
A: New Arrivals and Reception:

- Of the 5,239 individuals that have fled to Rwanda since the current 2nd wave begun on November 15th, 2013 - **only 4,991 opted to seek UNHCR's assistance** and were **thus transferred to Nkamira Transit Centre (TC)**.
- **As of January 11th, the population at the TC stood at 4, 634 individuals. This figure does not take into consideration those who have already been transferred to Kigeme or reunited with their family members (totalling 357).**
- Women and children constitute 88% of the overall TC population that is made up of 60% females and 40% males
- The reasons for flight, the regions of origin and the targeted population remain the same. Women, who had left their spouses behind, claimed that owing to the situation cited above, they too may be fleeing to join them in due course.
- The Immigration and MIDIMAR officials stepped up their border screening process and during **the first four days of this enhanced screening, up to 17 individuals were screened out**. UNHCR maintains a close monitoring of the border reception activities whereby the said screening shall be maintained to ensure the integrity of the asylum procedure.

Registration:

- The biometric (photo capturing and fingerprints) based registration continued throughout the reporting period. Thus far, 4,736 (95%) have been admitted into the process.
- The on-going registration involve a number of stages that include bio-data collection and processing, best interest assessments for Unaccompanied Minors and separated children (UAM/SC), resolution of litigation cases (decision and processing), counselling and identification of persons with special needs, and the review of each physical file to ensure the quality of the data being captured. The process ends with the issuance of a ration cards as well as a proof of registration document. So far, 30% of the admitted population have finished the said process.
- Thus far an overall number of 368 individuals have been identified during the registration process as persons with specific needs which include UAM/SC, elderly, women at risk, and persons with disabilities.

B: Sectoral Issues

1. Protection and Community Services

Sexual and Gender Based Violence (SGBV):

- Since the start of the sensitization campaign by the Community Health Workers - a total of ten (10) SGBV cases have been reported all of which occurred in the DRC prior to flight. All cases have been referred to the Health Implementing Partner “AHA” and transferred to Gisenyi hospital for medical examination. **UNHCR and UN Women** are looking into the provision of confidential counselling space at the TC.
- Community based mechanisms for the identification and support for persons with specific needs (SPN) have been put in place and will work through the existing refugee executive committee and other thematic refugee committees as well as animators.

Child Protection:

- 276 best interest assessments (BIA) of separated and unaccompanied minors have been conducted - out of which 8 children have been transferred to Kigeme camp for family reunification, 12 have spontaneously reunified in Nkamira TC. Out of 256 remaining children, 55 are unaccompanied and 201 are separated (153 girls and 136 boys). 62 children were referred to AHA for medical referral.
- **UNICEF, Save the Children, Care International, ICRC and UNHCR** met on 11th January to comprehensively review the situation of unaccompanied minors and separated children and determine how to provide comprehensive intervention in the immediate to mid-term basis. Recognizing that the situation of UAM/SCs is critical and the needs great the following was agreed:
 - ICRC will field a team of two staff as of Monday 14th January to conduct family tracing.
 - Save the Children will establish a child protection desk.
 - UNICEF is planning to put in place activities for children under five, but also recreation and orientation activities for those children between ages of 5-17 (including psycho-social activities for all children).
 - A more rigorous mentorship system termed “Nkundabana Plus” will be put in place through Save the Children.

2. Health and Nutrition

- A multi-functional, multi-agency rapid health and nutrition assessment took place on Monday 7 January in order to provide a comprehensive assessment of the needs. **The team included GoR, UNICEF, WHO, UNWOMEN, WFP, UNFPA, UNHCR and AHA.** The immediate action taken by the team was to request for the immediate establishment of supplementary feeding programme for children. **WFP** has just delivered the supplementary food items for 100 individuals on 9 January 2013.
- **Morbidity & Essential drugs:** The TC’s Dispensary had a daily average consultation rate of 120. The main causes of morbidities are acute respiratory infections and watery diarrhoea. Initial essential drugs were provided by AHA. **WHO** has provided emergency health kits that contain drugs and basic medical supplies.

- **UNICEF** has already requested **MoH** for measles vaccines, Vitamin A Supplementation and De-worming tablets which will be used in the mass campaign scheduled to take place 17-18 January. In tandem with the mass campaign, a nutritional assessment will also take place. **WFP** will provide the assessment tools.
- **Nutrition:** The screening of under 5 children using MUAC is being done at the registration center. Out of 901 children screened thus far, 85 (9.4%) were found to be moderately malnourished while 10 (1 %) were severely malnourished. The distribution of CSB ++ to moderately malnourished children have already begun. Severely malnourished children with medical complication are being treated at Gisenyi District Hospital. Those without medical conditions are receiving plummy nuts provided by **UNICEF**.

3. **Shelter and Infrastructure**

- Following an assessment mission to the TC conducted by **ADRA**, the rehabilitation of 32 hangars is set to begin next week. A potential partnership between **ADRA** and **World Vision** aimed at raising funds for the partitioning the factory (to provide for family blocks) is developing and an assessment mission to determine the costs is planned for this week. **The current capacity of the TC has surpassed by over 1,000 individuals.**
- To augment the security of the TC, discussions with MIDIMAR at Kigali level have been initiated as there is an urgent need to repair the 642 meters perimeter fence. The re-examination of the security personnel's strength at the TC is also being advocated for with a recommendation to increase the number.

4. **Supply, Food and NFIs:**

- Preparations for the General Food Distribution starting on January 14th have been finalised. The pre-positioned food thus far is sufficient for 4,000 refugees – however, the targeted feeding figure is beyond that. **WFP** is looking into this matter.
- The General Distribution of blankets and sleeping mats adjusted to align with the standards was put on hold pending further assessment.

5. **Water, Sanitation and Hygiene:**

- Subsequent to **UNICEF**'s comprehensive assessment on WASH facilities in Nkamira TC, Aqua Virunga was hired by **UNICEF** for the immediate emptying of five (05) latrines, the rehabilitation of the latrine structures as well as a transit centre wide disinfection to avoid the spread of any disease. **All five latrines have now been emptied.**

Key Issues

The first High Level Coordination Meeting resumed on Tuesday 8 January in Gisenyi. The meeting was chaired by the Permanent Secretary of MIDIMAR and the UNHCR Representative. It was agreed that the high level meetings are henceforth resumed in light of the new influx. The meeting discussed, reviewed and identified the work done to date and the gaps, and partners pledged their support in specific areas.

Contacts

Yvette Jallade, Associate External Relations Officer, jallade@unhcr.org, +250 (0)788 302 705
 UNHCR Representation in Rwanda, opposite MTN Centre, Nyarutarama, Kigali, P.O. Box 867
www.unhcr.org ; www.unhcr.fr