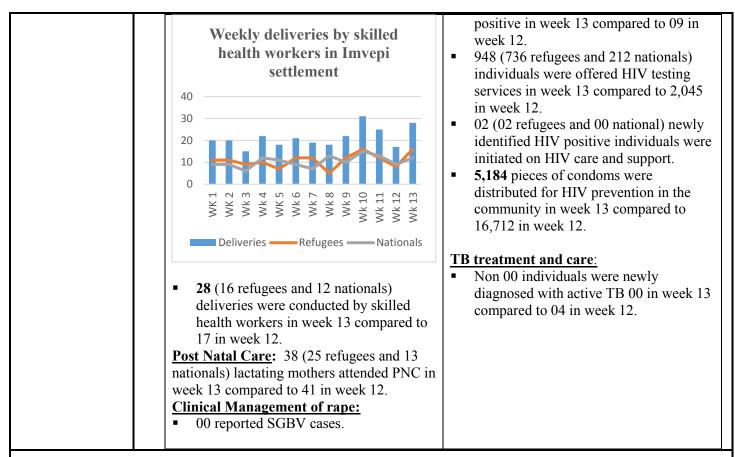
Imvepi Refugee Settlement

Health and Nutrition updates-Week 13 (22nd to 28th March 2018)

							Hea	lth & Nutr	itic	n						
Internatio	onal	(SC	I), N	Medicine	s Sans F tors with	Frontiers Find Africa, U	ranc ganc	e (MSF-F) da Red Cro), G əss	lobal Socie	Refuge In ty (URCS	nterna	ationa	al (O	GRI),	ave the Children CARE Uganda Il Organization
 (TPO), Infectious Disease Institute (IDI) OPD Consultations: 3,575 (3,040 refugees and 535 nationals) new OPD made in week 13 compared to 2,986 in week 12 (16% increase in week 13 12). Of which 3,040 (85%) were to refugees and 535 (15%) to nationals. Mental Health and Psychosocial Support Services (MHPSS): 22 new revisit clients received MHPSS in week 13 compared to 07 in week 12. T cases being post-traumatic stress disorder, depression and depression. IPD admissions: 102 (55 refugees and 47 nationals) new In-patients adm in week 13 compared to 68 in week 12. New referrals: 22 (17 refugees and 05 national) new referrals were made Regional Referral Hospital compared to 54 in week 12. 						k 13 a ls. ew cli 2. The idmiss	nd 15% in week ients and 03 major psychiatric ions were made									
Morbidity			 Proportional Morbidity: 1,113 (31%) confirmed malaria cases 1,064 (30%) Acute RTI 189 (5%) Watery Diarrhoea 05 bloody diarrhoea cases. 								Is in Imvepi RC: <5 year were red to 251 in week 2 against Polio, 14 ceived Vitamin A vormed) unization: nated in week 13 pplementation in reek 12.					
Disease	A F P	An ma bit	1	C H O L E R A	B L O D Y diarr hea	Watery diarrhe a	G u i e a W o r m		M e s l e s	M E	Yello w Fever	N N T	V H F & R V F	T y p h o i d	M D R T B	Human Influenza samples
cases	0	0		0	5	189	0	1,113	0	0	0	0		0	0	0
Deaths	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0

Suspect cholera Cases Identified in the Day	0	Suspect cholera Cases Undergoing Treatment		0		
Suspect meningitis Cases Identified in the day	0	Suspected meningitis Cases Undergoing Treatment	0			
Suspect measles Cases Identified in the day	0	0 Suspected measles Cases Undergoing Treatment				
Suspected VHF/RVF identified in the week	0	Suspected VHF/RVF on treatment in the week		0		
Mortality	Ality Deaths: 01 deaths reported in week 13 compared to 00 in week 12. None 00 death was among < 5 years and 01 among above 5 years. 01 death was from health facility and 00 from the community. 00 neonatal death and 00 maternal death. Crude mortality rate (CMR): 0.01 deaths/10,000/day in week 13 compared to 0.0 deaths/10,000/day in week 12. Under Five Mortality (U5MR): 0.0 Deaths/10,000/ day in week 13 as was in week 12 and 11.			Total # skilled staff 53 (Medical officer, clinical officers, Nurses, and midwives). This translates to 4.2/10,000 population. Given the current population of Imvepi 128,249 (21,513 children < 5 years) as at 23 rd March 2018.		
Reproductive Health, HIV and AIDS and TB care	 Total ANC: 319 (226 ret compared to 280 in week First ANC visits: 154 (2 week 13 compared to 128 	x 12 (12% increase 128 refugees and 2 8 in week 12 (17% (39 refugees and 0 pared to 40 in wee	26 nationals) pregnant mothers attended first ANC in 6 increase). 09 nationals) pregnant women attended 4 th ANC			

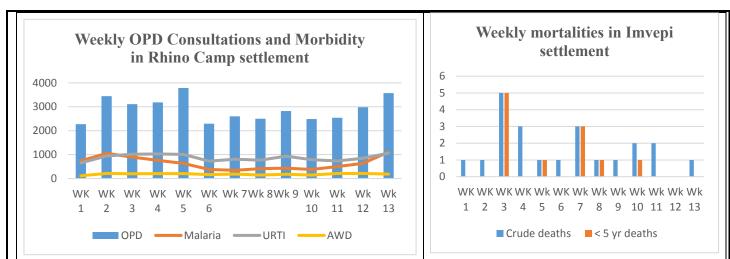


Achievements and Impact

OPD Consultations:

- 3,575 (3,040 refugees and 535 nationals) new OPD consultations were made in week 13 compared to 2,986 in week 12 (16% increase in week 13 and 15% increase in week 12). Of which 85% of the new consultations were to refugees and 15% to nationals. The weekly proportional morbidity shows that the leading cause of morbidity in the week was malaria 31%, follow up by Respiratory tract infections with 31%, and watery diarrhoea 5%.
- Therefore malaria, URTI and diarrhoeal diseases accounted for 66% in week 13 compared to 57% in week 12.
- The incidence of malaria, acute RTI and watery diarrhoea is estimated at 9 cases/1000 persons/week, 9 cases/ 1,000 persons and 2 cases/1000 persons /week respectively. During the week preventive measures through 110 active VHT's including mobile clinics and outreaches for treatment of malaria and other conditions were conducted.

I	 Mortality and Morbidity: 	
	Weekly OPD Consultations and Morbidity trends in Imvepi	Weekly Mortality trends in Imvepi settlement
	settlement	



In week 13 there was 01 death compared to 00 in week 12. There was no 00 deaths among <5 years and 01 among > 5 years. 00 deaths from the community and 01 from the health centres. 00 neonatal death and 00 maternal deaths. Therefore, Crude Mortality Rate (CMR) remained 0.01 deaths/10,000/day and under-5 year mortality ratio (U5MR) was at 0.0 deaths/10,000/day below the emergency threshold of 1 and 2 deaths/10,000/day respectively.

Community based Control of Disease Outbreaks:

- 00 suspected diseases of outbreak potential were reported from Imvepi settlement in week 13 from week 05.
- 00 suspected rift valley fever/ viral haemorrhagic fever cases was reported in week 12 from week 08.
- Surveillance was further maintained through 110 trained and active village health teams (VHT's) spread out in the settlement and weekly analysis of Health Information system reporting continued in the week(see priority diseases surveillance).

Medical screening of new arrivals:

- 274 new arrivals were medically screened at the Kuluba in week 13 compared to 221 in week 12.
- 324 individuals in Imvepi reception clinic were medically screened in week 13 compared to 279 in week 12.

TB screening at Imvepi reception:

 Routinely all coughing new arrivals are taken sputum samples for geneXpert through hub laboratory in Arua regional referral hospital and Yumbe hospital.

Other updates and activities of the week:

- Health messages for new arrivals regarding morbidity, healthcare in the settlements passed to new arrivals while in transit to the settlements.
- MTI conducted 5 medical outreaches in week 13 and reached 362 individuals in the community with medical care and support.
- MSF-F continued to conduct surveillance, mental health and SGBV support services in Imvepi settlement in week 12.
- Global Refuge International (GRI) continued to conduct routine OPD services at point I zone 2 and supported 652 individuals in week 13 compared to 483 in week 12.

Mental Health and Psychosocial support services:

TPO continued to support mental health and psychosocial support services.

World TB day celebrations

UNHCR, Arua district health office, MTI and other partners joined MOH Uganda in National World TB day celebrations on 24th March 2018 with the theme "Leaders for a TB-free Uganda" and slogan "Act to End TB now".

Capacity building of health workers

• 15 health workers from Yinga HCIII were trained by CEFORD and MTI in universal precautions and medical waste management.

Monthly Health Information systems data review

• MTI conducted review of monthly HIS data, to encourage HIS data use, correct data collection, analysis and reporting among 14 staff in Yinga HCIII.

Identified Needs and Remaining Gaps:

• No major challenges reported in week 13.

Nutrition Partners and Agencies: World Food Programme (WFP), UNHCR, UNICEF, ADLG/DHO, Medical teams international, CUAMM Doctors with Africa, Action Against Hunger (ACF), Global Refuge International (GRI), and Save the Children International (SCI).							
Imvepi Reception Center Weekly Proxy Global Acute Malnutrition among children 6-59 months, MUAC (< 125 mm and/or oedema Imvepi reception centre screened 95 new arrivals and (03 MAM and 01 SAM) 20 pregnant and lactating mothers (02 < 23 cm and 18 > 23 cm)	4.2%	Community: overall weekly Proxy Global Acute Malnutrition among children 6-59 months, MUAC (< 125mm and/or oedema) Overall settlement 1,537 (1,417 refugees and 120 nationals) screened of which (28 MAM and 03 SAM)	2.0%				
	Food Assista	ance					
General Food Distribution Imvepi (kilocalories/person/day) Cereals (sorghum) 12kg, Pulses 2.4Kg, Corn soya blend (CSB) 1.5Kg, Vegetable oil 0.9Kg, Salt 0.15Kg. 2100Kcal/person/day FBM: 94% within acceptable and 6% above and 0% below	2100	New arrivals ration (kilocal /person/day)	2100				

Achievements and Impact

95 children less than 5 years and 20 pregnant and lactating women (PLW) in week 13 compared to 76 less than 5 years and 17 PLW were screened for their nutritional status respectively at Imvepi reception center in week 12.
 03 moderately malnourished (MAM) and 01 severely malnourished (SAM) and 02 mother pregnant and lactating had MUAC < 23 cm (moderately malnourished) were identified.

Narrative

- Similarly, in the entire Invepi settlement, 1,537 children under 5's nutritional status was assessed in week 13 compared to 3,459 in week 12. There were 28 MAM and 03 SAM without complication cases identified. Overall weekly proxy Global acute malnutrition among children 6-59 months screened in Invepi settlement was 2.0% in week 13 compared to 0.5% in week 12.
- 28 and 03 new malnourished children were enrolled in SFP and OTP in week 13 compared to 14 and 05 in week 12 respectively. All the identified malnourished were initiated on therapeutic feeds and have been linked to Omugo extension settlement.
- In week 13, twenty eight 28 (22 refugees and 06 nationals) were exited from targeted SFP and 19 (16 refugees and 03 nationals) were cured and 05 (03 refugee and 02 national) defaulters registered and 04 (03 refugees and 01 national) non-respondents. Therefore recovery rates for refugees was 16 (73%) and for nationals 03 (50%). Defaulter rates was 03 (14%) for refugees and 02 (33%) for nationals. Death rates among both refugees and nationals was 0(0%) and non- response rates of 03 (14%) for refugees and 01 (17%) for nationals.
- Similarly, 06 (05 refugees and 01 nationals) individuals were exited from the OTP in week 13. Of which 05 (03 refugees and 02 nationals) were discharged cured. Therefore, the recovery rates of 05 (83%), 1 (17%) defaulter rates and 0 (0%) non-response rate.

<u>Community nutrition activities</u> Maternal Child Health Nutrition:

 MTI continued to conduct maternal child health nutrition (MCHN) for pregnant and lactating mothers and children 6-23 months in the settlement.

Nutrition and IYCF-E education

 MTI continued to reach community members with nutrition and WASH practice messages, child feeding and optimal IYCF-E practices.

Infant and Young Child in Emergency activities:

IYCF through mother baby areas:

During the week SCI continued to run 2 MBA's in Invepi settlement serving pregnant and lactating mothers with
optimal breast feeding promotion messages.

Distribution of hygiene (IMAM) kits:

 Action Against Hunger (ACF) continued to distribute hygiene kits for IMAM beneficiaries comprising of Containers for water collection and storage, chlorine tablets and bathing soap.

Identified Needs and Remaining Gaps

 High defaulter rates among both refugees and national in supplementary feeding program and among nationals in OTP. Routine follow up using nutrition staff and Village health team members in the community is carried out to bring back on program lost beneficiaries.