



COUNTRY PROFILE



L. MCBRIDE, USAID/DJIBOUTI

Students like these are able to attend safe and fully equipped schools in Djibouti thanks to USAID programs.

OVERVIEW

Although relatively stable, Djibouti's extreme poverty, high unemployment, chronic food deficits, and humanitarian and social needs make it susceptible to instability. Djibouti's arid climate and rocky soil are inhospitable to agricultural and large-scale livestock production. The only natural resources of note are salt and the deep water port. Djibouti's population is estimated to be 700,000 of which 85 percent live in urban areas. Djibouti also harbors 9,600 refugees from Somalia and Ethiopia. Though social indicators are showing modest improvements due to increased donor and government investments, Djibouti is still ranked 150 among 174 countries in the UNDP's Human Development Index. Among the most important challenges are Djibouti's low health and low skills levels, a high population growth rate, and sluggish economic growth. Djibouti suffers from bloated civil service rolls, poor governance and weak institutions that lack transparency. Djibouti is a potential terrorist target because of its porous borders with Somalia, Ethiopia, and Middle Eastern neighbors, as well as the presence of the only U.S. military base in Africa. United States interest in Djibouti focuses on creating an environment that would discourage the development of radical ideology. The United States provides 60 percent of Djibouti's humanitarian food assistance. USAID programs in Djibouti work in education, health, and food security.



DJIBOUTI SNAPSHOT

Date of independence: 1977
Population: 0.7 million (estimate)
Income per person: \$910 (yr)
Source: World Bank Development Indicators

USAID IN DJIBOUTI

www.usaid.gov/locations/sub-saharan_africa/countries/redso

PROGRAMS

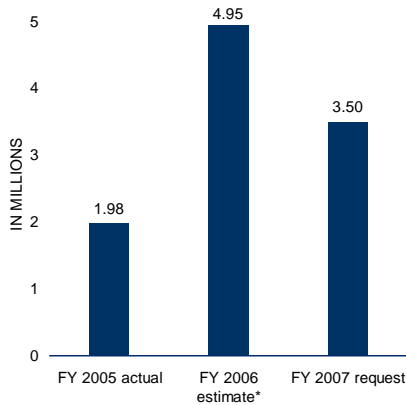
IMPROVE BASIC EDUCATION

Djibouti made primary school free and mandatory in 1999, and gross enrollment at primary school increased by 16 percent between then and 2004, although this has only brought the total enrollment rate up to 54 percent. USAID's education program focuses on increasing access, equity, and quality in basic education and on non formal training for out-of-school girls and women. In FY 2005, 10 primary schools and one middle school were rehabilitated, with water and sanitation provided to each. One of the schools in the capital city was an aging primary school that was closed and, through USAID assistance was, converted into a new middle school to serve a disadvantaged urban area where no middle school existed. USAID provided new textbooks for all subjects, and the Ministry of Educa-



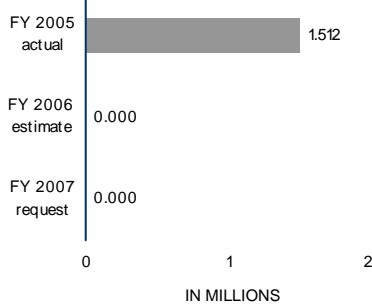
COUNTRY PROFILE CONTINUED

USAID ASSISTANCE TO DJIBOUTI



*\$1.150 programmed through USAID, East Africa in Nairobi, Kenya

USAID FOOD AID TO DJIBOUTI



For more information, see the FY2007 Congressional Budget Justification <http://www.usaid.gov/policy/budget/>

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tion supplied 600 new student desks and chairs. Initial enrollment of 593 increased to 823 by the start of the school year in September 2005.

USAID supported the distribution of a school bag filled with basic supplies to every primary school child in Djibouti as a way to help parents offset costs. In all, 95,000 school kits, 775 sets of equipment for teachers, and approximately 150,000 textbooks have been provided to date. USAID has constructed five new teacher resource centers, which serve as decentralized focal points for teacher and school directors' training. President Bush's Africa Education Initiative funded 1,000 scholarships to girls through the Ambassadors' Girls Scholarship Program. USAID assisted in the development of English language audio programs and students' books and facilitators' guides. In addition, 71 percent of teachers in Djibouti are using the USAID supported teachers' curriculum guides and new teaching strategies.

FOSTER A HEALTHIER SOCIETY

Life expectancy remains low at approximately 46 years, and 70 percent of first-grade-aged children are malnourished. The vaccination rate is less than 11 percent for children under five years old in the rural areas. Since May 2004, USAID has sought to increase the supply of essential health services, improve the quality of services and enhance local capacity to sustain health services, benefiting over 150,000 Djiboutian women and children living in rural areas. USAID, in collaboration with the Ministry of Health, added maternity services and in-patient beds to four district hospitals. All health posts will be rehabilitated and equipped by September 2006.

To improve rural health care, USAID developed a training guide for all rural health post workers. These workers have now completed the training. District medical teams have been established and trained to improve services and supervision and health committees have been formed in each of the 23 communities. In addition, USAID supported the use of hundreds of radio broadcasts with key health messages in the three local languages (Afar, Somali, and Arabic) that were delivered in January, July, and August, 2005.