

## Executive summary

Overall, in 2013 food security situation of rural households in Djibouti has improved compared to last year but remains critical. An estimated population of 89,860 food insecure people (maximum) remains in need of food assistance over the next twelve months. The improvement is associated with a significant reduction compared to 2012 in the number of severely food insecure, estimated at 18 percent or 21,900 individuals (24,100 maximum), and 59,700 are moderately food insecure (49 percent).<sup>1</sup> Households most affected by severe and moderate food insecurity are spread across the five regions. The highest proportion is in Ali Sabieh (85 percent of the population in the region), followed by Dikhil (70 percent) and Obock (67 percent). Geographical trends are in line with the results of the EFSA rural conducted in 2012. The causes of such a high food insecurity are mainly associated to chronic poverty boosted by low income, limited job opportunities, high food prices which never reduced since the spills registered in 2008, and recurrent drought inhibiting renovation of pastures and grazing resources; this latter is the main cause of the ongoing contraction of the livestock population in rural Djibouti.

Sixty percent of the households<sup>2</sup> have a poor or borderline food consumption. The diet consists mainly of cereals, oil and sugar. In addition, milk, meat and pulses, are consumed once a week for households with a borderline food consumption.

The existing food insecurity is generally associated with high undernutrition rates. Among women in reproductive age (15-49 years), 15 percent are malnourished; 17.9 percent of children between the age of 6 and 59 months suffer from global acute malnutrition and 4.1 percent children of severe acute malnutrition. The highest rates are recorded in Arta (23.5 percent) and Tadjourah (22 percent) regions. Among the category of children (6 to 59 months of age), chronic malnutrition is 35.2 percent and over 30 percent is underweight. At the national level, malnutrition is generally associated to food insecurity and low consumption of highly nutritive foods. However, the higher malnutrition rates registered among children between 6 and 59 months of age compared to other regions, could be associated with the high prevalence of diarrhea in Arta region; long distance to health centres in Tadjourah region and limited on-going nutrition programmes in these regions mainly targeting acute malnutrition.

Furthermore, households usually rely on a limited number of sources of income – 95.5 percent rely on maximum two sources and 53.9 percent on one. This value increases up to 62.1% for the severely food insecure. Around 40% of the sources are neither stable, nor sustainable such as aid/gifts, sale of charcoal, daily work and begging.

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<sup>1</sup> Food insecurity status was determined through the following variables: Food Consumption Score (FCS); Reduced Coping Strategy Index (CSI); Tropical Livestock Units and assets owned; freshwater consumption per day and per person; Monthly expenditures per person. Please relate to section 2.2 for further information.

<sup>2</sup> A social unit composed of individuals, with family or other social relations among themselves, eating from the same pot and sharing a common resource base (WFP, 2005).

Total expenditures are very low; on average each individual in rural Djibouti spends 91.9 Djiboutian Francs (0.51 USD) per day on food and non-food. The average food expenditure share among households is 69 percent, ranging between 48 percent for the food secure to 82 percent among the severely food insecure.

Prior to the interview, 81.8 percent of households indicated they had insufficient money to buy food one out of seven days. Households are therefore obliged to adopt moderate coping strategies such as relying on less preferred and less expensive foods; limiting portion size of meals; and reducing the number of meals eaten per day. Furthermore households' use additional crisis and emergency coping mechanisms that threaten the long term stability of their livelihoods such as unusual sale of livestock (23 percent); and sale of reproductive livestock (11.3 percent). The frequency of household use of coping strategies has increased significantly since 2012, with peaks registered in Ali Sabieh and Dikhil regions.

Given the existing food insecurity and high malnutrition, the following are recommended:

- i) WFP and partners to continue providing:
  - Non-conditional food aid to **severely food insecure households** during at least the next twelve months;
  - Non-conditional food aid during the lean season (May to September) to **moderately food insecure households** in order to improve their access to nutritious food and limit the risk of sale or loss of the most productive assets, such as livestock.
  - Conditional food aid (food for work /food for assets) to moderately food insecure households from October 2013 to April 2014, in the period between lean seasons, in order to increase households' resilience by reducing vulnerability to shocks and hazards of food insecurity, and by encouraging a diversification of rural livelihoods and income.
  - Encourage the **targeting of aid programmes** towards the most food insecure households in each community following the criteria indicated in this assessment and in the previous ones.
  - To continue implementing supplementary feeding programme targeting **children below five** and **pregnant and lactating women** in order to avoid a deterioration of their nutritional status.
- ii) To conduct an **in-depth nutrition survey** to improve long term programming of stakeholders involved in the sector.
- iii) To implement sensitization campaigns targeting **women in reproductive age** in order to encourage breastfeeding and complementary feeding practices for infants.
- iv) To improve **access to fresh water** through the implementation of projects aimed at increasing water quality and availability for domestic and productive use.
- v) To support **pastoralists** by protecting their livestock (for example through the provision of fodder) and by ensuring adequate households' access to food.
- vi) To ensure that long term activities under the National Development Programme complete and integrate operations in support of **children's education, technical training for adults**, as well as interventions relating to health and nutrition.

- vii) Research **long term solutions to chronic food insecurity**, notably focusing on access to potable water for domestic purposes, as well as for the survival of livestock and for preserving livelihood and income of rural households.