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 August 22 to 28, 2016. The next report will be issued on September 5, 2016.

Highlights

- 2,953 new arrivals (1,512 males and 1,441 females) composed of 2,827 Burundians and 126 Congolese were transported from the entry points in Kasulu, Kibondo, and Ngara districts to Mtendeli and Nyarugusu camps, and to Lumasi and Manyovo transit centers.
- IOM’s fit-to-travel medical screening revealed that the top five medical conditions among the transported persons were: skin infections, malaria, upper respiratory tract infections (URTI), septic wounds, and conjunctivitis.

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TRANSPORTATION

Persons transported from Entry Points

Figure 1. From August 15 to 21

Main Entry Points
- Kibondo: 2,953
- Ngara: 677
- Kasulu: 542

Figure 2. Cumulative starting August 1

Main Entry Points
- Kibondo: 9,350
- Ngara: 1,968
- Kasulu: 1,745

Key Facts

IOM has been providing safe and dignified transportation to persons fleeing the crisis from various entry points along the border between Tanzania and Burundi, mainly in Kasulu, Kibondo, and Ngara districts. In total, 2,953 (1,512 males and 1,441 females) composed of 2,827 Burundians and 126 Congolese have newly arrived in Tanzania during the reporting period. While the 2,297 Burundians were transported to Mtendeli and to Manyovo and Lumasi transit centers, the 126 Congolese were transported to Nyarugusu camp, in Kasulu district.

Figures 3 and 4. Daily number of persons transported disaggregated by gender and country of origin for each district.

Health

During the reported period, the fit-to-travel medical screenings carried out by the IOM medical team revealed that 118 medical cases required medical care. The top five medical conditions were skin infections, malaria, upper respiratory tract infections (URTI), septic wounds, and conjunctivitis. Twelve medical cases were referred to the Tanzanian Red Cross (TRC) hospital in Mtendeli camp. These cases included one case with complicated malaria, one case with otitis, one case of malnutrition, two cases of septic wounds, one case of mastitis, one case of incomplete abortion, one case of inguinal hernia, one case of epilepsy, one case of congestive cardiac failure, one case of mental disorder, and one case of gastroenteritis. Two cases, including one case of mental disorder and one case of malnutrition, were referred to the TRC hospital in Lumasi transit center. One case of hypoglycaemia was referred to the TRC hospital in Nyarugusu camp. Finally, one case of malnutrition and diarrhoea, was referred to the International Rescue Committee (IRC) clinic at Migongo entry point. Additionally, there were 51 pregnant women at different gestational age who require ante-natal, intra-natal and post-natal care among the new arrivals.

Table: Top 5 medical conditions among the new arrivals

- Skin infections (9)
- Malaria (9)
- Upper respiratory tract infections (URTI) (8)
- Conjunctivitis (5)
- Wound eg burn and/or gun shot wound (5)