



BURUNDI SITUATION

UNHCR REGIONAL UPDATE 3

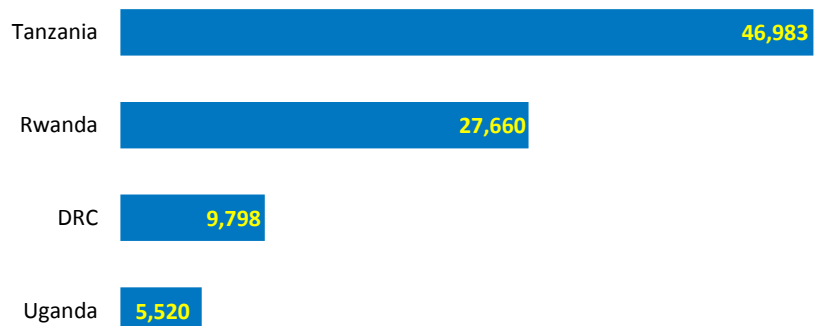
19-25 May 2015

HIGHLIGHTS

- On 22 May, UNHCR and 17 partners launched the Regional Refugee Response Plan (RRRP) to protect and assist up to 200,000 Burundian refugees in the neighbouring countries. Since early April, nearly 100,000 Burundians have fled political turmoil, violence and intimidation and sought safety in neighbouring Rwanda, Tanzania and the Democratic Republic of the Congo. As the situation in Burundi remains tense and violence continues to be reported, UNHCR and partners fear that the number of refugees may double by September 2015. Under the six-month plan, participating agencies have appealed for USD 207 million for basic protection and assistance activities.
- On 18 May, Tanzanian authorities announced the outbreak of cholera among Burundian refugees. Containment measures to deal with a cholera epidemic, that has claimed some 30 lives among refugees and the local community, appear to be functioning with no new deaths reported since 21 May. UNHCR, WHO, and partners are working closely with the Tanzanian health authorities to ensure treatment of patients and to strengthen prevention measures, including improved access to safe water and sanitation.
- Nearly 90,000 Burundian refugees and asylum-seekers have arrived in the neighbouring countries of the Democratic Republic of the Congo (DRC), the United Republic of Tanzania, Rwanda and Uganda since the beginning of April 2015.

Population of concern

A total of **89,961** people of concern



KEY FIGURES

89,961

New Burundian refugees in the neighbouring countries since the beginning of April 2015

23,532

Refugees in Mahama camp in Rwanda (23 May)

36,077

Refugees in Nyaragusu camp in Tanzania (24 May)

PRIORITIES

- Relocation of refugees to safety away from border areas.
- Preparation of refugee sites allocated by governments of host countries.
- Life-saving multi-sector emergency protection and assistance interventions.
- Identification and protection of children including family tracing, family reunification and alternative care arrangements for unaccompanied and separated children.
- Prepositioning of relief items for anticipated mass influxes to neighbouring countries.

RECENT DEVELOPMENTS

Operational Context

- Over the weekend, opposition leaders against the third term mandate of President Pierre Nkurunziza, pulled out of negotiations following the assassination of Zedi Feruzi, opposition leader of the Union for Peace and Development (UPD) party. The coalition accused the government of targeting the opposition leaders for arrest and detention, forced disappearance, torture and inhumane treatment of demonstrators. The UN Secretary-General, Ban Ki-moon, encouraged Burundian stakeholders to “pursue the consultative political dialogue” facilitated by his Special Envoy Said Djinnit and other regional actors, such as the African Union and the East African Community (EAC).

Protection

Achievements and Impact & Identified Needs and Remaining Gaps

DEMOCRATIC REPUBLIC OF THE CONGO

- The number of new arrivals has reached 9,798 (23 May), with 85% located in Uvira territory and 15% in Fizi territory and with over half the population originating from Cibitoke province. The majority, 8,785 people, are being hosted by Burundian refugee families in South Kivu.
- Biometric registration of refugees in collaboration with the Government’s National Commission for Refugees (CNR) continued in Uvira and Fizi territories— as of 23 May 5,814 people had been registered.

RWANDA

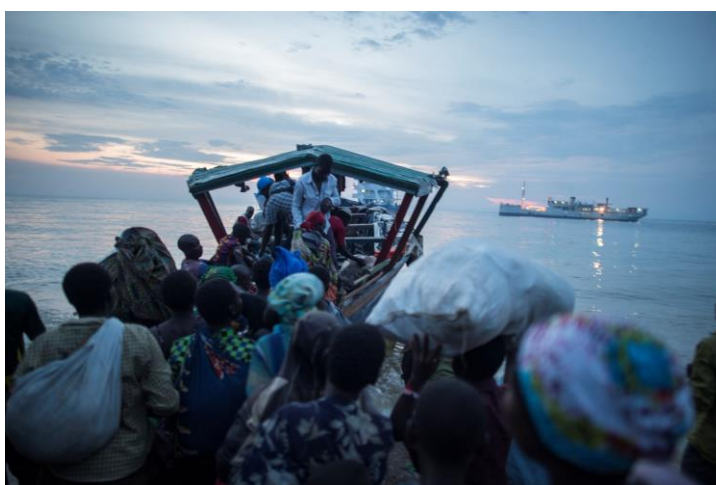
- The number of new arrivals has reached 27,660 (23 May) with the majority, 23,532, relocated to Mahama camp. The arrival rate has decreased over the past few weeks with refugees reporting more roadblocks on the way to Rwanda.

UGANDA

- The number of new arrivals has reached 5,520 (22 May). New arrivals are estimated at 250-300 per day by the Office of the Prime Minister (OPM). The main reason for flight cited by refugees is uncertainty about the future stability of their country. Refugees are reportedly passing through Rwanda and Tanzania to reach Uganda. New arrivals are being relocated to Nakivale refugee settlement where they will receive multi-sectoral assistance.

UNITED REPUBLIC OF TANZANIA

- New arrivals to Kagunga continue to steadily decline, with immigration officials reporting the average of 100 people per day. Nearly 30,000 refugees have been transported from Kagunga since the start of the emergency and over 800 refugees have used the alternate route by walking from Kagunga to Mkigo since 18 May. IOM assists refugees during the walk and provides transportation once they reach Mkigo.
- In a collaborative effort with government, local authorities and humanitarian partners, an individual head count exercise, to establish the current population of Burundian refugees in Kagunga was conducted on 22 May. As of 25 May, a total 3,257 individuals were recorded remaining in Kagunga.



Burundian refugees being transferred from Kagunga to the MV Liemba boat that will take them to Kigoma. From Kigoma they will be transferred to Nyaragusu refugee camp, Tanzania. UNHCR/B. Loyseau.



Health

Achievements and Impact & Identified Needs and Remaining Gaps

DEMOCRATIC REPUBLIC OF THE CONGO

- New arrivals in Kavimvira transit centre and Sange and Mongemonge reception centres with critical health conditions have been referred to the local general hospital. The most widely reported illnesses are malaria, intestinal parasitosis and respiratory infections. Assistance and warm meals are provided to refugees at the hospital.

RWANDA

- There are no reported cases of cholera in Rwanda. Screening upon arrival into the country has started and authorities and aid agencies are looking into the possibility of setting up isolation tents.
- Immunization against measles and polio of 12,000 children below the age of 15 years (40% of population) was launched on 23 May in Mahama camp.
- UNHCR distributes mosquito nets to all families in reception centres, which they then take to Mahama camp. The majority of consultations are malaria-related, followed by respiratory diseases. UNHCR distributes nets on-site to the small numbers of refugees who are brought directly from border districts to the camp.



A mother weighs her baby at a nutritional screening centre for new arrivals in Mahama refugee camp, Rwanda. UNHCR/K.Holt

UNITED REPUBLIC OF TANZANIA

- The cholera situation remains critical but the number of new cases has significantly reduced. As of 24 May, the total number of affected persons due to acute watery diarrhea (AWD) was 4,408. The number of daily infections has steadily dropped from as high as 916 on 18 May to about 100 on 24 May in large part due to the improved water and sanitation situation at the epicenters (Kagunga and Lake Tanganyika (LT) Stadium). MSF Belgium has set up a cholera treatment centre (CTC) in Kagunga, while MSF Switzerland is running the CTC at the LT Stadium. MSF has also proposed to build a CTC in Nyarugusu camp.



Food Security and Nutrition

Achievements and Impact & Identified Needs and Remaining Gaps

DEMOCRATIC REPUBLIC OF THE CONGO

- WFP distributed 17,190 tons of food to refugees in Kavimvira transit centre and the reception centres of Sange and Mongemonge, including cereals, pulses, salt and oil. Additional foods such as manioc flour, vegetables, sugar and spices are being provided to persons with special needs. WFP has also distributed 27.244kg of food for 6,987 refugees living with host families.

UNITED REPUBLIC OF TANZANIA

- A three day food ration was distributed on 25 May in Kagunga for 3,500 people comprising of corn flour, pulses, oil and salt.



Water and Sanitation

Achievements and Impact & Identified Needs and Remaining Gaps

DEMOCRATIC REPUBLIC OF THE CONGO

- Potable water in Kavimvira and Mongemonge is being provided by Oxfam (13,000l per day) and REGIDESO, the national water supplier. Average consumption today is estimated at 19 litres per person per day (l/p/d), above the emergency standard of 15l/p/d.

RWANDA

- In Mahama camp, as of 23 May, 765 latrines had been constructed (31 refugees per latrine) as well as 381 showers (61 refugees per shower). Refugees are receiving 8.7 l/p/d, below the emergency standard of 15l/p/d. Following a request from the government, relocation to Mahama camp was temporarily suspended until assistance, such as water provision, reaches an adequate level. World Vision has confirmed that they have hired 3 more trucks, in addition to the existing six to improve the situation.

UNITED REPUBLIC OF TANZANIA

- In Nyarugusu, 828 latrines and 265 showers have been built. An additional 1,014 showers and 349 showers still need to be built.
- The water storage points have been increased in Kagunga from 7 to 12 water taps providing 43,000l per day.
- As part of support to host community project, Oxfam will be constructing new family latrines for 115 Tanzanian families in Kagunga.
- Emergency latrines will be constructed by UNHCR and UNICEF at the LT Stadium.



Shelter and NFIs

Achievements and Impact & Identified Needs and Remaining Gaps

DEMOCRATIC REPUBLIC OF THE CONGO

- The setting up of the new regrouping site, located in Lusenda/Mboko in Fizi territory is ongoing.

RWANDA

- A shelter strategy and a model for more permanent shelters have been developed for Mahama camp but implementation will be a challenge. The GoR originally allocated 50,000 hectares but this may need to be re-adjusted so as not to compromise UNHCR standards in providing assistance. The office is currently negotiating with the GoR for more land. So far, 3,435 tents have been erected.



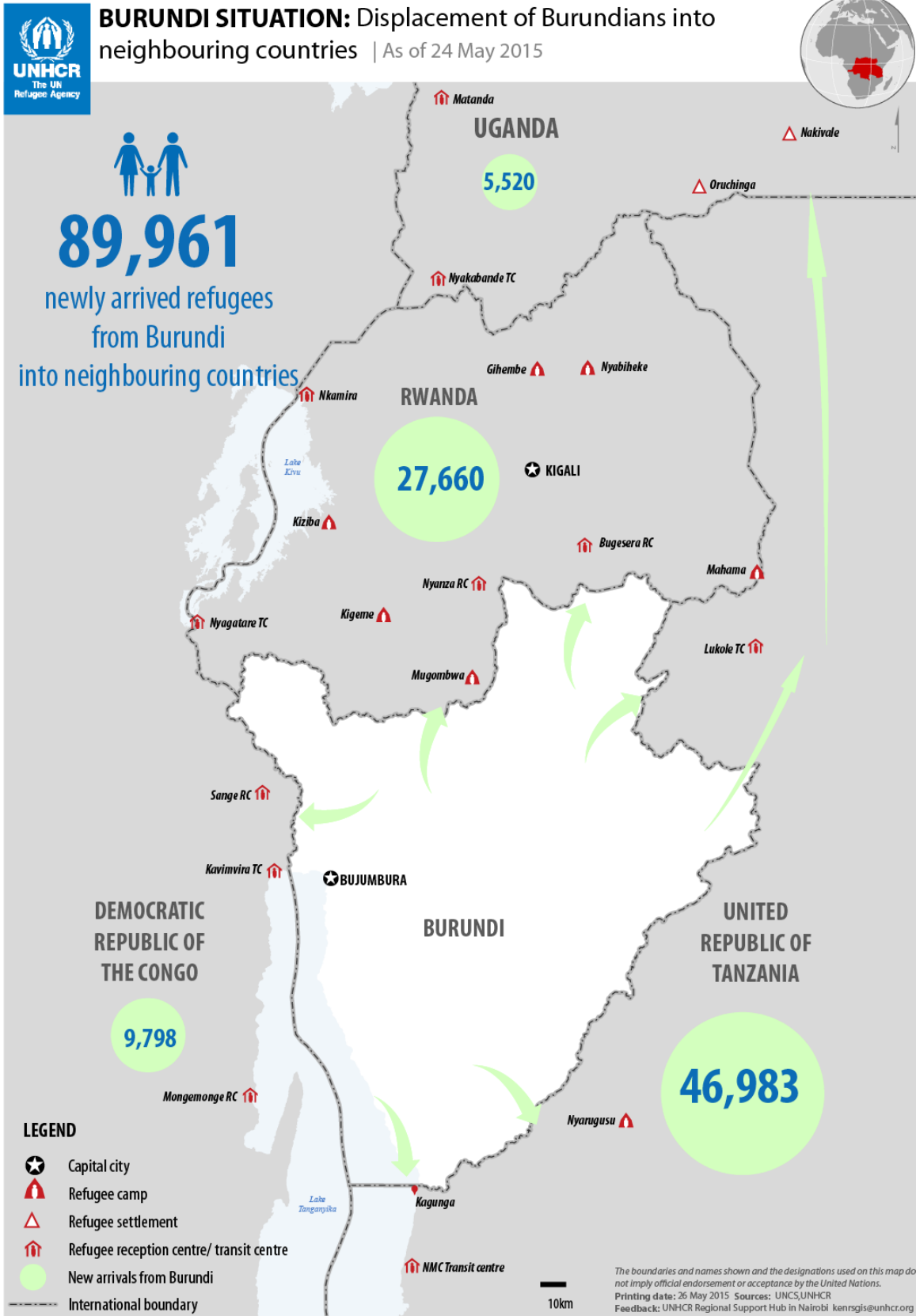
Burundian refugees sit next to the community centre in Kavimvira transit centre, DRC. UNHCR/F. Scoppa

UGANDA

- So far, 1,351 individuals (454 households) have been provided with allocated plots of land and shelter kits. All new arrivals have been provided full NFI kits.

UNITED REPUBLIC OF TANZANIA

- In Nyarugusu, as of 24 May, 1,485 family units had been completed, which can accommodate 11,800 persons. Another 3,515 additional family units need to be completed. The absorption capacity of the camp on a daily basis is 2,200 persons. The key priority is to increase the implementing capacity through supporting current partners, as well as increasing the number of partners.



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