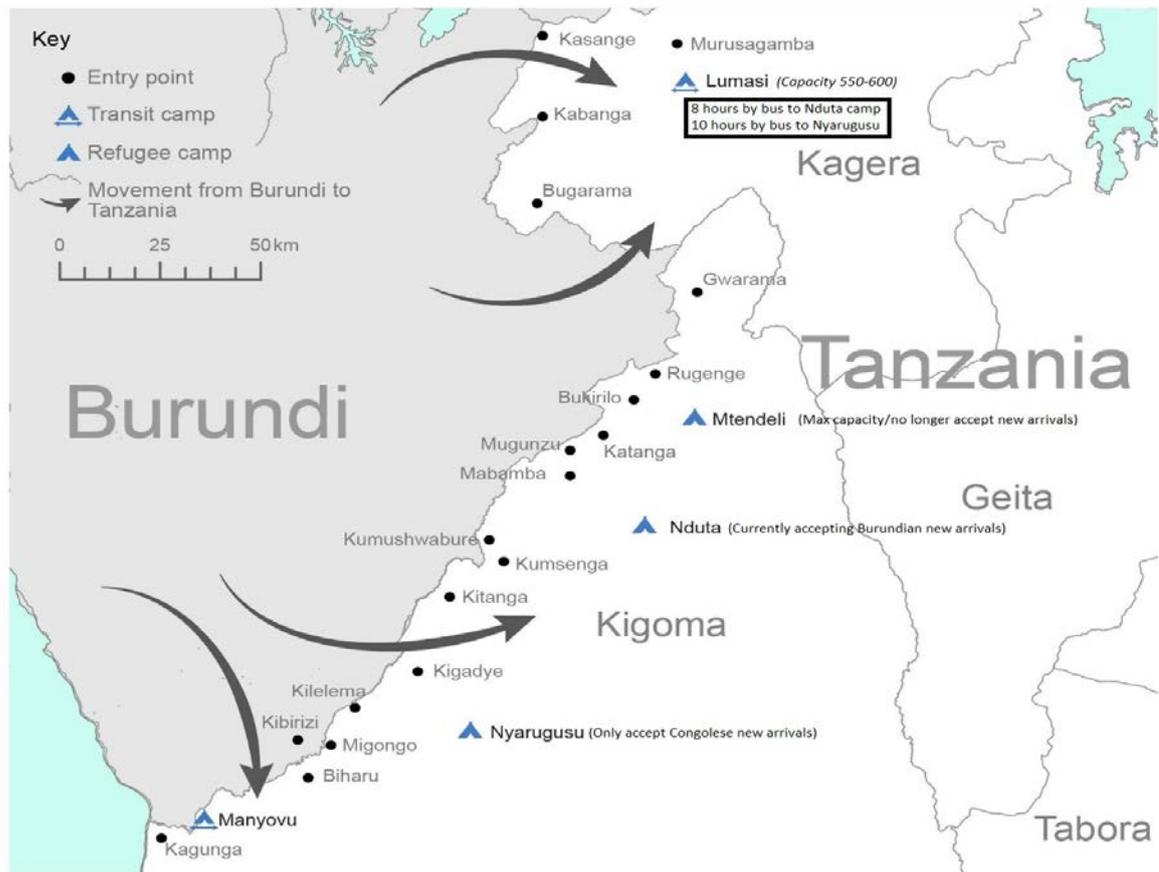


This weekly report is produced by the United Nations (UN) Migration Agency (IOM) as part of the UN Country Management Team (UNCMT) response to the influx of Burundian and Congolese Asylum Seekers from Burundi. The report covers the period from July 10 to July 16, 2017. The next report will be issued on July 24, 2017.



Highlights

- 418 new arrivals (206 males and 212 females) composed of 129 Burundian and 289 Congolese Asylum Seekers. Busiest entry points during this week were Kigadye (256 persons), Bukiriro (65 persons), and Herushingo (43 persons).
- 285 Congolese Asylum Seekers (136 males, 149 females) were relocated from Manyovu and Lumasi transit centers to Nyarugusu camp. 71 Burundian Asylum Seekers were relocated from Lumasi transit center to Nduta camp.
- 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, mental disorder, epilepsy.

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 July 10, 2017 to July 16, 2017

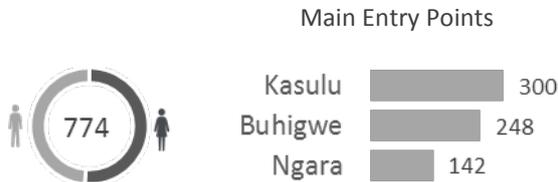


Figure 2. Starting From July 1st to July 16th



* 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.

Figure 3. Daily number of persons transported disaggregated by gender during the reported period

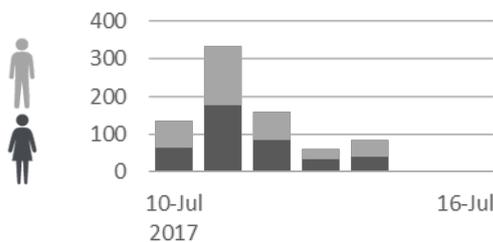
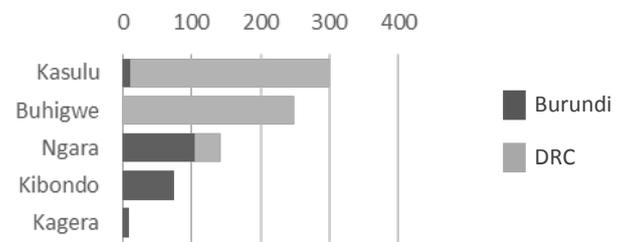


Figure 4. Number of persons transported disaggregated by country of origin for each district

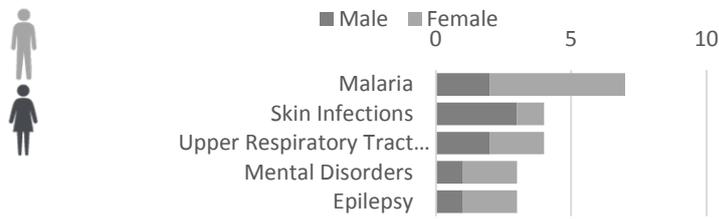


Health

During the reported period, the fit-to-travel medical screenings carried out by the IOM medical team revealed that 57 cases (16 males, 41 females) required medical care. 15 cases required immediate referral to health facilities in the camps. In Manyovu transit center, IOM Medical referred 7 cases to IRC clinic and they were: 1 case of multiple cut wounds, 1 case of ulnar fracture, 1 case of mental disorder, 1 case of self-declared hypertension, 1 case of peptic ulcer, 1 case of pelvic inflammatory, 1 case of self-declared gender-based violence. In Nyarugusu camp, IOM Medical referred 3 cases to TRC hospital and they were: 1 case of self-declared hypertension, 1 case of acute watery diarrhoea, 1 case of epilepsy. In Lumasi transit center, 1 case of malaria was referred to TRC clinic. In Nduta camp, IOM Medical referred 4 cases to MSF clinic and they were: 1 case of self-declared HIV, 2 cases of mental disorder, 1 case of moderate malnutrition.

Additionally, there were 17 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



Photos:

Photo 1: IOM Field Coordinator advising an Asylum Seeker (IOM)



Photo 2: Preparation for Relocation from Transit Centre to Refugee Camp (IOM)

