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 20 to February 26, 2017. The next report will be issued on March 5, 2017.

Highlights

- 2475 new arrivals (1359 males and 1116 females). This were composed of 2341 Burundians and 134 Congolese. Busiest entry points during this week continue to be Mabamba (681 pax), Kigadye (312 pax) and Kitanga (189 pax).
- Additionally, 1108 people (538 males, 570 females) were relocated from Lumasi transit center to Nduta and Nyarugusu camps during the reporting period.
- IOM’s fit-to-travel medical screening revealed that the top five medical conditions among the transported persons this week were: malaria, conjunctivitis, upper respiratory tract infections, skin infections, and HIV.

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TRANSPORTATION

Cumulative Transport Number*

Figure 1. From February 20, 2017 to February 26, 2017

Figure 2. Starting From February 1st 2017

**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.

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.

Health

During the reported period, the fit-to-travel medical screenings carried out by the IOM medical team revealed that 173 cases required medical care. 44 cases required immediate attention and were referred to health partners in the camps. In Nduta camp, 23 cases were referred to MSF hospital and they were: 1 case of otitis media, 3 cases of mental disorder, 1 case of septic wound, 1 case of anaemia, 6 cases of self-declared HIV, 1 case of burn wounds, 4 cases of moderate malnutrition, 1 case of hypertension, 1 case of rectal prolapse, 1 case of acute watery diarrhoea, 1 case of cellulitis, 1 case of sickle cell disease (self-declared), 1 case of TB. In Lumasi Transit Center, 21 cases were referred cases to the Tanzania Red Cross clinic. These consisted of: 1 case of septic wound, 1 case of self-declared HIV, 1 case of moderate malnutrition, 3 cases of acute watery diarrhoea, 1 case of self-declared sickle cell disease, 2 cases of conjunctivitis, 1 case of inguinal hernia, 7 cases of malaria, 1 case of skin infection, 1 case of dog-bite, 2 cases of severe malnutrition.

Additionally, there were 66 pregnant women at different gestational age who required 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: The items carried to Tanzania (IOM)

Photo 2: Children provided with drinking water (IOM)