This weekly report is produced by the International Organization for Migration (IOM) as part of the United Nations Country Management Team (UNCMT) response to the influx of Burundian and Congolese refugees from Burundi. The report covers the period from February 13 to February 19, 2017. The next report will be issued on February 27, 2017.

Highlights

- 3742 new arrivals (1962 males and 1780 females). This were composed of 3614 Burundians and 128 Congolese. Busiest entry points for the week are Mabamba (700 pax), Kabanga (400 pax) and Kitanga (382 pax).
- 1597 people (779 males, 818 females) at transit centers were relocated to Nyarugusu and Nduta camps. 24 pax were also transported from Mtendeli to Nyarugusu camp to reunite with their families.
- IOM’s fit-to-travel medical screening revealed that the top five medical conditions among the transported persons for this week were: malaria, conjunctivitis, upper respiratory tract infections, skin infections, and moderate acute malnutrition.

For additional information, please contact Dr. Qasim Sufi (QSUFI@iom.int) or Mr. Son Ha Dinh (hdinhdmk@iom.int). You can also connect with us at: https://tanzania.iom.int and https://www.facebook.com/iomtanzania.
**WEEKLY TRANSPORTATION AND RELOCATION REPORT**

**IOM TANZANIA**

From February 13 to February 19, 2017

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**TRANSPORTATION**

Cumulative Transport Number*

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

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**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 at least two staff, one operation and one medical, accompanied each pick up exercise. The objective is to ensure that Refugees and Asylum Seekers transported are fit to travel and or have any medical needs to refer them to health partners such as MSF or Tanzanian Red Cross (TRC) for appropriate medical care. Currently Burundians are transported to Nduta camp while Congolese new arrivals from Burundi are brought to Nyarugusu camp._

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**Health**

_During the reported period, the fit-to-travel medical screenings carried out by IOM medical team revealed that 258 cases required medical care. 47 cases required immediate attention and were referred to health partners in the camps. In Nduta camp, 26 cases were referred to MSF hospital and they were: 6 cases of moderate malnutrition, 2 cases of self-declared HIV, 2 cases of malaria, 2 cases self-declared sickle cell disease, 1 case of inguinal hernia, 1 case of haemorrhoids, 1 case of epilepsy, 2 cases of acute watery diarrhoea, 1 case of mastitis, 2 cases of mental disorder, 1 case of hypertension, 1 case of diabetes, 3 cases of severe malnutrition, 1 case of TB. In Lumasi, we referred 19 cases to the Red Cross clinic and they were: 1 case of moderate malnutrition, 2 cases of self-declared HIV, 5 cases of malaria, 1 case of epilepsy, 1 case of acute watery diarrhoea, 1 case of mastitis, 6 cases of conjunctivitis, 2 cases of otitis media. For Nyarugusu’s Red Cross hospital, we referred 2 cases as follows: 1 case of otitis media, 1 case of rectal prolapse._

_Additionally, there were 89 pregnant women at different gestational period who require ante-natal, intra-natal and post-natal care among the new arrivals._
Figure 5. Top 5 medical conditions among the new arrivals

Field Photos:

Photo 1: A child reaching for paper (IOM)

Photo 2: Disembarkation from the bus (IOM)