



KEY FIGURES

6,920

Refugees registered since the outbreak of the crisis

2,922

Registered females.

2,610

Registered children and adolescents.

PRIORITIES

- Ensure protection of refugees and asylum seekers and provide assistance.
- Provide documents to refugees.
- Work with the government to ensure access to territory and freedom of movement.
- Continue to develop the infrastructure at Markazi camp.
- Continue border monitoring activities.

DJIBOUTI

INTER-AGENCY UPDATE FOR THE RESPONSE TO THE YEMEN SITUATION #37

20 March 2016

HIGHLIGHTS

- According to the latest available statistics from IOM and the Djibouti government, 33,340 persons of mixed nationalities have arrived in Djibouti as of 15 March 2016 (since 26 March 2015). Of those, 18,952 persons (57 per cent) are Yemeni nationals, 12,427 (37 per cent) are transiting migrants and 1,961 persons (6 per cent) are Djiboutian returnees.
- As of 17 March 2016, UNHCR and ONARS registered 6,920 refugees of which 6,694 are Yemeni nationals; the majority was registered in Obock.

Population of concern

A total of **6,920** persons of concern

Nationality	0-4 years		5-11 years		12-17 years		18-59 years		60 years+		TOTAL
	M	F	M	F	M	F	M	F	M	F	
Yemen	353	363	503	497	439	377	2463	1375	147	177	6,694
Syria	0	0	0	0	0	0	3	0	0	0	3
Iraq	0	0	0	0	0	0	3	0	0	0	3
Palestine	0	0	1	0	0	1	1	2	0	0	5
Somalia	4	9	12	12	5	11	30	65	3	9	160
Eritrea	4	1	2	2	5	3	14	9	0	1	41
Pakistan	0	1	0	0	0	0	1	2	0	0	4
Ethiopia	1	1	2	0	0	1	2	2	0	0	9
Sudan	0	0	0	0	0	0	0	1	0	0	1
Total	362	375	520	511	449	393	2517	1456	150	187	6,920

All figures are provisional and still subject to change.

UPDATE ON ACHIEVEMENTS

Operational Context and Migration

The number of registered refugees since the beginning of the Yemen crisis has now reached 6,891 refugees; almost half of whom are sheltered in Markazi camp. Border monitoring trends at the ports of Djibouti and along the northern coast of Djibouti have revealed a decrease in new arrivals.

Yemeni refugees have started to return simultaneously to Yemen. According to UNHCR, so far, 89 heads of households (341 individuals in total) have returned their refugee cards to UNHCR since the beginning of March. All these originate from Bab Al Mandab. According to UNHCR Yemen partners, the places of origin for returnees are Suwaida village, Mokha. These returnees are now internally displaced in remote and isolated villages along the coast, where armed gangs and landmines also preside. The UNHCR team in Obock is raising the awareness of refugees willing to return on the security situation in their area of origin, remaining very fragile. According to the information refugees come across with their families and contacts in Yemen; Bab-al Mandab would be safe and assistance is amply provided to Internally Displaced People by different humanitarian actors. The refugees have stated that they are fully aware of the risks they might encounter during their return trip.

Protection

Achievements and Impact

- From 01-17 March, UNHCR and ONARS registered 136 individuals (58 families) in Obock and Djibouti city. Furthermore, as at 17 March, a total of 1,210 urban refugees were registered in Djibouti city.
- From 01-15 March, UNHCR distributed 151 refugee identity cards and 138 family attestations to refugees in Obock; additionally, 41 refugee identity cards and 11 family attestations were distributed to refugees in Djibouti City.
- As part of its activities to maintain family links, the Djibouti Red Crescent (CRD) through the support of the Red Crescent Societies continue to offer phone call services to new arrivals and refugees so that they can call and reassure their families abroad. From 05-11 March, 68 refugees in Markazi camp (25 females, 43 males) benefitted from the service.

Health

Achievements and Impact

- From 01-15 March, 396 refugees were treated at the Africa Humanitarian Action (AHA) outpatient clinic in Markazi Camp mostly suffering from communicable diseases such as the common cold and diarrhea. Three new clients with epilepsy and a patient with episodes of psychosis were identified and are now following treatment at the AHA Mental Health Unit.
- According to the doctor of the King Salman Health Centre in the camp, it is likely that more cases of malaria are appearing in the camp. Further investigations are being made in order to understand how many people may be affected. So far, only two cases of malaria have tested positive among refugees returning from Djibouti city to Markazi camp.
- AHA organized a one-week polio immunization campaign at the beginning of March. A total of 134 children from 197 households were immunized.
- The Mother and Child Health Unit continues to provide family planning services for refugees through the support of UNFPA. During the reporting period, 15 women received antenatal and family planning services.

Identified Needs and Remaining Gaps

- The presence of an ambulance in Markazi camp continues to be a need. The two ambulances available at Obock's regional hospital are not always available for use and take a long time to reach the camp-based patients.

Education

Achievements and Impact

- Primary classes for grades 1-7 continue to take place at Al Rahma school on a daily basis. During the first two weeks of March, 197 students out of the total 338 enrolled students in grades 1-7 attended classes. The attendance figures differ every week; however despite the increase in the enrollment rate as new children of school-going age arrive, the actual attendance rates are decreasing gradually because families are spontaneously returning to Yemen. So far, according to a preliminary assessment conducted by the Lutheran World Federation (LWF), around 82 children have left Markazi camp.
- A total of 15 students are enrolled in the Yemeni school in Djibouti city through the support of UNICEF.



Food Security and Nutrition

Achievements and Impact

- Some 365 households were sensitized on community malnutrition management through door-to-door visits by AHA Community Promoters. A total of 244 children were screened for malnutrition during the sensitization (79 in sector one; 60 in sector two; 45 in sector three and 60 in sector four). Two children were identified as severely malnourished and were admitted to the SAM nutrition program.
- The wet feeding program at the AHA Nutrition Unit continues to provide porridge through a daily morning and afternoon feeding program. On average 36 children attend each session.
- During the reporting period, 11 children were discharged from the nutrition program following their successful completion and cured status. Nine children were discharged from MAM and two from SAM. Furthermore, two new children were admitted to the SAM program and one to the MAM program. Two defaulters were additionally added to the MAM group.
- One child in SAM program was transferred to the Centre Medical Hospitalier's Stabilization Center in Obock. Regretfully, the child died at the port waiting to board a boat to Yemen following the parents' decision to stop treatment against medical advice.



Water and Sanitation

Achievements and Impact

- Markazi camp currently contains 204 latrines in total. During the reporting period, the Norwegian Refugee Council (NRC) sensitized the community on maintaining clean family latrines. NRC also repaired the Bladders of sectors one and three as they were in need of repair.
- NRC and UNHCR have dug shallow water trenches to drain excessive water in Markazi camp. The trench reaches the outside of the camp and ends in a pit.
- Garbage collection campaigns take place every Sunday and Thursday at Markazi camp. During the reporting week, NRC conducted community sensitization at the household level to encourage the community to keep the camp clean.

- Costs for a drainage system to collect water surrounding the water distribution points have been estimated and construction work has started on them. The drainage for the water distribution point of sector three has been finalized and the remaining ones are underway.

Identified Needs and Remaining Gaps

- In order to encourage the community to dispose of their garbage, focal points within Markazi camp have been identified. Through its hygiene promoters, NRC distributed garbage bags to the focal points, counting on them to mobilise the community for the cleaning of the camp. Furthermore, six garbage collection points throughout the camp have been identified to facilitate disposal and ensure cleanliness of the camp.
- Water continues to remain a problem in Obock; though to a lesser extent than the months of January and February. On 11 March, NRC was obliged to provide water through trucking from the nearby village of Oulma because the motor of the well in Soublali was not functioning.



Shelter and NFIs

Achievements and Impact

- The King Salman Humanitarian and Relief Centre (KSC) has signed an agreement with the Djibouti government to construct and install 300 prefabricated houses with air conditioning units in addition to a school and a mosque in Markazi camp. They have allocated around 40,000 square meters for the area which is approximately the area of Sectors three and four. The KSC has requested the removal of the existing tents and Refugee Housing Units (RHUs) funded by the Qatari Development Fund through the Qatar Red Crescent. Based on the request of the Government, UNHCR will remove the RHUs and rebuild them in sectors one and two. KSC have also requested that the latrines, kitchens and showers, some of which were funded by SIDA and ECHO, in that area be dismantled.
- During the second week of March, NRC finalized the construction of 37 showers in Markazi camp.



Camp Coordination and Camp Management

Identified Needs and Remaining Gaps

- The provision of electricity and ventilation in the camp in preparation for the upcoming hot season continue to be a challenge in Markazi camp. UNHCR and ONARS continue to appeal to partners and donors after the previous provider of kerosene cut short the donation for financial reasons. In the meantime, ONARS provides three hours of electricity during the evening for the illumination of the camp.

FINANCIAL INFORMATION

Agencies are very grateful for the financial support provided by donors who have contributed to their activities with non-earmarked and broadly earmarked funds as well as for those who have contributed directly to the operation.

The web portal for the Yemen Crisis is available on <http://data.unhcr.org/yemen>. This portal, co-lead by IOM and UNHCR, provides a regional overview as well as specific information on conditions and activities regarding the Yemen situation at the country level. Countries include Ethiopia, Djibouti, the Kingdom of Saudi Arabia, Somalia and Sudan. The site enables sharing of data on population and movements, maps, recent assessments, agency/NGO specific reports, the latest funding information and quick links to a variety of partner websites.

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Regional portal: <http://data.unhcr.org/yemen/regional.php>

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