## **Djibouti**

#### **Executive Summary**

Djibouti sits in a strategic position in the Horn of Africa. It is a small country (23,200 sq. km.) with an estimated population of 500,000 to 800,000 people, living mostly in urban areas (85 percent of the population). The rest of the population lives in rural areas and is composed of pastoralists and agro-pastoralists.

Most areas are barren deserts, with an average rainfall of 200 mm per year. Because of the aridity, the volcanic nature of the soil and the very high temperatures, agriculture accounts for less than five percent of the Gross Domestic Product<sup>1</sup>. Djibouti imports more than 80 percent of its requirements, of which food constitutes more than 25 percent. Djibouti is also a disaster-prone, low-income, food deficit country (LIFDC) and recurring



droughts, floods, earthquakes, and health hazards affect the country continuously. About 42 percent of the population lives in extreme poverty with less than \$1.8/day. Infant morbidity and infant mortality rates are very high at 103 and 124 per 1,000 live births, respectively. The maternal mortality rate is 546 per 100,000 live births.

A Multi-Indicator Cluster Survey (MICS), undertaken in 2006 by the Ministry of Health and the Department of Statistics and Demographics (DISED), in collaboration with UNICEF and the Pan Arab Project on Family health (PAPFAM) reported that Global Acute Malnutrition (GAM) and Severe Acute Malnutrition (SAM) rates were well above the emergency threshold. According to the preliminary report released by the Ministry of Health, the nutritional status of children under five years of age deteriorated since a similar survey conducted in 2002. The rate of GAM (weight for height) was 20.4 percent, against 17.9 percent in 2002, while the rate of SAM was 7.1 percent against 5.9 percent in 2002. High malnutrition rates could be attributed to persistent droughts in earlier years, which affected the household food security status in all pastoral livelihood zones. Acute food insecurity was also compounded by poor hygiene conditions (water and sanitation), poor childcare practices, as well as poor dietary diversity.

As a result, severe health risks appeared due to the food security situation and recent rains have triggered an outbreak of diarrhea diseases. Cholera cases were also confirmed in both rural and urban areas due to poor hygiene and high dependence on unsafe water sources. In the agriculture sector, it would take several years and intensive asset building programmes for pastoralists to recover, notably after a significant depletion of livestock assets. The drought thus worsened poverty by threatening livelihoods of local populations, which was further compounding the humanitarian situation in sectors such as health and malnutrition.

<sup>&</sup>lt;sup>1</sup> Source : Enquête Djiboutienne Auprès des Ménages (EDAM 2. EDAM2 data are used as a reference by the Government of Djibouti for the preparation of the Poverty Reduction Strategic Framework which will be submitted to the World Bank in May 2003

Table 1: Agencies that received funds in 2006

Total amount of humanitarian funding required (per reporting year):	<b>\$</b> 3,070,192
Total amount of CERF funding received by window (rapid response/under-funded):	<b>\$1,905,355</b>
Total amount of CERF funding for direct UN/IOM implementation and total amount forwarded to implementing partners	<ul> <li>All funds for direct UN implementation</li> </ul>
Total number of beneficiaries targeted and reached with CERF funding (disaggregated by sex/age):	<ul> <li>WFP: 47 500 beneficiaries (boys below 5: 3,830, boys 5 to 18: 10,100, men: 6,785, girls below 5: 3,997 girls 5 to 18: 10,530, women: 12,258)</li> </ul>
	<ul> <li>FAO: 25,000 direct and indirect beneficiaries</li> </ul>
	<ul><li>WHO: approximately 88,000 beneficiaries</li></ul>
Geographic areas of implementation:	<ul> <li>All drought-affected areas</li> </ul>

### **Decision-Making**

On 19 January 2006, the Government of Diibouti launched an appeal for international assistance after a drought emergency affected the country for the fourth consecutive year. A Governmentled multi-sectoral and multi-partner assessment was conducted throughout the country from 7 to 11 February resulting in a preliminary report on 19 February. The main findings of the rapid assessment showed that the population at risk ranged up to 150,000 whereas affected population was measured at approximately 88,000. The affected population was largely surviving because of WFP distribution and support from family members working in urban areas. Reports confirmed heavy losses of livestock (up to 80 percent in some districts) resulting from consecutive years of failed rains and prolonged drought, while surviving livestock was often affected by pneumonia, diarrhea and parasites. Insufficient water sources were widespread due in a large extent to poor water management, which had a negative impact on food production as well as livestock survival. High levels of malnutrition rates were confirmed while only minimal capacities were in place to monitor the food security situation and the onset or outbreaks of diseases related to the drought emergency. Because of the humanitarian crisis and poor infrastructural capacity, national emergency response and operations coordination bodies could not cope with the range of needs and challenges faced by populations.

In planning the drought response, the UN country team took most decisions by consensus. Given that the impact of the drought was exacerbated by chronic structural problems, including the general state of poverty of the affected population groups, the challenge was to distinguish

between the direct and acute impact of the drought, and longer-term development issues being addressed by UN agencies as development-oriented efforts. The overall priorities for projects funded under the CERF were thus mainly to enable and enhance a more rapid, effective and efficient government response to the urgent needs of the affected populations. More specifically it was intended to strengthen the national emergency response operational body, ONARS (Office National d'Aide aux Refugiés et Sinistrés), and build its capacity in communication and logistics coordination in order for ONARS efforts to better mitigate the drought's multi-sector impacts. Rapid response in the food sector was also deemed essential following several WFP-

led rapid needs assessments, which had found that due to the persistence of the drought situation, particularly in the northwest and the southeast pastoral Sub-Zones, limited natural resources were put under significant pressure. WFP noted that as a result of the pressure on resources, pastoralists and other nomadic populations would find themselves forced into unusual displacements. WFP's findings also confirmed the results of earlier multi-agency joint assessment missions, and highlighted that income for local pastoralist and agropastoralist communities was highly dependent on the health and productivity of their livestock. Therefore, the food security situation was declared of extreme concern and food assistance was recommended to all drought victims in the rural areas.



Visit of HE the Minister of Health accompanied by WR Djibouti to the Cholera Treatment Centre at As-Eyla.

In addition, due to the direct correlation between the food security of local communities, income and health and the productivity of their livestock, rapid response to veterinary health issues and animal

nutrition deficits was also deemed critical and a matter of emergency for the survival and recovery of agro-pastoralist and pastoralist communities. The setting up of small agro-pastoral perimeters for local populations to maintain income-generating activities was also designed as a complementary priority for the support of food self-sufficiency of drought-affected communities.

In both dimensions of the CERF supported agriculture projects priorities were established through close coordination between the UNCT, including FAO, and national authorities including the Ministry for Agriculture, Animal Husbandry, and the Sea (under whose portfolio water management was placed). Local communities were also involved in planning interventions in support of agro-pastoralist livelihoods while NGOs contributed to the initial needs assessment and participated in the decision-making process to establish priority interventions and sequencing of activities throughout the implementation period.

The following criteria were used to determine priority interventions in response to challenges faced by agro-pastoralist communities, namely availability of water resources; family needs for water supply; livestock needs for water supply; and availability of proper land for agro-pastoralist activities. The project's objectives were to reduce the impact of cumulative periods of drought by the establishment of small supply stocks of livestock forage, increase food rations for local communities through food production diversification, and support diversified livelihoods and income-generation activities.

### Implementation and Partnerships

WFP's project in the **food sector** was implemented in close collaboration with the five district commissioners (Representatives of the Presidency) of the Ministry of the Interior, the ONARS and community-based committees. At district level, technical committees were established to

determine the list of targeted beneficiaries in each of the project's locations and in each affected livelihood zone. Gender and age equity was used in the prioritization of interventions and distribution plans were developed through community-driven food-aid committees. The general relief food distribution was supervised by WFP food aid monitors and conducted by the technical committees at the district level. Collaboration between local authorities and local community-based committees was instrumental in the relief effort and allowed for better targeting of beneficiaries, as well as better sensitization and coordination of members of the food distribution committees.

In the **health sector**, WHO received a total of \$220,000 in two allocation rounds aimed at enabling delivery of life-saving medical services through the implementation of mobile health units able to cater to the health needs and emergencies of drought-affected populations. Implementation of the health project was done in close collaboration with the local administrative and community authorities in the initial needs assessment process. Action plans were in turn developed by UN agencies and relevant national counterparts, while funds remained managed by UN agencies, which handled onward disbursement following requests by implementing partners.

Implementation of projects was carried out by local and national counterparts with constant technical support from UN agencies. Communities and community-based organizations were closely associated in the implementation phases. Components implemented under the health sector response included development of outreach health units, disease and malnutrition surveillance and monitoring, mobile health units deployed in all districts, social mobilization and community education on health topics such as integrated child care, technical and equipment support (including procurement of computer and communications equipment). A general early warning systems on health and vulnerability issues was developed in the Djibouti district. The early warning network implemented benefits from partnerships and input from local hospitals, OPS, health centers and health posts as well as private care units. Efforts were underway to expand the coverage of the early warning system to other districts. In this regard, reference documents on early warning were elaborated and validated in partnership with the Ministry of Health.

The UNDP project funded under CERF was aimed at enabling a more rapid, effective and efficient government response to the affected populations. UNDP support was notably intended to strengthen ONARS' communication and logistics coordination. The total budget contributed by CERF was \$26,000 out of which 95 percent was utilized in the purchasing and installation of communication equipment. Given the small size of the allocation and the CERF implementation period, UNDP executed the project directly. The CERF funding complemented UNDP emergency and crisis response funds already committed to build capacity for ONARS staff.

In the **agriculture sector**, implementation of the CERF projects benefited from partnerships between UN agencies including FAO (technical support and follow-up), WFP (food distribution), UNICEF (rehabilitation of boreholes for irrigation), and UNDP (general coordination of the UNCT). In addition, the Ministry of Agriculture was an instrumental partner in implementing technical components under the agriculture project and provided training and follow-up support to pastoralist and agro-pastoralist farmers. Community-based organizations such as the Union Nationale des Femmes Djiboutiennes (UNFD, National Union of Djibouti Women) and Radio Djibouti supported sensitization of farmers and pastoralists. Veterinary health centers and health workers supported training of animal husbandry workers and basic veterinary caregivers, while also supporting the establishment of agro-pastoral perimeters aimed at ensuring livestock health and maintaining livestock levels. Each implementing partner contributed significant

support according to their comparative advantages. The cooperation between UN agencies, civil society groups, private enterprises, and media outlets amounted to the successful implementation of the project as well as great benefit to the targeted beneficiaries.

Integration of emergency responses in the food and agriculture sector during implementation was exemplary, as UNICEF for instance worked towards rehabilitation of irrigation boreholes, which would then be at the center of an agro-pastoral perimeter laid out through joint efforts from FAO and Ministry of Agriculture. At the same time, during the installation of the agro-pastoral perimeters WFP provided for food security needs for farmers and herders and UNFD engages in sensitizing local businesses on the use and maintenance of the agro-pastoral perimeters, while veterinary health workers provide care for livestock.

#### Results

In the **food sector**, CERF funding helped to reduce or stabilize prevalence of acute malnutrition among 47,500 drought-affected pastoralists through the provision of minimum energy and dietary requirements, in accordance with WFP strategic priority No1, "Saving Lives in Crisis." The \$500,000 in CERF funds were used to purchase 860 metric ton of mixed food commodities

(including cereals, vegetable oil, pulses and sugar) and to ensure operational costs for a one-month distribution period for beneficiaries. Prior to the arrival of the purchased commodities, the WFP was also able to access more commodities on a loan basis from a different project implemented in response to refugee flows into Djibouti. This arrangement ensured a steady and regular flow of food aid and a seamless implementation of the WFP Emergency Operations (EMOP). The impact of food aid distribution has also helped decrease further massive migration of drought victims from rural areas towards urban centers, thus avoiding further strains on the already overburdened water, health, and sanitation infrastructures.



Sensitization and awareness raising session being conducted at Doudouballalé site.

In addition, WFP was able to create a Monitoring and Evaluation Unit at the beginning of 2007 in order to measure the impact of projects on the targeted beneficiaries. Data was successfully collected in the field by WFP monitors to undergo analysis. The key indicators used in this new capacity developed by WFP include, amongst others, food availability, food access, number of beneficiaries, sale of livestock and other assets, food consumption patterns, and percentage of women receiving food through food distribution committees.

CERF funding also made a significant difference in the **health sector** in as much as the CERF projects came as the first substantial and comprehensive response the Government appeal. The funding contributed dramatically to save lives and to mitigate the impact of the drought. Lack of interventions would have created a situation of serious emergency with heavy loss of human lives and chronic depletion of livestock. Mobile units were deployed in all three districts (Dikhil, Ali Sabiej, Tadjourah and Obock) targeted by the CERF projects. An emergency expert was contracted for three months to implement the mobile units programme and three vehicles were purchased to allow this initiative to reach those districts lacking transport means (including Tadjourah, Obock and Arta districts). Health equipment including child-care material was also procured and handed over to the Ministry of Health for the deployment of the Mobile Health Units. Nutrition surveillance systems have been designed following two evaluation missions

conducted by WHO Geneva and WHO Cairo to assess technical support needs of the Ministry of Health. Tools and materials were prepared to monitor malnutrition and coordination meetings were held with WFP on the choice of sentinel sites and stakeholders. A nutrition expert was also hired for a two-month period to implement the nutrition surveillance system.

Additionally, an early warning system was in place in the Djibouti District, which has benefited from the input of local authorities and health care providers. The system was in the process of being reinforced in other districts with the procurement of communication systems for medical centers, hospitals as well as the organization of training session for health staff. Furthermore, an Integrated Child Sickness Care programme as well as parental education regarding breastfeeding was put in place in 19 health centers. Health education and promotion was carried out at community levels.

Training and technical support was provided by the contracted experts in all districts on the operation of the mobile units, including nutritional surveillance and early warning systems. Some 57 persons received training in early warning on epidemic disease and nutrition, including five hospital directors, four mobile clinic doctors, nurses in 22 health centers and nurses and midwives in five district hospitals. Training in management and planning of health-related activities was given to 25 staff member of the mobile clinics. As part of technical and capacity



Agro-pastoral perimeter of Aor-Aoussa, September 2006

building support, computer equipment was procured for the Ministry of Health, which also benefited from support in the development of nutrition, monitoring, and evaluation protocols. Terms of reference were systematically elaborated and validated with the Ministry of Health for all components of the CERF supported health response, including the mobile units, the nutrition surveillance systems, and the early warning systems. As a result, the Ministry of Health was strengthened through the combination of training, improved access to rural populations, improved monitoring systems and increased service delivery to drought-affected populations for effective health and malnutrition management. It is estimated that the number of beneficiaries targeted and reached with CERF funding was 88,000 people in rural drought-affected districts as of March 2006.

The UNDP Djibouti project in the **logistics and communication sector** supported capacity building for ONARS through the provision of technical equipment, including four radio systems and the improvement of trucks tracking, as well as better coordination and data collection. As a result, ONARS capacities have been strengthened in order to respond to emergency needs of drought-affected communities.

In the **agriculture sector**, the two FAO coordinated projects helped restore livestock health and establish small agro-pastoral perimeters for local farmers to be able to maintain livelihoods and food security. Significant results were achieved thanks to CERF funding. Veterinary medicines amounting to \$155,000 were distributed and care was provided to over 200,000 livestock (essentially small ruminants). In support of animal care, 50 veterinary auxiliary workers were trained and deployed and 3,000 small ruminants received vaccinations against brucellosis. This has also supported zoonosis control by preventing the transmission of diseases affecting livestock to the local population. A sensitization campaign was also led on hygiene and

safeguarding water sources and boreholes, reaching over 12,000 agro-pastoralist and



The distribution of farming hardware kits to Aor-Aoussa beneficiaries, September 2006

pastoralist families, while 40 hygiene and community liaison workers were trained. These awareness campaigns were conducted on highly frequented locations for herders and their livestock (water sources, boreholes and known shelters in the area) to ensure maximum outreach. Radio programs were broadcast as part of this campaign and targeted agro-pastoralists and pastoralists in the wider drought-affected areas.

The CERF II project focusing on the establishment of agro-pastoral perimeters also achieved significant

results as nine sites were prepared for use by nomadic herders, farmers, and their livestock. Sites were located in all five districts of the country and represented 12 hectares of land. Borehole and water source sites to be converted in agro-pastoralist perimeters were chosen according to the level of output and availability of water to ensure all needs could be met for populations, livestock, and land cultivation. Water output also determined the total surface area to be fitted for agro-pastoral activities. Following identification of sites, enclosures and underground irrigations systems were installed, and 49 hardware and farming kits were distributed to beneficiaries, as well as fodder and other seeds. Close to 500 vitro-plants of date palm trees were also procured for 49 agro-pastoralist families. Training on new agricultural techniques was provided to targeted beneficiaries, and proper follow-up was ensured by technicians from the Directorate for Agriculture and Forests.

Table 2: Agro-Pastoral Perimeters implemented under the CERF project

Perimeter	District	Surface
1. PK50	Arta	1 ha
2. PK57 – Omar Gagaa	Arta	1ha
3. Aour Aoussa	Ali-Sabieh	2h
4. Galamao	Dikhil	1ha
5. Holoita	Dikhil	2ha
6. Oulma	Obock	2ha
7. Ily Sola	Obock	1ha
8. Andaba	Tadjourah	1.5ha
9. Périmètre agro-pastoral de Dorra	Tadjourah	0.5ha
Total surface		12 ha

The combination of CERF funding to maintain livestock health and to help establish agropastoral perimeters have had a strong positive impact on the sanitary and health conditions of cattle. In turn, this has supported efforts to mitigate the impact of cumulative drought on food security and livelihoods. The UNCT also underlined that CERF funds will serve as a catalyst to mobilize further funding sources amongst development partners.

#### Lessons Learned

In the implementation of most projects, UN agencies had to overcome constraints related to lack of Government capacity to coordinate responses, limited expertise at the country level to conduct assessments (a constraint overcome thanks to support from UN regional offices), lack of baseline data for sectors being assessed, and difficulties in accessing certain affected areas. Another challenge, given the drought had exacerbated chronic structural problems and poverty, was distinguishing between the direct and acute impact of the drought and longer-term development issues being addressed by UN agencies but that are beyond the scope of humanitarian response.

WFP noted that further deteriorations of the drought conditions in neighboring Horn of Africa countries including Ethiopia, Eritrea, and Somalia had a negative impact on water resources both for human consumption and for livestock through pasture consumption. This placed the people of Djibouti under increased stress and required improved targeting of beneficiaries. In addition, WFP underlined that termination of the general food distribution programme would increase risks of food insecurity for chronically food insecure households in the northwest and southeast pastoral livelihood zones.

In responding to the drought emergency, WHO benefited from partnerships with governmental institutions as well as civil society. Because the response was effective and rapid, CERF programming contributed to improve the UN's image and acceptance in the country, and UN system agencies emerged as key partners. However, WHO noted that there was an obvious need to better link long term programming with emergency response since drought is a chronic issue in Djibouti. The cycle of recurrent emergencies can only be broken if emergency related interventions are linked up with an appropriate development response.



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Implementation and results of support in the agriculture sector have proven successful and it is noteworthy to underline the benefits reaped from use of solar and renewable energies for irrigation and access to deep groundwater sources. This has allowed for sustained long-term benefits for agro-pastoralist and pastoralist communities supported under the CERF project, and improved resilience to climate hazards while helping ensure higher food self-reliance and security. Agro-pastoral perimeters set-up under the emergency drought response thus proved to be a successful strategy, and beneficiaries in certain sites were able to make small profits following fodder harvests done inside the agro-pastoral perimeters.

In terms of administrative procedures in the handling and disbursement of CERF funds, although UNDP experienced some delays in accessing funds, the regional approach used in planning for the Horn of Africa drought-crisis response proved very effective and efficient. In this regard, the UNCT recommends maintaining this practice. Such an approach has benefited Djibouti as the country often has trouble in attracting humanitarian funding and donor attention.

**UNDP** - Strengthening ONARS logistic and coordination capacity

Grant number	Sector	Dates	Benefi ciaries	Objective	Results	Total Project Funding	Received from CERF	Implementation action (as of 31 July 2006)	funds provided to enting partners
000515 57	Coordi nation and logistics	9 June 2006 - 9 Sept 2006	ONARS	Strengthening communication capacity through the provision of Codan radio systems for 4 ONARS food delivery trucks	Improved communication capacity through provision of four radio systems	\$26,000	\$ 26.000	\$ 20.003	Non Applicable

# UN Children's Fund - Emergency WES for Drought and Emergency Nutrition for Drought

Grant Number	Sector	Dates	Benefic iaries	Objective	Results	Total Project Funding	Amount Received from CERF	Financial Implementation (as of 31 July 2006)	CERF funds provided to implementing partners (amounts per partner)
06-CEF- 2277	Water and sanitation	25 April 25 - July 2006	20,000	■ To save lives and preserve health by availing safe water for drinking and household use through water tankering to selected locations ■ To undertake emergency rehabilitation/rep airs of various water sources to ensure safe access to water to at least predrought levels ■ Prevent the spread of water and sanitation-related diseases through establishment of safe hygiene environment and through promotion of personal and domestic hygiene	<ul> <li>3 water pumping stations rehabilitated for 2,750 persons</li> <li>36 storage tanks of 3,000 liters each installed in 19 locations benefiting 5,574 people</li> <li>33 water stations operational with the provision of fuel benefiting to 1,9750 persons</li> <li>1 training session on manipulation of Delagua kits (water quality testing) for 8 national counterparts staff</li> <li>1 on-job training session on installation of Afridev hand pumps benefiting 6 national counterparts</li> <li>315 family emergency kits dispatched in the most affected areas only;</li> <li>One inventory campaign of existing water points in the two most affected</li> </ul>	\$ 1,200,000	\$ 450,000 (Cost recovery not included)		Ministry of Agriculture, Livestock and Sea responsible for Water Resources

					districts (460 in Tadjourah and 220 in Obock) Rehabilitation of two hand-pumps in Tadjourah districts Empowerment of the line ministry which is now better equipped to respond to future droughts (01 vehicle, 02 water tankers) Mobilization of communities for better water points management in all project sites located in Tadjourah and Obock			
06-CEF- 2277	Nutrition	25 April – 25 July 2006	867	<ul> <li>Ensure appropriate referral and care of severe malnutrition within hospitals facilities, with an aim to reduce case fatality rate amongst 6 to 59 months by 50%</li> <li>Ensure appropriate identification and care of moderate malnutrition amongst 6 to 59 months within health centers</li> <li>Set up and</li> </ul>	<ul> <li>17 supplementary feeding centers opened and operational of which 10 in Djibouti capital city</li> <li>4 therapeutic centers of which 02 in Djibouti capital city</li> <li>200 health workers trained in supplementary feeding and therapeutic feeding throughout the country.</li> <li>21 health centers equipped with necessary nutrition equipment and materials for malnutrition</li> </ul>	\$593,752. 45	\$180,000 (Cost recovery not included	Government of Djibouti, Ministry of Health

	ensure adequate use of 10 sentinel sites providing data on malnutrition and epidemiology	management 4 pickup 4x4 were given for capacity building and nutritional surveillance at rural level, 4 computer set including printers and office furniture for the nutritional analysis;			
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# World Food Programme – Emergency Food Assistance to the drought victims

Grant Number	Sector	Dates	Beneficiaries	Objective	Results	Total Project Funding	Amount Received from CERF	Financial Implementat ion (as of 31 July 2006)	CERF funds provided to implementing partners (amounts per partner)
EMOP 10448.0	Emergen cy Food Assistanc e	July 2006 - One month food distrib ution	47, 500  (Boys below 5 years of age: 3 830 Boys 5 to 18 years of age: 10,100 Men: 6,785 Total Male: 20,715 Girls below 5 years of age: 3 997 Girls 5 to 18 years of age: 10 530 Women: 12,258 Total female 26 785)	To support the Government's efforts in saving lives, livelihoods, and improving the nutritional status of people affected by the current drought  (Districts of Arta, Ali Sabieh, Dikhil, Tadjoura and Obock)	• 47500 pastoralist and their families benefited from food distribution	\$ 3,070,192	\$ 500,000	\$ 500,000	N/A

## World Health Organization - Delivery of Life-Saving Medical Services through mobile Unite to the drought affected population

Grant Number	Sector	Dates	Benefici aries	Objective	Results	Total Project Funding	Amount Received from CERF	Financial Implementation (as of 31 July 2006)	CERF funds provided to implementing partners
	Health	1st March to 23rd August 2006	88000	<ul> <li>Main Objective: Improve basic health services coverage and delivery in affected areas Specific objectives:         <ol> <li>Procurement of necessary equipment, essential drugs and supplies</li> <li>Select essential health care interventions to be delivered by out reach units</li> <li>Develop appropriate guidelines for the health personnel and provide inservice training, monitoring</li> </ol> </li> </ul>	<ul> <li>Essential health services reached by outreach units</li> <li>Disease surveillance and early warning system functional Implemented</li> <li>Activities:         <ul> <li>3 mobile units purchased</li> <li>2 were procured, equipped and handed over to the MOH on 27 July 2006 for the districts of Tadjourah and Arta. The remaining one went to Obock.</li> <li>Technical support: training, Monitoring, and supervision: 57 health workers trained Health education and promotion at community level implemented.</li> <li>Validation by MOH of the TORs of the mobile clinics, and the nutritional and epidemiological surveillance system</li> <li>1 laptop already procured for the focal point of emergency Informatics &amp;</li> </ul> </li> </ul>	\$220 000	\$220 000	\$172 268	

communication equipment for the surveillance system is in process: 2 computers, 2		
printers, 2 UPS and 16 FAX		

**Food and Agriculture Organization (FAO)** - Mitigate the impact of drought on affected pastoral population and mitigate the impact of drought on affected pastoralists

Grant Number	Sector	Dates	Benefici aries	Objective	Results	Total Project Funding	Amount Received from CERF	Financial Implementation (as of 31 July 2006)	CERF funds provided to implementing partners
OSRO/ RAF/60 4/CHA	Livestock	25 April - 25 July 2006		Improve the health status of livestock in affected areas Sensitization and information concerning water and pasture management notably around water points	<ul> <li>■ Training session for 6 trainees (veterinary technicians), training session for 50 livestock auxiliaries in charge of livestock basic health care with provision of appropriate small tools</li> <li>■ Distributed 75 sets of small tools and veterinary medicines treatment of livestock by livestock technicians and auxiliaries in 5 provinces</li> <li>■ Campaign of sensitization, detection and vaccination against Brucellosis</li> <li>■ Training session for 20 of community extension workers in charge of sensitization</li> <li>■ Sensitization and information sessions for livestock community around water points fixation of 15 placards (pan carts) of sensitization in 15 sites around water points in 5 districts</li> </ul>		\$200 000		Ministry of Agriculture, Livestock and Sea in charge for Hydraulic Resources

### Djibouti 2007

On 15 May 2007, CERF allocated \$1.5 million to emergency food assistance and security in Djibouti. During the past decade, droughts have been more frequent and the recovery periods shorter, taking a heavy toll on vulnerable populations. Drought has evolved into a chronic emergency with a varying intensity and it is seen as a "normal" phenomenon. By creating the National Initiative for Social Development (INDS) and the inter-ministerial task force on food security, the Government has taken useful new steps to improve food security.

In September 2006, during the peak of the lean season, the World Food Programme (WFP) conducted an Emergency Food Security Assessment (EFSA), which concluded an estimated 20 percent of the population was food-insecure and highly vulnerable. In the northwest of the country, almost half of the households indicated that they had been forced to migrate in order to find pasture for their animals. CERF grants of \$1,575,570 are enabling the UN Children's Fund (UNICEF), the Food and Agriculture Organization (FAO) and the World Health Organization (WHO) to develop short-term projects to avoid a further increase in the malnutrition caseload. The World Food Programme (WFP) is using its allocation to continue the free food distribution from June to August, the most difficult dry period of the year.

UNICEF is using its \$278,200 CERF allocation to scale up the management of moderate and severe malnutrition at health facilities and at community levels. UNICEF intends to increase the coverage of 40 percent at the end of 2006 to 80 percent by the end of 2007 for children under five years of age, and to reduce the fatality rate of severe acute malnutrition treated in hospitals below five percent. Some 30,000 malnourished children will receive therapeutic milk and drugs. In addition, UNICEF is supplying all the materials necessary for therapeutic and supplementary feeding centers, monitoring, and supervision. The nutrition education for mothers with malnourished children is going to be improved.

WHO is seeking to mitigate the impact of avoidable infectious diseases on mortality and morbidity among a population of some 106,000 semi-pastoralists and nomads and the rural population in the periphery of Dikhil and Ali Sabieh. Acute malnutrition rates are reaching 20.3 percent in Dikhil (including 5.5 percent of severe malnutrition) and 38.1 percent in Ali Sabieh (20 percent). With its CERF grant of \$299,910, WHO is acquiring two equipped vehicles to improve the deployment of the existing mobile health units in the affected areas. The units are receiving logistic support and essential drugs, mosquito nets, and equipment to monitor the patients' medical and nutritional status.

FAO's project is aiming at the survival of the livestock of the drought-stricken nomadic population in the Dorra region. The UN agency is supplying veterinary products to 20,000 beneficiaries chronically affected by food insecurity. With its CERF grant of \$445,629, the FAO is also training veterinary personnel in health measures for animals as well as the care and management of herds. In addition, it is rehabilitating five water reserves by planting fodder bushes and sensitizing the stockbreeders to the maintenance and management of water reserves and forest perimeters.

WFP is using the \$551,831 CERF grant to purchase food so it can continue its activities to meet the needs of an estimated 47,750 beneficiaries for one month. The aim is to improve the nutritional status of the most food-insecure rural populations in the five districts of Djibouti that are most affected by the drought.