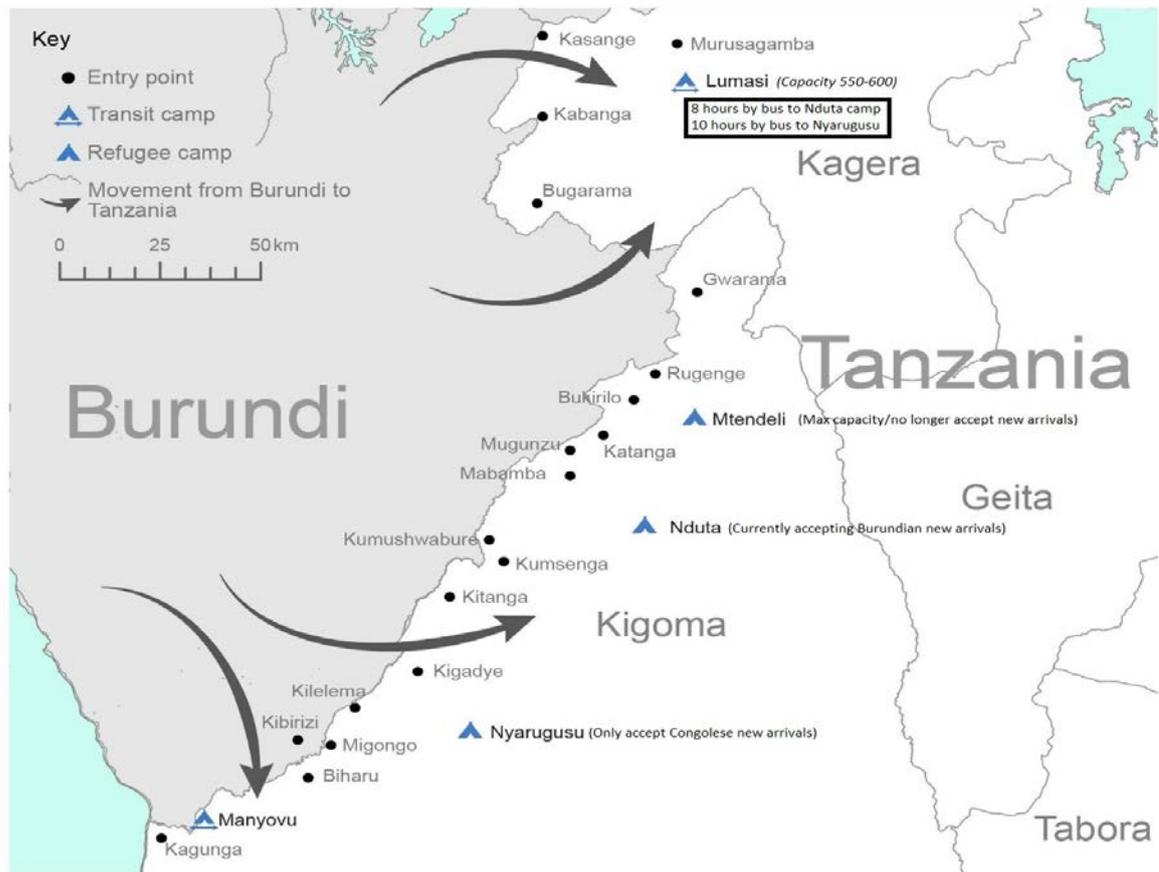


This weekly report is produced by the United Nations (UN) Migration Agency (IOM) as part of the UN Country Management Team (UNCMT) response to the influx of Burundian and Congolese Asylum Seekers from Burundi. The report covers the period from May 29 to June 4, 2017. The next report will be issued on June 12, 2017.



Highlights

- 184 new arrivals (106 males and 78 females) composed of 99 Burundian and 85 Congolese Asylum Seekers. Busiest entry points during this week were Kigadye (76 persons) and Bukiriro (66 persons), Kitanga (13 persons).
- 54 Congolese Asylum Seekers (35 males, 19 females) were relocated from Manyovu transit center to Nyarugusu 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, HIV, and mental disorder.

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>

TRANSPORTATION

Cumulative Transport Number*

Figure 1. From May 29, 2017 to June 4, 2017

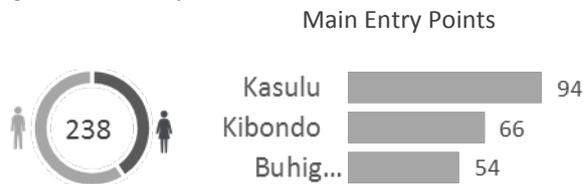


Figure 2. Starting From May 1st to May 31st



* 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

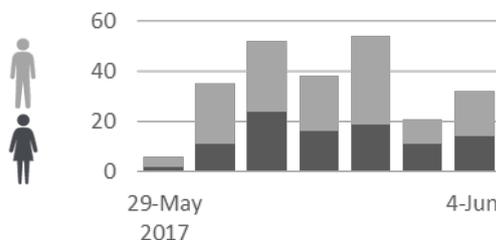
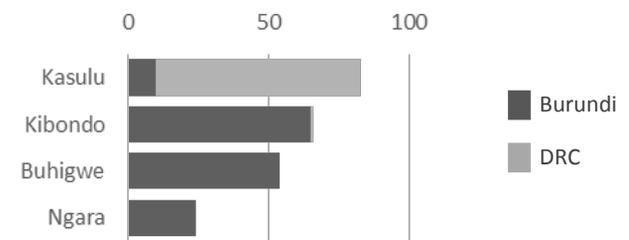


Figure 4. Number of persons transported disaggregated by country of origin for each district

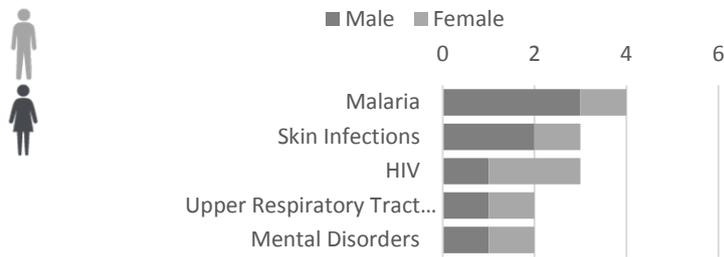


Health

During the reported period, the fit-to-travel medical screenings carried out by the IOM medical team revealed that 27 cases required medical care. 10 cases required immediate referral to health facilities in the camps. In Nduta camp, 2 cases were referred to MSF hospital and they were: 1 case of self-declared HIV, 1 case of epistaxis. In Lumasi transit center, IOM Medical referred 3 cases to TRC clinic and they were: 1 case of acute watery diarrhoea, 2 cases of malaria. In Nyarugusu camp, 1 case of severe malnutrition was referred to TRC hospital. In Manyovu transit center, IOM Medical referred 4 cases to IRC clinic and they were: 3 cases of self-declared HIV, and 1 case of cerebral palsy.

Additionally, there were 7 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: Cross-check prior to Boarding (IOM)



Photo 2: Pre-departure Medical Check (IOM)

