

COUNTRY OPERATIONS PLAN

Country Djibouti

Planning Year: 2003

Part I: Executive Summary

(a) Context and Beneficiary Populations and Themes

Djibouti has been, since its independence in 1977, a traditional country of asylum for thousands of Ethiopians and Somalis fleeing from persecution, war, civil strife as well as famine in their countries of origin. Thus today, the refugee population numbers 23,582 composed of 21, 615 Somalis and 1924 Ethiopians and 37 other nationalities.

Djibouti is a country with an estimated population of around 650,000 (1996 census), composed of Issas and Afars. The arid land is infertile and made up of volcanic remains, rendering it disaster prone, with an extremely weak capacity for disaster prevention, management, implementation and follow up capacity. The majority of the population is living in poverty, with a per capita income of between US 780 - 800 dollars (1993). The main source of Djibouti's income derives from bilateral, multilateral and port services to neighbouring countries.

This continued economic hardship coupled with ever increasing illegal migrants from Somali and Ethiopia, (estimated at 20% of the total population) is exerting enormous pressure on a weak economy. The problem of Djibouti's development relates not only to internal socio-economic, political or structural/capacity factors but also accentuated by unstable regional conflict in the horn of Africa. In 2001, the UN country team continued to assist the outbreak of malaria and over 100,000 drought affected population. The response of the international community to the drought affected population was very slow, thus forcing the affected population to flee from rural areas to main cities and refugee camps in search of food, water and medical facilities.

The 1951 Convention relative to the status of refugees and the 1967 Protocol have been ratified by the government of Djibouti, although the OAU convention has not been acceded. In the absence of national refugee legislation, BO has been promoting the adoption by the government of a refugee law, which would define the legal basis for a clear asylum policy.

The bureau for Eligibility although operational since 1999 has a large backlog of cases to clear up, and it has become evident that the capacity to deal with these cases is lacking. To this end, there is a planned registration of all asylum seekers, who are holders of letters of attestation from ONARS and UNHCR during the course of the year. Registration and RSD interviews will be preceded by a pre-registration conducted by BO Djibouti. All files (documentation relating to asylum seekers and refugees) currently at ONARS will be photocopied (including cases registered by ONARS over the past three years) in order to have proper UNHCR files constituted on all current and previous asylum seekers in Djibouti. Relevant data is presently being entered into a simple database, thus allowing UNHCR to have a better idea of the profile of the asylum seeker population.

Following this registration, a one-time exercise of determination of refugee status will take place. This exercise will clear the backlog of approximately 4000 cases of asylum seekers in the Republic of Djibouti. BO Djibouti has also requested additional human and financial resources to strengthen the capacity of the Eligibility Office so as to ensure better delivery of services. The BO Djibouti will also provide close monitoring and additional guidance.

The National Eligibility Committee resumed sittings in January 2001, however, were unable to clear a backlog of approximately 2500 urban asylum seekers. The decision of the first sitting for 61 refugees of the NEC was not made public because the revised decree on the function of NEC had to be promulgated by the new President. Although this was finalised in May 2001, the results have still not been made public. A cabinet reshuffle in the mid-year resulted in the appointment of a new Minister of Interior. This had a negative impact on the

situation of asylum seekers in Djibouti. UNHCR Djibouti continues to emphasise the importance of regular sittings and eligibility determination sessions by NEC and it is hoped that with the planned registration and refugee status determination joint exercise undertaken by UNHCR and ONARS, the Eligibility Commission will function regularly during the course of the year.

While resettlement remains an important durable solution for deserving cases, UNHCR Djibouti faced considerable setbacks to the program during the latter half of 2001 due to irregularities discovered in the resettlement procedure, which resulted in all pending cases being placed on hold. However, some resettlement missions by the Joint Voluntary Agency and the Immigration and Naturalisation Services took place. Pending cases from resettlement missions in the preceding year were also resettled. A total of 23 Somali refugees and 120 Ethiopian refugees were resettled. Revised Standard Operation Procedures will be established to renew confidence in the resettlement procedures and ensure that those meeting the set criteria benefit from this service.

The UNHCR guidelines on resettlement procedures will also be closely adhered to by BO Djibouti in order to avoid future fraudulent occurrences. BO Djibouti has also requested the creation of the post of resettlement assistant to reinforce the Branch Office and assist in ensuring adequate case identification, verification and preparation of resettlement referrals in the future.

Following the breakthrough in 2001 of President Egal attesting to his willingness to receive back his nationals, an intense campaign for voluntary repatriation was launched. A total of 15 033 refugees registered to return from the camps of Ali-Addeh and Holl-Holl. A screening exercise was also carried out in Holl-Holl camp. The Somaliland authorities have given their assurance that the refugees screened in Holl-Holl have been accepted to return. A similar exercise is programmed for Ali-Addeh camp. As from April 2002, the organised mass repatriation of initial 10 000 refugees will start. The following year, another 10 000 will repatriate in 2003, thereby significantly reducing the refugee caseload. At the end of this repatriation exercise, a headcount will be made of the residual caseload.

UNHCR is obliged to continue its protection and care and maintenance assistance through 2003 while our main emphasis is on repatriation as on-going and resettlement when no other solution is found. Mainstreaming of gender and environment continues to be our policy priority including risk reduction and prevention from HIV/AIDS. HIV/AIDS is particularly considered a serious threat to Djibouti, as a port country, that harbours high rate of sex commercial workers/industry while hosting 20 % of its population as refugees and illegal migrants in search of economic benefits. In accordance with the global policy on African refugees, BO Djibouti has a fund for the establishment of the HIV/ AIDS laboratory for the year 2002. The laboratory will be established in the Ali Sabieh general hospital with necessary equipment, thus, the local population will also benefit from the better services from the laboratory as a part of our exit strategy as well as local capacity building.

The safety of UNHCR staff, those of all the implementing partners (IPs) and refugees as well as camp security need special attention for 2003. Our implementing partners repeatedly raised the security and safety concerns. A lack of communication equipment with their main office and the camp office, logistic support, guidance and coaching was pointed out by the various missions in 2001 and 2002 including the Inspector General's mission. The recommendations of those missions also include capacity building and increased support for IPs. Due to exorbitant costs and low quality services and a lack of qualified local human resources, the number of IPs is extremely limited. In addition, renowned and qualified international NGOs are reluctant to take on board due to their budgetary limitation. An

increase in the budget for the capacity building as an important part of exit strategy for 2003 is vital.

In the light of planned mass repatriation, our emphasis on the assistance to the vulnerable groups, such as refugee women, children and adolescents, the elderly and refugees with disability continues. Not only for HIV/AIDS, health/ nutrition related service delivery, education for children and women and rising the environmental awareness among the both refugee and local populations will be our particular targets for the year 2003.

The environmental degradation resulting from refugee asylum, drought and overwhelming numbers of plastic waste in Djibouti is widely visible and needs to be addressed. Environmental projects including tree planting, home gardening, domestic energy saving methods, environmental education etc. are being implemented to improve the environment in and around the refugee camps

(b) Selected Programme Goals and Objectives

1. UNHCR has a plan to start a mass repatriation of 10,000 refugees per year to Somaliland starting from as of April 2002. Another 10,000 will be repatriated in the year 2003. If this repatriation operation progresses successfully by the end of 2003, the refugee population in Djibouti should be significantly reduced. At the end of the repatriation to Somaliland, it is expected to implement the necessary headcount exercise towards the end of the year 2003 or at latest, the beginning of 2004, to ascertain the number of residual caseloads.
2. Though only 15,043 registered for the repatriation at the beginning of 2002, many in the camps came to ask for new registration after closing the registration. In addition, the repatriation for the year 2002 may not be carried out to the full level of 10,000 as well. Therefore, the planned repatriation figure for 2003 is again, 10,000 based on those facts which is in accordance with the recommendations from the Regional Strategic Management Workshop in Nairobi in February 2002.
3. One of significant emphasis on the projects for 2003 is HIV/AIDS related project and activities. As a part of our exit strategy, the fund for establishing HIV/AIDS laboratory for refugees is already secured in 2002. The discussion to install it at Ali Sabieh general hospital is on going in order to benefit not only refugees but also vulnerable local population in the region. This plan is in view of building more capacity on the local health service delivery system so that the Ali Sabieh General Hospital, which is the only hospital for entire Ali Sabieh District except AMDA clinics in Ali-Addeh and Holl-Holl refugee camps, can be utilised as a primary referral hospital for the refugees by the end of 2003. By establishing a basic laboratory with HIV/AIDS testing and allocating one full-time AMDA doctor at Ali Sabieh Hospital for necessary supervision and monitoring, Ali Sabieh hospital will likely be a primary health service provider for refugees after UNHCR's phasing out and handing over of camp facilities to the local authorities. As many agencies including NGOs and UN agencies as well as donors appear to be very keen in assisting the hospital in prevention of HIV/AIDS cases, further collaboration will be possible and should be pursued.
4. As FGM (Female Genital Mutilation) is widely practised in both refugee and local populations, sensitisation, implementation of mass awareness campaign and introduction of positive reinforcement to stop these harmful practices will continue.

5. One of continued focus is also to improve the environment in and around refugee camps. Organisation of more and better community activities would lead the population to better awareness among the populations. The same type of activities could be replicated at the time of their reintegration of the country of their origin. The quality of refugee life will also improve by living in the clean environment. For example, the plastic bag waste could be recycled for the better production.
6. Youth and community Activities will continue to be organised and more encouraged. This will help the community to engage more in productive and qualitative activities while fighting against prevalence of prostitution, drug addictions, STDs and some juvenile delinquency. Especially, as Djibouti is a port country with some political and military strategic importance, effective strategy to involve the population to productive and useful community activities will lead to the improved quality of life, a gateway to increased self-reliance and improvement of entire environment.

Part II: Beneficiary Population

Refugees in Djibouti are mainly composed of Somali (95%) of Issas clan, Afars and Ethiopian refugees. The remaining caseload of 1,149 Ethiopian refugees living in the camps is sharing the same Assistance/Services with Somali refugees. Though they are living with in the same camps, sharing the same programme, the objectives for the two caseloads in the perspective of durable solution and its strategy somewhat vary.

(a) Programme for the Somali and Ethiopian Refugees

Section A: Programme Goals, Objectives, Outputs and Indicators

CARE AND MAINTENANCE FOR SOMALI AND ETHIOPIAN REFUGEES

Somali and Ethiopian refugees		CM/203 CM/251
Goals: <ul style="list-style-type: none"> • International protection is extended to all beneficiaries. • The quality of life for the refugees will meet the minimum standard of basic human needs and human rights. • Material assistance and other services (accepted standards) are provided to refugees in camps without delay, with special focus on the vulnerable groups with special needs. • Minimum level of education and vocational training to support their self-reliance is promoted and accessible by the refugees in the camps. • Reduce the degradation of the environment in and around the camps and promote environmental awareness among refugee populations. • Introduce environmental friendly life style and techniques in managing the camps. • Implementation of effective exit strategy in connection of smooth phasing out of Care and Maintenance Programme through promotion of necessary local capacity building of both local and international NGOs in the country 		
Objectives	Outputs	Indicators
<ul style="list-style-type: none"> • All beneficiaries in camps are receiving a quality assistance that meets the acceptable standards of basic human needs and human rights. • BO Djibouti will take an active role in providing guidance and sharing a clear vision for the exit strategy by preparing both refugees and host country through a well-planned phase approach and local capacity building. • Special care and assistance to the vulnerable groups will continue. 	<ul style="list-style-type: none"> • All the refugees receive adequate assistance. • Refugees are in good health and have access to reasonable health care services. • Information on reproductive health, HIV/AIDS/STD prevention, harmful consequence of FGM, etc. is widely disseminated among the refugees through campaigns • Both refugees and locals have access to HIV/AIDS laboratory (to be established at Ali Sabieh Gen. Hospital) for testing under supervision of AMDA (specialist) doctor • Basic laboratory services to be 	<ul style="list-style-type: none"> • Malnutrition rate • Crude mortality and morbidity rate • Rate of deduction in supplementary feeding • Number of people utilising the health care facilities in the camps • Number of the refugees who received the information on Reproductive Health (RH) • Number of campaign in the camps on RH/FGM • Number of the females and TBAs who received the training esp. on RH/FGM • Number of tests performed at the Laboratory

<p>Note: 1) Improvement of quality of life is a special focus through increased educational and vocational training opportunities and active participation in the organised events.</p> <p>2) Level of the quality of the life of the refugees is to be harmonised with that of the locals in Djibouti.</p> <ul style="list-style-type: none"> • Refugees will participate more actively in training, education, camp events and management, and community activities. • The utilisation of master lists for all the delivery of refugee assistance will speed up the distribution and improve the quality of refugee life significantly. • By clear establishment of the refugee figures in both camps and urban areas after the necessary registration of urban refugees and a head-count exercise in the camps (after repatriation), all the assistance and protection procedure will be streamlined. • The impact of the long presence of the refugees on the environment is mitigated by participation of more refugees in environmental activities. • Some reintegration support for 459 Djibouti Afars who returned to their areas of origin in 	<p>established at Ali Sabieh for both refugees and locals</p> <ul style="list-style-type: none"> • Ali Sabieh hospital to be equipped for refugee patient referrals from the camps • Camp infrastructure to be gradually handed over to the local authorities • Necessary training for local authorities, NGOs and others on managing and maintaining the infrastructure to be conducted • Both males and females from age 6 to 12 equally participate in primary education • More youth and sport events will be actively organised by refugees with their initiative. • More women organise and participate actively in the community activities i.e., food distribution, education, training (mud stove making, etc.) and communal events • Skills and knowledge acquired through the training and education during their stay in the camps enable refugees to adapt to and resume a normal life upon their return to the country. • Headcount exercise in the camp to be implemented. • Ration cards are always held by refugees and always utilised for all the material assistance and service delivery. • Refugees have better and easier access to the necessary assistance without delay. • HC facilitates consolidation and streamlining of necessary infrastructure in the camps for better service delivery & exit strategies. • Beneficiaries plant more trees and are familiar with gardening and energy saving activities. 	<ul style="list-style-type: none"> • Number of patients identified through the laboratory • Number of the infrastructure handed over to the Gov't • Number of training provided for IPs, NGOs and local/governmental groups • Number of days that the said infra functions without breakage • Ration boy/girl in the school • Number of the events organised in the camps for the community by themselves • Number of participants in the events and other activities • Number of women in the cam management committee • Number of women enrolled in the adult literacy course • Number of women benefited of micro-credit project • Head count exercise to be implemented effectively • Master list being updated after the exercise • Established refugee population figure • All the data entered into the system within two weeks of the completion of the exercise • All the refugees will receive the new R/C • Master list is updated monthly with numbers of new babies and the deaths, with a procedure that refugee names be removed from R/C and master list in exchange for the funeral assistance. • Number of trees planted • Number of mud stove produced by refugees • Number of the refugees participated in the activities • Number of returnees assisted
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<p>their areas of origin in 2001/02.</p> <ul style="list-style-type: none"> Continued close monitoring and assessment of key sectors i.e., Water, Health, Education and environment in preparation for eventual transfer to line ministries or other local implementing partners Continue the active search for resettlement countries for refugees, especially vulnerable cases, in need of durable solution 	<ul style="list-style-type: none"> Environmental awareness campaign to be organised Additional assistance for local capacity building in the area of returnee integration. Identification of the IPs/local counterparts and their training in exchange with scaling down of ONARS activities Co-ordination, contribution and involvement of IPs to be planned and organised Facilitate additional and technical assistance and advice from donor countries, i.e., JOCV (Japan Overseas Co-operation Volunteers), international NGOs etc. Resettlement procedure is normalised and systematised. No more backlog for the future resettlement cases 	<ul style="list-style-type: none"> Number of assistance given to the local community of their integration Number of IPs and NGOs involved with the activities Number of sectors and activities handed over to line ministries or local agencies Number of sectors/activities taken from ONARS Number of technical assistance introduced to the camps Number of refugees resettled Number of HIV/AIDS positive refugees who were resettled Number of the backlog cases for resettlement
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REPATRIATION OF SOMALI AND ETHIOPIAN REFUGEES

Somali and Ethiopian Refugees		RP/370
<p>Goal:</p> <ul style="list-style-type: none"> Voluntary Repatriation of Somali refugees to Somaliland with safety and dignity. Voluntary Repatriation of Ethiopian refugees when willing and possible. Closure of one of the camps and consolidation of the remaining caseload into one camp. Implementation of well-planned exit strategy (phasing out) of camp activities 		
Objectives	Outputs	Indicators
<ul style="list-style-type: none"> Repatriate maximum number of Somali refugees (10,000 expected) from the camps to Awdal region etc. with safety and dignity Ensure the quality of life of the refugees should be sustained to a reasonable level upon their arrival of the country of origin 	<ul style="list-style-type: none"> Registration of the remaining voluntary repatriants (some 5,000) to be successful. Repatriation to be safe, systematic and orderly. Refugees continue to have an access to basic health services and to meet their basic needs Landmine campaign is continued in camps. Continued harmonious contacts and negotiation with high level Somalis and 	<ul style="list-style-type: none"> Number of refugees newly registered for repatriation Number of the refugees actually repatriated Number of any security incidents and accident during the repatriation operation Number of co-ordination meetings in the region Number of reintegration projects in Somaliland School constructions in Zeila.

<ul style="list-style-type: none"> • Smooth handing over and phasing out of camp activities is planned and well co-ordinated with local authorities together with others concerned • Find suitable resettlement for deserving cases when applicable. 	<p>Djiboutian Authorities</p> <ul style="list-style-type: none"> • Encourage Inter-Agency co-operation to develop plans for reintegration • Clear exit strategy and Work Plan to be established • All the IPs will train their local counter parts for eventual phasing out • Successful implementation of handing over while maintaining the camp activities during the repatriation operation 	<ul style="list-style-type: none"> • Number of high level missions undertaken to Hargeisa • Number of infrastructure, facilities rehabilitated in the camps for the handing over. • Number of training provided for IPs, NGOs and local/ governmental groups in Djibouti and Somaliland. • Number of the sectors handed over to the line ministries • Number of resettlement
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Section B: Statistics and demographic information

Camp refugee population

Somali refugees						
Age group	Male (in absolute numbers)	In %	Female (In absolute numbers)	In %	Total (In Absolute Numbers)	In %
0-4	775	9%	991	9%	1766	9%
5-17	4257	48%	4880	44%	9137	46%
18 – 59	3499	40%	5016	45%	8515	43%
60 and >	245	3%	253	2%	498	2%
TOTAL	8776	100%	11140	100%	19916	100%
Location: Holl-Holl and Ali-Addeh						

Ethiopian refugees						
Age group	Male (in absolute numbers)	In %	Female (In absolute numbers)	In %	Total (In Absolute Numbers)	In %
0-4	59	11 %	128	21 %	187	16 %
5-17	143	27 %	173	29 %	316	28 %
18 – 59	320	60 %	271	45 %	591	52 %
60 and >	8	2 %	31	5 %	39	4 %
TOTAL	530	100 %	603	100 %	1133	100 %
Location: Holl-Holl and Ali-Addeh						