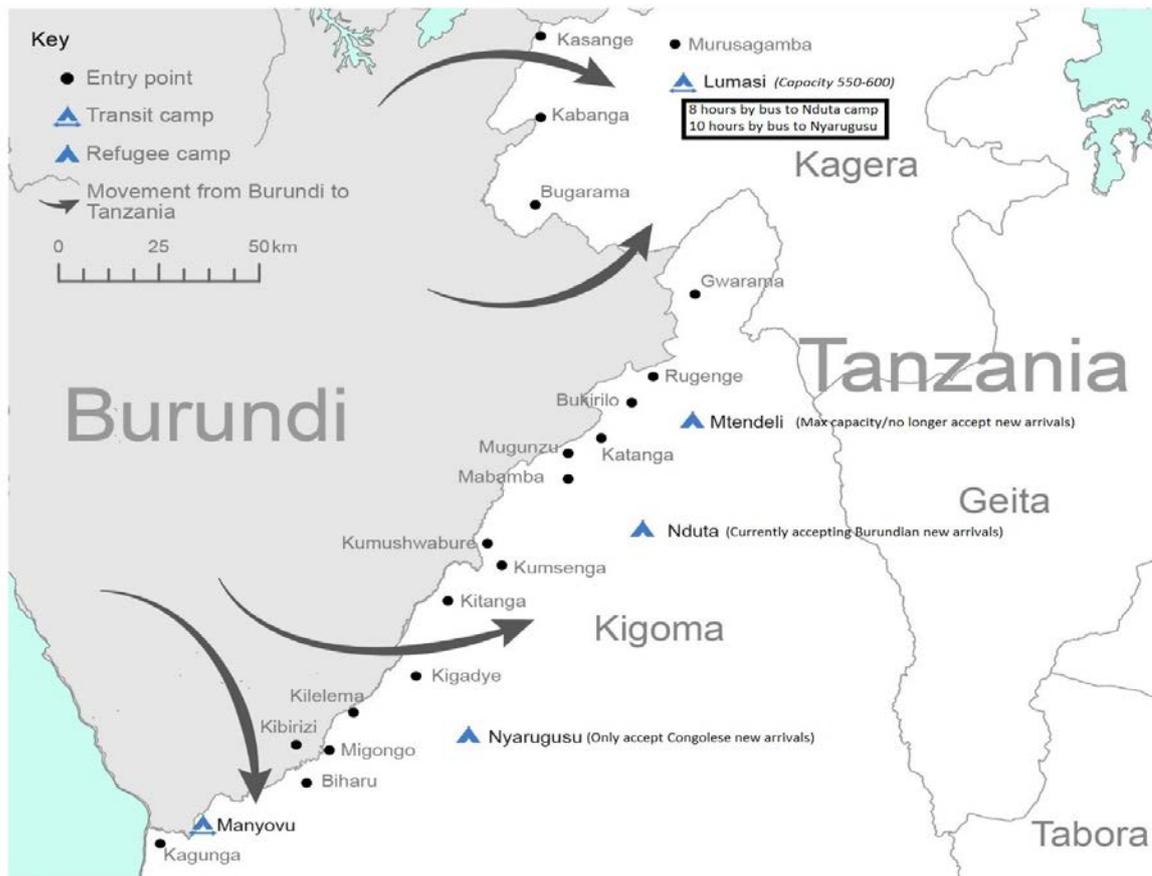


This weekly report is produced by the United Nations (UN) Migration Agency (IOM) as part of the UN Country Management Team (UNCMT) response to the influx of Burundian and Congolese Asylum Seekers from Burundi. The report covers the period from July 24 to July 30, 2017. The next report will be issued on August 7, 2017.



Highlights

- 343 new arrivals (174 males and 169 females) composed of 34 Burundian and 309 Congolese Asylum Seekers. Busiest entry points during this week were Kigadye (240 persons), Ilagala (67 persons), and Kasange (21 persons).
- 273 Congolese Asylum Seekers (125 males, 148 females) were relocated from Manyovu and Lumasi transit centers to Nyarugusu camp. 50 Burundian Asylum Seekers were relocated from Nduta camp to Mtendeli camp to reunite with their family members.
- 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, conjunctivitis, and HIV.

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 24, 2017 to July 30, 2017

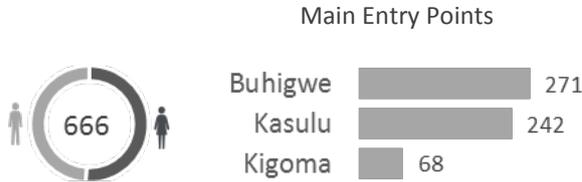


Figure 2. Starting From July 1st to July 30th



* 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

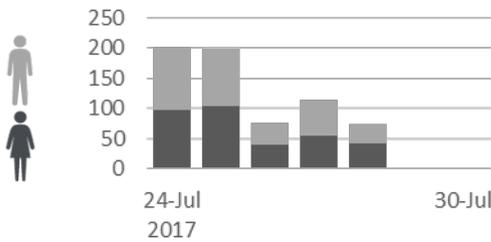
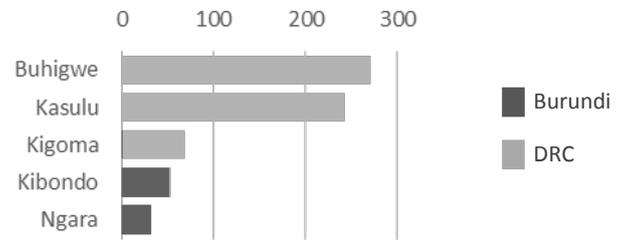


Figure 4. Number of persons transported disaggregated by country of origin for each district

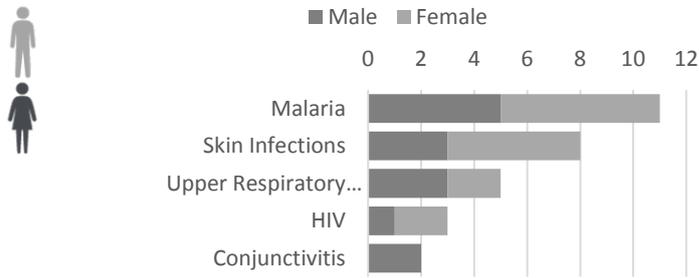


Health

During the reported period, the fit-to-travel medical screenings carried out by the IOM medical team revealed that 56 cases (19 males, 37 females) required medical care. 14 cases required immediate referral to health facilities in the camps. In Lumasi transit center, IOM Medical referred 4 cases to TRC clinic and they were: 1 case of epilepsy, 3 cases of malaria. In Nyarugusu camp, IOM Medical referred 4 cases to TRC hospital and they were: 2 cases of self-declared HIV, 1 case of malaria, 1 case of scabies. In Manyovu transit center, IOM Medical referred 6 cases to IRC clinic and they were: 1 case of self-declared hypertension, 1 case of self-declared HIV, 1 case of inguinal hernia, 1 case of peptic ulcer, 1 case of otitis media, 1 case of chickenpox.

Additionally, there were 18 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 preparing for Relocation from Lumasi TC (IOM)



Photo 2: Counting Asylum Seekers prior to Departure (IOM)

