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INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT *AND/OR*  
INTERNATIONAL DEVELOPMENT ASSOCIATION

PROJECT PAPER

ON A

PROPOSED GRANT

IN THE AMOUNT OF

US\$ 2.75 MILLION

TO THE

REPUBLIC OF DJIBOUTI

FOR A

JSDF-DJIBOUTI: PROMOTING WOMEN'S AND COMMUNITY RESILIENCE TO GENDER-BASED  
VIOLENCE

December 1, 2022

Social Sustainability And Inclusion Global Practice  
Middle East And North Africa Region

## CURRENCY EQUIVALENTS

(Exchange Rate Effective {November 30, 2022})

Currency Unit = Djibouti Franc (FDJ)

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SDR 0.7605 = US\$1

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DJF 178.02 = US\$1

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### FISCAL YEAR

January 1 - December 31

Regional Vice President: Ferid Belhaj

Country Director: Marina Wes

Global Director: Louise J. Cord

Practice Manager: Senait Nigiru Assefa

Task Team Leader(s): Djeina Issa Kalidi, Eloise Sophie Fluet

## ABBREVIATIONS AND ACRONYMS

AM	Accountability Mechanism
APA	Alternative Procurement Arrangements
CASAF	Centre for Social Action and Women Empowerment ( <i>Centre d'Action Sociale et d'Autonomisation des Femmes</i> )
CBO	Community-Based Organization
CEDAW	The Convention on the Elimination of All Forms of Discrimination against Women
CERC	Contingent Emergency Response Component
CFB	Boulaos Training Center ( <i>Centre de Formation de Boualos</i> )
CGC	Community Management Committee ( <i>Comité de Gestion Communautaire</i> )
COVID-19	Coronavirus Disease
CPF	Country Partnership Framework
ESCP	Environmental and Social Commitment Plan
ESMF	Environmental and Social Management Framework
FGM/C	Female Genital Mutilation/ Cutting
FI	Financial Intermediaries
FY	Fiscal Year
GBV	Gender Based Violence
GBVIMS	Gender-Based Violence Information Management System
GDP	Gross Domestic Product
GM	Grievance Mechanism
GRS	Grievance Redress Service
HEIS	Hands-on Expanded Implementation Support
INSD	Djibouti National Institute of Statistics
IOM	International Organization for Migration
IPV	Intimate Partner Violence
JSDF	Japan Social Development Fund
MENFOP	Ministry of National Education and Professional Training ( <i>Ministère de l'Éducation Nationale et de la Formation Professionnelle</i> )
MoH	Ministry of Health
MWF	Ministry of Women and Family
NGO	Non-Governmental Organization
PBCs	Performance-Based Conditions
PDO	Project Development Objective
POM	Project Operations Manual
PP	Procurement Plan
PPSD	Project Procurement Strategy for Development
SEP	Stakeholders Engagement Plan
SOP	Series of Project
TM	Transtheoretical Model
ToR	Terms of Reference
UNFD	National Union of Women in Djibouti ( <i>Union Nationale des Femmes Djiboutiennes</i> )
UNFPA	The United Nations Populations Fund
UNHCR	The United Nations High Commissioner for Refugees (UN Refugee Agency)
UNICEF	The United Nations Children's Funds

USD	United States Dollars
VAWG	Violence Against Women and Girls



**BASIC INFORMATION**

Is this a regionally tagged project? No	Country (ies)	
Financing Instrument Investment Project Financing	Classification Small Grants	
Approval Date 22-Dec-2022	Closing Date 30-Nov-2025	Environmental and Social Risk Classification Moderate
Approval Authority CDA	Bank/IFC Collaboration No	

Please Explain

**Proposed Development Objective(s)**

The Project Development Objective is to improve (i) girls and women’s access to skills development and livelihoods support; (ii) community awareness and mobilization in the fight against GBV in targeted areas; and (iii) the quality of psychosocial counseling services utilized by GBV survivors.

**Components**

Component Name	Cost (USD Million)
Component 1: Livelihoods support for at-risk adolescent girls and young women who dropped out of school	1,649,000.00
Component 2: Community-based interventions and capacity-building for GBV prevention and response	692,000.00
Component 3: Project Management and Administration, Monitoring and Evaluation, and Knowledge Dissemination	409,000.00

**Organizations**

Borrower :	Republic of Djibouti
Implementing Agency :	Ministry of Women and Family



**PROJECT FINANCING DATA (US\$, Millions)**

**SUMMARY**

<b>Total Project Cost</b>	2.75
<b>Total Financing</b>	2.75
<b>Financing Gap</b>	0.00

**DETAILS**

**Non-World Bank Group Financing**

Trust Funds	2.75
Japan Social Development Fund	2.75

**Expected Disbursements (in USD Million)**

Fiscal Year	2023	2024	2025	2026
<b>Annual</b>	0.16	0.41	0.95	1.10
<b>Cumulative</b>	0.16	0.57	1.53	2.63

**INSTITUTIONAL DATA**

**Financing & Implementation Modalities**

**Situations of Urgent Need of Assistance or Capacity Constraints**

Fragile State(s)    
 Fragile within a non-fragile Country    
 Small State(s)    
 Conflict    
 Responding to Natural or Man-made Disaster

**Other Situations**

Financial Intermediaries (FI)    
 Series of Projects (SOP)

Performance-Based Conditions (PBCs)    
 Contingent Emergency Response Component (CERC)

Alternative Procurement Arrangements (APA)    
 Hands-on Expanded Implementation Support (HEIS)



**Practice Area (Lead)**

Social Sustainability and Inclusion

**Contributing Practice Areas**

Education

Gender

Health, Nutrition & Population

**OVERALL RISK RATING**

**Risk Category**

Overall

**Rating**

● Substantial

**COMPLIANCE**

**Policy**

Does the project depart from the CPF in content or in other significant respects?

Yes  No

Does the project require any waivers of Bank policies?

Yes  No



**Environmental and Social Standards Relevance Given its Context at the Time of Appraisal**

<b>E &amp; S Standards</b>	<b>Relevance</b>
Assessment and Management of Environmental and Social Risks and Impacts	Relevant
Stakeholder Engagement and Information Disclosure	Relevant
Labor and Working Conditions	Relevant
Resource Efficiency and Pollution Prevention and Management	Relevant
Community Health and Safety	Relevant
Land Acquisition, Restrictions on Land Use and Involuntary Resettlement	Not Currently Relevant
Biodiversity Conservation and Sustainable Management of Living Natural Resources	Not Currently Relevant
Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities	Not Currently Relevant
Cultural Heritage	Not Currently Relevant
Financial Intermediaries	Not Currently Relevant

**Legal Covenants**

Sections and Description

Appointment no later than three months after project's effectiveness of a qualified external auditor referred to in Section 2.03 (a) of the annex of the Grant agreement.

Sections and Description

Acquisition no later than three months after project's effectiveness of an accounting software agreed with the Association, referred to in Section 2.03 (a) of the annex of the Grant agreement.

**Conditions**

Type	Financing source	Description
Effectiveness	Trust Funds	The Project Operations Manual has been prepared and adopted by the Recipient in form and manner satisfactory to the Bank.



**PROJECT TEAM****Bank Staff**

<b>Name</b>	<b>Role</b>	<b>Specialization</b>	<b>Unit</b>
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<b>Extended Team</b>			
<b>Name</b>	<b>Title</b>	<b>Organization</b>	<b>Location</b>

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DJIBOUTI

JSDF-DJIBOUTI: PROMOTING WOMEN'S AND COMMUNITY RESILIENCE TO GENDER-BASED VIOLENCE

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## I. STRATEGIC CONTEXT

### A. Country Context

1. Djibouti is a lower middle-income country strategically located in the Horn of Africa at the southern entrance to the Red Sea, and bordered by Eritrea, Ethiopia and Somalia. With a population of about 990,000 of whom approximately 85 percent lives in urban centers of Djibouti City, the country ranked 166<sup>th</sup> of 189 countries on the Human Development Index (2019). While experiencing a steady and rapid growth during 2015 – 2019 with an average annual real growth in gross domestic product (GDP) of 7.2 percent, it dropped to a decade low of approximately 0.5 percent in 2020 due to the COVID-19 pandemic, but recovered in 2021 to reach 5.1 percent. Despite the positive economic outlook, extreme poverty remains high and concentrated mainly in rural areas as well as in Djibouti City's Balbala slums, where the refugee and migrant population place additional strain on already limited resources and services for host communities. Growth has not been equitably distributed, in particular for the youth – those under 35 years old represent nearly 75 percent of the population – women and children.

2. Women and girls in Djibouti are at high risk of various forms of gender-based violence (GBV), including female genital mutilation/cutting (FGM/C), forced/early marriage, intimate partner violence (IPV), and non-partner violence. While there is a lack of nationally representative data on GBV in Djibouti, key GBV trends are provided in the Report on FGM/C and Violence against Women from the National Institute of Statistics and Ministry of Women and Family (INSD/MWF 2020)<sup>1</sup> and through the database from the National Union of Women in Djibouti (*Union Nationale des Femmes Djiboutiennes* - UNFD), an NGO dedicated to the prevention and response to GBV. Of note is the decrease in FGM/C prevalence from 98 percent in 2002 to 71 percent in 2019 (INSD/MWF 2020). Moreover, FGM/C is more prevalent among older women (95 percent of women aged 40-49) than younger women (72 percent of women aged 12-17), indicating that younger generations are increasingly abandoning the practice (INSD/MWF 2020). Nevertheless, FGM/C in Djibouti remains at above 70 percent among the highest in the world. Forced/early marriage are practiced with estimated rates of 27 percent in rural areas and 10 percent in urban areas, a practice that directly impacts girls' education, prospects for accessing decent economic opportunities later in life, health and psychologic well-being. While IPV and non-partner violence remain largely underreported, 7.9 percent of non-single women reported lifetime physical violence from their husband/partner and 6 percent of single women reported lifetime physical GBV. Economic violence, which is a form of domestic violence that involves making a person financially dependent by maintaining control over financial resources and/or forbidding attendance at school or employment, is also highly prevalent in Djibouti.

3. GBV risk factors include economic gender inequality, socio-economic shocks induced by the COVID-19 pandemic, environmental vulnerability, and regional mixed-migration patterns. Women in Djibouti face major barriers to access economic opportunities due to low literacy and school enrollment rates and high economic inactivity. While men's per capita gross national income constituted US\$4.232 in 2018, women's GNI per capita reached only US\$2.90 in the same period. According to the World Bank Poverty and Equity Assessment in Djibouti (March 2019), in 2018, women's labor participation rate was 55 percent in contrast to 71 percent for men. Unemployment among women is also higher than among men, with respectively 69 percent and 55 percent. The gap between men and women in access to employment reflects the lack of work opportunities for women, structural discrimination, and barriers associated with social norms.

<sup>1</sup> Djibouti National Statistics Institute (INSD) and Ministry of Women and Family. (2020). *Rapport de l'enquête nationale sur les mutilations génitales féminines et les violences faites aux femmes* : <https://famille.gouv.dj/uploads/publications/606621408520670ffecb10cdfde29479.pdf>



During the COVID-19 pandemic, a WBG-supported survey<sup>2</sup> found that Djiboutian households reported not having enough resources and savings to sustain their livelihood. Households with a female breadwinner have particularly lacked access to basic services, including healthcare. The pandemic has also reduced GBV case management and support services due to social distancing measures and the diversion of resources to the COVID-19 response. GBV prevalence is also frequently reported among Djibouti's population of 35,500 registered refugees.<sup>3</sup> Moreover, GBV prevails among the population of migrants, estimated at 66,000 individuals as of June 2022, most of whom (over 80 percent) are economic migrants coming from Ethiopia who intend to reach the Arabian Peninsula.<sup>4</sup> Many women migrants face violence, sexual exploitation and coercion during their travels.<sup>5</sup>

## B. Sectoral and Institutional Context

4. Djibouti's youth under the age of 35 represents 73 percent of the country total population of about 1 million, and more than half of the population is under 25. In spite of an overall positive economic growth for almost a decade, high unemployment persists among the youth aged 15-24 with a rate of nearly 22 percent in 2019. While extreme poverty is widespread in rural areas that host 29 percent of the population, of whom 67 percent are nomadic herders, individuals from poor households living in impoverished neighborhoods of the capital city and its outskirts such as Balbala district have employment rates as high as the rural poor<sup>6</sup>. Gender disparities are more pronounced as women are more likely to have no formal education with only 38 percent of women versus 57 percent of men who have completed at least primary education. In the absence of targeted intervention, it would take several generations for poor women to reach the national average in educational attainment, resulting in a lack of access decent livelihoods opportunities to improve their well-being and lift themselves out of the intergenerational poverty trap.

5. The proposed project is conceived as a Japan Social Development Fund (JSDF) pilot to improve livelihoods of the most vulnerable women of Boulaos and Balbala as a GBV prevention tool for beneficiaries. Target beneficiaries will be economically empowered with increased employability and business skills and start-up support, therefore increasing their participation in the local economy. In addition to individually targeted support, the pilot will contribute to improving the enabling environment in which women beneficiaries will develop their income-generating activities through community-based interventions supporting behavioral change against GBV, and improving the quality of psychosocial and counseling services utilized by GBV survivors.

6. The proposed JSDF project is in line with rigorously evaluated evidence from WBG and other development/humanitarian partners GBV interventions that demonstrate a link between poverty and Violence Against Women and Girls (VAWG), and how the lack of economic autonomy for women can be a driver of GBV. More specifically, the evidence is based on the premise that the most vulnerable women and girls are generally more dependent on men and have poor decision-making power within the households, thus exacerbating the risks for intimate partner violence (IPV) and coercing the former into abusive relationships. Economic empowerment of women and girls contributes to improving their socioeconomic status, and to increasing their participation in equal financial decision-making in the household. Furthermore, women economic empowerment is positively associated with an increased level of education, employment and other socio-economic variables which increase women's autonomy and decision-making power. Paradoxically,

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<sup>2</sup> The World Bank Group (2022): *Achieving Equitable Development: Constraints and Opportunities for Women in Djibouti*.

<sup>3</sup> <https://reporting.unhcr.org/document/2838>

<sup>4</sup> <https://reliefweb.int/report/djibouti/iom-djibouti-dtm-migration-trends-dashboard-june-2022>

<sup>5</sup> <https://dj.usembassy.gov/wp-content/uploads/sites/142/2020-Trafficking-in-Persons-Report-Djibouti.pdf>

<sup>6</sup> The World Bank Group (2019): *Challenges to inclusive growth, a poverty and equity assessment of Djibouti*: <https://www.worldbank.org/en/news/infographic/2020/05/20/challenges-to-inclusive-growth-a-poverty-and-equity-assessment-of-djibouti>



vulnerable women with sudden increased income may also place them at risk of IPV in the short-term, unless the livelihoods support is effective and protective, combined with awareness raising and behavioral change at household and community level with particular attention for interventions focusing on men and boys for greater protection of women and girls from GBV. Life skills, survivor-centered GBV case management, emotional, adequate psychological care and community-based prevention are critical to foster social norm shift and behavior change, and to advance transformative change in terms of GBV prevention and response. According to best practice in GBV risk prevention, economic opportunities and services provided for at-risk adolescent girls and young women, and the involvement of communities, including men and boys, in the messaging around GBV, are essential to adequately shift traditional representation of women and girls, foster positive parenting and couple dialogue, and empower survivors of violence.

7. The proposed JSDF project builds upon a WBG-led GBV country assessment which was carried out in FY20 as part of the Djibouti Gender Assessment Poverty Assessment (FY22)<sup>7</sup>, that also includes an assessment of the national prevalence and response to GBV, which analyzed underlying drivers of GBV, barriers in accessing services, and gaps in legal, policy frameworks and operational. The study was based on the review of key government strategies, protocols and surveys and reports from development partners. It also relied on main findings from consultations with government counterparts from key ministries involved in the GBV prevention and response (Ministry of Women and Family, Ministry of Justice, Ministry of Health), development partners (UNFPA, UNICEF, IOM and UNHCR) and national and international NGOs (UNFD, Tostan, Roots for transformation, grassroots committees).

8. Some of the findings that informed the design of the intervention are illustrated hereinafter. Two key GBV referral services are identified in Djibouti. The first is the *Cellule d'Ecoute, d'Information et d'Orientation* – (CEIO), established in 2007 and operated by the UNFD, provides support services and a hotline for GBV survivors and refers them to the proper legal aid, health services or psychosocial support. It has a physical office in Djibouti where survivors can go in person as well as in the refugee camps of Ali Addeh, Holl-Holl, and Markazi. The CEIO follows processes designed to handle cases of GBV that includes processes for survivor registration, in-take form, case management, and referral system to other service providers from the health and justice sectors. The CEIO handles on average over 1300 cases per year (see Table 1 below). The second referral service provider is within the Ministry of Women and Family, which also has an office of social workers who receive children survivors of violence who are 17-year-old and younger and manage a hotline. Similarly, MWF services are very limited and accessible only in Djibouti City. Both referral services are understaffed and lack training in terms of psychological support and counseling to the survivors.

**Table 1: GBV Cases Handled by UNFD's Cellule d'Ecoute, d'Information et d'Orientation (CEIO), 2015-2020**

Type of Violence	2015	2016	2017	2018	2019	2020
<b>Sexual/Physical Assault</b>	11	23	9	11	362	300
<b>Home Eviction</b>	12	19		3		0
<b>Economic Violence/Lack of Resources, Opportunities, and Services</b>	524	566	351	471	569	689
<b>Kidnapping/Forced Recruitment by Armed Groups</b>	1	2	2		1	0
<b>Child pregnancies</b>	109	68	9	5	0	0
<b>Early Marriage</b>	4	2		1	0	0
<b>Forced Marriage</b>		3	3		4	1

<sup>7</sup> World Bank Group (2022): *Achieving Equitable Development: Constraints and Opportunities of Women in Djibouti*



<b>Human Trafficking</b>			1	1	1	
<b>Psychological/Emotional Violence</b>	200	235	268	233	414	408
<b>Rape</b>	4	1	4	2	4	7
<b>Total</b>	<b>865</b>	<b>919</b>	<b>647</b>	<b>727</b>	<b>1355</b>	<b>1358</b>

Source: UNFD 2020

9. In addition to referral services, the MFW and UNFD work with community-based organizations (CBOs) to conduct GBV prevention awareness across the country. The most active of these grassroots organizations in the field of GBV prevention are Community Management Committees (*Comités de Gestion Communautaires – CGCs*) and the relay of the CEIO in neighborhoods of the National Capital Area and the regions. These networks are composed of members from the committees and have played a major role in the implementation of the awareness campaigns against MGF/C. Established in 2008, the CGCs are comprised of volunteer members, mostly women, who are trusted in their communities.

10. Furthermore, the MWF and the UNFD manage two schools who serve women and girls who are particularly at risk of GBV, namely, the Centre for Social Action and Women Empowerment (*Centre d’Action Sociale et d’Autonomisation des Femmes - CASAF*), and the Second Chance School respectively. In addition to these two schools, the Boulaos Training Centre<sup>8</sup> (*Centre de Formation de Boualos – CFB*), alias the former *Ecole Ménagère*, managed by the Ministry of National Education and Vocational Training (*Ministère de l’Education Nationale et de la Formation Professionnelle – MENFOP*), was also identified as a school providing training opportunities to young women and girls who dropped out of school, have left their families, or who are from families below the poverty level. Trainees who completed the school curriculum of one of these schools will be eligible to benefit from the project’s livelihoods activities.

11. To ensure the relevance of the JSDF proposed project, the designed activities were informed by consultations with relevant stakeholders including project’s beneficiaries who identified that social norms continue to present considerable barriers to female labor force participation and economic development in an environment where GBV is prevalent, and that major service gaps remain with regards to psychosocial support. In terms of GBV prevention, consultations with key stakeholders during the preparation of the initial proposal (i.e., government agencies, UN partners and civil society) indicated that: (i) GBV services are available in the capital city but very limited given the lack of resources, and they remain practically inexistent in districts outside of Djibouti City; and (ii) GBV service providers lack expertise in providing psychological and emotional support. Psychosocial services are extremely limited in Djibouti to meet the psychosocial needs of GBV survivors. Further consultations with members of CBOs indicated that cases of rape and sexual harassment have been on the rise and increasingly reported to community organizations. To address that, CBOs members have led prevention and awareness raising activities but only in an informal way. Interviewed community members raised the need to formalize these prevention efforts and build their capacity through skills building including on referral systems to address these specific forms of GBV. Consultations with CBO members confirmed that they are often at the frontline in providing support to GBV survivors. Another key point raised by various stakeholders was the need to include traditional leaders, men and boys in GBV awareness activities.

12. Further consultations were carried out with project beneficiaries, i.e., female students, as well as the teaching personnel from the CASAF, the Second Chance School and CFB, and community members in compliance with the required safety and ethical guidelines applicable. Students indicated that they often needed in-kind support (space to conduct their activities, access to oven or computer) as well as a need to develop their IT literacy, accounting and financial skills to better

<sup>8</sup> The Boulaos Training Center (CFB) is the oldest national school providing training to adolescent girls since 1951 to prepare them to housekeeping career. Since 2017, the CFB started receiving young women and girls who dropped out of school while proposing more diverse vocational trainings, including childcare, cooking, couture, and hairdressing. Source: *Djibouti National Policy for Vocational Training (2021 – 2035)*.





prepare them to launch their business or to integrate into the workforce. Among the group of respondents, the team did not seek to explicitly identify potential GBV survivors as per ethical recommendations to ensure information gathering is carried out in a manner that minimizes risks for the respondents, and guarantees the safety, security, and confidentiality of all individuals who provided information, given the sensitive nature of GBV. Consultations with the management and teaching personnel of CASAF, Second Chance School, and CFB, in addition to those carried out with UNFD, representatives from the MWF including its contracted social workers, the Ministry of Health and the Ministry of Justice who work with survivors of GBV mainly revolved around the constraints and barriers for survivors of GBV in accessing services, as well as existing social norms and behaviors underlying GBV.

13. In response to these consultations and findings, the project was designed on an innovative and sustainable model promoting strong involvement, ownership and mobilization of men and boys who have been largely erased from the conversations and dialogue around GBV, despite the latter being a subject that is centrally about men's behavior. Furthermore, the project will adopt an intergenerational approach that will be employed to transform unequal gender norms that have fostered harmful stereotypes for women and men for generations, by involving community members of all age groups. An inter-generational audience with different concerns and interests will include grandmothers, grandfathers, mothers, fathers, young men and women. Specific attention will also be paid to engage local traditional and religious leaders.

### **C. Higher Level Objectives to which the Project Contributes**

14. The project supports key priorities of Djibouti's forthcoming Country Partnership Framework (CPF FY22-26). It is aligned with the CPF's Area 1: "Promoting inclusive private sector-led growth, job creation, and human capital, and contribute towards the government's efforts" to achieve SDG 5: "Achieve gender equality and empower all women and girls", and with the CPF's Area 2: "Strengthening the role and capacity of the state to deliver basic services, promote inclusion and modernize public institutions" and its Objective 3 "Strengthen basic service delivery to improve access, quality and inclusion in the context of COVID-19. In addition, the project is in line with the cross-cutting theme of the CPF of promoting gender parity".

15. Moreover, the proposed intervention is aligned with the WBG Country Framework on Gender for Djibouti FY21-23, which sets priority areas that include behavioral change interventions related to GBV and addressing GBV risk factors through women's economic empowerment, women's inclusion in community driven development, and equal access to economic resources and decision-making. Various WBG operations in Djibouti have supported women's economic empowerment, entrepreneurship, and education. However, no operation specifically supports service provision for survivors of GBV and prevention through skills and livelihoods support to at-risk women of GBV.

16. In addition, the proposed project supports the implementation of the MNA Regional GBV Action Plan, and reflects the region's commitment to step up WBG commitments to address different forms of GBV at the analytical, operational and policy levels. The proposed project will contribute to the implementation of the MWF 2020-2022 action plan which includes in its first set of priorities activities supporting the socioeconomic empowerment of women, including trainings to promote women's entrepreneurship. Under the 2020 Law N° 66/AN/719/8th on protection, prevention and response for women and children survivors of violence, Article 6 provides that trainings and measures ensuring women and girls acquire knowledge and tools to address GBV issues including in an educational facility should be encouraged; and Article 7 provides the importance for GBV survivors to benefit notably from adequate psychosocial and counseling services. With regards to domestic violence, although there is no specific legal protection from domestic violence, rape remains a violent and punishable act under the law. Yet, marital rape is taboo and barely prosecuted. The proposed project will support community sensitization and awareness activities on these aspects through an innovative approach to promote GBV/



gender-transformative behavioral change at community level.

17. With regards to the national response to GBV, the government of Djibouti has ratified major international and regional conventions on women's rights and empowerment, which demonstrate the government's commitments to address GBV and advance gender equality. These international treaties and conventions include the African Charter on Human and Peoples' Rights (1981, Banjul Charter), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW, 1998), and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol, 2003). In 2003, Djibouti also adopted the Declaration of Cairo on the Elimination of FGM/C and the subsequent Declaration FGM/C +5 in 2008.

18. At the domestic level, the government of Djibouti has devised national strategies that address some forms of GBV. Tackling gender inequality and high rates of violence against women and girls are part of Djibouti's long-term development plan Vision Djibouti 2035.<sup>9</sup> The National Gender Policy (2011-2021) sets the goal of eliminating GBV against women and girls<sup>10</sup>. Djibouti has also developed a national strategy for the total abandonment of FGM/C (2018-2022),<sup>11</sup> which focuses on strengthening institutional and operational capacities, implementing prevention and advocacy activities, and developing a protection framework to support survivors. National strategies have been coupled with a series of laws that address some forms of GBV, including FGM/C, rape, sexual harassment, and sex trafficking. In 2018, the government established a national protocol on GBV response, which aims to ensure that GBV survivors receive urgent care and coordinated support among service providers, and provides the provision of a holistic package, including free health care, psycho-social support, protection, and legal aid. The protocol is being implemented by several ministries (Women and Family, and Justice and Health), the National Police and Gendarmerie, and the National Union of Djiboutian Women (*Union Nationale des Femmes Djiboutiennes* - UNFD), a non-governmental organization (NGO).

19. Most recently, the Government of Djibouti has enacted the 2020 law on prevention, protection and care for women and children survivors of violence, which can set the ground rules for a comprehensive framework on GBV prevention, protection and response (Law no. 66/AN/719/8th). This law protects women from different forms of violence against women and children, including sexual harassment and assault, economic violence, psychological and physical violence, including domestic violence. It also includes measures to guarantee the confidentiality, security and safety of GBV survivors. Provisions on prevention include an early warning mechanism at the family level, especially related to GBV against children. Protection mechanisms include legal protection, and access to legal aid and referral to judicial institutions. The law also sets specific funds to establish "Centers for Integrated Care" (*Centre de Prise en Charge Intégrée*) to provide shelters and emergency supports for women and girls, especially minors at risk of forced marriage and abuse. At the time of writing, these centers have not yet been established. Moreover, there are still gaps between the national legislation and international standards, in particular regarding, marital rape, which is still not criminalized.

20. Despite the legal and policy progress highlighted above, law enforcement and policy implementation has lagged, access to services remains limited, and even more scarce in rural areas. Some types of GBV are still not being addressed, and the psychological support to survivors in particular is extremely poor. Law enforcement and policy implementation has also been limited due to weak institutional capacity, and discriminatory norms and traditions. GBV survivors face major barriers to access services due to limited resources and capacity, and underlying social norms.

<sup>9</sup> Republic of Djibouti. (2017). Vision Djibouti 2035. <https://www.ccd.dj/w2017/wp-content/uploads/2016/01/Vision-Nationale.pdf>

<sup>10</sup> Ministry of Women and Family, Djibouti (2011). *Politique Nationale Genre 2011-2021* : <http://extwprlegs1.fao.org/docs/pdf/dji166445.pdf>

<sup>11</sup> Ministry of Women and Family, Djibouti (2018). *Stratégie Nationale pour l'abandon total des MGF/E 2018-2022*.



21. The JSDF proposed project's activities support the national strategies and policy framework in various ways. Under the *2020 Law N° 66/AN/719/8th on protection, prevention and response for women and children survivors of violence*, Article 6 provides that trainings and measures ensuring women and girls acquire knowledge and tools to address GBV issues including in an educational facility should be encouraged. Article 7 provides the importance for GBV survivors to benefit notably from adequate psychosocial and counseling services. The JSDF proposed project's activities are also in line with the *MWF 2020-2022 three-year action plan*<sup>12</sup> which includes in its first set of priorities activities supporting the socioeconomic empowerment of women, including trainings to promote women's entrepreneurship. Under the *MWF-led National Strategy for the Total Abandonment of FGM/ C 2018-2022*, two of the strategic pillars (3 and 4) are areas of focus where the project would contribute in coordination and in complementarity to other actors' efforts (i.e., advocacy and public awareness at community level; and improvement of quality psychosocial and counseling services). With regards to domestic violence, although there is no specific legal protection from domestic violence, rape remains a violent and punishable act under the law. Yet, marital rape is taboo and barely prosecuted. The community sensitization and awareness activities will cover these aspects through an innovative approach to promote GBV/ gender-transformative behavioral change at community level in an effort to provide a conducive environment and increase a safe participation of women in the local labor market.

22. Finally, the proposed project will complement other donors' interventions on GBV prevention and response programming in Djibouti. Synergies will be sought where possible notably with the USAID Citizen Engagement for Advocacy and Accountability Project which has a sub-component on women's empowerment and community strengthening that aims to fight GBV, reduce FGM, and empower poor vulnerable women living in suburban and rural areas across the country and in the outlying suburbs of Djibouti City through skills development and income generating activities; and the European Union and Germany-financed Respond to the needs of Migrant Women Project, which aims to provide trainings and psychosocial support to migrant women in Djibouti. UNHCR in partnership with UNFD's CEIO, supports the provision of GBV services in refugee camps, and IOM and UNICEF support awareness activities specifically designed for female refugees and migrants.

23. The proposed project will constantly make efforts to maximize the positive impacts for the beneficiaries by fostering an integrated, coordinated and sustainable approach with existing initiatives providing livelihoods support, such as with the Bank-financed Djibouti Support for Women and Youth Entrepreneurship (P165558) and the Development Response to Displacement Impacts Project in the Horn of Africa (P152822) implemented by the Djibouti Agency for Social Development (*Agence Djiboutienne de Développement Social - ADDS*). The project will also seek synergies as relevant with the Expanding Opportunities for Learning Project (P166059) and Djibouti Skills Development for Employment Project (P175483) in the education sector, the Djibouti Strengthening Health Systems Project (P178033) in the health sector, and both the Djibouti Integrated Slum Upgrading Project (P162901) and Djibouti: Sustainable Electrification Program (P158505). The proposed JSDF pilot project would be innovative by testing at country level a new approach of economic empowerment for women at risk of GBV, as a prevention tool, while jointly and simultaneously supporting behavioral change at household and community level by encouraging men and boys, in addition to people from different generations, to value and promote gender equality towards an environment conducive to female labor force participation.

## II. PROJECT DEVELOPMENT OBJECTIVES

### A. PDO

24. The Project Development Objective is to improve (i) girls and women's access to skills development and livelihoods

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<sup>12</sup> Ministry of Women and Family, Djibouti (2020), *Plan d'Action Triennal 2020-2022*.



support; (ii) community awareness and mobilization in the fight against GBV in targeted areas; and (iii) the quality of psychosocial counseling services utilized by GBV survivors.

25. To achieve its objective, the project will pilot locally based interventions that impact GBV risk factors by combining both (i) prevention measures for at-risk populations through the provision of soft skills, technical and business development trainings, start-up support consisting of grants for income-generating activities, and post-grant follow-up and mentorship; and (ii) community-based prevention and response measures through community mobilization for behavioral change, and capacity building to improve the quality of psychosocial counselling services. It is expected that project beneficiaries, including at-risk and survivors of GBV, their households and community members in impoverished districts of Balbala and Boulaos will benefit from the project’s livelihoods support activities as they will lead to an increased participation of vulnerable women in the local economy, combined with GBV prevention and response interventions that will contribute to an enabling environment for women’s participation and empowerment.

**B. Project Beneficiaries**

26. Direct beneficiaries are as below:

- (i) at least 1,000 at-risk adolescent girls and young women, aged 16 – 29, who had attended the Center for Social Action and Women Empowerment (CASAF), the Second Chance School of UNFD, or the Boulaos Training Center, alias former *Ecole Ménagère* (CFB) located in communes of Boulaos and Balbala which are underserved areas of Djibouti City. These beneficiaries will benefit from socioeconomic empowerment through skills development and livelihoods support.
- (ii) at least 3,000 community members, of which half are men and boys, who will benefit from the community mobilization activities and awareness campaigns for increased knowledge and awareness about GBV and behavioral change.

27. Indirect beneficiaries are community members of impoverished districts of Balbala and Boulaos. Indirect beneficiaries will benefit from the project’s livelihoods support activities as they will lead to an increased participation of vulnerable women in the local economy, combined with GBV prevention and response interventions that have not yet been tackled by existing anti-GBV efforts and will contribute to an enabling environment for women’s empowerment.

**C. PDO-Level Results Indicators**

**Table 2: PDO-Level Results Indicators**

Indicator	End Target
Number of direct project beneficiaries.  <i>Direct project beneficiaries include both (i) at-risk vulnerable women and girls targeted for skills development and livelihoods support (1,000); and (ii) households and community members benefiting from awareness-raising activities and behavioral change (3,000).</i>	4,000 <i>(60% female)</i>
Percentage of beneficiaries reporting an increase in income as a result of livelihood support’s activities.  <i>I.e., 650 beneficiaries supported for livelihoods support.</i>	65% <i>(100% female)</i>



Percentage of community members in targeted areas reporting a positive change in attitudes towards GBV as a result of project's activities.	60% (50% female)
Percentage of GBV service providers staff offering psychosocial counseling services to GBV survivors in line with quality standards to respond to GBV survivors needs.	70%

28. The results will be measured based on questionnaires for baseline/ endline information through both quantitative and qualitative methods and captured at different stages of project implementation – after 12 months of implementation following the livelihoods start-up support, and on an annual basis for community mobilization and awareness raising activities. (e.g., during consultations and interviews with participants, focus groups discussions, community-led mobilization activities, etc.). The quantitative and qualitative data that will be collected could be assessed and used as necessary during the course of the project to refine project’s activities, and as lessons learnt for future programming.

### III. PROJECT DESCRIPTION

#### A. Project Components

##### **Component 1: Livelihoods support for at-risk adolescent girls and young women who dropped out of school (approx. US\$ 1,649,000)**

29. The objective of this component is to provide skills development and livelihoods support to at least 1,000 at-risk adolescent girls and young women through two sub-components: (i) soft skills, technical and business development skills training; (ii) and start-up support for income generating activities. Beneficiaries are women or girls who dropped out of school and had attended one of the following three schools: the Center for Social Action and Women Empowerment (*Centre d'action sociale pour l'autonomisation des femmes - CASAF*) managed by the MWF in Balbala; the Second Chance School (*Ecole de la Seconde Chance*) managed by the UNFD; or the Boulaos Training Center (CFB). All of these schools target young girls and women aged 16 – 29 who have dropped out of school, have left their families, or come from households below the poverty line.

30. A service provider will be contracted to execute these activities under this component and to engage specialists to conduct group-based training sessions, where selected female beneficiaries will have an opportunity to learn from each other and safely express their hopes, fears, and challenges for accessing livelihoods opportunities. Following the successful completion of this sub-component, participants will be eligible to apply for and benefit from micro-entrepreneurship and income generating activities.

##### *Sub-component 1.1.: Provision of soft, technical and business development skills to increase entrepreneurship and employability*

31. The project will pilot an innovative non-formal educational program that combines soft skills and entrepreneurship trainings to at least 1,000 young women at-risk of GBV from vulnerable backgrounds in Balbala and Boulaos. The beneficiaries would have completed the curriculum of one of the three schools targeting at-risk women and girls managed by the MWF and the UNFD and of the Boulaos Training Center, alias former *Ecole Ménagère* (CFB). These target beneficiaries who had attended the second chance schools are considered populations at increased risk of GBV primarily as they dropped out of formal schools, and come from poor, vulnerable households. Poverty is a risk factor



associated with GBV<sup>13</sup>, and experience has shown that GBV prevention programming aimed at increasing women's economic resources and reducing gender inequalities in their intimate relationship can reduce the cases of intimate-partner violence (IPV) including economic abuse. While the target beneficiaries may include GBV survivors, the project will not seek to identify them and therefore, this will not allow tracking the improvement made on them, to be in line with key ethical principles such as the respect for confidentiality and autonomy to not endanger their security and safety.

32. The modules that are designed to enhance the employability and business skills of trainees will be identified based on a rapid local labor market assessment combined with a needs assessment carried out through consultations and interviews with beneficiaries and relevant stakeholders at community level at the inception phase of the project. The curriculum package could include on an indicative basis: (i) soft skills that promote entrepreneurship and employability (i.e. critical thinking, problem-solving and creativity relevant to the entrepreneurship theme), employment (e.g. leadership, inter-personal communication, time and stress management, etc.) and empowerment (e.g. positive parenting, and awareness-raising about various forms of GBV including domestic and intimate partner violence, etc.); and (ii) technical and management skills that are essential to prepare and implement micro and small entrepreneurship activities, including financial literacy and accounting, business management and administration, marketing, etc. The training package will run over a short period of about two months. The design of this training will build on the lessons-learned from ongoing micro-grant programs in Djibouti, particularly those financed by the World Bank.<sup>14</sup> Similar modules developed by the Djiboutian Agency for Social Development (ADDS in French) could be adapted to the specific needs of the young women who will be benefitting from this training and mentorship. Other good international practices on empowerment and livelihood will also be taken into consideration during the design of the training modules.

*Sub-component 1.2.: Support for income generating activities and micro-entrepreneurship*

33. All trainees who complete the program and present an economically viable and environmentally sustainable business project or professional plan will receive a start-up grant to implement their income-generating activity. Support will be granted and tailored based on the feasibility of the micro entrepreneurship proposal submitted by the cohort participants. Feasibility assessment criteria will include cost, timeframe for implementation, and market demand. Proposals that bring two or more young women together will be strongly encouraged as it will contribute to mutual learning, greater cohesion, and cost-efficiency by increasing the business survival rate. Furthermore, beneficiaries will be required to match a certain amount (up to 15 percent) of the grant value with in-kind or financial contribution to create a greater sense of ownership, therefore improving the chance of success with sustained results. In addition to the business start-up capital, beneficiaries will be provided with mentorship support and career/ business coaching assistance delivered by the contracting service provider during the first 6 months following the start of the income generating activity.

34. This sub-component is designed to provide sub-grants for livelihoods start-up support. The MWF will be responsible for providing seed grants to a target of 1,000 eligible beneficiaries to enable the start-up or expansion of their small business per their approved business plan. The sub-grants will not exceed the amount of US\$ 1,000 per beneficiary, and will be disbursed in two tranches of 50 percent each, the second tranche being conditional on implementation progress made of the business activity. The review committee in charge of reviewing business plans and approving the matching grants beneficiaries will comprise of representatives from the MWF, UNFD, local government representatives including from the Ministry of National Education and Professional Training (*Ministère de l'Éducation Nationale et de la Formation Professionnelle* - MENFOP), representatives of the business community and any other specialized staff from the

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<sup>13</sup> UN Women

<sup>14</sup> Particularly the Support for Women and Youth Entrepreneurship (P165558), implemented by ADDS in coordination with the Center for Entrepreneurship and Leadership (CLE) and the Development Response to Displacement Impacts Project in the Horn of Africa (P152822) implemented by ADDS.





contracted service provider. Details on the mechanism and composition of the grants review committee, in addition to the set of eligibility and selection criteria, will be provided in the Project's Operations Manual (POM).

## **Component 2: Community-based interventions and capacity-building for GBV prevention and response (US\$ 692,000)**

35. This component aims at supporting community-based interventions and capacity building for GBV prevention and response through the following two sub-components: (i) fostering community behavioral change and mobilization; and (ii) technical support to provide psychosocial and counseling services. Households and communities targeted under Component 2 will be those of the beneficiaries selected under Component 1. The community-based interventions and capacity building activities (Component 2) will be simultaneously implemented with individual livelihoods support activities (Component 1) to maximize positive results as both will jointly contribute to an enabling environment for at-risk populations participation in the local economy, including by mitigating risks of economic violence, one of the manifestations of intimate partner violence.

### *Sub-component 2.1.: Fostering community behavioral change and mobilization*

36. This sub-component seeks to implement community awareness raising interventions, targeting at least 3,000 community members. Sensitization activities will take place through workshops and trainings and will notably cover specific forms of GBV that are not currently part of awareness campaigns – such as intimate partner and non-partner violence, including rape, sexual assault, physical violence, emotional and psychological violence, and economic abuse. This will be conducted by members of the CBOs referred to earlier, who tend to be at the front line in their interaction with GBV survivors and at-risk populations. Acting as change agents and peer educators for the community, CBOs members will be trained by the contracted NGO on how to sensitize community and households' members on different forms of GBV, and to ensure awareness campaigns are inter-generational and include men and boys to increase chances for transformative gender attitudes, including at household level. Household members of projects beneficiaries receiving livelihood support (provided under Component 1) will be specifically targeted to be actively engaged in awareness building activities and mitigate potential adverse effects.

37. At the inception phase of the project, a detailed mapping of relevant CBOs that will be further targeted and actively engaged through the project will be carried out. In addition, a rapid mapping of existing social groups within the target communities will be conducted to identify groups comprised of both men and women, or exclusive to either men or women (e.g., men' sports groups, women's saving groups, etc.) to specifically target them to implement the behavior change interventions, and thereby increase the chance of retaining their attention and optimizing the success and impact of the outreach activities throughout the project cycle. Furthermore, awareness raising sessions will take place as part of periodic recreational activities (e.g., tea/ coffee sessions, henna application, hair and nails care sessions, etc.). When feasible and subject to interest from the beneficiaries of micro-entrepreneurship activities (sub-component 1.2.), such awareness raising activities could take place at their business locations after the start of income generating activities supported by the project. In addition to representing a safe space for exchanges among women, it will create opportunities for the beneficiaries under sub-component 1.2. to increase potential for social and economic benefits through the project.

38. Specific attention will be paid to engaging men and boys, local leaders, and having an inter-generational approach including couples counseling and positive parenting to contribute to norm and attitude change at the community-level. Each community-based organization will develop its own action plan with concrete sensitization activities to prevent these forms of violence and to ensure ownership and buy-in at the community-level.

39. The MWF PMU will contract with a NGO pre-identified to support the implementation of community sensitization



and mobilization activities under this sub-component notably through its active network of Community Management Committees (CGCs) and Grandmothers Club. The PMU will benefit from an international technical expertise to support the methodology and provide technical advice on the community outreach action plan and mitigation measures in line with standards and best practices. To the extent possible, the application of a transtheoretical model (TM) to experiences of ending intimate partner violence will be applied, fostering the use of cognitive processes in early stages of change, and behavioral processes in later stages of change. As awareness or consciousness-raising and social liberation are expected to emerge throughout the processes, a balance between the costs and benefits of behavior change efforts will continually be sought by the MWF PMU – extended to contractors – to comply with the “no harm” principle given the associated risks, in particular at household level, for beneficiaries who may still be at contemplation stage, without a strong sense of readiness and motivation to positively engage for change through project’s activities<sup>15</sup>. The use of TM processes and constructs of change in relation to the IPV, including the development and evaluation of a TM stage-based IPV intervention that will aim to address individuals’ readiness to change behavior, will be recommended in the terms of reference for the selection of the consultants. The core principles that will be taken into account for the community awareness raising approach will be developed and validated in the POM, and be further elaborated in the methodology proposed by the contracted service(s) provider(s) by the PMU.

#### *Sub-component 2.2. Technical support for providing psychosocial and counseling services*

40. This sub-component is designed to strengthen the capacity of key GBV services providers, namely the UNFD and MWF staff who work directly with survivors and at-risk populations, i.e., vulnerable young women and girls, in providing psychosocial and counseling support. The targeted staff, which will include social workers and case workers, will benefit from formal training and hands-on support. Throughout the project, trainings and capacity building on psychosocial and counseling services will be provided by a specialized contractor hired by the project with the objective of reinforcing capacities of both the MWF, as the line ministry in charge of promoting women’s empowerment and protection through its network social workers, and the UNFD as the leading local NGO providing assistance and protection to vulnerable women and girls. The MWF and UNFD will gradually benefit from a Training of Trainers (ToT) and will be able to train more Djiboutian institutions such as the relevant national directorates decentralized across the country and community organizations until being autonomous on basic psychosocial and counseling services. Given the lack of counselors in the country, the rationale for strengthening GBV services with this particular focus is to fill the gap by increasing the number of GBV partners who are able to respond to the psychosocial needs of GBV survivors. The ToT approach will help increase capacities in the long run of GBV services providers, relevant CBOs and stakeholders in addressing the psychosocial and counseling needs of GBV survivors. The GBV counselor who will be hired for capacity building will be required to develop a simplified handbook compiling best practices ranging from basic psychosocial support to GBV case management as the latter is often the primary entry point for survivors to benefit from expanded services such as psychosocial and counseling services<sup>16</sup>. All capacity building materials developed by the counselor will need to be consistent with international GBV standards and guidelines while being adapted to the specific context of Djibouti. A transition and sustainability plan for the handover process by the target stakeholders will be proposed as part of the counselor’s duties.

41. In addition, relevant focal points who are in regular contact with populations that are at risk of GBV, or who play an active role in the implementation of the national protocol against GBV, will also benefit from capacity-building on psychosocial support. Targeted additional beneficiaries include the following GBV service provider: (i) key focal points identified in the health sector (i.e.; hospital staff to whom GBV survivors are referred to); and the following identified GBV

<sup>15</sup> Miller WR and Rollnick S. (2002), *Motivational interviewing: Preparing people for change*. 2nd ed. New York: Guilford Press; 2002, [url](#)

<sup>16</sup> Gender-Based Violence Information Management System (GBVIMS), <https://www.gbvims.com/what-is-gbvims/learn-about-the-gbvims/>





response actors: (ii) key focal points identified in the education sector selected on a pilot basis (i.e. teachers, principals, academic advisors, nurses) from secondary school level in Djibouti City; and (iii) community-based organizations/ members selected on a pilot basis in project's locations who are working in the frontline with GBV survivors, including in instances where the survivor seeks support or in case of informal family mediation. In the education sector, the training sessions will be incorporated to the regular annual trainings of public personnel and teachers, while in the health sector and with CBOs, specific training arrangements will be agreed upon between the MWF and the selected service provider on the basis of the preliminary assessment made by the latter while ensuring it allows for a cost-efficient training delivery model. Trainings will include guidance and tools on how to recognize signs of abuse, promote safe and confidential reporting, and provide psychosocial support.

42. By strengthening the capacity of key GBV service providers and identified response actors, it is expected that GBV survivors will have increased access to quality psychosocial counseling services and referral mechanisms, therefore ultimately benefitting from the project's activities.

**Component 3: Project Management and Administration, Monitoring and Evaluation, and Knowledge Dissemination (US\$ 409,000)**

43. This component will support the following activities: (i) project management for the coordination and implementation of activities including some operating costs; (ii) project monitoring and evaluation activities, including developing a community participatory approach for community-based interventions (iii) preparation of the final evaluation report including lessons learned; (iv) environmental and social risk management; (v) participatory evaluations; and (vi) annual audits.

*Sub-component 3.1. Project Management and Administration*

44. A Project Management Unit (PMU) established at the MWF which will be in charge of the overall coordination, including environmental and social risk management and fiduciary management of project's activities. The PMU team will mainly include MWF staff seconded to the PMU, in addition to individual consultants with specific expertise that will be hired. The composition of the team will be further described at appraisal stage.

*Sub-component 3.2. Monitoring and Evaluation*

45. The PMU will set up a participatory Monitoring and Evaluation (M&E) mechanism to track progress and results of the project's activities during the implementation of the project. Further to the support from the lead NGO in collecting, analyzing and reporting data related to project's activities, a locally appropriate participatory M&E system will be developed to contribute to the ownership and commitment of the target communities and sustain the results of project's activities. The participatory M&E approach will be primarily used for the community-based interventions such as to measure community behavioral change toward GBV. Lessons learnt will be captured for knowledge sharing throughout the project cycle, encompassing adjusting project's activities/ responding to new circumstances, and informing future programming as necessary. Furthermore, a process evaluation will be included in the M&E strategy to monitor the implementation through ongoing feedback and adaptive management - the project's Grievance Mechanism (GM) will be an essential tool for facilitating the process evaluation, in addition to focus group discussions with community members and semi-structured interviews with community leaders and other relevant stakeholders.

46. A M&E framework will be established and detailed in the POM. Periodic assessments will be carried out and will contribute to draw lessons learned for adequate results measurement and dissemination.



*Sub-component 3.3. Knowledge dissemination*

47. Lessons learnt will be captured for knowledge sharing throughout the project cycle, comprising of adjusting project’s activities/ responding to new circumstances, and informing future programming as necessary. A knowledge management specialist will be contracted to consolidate and analyze lessons learned during project implementation. Lessons learned would be disseminated in events where project’s beneficiaries will have an opportunity to express themselves and present how the project’s interventions have impacted their lives, results and success stories, but also share challenges specific to Djibouti context that they have faced and means through which the project would have been able to address them. These events will be documented and covered in the media where the funding by the GoJ will be recognized with the logos. Djibouti government officials and the Government of Japan, as well as development partners will be invited to further share experience and raise awareness of the importance of investing in vulnerable and at-risk populations for their economic empowerment, but also to invest at household and community levels to foster an enabling environment free of GBV and conducive to women’s participation.

**B. Project Cost and Financing**

Project Components	Project cost (US\$)	Trust Funds (US\$)	Counterpart Funding
<b>1:</b> Livelihoods support for at-risk adolescent girls and young women who dropped out of school	1,649,000	1,649,000	0
<b>2:</b> Community-based interventions and capacity-building for GBV prevention and response	692,000	692,000	0
<b>3:</b> Project Management and Administration, Monitoring and Evaluation, and Knowledge Dissemination	409,000	409,000	0
<b>Total Costs</b>	<b>2,750,000</b>	<b>2,750,000</b>	<b>0</b>
Total Project Costs (US\$)	2,750,000	2,750,000	0
<b>Total Financing Required (US\$)</b>	<b>2,750,000</b>	<b>2,750,000</b>	<b>0</b>

**IV. IMPLEMENTATION**

**A. Institutional and Implementation Arrangements**

48. The Ministry of Women and Family (MWF) will be the responsible implementing agency that will establish the Project Management Unit (PMU). Established in 2007, the Ministry of Women and Family develops and coordinates



national strategies and programs to combat GBV and promote women's and children's rights. The MWF has experience in implementing projects financed by other donors (e.g., the European Union) but it will be the first time implementing a project administered by the World Bank. Procurement and Financial Management assessments of the implementing agency were carried out to at appraisal to determine the soundness of the FM and procurement systems, and determine the fiduciary arrangements accordingly. The PMU will hire fiduciary consultants with experience working on WB-financed projects to work along with the existing staff and gradually transfer capacity to the MWF by project's closure. Furthermore, trainings and handholding support will be provided to the MWF fiduciary staff with a view to strengthen and sustain MWF capacities. The PMU will get guidance and training on the Bank's financial and procurement reporting requirements and standards.

49. The PMU established within the MWF will be responsible for overall coordination and oversight of project's activities including fiduciary management, monitoring and evaluation, environmental and social risk management, knowledge sharing, and reporting such as periodic financial and operational reports with results and status of activities towards achievement of the PDO. The contracting of consultants to support the implementation of project's activities will be carried out by the PMU in accordance with Bank rules and procedures.

50. The PMU will competitively select a limited number of qualified services providers to conduct activities under Component 1 and Sub-Component 1.2. The PMU will directly contract with an NGO pre-identified to support the implementation of Sub-Component 2.1., subject to a cleared single source justification. All contracted services provider(s) and/ or NGO(s) will be selected on the basis of their track record and experience, in particular according to the respective Terms of Reference (ToR) and technical skills and qualifications: (i) in delivering a high volume of short-term soft skills and entrepreneurship trainings, including the follow-up plan for effective start of income generating activities; or (ii) in working closely and mobilizing community-based organizations on GBV prevention and response-related interventions; or (iii) in providing trainings, capacity-building and handholding support to GBV services providers and other GBV response actors for the provision of psychosocial services to GBV survivors.



Figure 1: Project Implementation Arrangements – at central level

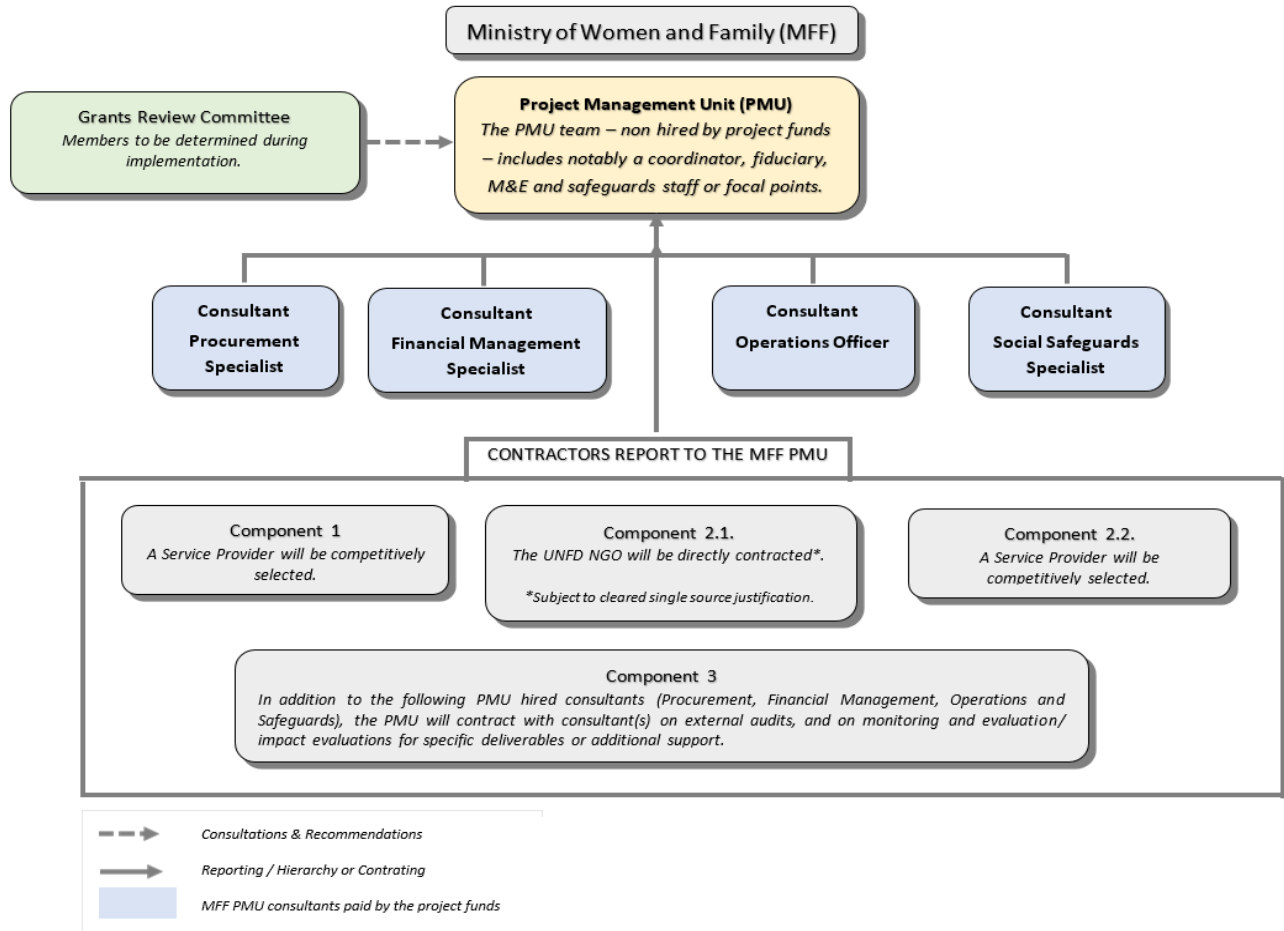
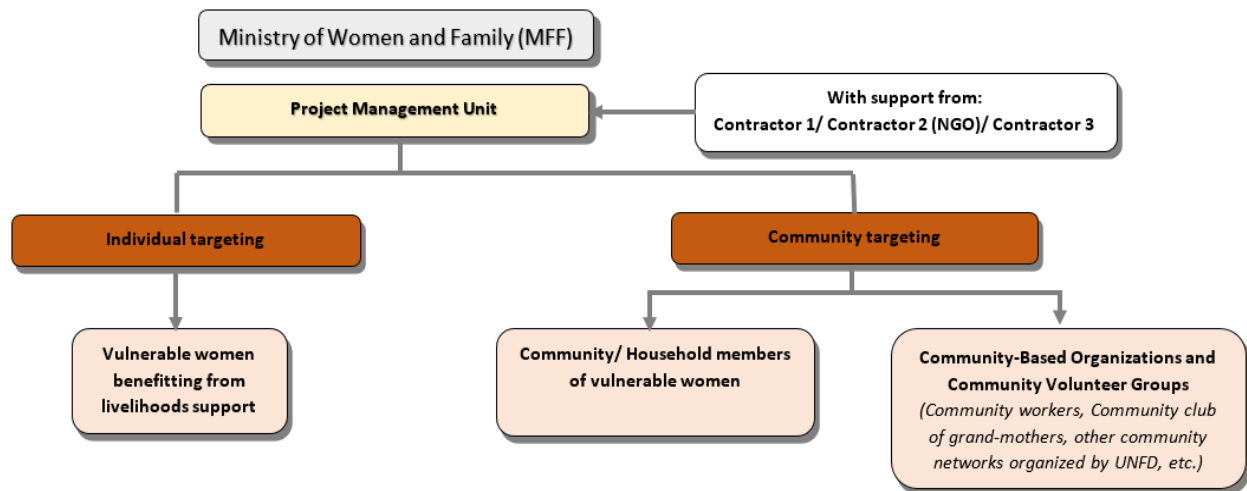


Figure 2: Project Implementation Arrangements – at community level





## B. Results Monitoring and Evaluation

51. A participatory Monitoring and Evaluation (M&E) mechanism and process evaluation will be set up to track progress and results of the project's activities during the implementation of the project. Further to the support from the lead NGO in collecting, analyzing and reporting data related to project's activities, a locally appropriate participatory M&E system will be developed to contribute to the ownership and commitment from the target communities and sustain the results of project's activities. The participatory M&E approach will be primarily used for the community-based interventions such as to measure community behavioral change toward GBV. Furthermore, a community process evaluation will be incorporated in the M&E strategy to monitor the implementation through ongoing feedback and adaptive management. The project's Grievance Redress Mechanism (GRM) will be an essential tool for facilitating the process evaluation, in addition to focus group discussions with community members and semi-structured interviews with community leaders and other relevant stakeholders.

52. The community driven approach will be adopted with the active participation of beneficiaries in the implementation and monitoring of the project's interventions. Special attention will be paid to ensure that populations at-risk of GBV that may include survivors (Component 1 beneficiaries) will be consulted and involved from the outset in community-led interventions, such as the monitoring and process evaluation to measure the effectiveness of social norms and behavioral change interventions. Vulnerable women but also men from their households and communities will strongly be enlightened to understand, participate in, and own the M&E process; thereby increasing stakeholders' accountability, including the implementing agency, contractors and service providers.

## C. Sustainability

53. *Institutional Sustainability.* The project' sustainability lies on the emphasis of capacity building and strengthening of relevant national stakeholders during project implementation. Both the MWF as implementing agency and UNFD as GBV service provider, in addition to other GBV response actors such as CBOs will benefit from capacity building support through training and support to ensure sustainability of the pilot operations and scale-up potential at completion. Through this pilot project, the MWF will have its first experience following WB procedures and guidelines, which will be an positive experience for future WB financing as funds would be channeled through the government. The MWF has already expressed its strong commitment to combat GBV through prevention and response programming with support from donors, and may request donors for additional support to build on the results of the pilot project. The capacity building on psychosocial support to service providers and actors responding to GBV, the mentorship, Training of Trainers (ToT) and handholding support are financed by the pilot to enhance autonomy of relevant stakeholders in providing psychosocial support. Beyond the project, this would help to gradually expand the skills transfer to relevant decentralized actors including community-based organizations.

54. *Operational and Economic Sustainability.* Furthermore, the pilot activities which will take place in the impoverished districts of Djibouti City, in particular in Balbala and Boulaos, are designed with implementation modalities aimed for its sustainability beyond the project duration. The curriculum designed to enhance the employability and business skills of trainees will be developed based on a local labor market assessment and a needs assessment carried out during consultations and interviews with beneficiaries and relevant stakeholders at community level at the inception phase of the project. The conditionality of having beneficiaries match a certain percentage of the grant through their own funds, assets or any in-kind contributions has demonstrated evidence of strengthening ownership, therefore improving the chance of business sustainability. Furthermore, business proposals developed by a group of two or more young women will be encouraged as it will contribute to mutual learning, greater cohesion, and cost-efficiency by increasing the business



sustainability. Finally, a locally appropriate participatory Monitoring and Evaluation (M&E) system and process evaluation with strong involvement of community members will be implemented and fostered for utilization beyond the pilot project. Lessons learned and knowledge dissemination as part of project’s activities will showcase results and success of the pilot model and inform throughout the project. This will feed into any adjustment required on the pilot activities, and designing of future operations while optimizing cost-efficiency, expansion and continuity of the pilot activities with positive results and impacts at individual, household, and community levels.

**V. KEY RISKS**

**A. Overall Risk Rating and Explanation of Key Risks**

55. The **overall project risk** is rated as **Substantial** owing to risks related to institutional capacity for implementation and sustainability and technical.

**Table 3: Systematic Operations Risk-Rating Tool (SORT) ratings**

Risk Categories	Rating (H, S, M or L)
Political and governance	Low
Macroeconomic	Low
Sector Strategies and Policies	Moderate
Technical Design of Project or Program	Substantial
Institutional Capacity for Implementation and Sustainability	Substantial
Fiduciary	Moderate
Environment and Social	Moderate
Stakeholders	Moderate
Other	Moderate
<b>Overall</b>	<b>Substantial</b>

56. **Institutional Capacity for Implementation and Sustainability:** The institutional capacity for implementation and sustainability risk is rated as **Substantial**. The Ministry of Women and Family has limited experience in implementing such complex operation and weak capacities with limited staff and budget. This risk will be partly mitigated by selecting during project’s implementation a lead NGO which works at community level and strongly coordinates with community-based organizations to ensure activities are adequately delivered. The project’s interventions will be limited to Balbala and Boulaos as pilot locations to optimize coordination arrangements.

57. **Technical design:** The project’s technical risk is rated as **Substantial** given the sensitive approach required when targeting gender-based violence vulnerabilities in a country where GBV response is limited and barriers related to social norms prevail, including a high level of GBV acceptability, combined with the lack of experience and limited capacities of the implementing agency to design and implement such operation. While the project will build on lessons learnt from other similar operations designed across the regions, it will be the first time that a GBV prevention and response project funded by the World Bank through JSDF will be piloted in Djibouti. To mitigate this risk, the Bank will provide substantial support to ensure that the project’s developments objectives are met. Furthermore, an innovative design will support intergenerational community mobilization in light of the communities extended family structures, in addition to strongly involving men on the community-based behavioral change efforts. By combining the livelihoods support to at-risk young vulnerable women in a specific community, along with local awareness raising activities targeting males and communities,



risks of domestic/ intimate partner violence may be mitigated. The pilot activities will be tested out by intervening within the same localities on both GBV prevention and response programming for greater impact and measurement of results. Regarding the risks around the eligibility criteria of beneficiaries, the project will not exclusively target GBV survivors to participate in supported activities. Instead, the project will target a group of vulnerable young women and girls exposed to GBV risks that may include survivors for livelihood opportunities, while strengthening the community-based prevention and response mechanisms. While working towards appropriate, accessible and quality GBV prevention and response interventions through a survivor-centered approach, the PMU, and all service provider contracted for the project, will follow key ethical principles such as the respect for confidentiality and autonomy, with the utmost consideration for security and safety for GBV survivors, which should prevail throughout the project.

58. **Fiduciary arrangement and risks:** The overall fiduciary risk (financial management and procurement) is **Moderate**. The objective of the financial management assessment was to determine whether the financial management arrangements (i) are capable of correctly and completely recording all transactions and balances relating to the project; (ii) facilitate the preparation of regular, accurate, reliable, and timely financial statements; (iii) safeguard the project's assets, and (iv) are subject to auditing arrangements acceptable to the Bank. The assessment complied with the World Bank policy and directives on investment financing, and the financial management assessment and risk rating principles.

59. The proposed project oversight and accountability arrangement are considered **acceptable**, and the **FM risk is Moderate**. The FM arrangement includes the internal control system (Financial Management Specialist and Accountant, hands-on support and capacity building to be provided by the FM consultant, Financial Management procedures as part of the Operational Manual, Interim Financial Report, and accounting system), and the external oversight bodies (external auditor with qualification and experience, upon agreed ToR with the World Bank. The FM risk and mitigating measures are presented in Table 4 below. Key actions to mitigate the risk are to: (i) develop the Project Operations Manual (POM), including the FM procedures and grant management procedures, (ii) appoint the Project Financial Management Specialist (FMS) and Accountant, (iii) recruit the project FM Consultant, (iv) recruit a qualified external auditor, and (v) acquire the accounting system. The **procurement risk** is rated as **Moderate**. To mitigate procurement risks, the Project Management Unit (PMU) that will be established within the MWF will hire part time consultant to assist the PMU on procurement activities in accordance with Bank procurement regulations and procedures. In addition, trainings and handholding support will be provided to the MWF fiduciary staff with a view to strengthen and sustain capacities within the MWF. With the above mitigation measures and low value/less complex procurement contracts envisaged under the project, both procurement and financial management residual risks are assessed as moderate.

60. **Environmental and Social risks** are rated as **Moderate**. The overall environmental risk is assessed to be Low and the social risks are assessed as Moderate. The project potential adverse risks to and impacts on environment are likely to be negligible. The main environmental risk is linked to Occupational Health and Safety (OHS) with COVID-19 transmission among project workers and communities as a result of project activities. There is also the risk that project activities related to livelihood interventions result in activities potentially affecting the environment, however these activities are likely to be micro-scale and can be managed at locality level to ensure that any negative cumulative impact can be avoided or mitigated.

61. Key social potential risks and impacts of the project include (i) the risk of inequalities in accessing project benefits; (ii) eligibility criteria not well-designed, transparent or appropriately disseminated (iii) the risk of exposure or propagation of COVID-19 during the implementation of activities, both in terms of community exposure and exposure of project workers; (iv) risks that project activities related to livelihood interventions result in (a) lack of labor force protection, including child labor and the risk of failure to comply with the labor standards of non-discrimination; (b) economic violence for project beneficiaries. There is a risk of sexual exploitation and abuse and sexual harassment (SEA/SH), as GBV survivors





are a vulnerable population and GBV service provisions involve personnel who are in position of power compared to the beneficiaries, and especially teams that are of majority men. There is also the risk of increased violence, especially intimate partner violence, and non-partner violence following the economic empowerment of women. Measures will be proposed in the ESF instruments to mitigate those risks and any additional risks identified during preparation of the instruments, including an exclusion list of the type of activities that the project will not finance will be used to screen the project activities related to livelihood interventions.

## VI. APPRAISAL SUMMARY

### Economic benefits and costs

62. Investing in young vulnerable women for their economic empowerment is likely to yield long-term and sustainable high returns. The project aims to support 1,000 women by providing them with technical and business skills, micro-entrepreneurship support and matching grants worth US\$ 1,000 per beneficiary (component 1). The economic benefits resulting from the project are therefore related to both i) the livelihoods support activities to young vulnerable women at-risk of GBV (component 1), and to ii) the community-based interventions and capacity-building for GBV prevention and response (component 2).

63. The economic benefits accruing from the livelihoods support, including micro-entrepreneurship activities, are strongly anticipated. Young women and adolescent girl who dropped out of school and integrated one of the three identified schools for a “second chance” will be selected under component 1. It is assumed that these female young beneficiaries can attribute an increase in their future income as a result of the project. Given their vulnerability, it is expected that the project selected beneficiaries earn incomes at or below the international poverty line of US\$ 1.90 per day (or US\$ 57 per month). Through the matching grants, individually targeting young women will be supported to develop income-generating activities and encouraged to achieve economies of scale by joining forces among themselves to create micro-enterprises. While it is difficult to quantify financial profits beneficiaries of livelihoods support interventions would make, it is expected that at least 250 micro-enterprises would be created and 650 female beneficiaries would be economically active as with an increased income as a result of the project. Furthermore, the community mobilization and sensitization activities at community level (component 2) will contribute to provide a safer environment that is conducive to female labor force participation within the targeted communes of Balbala and Boulaos.

64. The detrimental impacts of GBV, and the lack of quality psychosocial services for GBV survivors, has development and economic costs for the local communities. A wealth of evidence demonstrates that poverty is a risk factor associated with GBV that intersects with and reinforces gender inequality.<sup>17</sup>

### Financial Management

#### Overview of the Institutional Arrangement

65. The Ministry of Women and Family (MWF) will be the implementing agency through a Project Management Unit (PMU). Established in 2007, the Ministry of Women and Family develops and coordinates national strategies and programs

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<sup>17</sup> World Bank Group and Sexual Violence Research Institute (2020), Development Marketplace: innovations to address Gender-Based Violence; <https://www.svri.org/sites/default/files/attachments/2020-07-21/EconomicEmpowermenttoAddressGBV-DMA.pdf>





to combat GBV and promote women's and children's rights. The MWF has experience implementing projects financed by other donors (e.g., the European Union) but not in implementing a project financed by the World Bank.

66. The PMU will be responsible for overall coordination and oversight of the project's activities, including fiduciary management, monitoring and evaluation, environmental and social risk management, knowledge sharing, and reporting such as periodic financial.

### Summary of the FM assessment

67. The financial management assessment of the MWF was undertaken. The objective of the financial management assessment was to determine whether the financial management arrangements (i) are capable of correctly and completely recording all transactions and balances relating to the project; (ii) facilitate the preparation of regular, accurate, reliable, and timely financial statements; (iii) safeguard the project's assets, and (iv) are subject to auditing arrangements acceptable to the Bank. The assessment complied with the World Bank policy and directives on investment financing, and the financial management assessment and risk rating principles.

68. The proposed project oversight and accountability arrangement are considered acceptable, and the FM risk is Moderate. The FM arrangement includes the internal control system (Financial Management Specialist and Accountant, hands-on support and capacity building to be provided by the FM consultant, Financial Management procedures as part of the Operational Manual, Interim Financial Report, and accounting system), and the external oversight bodies (external auditor with qualification and experience, upon agreed ToR with the World Bank. The FM risk and mitigating measures are presented in Table 4 below. Key actions to mitigate the risk are (i) develop the POM, including the FM procedures and grant management procedures, (ii) appoint the Project FMS and Accountant, (iii) recruit the project FM Consultant, and (iv) recruit a qualified external auditor and (v) acquire the accounting system.

69. Please refer to **Annex I** for the detailed FM assessment.

### Procurement

70. **Applicable procurement rules and procedures.** Procurement will be carried out in accordance with the World Bank Procurement Regulations for IPF Borrowers for Goods, Works, Non-Consulting and Consulting Services, dated November 2020 ('Procurement Regulations'). The project will be subject to the World Bank's "Guidelines on Preventing and Combating Fraud and Corruption in projects Financed by IBRD Loans and IDA Credits and Grants", October 15, 2006, revised in January 2011, and as of July 1, 2016. The project will use the Systematic Tracking of Exchanges in Procurement (STEP) to plan, record, and track procurement transactions.

71. **Procurement capacity and arrangements.** MWF will be the project implementing agency with full fiduciary responsibility, including for income-generating activities. The Ministry has already appointed a procurement officer who actively participated in the project preparation, including PPSD and procurement plan. He has also benefited basic procurement training organized by the Bank on end May 2022. In addition, it was agreed that the implementing agency will be assisted by a part time procurement consultant to reinforce and transfer capacity to the MWF team.

72. **Procurement scope, Project Procurement Strategy for Development (PPSD) and procurement plan.** Apart from grants for income-generating activities which represent about 35 percent of the financing and not procurement related, procurement contracts foreseen under the project would mainly involve small value consultants' services for technical assistance and capacity building and limited goods. At appraisal, UNFD has been identified as the NGO that would be directly contracted by the MWF to lead GBV prevention and management at the national level given its role as the main



provider of GBV services in Djibouti. The client has prepared a short, simple and focused Project Procurement Strategy for Development (PPSD) and procurement plan which reflected this justification for direct selection, initially estimated in amount of less than \$200,000. Market analysis of the PPSD concluded that most procurement activities will approach the local market which is ready to accommodate them while 2 consultants services (baseline/endline surveys and psychological assistance) will require international expertise. The initial procurement plan includes 12 small contracts totaling \$743,000 with no single contract above \$200,000.

73. **Procurement risk and mitigation measures.** Even though contracts are small in value and not complex, the main procurement risk pertains to limited capacity of MWF in the implementation of WB financed projects using Bank procurement regulations. This risk will be mitigated by availing part time procurement consultant to assist and transfer capacity to MWF. The WB will also provide guidance, including through regular capacity buildings to PIUs of the entire portfolio. Hence, procurement risk is assessed as *Moderate* and would be updated during project implementation.

74. **Procurement implementation support and monitoring.** The World Bank’s procurement staff assigned to the project will support procurement implementation on regular basis with formal implementation support mission every 12 months together with the task team.

75. **Record keeping.** MWF will be responsible for maintaining procurement documents, including into STEP, for the entire procurement processing and contract execution.

**A. Legal Operational Policies**

	Triggered?
Projects on International Waterways OP 7.50	No
Projects in Disputed Areas OP 7.60	No

**B. Environmental and Social**

76. Environmental and Social risks are rated as Moderate.

77. The project sub-component 1.2 Support for income generating activities will generate potential adverse risks and impacts on environment that are likely to be predictable, temporary, reversible, low magnitude, site-specific. The list of eligible activities are unknown during the project preparation. The main environmental risk is linked to Occupational Health and Safety (OHS) with COVID-19 transmission among project workers and communities as a result of project activities.

78. Key social potential risks and impacts of the project include (i) the risk of inequalities in accessing project benefits, including potential risk of elite capture; (ii) eligibility criteria not well-designed, transparent or appropriately disseminated (iii) the risk of exposure or propagation of COVID-19 during the implementation of activities, both in terms of community exposure and exposure of project workers; (iv) risks that project activities related to livelihood interventions result in (a) lack of labor force protection, including child labor and the risk of failure to comply with the labor standards of non-



discrimination; (b) potential risk of economic violence for project benefit capture by family members, particularly intimate partners.

79. There is a risk of sexual exploitation and abuse and sexual harassment (SEA/SH), as GBV survivors are a vulnerable population and GBV service provisions involve personnel who are in position of power compared to the beneficiaries, and especially teams that are of majority men. There is also the risk of increased violence, especially intimate partner violence, and non-partner violence following the economic empowerment of women. Measures will be proposed in the ESF instruments to mitigate those risks and any additional risks identified during preparation of the instruments, including an exclusion list of the type of activities that the project will not finance will be used to screen the project activities related to livelihood interventions.

## **VII. World Bank Grievance Redress**

80. **Grievance Redress.** Communities and individuals who believe that they are adversely affected by a project supported by the World Bank may submit complaints to existing project-level grievance mechanisms or the Bank's Grievance Redress Service (GRS). The GRS ensures that complaints received are promptly reviewed in order to address project-related concerns. Project affected communities and individuals may submit their complaint to the Bank's independent Accountability Mechanism (AM). The AM houses the Inspection Panel, which determines whether harm occurred, or could occur, as a result of Bank non-compliance with its policies and procedures, and the Dispute Resolution Service, which provides communities and borrowers with the opportunity to address complaints through dispute resolution. Complaints may be submitted to the AM at any time after concerns have been brought directly to the attention of Bank Management and after Management has been given an opportunity to respond. For information on how to submit complaints to the Bank's Grievance Redress Service (GRS), please visit <http://www.worldbank.org/GRS>. For information on how to submit complaints to the Bank's Accountability Mechanism, please visit <https://accountability.worldbank.org>.



VII. RESULTS FRAMEWORK AND MONITORING

Results Framework

COUNTRY : Djibouti

JSDF-Djibouti: Promoting Women's and Community Resilience in the Fight Against Gender-Based Violence

Project Development Objectives

The Project Development Objective is to improve (i) girls and women’s access to skills development and livelihoods support; (ii) community awareness and mobilization in the fight against GBV in targeted areas; and (iii) the quality of psychosocial counseling services utilized by GBV survivors.

Project Development Objective Indicators

Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
<b>Name:</b> Number of direct project beneficiaries		Number	0.00	4,000.00	Annual, Quarterly	Annual and quarterly reports	MWF PMU with the support of contractors (NGO or service provider)
Of which are female beneficiaries		Percentage	0.00	60.00			

Description: Direct project beneficiaries include both (i) at-risk vulnerable women and girls targeted for skills development and livelihoods support under Component 1 (1,000); and (ii) households and community members benefiting from awareness-raising activities and behavioral change under Component 2 (3,000).

Disaggregated by:



Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
- Gender							
<b>Name:</b> Percentage of beneficiaries reporting an increase in income as a result of livelihood support activities		Percentage	0.00	65.00	Annual	Beneficiary survey	MWF PMU with the support of contractors (NGO or service provider)
Description: 100% beneficiaries of livelihood support activities are expected to be female, as all must have attended one of the 3 only female schools targeted by the project.							
<b>Name:</b> Percentage of community members in targeted areas reporting a positive change in attitudes towards GBV as a result of project's activities		Percentage	0.00	60.00	Baseline and Endline	Attitude survey	MWF PMU through the support of contractor (NGO or service provider who would have in its team a behaviour change communication consultant)
Of which are female community members		Percentage	0.00	50.00			
Of which are household members of female beneficiaries of livelihoods support		Percentage	0.00	20.00			



Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
<p>Description: This will be measured via a questionnaire on attitudes towards GBV. The indicator will be disaggregated by type of respondent (general community members, prevention activity participants, household members of livelihoods support beneficiaries), gender, and age.</p>							
<p><b>Name:</b> Percentage of GBV service providers staff offering psychosocial counseling services to GBV survivors in line with good international practices to respond to GBV survivors needs</p>		Percentage	0.00	70.00	Baseline and Endline	Supervision reports and quality criteria checklists	MWF PMU, with support from the contractor (NGO or service provider in charge of capacity building/ technical assistance for quality psychosocial support services)
<p>Description: GBV service providers identified for this support are:</p> <ul style="list-style-type: none"> <li>- MWF social workers</li> <li>- UNFD CEIO (Cellule d'Ecoute, d'Information et d'Orientation) staff</li> <li>- MoH staff who benefitted from the capacity building support</li> </ul>							

**Intermediate Results Indicators**

Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
<p><b>Name:</b> Number of beneficiaries participating in livelihoods support interventions</p>		Amount( USD)	0.00	1,000.00	Quarterly	Sum of number of beneficiaries participating in activities under component 1	MWF PMU, with support from the contractor (NGO or service provider in charge of trainings,



Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
							mentorship, coaching)
Description: 100% beneficiaries of livelihood support activities are expected to be female, as all must have attended one of the 3 targeted only female schools.							
<b>Name:</b> Value of sub-grants disbursed		Amount( USD)	0.00	1,000,000.00	Annual, quarterly	Annual, Quarterly reports	MWF PMU, with support from contractor (NGO or service provider)
Description: Each of the target 1,000 beneficiaries for the start-up/ micro-entrepreneurship support will receive a grant totaling USD 1,000, received in two tranches of USD 500 each.							
<b>Name:</b> Percentage of beneficiaries who completed life skills and technical trainings who are economically active		Percentage	0.00	65.00	Quarterly	Sum of number of beneficiaries who completed trainings under component 1 and are earning from income generating activities	MWF PMU, with support from contractor (NGO or service provider)
Description: 100% beneficiaries of livelihood support activities are expected to be female, as all must have attended one of the 3 targeted only female schools.							
<b>Name:</b> Number of		Number	0.00	250.00	Quarterly	Supervision reports	MWF PMU for



Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
women-owned micro enterprises created							compiling, with support from contractor (NGO or service provider)
<p><b>Description:</b> This indicator will measure the number of micro-businesses created with support from the project, by one or a group of beneficiaries from the livelihoods support (Component 1)</p>							
<b>Name:</b> Number of target host community members participating in GBV sensitization workshops or training activities		Number	0.00	3,000.00	Semi-annual	Reports, minutes, attendance sheets	MWF PMU, with support from contractor (NGO)
Of which are female community members		Number	0.00	40.00			
<p><b>Description:</b> This indicator will measure the number of host community members participating in GBV sensitization workshop or training activities.  <b>Disaggregated by:</b>  - Gender  - Age</p>							
<b>Name:</b> Number of target host community members engaged in GBV awareness building initiatives		Number	0.00	50.00	Semi-annual	Supervision reports	MWF PMU, with support from contractor (NGO)
Of which are female		Number	0.00	50.00			





Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
community members							
<p><b>Description:</b> This indicator will measure the number of host community members engaged in GBV awareness building initiatives.</p> <p><b>Disaggregated by:</b></p> <ul style="list-style-type: none"> <li>- Gender</li> <li>- Age</li> </ul>							
<b>Name:</b> Improved community perception of project community mobilization and sensitization activities against GBV		Percentage	0.00	60.00	Baseline and Endline	Perception survey	MWF PMU, with support from contractor (NGO or service provider who would have a behavior change communications consultant in its team)
<p><b>Description:</b> This will be measured for the project via a questionnaire on perceptions of project community mobilization and sensitization activities against GBV in targeted locations.</p> <p><b>Disaggregated by:</b></p> <ul style="list-style-type: none"> <li>- Gender</li> <li>- Age</li> </ul>							
<b>Name:</b> Number of GBV service providers provided with training and capacity-building on psychosocial counselling		Number	0.00	30.00	Semi-annual	Training records	MWF PMU to compile



Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
techniques							
Of which are female participants		Percentage	0.00	70.00			
Of which demonstrating increased knowledge of psychosocial counseling techniques in line with quality standards		Number	0.00	21.00			
<p>Description: GBV services providers include:</p> <ul style="list-style-type: none"> <li>- MWF social workers</li> <li>- UNFD CEIO (Cellule d'Ecoute, d'Information, et d'Orientation) staff</li> <li>- MoH key focal points identified in the health sector (i.e.; hospital staff to whom GBV survivors are referred to)</li> </ul>							
<b>Name:</b> Number of identified GBV response actors or relevant stakeholders provided with training on psychosocial counselling techniques		Number	0.00	100.00	Semi-annual	Training records	MWF PMU to compile
Of which are female participants		Percentage	0.00	50.00			
<p>Description: GBV response actors or relevant stakeholders include:</p> <ul style="list-style-type: none"> <li>- Key focal points identified in the education sector selected on a pilot basis (i.e., teachers, principals, academic advisors, nurses) from secondary school level in Djibouti</li> </ul>							



Indicator Name	Corporate	Unit of Measure	Baseline	End Target	Frequency	Data Source / Methodology	Responsibility for Data Collection
<p>City;  - Community-Based Organizations (CBOs) members selected on a pilot basis in project's locations who are working in the frontline with GBV survivors, including in instances where the survivor seeks support or in case of informal mediation.</p>							
<b>Name:</b> Community engagement process evaluations completed		Number	0.00	2.00	Twice during the project implementation	Progress reports	MWF PMU, with support from the M&E Consultant
<p>Description: A community engagement process evaluation will be conducted twice during project implementation to evaluate whether the project is operated against the expected outputs and whether activities support the achievement of development objectives.</p>							
<b>Name:</b> Annual M&E reviews conducted		Amount( USD)	0.00	2.00	Annual	Annual reports	MWF PMU, with support from a M&E Consultant
<p>Description: Annual M&amp;E reviews will be carried out and result in M&amp;E-specific reports.</p>							
<b>Name:</b> Percentage of grievances and feedback cases received by the project that are addressed in line with requirements defined in the GM manual		Percentage	0.00	90.00	Quarterly	Complaint logs	MWF PMU
<p>Description: Grievances and feedback cases considered are those received by the project.</p>							



**Target Values**

**Project Development Objective Indicators**

<b>Indicator Name</b>	<b>End Target</b>
Number of direct project beneficiaries	4,000.00
Of which are female beneficiaries	60.00
Percentage of beneficiaries reporting an increase in income as a result of livelihood support activities	65.00
Percentage of community members in targeted areas reporting a positive change in attitudes towards GBV as a result of project's activities	60.00
Of which are female community members	50.00
Of which are household members of female beneficiaries of livelihoods support	20.00
Percentage of GBV service providers staff offering psychosocial counseling services to GBV survivors in line with good international practices to respond to GBV survivors needs	70.00

**Intermediate Results Indicators**

<b>Indicator Name</b>	<b>End Target</b>
Number of beneficiaries participating in livelihoods support interventions	1,000.00
Value of sub-grants disbursed	1,000,000.00
Percentage of beneficiaries who completed life skills and technical trainings who are economically active	65.00
Number of women-owned micro enterprises created	250.00
Number of target host community members participating in GBV sensitization workshops or training activities	3,000.00
Of which are female community members	40.00
Number of target host community members engaged in GBV awareness building initiatives	50.00



<b>Indicator Name</b>	<b>End Target</b>
Of which are female community members	50.00
Improved community perception of project community mobilization and sensitization activities against GBV	60.00
Number of GBV service providers provided with training and capacity-building on psychosocial counselling techniques	30.00
Of which are female participants	70.00
Of which demonstrating increased knowledge of psychosocial counseling techniques in line with quality standards	21.00
Number of identified GBV response actors or relevant stakeholders provided with training on psychosocial counselling techniques	100.00
Of which are female participants	50.00
Community engagement process evaluations completed	2.00
Annual M&E reviews conducted	2.00
Percentage of grievances and feedback cases received by the project that are addressed in line with requirements defined in the GM manual	90.00



ANNEX I: FINANCIAL MANAGEMENT ASSESSMENT REPORT

Risk Assessment and Mitigation

1. The overall financial management risk rating for this project is Moderate. The financing envelope is small, and mitigation measures proposed to enhance the internal control are adequate to achieve the project development objective.

2. Table 4 below shows the risk assessment results and the risk rating summary that identifies the key risks project management may face in achieving project objectives. It also provides a basis for determining how to address these risks.

Table 4: Financial Management Risk Assessment and Mitigation

<i>Risk</i>	<i>Risk Rating Before mitigation</i>	<i>Risk Mitigating Measures Incorporated into Project Design</i>	<i>Residual Risk Rating</i>	<i>Condition of Negotiations, Board or Effectiveness</i>
	<b>Inherent Risk</b>			
<b>Country Level</b> Country PFM system is characterized by weak fiscal discipline, high indebtedness, and low fiscal transparency	H	Rely on stand-alone procedures and system	M	
<b>Entity Level</b> The MWF has no experience in implementing WB-financed project	S	Establish a PIU and build the PIU capacity to manage the project	M	



<i>Risk</i>	<i>Risk Rating Before mitigation</i>	<i>Risk Mitigating Measures Incorporated into Project Design</i>	<i>Residual Risk Rating</i>	<i>Condition of Negotiations, Board or Effectiveness</i>
<p><b>Project Level</b></p> <p>Overall, the scope and institutional arrangement of the project are simple. However, the grant management bear some risk such as allocation to ineligible beneficiaries, inaccurate reporting</p>	S	<p>Recruit an NGO with a strong capacity and experience in grant management</p> <p>Set up an inclusive and objective grant oversight committee</p> <p>Develop grant management procedures</p>	M	
<b>Control Risk</b>				
<p><b>Budgeting</b></p> <p>Unrealistic budget and inadequate budget reporting and monitoring</p>	S	<p>The POM will include clear procedures for the budget preparation and monitoring</p> <p>Train the project team on the above procedures</p>	L	N
<p><b>Accounting</b></p> <p>Delayed and unreliable IFR</p>	S	<p>Buy an accounting system to record and report the project transactions</p> <p>Train the FM staff in the use of the system</p>	M	
<p><b>Internal Control</b></p> <p>Ineligible expenditures namely on grant management</p>	S	<p>Establish and comply with the grant monitoring manual</p> <p>Operationalize the Grant monitoring Committee</p>	M	



<i>Risk</i>	<i>Risk Rating Before mitigation</i>	<i>Risk Mitigating Measures Incorporated into Project Design</i>	<i>Residual Risk Rating</i>	<i>Condition of Negotiations, Board or Effectiveness</i>
<p><b>Funds Flow</b></p> <p>Inaccurate Designated account reconciliation</p> <p>Bank statements are not available timely to monitor the project cash flow</p>	S	<p>Open the DA in an acceptable financial institution</p> <p>Train the FMS in client connection</p>	L	
<p><b>Financial Reporting;</b></p> <p>Lack of experience in preparing the IFR which may cause delays in reporting,</p> <p>The quality of the IFRs may be jeopardized by the inadequate systems and capacity</p>	S	<p>Agree on the IFR template</p> <p>Hand-holding support will be provided by the FM consultant in the preparation of the IFR</p> <p>Prepare the IFR every semester</p>	M	
<p><b>Auditing;</b></p> <p>Inadequate audit opinion and delayed audit report</p> <p>Lack of a monitoring mechanism in implementing the external auditor's recommendations</p>	S	<p>Recruit a qualified external auditor based on ToR agreed with the World Bank</p> <p>Launch the external auditor recruitment immediately after the project effectiveness</p> <p>Develop the audit recommendations and action plan when sending the audit report to the World Bank</p>	M	
<b>Overall Risk Rating</b>	H		S	

H – High

S – Substantial

M – Modest

L – Low

**Staffing Arrangements**

3. **PMU.** The PMU FM staff comprises one Financial Management Specialist and an Accountant appointed by the MWF. Given the lack of experience in managing World Bank-financed projects, a temporary FM consultant will be recruited for 6 months to provide hands-on support to the FMS and Accountant. The FMS Consultant shall be recruited according to the ToR to be prepared by the MWF and agreed upon with the World Bank.





#### **Budgeting arrangements**

4. The project planning and budgeting procedures will be part of the FM Chapter of the POM. The calendar of the planning and budgeting process will be described. In addition, the role and responsibilities of parties during the planning and budgeting process will be included. The budget monitoring tool will be provided in the Annex to the POM.

#### **Accounting Arrangements**

5. **Basis of Accounting:** The project will follow a cash basis accounting per International Public sector Accounting Standards (IPSAS).

6. **FM chapter of POM:** Accounting processes and procedures will be part of the POM. The PIU will maintain books of accounts for the project. Such books of accounts should include: a cash book, ledgers, journal vouchers, a fixed asset register, and accounts payable and receivable.

#### **Information systems.**

7. The accounting system will be used throughout the project implementation for budgeting, transaction recording, and reporting. The system's acquisition will be based on the technical description agreed upon with the World Bank.

#### **Internal control arrangements**

8. The POM will include an FM Chapter encompassing comprehensive FM procedures from budgeting, accounting, financial report, and external audit. The Project FM staff will receive hands-on support from the temporary FM Consultant. The FM system is automatized to record and report on FM transactions. The grant management will follow the grant management procedures and oversee by the grant committee.

#### **Banking and Fund Flow arrangement**

9. One separate designated account will be opened at a Commercial Bank acceptable to the World Bank. The designated account will be denominated in US\$. The DA will finance all eligible project expenditures as per the financing agreement. The authorized ceiling of the Designated Account will be six months of cash flow need.

10. **e-Disbursement:** the World Bank has introduced e-Disbursement for all its supported projects. Under e-Disbursement, all transactions will be conducted, and associated supporting documents scanned and transmitted online through the Bank's Client Connection system. e-Disbursement will considerably speed up disbursements and facilitate project implementation. It is a mandatory application for all World Bank-financed projects starting January 2013. The e-Disbursement functionality would (i) expedite World Bank processing of disbursement requests; (ii) prevent common mistakes in filling out Withdrawal Applications (WAs) (Form 2380); and (iii) reduce the time and cost of sending paper WAs and supporting documentation to the Bank.

#### **Financial reporting arrangements**

11. The PIU will prepare an interim financial report (IFR) on a Semester basis to be submitted to the World Bank within 45 days after the end of the Semester. The IFR will include the following:

- a. A statement of Sources and Uses of Funds;



- b. A statement of Uses of Funds by Project Activity/Component and the budget execution report;
  - c. Variance analysis and reasons for the variance;
  - d. Designated Account activity statement;
  - e. A statement of accounting policies adopted with explanatory notes.
- The IFR will be submitted through the clientconnection system.

**External Auditing arrangements**

12. The external auditing for the project will be undertaken by a private external auditor recruited according to ToR agreed with the Bank. The audit will be conducted in accordance with International Standards on Auditing and the accounts are prepared using the cash basis of the International Public Sector Accounting Standards (IPSAS). The audited financial statements for the project shall be sent no later than six months after the financial year-end via the clientconnection system.

13. The recruitment of the external audit will be launched and completed within four months after the project’s effectiveness. As per the World Bank policies on access to information, the audited financial report and the audit opinion will be disclosed.

**Governance and Anti-Corruption issues.**

14. The project management will ensure that all fraud and corruption policies are in place and that the project is carried out following the provisions of the World Bank Anti-corruption guidelines.

15. FM Covenants. The main FM covenants to be included in the Financing agreement: (i) appoint the FMS and the Accountant, (ii) recruit the FMS Consultant, two months after effectiveness (iii) recruit the external auditor 4 months after effectiveness, and (iv) acquire the accounting system, 2 months after effectiveness.

**Implementation support plan.**

16. Supervision missions to review financial management progress will be integral to the project’s implementation reviews. The supervision budget will consider the need to increase the efficiency of financial controls and related support in project implementation. Joint supervision missions with procurement staff to strengthen Bank control and support will be conducted. Given the FM risk level, one annual supervision visit to the field is anticipated.

**Financial Management Action Plan**

17. The following actions are agreed to enhance the financial management arrangements for the Project:

	Action	Deadline	Responsible agency
Accounting	Acquire the accounting system	2 months after effectiveness	MWF



<b>Funds Flow</b>	Open the Designated Account at a commercial bank acceptable to the World Bank	One month after signing the FA	MWF, MoF
<b>Internal Control/Internal Audit</b>	Prepare the FM chapter of the POM, and the grant management procedures Appoint the FMS and Accountant Recruit the FM Consultant	Immediately 2 months after the effectiveness	MWF MWF MWF