



DJIBOUTI

ABOUT DJIBOUTI VACCINATIONS

The Republic of Djibouti is an East African nation located at the juncture of the Gulf of Aden and the Red Sea. Summers are extremely hot, but milder weather prevails from November to March.

OVERALL RISK

High Risk - Preventable disease is much more common than in Australia. Consult a Travelvax clinic for your specific risk.

MALARIA RISK

Malaria is present, whether or not anti-malarial medications are recommended will need to be discussed with a medical practitioner. Consult a Travelvax clinic for long stays or significant level of outdoor activities.

VACCINE PREVENTABLE DISEASES

YELLOW FEVER

Country requirement at entry: proof of vaccination against yellow fever is required for travellers aged 1 year or over arriving from countries with risk of yellow fever transmission, as determined by WHO, and for travellers having transited for more than 12 hours through an airport of a country with risk of yellow fever transmission, as determined by WHO.

Other country requirement(s) (2022): Proof of vaccination against meningococcal meningitis and yellow fever for departing travellers in the context of Hajj. Administration of vaccines(s) against meningococcal meningitis, poliomyelitis, and yellow fever, and related proof of vaccination issued depending on requirements of countries of destination..

COVID-19

For the most up to date requirements for entry into Australia, go to [Smartraveller](#).

Please click this [COVID-19 Travel Regulations Map](#) (IATA) to view the latest Djibouti COVID travel requirements.

HEPATITIS A

Risk of Hepatitis A infection is high for all travellers, vaccination recommended.

HEPATITIS B

High presence of Hepatitis B in local population. Vaccination would be recommended. Consult a medical practitioner for your specific risk.

TYPHOID

Moderate risk for most travellers. Vaccination recommended for travel to smaller cities, villages and rural areas outside usual tourist routes. Some medical conditions pre-dispose to infection; whether vaccinations would be recommended should be discussed with a medical practitioner. Consult a medical practitioner for your specific risk.

INFLUENZA

Year round risk present. Most common vaccine preventable illness in travellers. Vaccine recommended, effective for 1 year.

RABIES

Disease present. Recommendation for vaccination will depend on specific itinerary and activities planned. Generally rabies vaccination is advised for high risk individuals such as veterinarians or animal handlers, cavers. Additionally for higher risk travellers who plan: extended periods outdoors, rural travel, adventurous activities including bicycling; also expats or long-term travellers to endemic regions and children (risk of more severe or risk-prone bites and may not report contact at all).

JAPANESE ENCEPHALITIS

No risk to travellers.

POLIO

Disease present. Recommendation for vaccination will depend on specific itinerary and activities planned. The risk to travellers is generally low, however vaccination is recommended for travel to affected regions and is a [requirement for travel](#) to/from some countries. If at risk, adults should have a booster to the childhood series.

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Additional information:

Following the detection of **vaccine-derived poliovirus**, it is recommended to ensure polio vaccinations are up to date - see *below*. [Temporary recommendations](#) regarding polio vaccination, which are updated regularly by the WHO, advise that affected states:

- Encourage residents and long-term visitors to receive a dose of IPV four weeks to 12 months prior to international travel.
- Ensure that travellers who receive such vaccination have access to an appropriate document to record their polio vaccination status.

TICKBORNE ENCEPHALITIS

No risk to travellers.

MENINGOCOCCAL MENINGITIS

Low risk to travellers.

CHOLERA

Disease is present, however the risk is low for the majority of travellers. Peace corp, volunteers, refugee workers etc need to consider vaccination. All travellers should take food and water precautions. Consult a medical practitioner for your specific risk.

OTHER DISEASES

TRAVELLERS DIARRHOEA

No risk to travellers.

INSECT-BORNE DISEASES

No risk to travellers.

SCHISTOSOMIASIS

No risk to travellers.

STIs

Low incidence of sexually transmitted and blood-borne diseases. Safe sex and needle precautions should be followed by all travellers.

ALTITUDE

No risk to travellers.

ADDITIONAL INFORMATION

PERSONAL SAFETY

In order to check before and during travel for any high-risk areas visit the Smartraveller website. Avoid unnecessary displays of wealth or valuables and minimise the amounts of cash carried. Keep secure records of passport/credit card/licence numbers. For more safety tips visit: www.smartraveller.gov.au.

MEDICAL CARE

Comprehensive medical facilities available only in the major population centres and/or specific private clinics. Sterile surgical products (syringes/needles/sutures) are not always available. Check for any contacts supplied by your emergency assistance organisation (nominated by your travel insurer) or with IAMAT (International Association of Medical Assistance for Travellers).

FIRST AID KITS & ACCESSORIES

Always carry an [advanced first aid kit](#), including needles and syringes (shortages of sterile equipment are common). A prescription kit (containing treatments for travellers' diarrhoea) is essential. A [mosquito net](#) and [insect repellent](#) (containing DEET, Citriodiol or Picaridin) are highly recommended, even if anti-malarials are taken.

**More information on Djibouti is available during your pre-travel consultation with Travelvax.
Call 1300 360 164 for the location of the clinic nearest to you.**