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UNICEF Djibouti Flash Update #2

Refugee influx from Yemen
21 September 2026

At Markazi refugee village in Obock, Djibouti, children have access to safe water through a partnership between Djibouti's regional authorities, UNICEF and the Djiboutian Red Crescent. ©UNICEF Djibouti/Neuvième

HIGHLIGHTS

- As of 18 September 2026, according to the Ministry of Social Affairs and Solidarity, just over 3,100 people have arrived in Djibouti from Yemen. Nearly half of them are children, including 523 children aged five and under.
- The pace of arrivals has slowed down since 16 September, reportedly due to fuel shortages in Yemen. However, authorities anticipate a possible new surge, and partners continue to plan for up to 10,000 people, in line with the Government appeal launched on 16 September.
- UNICEF and the Djiboutian Red Crescent (CRD) have established five water points in Markazi village, with a total storage capacity of 37 m³. The response also included the installation of 10 emergency latrines reserved for women and girls and the connection of the Markazi health post to the water supply.
- Public health risks remain high. Contributing factors include overcrowding, confirmed scabies cases and a high risk of waterborne disease. Health authorities report a high proportion of acutely malnourished and zero-dose children among those screened at the Markazi health post.
- One unaccompanied child has been identified to date. He has been placed in a vetted family-based care arrangement, and the family was jointly assessed by UNICEF and the Ministry of Women and Family (MFF).
- **UNICEF requires USD 3 million to respond to the needs of up to 10,000 people over 6 months.**

SITUATION UPDATE

Following the sharp acceleration of arrivals between 11 and 14 September, the rate of new arrivals has declined, reportedly due to fuel shortages in Yemen limiting sea crossings. As of 18 September, according to the Ministry of Social Affairs and Solidarity (MASS), 3,106 people have arrived from Yemen. This includes refugees identified through ongoing door-to-door registration in host communities. Nearly half of them are children, including 523 children aged five and under.

The situation nevertheless remains fluid. According to the Prefecture, a significant number of Yemenis are gathered in Al Arah, the closest point of the Yemeni coast, and arrivals could resume rapidly should fuel become available. Partners therefore continue to plan for up to 10,000 people, in line with the Government appeal launched on 16 September.

Living conditions in Markazi remain especially harsh for children. Many families, including those with young children, continue to stay in the overcrowded transit hangar because of high temperatures in the tents. This increases the risk of waterborne diseases and skin infections such as scabies. Health authorities report a high proportion of acutely malnourished and zero-dose children among those screened at the Markazi health post.

In parallel, around 600 migrants wishing to travel to Yemen are waiting in Obock, and at least 120 Ethiopian migrants have returned from Yemen through Djibouti in recent days. Their presence adds pressure on already limited services in the region.

The Government of Djibouti has been at the forefront of the response since the outset of the arrivals, coordinating the response and providing life-saving assistance.

On 19 September 2026, UNICEF Djibouti, led by Representative Ms. Ramatou Touré, joined national authorities and partners in Obock to assess the urgent needs of newly arrived Yemeni refugees and reinforce the coordinated response. The situation of unaccompanied and separated children is of particular concern, as timely action can make the difference between risk and safety.

HUMANITARIAN NEEDS

Markazi refugee village was already facing significant service gaps before the influx. The village hosted around 3,000 refugees, mainly Eritreans and Yemenis displaced during previous crises, with major gaps in shelter, water supply, sanitation. The arrival of more than 3,000 additional people in less than eight days has doubled the site's population. While the immediate focus is on newly arrived families, the response must address the needs of the whole Markazi community, both to meet the needs of all children living on the site and to prevent tensions between refugee groups over access to assistance and services.

Shelter remains the most urgent need, more than 600 families are still without adequate shelter, many of them with young children. Additional tents are expected from partners, and temporary shelter solutions using plastic sheeting are being designed, but the gap remains significant.

Water storage capacity at Markazi has increased, but the water supply mechanism needs to be reinforced to ensure a continuous and sufficient supply, pending a more durable solution through the extension of the water network. Sanitation facilities also need to be scaled up to meet minimum standards for the expanded site population, including safety and accessibility for women and girls.

Health and nutrition needs are rising, with children at the center of concern. Priorities are the screening and treatment of children with acute malnutrition, alongside catch-up vaccination for zero-dose and under-vaccinated children, in particular against measles, given the risk of outbreaks due to overcrowding. Support for pregnant and breastfeeding women, including infant and young child feeding counselling, is also essential.

Child protection needs are growing as registration and assessments progress. One unaccompanied child has been identified to date, and the continued identification of unaccompanied, separated and other at-risk children remains a priority. While a child-friendly space has started operating with UNICEF support, offering recreational activities for children, structured mental health and psychosocial support (MHPSS) services are required to respond to the needs of children affected by conflict and a dangerous sea crossing. With almost 1,000 school-aged children among the new arrivals, the education system in Markazi village will need to adapt to ensure that these children can continue their learning.

Finally, disaster risk reduction must be integrated into the response. Heavy rains are forecast in the coming weeks, and the site is exposed to flooding. Drainage, shelter reinforcement and the protection of water and sanitation infrastructure are needed to keep the gains of the first days from being lost and to prevent a deterioration in living conditions for children.

UNICEF RESPONSE

The UNICEF multisectoral team remains deployed in Obock alongside the Tadjourah field office. It supports the Prefecture-led response and participates in the daily coordination meeting. On 19 September, the UNICEF Representative visited Markazi, including a joint visit to the health post with the regional hospital (CMH) team.

- **WASH** – In partnership with Djiboutian Red Crescent (CRD), UNICEF has operationalized five water points in Markazi, with a total storage capacity of 37 m³, benefiting both newly arrived families and the refugees already living in the village. To ensure a continuous water supply, UNICEF and CRD provided technical support to the Prefecture-led team that organises water truck rotations and the refilling of storage tanks, pending a more durable solution through the extension of the water network. On sanitation, 10 emergency latrines have been installed which are reserved for women and girls. UNICEF and CRD are also supporting water and waste management on the site. Hygiene kits, menstrual hygiene items and household water treatment supplies will be distributed.
- **Health** - UNICEF connected the Markazi health post to the main water supply and is supporting its rehabilitation, allowing consultations to resume on site. With the regional hospital, UNICEF supports catch-up vaccination for zero-dose and under-vaccinated children, in particular against measles, as well as rapid health screening and the referral of emergency cases. Given the risk of waterborne diseases, UNICEF is supporting disease surveillance and the provision of essential medicines and maternal, newborn and child health supplies.

- **Nutrition** - UNICEF supports active screening for acute malnutrition among children under five. 122 children 6 to 59 months have been screened, of whom 19% were identified with severe acute malnutrition and 30% with moderate acute malnutrition. Identified cases are treated in the health post.
- **Child Protection** - Under the leadership of local authorities, UNICEF works with UN entities and NGOs on identifying vulnerable children. One accompanied child has been identified to date. He has been placed in a temporary foster family, and the family was jointly assessed by UNICEF and the Ministry of Women and Family (MFF). UNICEF has established a child-friendly space in Markazi, equipped with recreational and early childhood development kits, which will serve as the platform for progressively scaling up psychosocial support for children.
- **Education** - Registration activities have been moved from the school to another premise, freeing up the school for educational activities. According to the Ministry of Social Affairs and Solidarity's list, at least 900 school-aged children are registered among the new arrivals. UNICEF is working with the Ministry of National Education and Vocational Training (MENFOP) and the Prefecture to support the adaptation of the education system to ensure expanded access to learning for these children.
- **Social and Behaviour Change** - UNICEF and partners are supporting community engagement to place refugee families at the centre of the response and strengthen services for children. Volunteers from the refugee community are being mobilised to support WASH activities, including water distribution and hygiene promotion, as well as child protection and psychosocial activities for children. UNICEF also contributes to the feedback and complaint mechanisms being established with other actors, so that families can safely raise concerns about the assistance they receive.

HUMANITARIAN LEADERSHIP AND COORDINATION

The Government of Djibouti leads the response at national and local level. The Prefecture of Obock chairs the daily inter-partner coordination meeting, and the National Office for Assistance to Refugees and Disaster Victims (ONARS) coordinates within Markazi village. On 16 September, the Government launched an appeal based on a planning scenario of 10,000 people.

Sector coordination mechanisms for WASH, protection and health are now in place in Obock to strengthen the response. As part of the UN inter-agency response, UNICEF works closely with UNHCR, IOM and the Djiboutian Red Crescent. UNHCR is consolidating the needs of UN agencies and NGOs to support joint resource mobilization.

FUNDING OVERVIEW AND PARTNERSHIP

UNICEF Djibouti has repurposed initial resources to start delivering life-saving assistance. UNICEF has also mobilised internal funds, which remain insufficient to cover the growing needs. Pre-financing agreements are being formalised with implementing partners to accelerate the response on the ground. Without additional funding, life-saving services for children risk being reduced or suspended as needs grow, particularly water supply, sanitation, health, nutrition and child protection. Requirements cover the needs of up to 10,000 people for 6 months.

Sector	Requirements (US\$)
WASH	1,300,000
Health	300,000
Nutrition	500,000
Education	300,000
Child Protection	600,000
Total	3,000,000

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