

Djibouti

The Development Challenge: Djibouti suffers from a deteriorating economy and a weak productive sector. It is still suffering from the after-effects of its civil war (1990-1994), which caused large displacements of populations and the destruction of schools and clinics. It is ranked 153 among 174 countries in the UNDP's Human Development Index. Djibouti's arid climate and rocky soil are inhospitable to agriculture and large-scale livestock-raising, and, except for large salt deposits, it has no known natural resources. The population of Djibouti is 75% urban and suffers from a 60% - 70% unemployment rate. Over 60% of the primary school age population does not attend school. Djibouti exhibits high rates of infant and under-five child mortality, estimated at 114 and 165 per 1,000 live births respectively. Maternal mortality is estimated at 740 per 100,000 live births, one of the highest rates in the world. Approximately 31% of the under-five population suffers from malnutrition.

Djibouti's strength and potential for development rests in its strategic location, which has proved to be important for regional security and trade. Djibouti has become the major port for over \$100 million in emergency relief imports to Ethiopia and hosts U.S. forces fighting the Global War On Terrorism, the only American military base on the African continent. Therefore the United States has a significant national interest in Djibouti. This interest has been demonstrated by high-level meetings and visits between American and Djiboutian officials in the past year, including a visit by President Guelleh to Washington to meet with President Bush.

The present government of Djibouti has sought to use its strategic location for trade as the basis for new and cohesive strategies to develop Djibouti into a modern and efficient commercial city-state. It has done this through the promotion of trade liberalization, modern communication strategies, and strategies to develop Djibouti's human capital, specifically through the development of its education and health care systems.

The USAID Program: Two strategic objectives concentrating on improving basic education (grades one through nine) and expanding basic health services (targeted to improving maternal and child care) have been adopted for the USAID program in Djibouti. In the area of basic education, the USAID program will expand access, especially for girls, and improve the quality of schooling (with the focus on improving teacher effectiveness and providing classroom material). In the health sector, USAID will focus on providing an increased supply of essential health services, improving the quality of services, and enhancing local capacity to sustain health services. Both strategic objectives are designed to maximize synergies between the health and education sectors that will assist in their implementation by local communities.

Other Program Elements: Djibouti is a chronic food deficit country requiring an estimated 13,000 metric tons (MT) of food annually from the international donor community. USAID has worked closely with the World Food Program (WFP) to develop an operation encompassing a variety of activities that target different groups, including support to vulnerable Djiboutians through rural food-for-work activities and urban institutional feeding and relief for Somali refugees in Djibouti. In FY 2003, USAID provided an initial 4,000 metric tons of commodities valued at \$2.2 million (with two-thirds going to Djiboutians, and one third to refugees), and it is anticipated that a similar commitment will be made in FY 2004. The target group includes an estimated 43,000 Djiboutians and refugees.

In addition to the resources requested under the two strategic objectives, Djibouti will benefit from REDSO's Regional Food Security Program which will provide \$4.0 million to develop an export promotion facility in Djibouti. This facility will support the export of livestock from Somalia, Ethiopia, and Djibouti to the Middle East and the Arabian Peninsula. This activity will result in substantial new income for thousands of families in the three countries. In addition, \$1.0 million will be used to establish a Famine Early Warning System operation in Djibouti. This new operation will provide the capacity to monitor and assess up-to-date food security data in Djibouti, something that is not available at present. Finally, in FY 2004 under a grant of \$400,000 from the Africa Bureau, the International Foundation for Education and Self Help (IFESH) will begin activities in Djibouti through its Teachers for Africa Program.

Other Donors: Donor coordination is improving with the establishment of a USAID office in Djibouti. With USAID leadership, the Ministry of Education has established the practice of working meetings with all relevant donors to coordinate their activities. A similar system will be established for the health program. Informal meetings with heads of donor agencies have also begun. Until recently, donor assistance has been steadily declining (from \$88 million in 1993 to \$37 million in 1999). Currently the largest donors are the United States, the French Development Agency, and the World Bank, all of which have committed approximately \$50 million for multi-year health programs and \$35 million in education. The Islamic Fund and the African Development Bank have provided some support for secondary schooling and hospital construction.

Data Sheet

USAID Mission:	Djibouti
Program Title:	Basic Education Improved
Pillar:	Economic Growth, Agriculture and Trade
Strategic Objective:	603-001
Proposed FY 2004 Obligation:	\$0
Prior Year Unobligated:	\$8,000,000 ESF
Proposed FY 2005 Obligation:	\$2,000,000 ESF
Year of Initial Obligation:	FY 2003
Year of Final Obligation:	FY 2005

Summary: The proposed basic education program will increase access to quality basic education in Djibouti with a focus on girls. Activities include rehabilitating classrooms; strengthening pedagogical skills utilizing multimedia tools; providing on-going teacher support by establishing decentralized teacher resource centers; providing resources for printing and distributing student workbooks and textbooks; developing "interactive radio instruction" programs for teaching English; providing life skills and non-formal literacy training to out-of-school girls and women; mobilizing communities to support girls' education; increasing the number and quality of rural school feeding programs; and rehabilitation or construction of school latrines and sanitation facilities.

Inputs, Outputs, Activities:

FY 2004 Program:

Increase equitable access to basic education (\$3,050,000 prior year ESF). The program will increase access to basic education by rehabilitating ten targeted schools and, in some cases, by expanding existing classrooms. Assistance will be provided to renovate or build latrines and water and sanitation facilities. One approach to improving access will be through support for increased community participation in school management, particularly in rural and remote areas. Programs to improve children's health and nutritional status will be integrated into community school programs. Principal contractors and grantees (prime) include: American Institutes for Research and the Academy for Education Development.

Improve quality of teaching and learning (\$2,250,000 prior year ESF). The program will improve teachers' professional competencies and skills as they relate to the implementation of a newly developed curriculum through strengthening both in-service and pre-service training. This will include strengthening decentralized teacher resource centers in each of Djibouti's five regions as part of a strategy to develop sustainable and continuous in-service professional development programs for all teachers and schools. Support will be provided to develop the centers as hubs for in-service teacher training and for utilizing instructional technologies and multi-media approaches in development of learning materials and improved teaching practices. The centers may also be used to develop teachers' English language skills and for literacy training. The program, targeting 82 schools and approximately 42,000 students in the first year, will also provide adequate learning materials to ensure every primary school teacher has a complete set of manuals and guides and every student has a complete set of text and exercise books as well as other basic school materials. Principal contractors and grantees: American Institutes for Research, the Academy for Education Development, and the United Nations Children's Fund (all prime).

Increase opportunities for girls' education (\$2,700,000 prior year ESF). The program will also increase opportunities for girls' education by providing incentives to schools for promoting and demonstrating increases in girls' participation and by supporting and expanding existing literacy centers in targeted areas. The program, taught in both schools and literacy centers, will support information, education and communication programs focused on girls' adolescent health and social concerns. Community school programs will also aim to improve girls' education through community mobilization, strengthened PTAs,

and the introduction of appropriate gender sensitive practices into the classroom. A workforce feasibility study will be conducted. Principal contractors and grantees (prime) include: American Institutes for Research, the Academy for Education Development, and the United Nations Children's Fund.

FY 2005 Program:

Increase opportunities for girls' education (\$2,000,000 ESF). USAID plans to continue the implementation of basic education reform programs aimed at increasing access to quality education in Djibouti. FY 2005 Economic Support Funds will be used to increase funding for basic learning materials, increase access and improve teacher quality, support community school programs which seeks to improve girls and women's education through community mobilization, PTAs and appropriate gender sensitive practices in the class room. In addition, USAID will support skills training to augment Government of the Republic of Djibouti programs to provide appropriate basic education for the youths, which would meet the future workforce needs of Djibouti. An integral part of the education reform will be programs that would bring Djibouti into the information age. Strategies for innovative and increased access to appropriate and relevant information and communication technologies for distance learning through interactive radio, Internet and other communication technologies to depressed parts of the city and isolated districts will be investigated and where appropriate supported. Principal contractors and grantees: to be determined.

Performance and Results: The new program was designed in early FY 2003, and implementation began later in the year. Start-up activities included the renovation of two schools, with enrollments totaling over 3,000 students. In one of the renovated schools, an enrollment increase of 40% has been attributed to the availability of refurbished classrooms. Detailed program work plans have been developed in partnership with the Ministry of Education. Also, there has been increased coordination between donors and the Ministry of Education in the areas of school construction/renovation, curriculum development, and teacher training.

At the end of the three-year program there will be 20% greater attendance in rehabilitated schools. Five hundred teachers in grades one through five will be implementing the new curriculum. Forty-five schools will have improved the quality of classroom support and supervision. There will be active school-community groups at 60% of the schools and twenty schools will have projects initiated by communities. Learning materials and supplies will have been provided to students and teachers at all of the 82 primary schools in Djibouti.

Data Sheet

USAID Mission:	Djibouti
Program Title:	Expanded Coverage of Essential Health Services
Pillar:	Global Health
Strategic Objective:	603-002
Proposed FY 2004 Obligation:	\$0
Prior Year Unobligated:	\$12,000,000 ESF
Proposed FY 2005 Obligation:	\$0
Year of Initial Obligation:	2003
Year of Final Obligation:	2005

Summary: USAID's health program aims to expand the coverage of essential health services in Djibouti by increasing the supply of essential health services, improving the quality of services, and enhancing local capacity to sustain health services.

Inputs, Outputs, Activities:

FY 2004 Program:

Increase supply of essential services (\$4,500,000 prior year ESF). USAID will develop a detailed health program aimed at expanding access to essential health services in Djibouti. The program will increase the supply of services by rehabilitating vital services in targeted facilities, by providing necessary equipment, and by establishing or refurbishing water systems to ensure a reliable water supply at the facility level. Focusing on improving areas for service delivery and ensuring the availability of required equipment will provide Ministry of Health facilities with the logistical means needed to implement key services. Principal contractors and grantees: to be determined.

Improve quality of services (\$4,500,000 prior year ESF). USAID will support training activities at both central and district levels that focus on improving the management and quality of the delivery of essential medical services. Additionally, USAID assistance will enhance the delivery of training programs offered through the National Center for Training Health Personnel. Attention will be given to improving the ongoing training of paraprofessional health personnel as well as increasing the scope and quality of in-service training programs for public and private sector health providers. USAID will accomplish this through the provision of training equipment and materials with related activities that improve training curricula and methodology. Principal contractors and grantees: to be determined.

Enhance the local capacity to sustain health services (\$3,000,000 prior year ESF). The program will aim to enhance community engagement in health sector programs to ensure that health programs meet community needs and empower communities to better protect and improve their health. Support will focus on two fronts. First, it will help mobilize communities to support health programs while strengthening the capacity of local associations, NGOs, and community health practitioners to undertake health activities. Second, USAID will support the wider application of the community health aid model through expanded training of community health aides. Principal contractors and grantees: to be determined.

FY 2005 Program:

USAID plans to continue the implementation of the health program aimed at expanding coverage of essential health services in Djibouti.

Performance and Results: The program will begin in early FY 2004. Thus there are no performance results to report at this time.

Upon program completion in three years, targeted health facilities will be providing a package of essential health services, targeted communities will have trained community health workers, and communities will be linked to and engaged with health facility activities through community health centers.

Djibouti PROGRAM SUMMARY

(in thousands of dollars)

Accounts	FY 2002 Actual	FY 2003 Actual	FY 2004 Current	FY 2005 Request
Development Assistance	0	2,000	0	0
Economic Support Fund	0	0	0	2,000
ESF - Wartime Supplemental	0	20,000	0	0
PL 480 Title II	1,059	3,348	0	0
Total Program Funds	1,059	25,348	0	2,000

STRATEGIC OBJECTIVE SUMMARY				
603-001 Basic Education Improved				
DA	0	2,000	0	0
ESF	0	0	0	2,000
ESF - Wartime Supplemental	0	8,000	0	0
603-002 Expanded Coverage of Essential Health Services				
ESF	0	0	0	0
ESF - Wartime Supplemental	0	12,000	0	0

Of the \$25 million FY 2003 ESF Wartime Supplemental for Djibouti, \$5 million was transferred to the Regional Economic Development Service for East and Southern Africa (REDSO-ESA) in support of Djibouti.

Mission Director,
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