



1. Project Data

Project ID P130328	Project Name DJ Crisis Response-SSN project		
Country Djibouti	Practice Area(Lead) Social Protection & Jobs		
L/C/TF Number(s) IDA-55440,IDA-58240,IDA-H7790	Closing Date (Original) 30-Sep-2016	Total Project Cost (USD) 13,388,420.81	
Bank Approval Date 12-Jun-2012	Closing Date (Actual) 30-Jun-2019		
	IBRD/IDA (USD)	Grants (USD)	
Original Commitment	5,000,000.00	0.00	
Revised Commitment	13,999,997.19	0.00	
Actual	13,388,420.81	0.00	
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2. Project Objectives and Components

a. Objectives

The project's development objectives, as laid out in the Financing Agreement dated August 21, 2012 (page 5), were “to (i) support the provision of short-term employment opportunities in community-based labor-intensive works for the poor and vulnerable, and (ii) support the improvement of nutrition practices among participating households focusing on pre-school children and pregnant/lactating women.”



The project's revised development objectives, as laid out in the Financing Agreement dated June 6, 2016 (page 5), were "to support a social safety net system for: (a) improved targeting; (b) improved nutrition practices; and (c) access to short term employment for the poor and vulnerable."

The revised statement of objectives simplified and expanded the project's scope. The revision did not materially change the project's objectives. The ICR and this ICRR interpret the original and revised objectives as substantively the same. A split rating is therefore not required.

b. Were the project objectives/key associated outcome targets revised during implementation?

Yes

Did the Board approve the revised objectives/key associated outcome targets?

Yes

Date of Board Approval

06-Jul-2016

c. Will a split evaluation be undertaken?

No

d. Components

The project's original and revised components provided both emergency and development support. They supported:

- activities meant to meet the immediate needs of Djibouti's poor through a cash-for-work scheme (workfare program) for working household members and a nutrition-based social assistance program for non-working and vulnerable members of the same household (children and pregnant or lactating women); and
- activities aimed at building the institutional framework for a national social safety net system that targets the poor and vulnerable and integrates the delivery of social assistance.

Component 1. Community-Based Labor-Intensive Works and Services (appraisal US\$2.1 million; additional financing 2014 US\$2.8 million) was to finance short-term employment through community works and services. Eligible community works focused on upgrading and maintaining small-scale community assets through labor-intensive construction, and services consisted of maintaining communities' environments (for example, paving footpaths, constructing or rehabilitating small containment walls for flood control, upgrading small pedestrian bridges and stairs, cleaning streets, collecting garbage, maintaining feeder roads, producing intermediate inputs for infrastructure works, and rehabilitating community infrastructure). The component was also to provide support to train workfare participants to increase their manual labor skills and life-related skills.

Component 2. Nutrition-Based Social Assistance to Support Investments in Human Capital (appraisal US\$1.3 million, additional financing 2014 US\$0.3 million) was to finance community-based activities targeting pregnant women and lactating mothers and children up to two years of age (first 1,000



days). The activities were meant to sensitize, train, and provide beneficiary households with nutrition-related knowledge and resources so that their nutrition-related behaviors and, ultimately, nutrition would improve. The activities included education and behavior change communication on good nutrition practices, child care practices, education, health and hygiene promotion, handwashing (especially before eating, after defecation, before feeding a child), cooking demonstrations, growth monitoring, personalized counseling, micronutrient supplements for children 6-24 months old, food supplementation during the lean season for all children 6-24 months old, referrals to health centers, early identification of pregnancy and promotion of health seeking behavior (for example, ante-natal visits, use of iron and folic acids, and vaccinations), and use of key micronutrients.

Component 3. Targeting, Monitoring, and Evaluation (appraisal US\$1.2 million, additional financing 2014 US\$0.8 million) was to support developing a national targeting system and improving monitoring and evaluation capacity. Activities financed the development of a unified national registry of beneficiaries and an integrated project monitoring system.

Component 4. Project Management and Administration (appraisal US\$0.5 million; additional financing 2014 US\$0.2 million; additional financing 2016 US\$0.4; actual US\$1.1 million) was to provide support to the Djibouti Agency for Social Development (*Agence Djiboutienne de Développement Social, ADDS*) to manage, implement, and coordinate the project.

Revised Component (level 2 restructuring and additional financing, December 2014)

Component 3. Targeting, Monitoring, and Evaluation (appraisal US\$1.2 million, additional financing 2014 US\$0.8 million) was to support improving the government's ability to monitor project progress and performance and target beneficiaries by developing a national targeting system. The project financed (i) development of a social registry of potential beneficiaries of all social programs, including project beneficiaries, housed in the Social Solidarity Secretary of State, and (ii) consolidation of an integrated project monitoring system located at ADDS. The revision clarified the conceptualization of the social registry, which would provide the building blocks for the government's proposed national identity registry, and introduced the proposed modular design of the social registry, which included modules that could be designed and piloted during the (extended) project period as well as modules for the scaled-up national identify registry.

Revised Components (level 1 restructuring and additional financing, June 2016)

In 2016, the project's components were consolidated, its activities changed, and its scope modified. These changes were based on (i) lessons learned during implementation; (ii) Djibouti's new cash transfer program; and (iii) adoption of a community-based approach to preventing malnutrition (Project Paper on the Proposed Additional Second Credit and Restructuring 2016, p. 32).

Component 1. Nutrition and workfare activities (appraisal US\$3.3 million; additional financing 2014 US\$3.1 million; additional financing 2016 US\$3.7 million; actual US\$10.1 million) was to support continued implementation, expansion, and adaptation of targeted nutrition-related social assistance and community-based work, skill, and service activities for poor and vulnerable households with pregnant women and preschool-aged children, and the definition of preschool-aged was extended from two years to



five years old in all intervention areas. Nutrition activities were (i) expanded into areas with no workfare program, (ii) coordinated with the new cash transfer program, and (iii) significantly scaled up inside and outside of Djibouti Ville. Cross-sectoral collaboration and community structures established under other World Bank projects were leveraged to create sustainable structures to prevent malnourishment. The workfare program (i) was discontinued in high poverty areas inside Djibouti Ville covered by the social safety net (new cash transfer program), and (ii) was expanded in high poverty areas outside Djibouti Ville, such as rural areas with extreme poverty, food insecurity, and high levels of malnutrition. Its benefit structure was modified to reflect the supplement families received under the new cash transfer program. Basic skill training continued, but the activity focused more on linking beneficiaries to income generation activities in other projects.

Component 2. Foundation of the social safety net system (additional financing 2016 US\$2.7 million; actual US\$2.7 million) continued to support the design and implementation of Djibouti's social registry, to improve identifying, targeting, and delivering assistance to beneficiaries and coordinating social protection programs to reduce costs. The revised component (formerly Targeting, Monitoring, and Evaluation) (i) helped the government formulate a national vision for social protection and develop a social protection strategy beyond 2017; (ii) strengthened design features of social interventions, in particular the national cash transfer program; and (iii) supported further institutional strengthening, capacity building, and enhanced coordination across stakeholders.

e. Comments on Project Cost, Financing, Borrower Contribution, and Dates

Project Costs, Financing, and Borrower Contribution: At appraisal, total project costs were SDR 3.5 million (US\$5 million equivalent) financed by a grant from the IDA Crisis Response Window. At closing, total project costs (with two additional financings) were SDR 13.4 million (US\$14 million equivalent). No borrower contribution was expected. The project fully disbursed all funds (SDR 9.5 million). The difference between the total commitment (US\$14 million) and disbursements was due to exchange rate fluctuations between project preparation and additional financings.

Dates: The project was approved May 23, 2012, became effective on January 10, 2013, and closed on June 30, 2019. The project's closing date was extended twice, for a total of 33 months.

- On December 8, 2014, the project underwent a level 2 restructuring. Additional financing of US\$5 million supported increasing the number of beneficiaries and geographic areas receiving the community-based labor and nutrition safety net services; expanding and enhancing the social registry (e.g., introducing a modular design and piloting initial modules), laying the foundation for the government's national identify registry that would collect socio-economic data and biometric data, among other things; restructuring the results framework "for better focus, clarity and ease of measurement, and target values will be adjusted to encompass the expanded scope" (Project Paper for Additional Financing for the Social Safety Net Project, 2014, p. 9). The closing date was extended by 24 months to September 30, 2016 to allow time to implement expanded activities associated with the project's expanded geographic, beneficiary, and social registry coverage; for example, nutrition-related activities expanded to selected villages in three additional regions for a total of six regions (Balbala area, Dikhil Ville, Obock Ville, Tadjourah, Ali Sabieh, and Arta).
- On June 6, 2016, the project received additional financing of US\$4 million and underwent a level 1 restructuring. The project's development objectives were revised, activities were added, and components were consolidated. The additional financing supported scaling up both the nutrition and



workfare activities and expanding the project's geographic coverage to increase the number of beneficiaries receiving support; implementing the social registry; and strengthening the social safety net system. The closing date was extended by nine months to June 30, 2019 to allow additional time to implement another expansion of coverage (nutrition activities expanded both inside and outside of Djibouti Ville).

3. Relevance of Objectives

Rationale

The project provided emergency support to Djibouti in accordance with OP/BP 8.00. The project's objectives were meant to preserve human capital of vulnerable groups by providing new short-term employment opportunities for the poor and vulnerable; preventing chronic malnutrition in the first 1,000 days; addressing chronic and acute malnutrition in children under the age of five; providing skills training to poor and vulnerable individuals to enhance employment opportunities; and reducing the risks of associated with crises by establishing a national registry system of poor and vulnerable households.

The project was highly aligned with relevant government strategies at approval and at closure. At approval, the project was aligned with the government's strategic priorities for growth and poverty reduction as laid out in its Poverty Reduction Strategy Paper, the National Initiative for Social Development: (i) accelerate growth while maintaining macroeconomic stability; (ii) achieve universal access to basic services and the development of human capital; (iii) promote harmonious and balanced local development that preserves the environment; and (iv) improve governance and capacity building. Improvements in human capital focused on access to basic services for women and children and tackling unemployment through labor intensive activities, among other activities (Country Assistance Strategy, 2009, p. 11). The project promoted human capital development by providing skills training as part of the cash-for-work program and supporting improvements in nutrition practices of pregnant women, mothers, and very young children. The project also sought to build capacity to increase and sustain human capital development through a social registry that would identify vulnerable households and integrate and coordinate services provided to them.

The project was highly aligned with the World Bank's country strategies at approval and closure. The Country Assistance Strategy (CAS) FY09-11 focused on three themes (growth, human development and access to services, and governance and public sector management). Under the human development theme, the World Bank's strategy specifically aimed to maintain dialogue with the government of Djibouti to strengthen its social protection and direct support to poor people to (i) mitigate the vulnerability of the poor, including against natural disasters impacting food security; (ii) improve the institutional framework for social protection; (iii) identify the extent and causes of poverty; and (iv) propose a strategy to ameliorate its effects. (World Bank 2009, p. 24). Toward the end of the CAS period, in 2011, a severe drought devastated the Horn of Africa countries of Djibouti, Ethiopia, Kenya, and Somalia. The social safety net project was prepared and approved to directly respond to a crisis impacting already high levels of malnutrition. The project was part of the World Bank's regional response to the 2011 drought, which allocated a US\$250 million grant from the IDA Crisis Response Window to the Drought Emergency in the Horn of Africa. For Djibouti, 2011 was the fourth consecutive drought year, and drought had already led to loss of livestock, failed crops, and increased malnutrition. The regional drought impacted Djibouti through rising food prices,



which pushed vulnerable households over the poverty threshold. The World Bank's response was critical given the lack of donor support for social assistance.

At project closure, Djibouti's level of human development continued to stymie its overall development. The government's long-term development plan (Vision 2035) identified three cross-cutting themes—promoting women's conditions and reducing gender inequality, supporting youth, and protecting the environment—and five key development challenges (peace and national unity, good governance, economic diversification and private sector-led growth, investment in human capital, and regional integration). The Country Partnership Strategy (CPS) FY14-17 continued to support human development to end extreme poverty and increase shared prosperity by (i) reducing vulnerability and (ii) strengthening the business environment. The World Bank's support for reducing vulnerabilities explicitly aimed to strengthen Djibouti's weak social protection system, including targeting (World Bank 2014, pp. 8-10). The Performance and Learning Review (PLR) of the CPS noted (World Bank 2016, 4) that the nature of Djibouti's increasing economic growth—capital-intensive and public-sector-led—did not provide employment for unskilled workers or reduce poverty. Extreme poverty and food insecurity in Djibouti's total population remained high (20 percent) with significant variation by location (44 percent in rural areas). The project's revised objectives statement was fully aligned with the adjusted CPS outlined in the PLR that focused on promoting a national vision for social protection, creating and implementing a social registry to improve service delivery and to coordinate delivery of multiple social assistance programs, and laying the foundation for a national cash transfer program (World Bank 2016, p. 11). The Systematic Country Diagnostic (SCD) identified Djibouti's low human capital outcomes as a barrier to economic transformation. The SCD highlighted the importance of transforming human capital, especially improving child nutrition and growth, and the importance of multisectoral approaches to reduce stunting and combining nutrition-specific interventions with nutrition-sensitive interventions (World Bank 2018, p. 5), which is the project's underlying design.

Rating

High

4. Achievement of Objectives (Efficacy)

OBJECTIVE 1

Objective

Support the provision of short-term employment opportunities in community-based labor-intensive works for the poor and vulnerable (original objective) / Support a social safety net system for access to short-term employment for the poor and vulnerable (revised objective)

Rationale

The project was to provide poor and vulnerable households with immediate relief through a temporary increase in household income. The cash-for-work program was meant to address households' immediate needs due to a rise in food prices caused a recent drought, to reduce food insecurity, to smooth consumption over time, and to improve the communities' environments. The work program targeted improvements in the households' communities. Community work priorities were chosen through a participatory approach. Skills



training was also provided based on the assumption that it would create more employment opportunities for participants. On-the-job skills training was primarily related to handicrafts. Shortcomings in the theory of change were the lack of strong arrangements to ensure a market for the goods produced and the low quality of the handicrafts produced. This did not affect short-term employment generation or the emergency income assistance but the project missed the opportunity to provide sustainable income generation.

Outputs

- 671,820 person days of labor-intensive community work was provided to able-bodied members of poor and vulnerable households, exceeding the target of 600,000.
- 631,626,820 Djiboutian Francs (DJF) were paid to beneficiaries (cash-for-work compensation), exceeding the target of 570,000,000 DJF.
- 2,500 beneficiaries were trained in work-related skills or entrepreneurship, such as basic construction techniques and crafts or savings groups and microfinance, exceeding the target of 2,000.

Outcomes

The ICR reported interim results from an impact evaluation (page 15 and 41) of the cash-for-work program. The results suggest that:

- the cash-for-work program had a significant short-term effect on the income of participating households (increased short-term household income by 40 percent); and
- the program had a significant effect on the employment of women and increased female labor force participation from 21 to 75 percent, with no intra-household substitution effect of labor supply.

Rating
High

OBJECTIVE 2

Objective

Support the improvement of nutrition practices among participating households focusing on pre-school children and pregnant/lactating women (original objective) / Support a social safety net system for improved nutrition practices (revised objective)

Rationale

The underlying assumption was that nutrition sessions would foster good-practice nutrition behaviors, and the knowledge gained would ensure that the cash transfer was allocated to goods and services related to improved nutrition. The project provided information, training, and sensitization programs to pregnant women and mothers of infants to improve their awareness of good nutrition and care practices and, ultimately, to change households' behaviors with respect to nutrition, nutrition-related, and health-related practices. The



project provided tailored sessions and messages on prenatal care and nutrition to promote good nutrition, health, and hygiene behaviors. The ICR (p. 17) reported that a behavioral approach was used. Along with health facilitators, the project relied on a network of *mère conseillères*, women respected in their communities, to deliver nutrition and health messages and information to beneficiary women, such as the benefits of diversified diets; how to prepare meals; the need for prenatal care and nutritional supplements for pregnant women; counseling mothers on breastfeeding, vaccination, deworming, and hygiene; measuring children's height and weight; what constitutes a severely underweight child; and when to go to a health center.

Two shortcomings in the project's theory of change are of note: (i) its focus on demand-side barriers to nutrition with insufficient attention to supply-side constraints, such as limited health facilities or health practitioners, and (ii) underestimating the constraints of collecting and reporting data from nutrition sessions. A missed opportunity was the lack of stimulation activities during nutrition sessions.

Outputs

- Nutrition modules and materials to help women gain nutrition knowledge were designed, meeting the target.
- 7,370 nutrition sessions were organized (no target provided).
- 61 percent of nutrition sessions were entered into the management information system, falling short of the 80 percent target.
- 23,110 pregnant or lactating women, adolescent girls, and children under the age of five were reached by basic nutrition services, exceeding the 15,000 target.
- 168,483 nutritional supplement packets were provided to children under five years of age (Plumpy-Doz) (no target provided).
- 22,040 micronutrient packets were distributed (no target provided).

Outcomes

The data suggest improved knowledge of good nutritional practices among participating women.

- 70.1 percent of pregnant and/or nursing women have a diversified diet, an increase from 23.3 percent at baseline in 2013, and exceeding the 60 percent target.
- 71 percent of children aged 6-24 months have a diversified diet, an increase from 32.1 percent at baseline in 2013, and exceeding the target of 55 percent.
- 51 percent of women who participated in nutrition sessions exclusively breastfed for the first six months, an increase from 14.7 percent at baseline in 2013, and exceeding the target of 40 percent.
- 83.2 percent of mothers who participated in nutrition sessions had at least three prenatal consultations during their last pregnancy, an increase from 78 percent at baseline in 2013, and falling short of the original target of 90 percent and the revised target of 85 percent.



Note that these results reflect information from only 61 percent of the 7,370 nutrition sessions organized, and missing data are primarily from poorer, more rural areas.

To compensate for these data limitations, the ICR (p. 15) reported interim results from an impact evaluation. The results suggest that among nutrition program participants there were “considerable” differences in behaviors, such as:

- the proportion of women’s youngest children eating a diversified diet was higher (76.3 percent versus 69.4 percent) and this effect persisted in the medium term, suggesting that mothers and caregivers sustained the practices promoted by the project;
- the proportion of infants exclusively breastfed (0-six months) was higher;
- the proportion of children eating diverse foods (dietary diversity) was higher;
- the proportion of mothers eating diverse foods (dietary diversity) was higher; and
- the proportion of pregnant women attending three or four pre-natal consultations was higher.

There is a risk that some of the nutrition outcomes will not be sustained, particularly those that depended on the short-term income gains. The impact evaluation found only a short-term income effect on dietary diversity for children under five (see below), although the effect for the youngest child in a household persisted in the medium term

Rating

Substantial

OBJECTIVE 3

Objective

Support a social safety net system for improved targeting (revised objective), sustaining the original objectives' focus on "the poor and vulnerable" and "pre-school children and pregnant/lactating women"

Rationale

The theory of change assumed that support for information technology and technical assistance would lead to institutional strengthening and therefore capacity for improved program targeting. Support for improved targeting helped ensure that the poor and vulnerable received project support.

Outputs

- The capacity of the State Secretariat for Social Affairs (*Secrétariat d'Etat chargé des Affaires Sociales, SEAS*) to identify and target beneficiaries and to design and implement a national safety net program was strengthened, meeting the target.
- A proxy-means test that estimates a poverty score for every household was developed (in lieu of a household survey, no household income data exist), meeting the target.
- The information technology infrastructure needed for the social registry was developed, meeting the target.



- A social registry, which included biometric information on individuals to ensure proper verification and to avoid duplication of benefits, was developed, meeting the target.
- 62,752 households were registered in the social registry with a unique household identity number (administered the proxy-means test questionnaire to 62,752 households), exceeding the 20,000 target.
- 126,741 individuals were registered in the social registry with a unique social identification number, exceeding the target of 100,000.

Intermediate Outcomes

- 11,484 individuals benefited from the safety net programs, exceeding the target of 8,000.
- 10,800 women benefited from the safety net programs, exceeding the target of 5,000.
- 23,110 pregnant women, lactating women, adolescent girls, and/or children under the age of five were reached by basic nutrition services, exceeding the target of 15,000.
- 73.3 percent of the of the workfare program beneficiaries were poor (below the 40.8 percent poverty line), exceeding the target of 65 percent.
- Nine government programs use the social registry to target beneficiaries.

There were no outcomes associated with this objective. Improved targeting is a necessary input to achieving higher-level outcomes (changes in behavior), such as improved nutrition practices. Output and intermediate outcome data were provided in numbers and percentages. Although Djibouti is a small country, , it would have been useful to understand what percentage of Djibouti's poor and vulnerable benefitted from this project.

Rating
Substantial

OVERALL EFFICACY

Rationale

The project exceeded output and intermediate outcome targets for provision of short-term labor opportunities and improved nutrition practices, and interim results from an impact evaluation indicate high achievement of outcomes. Project targets were exceeded for the objective to improve program targeting, but the indicators did not provide information on coverage. Given minor shortcomings in achievement of two of the three objectives, overall efficacy is rated Substantial.



Overall Efficacy Rating

Substantial

5. Efficiency

There was no economic analysis conducted at appraisal due to the accelerated preparation of the emergency project (in line with OP/BP 8.00—Rapid Response to Crises and Emergencies) as well as limited and unreliable socioeconomic data. Both the Emergency Project Paper (p. 44) and ICR (p. 19) suggested four potential economic returns from the project: (i) increased income for beneficiary households participating in the cash-for-work program; (ii) increased beneficiary households' future earning potential through expanded employment opportunities; (iii) improved health and nutrition if beneficiary households' incomes increase (no substitution effect) and expenditures on food (a normal good) increase combined with improved dietary diversity, nutritional supplements, and preventive health care; and (iv) improved targeting and accountability of government social assistance expenditures due to support for the social registry.

There is an abundance of research that suggests successful efforts to preserve human capital are cost-effective and have high economic rates of return (Emergency Project Paper 2012, p. 7). Evidence from the interim impact evaluation combined with the cross-disciplinary evidence base on the high private and social rates of returns and cost-effectiveness of investments in pregnant women and young children's health and nutrition—the first 1,000 days—suggest the project was cost-effective.

The project's implementing agency, ADDS, had the capacity to manage the financial reporting, procurement policies, and safeguards policies related to World Bank-financed projects. ADDS was the implementing agency for the predecessor pilot Employment and Human Capital Safety Net project (2010-2014, US\$3.64 million, financed by the Japan Social Development Fund (JSDF)), and the same implementation arrangements were used to implement this project. The knowledge, capacity, and lessons learned increased implementation efficiency in this project. For example, both the SEAS and ADDS had sufficient capacity manage the project's activities and the ability to manage and correct implementation bottlenecks on an ongoing basis (ICR, p. 5). Implementation efficiency was also enhanced through continuous technical support to enhance implementation capacity, including technical assistance and training for high-level government officials, to build support for the intersectoral coordination and collaboration required in early nutrition interventions (ICR, p. 22).

The social registry provided benefits that extended beyond this project. Improved targeting based on the newly created social registry is being used for nine government programs, including the universal health care program, the provision of social housing, the provision of micro-finance, and the national cash transfer program.

Moderate shortcomings in efficiency included: (i) skills training for beneficiaries of the workfare program was costly to implement and was significantly delayed; (ii) income generation was unsustainable given the lack of strong arrangements to ensure a market for the goods produced and the low quality of the handicrafts produced; and (iii) delays in disbursing funds for the cash-for-work and nutrition-based social assistance programs due to implementation delays in the JSDF.

Efficiency Rating

Substantial



a. If available, enter the Economic Rate of Return (ERR) and/or Financial Rate of Return (FRR) at appraisal and the re-estimated value at evaluation:

	Rate Available?	Point value (%)	*Coverage/Scope (%)
Appraisal		0	0 <input type="checkbox"/> Not Applicable
ICR Estimate		0	0 <input type="checkbox"/> Not Applicable

* Refers to percent of total project cost for which ERR/FRR was calculated.

6. Outcome

Relevance of the project objectives is rated high. Achievement of the objective to increase access to short-term employment for the poor and vulnerable is rated high. The objective to improve nutrition practices is rated substantial. The objective to improve targeting is rated substantial given the lack of outcome indicators, an explanation of how targeting would help lead to changes in behaviors, or the percent of the target population covered by the project. Overall efficacy is rated substantial. Efficiency is rated substantial. These ratings indicate that there were no meaningful shortcomings in the project's preparation and implementation, resulting in an Outcome rating of Satisfactory.

a. Outcome Rating

Satisfactory

7. Risk to Development Outcome

The project produced sustainable outcomes, including a cost-effective targeting mechanism and a social registry. The social registry provided benefits that extended beyond this project. Improved targeting based on the newly created social registry is being used for nine government programs (see Section 5). The project supported systems and capacity building that led to the government's national safety net program, which was rolled out in 2017 is being supported by both the International Development Agency and the European Union. Evidence from the impact evaluation suggests medium-term impacts for the youngest children of participating mothers; the follow-on project continues to support sustainable outcomes through behavior change. The project missed the opportunity to provide sustainable income generation through the workfare program, which could impact the ability to maintain key nutritional activities, such as the ability to purchase nutritionally diverse foods.

8. Assessment of Bank Performance



a. Quality-at-Entry

The project was prepared under OP/BP 8.00 Guidelines with no exceptions to World Bank policies. It was an ambitious project for an emergency operation, including both emergency and development elements in its design. The project's design--and therefore, its theory of change--was based on a pilot project (the Employment and Human Capital Safety Net Project, 2010-2014, financed through a grant by JSDF). The World Bank team built on its dialogue with the government and the conceptualized pilot project which included the social registry (with biometric data), a new targeting mechanism, and social assistance that combined public works with nutrition sessions. The World Bank team provided pragmatic support to the government of Djibouti by including the public works component, which provided the government and communities with tangible and needed outputs (community civil works chosen through a participatory approach, such as rehabilitating roads, paving footpaths, building pedestrian bridges, garbage collection). It also provided a way to distribute money up-front while the systems for a more comprehensive safety net system were being built (e.g., the social registry). The project was originally designed as a short, small project that leveraged nutrition sessions to change critical behaviors associated with malnutrition, well-known and evidence-based techniques targeting the first 1,000 days. The design of the emergency project provided an easy transition to a longer-term approach to social protection. The World Bank's technical assistance supported the government's new national social protection strategy, the roll-out of the national safety net program (cash transfer program), and the move to a more comprehensive human capital approach in the follow-on project. There remained, however, the minor shortcomings noted earlier in monitoring and evaluation and the theory of change.

Quality-at-Entry Rating

Satisfactory

b. Quality of supervision

The World Bank task team provided continuous technical assistance through regular supervision missions, just-in-time assistance, continuous dialogue, and system strengthening. The team identified issues with monitoring and evaluation and proactively provided solutions (see Section 9).

Quality of Supervision Rating

Satisfactory

Overall Bank Performance Rating

Satisfactory

9. M&E Design, Implementation, & Utilization

a. M&E Design



There were moderate shortcomings in M&E design. Foremost, M&E design was information and communication technology-based and relied on local nongovernmental organizations for implementation. Overall, the project's M&E design was not aligned with the capacity of the country.

The results framework had several shortcomings. For example: (i) the theory of change for the workfare component was poorly articulated, with no output or outcome indicator to determine if the immediate social assistance achieved its implicit objective of smoothing household consumption and reducing food insecurity and did not capture any data on public works, such as how subprojects improved the welfare of communities; (ii) several output and outcome indicators for the nutrition objective were not well defined, making measurement difficult; and (iii) the results framework for the restated objective to "improve targeting" was not linked to higher-order outcomes.

b. M&E Implementation

M&E design relied on local nongovernmental organizations for implementation. There were significant challenges and delays in the collection of anthropometric data given limited local capacity and technological barriers to smartphone data collection. Paper reporting was often used even with modifications that allowed off-line data entry (given weak or non-existent internet connections). As the project expanded its scope into more rural and remote areas, these limitations led to the low capture of nutrition session data.

The shortcomings in M&E and the results framework were somewhat mitigated by the redefining of indicators (at restructuring); conducting separate, supplemental and representative surveys to collect data on key indicators, such as dietary diversity and exclusive breastfeeding (Task Team Leader interview, June 23, 2020); and adding an impact evaluation to assess the project's impact (as reported in the efficacy section).

c. M&E Utilization

The impact evaluation provided the government with evidence of the project's effectiveness. It found significant and positive differences in behaviors between project participants and non-participants, behaviors that are critical to good nutrition, such as hygiene, dietary diversification, and prenatal consultations.

The social registry, which includes socioeconomic, demographic, and biometric data, is being used by several government programs including its COVID-19 response (TTL interview, June 23, 2020).

The project's M&E design and implementation contained significant shortcomings, but the proactive measures by the project team to collect additional data (using surveys) and to conduct an impact evaluation sufficiently compensated to merit an overall M&E rating of Substantial.

M&E Quality Rating

Substantial



10. Other Issues

a. Safeguards

Environment. The ICR (page 26) reported that the project complied with the World Bank's environmental safeguard requirements. The project was classified as Category B (partial assessment) given that it financed subprojects for small-scale, community-based civil works. OP/BP 4.01 (environmental assessment) was triggered, and an Environmental and Social Screening Assessment Framework (ESSAF) was prepared. The ESSAF was updated at restructuring to cover the additional geographic areas impacted by the project and new subprojects in the catalogue. Triggers, categories, and all other safeguard issues remained unchanged.

Social. The ICR (page 26) reported that the project complied with World Bank social safeguard policies. The updated ESSAF also reinforced social safeguards. The public works supported by the project were implemented on public land, and therefore there was no Involuntary land acquisition or involuntary resettlement, or loss of habitat or access to legally designated parks and protected areas. The ICR (p. 26) did note that the availability of first aid kits on project sites was not in compliance with the safeguard policies, and there were issues with the preparation of environmental and social management plans for the sites, but these issues were dealt with in a timely manner.

b. Fiduciary Compliance

Financial. The ICR reported no fiduciary issues. The implementing agency was familiar with World Bank procedures. The project used the same implementing agency (ADDS) and the same implementation framework as the pilot project. Financial management was rated satisfactory at appraisal, but financial risk was rated substantial. The second additional financing reported delays in financial reporting, system customization, procurement, and contract management as well as issues in record keeping (ICR, p. 22). The ICR reported that the required Interim Financial Reports and the annual project financial statements were prepared and submitted in a timely manner in compliance with World Bank guidelines.

Procurement. Procurement capacity was strengthened during project implementation, which included hiring consultants. Procurement was effectively managed given prior experience and the additional capacity. There were minor issues with procurement processing delays, but these were resolved quickly.

c. Unintended impacts (Positive or Negative)

The project contributed to improvement in the welfare and empowerment of women in Djibouti. The cash for work program was tailored to the specific circumstances of women (for example, practical accommodations, such as work hours and work activities targeting women (e.g., street cleaning and handicrafts)). These adaptations likely contributed to the predominantly female beneficiary populations—94 percent of beneficiaries of the safety nets programs were women (10,800 beneficiaries). The project also promoted positive attitudes to women participating in public works; agency, voice, and empowerment were increased through participation in household and community decision-making and bank accounts. The ICR



(p. 20) reported that a process evaluation found that 96 percent of the women were empowered to decide how to spend the money they earned, and the majority of it invested in child nutrition and health.

d. Other

11. Ratings

Ratings	ICR	IEG	Reason for Disagreements/Comment
Outcome	Satisfactory	Satisfactory	
Bank Performance	Satisfactory	Satisfactory	
Quality of M&E	Modest	Substantial	M&E arrangements outside the project's M&E framework mitigated the shortcomings in the project's M&E design and implementation.
Quality of ICR	---	Substantial	

12. Lessons

The lessons learned are drawn from the ICR and adapted by IEG.

- It is possible to design and implement an ambitious project in the context of crises, bridging the gap between short-term emergency assistance and longer-term development. The project was designed under the IDA Crisis Response Window but contained both emergency and development aspects. Activities combined a short-term, quick response to a drought to prevent the loss of human life and to preserve human capital with medium-term activities targeting sustainable changes in nutritional practices through behavior change. Project activities also laid the foundation for providing a well-targeted national safety net system.
- Community-based nutrition promotion can be a powerful instrument to help improve health and nutrition practices. This community approach combined targeted communication, leader role models (*mère conseillères*), and positive reinforcement of good behaviors by bringing mothers in a community together through peer-to-peer interactions. The sessions provided tailored instruction on pre-natal care and for mothers with children under two years of age (up to the age of five years in rural areas). The sessions provided a platform to detect potential stunting of participating children and to provide a home visit for more individualized counseling and a referral to a health clinic if necessary.
- Targeting demand-side changes in behavior requires sufficient supply-side services. Inadequate or missing health facilities or services can constrain up-take of positive behavior changes. Needed investments on the supply-side include those in education, health, and water and sanitation.



13. Assessment Recommended?

Yes

Please Explain

The project was innovative and produced quick results. It was the first social protection project in Djibouti, an emergency response with developmental aspects, and it laid the foundation for roll-out of a national cash transfer program.

14. Comments on Quality of ICR

The ICR focused on outcomes but missed the opportunity to highlight that the objectives were primarily pitched at the output level and that the overall theory of change linked these outputs—in particular, improved targeting—to improving the nutritional practices of poor and vulnerable households. Analysis of attribution was adequate and triangulated with results from an impact evaluation. The ICR was candid in reporting “what worked” and “what didn’t work” during design and implementation. The outcome rating reported in the ICR was not correctly derived from the constituent ratings (it focused on achievement of objectives – efficacy – and did not mention relevance or efficiency). The lessons were evidence-based and reflected in the text of the ICR. Overall, the ICR is well written and well organized, though there were duplications, including in the lessons.

a. Quality of ICR Rating

Substantial