools. The project also intends to motivate poor rural households to invest more in human capital in support of MDGs 2 and 3.

OPERATIONAL HIGHLIGHTS

ACHIEVEMENTS	ISSUES/CHALLENGES
<ul style="list-style-type: none"> The escalation of the conflict between the Shi'ite Houthis and Yemen President Hadi's coalition backed by Western and Gulf allies has resulted in internal and external population displacement, including Yemeni nationals seeking refuge in Djibouti. WFP has been responding to the crisis by providing food assistance, including nutritional support to the registered refugees. Following the conflict in Yemen, Djibouti has become a crucial logistic hub for all humanitarian assistance to Yemen. WFP has activated the logistic cluster and UNHAS in Djibouti. 	<ul style="list-style-type: none"> The lack of cooperating partners, particularly NGOs specialised in nutrition and food security, remains a big challenge. Direct bilateral in-kind donations from countries in the region to the refugees from Yemen has enhanced the need for closer coordination on overall assistance being provided.

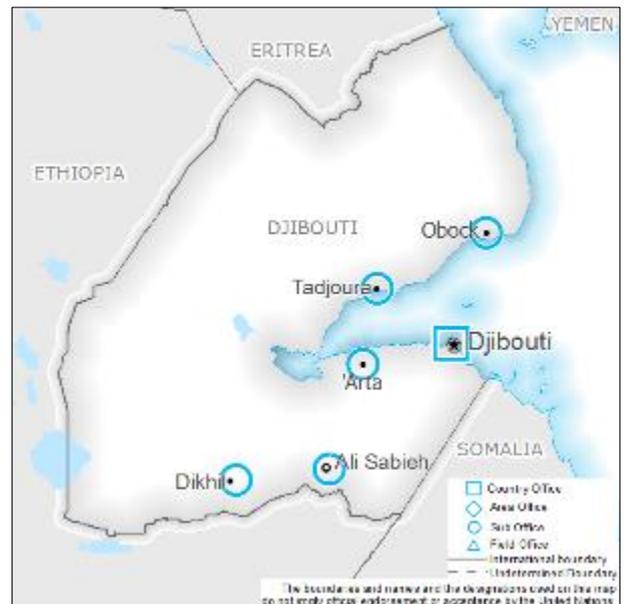
PARTNERSHIPS

Given the limited number of cooperating partners in Djibouti, it is critical to develop collaborative and strategic partnerships that are focused on effectively achieving impact and to build capacity of the Government to deliver and manage programmes. Through its partnership with IFAD, FAO and the Ministry of Agriculture, WFP is building a strong alliance to further the resilience agenda. WFP works closely with the nutrition alliance in Djibouti (the Government, UNICEF, WHO, FAO, UNHCR, WFP and NGOs) to develop a well-targeted and comprehensive curative and preventive nutrition approach for rural and urban food insecure people and refugees. WFP is also partnering with the Government's State Secretary for National Solidarity (SESN) and Agence Djiboutienne de Developpement Social - Djiboutian Social Development Agency (ADDS) and the World Bank on urban nutrition safety net programming. On HIV/AIDS and TB, WFP is actively involved in providing nutritional support and engaging very closely with UNDP, who is the primary recipient of funds from the Global Fund, as well as with UNAIDS, WHO, UNICEF and other partners.

COUNTRY BACKGROUND

Djibouti is a less developed, middle income and food deficit country. With a population of more than 818,000 people and a life expectancy of 58 years, Djibouti is ranked 170 out of 187 countries on the 2014 UNDP Human Development Index. The country has some of the worst social indicators in the world; 42 percent of the population lives in absolute poverty with 74 percent living below USD 3 per day. Djibouti is also dependent on external markets to feed its population and imports 90 percent of its food requirements.

According to the preliminary results of the most recent Comprehensive Food Security and Vulnerability Assessment (CFSVA) conducted in June 2014, over 2 percent of the population is severely food insecure and just under 10 percent moderately food insecure. However, these rates are significantly worse in the rural areas compared to the capital. The situation in Obock and Dikhil regions raise particular concern, as nearly 10 percent of the population is severely food insecure and almost half of the population is considered moderately food insecure.



According to the most recent Standardized Monitoring and Assessment of Relief and Transitions (SMART; UNICEF-2013), global acute malnutrition among children under the age of five was measured at almost 18 percent in 2013. Chronic malnutrition increased significantly from 31 percent in 2010 to 34 percent in 2013. The prevalence of tuberculosis is estimated at 868 per 100,000 inhabitants, while the HIV prevalence among adults is estimated at almost 3 percent.

Djibouti is located in the horn of Africa and has been relatively stable in comparison to its neighbouring countries. Djibouti is now home to over 18,000 refugees (mainly from Somalia, Ethiopia and Yemen). In February 2013, legislative elections were held with the participation of the opposition, who had not participated in the previous two elections. The last presidential elections were held in April 2011 for a five year mandate. The next presidential elections will be held at the beginning of 2016.