

1. CAS Data
Country: Djibouti

CAS Year: FY09

CAS Period: FY09–FY12

CASCR Review Period: FY09–FY13

Date of this review: March 5, 2014

2. Executive Summary

- i. This review examines the implementation of the FY09–FY12 Djibouti Country Assistance Strategy (CAS) of FY09, and assesses the CAS Completion Report (CASCR).
- ii. The CAS program was aligned with the government strategy (National Initiative for Social Development—INDS), and its results framework mapped well into development outcomes derived from the INDS. In this context the program aimed at contributing in three pillars to support: (i) economic growth through reducing constraints and associated costs to private sector development; (ii) access to basic social services and human development through increasing access to quality basic education, improving access to and quality of health services, and strengthening social protection and direct support to the poor; and (iii) governance and public sector management through improving expenditure transparency and monitoring and evaluation.
- iii. IEG rates the overall outcome of IDA support as *moderately unsatisfactory*. The CAS program achieved its objectives in health and education, where there was government ownership, but did not achieve them in private sector development, governance and public sector management, where government commitment was more uncertain, particularly following a change in leadership. In the areas of governance and monitoring and evaluation, the objectives of the program were not supported by appropriate Bank interventions and required capacity building.
- iv. Under pillar I on growth, World Bank support during the CAS period helped improve access to electricity services modestly, but did not succeed in improving the efficiency of public utilities, or in opening up the telecommunications sector. Improvements in business regulations were very limited and the financial sector was strengthened by the IMF's implementation of the recommendations from the FSAP. Under pillar II on basic social services and human development, World Bank support fostered a substantial improvement in education and health services through government commitment, well specified programs, and good monitoring of outcomes. The resulting health outcomes, in particular, were impressive. Access to education has also improved in line with CAS objectives. Expected results to strengthen social protection and direct support to the poor are taking more time than envisaged under the Bank program. Under pillar III on governance and public sector management, there was some progress in developing legal frameworks for improved expenditure transparency, but implementation of these frameworks is taking more time than envisaged under the CAS. Progress in improving monitoring and evaluation has been very slow in the absence of good statistical systems, weak capacity and limited World Bank attention to this issue.
- v. IEG rates IDA performance as *moderately satisfactory*. The World Bank team deserves recognition for operating in a difficult environment without a Bank office in Djibouti, and constrained by limited IDA resources in light of the substantial development challenges faced by the country. The program addressed important issues of poverty and shared prosperity in pillar II on basic social services and human development, but its selection of issues in pillars I on growth and III on public sector management and governance had less relevance. The program objectives in pillars I on growth and II were realistic, but not in pillar III which did not reflect a set of objectives backed by

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World Bank interventions. In terms of relevance of design, the interventions under pillar II on access to basic social services and human development were well designed to achieve the program objectives, but pillar I on growth and pillar III on governance and public sector management were weaker in that regard. Moreover, in pillar III capacity building fell short of needs, adversely affecting the achievement of objectives. The technical assistance (TA) and economic sector work was otherwise a good complement to lending activities. The strategy did not have a good monitoring and evaluation arrangement as demonstrated by the absence of regular monitoring of CAS implementation as well as the lack of a mid-term progress report. Moreover, the quality of supervision of projects was inadequate, in part reflecting high turnover of task managers and poor communication between them and client project managers. As a result, portfolio performance deteriorated over the CAS period, although the World Bank team reports recent improvement. In addition, although indicators were representative of the objectives targeted under the CAS, they generally lacked baseline and target values. With respect to coordination with donors, there is no formal framework for development partner coordination in Djibouti, but the World Bank appears to have done this informally through information sharing. For example, it took advantage of synergies with UNICEF and USAID in the education sector, and with other development partners in the energy sector. All in all, the CAS program was strong where there was government ownership and the program design addressed the objectives concretely with logical links between interventions and objectives, such as in the health and education sectors under Pillar II on basic social services and human development. The program was weak where the World Bank paid less attention to government ownership, and proposed a list of activities that were not supported by concrete interventions.

vi. The experience of the World Bank's program in Djibouti shows that: (a) when government ownership is unclear the likelihood of success is limited; (b) the absence of an effective supervision system prevents timely identification and solution of problems during implementation; (c) when there is a mismatch between objectives and interventions the program is likely to fail in achieving its objectives; (d) weak monitoring and evaluation compounds the problems of executing a program where the interventions are weakly linked to the objectives, as was the case with governance; (e) incorporating lessons from past programs and interventions is likely to lead to more realistic outcomes; and (f) complex results frameworks with multiple and unmeasurable indicators make it difficult to monitor the program and evaluate its impact.

vii. IEG agrees with the recommendations in the CASCR.

3. *WBG Strategy Summary*

Overview of CAS Relevance:

Country Context:

1. Djibouti is an IDA-eligible lower middle income country of about 900,000 inhabitants situated in the Horn of Africa. Nearly 90 percent of the population lives in urban areas, mostly in the capital city. It is resource-poor but strategically located between the Red Sea and the Gulf of Aden, which makes the country an ideal gateway to the African continent. The economy is based on services-centered on the port, the railway, and the civil service. Its per capita GDP of US\$1,400 in nominal dollars in 2009 puts it ahead of many countries in one of the poorest regions in Africa. During the CAS period all the Horn of Africa-including Djibouti-was affected by drought and by commodity price hikes. Nonetheless, average GDP growth amounted to 4.5 percent which compares favorably with other countries in the Middle East and North Africa region (4 percent average growth) and its average inflation was moderate (4.5 percent average). Budget discipline was uneven during the CAS period and the government accumulated domestic and external arrears in a context of revenue shortfalls compared to budget. Unemployment hovered at about 60 percent, with many making a living in the informal sector of the economy. Extreme poverty affects over 40 percent of the population, relative poverty touches over 70 percent, and life expectancy at birth was 61 in 2011. The UN's Human Development Report ranked Djibouti 154th out of 177 countries in 2007. Djibouti is struggling to achieve the MDG goals in reducing extreme poverty,

achieving universal education, reducing child mortality and improving maternal health, and halting and reversing the spread of HIV/AIDS. The country is politically stable, and power balance between the country's two ethnic groups is a key determinant for domestic political stability.

2. The National Initiative for Social Development (INDS)-the government's program-was based on four pillars: (i) strengthen Djibouti's competitiveness and create conditions for strong and sustainable economic growth; (ii) expedite the optimal use of human resources as well as urban and rural development; (iii) reduce poverty and assist highly vulnerable individuals; and (iv) promote political, local, economic and financial governance.

Objectives of the WBG Strategy:

3. The CAS program was aligned with the INDS, and its results framework mapped into development outcomes derived from the INDS. In this context the program supported: (i) economic growth through reducing constraints and associated costs to private sector development; (ii) access to basic social services and human development through increasing access to quality basic education, improving access to and quality of health services, and strengthening social protection and direct support to the poor; and (iii) governance and public sector management through improving expenditure transparency and monitoring and evaluation.

Relevance of the WBG Strategy:

4. **Congruence with Country Context and Country Program.** The program addressed key challenges facing the country, particularly in the areas of education and health. The objectives of the program were relevant to the development priorities of Djibouti as expressed in the INDS. The three engagement areas of the CAS, particularly pillar II on access to basic social services and human development, addressed key issues of Djibouti's MDG agenda and mapped well into the country's development goals. By closely aligning the CAS program with the government's program, the Bank ensured government ownership. As government priorities changed with new leadership, the government remained fully committed to objectives of pillar II on social services and human development but became lukewarm about objectives in pillar I on growth and pillar III on governance and public sector management. In retrospect, the objectives in pillars I and III, some of them aspirational from the start, required a reassessment once it became clear that the government was not going to pursue them with the same zeal as the objectives in pillar II.

5. **Relevance of Design.** Recognizing the modest institutional capacity of the Djibouti administration and incorporating lessons learned about effective development approaches in small states, IDA support targeted a small number of objectives. The World Bank chose activities based on government priorities, tried to avoid duplication with other development partners, and sought to exploit synergies with UNICEF and USAID in education and other development partners in energy. Given that the IDA allocation was quite limited, the Bank sought to continue leveraging its resources through access to global funds (e.g., Carbon Fund, Global Environmental Fund). In particular, the World Bank would provide additional financing for projects that had achieved their development objectives-such as health-in order to strengthen development effectiveness. The AAA work was a good complement to lending activities, focusing on expenditure review, poverty assessment, energy master plan, telecommunications, and governance. Most of the planned AAA was carried out during the CAS period, except for a poverty assessment that was needed to target World Bank interventions. Overall, in areas with government ownership-such as health and education under Pillar II-design seemed to address the objectives quite concretely, and in others less so. The lack of a Bank office in Djibouti and a limited IDA envelope for the country constrained the scope and effectiveness of the Bank program in some areas. A better matching of interventions with objectives was needed to achieve the objectives in pillars I and III, and the latter required more capacity building. A key problem in the design of pillar I was that the interventions did not directly address the substantial problems in the electricity and telecom companies. In addition, the strategy lacked an adequate monitoring and evaluation framework, and had no mid-term progress report. While the Bank responded appropriately to the food and global financial crises, it was less nimble in dealing with changed government priorities in some areas of the program.

6. **Strength of the Results Framework.** For most CAS objectives, the results framework presented a logical link between World Bank outputs and objectives, and between CAS objectives and INDS goals. It also included appropriate indicators for the expected results under each targeted objectives of the CAS pillars. The objectives were in the main achievable, although the objectives for pillar III were not supported by concrete Bank interventions. While the framework was appropriate, in most cases it lacked baseline and target values for the indicators partly reflecting very weak statistics in Djibouti. The program also lacked intermediate milestones and a progress report to monitor program achievement. In the absence of adequate information on progress in implementation, the program was not amended to the extent needed by changing circumstances and revised government priorities.

7. **Risk Identification and Mitigation.** The CAS identified four risks to the CAS program: high dependence on port revenues, lower FDI flows, the increasing number of refugees due to regional insecurity conditions, and limited financial assistance under the CAS not providing the critical resources needed for development effectiveness of the programs. For the first three risks the World Bank program lacked explicit mitigating measures. For the last risk, the concern was that the government would not consider that the financial support under the CAS program was sufficient for Djibouti to invest in a long-term dialogue and relationship with the World Bank. In light of this, the CAS proposed to design well-focused projects with simple design, to perform close and proactive supervision, together with additional capacity building assistance, and be highly selective in the approach to the CAS program. But the risk in achieving development effectiveness of the World Bank program did materialize in that limited interventions undermined the achievement of objectives in pillars I on growth, and especially, pillar III on governance and public sector management. The Bank's proposed mitigation was not implemented to the extent required to achieve the objectives of the program in these pillars. At the same time the Bank responded well to the effect of the global financial crisis with an unplanned budget support crisis response project.

Overview of CAS Implementation:

Lending and Investments:

8. At the inception of the CAS, there were 6 IDA financed ongoing operations for US\$53.5 million. The CAS proposed four operations for US\$24 million which were all funded during the CAS period. These were operations for US\$6-7 million each in health, education, energy, and water and rural development. In addition, four unplanned operations for US\$16 million were funded during the CAS to respond to the global crisis and to provide additional financing in urban poverty reduction, power access, and water and rural development. Moreover, 12 operations for US\$25.5 million were financed with trust funds, of which seven of them were ongoing at the start of the CAS. Two of these TF operations were in response to the food crisis for US\$5 million, and one was for support of social safety net for US\$3.6 million as part of the global crisis response. The rest of trust fund financing was primarily capacity building in statistics, education, budget management and procurement, and natural disaster risk assessment and monitoring. A significant part of the IDA and trust fund financing-about US\$14 million-was in response to exogenous shocks of food prices and the global financial crisis.

9. Projects showed below par performance. Four projects exited during the CAS were evaluated by IEG. One was rated satisfactory, while the others were rated moderately unsatisfactory or unsatisfactory. This compares with a MNA average of 61 percent of projects rated moderately satisfactory or better during the same period. Portfolio performance deteriorated over the CAS period- 1 project at risk in 2009-10 and 4 projects at risk in 2012. The average percentage of projects at risk in Djibouti (43 percent) is higher than that of MNA (27 percent) as a whole during the period. Performance has begun to turn around by addressing some issues of implementation such as high turnover of task managers, lack of adequate handover as projects changed hands, and insufficient communication between task managers and client project managers.

Analytic and Advisory Activities and Services

10. The CAS planned to carry out TA or economic sector work in the telecommunications and energy sectors, business environment and investment climate, social protection and food security,

sustainable solid waste collection, vulnerability information system, financial management and public procurement, and statistical capacity building. The CAS also planned a Public Expenditure Review and a Financial Sector Assessment Program (FSAP) jointly with the IMF. The analytic and advisory activities planned under the CAS were carried out, except for the ones on the business environment and business climate, and the one on poverty assessment. This assistance was well linked to the lending program under each of the areas of the CAS, but could have put more emphasis on those areas where progress was slow (pillar III and some parts of pillar I).

Partnerships and Development Partner Coordination

11. Djibouti benefits from the support of a small group of bilateral development partners-most prominently France, Japan, Kuwait, and the United States-and from some multilateral development partners-primarily the European Union, the African Development Bank, and the Arab Fund. There is no formal framework for donor coordination, resulting in informal information sharing, which is manageable given the small size of the donor community. And the World Bank has recently opened an office in Djibouti which should facilitate donor coordination. In some areas of the program, such as education and energy, the World Bank combined forces with other development partners to take advantage of synergies to achieve program objectives.

Safeguards and Fiduciary Issues

12. IEG is not aware of safeguard or fiduciary issues in the World Bank's portfolio.

Overview of Achievement by Objective:

Pillar I: Support economic growth by reducing constraints and associated costs to private sector development

13. Under pillar I, the CAS aimed to improve the electricity and communications sectors, reduce their costs and enhance their efficiency, strengthen the financial sector, and improve the business climate.

14. **Increase access, reliability, and quality of service delivery of the electricity and telecommunication sectors.** Access to electricity increased modestly, including in targeted poor areas, and electricity losses were reduced from 21 percent at the beginning of the CAS to 12 percent in 2011. During the CAS period there was no decline in unplanned electricity outages, though a modest decrease has taken place since. The electric utility's operating costs were not reduced as anticipated in the CAS. Information on results in the electricity sector is partial and fragmented, and the main problem of the CAS approach to this objective was that reform of the electricity company was not addressed directly in World Bank projects. The Power Access and Diversification project (FY05, plus additional financings I (FY09) and II (FY10)) developed medium and low voltage lines that have been used to expand the distribution grid and connect households, while the number of household connections will not be available before the end of the project (March 2014). In addition, a few new street lighting units have been installed in Balbala, and activities carried out by this project also enabled additional investments of the electricity company and other development partners in Balbala. On the one hand, this has led to an improvement in the efficiency of the network and a reduction of outages; on the other hand, execution of this World Bank-supported project has resulted in accumulated increasing delays over the years as a result of low capacity of the project implementation unit, ineffective institutional arrangements, and poor design during project preparation. The project has also had procurement issues related to overinflated costs and quantities. This objective was also supported by TA on a least-cost energy master plan (FY10) for electric generation, transmission and distribution for the next 25 years, including some basic planning capacity and tools to update key components of the master plan. A grant-financed TA on telecom sector reform was completed in FY13, which was late for reforming the sector during this CAS. But there is not much information on improvements in the telecommunications sector, and this lucrative sector remains monopolized by Djibouti telecom. The Djibouti team reports some progress in the dialogue following a recent change of government counterparts. (Partially Achieved)

15. **Reduce the cost of electricity and telecommunications services.** The indicators for this objective did not have baseline and target values. The completion report notes that there was no

reduction in the electric utility's operating costs. The objective was supported by the Power Access and Diversification project (FY05, plus additional financings I (FY09) and II (FY10)). There is no information on cost reduction of telecommunication services, with Djibouti telecom maintaining a monopoly position in the market. (Not Achieved)

16. Improve the efficiency of public utilities for electricity, water and telecommunications.

Based on a diagnostic of the telecommunications sector from 2008 (TA), the CAS envisaged an increase in competition in the sector and a reduction of costs. This would be underpinned by institutional reforms that included the establishment of a regulator and opening up the telecommunications sector. Further discussions took place in the context of the grant-financed TA on telecom sector reform (FY13), but there has been no progress towards this objective, and Djibouti telecom remains the sole operator. (Not Achieved)

17. Strengthen the financial sector. An FSAP was conducted jointly with the IMF in FY09. World Bank supervision has been strengthened, and there has been progress addressing governance issues in the banking system. But there are still weaknesses in the prudential and regulatory framework, in that the size of the banking sector is relatively large compared to the economy, and most banks are small and recently established. Most of the work to strengthen the financial system was done with support of the IMF. (Partially Achieved)

18. In addition, the CAS included activities to reduce the constraints and costs of doing business in Djibouti, measured by the number of days to open a business. However, this number did not change during the CAS period. Business regulations remain an obstacle to improving competitiveness. The overall Doing Business ranking, as well as the detailed rankings deteriorated during the CAS period.

19. IEG rates the overall outcome for this pillar as *moderately unsatisfactory*. World Bank support during the CAS period helped improve electricity services modestly. But the other objectives in this pillar either made very little progress (efficiency of public utilities, opening the communications sector, improving the business sector) or were supported primarily by other development partners (financial sector strengthening).

Pillar II: Supporting access to basic social services and human development

20. Under pillar II, the CAS aimed to increase access to quality basic education and health services, and strengthen social protection and direct support to the poor.

21. Increase access to quality basic education. There has been improvement in this area through an increase in primary school enrollment, and in the ratio of girls to boys in that enrollment. In line with targets under the CAS, the primary gross enrollment increased from 62 percent in 2008 to 70 percent in 2011, and the ratio of girls to boys increased from 0.7 in 2008 to 0.96 in 2012. The completion rate of primary school without repeating increased from 53 percent to about 76 percent, somewhat short of a target of 83 percent. Most teachers (90 percent) are receiving continuing training and teacher-parent partnerships have been introduced in more than half of the schools. However there is no data showing that these activities actually improved education quality. All in all, access has improved but there is no evidence of improvements in the quality and efficiency of the education system. The World Bank supported this objective through the Second School Access and Improvement project (FY09) which supported the building of a middle school in Balbala, supported training for teachers, and provided funds to invest in materials, vehicles for school inspectorates. Textbooks were financed by the Education for All-Fast Track Initiative grant (FY11). UNICEF financed the development of a pedagogical guide related to children with specialized needs and USAID financed a governance guide for Parent Teacher Associations. (Achieved)

22. Improve access to and quality of health services. The completion report does not provide evidence of improved access to health services, but health outcomes have improved in line with the CAS targeted indicators. Child mortality fell from 94 to 68 per 1,000 live births in 2012. Maternal mortality declined from 546 to 383 per 100,000 live births, and HIV prevalence among 15-24 year old pregnant women stabilized at 1.4 percent in 2012 (from 2.1 percent in 2008). Moreover, 90 percent of health facilities are being staffed by at least 1 qualified/trained health personnel, and there were no

avian flu outbreaks. The main conduits for World Bank support were the Health Sector Development project (FY02, closed FY12) and the HIV/AIDS, Malaria and TB Control project (FY03, closed FY09). Coverage of the Health Sector Development project was substantial as 80 percent of the population had access to the health facilities in which project activities were implemented. As a result, funding for the health sector was increased, health facilities built, renovated, and/or equipped, protocols or guidelines introduced at all health facilities, community pharmacies were established adjacent to each health facility to distribute drugs, and a National Center for nutritional recovery was established in Balbala Hospital. Moreover the Center for Health Personnel Training provided training to health personnel in line with the CAS targets. Outcomes have been impressive: the proportion of births attended by qualified personnel reached nearly 90 percent, children DPT3 vaccinations before 12 months reached 93 percent, and the cost of drugs sold in public health facilities significantly reduced. All in all, this area is an example of successful World Bank interventions fully owned by the country and achieving expected outcomes. (Achieved)

23. **Strengthen social protection and direct support to the poor.** The CAS aimed at mitigating the vulnerability of the poor, including against recurrent floods, droughts, food insecurity, and other external shocks; improving the institutional framework for social protection; and assessing the extent and causes of poverty to propose a strategy to ameliorate effects. Progress has been uneven, and the relevant interventions have begun to be implemented only recently. A social safety net strategy was adopted by the government, but the expected institutional framework for the social security system was not set up. A labor intensive project to employ 8,000 people has only got underway recently and the target has been revised to a more realistic 4,000 jobs to be created (2,000 jobs had been created by January 2014). Target indicators related to agriculture production and increased use of rainwater were not met, and they were indirectly connected to this objective. In all, this is a program objective that needs to be re-evaluated to make it more realistic and in line with the appropriate World Bank interventions. The World Bank's main interventions were the Social Safety Net Project (FY12), the Flood Emergency Rehabilitation project (FY05, closed FY09), and the Rural Community Development & Water Mobilization project (FY11). (Partially Achieved)

24. IEG rates the overall outcome for this pillar as *moderately satisfactory*. World Bank support during the CAS period fostered a substantial improvement in education and health services. The resulting health outcomes, in particular, were impressive. Efforts to strengthen social protection and direct support to the poor are only now starting to get underway; therefore there is not much progress to demonstrate for this objective under the CAS.

Pillar III: Supporting governance and public sector management

25. Pillar III aimed to improve expenditure transparency and monitoring and evaluation.

26. **Improve expenditure transparency.** Legal frameworks have been established but implementation of such frameworks has been slow in improving expenditure transparency. A new public procurement law was approved by parliament in July 2009, and a number of implementing decrees and regulations have been issued. This new procurement framework has introduced several good practice procedures but the transparency of expenditure has not improved. The procurement plan is not publicly advertised and therefore the private sector has limited access to potential business opportunities in public procurement. Moreover, contract awards are not made public, which makes the public procurement process opaque. Audit reports of public accounts used to be publicized in 2007 but there were none made public since then. The 2012 audit for government accounts has been prepared but not publicized. The World Bank provided technical assistance towards the end of the CAS period through the project on Governance and Anti-corruption (FY12), which is more on how legal reform in other countries would apply to Djibouti than on transparency per se. On transparency, there was trust fund support for capacity building in the budget directorate and for public procurement reform (FY06, closed FY09). (Partially Achieved)

27. **Improve monitoring and evaluation.** This is an area of almost no progress, particularly because of low government capacity that was not addressed by the World Bank. Capacity building of the statistical agency is a pre-condition to develop statistics that would support a good monitoring and evaluation system. There was trust fund support for the statistical agency in FY06 but this has proved

to be insufficient. Djibouti conducted a household survey in 2004 (the only one in 2002-11), but this survey was not comprehensive and could not be used to measure the incidence of poverty since its main focus was household energy consumption and expenditure. In 2012 the country conducted its first comprehensive household survey which has been used to produce a poverty profile that will be assessed and validated by the Bank in FY14.

28. Support for monitoring and evaluation was done through trust funds (Monitoring and Evaluation System (FY09)) as the main conduit for World Bank assistance. In FY14-beyond the period of this validation-the World Bank provided TA to design a household-level price survey to update the consumer price index. (Not Achieved)

29. IEG rates the overall outcome for this pillar as *unsatisfactory*. There was some progress in developing frameworks for expenditure transparency, but implementation of these frameworks is taking more time than envisaged under the CAS. Progress in improving monitoring and evaluation has been very slow in the absence of good statistical systems, slow progress in capacity building and, and limited focus of the World Bank interventions on this issue.

Objectives	IEG Rating
Pillar I: Supporting economic growth	Moderately Unsatisfactory
Pillar II: Supporting access to basic social services and human development	Moderately Satisfactory
Pillar III: Supporting governance and public sector management	Unsatisfactory

4. Overall IEG Assessment

	CASCR Rating	IEG Rating
Overall Outcome:	Moderately Satisfactory	Moderately Unsatisfactory
IDA Performance:	Moderately Satisfactory	Moderately Satisfactory

Overall outcome:

30. IEG rates the overall outcome of IDA support as *moderately unsatisfactory*. The CAS program achieved its objectives in health and education, where there was government ownership, but did not achieve them in private sector development, governance and public sector management, where government ownership was more uncertain, particularly following a change in leadership. In the areas of governance and monitoring and evaluation, the objectives of the program were not backed up by appropriate Bank interventions and required capacity building. Under pillar I on growth, Bank support during the CAS period helped improve access to electricity services modestly, but did not succeed in improving the efficiency of public utilities, or in opening up the telecommunications sector. Improvements in business regulations were limited and the financial sector was strengthened by the IMF's implementation of the recommendations from the FSAP. Under pillar II, on basic social services and human development, World Bank support fostered a substantial improvement in education and health services through government commitment, well specified programs, and good monitoring of outcomes. The resulting health outcomes, in particular, were impressive. Access to education has also improved in line with CAS objectives. Expected results to strengthen social protection and direct support to the poor are taking more time than envisaged under the Bank program. Under pillar III, on governance and public sector management, there was some progress in developing legal frameworks for improved expenditure transparency, but implementation of these frameworks is also taking more time than envisaged under the CAS. Progress in improving monitoring and evaluation has been very slow in the absence of good statistical systems, weak capacity and limited World Bank attention on this issue.

IDA Performance:

31. IEG rates IDA performance as *moderately satisfactory*. The Bank team deserves recognition for operating in a difficult environment without a Bank office in Djibouti, and constrained by limited IDA resources in light of the substantial development challenges faced by the country. The program addressed important issues of poverty and shared prosperity in pillar II on basic social services and human development, but its selection of issues in pillars I and III had less relevance. The program objectives in pillars I and II were realistic, but not in pillar III which did not reflect a set of objectives backed by concrete World Bank interventions. In terms of relevance of design, the interventions under pillar II on access to basic social services and human development were well designed to achieve the program objectives, but pillar I on growth and pillar III on governance and public sector management were weaker in that regard. Moreover, in pillar III on governance, capacity building fell well short of needs, adversely affecting the achievement of objectives. The technical assistance and economic sector work was otherwise a good complement to lending activities. The strategy did not have a good monitoring and evaluation setup as demonstrated by absence of regular monitoring of CAS implementation as well as the lack of a mid-term progress report. Moreover, the quality of supervision of projects was inadequate, in part reflecting high turnover of task managers and poor communication between them and client project managers. As a result, portfolio performance deteriorated over the CAS period. In addition, although indicators were representative of the objectives targeted under the CAS, they generally lacked baseline and target values. With respect to coordination with donors, there is no formal framework for development partner coordination in Djibouti, but the World Bank appears to have done this informally through information sharing. For example, it took advantage of synergies with UNICEF and USAID in the education sector, and with other development partners in the energy sector. All in all, the CAS program was strong where there was government ownership and the program design addressed the objectives quite concretely with logical links between interventions and objectives, such as in the health and education sectors under Pillar II, on basic social services and human development. The program was weak where the World Bank paid less attention to government ownership, and proposed a list of activities that were not well supported by concrete interventions.

5. Assessment of CAS Completion Report

32. The CPSCR provided a very candid assessment of the CASCR based on the objectives of the CAS results framework. The lessons learned are very relevant. In some instances it is short on details needed for assessment of the program results (such as some areas in Pillar I on growth). Although in general, the CASCR focus is on the objectives of the CAS, many indicators did not have baseline and target values. Therefore the analysis and presentation of evidence is not very clear-- for example, on aspects related to social protection and direct support to the poor, or on the pillar related to governance and public sector management. As a result IEG had to revert to the team to obtain additional evidence.

6. Findings and Lessons

33. The experience of the World Bank's program in Djibouti shows that: (a) when government ownership is unclear the likelihood of success is limited; (b) the absence of an effective supervision system prevents timely identification and solution of problems during implementation; (c) when there is a mismatch between objectives and interventions the program is likely to fail to achieve its objectives; (d) weak monitoring and evaluation compounds the problems of executing a program where the interventions are weakly linked to the objectives, as was the case with governance; (e) incorporating lessons from past programs and interventions is likely to lead to more realistic outcomes; and (f) complex results frameworks with multiple and unmeasurable indicators make it difficult to monitor the program and evaluate its impact.

34. IEG agrees with the recommendations in the CASCR.

Annex Table 1:	Summary of Achievements of CAS Objectives
Annex Table 2:	Planned and Actual Lending, FY09-12
Annex Table 3:	Analytical and Advisory Work for Djibouti, FY09 - FY13
Annex Table 4:	Grants and Trust Funds Active in FY09-13 (in US\$ million)
Annex Table 5:	IEG Project Ratings for Djibouti, FY09-13
Annex Table 6:	Project Ratings for Djibouti and Comparators, FY09-13
Annex Table 7:	Portfolio Status for Djibouti and comparators, FY09-13
Annex Table 8:	Disbursement Ratio for Djibouti, FY09-13
Annex Table 9:	Net Disbursement and Charges for Djibouti, FY09-13
Annex Table 10:	Total Net Disbursements of Official Development Assistance and Official Aid
Annex Table 11:	Economic and Social Indicators for Djibouti, FY09-12
Annex Table 12:	Millennium Development Goals

Annex Table1: Summary of Achievements of CAS Objectives

CAS FY09-12		Actual Results	Comments
Pillar I: Supporting Economic Growth		(as of current month year)	
1. Reducing constraints and associated costs to the private sector development			
Major Outcome Measures	Indicators: <ul style="list-style-type: none"> - Access to electricity increased, including in targeted poor areas - Unplanned electricity outages reduced - Electric utility's operating costs reduced - Electric losses reduced - Number of days to open a business reduced - Competition in telecommunication increased - Financial sector assessed in order to address any stability and structural issues 	<ul style="list-style-type: none"> • Access to electricity increased <i>modestly</i>, including in targeted poor areas • Unplanned electricity outages decreased modestly • Electric utility's operating costs did not decline • Electric losses reduced from 21% to 12% • Number of days to open a business have not reduce • Competition in telecommunication did not increase • Financial sector was assessed in order to address any stability and structural issues 	<p>Source: CASCR and Djibouti Bank team</p> <p>The information on access to electricity, electricity outages, and electric utility operating costs is partial and fragmented, and may be inaccurate.</p>
	2. Improve access to and quality of health services		
Indicators: <ul style="list-style-type: none"> - Reduction of child mortality rate to 65 per 1,000 live births in 2012 - Reduction of maternal mortality rate to 350 per 100,000 live births in 2012 - HIV prevalence rate among 15-24 year old pregnant women stabilized at 2% - Improvement of staffing of all health 		<ul style="list-style-type: none"> • Reduction of child mortality rate to 68 per 1,000 live births in 2012 • Reduction of maternal mortality rate to 383 per 100,000 live births in 2012 • HIV prevalence rate among 15-24 year old pregnant women stabilized at 1.4% in 2012 • Staffing of health facilities by at least 1 	<p>Source: CASCR</p>

CAS FY09-12		Actual Results	Comments
Pillar II: Supporting access to basic social services and human development		(as of current month year)	
1. Increase access to quality basic education.			
Major Outcome Measures	Indicators: <ul style="list-style-type: none"> - Total enrollment rate (GER) in primary to increase from 68% in 2008 to 75% by 2012 and ratio of girls to boys to increase from 0.70 to 0.87 - Percentage of children completing primary schooling without repeating to increase from 53% to 83% for both boys and girls - Primary cycle repetition rate to drop from 4% to 2% - Primary cycle dropout rate to drop from 5% to 3% - 90% of teachers to receive continuing training - More teaching materials in classroom; teacher-parent partnerships introduced in half of schools by 2012 	<ul style="list-style-type: none"> • Total GER in primary increased from 62% in 2008 to 70% and ratio of girls to boys increased from 0.70 to 0.96 by 2012 • Percentage of children completing primary schooling without repeating increased from 53% to 75.6% <i>overall</i> and 72.9% for <i>girls</i> • Primary cycle repetition rate grew from 4% to 9.8% in 2011 following discontinuation of primary school exit exam • Primary cycle dropout rate dropped from 5% to 2.9% in 2011 • Effort to provide 90% of teachers with continuing training were surpassed • Efforts to introduce teacher-parent partnerships in half of schools by 2012 were surpassed 	<p>Source: CASCR</p>
	2. Improve access to and quality of health services		

<p>facilities by qualified health workers (at least 1 qualified/trained health personnel in 90% of facilities)</p> <ul style="list-style-type: none"> - Avian flu outbreaks (if they occur) contained 	<p>qualified/trained health personnel in 90% of facilities was reached</p> <ul style="list-style-type: none"> • Avian flu outbreaks did not occur 	
<p>3. Strengthen social protection and direct support to the poor.</p>		
<p><i>Indicators:</i></p> <ul style="list-style-type: none"> - 8,000 labor-intensive jobs created - 10% of residents in selected areas benefit from community development sub-projects - Framework for providing social assistance to the poor developed - Institutional framework of the social security set up - Occurrence of floods in selected areas reduced - Agriculture and livestock production in selected areas increased - Use of rainwater/wadis water in small scale agriculture and livestock increased 	<ul style="list-style-type: none"> • 8,000 labor-intensive jobs were not created. <i>Program only now underway.</i> • 10% of residents in selected areas did not benefit from community development sub-projects. <i>Program only now underway.</i> • Framework for providing social assistance to the poor was developed • Institutional framework of the social security has not been set up by end of CAS period • There have been no recent flood • Agriculture and livestock production in selected areas did not increased • Use of rainwater/wadis water in small scale agriculture and livestock did not increased 	<p>Source: CASCR</p>

<p>CAS FY09-12 Pillar III: Supporting governance and public sector management</p>	<p>Actual Results (as of current month year)</p>	<p>Comments</p>
<p>1. Improve expenditure transparency.</p>		
<p><i>Indicators:</i></p> <ul style="list-style-type: none"> - Public procurement law approved by Parliament - Audit reports annually produced and publicized by Government 	<ul style="list-style-type: none"> • Public procurement law approved by Parliament in July 2009, and a number of implementing decrees and regulations have been completed. However, weaknesses in procurement remain. • Audit reports were produced annually and made available upon request but not publicized by Government 	<p>Source: CASCR</p>
<p>2. Improve monitoring and evaluation</p>		
<p>Major Outcome Measures</p> <p><i>Indicators:</i></p> <ul style="list-style-type: none"> - Basic INDS monitoring and evaluation system adopted - Demographic data of the Population Census available - Regular surveys conducted - National Accounts produced annually - Poverty indicators updated (if new household survey data available) 	<ul style="list-style-type: none"> • Basic INDS monitoring and evaluation system is not operational despite slight capacity improvements and the identification of monitoring indicators • Demographic data has been made available to the public following a population census in 2009 • Regular surveys are not conducted • National Accounts system has not yet been established, despite interest demonstrated on the part of the government • The results of the household poverty assessment, launched in 2012, are available but poverty indicators have not been updated 	<p>Source: CASCR</p>

Annex Table 2: Planned and Actual Lending, FY09-12

Project ID	Project name	Proposed FY	Approval FY	Closing FY	Proposed Amount	Approved Amount	Outcome rating
Projects planned under CAS FY09-12							
P107395	Health Sector Project (Additional Financing) (DJ - Improving Health Sector Performance)	2009	2009	2012	7	7	LIR: S
P112253	Energy Access II (DJ-Power Access & Diversification AF)	2010	2010	2014	6.2	6	LIR: MU
P117355	Water and Small-scale Rural Development (DJ-Rural CDD & Water Mobilization)	2011	2011	2017	5	5.83	LIR: S
P123315	Education and TVET (Strengthening Institutional Capacity)	2012	2012	2018	6	6	LIR: MS
Total					24.2	24.83	
Non-programmed projects							
P120190	DJ-Urban Poverty Reduction Add Financing		2010	2014		2.9	LIR: MS
P130328	DJ Crisis Response-SSN project		2012	2017		5	LIR: S
P130493	DJ-Power Access & Diversification AF II		2012	2014		5.2	LIR: MU
P130515	DJ-Rural CDD & Water Mobilization AF		2012	2017		3	LIR: S
Total						16.1	
Ongoing projects during the CAS Period							
Project ID	Project name		Approval FY	Closing FY		Approved Amount	Outcome rating
P071062	DJ-Health Sector Development Project		FY02	FY12		15	IEG: S
P073603	DJ-HIV/AIDS, Malaria and TB Control		FY03	FY09		12	IEG: MS
P086379	DJ-Power Access and Diversification Proj		FY06	FY14		7	LIR: MU
P086994	DJ-Second School Access and Improvement		FY06	FY12		10	IEG: MU
P088876	DJ-URBAN POVERTY REDUCTION PROJECT		FY08	FY14		3	LIR: MS
P089968	DJ-FLOOD EMERGENCY REHABILITATION		FY05	FY09		6.46	IEG: MU
Total						53.46	

Source: Djibouti CAS and WB Business Warehouse Table 2a.1, 2a.4 and 2a.7 as of 12/23/13

* LIR: Latest internal rating. U: Unsatisfactory. MU: Moderately Unsatisfactory. MS: Moderately Satisfactory. S: Satisfactory. HS: Highly Satisfactory.

Annex Table 3: Analytical and Advisory Work for Djibouti, FY09 - FY13

Proj ID	Economic and Sector Work	Fiscal year	Output Type
P113591	FSAP Djibouti	FY09	Report
P107067	DJ-Energy Sector Master Plan	FY10	Policy Note
P121719	FSAP Djibouti Module	FY10	Report
P117534	DJ Public Expenditure Review	FY11	Report
P118952	DJ Qat Awareness	FY11	Report
P121205	DeMPA Assessment - Djibouti	FY11	Report
P128447	DJ Regional Hub - Next Level of Reforms	FY12	Report
P127403	DJ-Transport & Trade Facilitation	FY13	Policy Note
Proj ID	Technical Assistance	Fiscal year	Output Type
P107066	FIRST #464: Financial Mechanisms for SME	FY09	"How-To" Guidance
P113627	DJ: ICT Sector Reform	FY09	Institutional Development Plan
P112342	DJ: Assistance Food Crisis DPG	FY10	Knowledge-Sharing Forum
P118326	DJ Policy Dialogue	FY11	Institutional Development Plan
P119431	Djibouti - CBD and MTI tech. assistance	FY11	Institutional Development Plan
P117498	Djibouti Governance and Anti-Corruption	FY12	TA/IAR
P126007	DJ-Regulation of Private Port Operators	FY12	TA/IAR
P118959	Djibouti employment for the poor TA	FY13	TA/IAR
P130590	Telecom Sector Reform	FY13	TA/IAR
P143198	Index-Based Insurance for Herders	FY13	TA/IAR

Source: WB Business Warehouse Table ESW/TA 8.1.4 as of 01/29/14

Annex Table 3: Analytical and Advisory Work for Djibouti, FY09 - FY13

Proj ID	Economic and Sector Work	Fiscal year	Output Type
P113591	FSAP Djibouti	FY09	Report
P107067	DJ-Energy Sector Master Plan	FY10	Policy Note
P121719	FSAP Djibouti Module	FY10	Report
P117534	DJ Public Expenditure Review	FY11	Report
P118952	DJ Qat Awareness	FY11	Report
P121205	DeMPPA Assessment - Djibouti	FY11	Report
P128447	DJ Regional Hub - Next Level of Reforms	FY12	Report
P127403	DJ-Transport & Trade Facilitation	FY13	Policy Note
Proj ID	Technical Assistance	Fiscal year	Output Type
P107066	FIRST #464: Financial Mechanisms for SME	FY09	"How-To" Guidance
P113627	DJ: ICT Sector Reform	FY09	Institutional Development Plan
P112342	DJ: Assistance Food Crisis DPG	FY10	Knowledge-Sharing Forum
P118326	DJ Policy Dialogue	FY11	Institutional Development Plan
P119431	Djibouti - CBD and MTI tech. assistance	FY11	Institutional Development Plan
P117498	Djibouti Governance and Anti-Corruption	FY12	TA/IAR
P126007	DJ-Regulation of Private Port Operators	FY12	TA/IAR
P118959	Djibouti employment for the poor TA	FY13	TA/IAR
P130590	Telecom Sector Reform	FY13	TA/IAR
P143198	Index-Based Insurance for Herders	FY13	TA/IAR

Source: WB Business Warehouse Table ESW/TA 8.1.4 as of 01/29/14

Annex Table 4: Grants and Trust Funds Active in FY09-13 (in US\$ million)

Project ID	Project name	TF ID	Approval FY	Closing FY	Approved Amount
P101445	Djibouti Catalytic Fund for Education (Child TF056633)	TF 56633	2006	2011	8,000,000
P100189	Djibouti Capacity Building for the National Statistical Agency	TF 56372	2006	2009	252,700
P094818	DJ-Capacity Bldg of new Budget Directorate & its Counterparts	TF 55178	2006	2009	343,000
P094758	DJ-Cap. Bldg. Public Procurement Reform	TF 54934	2006	2009	357,000
P102842	Avian Influenza and Human Pandemic Preparedness	TF 57309	2007	2010	2,111,236
P104109	Building Capacity to prepare Impl. of Integrated Social Protection System	TF 90574	2008	2011	244,000
P112017	Djibouti - Food Crisis Response Development Policy Grant	TF 92328	2008	2009	5,000,000
P110722	Djibouti: Monitoring & Evaluation System	TF 92311	2009	2012	286,330
P116804	Djibouti - Strengthening Aid Coordination & Mgt. Capacity	TF 96624	2010	2013	420,570
P120588	Crisis Response: Employment and Human Capital Social Safety Net	TF 97217	2011	2015	3,640,000
P119878	DJ-Natural Disaster Risk Assessment and Monitoring System	TF 96839	2011	2014	900,000
P117424	Primary Education Support Program-EFA-FTI Catalytic Fund Additional Financing	TF 98073	2011	2013	4,000,000
	Total FY09-13				25,554,836

Source: Client Connection as of 12/21/13

Annex Table 5: IEG Project Ratings for Djibouti, FY09-13

Exit FY	Proj ID	Project Name	Total Evaluated (\$M)	IEG Outcome	IEG Risk to DO Rating*
2009	P089968	DJ-Flood Emergency Rehabilitation	8.76	Moderately Unsatisfactory	Significant
2009	P112017	Djibouti - Food Crisis Response Dev.	-	Unsatisfactory	Significant
2012	P071062	DJ-Health Sector Development Project	25.13	Satisfactory	Moderate
2012	P086994	DJ-Second School Access and Improvement	10.00	Moderately Unsatisfactory	Moderate
		Total	43.89		

WB Business Warehouse Table 4a.5 and 4a.6 as of as of 12/21/2013

* With IEG new methodology for evaluating projects, institutional development impact and sustainability are no longer rated separately.

Annex Table 6: Project Ratings for Djibouti and Comparators, FY09-13

Exit FY	Total Evaluated (\$M)	Total Evaluated (No)	Outcome % Sat (\$)	Outcome % Sat (No)	RDO % Moderate or Lower Sat (\$)*	RDO % Moderate or Lower Sat (No)*
Djibouti	43.9	4	57.2	25.0	80.0	50.0
MENA	5,950.22	87	62.60	60.98	47.48	35.71
World	84,764.68	979	83.74	72.05	63.29	53.79

Source: WB Business Warehouse as of 12/21/13

* With IEG new methodology for evaluating projects, institutional development impact and sustainability are no longer rated separately.

Annex Table 7: Portfolio Status for Djibouti and comparators, FY09-13

Fiscal year	2009	2010	2011	2012	2013	Total
Djibouti						
# Proj	5	6	7	8	9	35
# Proj At Risk	1	1	6	4	3	15
% Proj At Risk	20.0	16.7	85.7	50.0	33.3	42.9
Net Comm Amt	44.1	55.4	65.3	52.5	67.5	284.8
Comm At Risk	10.0	10.0	53.5	14.4	29.1	117.1
% Commit at Risk	22.7	18.0	82.0	27.5	43.1	41.1
MENA						
# Proj	140	159	164	151	160	774
# Proj At Risk	29	40	44	54	47	214
% Proj At Risk	20.7	25.2	26.8	35.8	29.4	27.6
Net Comm Amt	6,779.4	8,720.5	9,450.1	8,532.3	9,082.0	42,564.3
Comm At Risk	1,204.0	1,913.2	1,478.6	1,839.9	1,817.0	8,252.7
% Commit at Risk	17.8	21.9	15.6	21.6	20.0	19.4
World						
# Proj	1,925	1,990	2,059	2,029	1,965	9,968
# Proj At Risk	386	410	382	387	414	1,979
% Proj At Risk	20.1	20.6	18.6	19.1	21.1	19.9
Net Comm Amt	135,706.0	162,975.3	171,755.3	173,706.1	176,206.6	820,349.2
Comm At Risk	20,857.8	28,963.1	23,850.0	24,465.0	40,805.6	138,941.5
% Commit at Risk	15.4	17.8	13.9	14.1	23.2	16.9

Source: WB Business Warehouse Table 3a.4 as of 12/21/13

Annex Table 8: Disbursement Ratio for Djibouti, FY09-13

Fiscal Year	2009	2010	2011	2012	2013	Overall Result
Djibouti						
Disbursement Ratio (%)	57.71	24.48	14.48	23.57	15.67	25.92
Inv Disb in FY	12.40	4.00	3.20	5.70	5.30	30.60
Inv Tot Undisb Begin FY	21.50	16.20	22.30	24.30	33.80	118.20
MENA						
Disbursement Ratio (%)	26.18	24.05	14.18	15.57	18.60	19.15
Inv Disb in FY	1,089.80	1,088.30	795.30	890.20	1,089.50	4,953.20
Inv Tot Undisb Begin FY	4,162.40	4,524.80	5,610.30	5,717.20	5,856.70	25,871.50
World						
Disbursement Ratio (%)	26.51	26.92	22.39	20.79	20.59	23.05
Inv Disb in FY	18,062.50	20,928.70	20,933.10	21,043.80	20,501.60	101,469.70
Inv Tot Undisb Begin FY	68,128.30	77,755.60	93,506.40	101,214.60	99,551.40	440,156.20

Source: BW disbursement ratio table as of 12/21/13

Annex Table 9: Net Disbursement and Charges for Djibouti, FY09-13

FY	Disb. Amt.	Repay Amt.	Net Amt.	Charges	Fees	Net Transfer
2009	10.40	1.58	8.81	-	1.11	7.70
2010	3.97	2.05	1.91	-	1.19	0.72
2011	3.08	2.75	0.34	-	1.14	-0.81
2012	5.73	3.09	2.64	-	1.19	1.45
Total (FY09-FY13)	23.18	9.47	13.71	-	4.64	9.07

Source: WB Loan Kiosk, Net Disbursement and Charges Report as of 12/21/2013

Annex Table 10: Total Net Disbursements of Official Development Assistance and Official Aid

Development Partners	2009	2010	2011	2012	2009-2012
Bilaterals					
Australia	..	..	0.19	0.17	0.36
Belgium	..	..	0.12	..	0.12
Canada	0.39	0.15	2.86	2.52	5.92
Denmark	..	0.01	..	..	0.01
France	41.97	46.22	43.96	40.44	172.59
Germany	1.12	0.23	6.80	2.66	10.81
Greece	0.53	0.01	0.02	0.02	0.58
Italy	12.02	0.44	0.47	4.66	17.59
Japan	28.82	37.98	16.57	24.84	108.21
Korea	..	0.27	0.39	1.16	1.82
Norway	0.80	0.33	..	..	1.13
Poland	..	0.01	..	..	0.01
Spain	2.67	-0.30	0.75	0.01	3.13
Sweden	0.20	0.07	..	0.07	0.34
Switzerland	0.46	0.16	0.70	0.34	1.66
United Kingdom	2.35	0.01	0.02	0.11	2.49
United States	6.35	13.29	16.53	9.17	45.34
<i>DAC Countries, Total</i>	97.68	98.88	89.38	86.17	319.15
Multilaterals					
AfDB	..	..	..	0.06	0.06
AfDF	20.39	3.97	6.57	0.84	31.77
Arab Fund (AFESD)	4.63	2.25	13.21	-1.37	18.72
EU Institutions	10.27	9.98	12.34	17.61	50.20
GAVI	0.27	0.25	0.35	1.32	2.19
GEF	2.06	..	0.18	0.76	3.00
Global Fund	0.75	1.53	2.77	1.02	6.07
IDA	6.78	-0.18	0.78	5.32	12.70
IFAD	0.76	0.72	2.22	1.37	5.07
IMF (Concessional Trust Funds)	-1.92	-3.33	4.41	17.74	16.90
Isl.Dev Bank	5.66	5.00	-1.48	3.80	12.98
OFID	-0.84	-0.15	-1.03	-1.03	-3.05
UNAIDS	0.09	0.29	0.46	0.35	1.19
UNDP	1.22	1.15	1.08	0.78	4.23
UNFPA	0.97	0.74	0.79	0.72	3.22
UNHCR	1.76	1.06	..	..	2.82
UNICEF	2.02	0.91	0.93	0.80	4.66
WFP	3.39	1.14	1.65	0.61	6.79
WHO	..	..	0.54	0.52	1.06
<i>Multilateral, Total</i>	58.26	25.33	45.77	51.22	180.58
Non-DAC Countries					
Kuwait (KFAED)	8.39	4.26	5.35	2.53	20.53
Russia	..	..	1.00	0.05	1.05
Thailand	..	0.02	..	..	0.02
Turkey	0.19	0.80	0.09	0.19	1.27
United Arab Emirates	2.19	2.95	0.16	6.44	11.74
<i>Non-DAC Countries, Total</i>	10.77	8.03	6.60	9.21	34.61
All Development Partners Total	166.71	132.24	141.75	146.60	534.34

Source: OECD DAC Online database as of December 21, 2013

Annex Table 11: Economic and Social Indicators for Djibouti, FY09-12

Series Name	Djibouti				Djibouti	MNA	World
	2009	2010	2011	2012	Average 2009-2012		
Growth and Inflation							
GDP growth (annual %)	5.0	3.5	4.5	4.8	4.4	4.0	1.7
GDP per capita growth (annual %)	3.5	2.0	2.9	3.2	2.9	2.0	0.5
GNI per capita, PPP (current international \$)	..	..	..	..		10,125.5	11,336.7
GNI per capita, Atlas method (current US\$)	..	..	..	..		6,540.6	9,328.2
Inflation, consumer prices (annual %)	1.7	4.0	4.4	7.9	4.5	4.1	3.8
Composition of GDP (%)							
Agriculture, value added (% of GDP)							
Industry, value added (% of GDP)	..	..	..	..			3.1
Services, etc., value added (% of GDP)	..	..	..	..			26.5
Gross fixed capital formation (% of GDP)	..	..	..	..			70.4
Gross domestic savings (% of GDP)	..	..	..	..		22.6	20.0
External Accounts	..	..	..	..		31.8	20.4
Exports of goods and services (% of GDP)	..	..	..	..		48.6	28.7
Imports of goods and services (% of GDP)	..	..	..	..		41.7	28.6
Current account balance (% of GDP)	-6.8	4.5	-13.9	..	-5.4		
External debt stocks (% of GNI)	79.8	..	..	..	79.8		
Total debt service (% of GNI)	..	..	..	..
Total reserves in months of imports	5.0	6.1	4.3	..	5.1	27.5	14.2
Fiscal Accounts ¹							
General government revenue (% of GDP)	37.0	35.5	34.5	34.5	35.4		
General government total expenditure (% of GDP)	41.6	36.0	35.2	37.2	37.5		
General government net lending/borrowing (% of GDP)	-4.6	-0.5	-0.7	-2.7	-2.1		
General government gross debt (% of GDP)	43.2	41.4	36.7	38.6	40.0		
Social Indicators							
Health							
Life expectancy at birth, total (years)	57.1	57.5	57.9	..	57.5	72.5	69.7
Immunization, DPT (% of children ages 12-23 months)	89.0	88.0	87.0	..	88.0	91.9	83.3
Improved sanitation facilities (% of population with access)	61.4	61.4	61.3	..	61.4	90.5	63.1
Improved water source (% of population with access)	91.2	92.3	92.5	..	92.0	90.4	88.4
Mortality rate, infant (per 1,000 live births)	74.2	73.0	71.8	..	73.0	24.9	38.0
Education							
School enrollment, preprimary (% gross)	2.9	..	4.3	3.7	3.6	26.5	48.4
School enrollment, primary (% gross)	54.5	..	59.1	61.1	58.2	104.6	106.7
School enrollment, secondary (% gross)	31.5	..	36.1	39.1	35.5	76.7	70.0
Population							
Population, total	0.8	0.8	0.8	0.9	0.8	384.3	6,925.7
Population growth (annual %)	1.4	1.5	1.5	1.5	1.5	2.0	1.2
Urban population (% of total)	77.0	77.0	77.1	77.2	77.0	62.7	51.8

Source: WB World Development Indicators for all indicators as of 08/08/2013

¹ WEO Data as of April 2013

Annex Table 12: Millennium Development Goals

	1990	1995	2000	2005	2012
Goal 1: Eradicate extreme poverty and hunger					
Employment to population ratio, 15+, total (%)	..	..	..	..	..
Employment to population ratio, ages 15-24, total (%)	..	..	..	..	..
GDP per person employed (constant 1990 PPP \$)	..	..	..	..	..
Income share held by lowest 20%	..	..	6	..	..
Malnutrition prevalence, weight for age (% of children under 5)	20	16	25	30	30
Poverty gap at \$1.25 a day (PPP) (%)	..	..	5	..	..
Poverty headcount ratio at \$1.25 a day (PPP) (% of population)	..	..	19	..	..
Vulnerable employment, total (% of total employment)	..	..	..	..	..
Goal 2: Achieve universal primary education					
Literacy rate, youth female (% of females ages 15-24)	..	..	..	..	..
Literacy rate, youth male (% of males ages 15-24)	..	..	..	..	..
Persistence to last grade of primary, total (% of cohort)	71	68	..	..	..
Primary completion rate, total (% of relevant age group)	28	30	26	32	65
Adjusted net enrollment rate, primary (% of primary school age children)	28	27	26	37	62
Goal 3: Promote gender equality and empower women					
Proportion of seats held by women in national parliaments (%)	..	..	0	11	14
Ratio of female to male primary enrollment (%)	74	78	74	82	90
Ratio of female to male secondary enrollment (%)	70	69	66	67	77
Ratio of female to male tertiary enrollment (%)	44	89	89	73	68
Share of women employed in the nonagricultural sector (% of total nonagricultural employment)	..	..	26.7	..	..
Goal 4: Reduce child mortality					
Immunization, measles (% of children ages 12-23 months)	85	41	50	65	83
Mortality rate, infant (per 1,000 live births)	93	88	85	78	66
Mortality rate, under-5 (per 1,000 live births)	119	113	108	99	81
Goal 5: Improve maternal health					
Adolescent fertility rate (births per 1,000 women ages 15-19)	68	45	28	24	19
Births attended by skilled health staff (% of total)	..	..	..	93	..
Contraceptive prevalence (% of women ages 15-49)	..	..	9	18	..
Maternal mortality ratio (modeled estimate, per 100,000 live births)	290	290	290	220	200
Pregnant women receiving prenatal care (%)	..	..	..	92	..
Unmet need for contraception (% of married women ages 15-49)	..	..	..	22	..
Goal 6: Combat HIV/AIDS, malaria, and other diseases					
Children with fever receiving antimalarial drugs (% of children under age 5 with fever)	..	..	..	10	..
Condom use, population ages 15-24, female (% of females ages 15-24)	..	..	..	..	..
Condom use, population ages 15-24, male (% of males ages 15-24)	..	..	..	..	..
Incidence of tuberculosis (per 100,000 people)	619	619	619	619	620
Prevalence of HIV, female (% ages 15-24)	..	..	..	..	0.3
Prevalence of HIV, male (% ages 15-24)	..	..	..	..	0.2
Prevalence of HIV, total (% of population ages 15-49)	0.1	0.7	2.1	2.4	1.2
Tuberculosis case detection rate (% , all forms)	57	80	89	65	65
Goal 7: Ensure environmental sustainability					
CO2 emissions (kg per PPP \$ of GDP)	0	0	0	0	..
CO2 emissions (metric tons per capita)	1	1	1	1	1
Forest area (% of land area)	0.2	0.2	0.2	0.2	0.2
Improved sanitation facilities (% of population with access)	62	62	62	62	61
Improved water source (% of population with access)	75	76	82	87	93
Marine protected areas (% of territorial waters)	0	0	0	0	0
Goal 8: Develop a global partnership for development					
Net ODA received per capita (current US\$)	351	159	100	95	167
Debt service (PPG and IMF only, % of exports of goods, services and primary income)	4	5	6	5	8
Internet users (per 100 people)	0	0	0.2	1	8.3
Mobile cellular subscriptions (per 100 people)	0	0	0	5	23
Telephone lines (per 100 people)	1	1	1	1	2
Other					
Fertility rate, total (births per woman)	6.1	5.4	4.5	4	3.5
GNI per capita, Atlas method (current US\$)	800	770	760	1030	..
GNI, Atlas method (current US\$) (billions)	0.5	0.5	0.6	0.8	..
Gross capital formation (% of GDP)	14.1	8.4	8.8	19	..
Life expectancy at birth, total (years)	57	57	57	58	61
Literacy rate, adult total (% of people ages 15 and above)	..	..	..	..	..
Population (Total) (billions)	0	0	0	0	0
Trade (% of GDP)	132.3	90.4	85.4	91.6	..

Source: World Development Indicators