This weekly report is produced by the United Nations (UN) Migration Agency (IOM) as part of the UN Country Management Team (UNCMT) response to the influx of Burundian and Congolese Asylum Seekers from Burundi. The report covers the period from Aug 07 to Aug 13, 2017. The next report will be issued on August 21, 2017.

Highlights

- 329 new arrivals (165 males and 164 females) composed of 89 Burundian and 240 Congolese Asylum Seekers. Busiest entry points during this week were Kigadye (233 persons), Kasange (45 persons), Kabanga (15 persons).
- 319 Congolese Asylum Seekers (153 males, 166 females) were relocated from Manyovu transit center to Nyarugusu camp. 2 Burundian Asylum Seekers were relocated from Mtendeli camp to Nyarugusu camp during this period.
- IOM’s fit-to-travel medical screening revealed that, the top five medical conditions among the transported persons during this week were: malaria, skin infections, upper respiratory tract infection, acute watery diarrhoea, and Tuberculosis.

For additional information, please contact Dr Qasim Sufi (qsufi@iom.int) or Mr Son Ha Dinh (shdinh@iom.int). You can also connect with us at: https://tanzania.iom.int and https://www.facebook.com/iomtanzania
TRANSPORTATION
Cumulative Transport Number*

Figure 1. From Aug 07, 2017 to Aug 13, 2017

Figure 2. Starting From Aug 1st to Aug 13th

* The cumulative statistics include newly arriving Asylum Seekers as well as those relocated from transit centers to the camps and or reunified with their family members.

Background on IOM Response
Since May 2015, IOM has been providing safe and dignified transportation to persons fleeing the crisis in Burundi and entering Tanzania through various entry points along the border between the two countries mainly in Kasulu, Kibondo, and Ngara districts. IOM teams made of operation and medical staff accompanied each pick up exercise. The objectives are to ensure that transported Asylum Seekers are fit to travel and those with urgent and or special medical needs are referred to health facilities ran by health partners such as Médecins sans Frontières (MSF) and Tanzania Red Cross (TRC) for timely and appropriate medical care. Currently Burundian new arrivals are transported to Nduta camp while Congolese are brought to Nyarugusu camp.

Health
During the reported period, the fit-to-travel medical screenings carried out by the IOM medical team revealed that 41 cases (12 males, 29 females) required medical care. 13 cases required immediate referral to health facilities in the camps. In Nyarugusu camp, IOM Medical team referred 2 cases of acute watery diarrhoea to TRC hospital. In Manyovu transit center, IOM Medical team referred 3 cases to IRC clinic and they were: 1 case of self-declared TB, 1 case of abscess, 1 case of acute watery diarrhoea. In Lumasi transit center, IOM Medical team referred 8 cases to TRC clinic and they were: 4 cases of malaria, and 4 cases of acute watery diarrhoea.

Additionally, there were 19 pregnant women at different gestational age who require ante-natal, intra-natal and post-natal care among the new arrivals.
Figure 5. Top 5 medical conditions among the new arrivals

Photos:

Photo 1: IOM Operation Team preparing Manifest for Transportation of Congolese Asylum Seekers (IOM)

Photo 2: Asylum Seekers at Manyovu prior to their Transportation to Nyarugusu Camp (IOM)