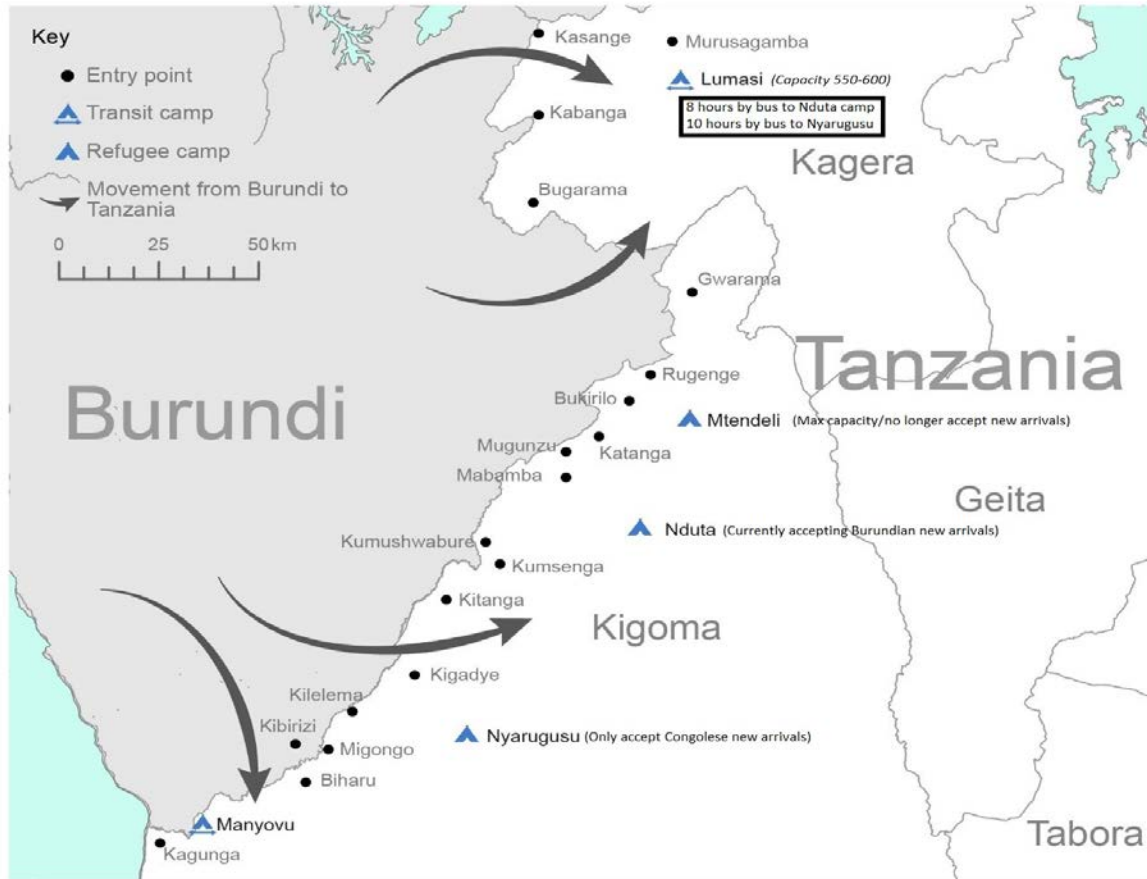


This weekly report is produced by the United Nations (UN) Migration Agency (IOM) as part of the UN Country Management Team (UNCMT) response to the influx of Burundian and Congolese Asylum Seekers from Burundi. The report covers the period from July 31 to Aug 6, 2017. The next report will be issued on August 14, 2017.



## Highlights

- 163 new arrivals (83 males and 80 females) composed of 10 Burundian and 153 Congolese Asylum Seekers. Busiest entry points during this week were Kigadye (150 persons), Murusagamba (10 persons), Herushingo (3 persons).
- 208 Congolese Asylum Seekers (107 males, 101 females) were relocated from Manyovu and Lumasi transit centers to Nyarugusu camp. 129 Burundian Asylum Seekers were relocated from Lumasi transit center to Nduta camp during the same period.
- 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, epilepsy, and hypertension.

For additional information, please contact Dr Qasim Sufi ([qsufi@iom.int](mailto:qsufi@iom.int)) or Mr Son Ha Dinh ([shdinh@iom.int](mailto: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 31, 2017 to Aug 6, 2017

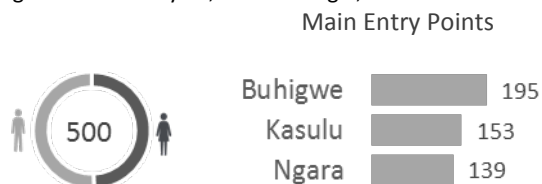
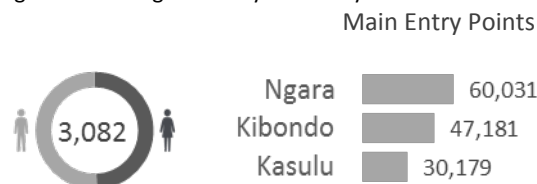


Figure 2. Starting From July 1<sup>st</sup> to July 31<sup>st</sup>



\* 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

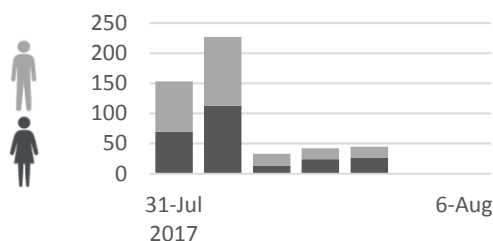
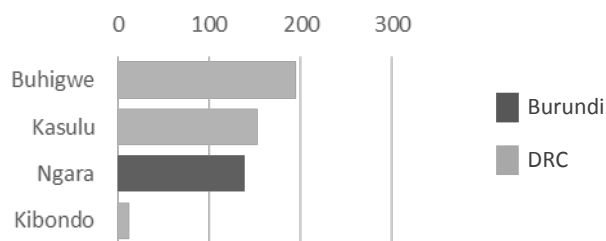


Figure 4. Number of persons transported disaggregated by country of origin for each district



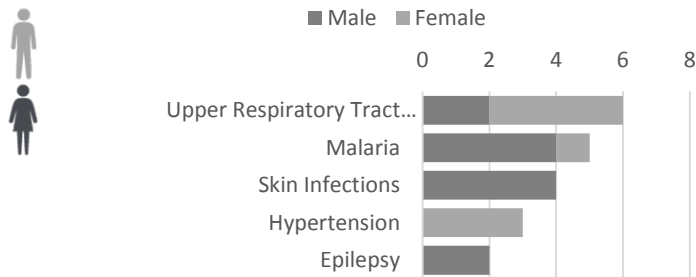
### Health

During the reported period, the fit-to-travel medical screenings carried out by the IOM medical team revealed that 37 cases (16 males, 21 females) required medical care. 12 cases required immediate referral to health facilities in the camps. In Nyarugusu camp, IOM Medical team referred 3 cases to TRC hospital and they were: 1 case of epilepsy, 1 case of acute watery diarrhoea, 1 case of malaria. In Manyovu transit center, IOM Medical team referred 7 cases to IRC clinic and they were: 2 case of hypertension, 1 case of mental disorder, 1 case of moderate malnutrition, 1 case of arthritis, 1 case of abscess, 1 case of otitis media. In Nduta camp, IOM Medical team referred 2 cases to MSF clinic and they were: 1 case of epilepsy, 1 case of self-declared HIV.

Additionally, there were 9 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: Asylum Seekers Boarding Buses for Relocation (IOM)



Photo 2: Provision of Potable Water prior to Relocation (IOM)

