



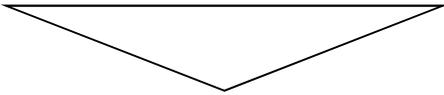
**DJIBOUTI TRANSITIONAL INTERIM COUNTRY  
STRATEGIC PLAN  
(YEAR 2018-2019)**

<b>Duration</b> (starting date – end date)	<b>January 2018-June 2019</b>
<b>Total cost to WFP</b>	<b>USD 27,053,688</b>
<b>Gender and Age Marker Code *</b>	<b>2A</b>

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## EXECUTIVE SUMMARY



WFP's Transitional Interim Country Strategic Plan for Djibouti will cover the period January 2018 to June 2019. This plan will guide WFP interventions and strategy during the completion of the Zero Hunger Strategic Review and the formulation of the Country Strategic Plan. During the transition period, WFP will maintain its humanitarian assistance capacity while sharpening its focus on social protection, human capital development and resilience.

In partnership with the United Nations High Commissioner for Refugees, WFP will ensure that the food and nutrition security of refugees and asylum seekers, as well as all their basic needs, are adequately addressed.

WFP will continue to enhance the resilience of chronically vulnerable rural and urban populations, and will work towards reducing undernutrition while strengthening the systems and institutions responsible for achieving zero hunger in Djibouti.

The Government of Djibouti is WFP's primary partner. Complementary partnerships are at the heart of WFP's vision and strategy in Djibouti to optimize WFP's added value and impact. WFP will work closely with the Rome-based agencies to forward the resilience agenda. Partnerships with the United Nations International Children's Emergency Fund, the United Nations High Commissioner for Refugees and others will also be key to improve nutrition, strengthen safety net interventions in urban areas, and increasing self-reliance in refugee populations.

The transitional Interim Country Strategic Plan is aligned with the Djibouti "Vision 2035" (2015-2019), which integrates the Sustainable Development Goals. The interim plan is also aligned with the United Nations Development Assistance Framework (2018-2022)<sup>1</sup> and contributes to Strategic Results 1, 2, 8 in WFP's Strategic Plan (2017-2021). WFP programmes are guided by the WFP Gender Policy and the Regional Gender Implementation Strategy to ensure gender equality and to increase meaningful participation of affected populations.

This transitional Interim Country Strategic Plan supports the Government in achieving the following strategic outcomes:

- i) Refugees and asylum seekers living in camps in the Republic of Djibouti have access to adequate and nutritious food all year long;
- ii) Djiboutian vulnerable population including children 6-59 months, pregnant and lactating women and girls and Antiretroviral Therapy and Tuberculosis/Directly Observed Treatment clients' nutritional status have an improved nutritional status all year long;
- iii) Food insecure Djiboutian rural and urban populations in targeted regions and neighborhoods have improved access to food by 2019;
- iv) School-aged children in rural Djibouti have access to nutritious meals throughout the school year;
- v) The humanitarian community in the Horn of Africa receives, on request, expertise, services and infrastructure in the area of supply chain throughout the year.

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<sup>1</sup> The Djibouti UNDAF has been validated by the Government of Djibouti and the United Nations Country Team, pending the final UNDP agreement at a global level.

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# 1. COUNTRY ANALYSIS

## 1.1. COUNTRY CONTEXT

1. Djibouti is a low middle income country with a population of 905,000<sup>2</sup>, of which 80 percent live in urban areas.<sup>3</sup> Djibouti ranked 172 out of 188 countries in the 2015 Human Development Index (HDI)<sup>4</sup>. Despite recent economic growth, relative poverty in Djibouti stands at 79 percent, with 42 percent of its population living in extreme poverty. With less than 1,000 km<sup>2</sup> of arable land and a desert-like climate, agricultural production accounts for just 10 percent of food needs, with imports covering the remaining 90 percent.
2. Economic gender inequality is high in Djibouti, where women's income per capita is less than half compared to men's income, and the female labor force participation rate is 36 percent, compared to 68 percent for men.<sup>5</sup> Many women are employed in vulnerable and insecure informal sector jobs, despite often being the main providers for their families.

## 1.2. PROGRESS TOWARDS SDG 2

3. Food insecurity persists in Djibouti: 62 percent of the rural population is food insecure<sup>6</sup>, with households headed by women (65 percent) more affected than households headed by men (57 percent)<sup>7</sup>. The root causes of food insecurity and undernutrition include: structural poverty; insufficient access to water for agro-pastoral activities, exacerbated by natural shocks like El Niño; lack of basic services such as health, education, and water and sanitation; inadequate provision of safety nets; limited employment opportunities; and stresses from the influx of refugees.
4. The Government of Djibouti is committed to achieve Sustainable Development Goal 2 (SDG 2) and is engaging in discussions at ministerial level to ensure alignment between SDG 2 objectives and national priorities, and with the United Nations Development Assistance Framework (UNDAF). Achieving SDG 2 in Djibouti will require close links with Sustainable Development Goal 1 through poverty reduction, job creation, social safety nets and human capital development in order to create conditions for access to food, and with Sustainable Development Goal 5 to promote gender equality.

### *Access to food*

5. Limited access to and control over assets and resources contribute to food insecurity of women and men in Djibouti. There are significant disparities between women and men in terms of access to land, employment, and credit<sup>8</sup>. For example, agricultural production remains a sector predominantly controlled by men.
6. Food insecurity is high in rural areas, where 44 percent of the population is moderately food insecure and 16 percent severely food insecure<sup>9</sup>. Food insecurity has increased considerably in the Tadjourah and Obock regions since October 2015<sup>10</sup>, affected by the El Niño induced drought and late rains, while it has improved in the Arta and Ali Sabieh regions.

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<sup>2</sup> <http://countrymeters.info/fr/Djibouti>

<sup>3</sup> Approximately 724,000 people live in urban areas and 181,000 people live in rural areas

<sup>4</sup> 2016 Human Development Index, [http://hdr.undp.org/sites/default/files/2016\\_human\\_development\\_report.pdf](http://hdr.undp.org/sites/default/files/2016_human_development_report.pdf)

<sup>5</sup> UNDP Human Development Report, 2015.

<sup>6</sup> Food Security Monitoring System bulletin, WFP, October 2016

<sup>7</sup> WFP-Djibouti Country Gender Strategic Plan 2017-2020

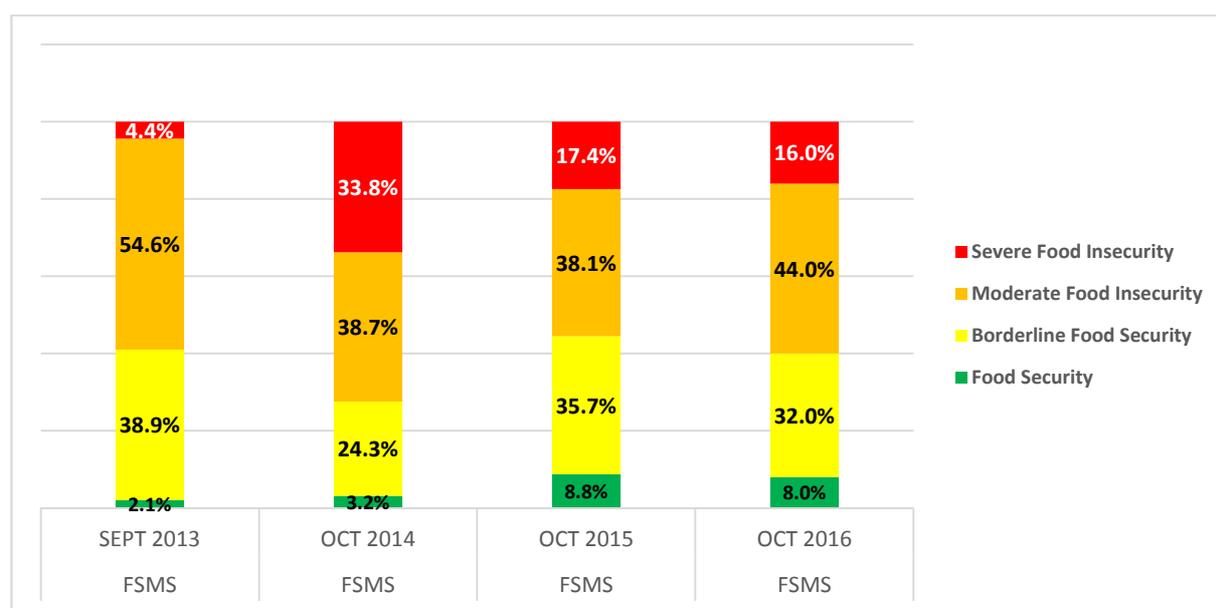
<sup>8</sup> WFP-Djibouti Country Gender Strategic Plan 2017-2020

<sup>9</sup> Food Security Monitoring System bulletin, WFP, October 2016

<sup>10</sup> (+ 18 percent and + 20 percent respectively).

7. Food security in urban areas is higher than in rural areas. The percentage of food insecure households residing in towns outside the capital is at least 11.5, and 6.4 percent in Djibouti City.
8. The majority of refugees in Djibouti are from Somalia and have been living in camps for several years. During 2015-16 there was also an influx of refugees from Yemen. Refugees in Djibouti are unable to meet basic food and nutrition needs without WFP assistance.

**Figure 1: Trends of the food insecurity prevalence in rural environment**



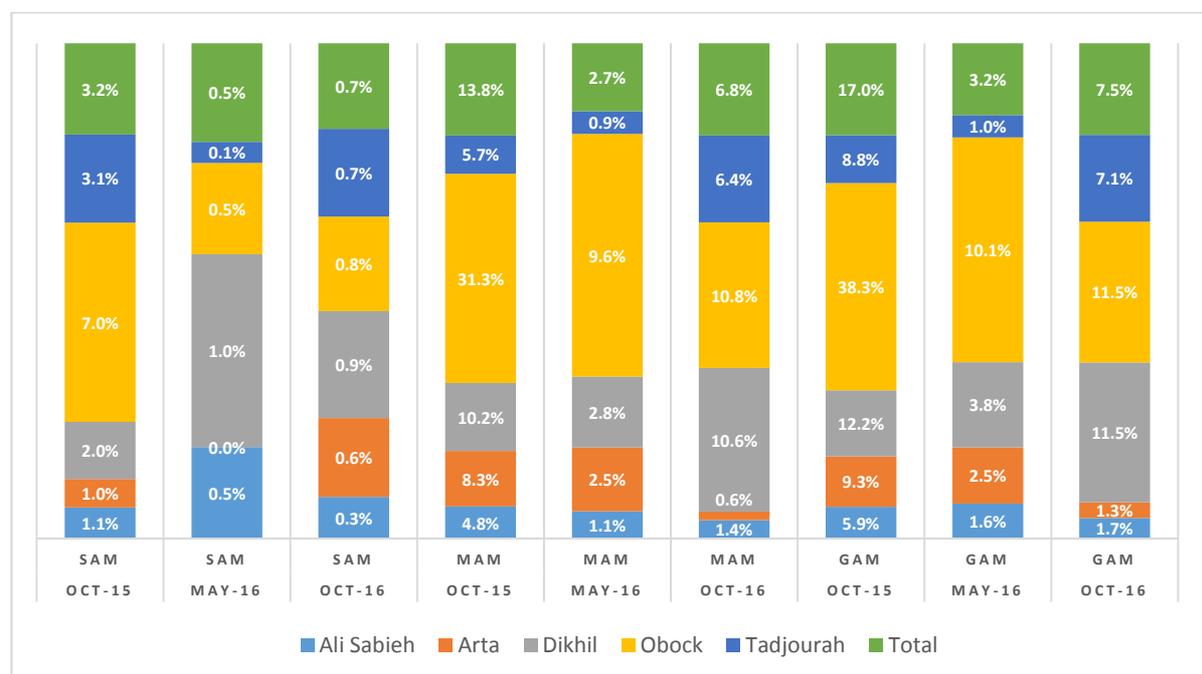
### *End malnutrition*

9. Undernutrition is a pressing concern with 33 percent of the population affected by chronic malnutrition, and with a national rate of Global Acute Malnutrition (GAM) at 18 percent, according to the 2013 Standardized Monitoring and Assessment of Relief and Transitions (SMART). Boys are more prone to malnutrition than girls. Due to cultural practices concerning breastfeeding, boys are weaned earlier than girls, which puts them at a greater risk of malnutrition, especially in food insecure areas.
10. According to the October 2016 Food Security Monitoring System (FSMS) results, malnutrition trends are showing positive changes, with 7.5 percent of children suffering from GAM<sup>11</sup> compared to 17 percent found in the 2015 FSMS. Of the 7.5 percent, 6.8 percent suffer from moderate acute malnutrition (MAM) and 0.7 percent from severe acute malnutrition (SAM). However, these results need to be validated as the SMART and FSMS surveys use different methodologies. In order to update the national information on malnutrition, the United Nations International Children’s Emergency Fund (UNICEF) and WFP have agreed to conduct a new Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey, scheduled for the last quarter of 2017.
11. Undernutrition affects the success of treatment and survival rates of Anti-Retroviral Treatment (ART) patients in Djibouti. According to a 2011 assessment, the prevalence of

<sup>11</sup> Based on Mid-Upper Arm Circumference.

undernutrition among ART patients is 38.4 percent<sup>12</sup>, and 27 percent of households of ART patients are also food insecure and hence more vulnerable to shocks. Among Directly Observed Therapy (DOTS) patients<sup>13</sup>, the prevalence of undernutrition is 57.7 percent.

**Figure 2: Trends of acute malnutrition children 6-59 months (MUAC) per region**



### *Smallholder Productivity, Sustainable Food Systems, and Food Loss*

12. Livestock is the main or sole source of income for 90 percent of the rural population, accounting for only 3-5 percent of the Gross Domestic Product (GDP) and 10 percent of food requirements. Successive droughts have substantially decreased agricultural production and livestock holdings. Lack of water for human consumption as well as for agricultural production and livestock is a major constraint to sustainable food systems.

13. Inadequate food storage and processing and transport facilities contribute to high post-harvest losses and hinder access to food. With a long coastline, the fishing industry in Djibouti has considerable potential, with a potential annual catch of fish and seafood estimated at 50,000 mt. However, partially due to the lack of appropriate vessels and refrigeration, the industry remains a small-scale activity, with a catch of 1,000 mt per year.<sup>14</sup>

### **Macro-economic environment**

15. The private and public investment boom in port related activities continues to spur growth in Djibouti. The International Monetary Fund (IMF) estimated the GDP growth at 6.5 percent in 2015–16, up from 6 percent in 2014 and 5 percent in 2013. Risks to further growth include delays in construction, inefficient management of new infrastructure, economic dependency on neighboring countries, regional security developments, and domestic social and political instability<sup>15</sup>.

<sup>12</sup> Nutritional status and food security of ART DOTS clients evaluation in the republic of Djibouti, November 2011 (by SE-CTILTSP, PLS Santé-PNLT, WFP, RENADP+)

<sup>13</sup> DOTS patients are patients under the Directly Observed Treatment Short course which is the internationally recommended strategy for TB. [http://www.searo.who.int/tb/topics/what\\_dots/en/](http://www.searo.who.int/tb/topics/what_dots/en/)

<sup>15</sup> The Economist Intelligence Unit 2008: 18; Banque Centrale de Djibouti 2010

<sup>16</sup> World Bank Djibouti Overview. <http://data.worldbank.org/country/djibouti>.

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### ***Key cross-sectorial linkages***

16. Sociocultural barriers further hinder women from fully accessing education and earning vocational qualifications. This limits their ability to access the job market and partly explains why women are disproportionately affected by unemployment in the Djiboutian society<sup>16</sup>.
17. Djibouti has a context of a generalized HIV (Human Immunodeficiency Virus)/AIDS (Acquired Immune Deficiency Syndrome) epidemic. The HIV prevalence was estimated at 1.7 percent in 2016 (with a downward trend since 2003). An estimated 9,000 people are living with HIV. The number of deaths due to AIDS was 493 in 2016<sup>17</sup>. Tuberculosis remains a public health problem, although, by World Health's Organization (WHO) estimates, the incidence has declined from 620 cases per 100,000 inhabitants in 2013, to 378 cases per 100,000 inhabitants in 2015.

### **1.3 HUNGER GAPS AND CHALLENGES**

20. While the Government recognizes Djibouti's food insecurity and malnutrition problems and has adopted a range of policies and initiatives, their significance is not adequately reflected in budget allocations and programme implementation. The "Secrétariat d'Etat chargé des Affaires Sociales" (SEAS) developed a social protection strategy in 2012, but the overall policy is still being finalized, leaving a void for a coherent national safety net and social protection approach.
21. Insufficient capacity within the Government to translate national policy into implementation remains a major challenge. Technical support to improve targeting, monitoring and logistics is needed<sup>18</sup> to facilitate efficient and effective implementation of programmes and increase ownership.
22. Funding for WFP programmes mostly come from emergency funds: the United States Agency for International Development/Food For Peace (USAID/FFP Title II), the European Commission Humanitarian Aid (ECHO) and the Central Emergency Response Fund (CERF). These funds are short-term oriented and inadequate to address the underlying causes of acute and chronic malnutrition including micronutrient deficiencies in the medium and long-term.
23. Coordination mechanisms have also been mainly emergency-driven, following the cluster approach since 2010-2011. The establishment of the "Système de Coordination de l'Aide" in late 2016, a government-led and multi-sectoral coordination mechanism, will help improve linkages between emergency response, rehabilitation and development.
24. In recent years, the Government has made an effort to increase coverage for community nutrition services for children in remote areas. The expansion of services however should be matched with efforts to improve the quality of services, including a better Monitoring & Evaluation (M&E) system and a closer supervision of volunteers by the health personnel.
25. Few non-Government Organisations (NGOs) operate in Djibouti, which also limits capacity to implement activities aimed at reducing hunger and malnutrition.

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16 WFP RBN-Baseline Study Report on Gender Mainstreaming in WFP Djibouti 2016, p 5.

17 Spectrum 2016

18 World Bank Policy Note: Options d'assistance sociale pour la lutte contre la malnutrition: Note de politique. Djibouti. June 2009.

26. Additionally, persistent structural and socio-cultural gender inequalities remain a fundamental obstacle to eliminating hunger in Djibouti.

#### 1.4 KEY COUNTRY PRIORITIES

##### ➤ *Government priorities*

27. In August 2014 the Government launched Vision Djibouti 2035, a new model for economic development. It is based on five main pillars: (i) national peace and unity; (ii) good governance; (iii) a diversified economy; (iv) the consolidation of human capital; and (v) regional integration. It is the first attempt by the Djibouti Government to build a long-term strategy focusing on poverty reduction and sustainable development.

28. Vision 2035 is implemented through “la Stratégie pour la Croissance Accélérée et la Promotion de l’Emploi”<sup>19</sup> (SCAPE) for the period 2015-2019, the first of four quinquennial plans. SCAPE is organized along ten National Development Objectives (NDO), aligned with the SDGs:

<p><b>Axis 1:</b> Economic growth, competitiveness and leading role of the private sector</p> <p><b>Axis 2:</b> Human capital development</p> <p><b>Axis 3:</b> Public governance and institutional capacity building</p> <p><b>Axis 4:</b> Poles of regional and sustainable development</p>	<p><b>NDO 1:</b> Accelerate growth</p> <p><b>NDO 2:</b> Reduce unemployment</p> <p><b>NDO 3:</b> Limit extreme poverty</p> <p><b>NDO 4:</b> Create the conditions for a regional hub</p> <p><b>NDO 5:</b> Better educate and train population</p> <p><b>NDO 6:</b> Widespread coverage of health care</p> <p><b>NDO 7:</b> Reduce gender inequality</p> <p><b>NDO 8:</b> Resolve the question of water</p> <p><b>NDO 9:</b> Combat precarious housing</p> <p><b>NDO 10:</b> Prepare for climate change</p>
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29. In 2011, the Djibouti’s Ministry of Gender and Family Planning promulgated laws to implement women’s rights, including the 2011 Legal Guide on Preventing Sexual Violence and the National Gender Policy 2011-2020.

##### ➤ *United Nations and other partners*

30. The UNDAF 2018-22<sup>21</sup> sets four strategic priorities:

- 1) Inclusive and sustainable economic growth and poverty reduction;
- 2) Strengthening social services and inclusive human development;
- 3) Strengthening the environment and institutions responsible for good governance;
- 4) Strengthening resilience and promoting equitable regional development.

31. The resilience roadmap endorsed in 2013 facilitates a convergence of efforts, especially regarding the lack of water and undernutrition, which are key contributors to eroding resilience in Djibouti. The resilience and food security “sous-groupe de coordination de l’aide” will play an important role in fostering synergies around the resilience roadmap. The Intergovernmental Authority on Development (IGAD), based in Djibouti, also plays an important role in leading the resilience agenda in Djibouti and in the region. In November 2015, the “Regional Conference on Resilience Research and Innovations” took place,

<sup>19</sup> the Strategy for Accelerated Growth and the Promotion of Employment

<sup>20</sup> WFP RBN-Baseline Study Report on Gender Mainstreaming in WFP Djibouti 2016, p 5.

<sup>21</sup> UNDAF 2018-2022 Approval date : May 2017

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bringing together experts, practitioners, policymakers and academics to discuss resilience building in the region, paving the way to establish a permanent regional observatory based in Djibouti.

32. The World Bank's Djibouti Country Partnership Strategy 2014-17 focuses on addressing extreme poverty and inclusive growth. Ongoing projects promote water retention, geothermic energy, health, reinforcement of the education system, and safety nets.

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## **2. STRATEGIC IMPLICATIONS FOR WFP**

### **2.1 WFP'S EXPERIENCE AND LESSONS LEARNED**

33. The 2016 mid-term evaluation<sup>22</sup> of the PRRO and the DEV mid-term review concluded that WFP interventions were relevant to programme objectives and adequately addressed the urgent and protracted needs of vulnerable populations (hosts and refugees). They also noted that WFP interventions in the country were well aligned and mutually reinforcing, demonstrating good coherence internally and with the national strategy.
34. The evaluation recommended to: i) introduce a cash component for the refugees and expand the cash-based transfer modality to all urban poor, using the national registry for targeting; ii) support the community-based management of acute malnutrition (CMAM), mostly for prevention; iii) include a take-home ration component to encourage girls' attendance to schools<sup>23</sup> and support a national school meals policy; iv) reinforce partnerships with development actors: the Food and Agriculture Organization (FAO), the United Nations Development Programme (UNDP), and the International Fund for Agricultural Development (IFAD) to promote a joint approach for resilience programming; v) join the global protection response in Djibouti; vi) continue to improve monitoring and vii) improve resource mobilization through advocacy and visible action.

### **2.2 OPPORTUNITIES FOR WFP**

35. The PRRO evaluation, the DEV mid-term review, the WFP Djibouti Country Gender Action Plan and the conclusions of internal reviews guide WFP to focus its interventions in the following areas:

#### ***Food Access***

- Continue direct food assistance in the short-term and for rural poor and refugee populations, while focusing in the long-run on the development of rural markets and the restoration and development of sustainable livelihoods.
- Support the urban safety-net programme. The urban and peri-urban poor have limited job opportunities, yet there are inadequate social safety nets and direct public assistance targeting urban communities. The World Bank-supported urban safety net programme begins to address this gap, but additional efforts are needed to reach the breadth (target population), depth (scope of support), and length (period of time) required to achieve a significant impact.

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22 Provisional Evaluation report PRRO 200824.

23 Attendance rates for boys and girls in WFP assisted primary and pre-schools are 98.5 percent and 99 percent respectively, according to the November 2015 monitoring, while overall attendance was 79% countrywide (no gender breakdown available). Change in enrolment rate for girls has stabilized while the rate for boys has increased from 7 percent in 2009-2010 to 10 percent in 2013-2014.

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- For refugees, establish a complaints and feedback mechanism, increase cash-based transfers and extend biometric verification to all camps to improve efficiency and effectiveness.
  - Support a nationally owned school meals programme, including setting clear operational milestones to ensure sustainability.

### ***Nutrition***

- Support Government efforts to harmonize programme approaches to prevent and treat malnutrition, including by implementing agreements with the “Agence Djiboutienne de Developpement Social” (ADDS)/SEAS and the Ministry of Health and by providing technical expertise to assist with nutrition policy formulation and programme implementation.
- Partner with UNICEF and the Ministry of Health to conduct a gender analysis and develop a Behavior Change Communication (BCC) strategy to promote appropriate infant and young child feeding (IYCF) practices and hygiene, and with UNICEF and WHO to improve the quality of the community nutrition service. WFP will also engage with UN partners and the Government to discuss how the Scaling Up Nutrition (SUN) movement can be integrated as a priority in the Government’s agenda.
- Assist Government to update the National HIV Strategic Plan 2008-2012 to ensure that the food and nutrition support to HIV and TB patients remains an integral component of the treatment services.

### ***Smallholder Productivity and Sustainable Food Systems***

- Engage with partners to provide technical support to help maximize smallholder productivity by improving access to water and management of scarce water resources, while supporting the development of local markets, reducing post-harvest losses and lowering retail prices through lower transport costs..

### ***Gender***

- Operationalize the WFP Regional Gender Implementation Strategy through the Djibouti Country Gender Action Plan, following the three priorities<sup>24</sup>: evidence-based programmes, meaningful participation of affected populations and gender-transformative and nutrition sensitive programmes.
- This ICSP has the following gender related objectives<sup>25</sup>:
  - i) Improve depth and quality of gender analysis and reporting related to WFP’s areas of intervention;
  - ii) Strengthen balanced community engagement and support government capacities to incorporate gender perspectives and promote equal participation in food and nutrition security programmes;
  - iii) Increase women’s and girl’s decision-making for the benefit of food and nutrition security;
  - iv) Mainstream gender and protection considerations into exiting modalities and innovations.

### ***Logistics***

- Capitalize on WFP logistics expertise to partner with and build capacity of the Government and the private sector. Responding to an increased demand for skilled logistics personnel in the private sector, this will include delivering a logistics training programme that will help

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<sup>24</sup> Regional Implementation Strategy of the Gender Policy 2016-2020: East and Central Africa Regional Bureau, p. 16

<sup>25</sup> As defined in the CGAP 2017-2020

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develop skilled labour in the logistics sector and support the Government's efforts in job creation.

## **2.3 STRATEGIC CHANGES**

36. In 2015, WFP Djibouti signed on to the following strategic results to guide the implementation of its projects:

- i) Vulnerable refugees targeted by WFP for food assistance have adequate daily caloric intake and dietary diversity;
- ii) Access to adequate food of communities supported by WFP is improved;
- iii) Reduced undernutrition rates in the most vulnerable areas targeted by government social safety nets.

37. These results remain relevant with a re-focus on social protection and development of human capital to adjust to Djibouti's newly attained status of lower middle income country. This strategy shift is in line with the national development objectives defined in the implementation strategy of Vision 2035 and SCAPE.

38. The Djibouti port is the principal transit point for cargo in and out of Ethiopia and a key link for commercial transport routes to and from the greater Horn of Africa. To enhance efficiencies in both humanitarian and commercial logistics, the Government of Djibouti and WFP developed a humanitarian logistics base (HLB) which will store up to 65,000 mt for operations in the region. WFP will use the HLB to provide, on request, expertise, services and infrastructure to the humanitarian community and strengthen the logistics capacity in Djibouti. The establishment of the logistics hub, its related skills development training and the dedicated Humanitarian Response Depot (HRD) component<sup>26</sup>, help to further position the country as a vital point for the logistics supply chain in the region.

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## **3. WFP STRATEGIC ORIENTATION**

### **3.1 DIRECTION, FOCUS AND INTENDED IMPACTS**

39. This transitional ICSP will guide WFP's interventions and strategy during the completion of the Zero Hunger Strategic Review, and the formulation of the Country Strategic Plan, scheduled to begin in mid-2019.

40. The transitional ICSP's strategic orientation is in line with the current PRRO activities: unconditional transfers to refugees and the most food insecure Djiboutian populations; nutrition-specific interventions; safety net interventions to mitigate the effects of HIV on the affected households, and strengthen the resilience of vulnerable households to chronic shocks and risks related to climate change. It is also aligned with the Development Project, which supports school meals rural and suburban areas of Djibouti-city.

41. WFP Djibouti has identified two overarching goals in its Country Gender Action Plan: to raise awareness among WFP staff and partners on the importance of Gender Equality and Women Empowerment (GEWE); and to improve the effectiveness of WFP food security and nutrition interventions by integrating gender analysis and protection throughout the programme cycle. These goals will better adapt food assistance to the needs and capacities of women, men, girls, and boys while bringing visibility to the challenges for women and girls in the country.

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<sup>26</sup> The United Nations Humanitarian Response Depot (UNHRD) is a network of depots around the world that stores, manages and transports emergency items for humanitarian organizations.

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### 3.2 STRATEGIC OUTCOMES, FOCUS AREAS, EXPECTED OUTPUTS AND KEY ACTIVITIES

#### **STRATEGIC OUTCOME 1: REFUGEES AND ASYLUM SEEKERS LIVING IN CAMPS IN THE REPUBLIC OF DJIBOUTI HAVE ACCESS TO ADEQUATE AND NUTRITIOUS FOOD ALL YEAR LONG**

42. Since 2013, the number of refugees in Djibouti increased from 23,000 to the current estimated 26,632 people<sup>27</sup>. This number combines the protracted caseload and new arrivals from Yemen and from the Oromo region in Ethiopia. The majority of refugees are hosted in the camps of Ali-Addeh, Holl, Holl and Markazi, while the rest reside in urban areas in Djibouti and Obock ville.
43. SO1 is aligned with the NDO 3<sup>28</sup> of the SCAPE and it is integrated in the Djibouti UNDAF strategic priorities to food security and nutrition. It also contributes to SDG target 2.1, WFP Strategic Result 1.

#### ***Focus Area***

44. The focus of this outcome is crisis response. Given the arid climatic conditions, restrictions on labour movement and lack of livelihood options, food assistance remains the only viable source of livelihoods for refugees living in camps.

#### ***Expected outputs***

45. This outcome will be achieved through the following outputs:
- i) Registered refugees and asylum seekers living in camps receive adequate food assistance all year long in order to protect access to food;
  - ii) All refugee and asylum seeker children 6-59 months and pregnant and lactating women and girls (PLW/G) suffering from Moderate Acute Malnutrition (MAM) have access to treatment services, including provision of specialized nutrition foods and nutrition counselling, to support nutritional recovery;
  - iii) All refugees and asylum seeker children 6-23 months and PLW/G have access to preventive services including provision of specialized nutritious foods and nutrition education in order to meet their basic nutrition needs.

#### ***Key activities***

46. *Activity 1: Provide food assistance and nutrition services, including provision of nutrient rich food and nutrition education and counselling to refugees and asylum seekers living in camps.* WFP will provide support to refugees with monthly food and nutrition assistance all year long.
47. The type and amount of assistance will be informed by market analyses and factors including gender, age and disability. Refugees and asylum seekers registered by UNHCR in refugee camps will receive a mixed modality of food and cash in coordination with UNHCR and the “Office National d’Assistance aux Réfugiés et Sinistrés” (ONARS). ONARS is WFP’s partner for in-kind and cash distributions and Action Africa Help (AAH) for nutrition programmes.
48. WFP will continue the treatment of MAM for PLW/G and children 6-23. To address the high levels of stunting and micronutrient deficiencies, and to prevent deterioration in the

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<sup>27</sup> Joint Assessment Mission (JAM) March 2017

<sup>28</sup> Limit the extreme poverty

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nutrition status of children, WFP will also include a blanket supplementary feeding programme for children 6-23 months. Supplementary rations are provided to other vulnerable groups, including TB patients and people living with HIV through national programmes. The nutrition counselling component attached to these activities will target women and men caregivers to redress discriminatory gender roles.

**STRATEGIC OUTCOME 2: FOOD INSECURE DJIBOUTIAN RURAL AND URBAN POPULATIONS IN TARGETED REGIONS AND NEIGHBOURHOODS HAVE IMPROVED ACCESS TO FOOD BY 2019**

49. To prevent further deterioration and rebuild the food security of Djibouti's highly food insecure rural population, WFP will implement activities to improve access to water for smallholder productivity and livestock. Together with partners, WFP will help the Government take forward interventions that address the underlying causes of vulnerability and to ensure access to food.
50. WFP will target districts with the highest food insecurity levels, and will work with local communities and partners to identify which households are in need of assistance. WFP will target productive asset creation activities in areas where FAO and/or IFAD are present to maximize the impact of its interventions.
51. While providing direct food assistance will remain important, WFP will increase its investment in capacity support for Government-led policies that address food and nutrition access concerns.
52. Given that approximately 80 percent of Djibouti's population live in urban areas and the high rates of poverty and food and nutrition insecurity in those areas, WFP will work with the Government and the World Bank to develop a social protection system to address the needs of the urban poor.
53. This strategic outcome supports the 2013 resilience roadmap and the second and fourth pillar of the Djibouti UNDAF priority areas<sup>29</sup>. It also contributes to SDG 2.1, WFP Strategic Result 1 and 3 and NDO 3 of the Djibouti Vision 2035 and SCAPE.

***Focus Areas***

54. The focus of this outcome is to enhance the resilience of rural and urban populations to climate-related shocks and stressors, through sustainable social service delivery and asset creation.

***Expected outputs***

55. This outcome will be achieved through the following outputs:
  - i) Severely food insecure rural populations have access to food in order to meet their basic food and nutrition needs;
  - ii) Urban food insecure receive seasonal electronic value based vouchers in order to protect access to food;
  - iii) Moderately food insecure rural populations receive seasonal food assistance to participate in community resilience building projects in order to protect access to food and benefit their communities through created/restored assets.

***Key activities***

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<sup>29</sup> Strengthening social services and inclusive human development and strengthening the resilience and promotion of the sustainable and equitable regional development.

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56. *Activity 2: Provide unconditional food assistance to targeted severely food insecure rural households and extreme poor households in urban areas*

*i) Unconditional targeted distributions for households living in severe food insecurity areas:* Unconditional relief assistance including nutrition programmes remains necessary in remote food insecure communities where resilience activities are not feasible. Assistance will focus on Obock and Dikhil, the areas with highest food insecurity and under-nutrition prevalence. An estimated 16,400 people will receive in-kind transfers on a monthly basis. WFP will coordinate efforts with SEAS and the recently launched “Programme de Solidarité Nationale” (PNSF), to align food and nutrition assistance with government priorities and avoid duplication of efforts in the targeted areas.

*ii) Electronic voucher transfer to poorest urban households:* WFP will implement mobile cash transfers between June and October in urban populations as a seasonal safety-net. This activity will be focused on female-headed households, who will receive their entitlements through mobile phones. This is their preferred method for money distributions, as it reduces the waiting time and the exposure to safety issues. This activity will target 20,000 people from urban settings (4,000 households) in poor neighbourhoods of Djibouti city. Beneficiary households are selected using the government unified poverty register, with the support of the World Bank, as a proxy for food insecurity in an urban environment.

57. *Activity 3: Provide conditional food assistance for asset creation for communities in moderate food insecure areas.*

58. WFP and the Ministry of Agriculture will expand their collaboration with IFAD and the World Bank on asset creation, focusing on water catchment, soil fertility and anti-erosion enhancement measures for forage and grazing systems. WFP will select the specific activities based on a consultative approach, which includes integrated context analysis, seasonal livelihood programming and community based participatory planning ensuring women's full participation at all stages<sup>30</sup>. WFP will provide food assistance to 22,200 people (4,440 participants) in areas with moderate prevalence of food insecurity for 180 days on average. Participatory approaches will ensure women's preferences for the type of assets and activities are taken into account.

### **STRATEGIC OUTCOME 3: SCHOOL-AGED CHILDREN IN RURAL DJIBOUTI HAVE ACCESS TO NUTRITIOUS MEALS THROUGHOUT THE SCHOOL YEAR**

59. The transitional ICSP includes school meals for all children in the five rural regions of Djibouti and the suburban area of Djibouti-city who attend preschool, primary and middle schools. This outcome supports equal access to education for boys and girls in targeted pre- and primary schools.

60. WFP's intervention responds to the Government's request for support to establish a viable national school meals programme.<sup>31</sup> This strategic outcome supports NDO3 and 5 of the SCAPE and contributes to WFP Strategic Result 1 and 5 and SDGs 2.1 and 17.9 and the second pillar of the UNDAF: access to basic services.

### ***Focus Areas***

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<sup>30</sup> Aligned with the Axis 4 of the SCAPE : Poles of regional and sustainable development

<sup>31</sup> Attendance rates for boys and girls are 98 percent and 99 percent respectively, according the November 2014 monitoring. Enrollment rate for girls has stabilized while the enrollment rate for boys has increased from 7 percent in 2010 to 10 percent in 2014.

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61. Lack of basic services such as education is a root cause of food insecurity and undernutrition in Djibouti. This outcome intends to improve national institutions and systems to enhance the quality of humanitarian responses and minimizing the need for humanitarian responses in the future.

### ***Expected outputs***

62. This outcome will be achieved through the following outputs:

- i) Targeted children in primary and preschool receive two meals every school day, and a take-home ration in order to achieve equal enrollment and attendance rates for girls and boys and increase school enrolment;
- ii) School-aged children benefit from the development of a national school meals policy and its implementation strategy, in order to meet their food and nutrition needs.

### ***Key activities***

63. *Activity 4: Provide school meals and take home rations to targeted school girls and boys while assisting the development of a nationally owned school meals programme.*

64. Children attending primary (16,500 beneficiaries) and pre-school (500 beneficiaries) in rural areas of Djibouti will receive one meal and a snack per school day, complemented by the government with fresh foods. WFP will provide an in-kind incentive to 205 cooks, 92 percent of whom are female. WFP also provides take-home rations of vegetable oil to girls in grades 3 to 5 on the basis of at least 80 percent attendance (10,000 beneficiaries including family members)<sup>32</sup>. In the schools where the attendance of boys is lower than that of girls, take-home rations will be provided to boys.

65. WFP will reinforce partnerships with UNICEF, WHO and FAO to enhance technical assistance to the Government and achieve a sustainable school meals programme. WFP will accelerate dialogue with the Ministry of Education to support the drafting and approval of a national school meals policy grounded in principles of equity and equality. WFP collaborates with WHO on the planning of a systematic deworming to school-aged children under the framework of school meals in Djibouti.

## **STRATEGIC OUTCOME 4: DJIBOUTIAN VULNERABLE POPULATION (CHILDREN 6-59 MONTHS, PLW/G AND MALNOURISHED ART AND TB/DOT CLIENTS) HAVE IMPROVED NUTRITIONAL STATUS ALL YEAR LONG**

66. The national prevalence of acute and chronic malnutrition reflect a very critical nutritional situation based on the WHO classification criteria. WFP will continue to deliver direct nutrition assistance through treatment and prevention programmes, while strengthening government and health structure capacity to improve service delivery.

67. This outcome is aligned with SDG 2.2, WFP's strategic Result 2; SCAPE NDO 6 and SP2<sup>33</sup> of the UNDAF. During the ICSP, WFP will discuss with the Ministry of Education options to introduce a nutrition education guide in the school curriculum, and will review the standard menus to improve their nutritional value.

### ***Focus Areas***

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<sup>32</sup> 2,500 school children

<sup>33</sup> Strengthening of social services and inclusive human development

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68. The focus of this outcome is resilience building. WFP will support the National Nutrition Programme with interventions to prevent and treat acute and chronic malnutrition among vulnerable populations, in particular women and children.

### ***Expected outputs***

69. This outcome will be achieved through the following outputs:

- i) All Djiboutian children 6-59 months and PLW/G suffering from MAM have access to treatment, including provision of specialized nutrition foods and nutrition counselling, to support nutritional recovery;
- ii) Djiboutian children 24-59 months and PLW/G in areas where GAM rate is above 15 percent have access to specialized nutritious foods while their primary caregivers receive nutrition education in order to ensure basic nutrition needs are met to prevent acute malnutrition;
- iii) All Djiboutian children 6-23 months and PLW/G in areas with the highest rates of chronic malnutrition receive specialized nutritious foods while their primary caregivers receive nutrition education through the closest facility in order to prevent chronic malnutrition;
- iv) All moderate acutely malnourished ART/TB-DOT clients and food insecure households affected by HIV receive nutrition foods and are included in a mitigating safety net programme in order to improve their nutrition status, productivity and food security.

### ***Key activities***

70. *Activity 5: Provide specialized nutritious foods and nutrition education for prevention of chronic malnutrition in children 6-23 months and PLW/G, treatment of MAM in children 6-59 months and PLW/G; and prevention of acute malnutrition among children aged 24-59 months where GAM rates exceed 15 percent.*

71. WFP will leverage its presence in remote areas to facilitate children's access to nutrition prevention services in areas with weak health infrastructures, complementing UNICEF and ADDS prevention programmes in other areas of the country. The prevention component will focus first in areas with the highest food insecurity and malnutrition prevalence, allowing lessons learned to be incorporated before its expansion. Additionally, in urban areas, WFP will partner with ADDS to enhance the delivery of nutrition prevention services through social safety-net programmes.

i) *Prevention of acute and chronic malnutrition – direct implementation:* In areas with the highest rates of chronic malnutrition, WFP will provide children aged 6-23 months (975) and PLW/G (1,300) specialized nutritious foods combined with dietary and hygiene education to prevent chronic malnutrition. In areas where GAM rates exceed 15 percent the target group is expanded to include children aged 24-59 months (1,950) to prevent acute malnutrition.

ii) *Prevention of acute and chronic malnutrition – support to the ADDS:* In rural and urban Djibouti, 7,620 children 6-23 months will receive a prevention ration through community based nutrition centres.<sup>34</sup>

72. WFP will continue to provide treatment for moderate acute malnourished children aged 6-59 months (6,050) for three months and PLW/G (3,630) for 12 months in rural and urban

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<sup>34</sup> These 7,620 are not counted in WFP beneficiaries as WFP only purchase commodities for ADDS but does not manage the programme.

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areas. This is part of a package that includes nutrition education and the provision of specialized nutritious foods to treat severe acute malnutrition supported by UNICEF, following the Ministry of Health's national protocol.

73. *Activity 6: Provide nutritional support to ART/TB-DOT clients and economic support to families of ART clients.*

74. WFP will continue to support the Ministry of Health to provide food and nutrition support to care and treatment programmes for people with HIV/AIDS and TB. In addition, WFP will provide training to nutrition partners to strengthen their capacity.

*i) Care and treatment of moderate acute malnutrition in ART and TB-DOT clients:* Moderate acutely malnourished ART and TB-DOT clients (3,750 beneficiaries) will receive a daily individual ration during a nine month period as per national protocol.

*ii) Mitigating safety net to households affected by HIV:* 1,000 HIV patients' families under treatment in a formal structure of the Ministry of Health will receive a daily household ration through food or e-vouchers (3,000 beneficiaries with food and 2,000 beneficiaries with cash assistance).

75. WFP will continue the income generating project pilot for people living with HIV supported with nutritional assistance to promote their financial self-reliance and will extend the nutritional support to new people living with HIV groups. In 2017, WFP launched 30 gender sensitive micro projects with 10 groups of people living with HIV through WFP nutritional support.

**STRATEGIC OUTCOME 5: THE HUMANITARIAN COMMUNITY IN THE HORN OF AFRICA RECEIVES, ON REQUEST, EXPERTISE, SERVICES AND INFRASTRUCTURE IN THE AREA OF SUPPLY CHAIN THROUGHOUT THE YEAR**

76. WFP's strength in supply chain management and logistics is recognized in Djibouti: it leads the logistics coordination and provides logistics services for partners, saving time and resources, and augmenting the logistics capacity.

77. Since mid-2013, WFP has trained 200 people in Djibouti in truck driving, crane and fork-lift, warehousing management, and training of trainers as part of its capacity development for the logistics sector. WFP is currently training an additional 400 people, encouraging increased women participation.

78. This strategic outcome is aligned with the first pillar of the Djibouti UNDAF: governance and economic development, SDG target 17 and WFP's Strategic Result 8<sup>35</sup>. It also contributes to NDO 4 of the Vision 2035 and SCAPE.

***Focus Areas***

79. The humanitarian logistics hub will augment emergency response capabilities in the Horn of Africa with expanded prepositioning capacity for humanitarian cargo: food and non-food. The hub allows timely and cost-effective pre-positioning of supplies for vital WFP and partners operations to respond to crises in the region.

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<sup>35</sup> <https://sustainable.development.un.org>

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### ***Expected outputs***

80. This outcome will be achieved through the following outputs:
- a. Crisis-affected populations benefit from the creation of a service provision platform in support of the humanitarian community, in order to timely receive life-saving food and medical supplies;
  - b. The efficiency of the logistics sector in Djibouti is supported by engaging with logistics partners and WFP headquarters in skill transfer activities and capacity building efforts to strengthen global partnership support to country efforts to achieve the SDGs.
81. This outcome will be reported and measured through partner satisfaction data, the number of clients and utilized cargos, and the number of recruited trainees.

### ***Key activities***

82. *Activity 7: Provide supply chain services to the humanitarian community (on a full cost-recovery basis)*
83. WFP will provide a variety of supply chain services; these will include procurement management, customs clearance, stock and storage management, verification, transport and delivery.
84. *Activity 8: Provide vocational training sessions in the transport and commodity handling sectors to partners*
85. WFP will train 1,800 young Djiboutians in skilled logistics jobs. WFP has been asked by the Government of Djibouti to conduct professional trainings on a broad range of areas including warehousing, trucking, and supply chain management. Trainings will be carried out in conjunction with local institutions and the Chamber of Commerce.

### **3.3 TRANSITION AND EXIT STRATEGIES**

86. WFP will support a gradual transition to national ownership through:
- National policy integration: WFP will work with the Government and other stakeholders to integrate its portfolio into the national social protection and resilience agendas;
  - Capacity development and technical assistance: WFP will focus on the enhancement of government systems, institutions and programmes that sustainably address hunger;
  - Evidence-based engagement: WFP will apply its analytical expertise to understand the underlying causes of hunger and vulnerability as the basis to design programmes and support policy development;
  - WFP will pursue a gender-transformative approach across all activities to advance gender equality as a necessity for sustained food security and nutrition.

## 4. IMPLEMENTATION ARRANGEMENTS

### 4.1 BENEFICIARY ANALYSIS

TABLE 1: FOOD & CASH TRANSFER BENEFICIARIES BY STRATEGIC OUTCOME & ACTIVITY										
Activities	Under 5 Years			Between 5 and 18 Years			Between 18 and UP			TOTAL
	Women / Girls	Men / Boys	Total	Women / Girls	Men / Boys	Total	Women / Girls	Men / Boys	Total	
Provide food assistance and nutrition services, including provision of nutrient rich food and nutrition education and counselling to refugees and asylum seekers living in camps	1,470	1,286	2,756	3,393	3,040	6,432	6,446	7,365	13,811	23,000
Provide unconditional food assistance for targeted severely food insecure rural households and extreme poor households in urban areas	2,327	2,035	4,362	5,369	4,811	10,180	10,202	11,656	21,858	36,400
Provide conditional food assistance for Asset Creation for communities in moderate food insecure areas	1,419	1,241	2,660	3,275	2,934	6,209	6,222	7,109	13,331	22,200
Provide school meals and take home rations to targeted school girls and boys while assisting the development of a national owned school meals programme	1,740	1,610	3,351	4,016	3,806	7,822	7,631	9,221	16,852	28,025
Provide specialized nutrition foods and nutrition education for prevention of chronic malnutrition in children aged 6-23 and PLW/G, treatment of MAM in children 6-59 months and PLW/G; and prevention of acute malnutrition among children aged 24-59 months where GAM rates exceed 15%	1,189	523	1,713	2,744	1,237	3,981	5,214	2,997	8,211	13,905
Provide nutritional support to ART / TB-DOT clients and Economic support to Families of ART clients	495	433	929	1,143	1,024	2,167	2,172	2,482	4,654	7,750
Provide vocational training sessions in the transport and commodity handling sectors to partners	115	101	216	266	238	503	504	576	1,081	1,800
<b>Total</b>	<b>8,756</b>	<b>7,230</b>	<b>15,986</b>	<b>20,206</b>	<b>17,089</b>	<b>37,295</b>	<b>38,392</b>	<b>41,407</b>	<b>79,799</b>	<b>133,080</b>

## 4.2 TRANSFERS

### FOOD AND CASH-BASED TRANSFERS

87. The choice of transfer modality takes into account operational and programmatic aspects including: gender analysis, market and macro-risk assessments, the capacity of traders and financial service providers, cost efficiency, anticipated gains in terms of food security and nutrition outcomes as well as beneficiary preferences. In particular, the choice between cash or voucher considers the potential to improve the dietary diversity of beneficiaries as well as the development of trader capacities and the value chain of staple commodities.

<b>Food type / cash-based transfer</b>	<b>Total (mt)</b>	<b>Total (USD)</b>
Cereals	10,647.50	3,223,859
Pulses	1,968.58	991,771
Oil and Fats	1,275.70	961,344
Mixed and Blended Foods	1,969.30	1,814,227
Other	876.16	789,512
<b>TOTAL (food)</b>	<b>16,737.24</b>	<b>7,780,713</b>
Cash-Based Transfers (US\$)		3,799,440
<b>TOTAL food and CBT</b>		<b>11,580,153</b>

**TABLE 4: FOOD RATION (g/person/day) or CASH-BASED TRANSFER VALUE (USD/person/day) BY STRATEGIC OUTCOME AND ACTIVITY**

Strategic Outcome	Strategic Outcome 1				Strategic Outcome 2			Strategic Outcome 3				Strategic Outcome 4						
Activity	Activity 1				Activity 2		Activity 3	Activity 4				Activity 5			Activity 6			
Beneficiary type	Standard	Children 6-59 (treatment)	Children 6-23 (prevention)	PLW (treatment and Prevention)	Standard	Standard	Standard	Standard (Primary school children)	Standard (Pre-school Children)	Standard (Cooks)	Standard (Take Home Ration)	PLW (Prevention and Treatment)	Children 6-59 (WFP prevention)	Children 6-59 (ADDS prevention)	Children 6-23 (treatment)	ART/TB-DOT clients	Standard (mitigating safety nets)	Standard (mitigating safety nets)
modality	Food/CBT	Food	Food	Food	Food	CBT	Food	Food	Food	Food	Food	Food	Food	Food	Food	Food	Food	CBT
cereals	300	-	-	-	400	-	400	150	100	400	-	-	-	-	-	-	400	-
pulses	60	-	-	-	60	-	80	30	20	80	-	-	-	-	-	-	60	-
oil	30	-	-	40	30	-	40	15	15	40	125	40	-	-	-	40	30	-
salt	5	-	-	-	-	-	-	3	3	-	-	-	-	-	-	-	-	-
sugar	20	-	-	20	20	-	20	15	15	20	-	20	-	-	-	20	20	-
Supercereal	-	-	-	200	-	-	-	60	60	-	-	200	-	-	-	200	-	-
Supercereal Plus	-	200	200	-	-	-	-	-	-	-	-	-	200	-	200	-	-	-
Plumpy Doz	-	-	-	-	-	-	-	-	-	-	-	-	-	-	50	-	-	-
micronutrient powder	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
total kcal/day	1,645	820	820	1,170	2,006	-	2,163	1,063	847	2,163	N/A	1,170	820	N/A	820	1,170	2,006	-
% kcal from protein	11.10%	16%	16%	13.60%	11.20%	-	11.30%	12.20%	12.10%	11.30%	N/A	13.60%	16%	N/A	16%	13.60%	11.20%	-
cash (US\$/p/d)	0.19	-	-	-	-	1.13	-	-	-	-	-	-	-	-	-	-	-	1.13
Number of feeding days	540	180	540	540	540	270	270	275	275	275	405	540	540	540	180	360	270	540

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## **4.2 CAPACITY STRENGTHENING INCLUDING SOUTH-SOUTH COOPERATION**

88. WFP will maintain its capacity to deliver humanitarian relief assistance, but it will increase its focus on strengthening capacities in government systems, institutions and programmes.
89. In support to the development of a national school meals programme, WFP will promote information sharing by facilitating Government's study visits, such as the visit to Senegal's school meals programme in 2017, to study their legal and institutional frameworks as well as lessons learned from its implementation.

## **4.3 SUPPLY CHAIN**

90. For its operations in Djibouti, WFP procures internationally or from the Global Commodity Management Facility stock. All the international cargoes are received through the port of Djibouti from where they are transferred to warehouses prior to being conveyed to the final delivery points by road.
91. Delivery mechanisms for cash-based transfers include electronic vouchers which avoids the risk of handling cash-in-transit and promote transparency. WFP collaborates with a service provider to facilitate financial transactions to traders.

## **4.4 COUNTRY OFFICE CAPACITY AND PROFILE**

92. WFP's increasing focus on providing services and technical assistance reflects Djibouti's newly accessed status of low middle income country. Accordingly, the development of skills among WFP staff focuses on capacity development, policy engagement, social protection, nutrition, market support, cash-based transfers, vulnerability analysis, resilience, gender and protection, and partnering.

## **4.5 PARTNERSHIPS**

93. WFP's strategy places collaboration with the Government and national ownership front and centre. In the short- to medium-term, WFP will seek opportunities to secure Government contributions for its projects. Meanwhile, capacity augmentation activities in areas of WFP's comparative advantage will be embedded in WFP programmes (e.g. emergency preparedness and response, targeting and design of safety net distribution mechanisms). National commitment to tackling food insecurity and malnutrition in Djibouti can be reinvigorated by demonstrating the linkages between economic growth and malnutrition in order to increase Government resource allocations to food and nutrition security initiatives.
94. WFP Djibouti works closely with the Ministry of the Promotion of Women and Family and SEAS to integrate gender equity and equality in the strategic outcomes as defined in the "Programme National Genre 2010-2021".

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# **5. PERFORMANCE MANAGEMENT AND EVALUATION**

## **5.1 MONITORING AND EVALUATION ARRANGEMENTS**

95. WFP will measure performance against strategic plan targets. Outcome and performance indicators will be assessed annually with the "Direction de la Statistique et des Etudes Demographiques" (DISED). Outcome, output and process indicators will be disaggregated

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by sex and age. Gender-responsive monitoring and evaluation will support accountability and implementation adjustments.

96. Field monitors collect monitoring data on a monthly basis and M&E staff conduct follow-up field visits on a quarterly basis. Field monitors and Ministry of Health's staff jointly monitor nutrition activities. Food security monitoring data is collected through the Food Security and Outcome Monitoring System (FSOM). WFP's strategic outcomes describe short- and medium-term progress towards national SDG 2 and SDG 17 targets; monitoring of national SDG indicators is the responsibility of national authorities, with assistance from the United Nations through the Djibouti UNDAF.

## **5.2 RISK MANAGEMENT**

### **➤ *Contextual Risks***

97. Risks include new influx of refugees, insecurity risks due to terrorist attacks or socio-political tensions. As part of the overall contingency preparedness done jointly with other UN agencies, the Ministry of the Interior and other partners, pre-positioning of supplies in WFP's logistics hub will be an important component of the mitigation response.

### **➤ *Programmatic Risks***

98. If WFP is unable to secure funding for the urban safety net, rural resilience, and capacity building activities, it will be difficult to support Djibouti's transition and development. To mitigate this risk, this strategy was developed in consultation with key stakeholders.

99. Inadequate integration and/or opposition to gender equality could impact the successful achievements of the strategic objectives. To mitigate this risk, WFP Djibouti advocates to partners who are open to integrate the Country Gender Action Plan in their implementations.

### **➤ *Institutional Risks***

100. The transitional ICSP strategy requires effective coordination and stronger institutional management by the Government. Failing to do so carries the risk of implementing piecemeal measures that do not yield the intended impact. WFP will ensure the inclusion a capacity building component within each strategic priority.

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## **6. RESOURCES FOR RESULTS**

### **6.1 COUNTRY PORTFOLIO BUDGET**

101. The overall cost of the ICSP is USD 26,483,694 over 18 months. The budget for refugee response (SO1) accounts for 30 percent of the resources required, followed by investments to ensure access to food to rural and urban populations in targeted regions (SO2), which represent 34 percent of the resources required.

<b>TABLE 5: COUNTRY PORTFOLIO BUDGET (USD)</b>		
<b>Strategic Outcome</b>	<b>Year 1</b>	<b>Year 2*</b>
1	5,217,618	2,633,897
2	6,518,388	3,290,097
3	1,829,640	728,546
4	2,666,676	1,417,444
5	1,790,201	961,180
<b>TOTAL</b>	<b>18,022,523</b>	<b>9,031,164</b>

\*January-June. Figures are rounded up.

111. In line with corporate commitments, 15 percent of the budget is allocated to activities that promote gender equality.

## **6.2 RESOURCING OUTLOOK**

112. The forecast for the transitional ICSP is based on the long-term support WFP has received to date – USD 9 million per year.

## **6.3 RESOURCE MOBILIZATION STRATEGY**

113. WFP will work to diversify the donor base by making a specific effort to engage Arab and Gulf donors and develop partnerships with other potential contributors, including the private sector, International Financial Institutions (IFIs), pooled and multilateral sources. The forecasts for traditional contributions for the period covered by this strategy, based on discussions taken place during the consultation process and past trends is about USD 10 million annually. With other potential contributions, including mobile fundraising and some CERF allocation, the annual forecast for the country strategy period may reach USD 14 million annually.

ANNEX I

Indicative cost breakdown (USD)

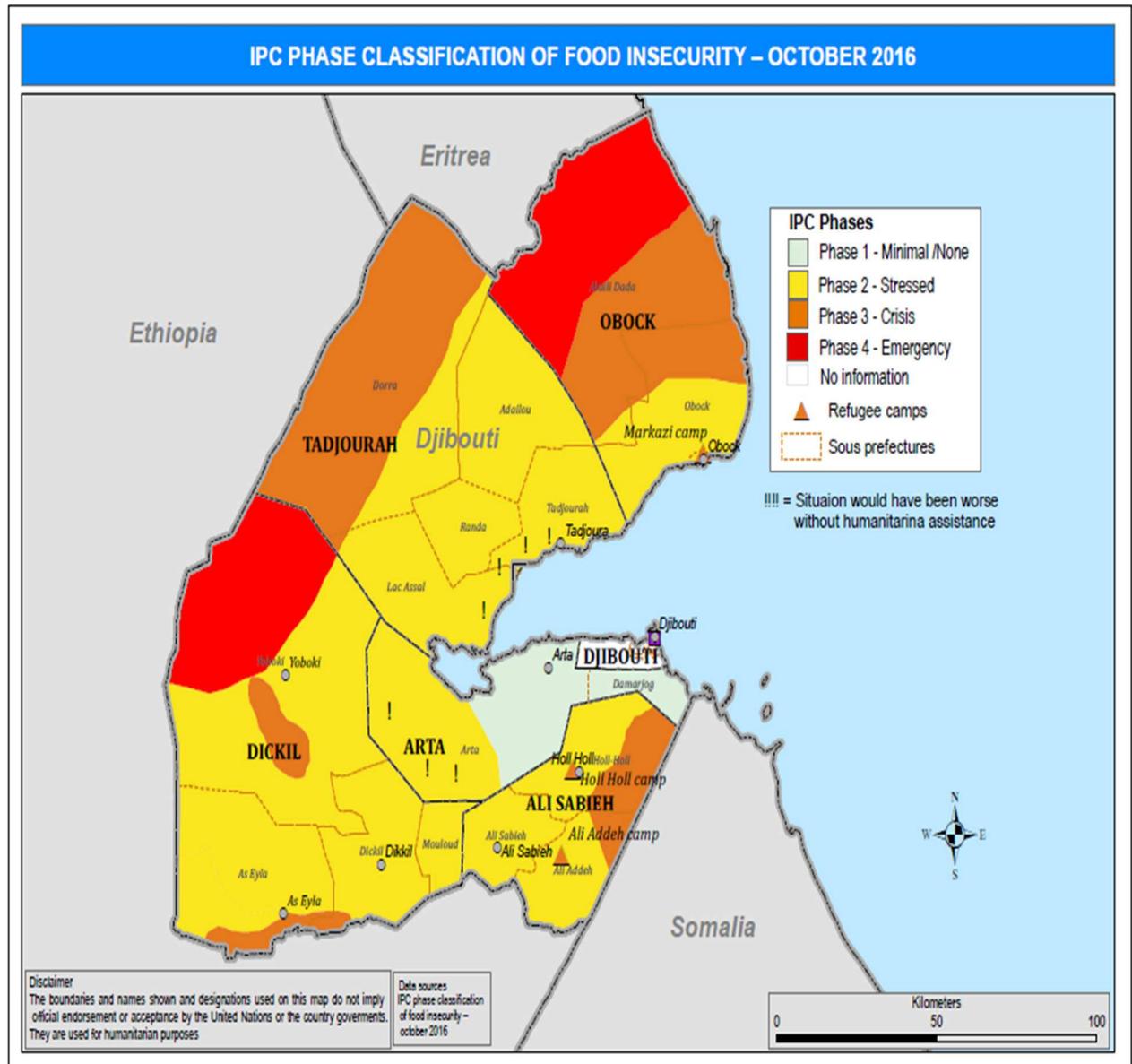
Rate 2018

Transfer	Food	49%
	CBT & Commodity Voucher	15%
	<i>CBT &amp; CV Transfer Value</i>	14%
	<i>CBT &amp; CV Transfer Costs</i>	1%
	Capacity Strengthening	5%
	Service Delivery	5%
<b>Total Transfer</b>		<b>74%</b>
<b>Implementation Costs</b>		<b>5%</b>
<b>Total Transfer &amp; Implementation</b>		<b>79%</b>
Adjusted Direct Support Costs (DSC)		15%
<b>Total WFP direct costs</b>		<b>93%</b>
Indirect Support Costs (ISC)		7%
<b>TOTAL WFP COSTS - YEAR 1/ 2018</b>		<b>100%</b>

Rate % 2019

Transfer	Food	49%
	CBT & Commodity Voucher	15%
	<i>CBT &amp; CV Transfer Value</i>	14%
	<i>CBT &amp; CV Transfer Costs</i>	1%
	Capacity Strengthening	4%
	Service Delivery	5%
<b>Total Transfer</b>		<b>73%</b>
<b>Implementation Costs</b>		<b>5%</b>
<b>Total Transfer &amp; Implementation</b>		<b>79%</b>
Adjusted Direct Support Costs (DSC)		15%
<b>Total WFP direct costs</b>		<b>93%</b>
Indirect Support Costs (ISC)		7%
<b>TOTAL WFP COSTS - YEAR 2/ 2019</b>		<b>100%</b>

## ANNEX II Integrated Food Security Phase Classification map



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## Acronyms Used in the Document

ADDS	Agence Djiboutienne de Développement Social
ART	Antiretroviral Therapy
CBT	Cash-based transfer
CERF	Central Emergency Response Fund
CSD	Country Strategy Document
ECHO	European Commission Humanitarian Aid
FAO	Food and Agriculture Organisation of the United Nations
FSMS	Food Security Monitoring System
FSOM	Food Security and Outcome Monitoring
GAM	Global Acute Malnutrition
IFAD	International Fund For Agricultural Development
IGAD	Intergovernmental Authority on Development
NDO	National Development Objectives
NGO	Non-Governmental Organisation
PLW/G	Pregnant Lactating Women/Girls
SAM	Severe Acute Malnutrition
SCAPE	Strategie pour la Croissance Acceleree et la Promotion de l'Emploi
SDG	Sustainable Development Goal
SEAS	Secretariat d'Etat charge des Affaires Sociales
SMART	Standardized Monitoring and Assessment of Relief and Transitions
TB/DOT	Tuberculosis/Directly Observed Treatment
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
USAID	United States Agency for International Development Title
WHO	World Health Organisation