

DJIBOUTI RAPID RESPONSE DROUGHT 2022

22-RR-DJI-53179

Jose Barahona

Resident Coordinator

PART I – ALLOCATION OVERVIEW

Reporting Process and Consulta	ation Summary:		
Please indicate when the After-Action	Review (AAR) was conducted and who participated.	24 Feb	ruary 2023
	ted on 24 February 2023 in the Resident Coordinator's Office under the Point. A summary of key reflections and lessons learned has been attach follows:		
Danon Gnezale Boncana Sidi Maiga Regina Omlor Jennifer Andisi Lukania Mary Njoroge Razia Azizi Juliette Legendre Ricarda Mondry Osman Omar Renee Octave Goodman	RCO, Development Coordination Officer OCHA ROSEA, Humanitarian Affairs Officer OCHA ROSEA, Humanitarian Affairs Officer OCHA ROSEA, Information Management Officer WFP Country Representative WFP Deputy Director Programs UNICEF Partnerships Manager FAO Country Officer in Charge FAO Programs Officer UNHCR Programs Officer		
Please confirm that the report on the Country Team (HCT/UNCT).	use of CERF funds was discussed with the Humanitarian and/or UN	Yes 🛛	No 🗆
	f this report was shared for review with in-country stakeholders (i.e. the plementing partners, cluster/sector coordinators and members and	Yes ⊠	No 🗆

1. STRATEGIC PRIORITIZATION

Statement by the Resident/Humanitarian Coordinator:

This Central Emergency Response Fund (CERF) Rapid Response (RR) allocation was instrumental in limiting the devasting impacts of the severe 2022 drought and the effects of high food prices and economic shocks on affected populations in rural areas of Djibouti. Through this timely multi-sectoral response implemented by WFP, FAO, UNICEF and UNHCR in strong partnership with the Government of Djibouti and in close collaboration with non-governmental organizations, acutely affected communities in remote areas had access to the most urgent, life-saving food, agriculture, nutrition, protection, and water, sanitation, and hygiene (WASH) support leading to an effective, albeit temporary alleviation of their suffering. With the generous support from CERF, the United Nations were able to quickly respond to the request from the Government of Djibouti in February and June 2022 for urgent assistance to prevent widespread loss of life and livelihoods by providing rapid, critical lifesaving assistance to a total of 98,222 people (10% of the population) who faced dramatic humanitarian conditions and extremely high levels of vulnerability resulting from this historic drought. Overall, the most vulnerable people were targeted and reached through this allocation, contributing to the 2030 objective of leaving no one behind.

CERF's Added Value

This CERF allocation contributed to the alleviation of the impact of the drought in Dijbouti on acutely vulnerable people in the rural localities of Ali Sabieh, Arta, Obock, Tadjourah, and Dikhil regions. For this multi-sector humanitarian drought response, FAO, UNHCR, UNICEF and WFP together with their implementing partners, focused on the most vulnerable and food insecure people (IPC 3+) to cover their urgent food, agriculture, protection, nutrition, and water, sanitation, and hygiene (WASH) needs reaching a total of 98,222 people between June 2022 and January 2023. The allocation of CERF brought much needed attention to the drought emergency in Diibouti in a context where the country was overshadowed by the massive drought crisis in the other Horn of Africa countries (particularly Kenya, Ethiopia and Somalia). While the attention remained overall insufficient to address the full humanitarian needs, CERF's added value was in demonstrating that despite the small size of the country, the relative number of people suffering and in need of lifesaving assistance was high. This brought other donors, namely DG ECHO and the Governments of Japan and Germany to ultimately provide supplemental funding to some of the humanitarian agencies in mid-/late 2022, including ECHO support to IOM, German and Japanese support to WFP and UNICEF, amounting to roughly US\$ 5 million. In addition, the CERF projects raised the visibility of the level of hardship people experienced due to the drought and regular CERF updates were shared with a variety of stakeholders. However, despite this, more attention and funding was required to further support the larger humanitarian response to the drought emergency in country. In addition, the CERF allocation served as a critical sign of solidarity and tangible support to the response efforts of the Government of Djibouti who had requested international assistance. The implementation of the CERF further strengthened the UNCT's partnership with the Ministry of Social Affairs and Solidarity as well as the Ministry of Interior.

Did CERF funds lead to a fast delivery of ass	sistance to people in need?	
Yes ⊠	Partially □	No □

Yes, the CERF allocation enabled a fast delivery of assistance that kickstarted shortly after the receipt of the funds. Some delays were associated with the global shortage of food supplies; however, project adjustments were made to WFP's food distribution (and preapproved by CERF) to ensure the achievement of the project objectives.

Did CERF funds help respond to time-critic	cal needs?	
Yes ⊠	Partially	No □
This CERF RR allocation enabled a timely an emergency that was critically underfunded a received at a very critical moment in which reducing meals) facing the severe lack of food	and neglected in the context of the Horn of affected communities had already started	Africa drought. The allocation of funds was to apply negative coping mechanisms (e.g.
Did CERF improve coordination amongst t	the humanitarian community?	
Yes ⊠	Partially 🗆	No 🗆
Yes, the process of applying for, prioritizing coordination in Djibouti. In advance of the pre consisting of key actors representing priority semergency, the task force was chaired by WF and the focus on rural areas was in direct concoordinated and well-balanced response durin agencies improved coordination amongst each with government and local actors. Some of partnerships with local organizations (e.g. UNI centered response.	eparation of the CERF request, an Emergence sectors (including WFP, FAO, UNICEF, UNHEP with support from OCHA ROSEA. CERF implementarity to the government assistanceing the six-month period of implementation. In the chother where relevant (e.g. UNICEF and for the implementing agencies also used the	cy Response Task Force (ERTF) was formed dCR, WHO, IOM etc). Due to the nature of the prioritization was conducted in a joint manner provided in Djibouti city thus ensuring a well-addition, during the implementation, recipient WFP for nutrition) and solidified coordination e CERF allocation to start new and critical
Did CERF funds help improve resource mo	obilization from other sources?	
Yes □	Partially 🛚	No □

In general, resource mobilization for humanitarian assistance remains a major challenge in Djibouti due to the small size of the country and perceived smaller scale of the emergency compared to the drought impacts in other Horn of Africa countries. While the CERF allocation and interventions did raise some level of awareness, allowed for continued advocacy with key donors and ultimately led to smaller contributions received, the funding to the drought emergency overall remained very limited and insufficient to meet the remaining critical humanitarian needs that were not covered by the CERF.

Considerations of the ERC's Underfunded Priority Areas1:

Apart from the area of education in protracted crises, the ERC's priority areas were all considered throughout the interventions. The needs of women and girls were at the centre of the interventions by all recipient agencies and a total of 49.7% of all individuals who benefitted from CERF-supported activities were women and girls. Women heads of households were specifically targeted, including widows, divorced women, and women with disabilities. Women and girls comprised 49% of all individuals who benefitted from agricultural interventions, 46% of food assistance recipients, 76% of nutrition and protection services, 87% of specialized GBV and PSEA prevention and response services, as well as 48% of WASH service users.

Furthermore, UNHCR assisted exclusively refugee women and girls of reproductive age with cash-based interventions to enable them to meet their basic needs and provide critical items to ensure their safety, dignity, and protection. These items included sanitary pads, soap as well as torches to use at unlighted WASH facilities at night.

While the access for persons with disabilities across all interventions was mainstreamed, FAO directly reached 4,400 persons with disabilities through its activities (4.5% of all CERF program participants).

Despite these successes in ensuring the integration of these critical priority areas, the implementing agencies acknowledge the remaining gaps that were not able to be addressed through the six-month CERF implementation due to systemic challenges and the short time of the intervention. For example, while 4,400 persons with disabilities were reached, their representation as well as targeted interventions for this group remained very limited. Further, while women and girls were at the center of response activities, deeply rooted cultural barriers continue to exist and hinder women and girls to exercise a variety of their human rights (e.g., female genital mutilation, forced marriages). Beyond this CERF allocation, the UN System, under the leadership of the RC, continues to work on all of the four priority areas.

¹ In January 2019, the Emergency Relief Coordinator identified four priority areas as often underfunded and lacking appropriate consideration and visibility when funding is allocated to humanitarian action. The ERC therefore recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and HCTs/UNCTs when prioritizing life-saving needs for inclusion in CERF requests. These areas are: (1) support for women and girls, including tackling gender-based violence, reproductive health and empowerment; (2) programmes targeting disabled people; (3) education in protracted crises; and (4) other aspects of protection. While CERF remains needs based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the questions and answers on the ERC four priority areas here.

Table 1: Allocation Overview (US\$)

Total amount required for the humanitarian response	9,834,209
CERF	2,001,741
Country-Based Pooled Fund (if applicable)	0,00
Other (bilateral/multilateral)	1,520,000
Total funding received for the humanitarian response (by source above)	3,521,741

Table 2: CERF Emergency Funding by Project and Sector/Cluster (US\$)

Agency	Project Code	Sector/Cluster	Amount
FAO	22-RR-FAO-021	Food Security - Agriculture	400,000
UNHCR	22-RR-HCR-021	Protection - Gender-Based Violence	100,004
UNICEF	22-RR-CEF-040	Nutrition	411,424
UNICEF	22-RR-CEF-040	Water, Sanitation and Hygiene	50,174
UNICEF	22-RR-CEF-040	Protection	40,139
WFP	22-RR-WFP-036	Food Security - Food Assistance	700,000
WFP	22-RR-WFP-036	Nutrition	300,000
Total			2,001,741

Table 3: Breakdown of CERF Funds by Type of Implementation Modality (US\$)

Total funds implemented directly by UN agencies including procurement of relief goods	1,647,934			
Funds sub-granted to government partners*	119,287			
Funds sub-granted to international NGO partners*	59,294			
Funds sub-granted to national NGO partners*	150,189			
Funds sub-granted to Red Cross/Red Crescent partners*	25,037			
otal funds transferred to implementing partners (IP)*				
Total	2,001,741			

2. OPERATIONAL PRIORITIZATION:

Overview of the Humanitarian Situation:

As one of the most arid countries in the region, Djibouti had been severely affected by the Horn of Africa drought. In February 2022, the Government of Djibouti issued a drought alert appealing to the international community for urgent assistance to prevent widespread loss of life and livelihoods due to the drought. In June 2022, the Ministry of Interior again sounded the alarm of severe impacts of the drought and the need for lifesaving assistance to affected populations. The historic drought led to up to 75% reduction in household access to sufficient and diversified food, a scarcity of pastures and a loss of up to 50% of livestock and other income sources such as milk sale, and agricultural products. Furthermore, the drought affected communities (including host communities, IDPs, migrants and refugees) by increasing pressure on water supplies, heightening the risk of disease outbreaks like diarrhoea, protection risks especially for women and girls, and increasing the risk of severe malnutrition in children and adults. Abnormal population movement was also observed in 2022 as a direct consequence of the drought based on IOM's DTM analysis in September 2022. IDPs had exhausted their coping strategies and had to completely rely on family aid and food assistance. This dire humanitarian situation was further compounded by additional shocks such as the sharp global increase of food prices, the regional food market disruptions and the limited availability of food items. As Djibouti imports up to 90% of the food the country requires (including 84% of its wheat imports from Russia and Ukraine and almost all its vegetable and fruit imports from Ethiopia), the country's trade balance was severely hit by the global increase of food and fuel prices in 2022. Further, the war in northern Ethiopia reduced the volume of trades and land traffics between the two countries, which usually accounts for 80% of Diibouti's GDP, leading to a tighter fiscal environment putting a significant strain on Diibouti's social protection programmes. Fresh food market disruptions led to a continuing increase of meat, vegetable, and fruit prices in 2022. Lastly, a two-digit inflation rate of 11% between April and June 2022 severely limited the food purchasing power for the most vulnerable population.

All these factors were exacerbating the humanitarian conditions for an estimated 199,327 people in need who faced acute food insecurity (IPC 3+) - reflecting a 66% increase in the people in need since May 2022.

Operational Use of the CERF Allocation and Results:

For this multi-sector humanitarian drought response, FAO, UNHCR, UNICEF and WFP together with their implementing partners focused on the most vulnerable and food insecure people (IPC 3+) to cover their urgent food security and agriculture, protection, nutrition, and water, sanitation, and hygiene (WASH) needs reaching a total of 98,222 people between June 2022 and January 2023. Services provided included emergency water trucking and rehabilitation of water points benefitting 89,000 people, critical food assistance to more than 11,500 people as well as animal feed, and animal health services for 44,000 people. In addition, over 2,400 children received psychosocial support, 2,574 refugee women and girls received a one-time cash transfer to enable their access to essential WASH items for their dignity and safety and lifesaving nutrition services were provided to more than 21,000 children and pregnant and lactating women via mobile health teams, treating a total of 5,600 children for severe acute malnutrition.

People Directly Reached:

A total of 98,222 people were directly reached by this CERF-funded multi-sectoral humanitarian assistance. This accounts for 10% of the overall population of the country across all five regions of Djibouti. To avoid potential double-counting, this number encompasses all individuals reached by WASH services as well as the targeted refugees. WASH figures were used as they represent the highest sectoral figures of people reached which span the entire area of implementation. The planned number of people reached (56,340) was surpassed due to an adjustment of WASH programming (in response to a request by the Government of Djibouti) whereby the provision of fuel for pumping stations was increased (and the number of hygiene kits decreased) thus increasing the supply of safe drinking water for a higher number of people.

People **Indirectly** Reached:

An estimated 79,000 people indirectly benefitted from this CERF-funded multi-sectoral humanitarian drought response across the regions of implementation. This includes approximately 54,000 people in the catchment areas who specifically benefitted from WASH-related interventions as, the training of the water management committee members who were supported to further improve the water point management and drinking water facilities will help maintain access to safe water for the greater catchment population of an estimated 54,000 people in the project locations. An estimated 25,000 people have indirectly benefitted from livestock interventions provided by FAO due to the provision of animal feed to CERF program participants, allowing the remaining agropastoralists not covered under CERF to benefit from higher availability of pastures for their own livestock.

Table 4: Number of People Directly Assisted with CERF Funding by Sector/Cluster*

	Planned					Reached				
Sector/Cluster	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Food Security - Agriculture	13,640	14,520	7,910	7,930	44,000	13,640	14,520	7,910	7,930	44,000
Food Security - Food Assistance	1,455	1,535	2,172	2,920	8,082	2,330	2,410	3,047	3,795	11,582
Nutrition	3,917	0	2,239	1,725	7,881	4,973	0	2,184	2,311	9,468
Protection	1,999	0	1,250	1,251	4,500	592	0	3,673	1,351	5,616
Protection - Gender-Based Violence	592	0	1,982	0	2,574	16,611	2,663	7,919	1,029	28,222
Water, Sanitation And Hygiene	20,143	23,153	5,570	6,449	55,315	36,573	38,941	9,721	10,413	95,648

^{*} Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Table 5: Total Number of People Directly Assisted with CERF Funding by Category*

Category	Planned	Reached
Refugees	2,574	2,574
Returnees	0	0
Internally displaced people	0	1,926
Host communities	53,766	93,722
Other affected people	0	0
Total	56,340	98,222

Table 6: Total No	umber of People Direct	Number of peodisabilities (Pv	ople with vD) out of the total	
Sex & Age	Planned	Reached	Planned	Reached
Women	16,298	37,165	1,370	1,365
Men	18,386	38,941	1,450	1,450
Girls	10,274	11,703	790	795
Boys	11,382	10,413	790	790
Total	56,340	98,222	4,400	4,400

PART II - PROJECT OVERVIEW

3. PROJECT REPORTS

3.1 Project Report 22-RR-FAO-021

1. Proj	1. Project Information								
Agency:		FAO			Country:		Djibouti		
Sector/cl	uster:	Food Security - Agricul	ture		CERF project	code:	22-RR-FAO-021		
Project ti	tle:	Critical food security int	terventions	ht-affecte	d and food insecure r	rural populations.			
Start date	9:	03/06/2022 End date:				02/12/2022			
Project re	evisions:	No-cost extension Redeployment of funds					Reprogramming		
	Total red	quirement for agency's	sector res	sponse to curi	rent emergency	7 :		US\$ 3,000,000	
	Total fu	nding received for agen	cy's secto	or response to	current emerg	ency:		US\$ 0	
	Amount	received from CERF:						US\$ 400,000	
Funding	Total CE	Total CERF funds sub-granted to implementing partners:							
	Gove	ernment Partners		US\$ 0,00					
	Inter	national NGOs						US\$ 0,00	
	Natio	onal NGOs						US\$ 0,00	
	Red	Cross/Crescent Organisa	ation					US\$ 0,00	

2. Project Results Summary/Overall Performance

With the support of this CERF RR grant, FAO was able to carry out critical emergency agricultural drought response activities in collaboration with the Djibouti Ministry of Agriculture, Water, Fishery, Livestock and Marine Resources (MAEPE-RH) between June and December 2022. FAO procured a total of 4,000 bags of wheat bran and 8,000 bags of Alfalfa which were distributed to 12,000 agropastoral community members from the five regions of the country (Arta, Dikhil, Ali-Sabieh, Tadjourah, Obock) and peri-urban area of Djibouti ville. In addition, FAO procured veterinary products consisting of internal and external antiparasitic products, antibiotics, and vitamins to be used to care for 40,404 herds of small ruminants and 1,365 herds of large ruminants which was essential in contributing to the reduced loss of livestock for drought-affected rural agropastoral communities. The project assisted a total of 44,000 individuals and provided support to agropastoralists impacted by the effects of the historic drought in the most remote regions (e.g. Dorra in the Tadjourah Region, Medeho in the Obock Region, Guestir in Ali-Sabieh Region and Agna in the Dikhil Region). With the support of CERF, this emergency assistance project successfully contributed to the mitigation of the drought-caused reduction of safe milk and meat production as well as a loss of livestock for the most drought-affected rural communities in the country.

3. Changes and Amendments

No changes were made to the project scope, objective, implementation timeline or activities, however, it is worth mentioning that FAO experienced delays of fodder deliveries due to global market and supply chain disruptions. Despite these challenges, the project was successfully implemented within the original timeframe and with its planned objectives achieved.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Food Secu	rity - Agricultu	те							
		Planned					Reached			
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	13,640	14,520	7,910	7,930	44,000	13,640	14,520	7,910	7,930	44,000
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	13,640	14,520	7,910	7,930	44,000	13,640	14,520	7,910	7,930	44,000

^{*} Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

25,000 people are estimated to have indirectly benefited from this CERF-supported FAO project. This includes an estimated 10,000 people who benefited from the distribution of supplementary dried animal feed and concentrated animal complements. Through this intervention, livestock owned by the CERF-targeted agropastoralists spent less time on pastures, which enabled more pastures to be available for livestock owned by non-targeted agropastoralists. In addition, an estimated 15,000 people indirectly benefitted from livestock health care. Animal health care services provided to livestock owned by CERF-supported agropastoralists made those livestock healthier preventing the introduction and/or spreading of potential animal diseases to livestock owned by agropastoralists not supported under this project, thus reducing livestock morbidities or mortalities for the broader community.

Project objective	The drought-caused reduction of safe milk and meat production is mitigated in the drought-affected rural areas of the country								
Output 1	Access to animal feed and animal h	Access to animal feed and animal health services are facilitated for 44,000 individuals							
Was the planned o	utput changed through a reprogran	nming after the appl	ication stage?	′es □ No □					
Sector/cluster	Food Security - Agriculture								
Indicators	Description	Target	Achieved	Source of verification					
Indicator 1.1	Ag.5 Quantity of animal feed distributed in MT [Alfa Alfa animal feed]	200	200	List of program participants					
Indicator 1.2	Ag.5 Quantity of animal feed distributed in MT [wheat bran for animal nutrition]	160	160	List of program participants					
Indicator 1.3	[Animal health campaigns in the regions]	12	13	Mission reports					
Indicator 1.4	[Number of animal health kits distributed]	4,000	4,000	Property transfers signed by program participants					
Indicator 1.5	Ag.3 Number of people receiving livestock inputs (animal feed/live animals/kits/packages)	44,000	44,000	Mission reports and Property transfers signed by program participants					
Explanation of out	put and indicators variance:	Despite the higher prices of animal feed, the planned quantity of animal feed was purchased and distributed to the targeted people as planned. However, if an effort to avoid a reduction in the amount of planned fodder (due to the increase in prices), initially budgeted storage costs were removed to maintain the original amount of fodder. In contrast, veterinary drugs were lower in price than anticipated and therefore higher quantities of the drugs were purchased and distributed to the affected people.							
Activities	Description	_	Implemented by						
Activity 1.1	Procurement, processing, and distantimal feed	ribution of Alfa Alfa	Alfa Conducted by the FAO team with contracted local suppliers, in collaboration with decentralized services of the Directorate of Livestock and Veterinary Services (DESV), agro livestock monitoring agents, in consultation						

		with administrative authorities and traditional chiefs of the targeted localities.
Activity 1.2	Procurement, processing, and distribution of wheat bran animal feed	Conducted by the FAO team with contracted local suppliers, in collaboration with decentralized services of the Directorate of Livestock and Veterinary Services (DESV), agro-livestock monitoring agents, in consultation with administrative authorities and traditional chiefs of the targeted localities.
Activity 1.3	[Organisation and implementation of health campaigns]	Conducted by the FAO team with community animal health workers, in collaboration with decentralized services of the Directorate of Livestock and Veterinary Services (DESV), agro-livestock monitoring agents, in consultation with administrative authorities and traditional chiefs of the targeted localities.
Activity 1.4	[Procurement, distribution and administration of animal health kits]	Conducted by the FAO team with contracted local suppliers, in collaboration with decentralized services of the Directorate of Livestock and Veterinary Services (DESV), agro-livestock monitoring agents, in consultation with administrative authorities and traditional chiefs of the targeted localities.

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas² often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.

a. Accountability to Affected People (AAP) 3:

FAO conducted consultations in collaboration with the Ministry of Agriculture, Water, Fishery, Livestock and Marine Resources (MAEPE-RH) and local authorities, to assess the severity and extent of the impacts of the drought on local communities. Engagement with the affected population and observations during this joint mission revealed high livestock losses and widespread drying up of wells. Thorough discussions were held with local administrative authorities and traditional chiefs of the targeted localities, which enabled the identification of crisis-affected populations. All information collected was used in the design, implementation and monitoring of the project. With reference to the potential negative impact of the drought on the already precarious food insecurity situation, the IPC were used to further refine the targeting of program participants and locations (i.e. vulnerability levels, targeting of women-led households, etc.). In order to assess the impact of animal feed distributions and health campaigns on livestock herds and to ascertain the satisfaction of targeted individuals, a nationwide FSNMS survey is being conducted by FAO and other UN Agencies, between February and March 2023. Analysis of data is ongoing, and findings will be forthcoming in April 2023.

² These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas <a href="heavy-need-to-start left-start left-start

³ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the <u>IASC AAP</u> commitments.

b. AAP Feedback and Complaint Mechanisms:

In Djibouti, FAO has a network of field agents who maintain contact with the communities throughout the country. In general, needs, feedback and complaints are conveyed directly to FAO through community leaders, who have direct access to FAO offices and managers. However, requests or complains are also often passed through either the FAO network of field agents within the prefectures, the regional councils or at the level of the WFP offices in the regions. After the distribution of animal feeds under this project, FAO received a few complaints indicating that the quantities of animal feeds distributed were insufficient. Targeted agropastoralists received 90 kg animal feeds per household under this project. FAO team responded that the quantities of animal feeds purchased and distributed per household depended on the CERF budget allocated to FAO and the increased prices of animal feeds.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

FAO ensures the prevention of SEA in all its activities. The risk of SEA in this project was minimized to the extent possible as FAO ensured that staff were trained on PSEA and that there were limited interactions between staff distributing the agricultural tools and livelihood assets and community members. Community members were also made aware of their rights and reporting mechanism which is usually done orally to the traditional community chiefs ('okals') and village chiefs, who act as community judiciary rulers. If any case cannot be judged or settled locally, it is transmitted by the okals and village chiefs to the regional authorities such as the Sub-Préfets or Préfets of the regions. SEA complaints can also be reported confidentially and anonymously at the Listening, Information and Orientation Unit ('Cellule d'Écoute, d'Information et d'Orientation', CEIO) of the National Union of Djiboutian Women ('Union Nationale des Femmes de Djibouti, UNFD) at each region's capital-city. During this project, FAO did not receive any SEA-related complaints or reports.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

FAO made every effort to involve and ensure the participation of women in all stages of project design, implementation, monitoring and evaluation. Administrative authorities and traditional chiefs of the beneficiary localities were sensitized to ensure that at a minimum more than 20 per cent of targeted households were headed by women. This was achieved as 49% of individuals supported by this project were female.

e. People with disabilities (PwD):

In compliance with the law in force to support the National Agency for People with Disabilities (ANPH), which recommends allocating at least 10% for the support of people with disabilities in each project, FAO made efforts to involve and ensure people with disabilities directly participate in the project. Administrative authorities and traditional chiefs in the targeted localities were sensitized to ensure that – to the extent possible - at least 5 per cent of targeted households were headed by a person with a disability (or at minimum had a disabled family member). This was achieved as 4,400 persons with disabilities were reached accounting for 10% of all supported people under this project.

f. Protection:

To ensure that the project activities contribute to the protection of the affected people, FAO worked closely with administrative authorities, traditional chiefs and general customary chiefs of the localities ('okals') to communicate that the protection of people remains priority under any circumstance and to ensure that all information was available on vulnerabilities, people at risk, livestock losses etc. The collected data and information were then analysed and made use of during the design of the project. Animal feeds were positioned at the Préfets of regions who asked the okals, villages chiefs and representatives from the targeted community to transport animal feeds to their respective localities for distribution under supervision of Sub-Preféts or representatives of Regional Councils ensuring.

g. Education:

N/A

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	0

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multipurpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

N/A

Parameters of the used CVA modality:								
Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction				
No	0	US\$ 0	Choose an item.	Choose an item.				

9. Visibility of CERF-funded Activities

	Title	Weblink
•	N/A	

3.2 Project Report 22-RR-HCR-021

1. Project Information								
Agency:	UNHCR		Country:		Djibouti			
Sector/cl	uster:	Protection - Gender-Ba	sed Violen	ce	CERF project	code:	22-RR-HCR-021	
Project ti	itle:	Multipurpose CASH for	refugee w	omen and girls	to access esse	ntial hygie	ene items	
Start date	e:	03/06/2022			End date:		02/12/2022	
Project re	evisions:	No-cost extension		Redeployn	nent of funds		Reprogramming	
	Total red	quirement for agency's	sector res	ponse to curi	rent emergency	r:		US\$ 1,000,000
	Total fu	nding received for agen	cy's secto	r response to	current emerg	jency:		US\$ 300,000
								. ,
	Amount	received from CERF:						US\$ 100,004
Funding	Total CE	ERF funds sub-granted	to implem	enting partne	rs:			US\$ 93,900
	Gove	ernment Partners						US\$ 0
	Inter	national NGOs						US\$ 0
	Natio	onal NGOs						US\$ 93,900
	Red	Cross/Crescent Organisa	tion					US\$ 0

2. Project Results Summary/Overall Performance

Through this CERF RR grant, UNHCR and its local partner Union Nationale des Femmes Djiboutiennes (UNFD) provided cash assistance to 2,574 refugee women and girls aged 12 to 49 years to mitigate their risk of and exposure to violence exacerbated by the drought-induced food insecurity, inability to meet basic needs, and disruption of daily life, community and family structures.

The project consisted of the provision of restricted multi-purpose cash for refugee women and girls to help them meet their basic needs for critical hygiene items and mitigate against GBV risks. A total of 2,574 women and girls received one-time cash transfers of \$35 each that. allowed them to purchase hygiene items such as soap, underwear, menstrual products, and torches to easily access unlighted WASH facilities. This assistance promoted the dignity and safety of the refugee women and girls who already faced heightened levels of vulnerability which were further compounded by the multiple negative effects of the drought. The project was implemented in three (3) operational areas namely Djibouti-Ville, the camp of Markazi (Obock) and the village of Ali-Addeh from October to mid-November 2022. To cover the distribution costs for the local partner, an administrative amount of US\$ 1.48 was applied per cash recipient (total US \$3810) to ensure the partner's capacity to successfully implement the project.

3. Changes and Amendments

No changes were made to this project.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection -	Protection - Gender-Based Violence								
	Planned						Reached			
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	592	0	1,982	0	2,574	592	0	1,982	0	2,574
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	592	0	1,982	0	2,574	592	0	1,982	0	2,574

^{*} Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

Due to the nature of this intervention, only the directly targeted cash recipients are being considered and no indirectly targeted people as the cash was provided directly to women and girls for their personal use and protection.

6. CERF Results Framework										
Project objective	Project objective Response to Gender Based Violence									
Output 1	Access to hygiene items improved ar	Access to hygiene items improved and GBV risks mitigated through CBI								
Was the planned output changed through a reprogramming after the application stage? Yes □ No □										
Sector/cluster	Protection - Gender-Based Violence									
Indicators	Description	Target	Achieved	Source of verification						
Indicator 1.1	Cash.2a Number of people receiving sector-specific unconditional cash transfers	2,574	2,574	Partner Reports, UNHCR reconciliation						
Indicator 1.2	Cash.2b Total value of sector- specific unconditional cash transfers distributed in USD	93,900	93,900	[Partner Reports, UNHCR reconciliation						
Explanation of out	put and indicators variance:	All indicators were	ect plan.							
Activities	Description		Implemented by							
Activity 1.1	Distribution of Cash to 2,574 Refuge in Djibouti	e Women and girls	National implementing partner Union Nationale des Femmes Djiboutiennes (UNFD)							

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁴ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.

a. Accountability to Affected People (AAP) 5:

Affected people were involved in the planning phase of this project through an assessment allowing the proposed intervention to be in accordance with the needs and preferences expressed by the targeted community through a participatory approach. The annual Age, Gender and Diversity assessment was conducted in February 2022 by UNHCR's implementing partner, through a process in line with

⁴ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas here.

⁵ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the <u>IASC AAP</u> commitments.

UNHCR's rules and procedures. All targeted women and girls under this project were kept informed of the different phases and the expected results of the project. Monitoring was conducted by UNHCR staff in line with UNHCR accountability policies. A Post Distribution Monitoring (PDM) exercise was conducted at the beginning of 2023 with the final reporting underway at the time of this report.

b. AAP Feedback and Complaint Mechanisms:

In line with its policy on AAP, UNHCR established a mechanism for receiving and managing complaints from program participants and to prevent and / or mitigate incidents of exploitation and abuse through an onsite desk that allowed project participants to report issues and concerns and for UNHCR and its implementing partner to find an immediate resolution to the extent possible. For cases requiring further verification and follow-up, UNHCR's protection team ensured that these cases were analyzed and resolved and the resolution shared with the complainer. This mechanism was continuously monitored to assure its efficiency and thoroughness.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

For the implementation of this cash distribution, UNHCR built on existing PSEA mechanisms in Djibouti which have already been established with partners, through UNHCR's Policy on Protection against Sexual Exploitation and Abuse (PSEA). In all partnership agreements, UNHCR includes the PSEA Capacity-Strengthening Implementation and Monitoring Plan that forms an important basis of UNHCR's partnerships. UNFD who implemented the activity had its PSEA mechanism previously reviewed by the Djibouti PSEA Working Group and UNHCR ensured that the policy was respected during this activity. No SEA complaints were received during this project.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The support to and protection of women and girls was the primary purpose of this project as cash was distributed to women and girls only to enable their access to essential hygiene items and thus promote their dignity, safety and protection. Therefore 100% of the cash recipient were women and girls whose needs were directly addressed through this CERF-supported intervention. In general, UNHCR's Age, Gender and Diversity (AGD) Mainstreaming approach aims at advancing gender equality and rights of all persons of concern of all ages and from a range of diverse groups. The policy puts together the principles of the AGD approach and supports AGD mainstreaming throughout UNHCR's actions underlining the importance of gender equality, a community-based approach, and partnerships for successful implementation of AGD.

e. People with disabilities (PwD):

People with disabilities were not directly covered in this project.

f. Protection:

The protection of women and girls from the refugee community in Djibouti was the central element of this intervention. While the cash itself and the items purchased with it, in themselves promoted the safety and protection of women and girls, UNHCR and UNFD also ensured that for all women and girls who received the cash, it was safe to do so. This was done through a protection monitoring exercise conducted by UNHCR which informed the overall response and was a critical activity that permitted the identification of protection risks, of the most vulnerable persons and persons with specific needs.

g. Education:

N/A

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is the sole intervention in the CERF project	Yes, CVA is the sole intervention in the CERF project	2,574

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multipurpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

Cash assistance was provided to 2,574 refugees as one-time restricted payment of 35 USD for each refugee woman and girl to help meet their basic needs for hygiene items and mitigate against GBV risks. The cash amount was based on cost of hygiene items such as soap, underwear, menstrual products, and torches to have safe access to unlighted WASH facilities.

Parameters of the used CVA modality:								
Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction				
Cash. 2a Number of people receiving sector-specific unconditional cash transfers]	2,574	US\$ 90,090	Protection - Gender-Based Violence	Restricted				

9. Visibility of CERF-funded Activities

•	
Title	Weblink
Activities to alleviate the effect of drought on refugees and Host Communities in Djibouti in 2022	https://djibouti.un.org/fr/215463-le-hcr-conclut-un-exercice-innovant-deverification-des-refugies-et-demandeurs-dasile

3.3 Project Report 22-RR-CEF-040

1. Proj	1. Project Information							
Agency:		UNICEF		Country:		Djibouti		
		Nutrition						
Sector/cl	uster:	Water, Sanitation and H	lygiene		CERF project	code:	22-RR-CEF-040	
		Protection						
Project title: Life-Saving Assistance to Drought Affected Populations in Djibouti through sectoral res GBV and Child Protection						n sectoral response in	Nutrition, WASH,	
Start date	e:	30/04/2022			End date:		29/10/2022	
Project re	evisions:	No-cost extension		Redeployn	nent of funds		Reprogramming	
	Total re	quirement for agency's	sector res	ponse to cur	rent emergency	:		US\$ 2,500,000
	Total fu	nding received for agen	cy's secto	or response to	current emerg	ency:		US\$ 0
	Amount	received from CERF:						US\$ 501,737
Funding	Total CI	ERF funds sub-granted	to implem	enting partne	rs:			US\$ 234,907
	Gove	ernment Partners						US\$ 94,287
	Inter	national NGOs						US\$ 59,294
	Natio	onal NGOs						US\$ 56,289
	Red	Cross/Crescent Organisa	ıtion					US\$ 25,037

2. Project Results Summary/Overall Performance

UNCIEF implemented a multi-sectoral intervention assisting populations severely affected by the drought in the regions of Ali-Sabieh, Dikhil and Tadjoruah in Djibouti. **Nutrition** activities focused on curative and preventive services reaching a total of 4,807 children under 5 with SAM, and 5,967 with MAM. 2,500 cartons of plumpy nut were purchased in addition to therapeutic milk to cover the needs. A total of 5,717 children (3,821 girls / 1,896 boys) received micronutrients and 21,279 individuals (8,138 children under five and 13,141 pregnant/lactating women), were treated for parasites and received vitamin A. For the implementation of the preventive package, UNICEF established a cooperation agreement with a local NGOs, the National Union of Djiboutian Women (UNFD), and strengthened capacities of its members. In total, 18,937 pregnant and lactating women were identified, and referred by community actors to the nearest health facilities for MAM care and 3,263 women for SAM care. 5,717 children under five (2,461 girls and 3,256 boys), were referred for MAM care and 2,321 children (1,053 girls and 1,268 boys) for SAM care.

Protection-related PSEA and GBV services were provided to 31,264 persons including more than 3,000 children, in the regions of Obock, Tadjourah, Dikhil and Ali Sabieh. 603 out of those 3,000 children were unaccompanied and separated children who are largely boys and/or street children who benefited from holistic services such as family reunification, reintegration, access to food and hygiene, recreational activities. The remaining persons are women who attended the sessions. In addition, initially the project proposal did not

intend to target men in terms of PSEA/GBV prevention, however during the activity implementation, 213 men were reached by the project. In addition, the NGO Caritas provided access to PSS services to 2,439 children in Djibouti-Ville. At the community level, 12 PSEA/GBV focal points were trained. 1,816 women received access to a safe reporting channel for GBV and PSEA case management and 7 women survivors benefited from holistic support.

For WASH, UNICEF assisted 95,648 drought-affected people with life-saving interventions. 89,000 people had access to safe drinking water through the provision of fuel to sustain 35 main and strategic water boreholes across the country during the acute three-month drought period. 05 boreholes were rehabilitated, and 05 submersible pumps procured and delivered. In parallel with this intervention, the 35 Community Water Point Management Committees (CWPMCs) in charge of the water points - supplied with fuel by UNICEF - were reactivated and supported to improve their capacity to manage fuel and operate the water points. The objective was to ensure better functioning of the water production and supply system. This support allowed several CWPMCs to save the water fees collected from each household, as they continued to receive the water fees during the period when UNICEF provided free fuel. The savings allowed these CWPMCs to optimize the maintenance and operation of the water supply infrastructure and more effectively recover water fees for more sustainable access and climate-resilient drinking water services for the targeted populations. In addition, 1,926 IDPs benefited from access to emergency sanitation through the construction of 37 emergency latrines that meet international humanitarian standards, and another 6,648 people (1,010 households) were covered by the hygiene kit distribution activity.

Thanks to the dynamics created by this CERF funding, UNICEF has been able to develop approaches based on the emergency/development/peace NEXUS. For example, the economic and ecological challenges encountered with the supply of fuel for the water-pumps have motivated the purchase of solar pumps, which are more durable, with other funding. In addition, UNICEF has been working in an increasingly decentralized manner to carry out CERF activities, with the aim of working closer to the communities. Thus, new partnerships have been initiated thanks to the CERF project, notably with the Tadjourah Women's Association. This decentralized and community-based dynamic made it possible to reach a large number of affected people, particularly for the awareness sessions and the malnutrition screening and referral activities.

3. Changes and Amendments

This severe drought dried up many shallow water points, depriving the people who depended on them of access to clean and drinking water. Their only available source of water was deep boreholes, operated by fuel-powered generators, which were subsequently overburdened by the additional demand for water from people in the communities where the water points had dried up. To meet these urgent high drinking water needs of the rural nomadic and pastoral populations affected by these water shortages, UNICEF, in response to the request of the Government of Djibouti, undertook an adjustment in the implementation of the planned activities. UNICEF increased the supply of fuel for the continuous operation of pumping stations to ensure sufficient production and availability of water to save the lives of drought-affected people for a period of 3 months. To generate more financial resources for the purchase and supply of fuel for the pumping stations, the number of hygiene kits was reduced in agreement with the Ministry of Water. A total of \$118,000 was allocated to the purchase of fuel. The number of hygiene kit recipients reached consequently decreased.

4. Number of People Directly Assisted with CERF Funding*

1,999

0

1,999

Host communities

Total

Other affected people

0

0

0

Sector/cluster	Nutrition									
	Planned						Reached			
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	3,500	0	1,400	1,100	6,000	3,303	0	1,053	1,268	5,624
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	3,500	0	1,400	1,100	6,000	3,303	0	1,053	1,268	5,624
People with disabilities (Pw	D) out of the	total					•		<u> </u>	
	0	0	0	0	0	0	0	0	0	0
Sector/cluster	Protection									
			Planned					Reached	ł	
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0

December 2014 Process (D. D.) and a finite factor										
People with disabilities (PwL	People with disabilities (PwD) out of the total									
	0	0	0	0	0	0	0	0	0	0

1,251

1,251

0

4,500

4,500

0

16,611

16,611

0

2,663

2,663

0

2,380

2,380

0

31,264

31,264

0

9,610

9,610

0

1,250

1,250

0

^{*} Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Sector/cluster	Water, San	Water, Sanitation and Hygiene								
		Planned						Reached		
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	743	787	198	198	1,926
Host communities	20,143	23,153	5,570	6,449	55,315	35,997	36,991	10,367	10,367	93,722
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	20,143	23,153	5,570	6,449	55,315	36,740	37,778	10,565	10,565	95,648
People with disabilities (PwD) out of the total										
	0	0	329	500	829	0	0	0	0	0

^{*} Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

The training of 68 Community Water Point Management Committee members has improved their performance in managing water points and drinking water facilities. This helps maintain access to safe water services for approximately **54,000** people in their respective communities who are therefore indirectly benefitting from this CERF-supported project.

6. CERF Resul	ts Framework								
Project objective	131,630 most vulnerable drought affe	131,630 most vulnerable drought affected people receive life-saving assistance in nutrition, protection, and WASH.							
Output 1	Nutrition: Improvement of curative and preventive management of severe acute malnutrition (SAM) in all health structures in the country, as well as the availability of therapeutic inputs for SAM								
Was the planned o	utput changed through a reprogram	ming after the applica	ation stage? Yes	□ No ⊠					
Sector/cluster	Nutrition								
Indicators	Description	Target	Achieved	Source of verification					
Indicator 1.1	N.3a Number of people admitted to SAM treatment programme (therapeutic feeding) -2,500 children under 5 years 3,516 Nutrition Pregnant and Lactating women	6,016	5,624	Implementing partner report					
Indicator 1.2	N.3b Percentage of people who were admitted for SAM treatment who recovered (SAM recovery rate)	100%	54%	DHIS2 and presentation of the nutrition programme					
Indicator 1.3	N.4 Number of people screened for acute malnutrition -23,840 (children and PLW) PIN	23,840	21,279	Implementing partner report					
Explanation of out	put and indicators variance:	The achievement variance of indicator 1.2. is attributed to dropouts from to care program as many children dropped out of treatment and/or were lost follow-up. From a global perspective, the quality of care in Djibouti still show gaps and there is a need to strengthen health and nutrition services whit UNICEF is working on with partners such as WHO and the Government. Considering the MAM and SAM figures it is important to note that not referred cases are systematically confirmed with their malnutrition status on they arrive at the health centre due to the fact that the community workers we refer them are non-medical volunteers. In addition, some families are not alto go to the health centre after a referral for various reasons (distance, condaily workload, etc.). UNICEF will work particularly on this last point in 202 by strengthening its community engagement strategy to reach the community memers in remote areas with a "last mile strategy".							
Activities	Description	In	nplemented by						
Activity 1.1	Outpatient preventative and cur services including treatment of the cowell as routine nutrition services for w	ommon illnesses as							
Activity 1.2	Improvement of the management of moderate and severe malnutrition among children at Health Centers. Ministry of Health at all implementing levels: local, regional, and central								

Activity 1.3	Improvement of the screening of moderate and acute malnutrition throughout the mobile teams.	National Association of Djiboutian Women (UNFD)
Activity 1.4	Transfer of children with severe and acute malnutrition to the nearest Health Centre.	National Association of Djiboutian Women (UNFD)
·	Monitoring and information system of nutritional situation, including nutrition assessments, timely and quality data collection and distribution to guide policies, strategies, programmes and advocacy	programme of nutrition)

Output 2	Protection: Provision of holistic child and GBV response/prevention	protection services and	l psychosocial support	to children affected by the drought		
Was the planned	output changed through a reprogrami	ming after the applica	ation stage?	Yes □ No ⊠		
Sector/cluster	Protection					
Indicators	Description	Target	Achieved	Source of verification		
Indicator 2.1	CP.3 Number of children receiving protection support (e.g. family tracing, reunification, reintegration, case management services, etc) (# of unaccompanied and separated children supported on alternative care and/or family reunification)	500	603	Implementing partner report		
Indicator 2.2	# of GBV cases managed through GBV mechanism	1,999	7	Implementing partner report		
Indicator 2.3	H.9 Number of people provided with mental health and/or psycho-social support services (children benefiting from the psychosocial support)	2,000	2,439	Implementing partner report		
Explanation of output and indicators variance:		Due to the fact that the impact of the drought increased the vulnerable women and children, which explains the overachievement of target indicators 2.1 and 2.3. In addition, within the framework of PSEA and activities, 89 people (50 women and 39 men) were trained to community-based educational activities on PSEA and GBV and a to 28,133 people participated in awareness sessions. The underachievement for indicator 2.2. is likely attributed to an overesting of the targeting at the proposal stage. Overall, the referral mechanisms for and PSEA cases enabled seven (7) women survivors to benefit from the care. It is also important to recognize that it takes time for a mechanism				
		nature to be accepted and used by the community. Cultural barriers and issues of stigma associated with GBV also play a key role leading to massive underreporting in a context such as Djibouti. UNICEF continues to comba these issues with awareness interventions and advocacy efforts. Although the sex disaggregation for children who received protection support through the implementing partner was not available, there has been a trend observed that that more boys than girls are among the supported cases.				
Activities	Description	1	nplemented by			

Activity 2.1	Case management of child protection by supporting unaccompanied and separated children (UASC) with alternative care and/or family reunification	
Activity 2.2	GBV case management, and community awareness sessions on risk mitigation, prevention, or response interventions	UNFD, SOS Village d'enfants, Association des Femmes de Tadjourah
Activity 2.3	Provision of psychosocial support to displaced children	CARITAS Djibouti

Output 3	Provision of emergency life-saving W	/ASH services to 55,315 dr	ought-affected people in	Djibouti				
Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☐								
Sector/cluster	Water, Sanitation and Hygiene							
Indicators	Description	Target	Achieved	Source of verification				
Indicator 3.1	# of people reached with emergency water supply through water trucking and rehabilitation and water maintenance of water points	35,000	89,000	Implementing partner report				
Indicator 3.2	WS.16a Number of people receiving critical WASH supplies (e.g. WASH/hygiene kits)	55,315	6,648	Implementing partner report				
Indicator 3.3	WS.16b Number of WASH/hygiene kits distributed	2,000	1,108	Implementing partner report				
Indicator 3.4	# of community water point management committees trained and capacitated	30	35	Implementing partner report				
Indicator 3.5	WS.15 Number of communal water points (e.g. wells, boreholes, water taps stands, systems) constructed and/orrehabilitated	5	5	Implementing partner report				
Explanation of or	utput and indicators variance:	The overachievement of indicator 1.1. can be attributed to an adjustment made as the drought dried up many shallow water points, depriving the people who depended on them of access to clean and drinking water. Their only available source of water was deep boreholes, operated by fuel-powered generators, which were subsequently overstretched by the additional demand for water from people in the communities where the water points had dried up. To meet the urgent drinking water needs of the rural nomadic and pastoral populations affected, UNICEF, in response to the request of the Government of Djibouti, undertook the following adjustment: The supply of fuel was increased for the continuous operation of pumping stations to ensure sufficient production and availability of water to save the lives of people affected by the adverse effects of the drought, for 3 months. To generate more financial resources for the purchase and supply of fuel for the pumping stations, the number of hygiene kits was reduced in agreement with the Ministry of Water. The number of people reached by the kits consequently decreased as shown in the achievement variances for indicators 3.2 and 3.3. The high variance in achievement for indicator 3.2 is also likely due to a						

		households average 5 people in rural areas, therefore 2,000 kits should have reached approximately 10,000 people.				
Activities	Description		Implemented by			
Activity 3.1	Provision of adequate and safe water affected people have access	supply to drought -	- Directorate of Rural Hydraulic			
Activity 3.2	Provision of drought-affected people sanitation promotion messages and supplies including Menstrual Hyg (MHM) kits	emergency WASH	•			
Activity 3.3	Creation of water community managand their capacity building	gement committees	Directorate of Rural Hydraulic			

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.

a. Accountability to Affected People (AAP) 7:

In advance of this project, a multi-sectoral needs assessment was conducted in the crisis-affected communities, considering all segments of the population, including children and men and women. Information sharing meetings on the project's objectives and activities were organized. During implementation, community members were engaged in different ways. For WASH for example, members of community water point management committees were involved in the management and distribution of fuel that was provided to ensure the functioning of the 35 deep boreholes. In addition, IDP representatives were involved in designing and positioning of emergency latrines in a culturally appropriate manner. For nutrition, the partnership established with the UNFD helped strengthen accountability by allowing its members to be actors in their own communities during their malnutrition screenings. UNICEF's new and existing partnerships with other local associations allowed affected people to be actors in the response within their own communities, and to benefit from capacity building for the sustainability of their actions.

b. AAP Feedback and Complaint Mechanisms:

A complaint management committee was established in the communities to collect input to improve project implementation. Seven (7) committees were established (two chaired by women). Capacity-building sessions were organized for committee members to define their roles and responsibilities and the process to collect and record complaints. These committee members (men, women, and youth) were elected by the community, met regularly and kept a record of complaints or suggestions and referred them to UNICEF for resolution. UNICEF then recorded the complaints in a protected database and forwarded them to the various heads of section for processing and feedback to the complainants. Sensitive complaints related to sexual exploitation and abuse and GBV are usually sent directly to the

⁶ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas here.

AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the <u>IASC AAP</u> commitments.

PSEA/AAP focal point according to UNICEF procedures. Complaints related to embezzlement, corruption and fraud are recorded and processed according to UNICEF's anti-fraud policy. For this project, UNICEF only received non-sensitive feedback related to the quality of some hygiene items which UNICEF will take into consideration in future interventions.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

Following consultations with beneficiary community leaders in each locality affected by the project, the complaint management committee was selected and implemented as the culturally appropriate, accessible, and confidential mechanisms for reporting cases of sexual exploitation and abuse (SEA). At the complaint management committee level, complaints are registered, and information is shared directly with UNICEF in complete confidentiality for review and processing and for external cases, the complaint is referred to the relevant organization for appropriate and timely care. While these were not SEA cases, this referral mechanism benefitted seven female GBV survivors who received holistic care.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

Gender equality and the promotion of and support to women and girls was a central element across all interventions. During trainings, women and girls were represented in equal proportions to men and boys. Furthermore, during the establishment of the different complaint management committees, the needs of women and girls were prioritized and two of the seven complaint and feedback management committees were (and continue to be) chaired by women, thus giving women the chance to occupy a decision-making position.

Furthermore, two of the UNICEF's implementing partners in this CERF project are women's associations: the National Union of Women of Djibouti and the Association of Women of Tadjourah. Lastly, WASH interventions ensured the inclusion of menstrual hygiene management items whereby hygiene kits were purchased including reusable and disposable sanitary pads distributed for more than 980 women and young girls to improve their menstrual hygiene and promote their dignity and participation in daily life.

e. People with disabilities (PwD):

Access to activities for people with disabilities or special needs was mainstreamed throughout the project. UNICEF's implementing partners conducted activities in an accessible and inclusive manner, with the support of UNICEF. WASH facilities were designed to be inclusive for people with disabilities as well as the elderly, while all outreach activities were carried out with the objective of reaching all those involved, including people with disabilities or special needs. UNICEF's implementing partner CARITAS also partners with Catholic Schools of Diocese of Dijbouti who work with children with disabilities and thus brought a level of expertise to this project.

f. Protection:

In this project, UNICEF targeted the most affected and at-risk populations to provide them with quality services. Programs were implemented in the most affected regions of the country, especially Obock and Tadjourah, with local approaches to reach the most vulnerable populations. The complaints and feedback mechanism put in place also ensured the safety of project participants. The specific child protection and GBV services provided as part of this project, ensured that affected children and women obtained access to services to support their mental and physical well-being and safety.

g. Education:

While education interventions for children were not directly part of this project, awareness-raising and training activities were at the core of the project to build the capacity of partners and local communities. 30 communal water point management comities were trained and 315 community actors were trained on infant and young child feeding (IYCF) promotion in 9 localities. This allowed for the realization of

20 cooking demonstration sessions and 60 awareness sessions on IYCF for pregnant and lactating women in the targeted sites. Furthermore, 12 PSEA/GBV focal points were trained for the implementation of referral and support activities for PSEA/GBV and 89 people were trained to conduct community-based educational activities on PSEA and GBV.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned Achieved		Total number of people receiving cash assistance:			
No	Choose an item.	0			

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multipurpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

N/A

	Parameters of the used CVA modality:								
	Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction				
•	N/A	0	US\$ 0	Choose an item.	Choose an item.				

9. Visibility of CERF-funded Activities					
Title	Weblink				
Les Nations Unies mobilisent 2M\$ de fonds CERF pour la réponse d'urgence à Djibouti]	https://djibouti.un.org/fr/183199-les-nations-unies-mobilisent-2m-de-fonds-cerf-pour-la-reponse-durgence-djibouti				

3.4 Project Report 22-RR-WFP-036

1. Proj	ect Inform	ation						
Agency:		WFP			Country:		Djibouti	
Sector/cluster:		Food Security - Food Assistance Nutrition			CERF project	t code:	22-RR-WFP-036	
Project ti	tle:	Emergency Response	to Drought	 averting furt 	her food security	y crisis in	rural Djibouti	
Start date	e:	10/06/2022			End date:		09/12/2022	
Project re	evisions:	No-cost extension		Redeployn	nent of funds		Reprogramming	
	Total requirement for agency's sector response to current emergency: US\$ 4.2							US\$ 4,244,199
	Total fu	nding received for ager	ıcy's secto	r response to	current emerg	jency:		US\$ 0
	Amount	received from CERF:						US\$ 1,000,000
Funding	Total CERF funds sub-granted to implementing partners:						US\$ 25,000	
	Gove	ernment Partners	US\$ 25,000					
	Inter	national NGOs	US\$ 0					
	Natio	onal NGOs						US\$ 0
	Red	Cross/Crescent Organisa	ation					US\$ 0

2. Project Results Summary/Overall Performance

In partnership with the Ministry of Social Affairs and Solidarity (MASS), WFP provided lifesaving assistance to a total of 11,582 people in Ali Sabieh, Tadjourah and Arta from August 2022 to January 2023 by addressing their most critical food and nutrition needs enabling them to maintain and improve their food security and combat malnutrition. Specialized nutritious foods was provided to 2,174 children aged 6-59 months as well as 1,670 pregnant and lactating women (PLW) affected by the drought. A total of 839 MT food and 68 MT specialized nutritious food (super cereal plus) were distributed.

While this project was able to address the most acute food security and nutrition needs of PLW and children under five in rural, underserved areas, the results show only a slight improvement in the nutritional outcomes for PLW due to the further deterioration of the drought during the implementation period that was compounded by severe price shocks in 2022. According to the post distribution monitoring conducted in November 2022, only 42 per cent of households had acceptable levels of food consumption and 36 per cent showed poor levels, with the highest percentage of people with poor levels of food consumption residing in Arta, notably 82 per cent (correlating with the baseline where Arta also showed the highest levels of food insecurity with 38% at poor levels and 35% at borderline levels). While the humanitarian assistance provided through CERF covered the most urgent food needs of the target population, 30 per cent of people adopted stress coping strategies, including selling household assets, and borrowing money for the purchase of food. The Minimum Dietary Diversity (MDD) of PLW was 5 per cent against 0 percent in the baseline of February 2022. The results did not show any changes in the Minimum Acceptable Diet of children aged 6-59 months.

In addition to addressing the immediate food and nutrition needs of the affected population, the response also contributed to the expansion of coverage of the national social registry as eligible households under this project were subsequently included in the social registry, creating an important link to the existing social protection system.

3. Changes and Amendments

Due to the global supply shortage of the specialized nutritious food (CSB++/super cereals plus), the distribution of this commodity for the prevention of Moderate Acute Malnutrition (MAM) was delayed. The commodity only arrived in Djibouti in November 2022. To avoid further delays and given the deterioration of the nutritional situation in the targeted areas, WFP used, through a loan from another activity, super cereals to provide nutrition assistance to the target group covering needs from October onwards.

Given the delays, the planned sensitization sessions to accompany the distribution of the super cereals were no longer considered relevant given the limited time remaining for the project completion. WFP therefore requested a reprogramming of the funds for the general food assistance and a no-cost-extension until 31 January 2023 to ensure full completion of all project components. The request was approved by CERF. The reprogramming required changes in indicator 2.3 (number of people screened for acute malnutrition) and 2.4 (number of people receiving training and/or community awareness sessions on maternal, infant and young child feeding in emergencies) as the partnership with the partner to implement activities related to these indicators was not pursued. Instead, WFP was able to purchase 169 MT of additional food for the target population and to provide a two-months distribution to an additional 3,500 community members in four drought affected villages of Tadjourah (Magdol. Andaba, Margoita and Bouya).

4. Number of People Directly Assisted with CERF Funding*

Nutrition

Sector/cluster

	Planned				Reached					
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	417	0	839	625	1,881	1,670	0	1,131	1,043	3,844
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	417	0	839	625	1,881	1,670	0	1,131	1,043	3,844
People with disabilities (Pw	D) out of the	total	·							
	0	0	0	0	0	0	0	0	0	0
		1	'	ı	1	•	1	I	ı	ı
Sector/cluster	Food Secu	rity - Food As	sistance							
			Planned					Reached	k	
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	1 -	
	_	1				Wolliell	MICH	Ollio	Boys	Total
Refugees	0	0	0	0	0	0	0	0	Boys 0	Total 0
			0							
Returnees	0	0		0	0	0	0	0	0	0
Returnees Internally displaced people	0 0	0	0	0 0	0	0	0 0	0	0	0
Returnees Internally displaced people Host communities	0 0 0	0 0 0	0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0
Refugees Returnees Internally displaced people Host communities Other affected people Total	0 0 0 0 1,455	0 0 0 1,535	0 0 2,172	0 0 0 2,920	0 0 0 0 8,082	0 0 0 0 2,330	0 0 0 0 2,410	0 0 0 3,047	0 0 0 0 3,795	0 0 0 0 11,582
Returnees Internally displaced people Host communities Other affected people	0 0 0 1,455 0 1,455	0 0 0 1,535 0 1,535	0 0 2,172 0	0 0 0 2,920 0	0 0 0 8,082 0	0 0 0 2,330 0	0 0 0 0 2,410 0	0 0 0 3,047	0 0 0 0 3,795 0	0 0 0 11,582 0

^{*} Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

People indirectly targeted and benefitting from the interventions are the community members of the targeted individuals, an estimated 50,000 people, given the social fabric of the communities in Djibouti and the culture of sharing food. The CERF-supported food distribution softened the pressure on food price in rural areas where markets are not functioning, and food prices are extra volatile.

Moreover, the emergency drought assistance was linked to the existing national social protection system, notably the social registry, managed by the MASS. Targeting, registration and enrolment was conducted by the MASS and eligible households were enrolled in the programme through the social registry, except the additional 3,500 people in Tadjourah who received food assistance for the last two months of the project, i.e. December 2022 and January 2023. The latter were targeted by WFP and the Ministry of Interior through community-based targeting and with the involvement of local authorities as a faster way of targeting given the timeline of the project and the longer process typically required for the MASS social registry. Through this CERF Rapid Response grant, coverage of the social registry is now expanded with the registration of the households in rural areas. For poor households, registration in the social registry provides an important "gateway" for potential inclusion in future national social protection programmes, representing a long-lasting impact of this CERF allocation. Additionally, the capacity of the MASS, both in terms of staff and equipment, was strengthened through this grant which is an important additional success of this intervention.

Project objective	Food insecure Djiboutians in targeted regions have improved access to food and improved nutrition status by the end of 2022.					
Output 1	Rural food insecure Djiboutians, affected by the drought, receive monthly food assistance, and increasingly have access to government social protection programmes (Programme Nationale Solidarité Famille (PNSF) in order to enhance their food security and nutrition status and to prevent further deterioration of their food security situation.					
Was the planned o	utput changed through a reprogram	ming after the ap	olication stage? Y	es 🗆 No 🗆		
Sector/cluster	Food Security - Food Assistance					
Indicators	Description	Target	Achieved	Source of verification		
Indicator 1.1	FN.1a Number of people receiving in-kind food assistance	8,082	11,582	Beneficiary data registered in COMET (WFP corporate beneficiary management tool); WFP food release notes		
Indicator 1.2	FN.1b Quantity of food assistance distributed in MT	716	839	LESS (WFP food and inventory system)		
Indicator 1.3	FS.5a Percentage of households with an acceptable food consumption score	>70%	42%	Post Distribution Monitoring		
Explanation of out	put and indicators variance:	The project was designed in May 2022. During the second half of the year, the food security situation further deteriorated because of high food prices and the severe drought that led to up to 50 per cent loss of livelihoods such as livestock and other assets, and limited food availability and accessibility in rural areas. Therefore, the target of more than 70 per cent of households with an acceptable FCS could not be achieved.				

Activities	Description	Implemented by	
		WFP, the Ministry of Social Affairs and Solidarity (MASS) and the Ministry of Interior (Prefet Tadjourah)	
Activity 1.2	Provision of sensitization session on the food assistance	WFP	

Output 2	Targeted Djiboutian children 6-59 treatment, including provision of spe				
Was the planned	output changed through a reprogram	ming after the appli	ication stage? Yes	s ⊠ No □	
Sector/cluster	Nutrition				
Indicators	Description	Target	Achieved	Source of verification	
Indicator 2.1	N.1 Number of people receiving blanket supplementary feeding (MAM prevention)	1,881	3,844	Beneficiary data registered in COMET (WFP corporate beneficiary management tool); WFP food release notes	
Indicator 2.2	FN.1b Quantity of food assistance distributed in MT (MAM prevention)	68	75.94	LESS (WFP food and inventory system)	
Indicator 2.3	N.4 Number of people screened for acute malnutrition	5,000	0	n/a	
Indicator 2.4	N.6 Number of people receiving training and/or community awareness sessions on maternal, infant and young child feeding in emergencies	3,000	0	n/a	
Explanation of output and indicators variance:		Indicator 2.1: The achieved figure exceeds the initially planned number as t provision of specialized nutritious food could not materialize due to the glot shortage of super cereals. Hence, in the remaining months, the number people reached was increased. Indicator 2.2: The actual amounts are always subjected to the fluctuation prices, hence the difference in planned and actual MTs. Indicator 2.3 and 2.4: The partnership with the envisioned partner to carry of the implementation of the activity related to indicators 2.3 and 2.4 did in materialize due to the supply shortage and delayed delivery of the specializ nutritious foods and hence the variance between the output and the indicators.			
Activities	Description		Implemented by		
Activity 2.1	Provision of targeted suppleme malnutrition prevention and treatmer		WFP and the MASS		
Activity 2.2	Provision of counselling on nut counseling mothers to the target gro national nutrition programmes		N/a due to reprogramming		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁸ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.

a. Accountability to Affected People (AAP) 9:

All WFP programmes are context specific and designed with the views of the affected population. More specifically, WFP provided in-kind food assistance for the drought affected population in rural areas in line with their preferred modality according to previous food security related programme monitoring data in rural areas and in the absence of markets and financial service providers. This is confirmed by the post distribution monitoring data showing that 79.1 percent of the beneficiary households were satisfied with the in-kind assistance modality. Additionally, the centrality of affected people in programme targeting and selection was ensured through a community-based targeting approach prior to their registration in the social registry. The mentioned approach ensured the most vulnerable households were identified, selected and prioritized.

b. AAP Feedback and Complaint Mechanisms:

Program participants had the opportunity to provide feedback and file complaints to WFP field monitors, the MASS staff, the local authority, and/or community leaders during the food distributions. WFP monitors were on the ground during every food distribution who closely monitored the process and conducted required follow-ups. While the mechanism was considered the most feasible complaints and feedback mechanism (CFM) in rural Djibouti where populations live scattered in several localities and in small numbers, and where telephone network is limited or often non-existent, post distribution monitoring data showed that improvement is required in this area, with the majority of the beneficiary households not aware of the current CFM. To improve this, WFP is currently in the process of a feasibility assessment to strengthen the CFM in rural, sparsely populated areas.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

WFP has strict guidelines in place for the Protection against Sexual Exploitation and Abuse (PSEA) with focal points in each sub-office and main office overseeing the PSEA agenda. The mechanism used to record and handle SEA in rural areas was through sensitization sessions conducted by WFP field monitors during the food distribution, ensuring that community members are that humanitarian assistance is free and what their rights and reporting options are. Due to the strong community linkages, the oral and direct reporting has been proven to be most accepted by the communities in Djibouti. Community members who wish to provide anonymous feedback, customarily speak to the Chef de Village who will then take it up with authorities on their behalf. No SEA-related complaints were reported over the course of this project.

⁸ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas here.

⁹ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the <u>IASC AAP</u> commitments.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

While the emergency food assistance had the main objective to address the most critical food needs of the drought-affected population, women-headed households and households with disabilities were prioritized as those were considered extra vulnerable.

Under the nutrition activity, PLW were the main target group, in addition to children aged 6-59 months. The intervention and sensitization were adapted to the needs of this group, including the referral of PLW to health centres for the continuation of specialized nutritious food. Nutrition support specific to the needs of the target-group and the prioritization of households headed by women for relief assistance contributed to increased decision-making by women on the use of WFP assistance in beneficiary households. According to the programme monitoring data, in 58 percent of the households, women decided on the usage of the WFP assistance and 20 percent of the households made this decision jointly.

e. People with disabilities (PwD):

WFP worked with community leaders, local authorities and the MASS to manage the distribution of humanitarian assistance and to ensure that aid was accessible to and reached people living with disabilities. During the post distribution monitoring survey, almost 100 percent (99.6 percent) of the beneficiary households reported to have had unhindered access to the food assistance. While having a disability forms part of the vulnerability criteria in the PMT and community-based targeting approach, at this time, WFP's people reached data does not reflect the number of people with disabilities who were directly targeted and reached, however, work is ongoing together with the authorities to ensure this information can be captured in the future.

f. Protection:

In line with WFP's Corporate Protection Policy, WFP incorporated protection considerations into this project to ensure the safety, dignity, and integrity of the community members receiving the food and nutrition assistance. The percentage of people receiving WFP assistance with dignity was met at 84 per cent and without safety challenges at 100 percent. 100 per cent of respondents stated that they received WFP's assistance without facing any safety challenges, had unhindered access to assistance (99.6 percent) and were treated with dignity at the food distribution points (84 per cent). Under this activity, it is attributed to food distributions points being in proximity of the communities and the involvement of the local authorities in the distribution process.

g. Education:

N/A

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	0

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multipurpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

N/A

Parameters of the used CVA modality:						
Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction		
N/A	0	US\$ 0	Choose an item.	Choose an item.		

9. Visibility of CERF-funded Activities				
Title	Weblink			
No				

1. ANNEX 1: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Sector	Agency	Implementing Partner Type	Funds Transferred in USD
22-RR-CEF-040	Child Protection	UNICEF	INGO	\$16,497
22-RR-CEF-040	Child Protection	UNICEF	INGO	\$16,497
22-RR-CEF-040	Child Protection	UNICEF	NNGO	\$8,023
22-RR-CEF-040	Water, Sanitation and Hygiene	UNICEF	NNGO	\$3,757
22-RR-CEF-040	Child Protection	UNICEF	INGO	\$26,300
22-RR-CEF-040	Child Protection	UNICEF	NNGO	\$16,568
22-RR-CEF-040	Water, Sanitation and Hygiene	UNICEF	RedC	\$25,037
22-RR-CEF-040	Nutrition	UNICEF	NNGO	\$27,940
22-RR-CEF-040	Water, Sanitation and Hygiene	UNICEF	GOV	\$29,898
22-RR-CEF-040	Water, Sanitation and Hygiene	UNICEF	GOV	\$64,389
22-RR-HCR-021	Protection	UNHCR	NNGO	\$93,900
22-RR-WFP-036	Food Assistance	WFP	GOV	\$25,000