

BURUNDI SITUATION

June 2017

In June, close to **3,000 newly arrived Burundian refugees and asylum seekers** were recorded in the region.

Land unavailability and camp congestion remain critical issues in Tanzania, Rwanda and DRC. In Rwanda, malaria is rising in Mahama Camp while measles has plagued Lusenda Camp.

In Tanzania, immigration authorities continue to screen asylum seekers at the border, with the first RSD exercise taking place in mid-June in Nduta Camp, Kibondo District.

KEY INDICATORS

418,080

Burundian refugees and asylum seekers who fled since 1 April 2015

61%

of Burundian refugees in DRC are minors

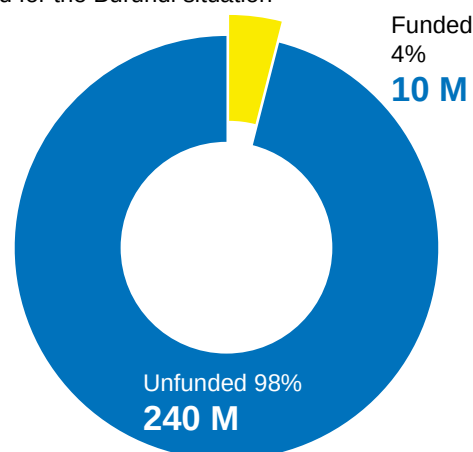
534,000

Projection of Burundian refugees by the of end 2017, while the total returns figure is expected to rise to **50,000** (RRP Planning Figures)

FUNDING (AS OF JUNE 2017)

USD 250 M

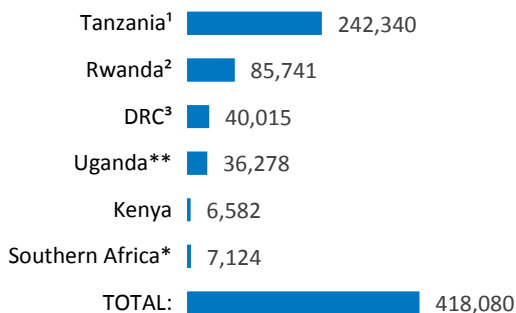
requested for the Burundi situation



POPULATION OF CONCERN

Host Countries

Note: Figures reflect current number of registered Burundian refugees and asylum seekers (Tanzania) since 1 April 2015



¹ /Nyarugusu: 66,234 / Nduta: 126,211 / Mtendeli: 49,839 / Transit Centre: 56

² /Mahama: 53,858 / Urban (Kigali + Huye): 31,553 / Reception Centres: 330

³ /Lusenda: 30,036 / Out of camp/RCs: 9,979 /

* /Based on Government figures (partially or entirely) / ** Since 1 Jan. 2015

New Arrivals

in the major hosting countries of Burundian refugees and asylum seekers (note: these do not account for returns)

	12 months from 1 January 2016 to 31 December 2016	5 months from 1 January 2017 to 30 June 2017
TANZANIA	84,319	36,679
RWANDA	12,468	3,793
DRC	11,665	7,380
UGANDA	14,245	3,226
TOTAL	122,697	51,078

Operational Context

- In Burundi, **political deadlock** remains while reports of human rights violations continue to surface. The newly appointed UNSG Special Adviser on the Burundi conflict, Michel Kafando, in his recent visit to Burundi has called on all parties to collaborate to find a solution to the crisis.
- The new **Regional Refugee Coordinator (RRC) for the Burundi situation**, Ms. Catherine Wiesner, has been appointed by the High Commissioner for Refugees, and will be taking up her appointment on 1 September 2017, based in Nairobi. As the RRC for the Burundi situation, Ms. Wiesner will work with UNHCR Offices in Burundi, Tanzania, Rwanda, Uganda and DRC as well as all partners to ensure an overarching vision and coherent engagement across the region in pursuit of protection and solutions for the Burundian refugees.
- An **increasing number of self-organized returns** of Burundian refugees were recorded with refugees citing harsh camp conditions in countries of asylum. In June, **328 Burundians returned** (248 from Tanzania, 75 from Rwanda, 4 from Uganda), an increase from **59 self-organized returnees** in May.
- According to the **Displacement Tracking Matrix** report from the International Organization of Migration (IOM), Burundi hosts 209,202 IDPs including 69,734 individuals linked to the current crisis, as of May 2017.
- Since **Tanzania** revoked *prima facie* status on 20 January 2017, the Government initiated an individual Refugee Status Determination (RSD) exercise for asylum-seekers from Burundi in mid-June 2017 in Nduta Camp, for a total caseload of over 26,000 asylum seekers. The first session of the ad hoc Committee for the determination of refugee status for the Burundian asylum-seekers commenced on 17 June and will end on 10 July 2017.
- **In DRC**, while Burundian refugees continue to arrive, and Lusenda camp remains congested with 440 refugees living without shelter, the precarious security situation in the southern part of South Kivu, has led to a temporary suspension of works on the new camp site of Mulongwe.
- The **Burundian Refugee Situation** continues to be severely under-funded at approximately 4 percent out of the total requirement of USD 250 million, making it one of the most underfunded refugee emergencies worldwide. Funding constraints continue to pose challenges for the provision of basic humanitarian services across the region.



A Burundian refugee mother and her child sit down for a meal of fufu and beans at the gathering point of Sange, DRC. © UNHCR / C.Veale

Achievements

TANZANIA

- There are now a total of **242,340** Burundian refugees and asylum seekers who arrived since 1 April 2015. In June, **377** Burundian asylum seekers entered Tanzania with an average daily arrival rate of 12 individuals (May monthly arrivals totaled 311, with an average of 9 arrivals per day). While the screening by the immigration authorities at the border continues, the percentage of asylum-seekers who have been admitted to the territory is slightly higher compared to the previous month. However, numbers have been continuously decreasing since January and are now at a significantly reduced level compared to the number of average monthly arrivals in 2016 of approximately 5,000 refugees.
- **Overcrowding in camps** continues to hamper humanitarian efforts to provide basic and dignified conditions. Burundian refugees are hosted across three camps in the Kigoma region: Nduta, Nyagurusu and Mtendeli. As Nyagurusu and Mtendeli have reached their maximum capacity, Nduta is the only camp currently receiving new Burundian arrivals. Nduta which is currently sheltering 126,211 refugees and asylum-seekers will soon reach its 127,000 revised maximum capacity and faces the greatest pressure.

- There remains a critical need for additional funding for **Transitional Shelters** as 67 per cent of the refugee population still live in emergency shelters. With the current funding level, a total of 18,437 refugee households will be covered within the 2016-2017 Transitional Shelter Project, which represents only 38 percent of the current number of households in need, i.e. 48,452.
- UNHCR in collaboration with nutrition partners and support from UNICEF conducted Vitamin A, deworming and mass Mid-Upper Arm Circumference (MUAC) screening campaign in Nyarugusu, Nduta and Mtendeli camps from 13 - 18 June 2017 targeting refugee children aged 6 months to 5 years. There is a critical need to increase the **access to health and nutrition services** in Mtendeli, Nduta and Nyarugusu refugee camps through establishing additional health posts as well as expanding and renovating the existing health and nutrition facilities.
- The Crude Mortality Rate (CMR) and Under 5 Mortality Rate (U5MR) stood at 0.3 death per 1,000 persons per month and 0.7 death per 1,000 persons per month during the year across all camps (better than the minimum SPHERE standards). **Malaria remains the leading cause of morbidity** representing 45 percent of the Crude Proportional Morbidity Rate.
- **Inadequate quantity of water supply at Mtendeli camp** remains a challenge. Refugees are receiving an average of 13.6 liters per person per day (UNHCR standard: 20l) due to erratic water supply from the six boreholes while further plans for drilling of boreholes is in progress.
- **General Food Distribution contains 80% of the meal ration** across Nyarugusu, Nduta and Mtendeli Camps due to funding shortfalls for WFP. Efforts continue to restore the ration to 100%. An expanded pilot of the Cash Based Transfer (CBT) will be rolled out by WFP, with first distributions beginning on 10 July. This will be distributed to a total of some 17,000 Burundians.

RWANDA

- There are now a total of **85,741** registered Burundian refugees in Rwanda hosted in Mahama camp, in reception centre and in urban areas. In June, **528** new arrivals were recorded, a 2% decrease from May. 67% of the June new arrivals were received in the reception centers and camps while the remaining caseload settled in urban areas (mainly Kigali and Huye). The average daily arrival rate in June was 18 individuals per day while over the last 6 months of 2017, it has been 21 individuals per day. A total of 3,793 new arrivals have been received in 2017.

- Burundian asylum seekers who had arrived since April 2015, but who had not yet registered for asylum in Rwanda have been allowed to register as refugees and have not been subject to deportation. UNHCR is encouraging that these Burundians, after registration and documentation as refugees, are allowed to go back to the villages in Rwanda where they had started to live productive lives, own property, and are living with their Rwandan family instead of moving to a refugee camp.
- **As there is insufficient space /land within Mahama camp perimeters** to construct new shelters as well as latrines, an additional 30ha needed. A total of 5,172 individual semi-permanent shelters have been constructed to date in Mahama. However, 17,151 individuals are still living in communal shelters in Mahama camp which are generally in poor condition and require rehabilitation. Semi-permanent shelters need plastering to enhance their durability. Communal tents at Gatore reception centre also need to be rehabilitated.
- While **water consumption is high** due to the dry season and the need to water kitchen gardens, repairs to the water treatment plant in Mahama have been completed. In the meantime, water was being sourced from a temporary plant. Sanitation facilities are still lacking; 11 blocks of latrines were completed and 43 latrine blocks are currently under construction. UNHCR also began the distribution of potable water to host communities.
- **Malaria is on the rise in Mahama**; 50% of people who are being screened are positive for the disease. Screening and treatment campaigns are organized with Kirehe District, WHO and the refugee community. Kirehe District has provided additional manpower (doctors, nurses) to address cases in Mahama, for which humanitarian partners are grateful.

DEMOCRATIC REPUBLIC OF THE CONGO

- A total of **40,015** Burundian refugees are registered in the DRC since 1 April 2015. UNHCR registered **102** new Burundian refugee arrivals this month (May: 1,379 arrivals). The decrease is due to a temporary suspension of registration activities by the CNR (Commission Nationale pour les Réfugiés). UNHCR is closely monitoring the situation.
- **Asylum seekers remained outside UNHCR hosting structures due to a lack of space.** Relocating refugees to individual shelters is currently difficult due to a lack of shelters, as Lusenda Camp is full. New temporary dormitories are being built in Lusenda Camp which has enabled the relocation of 219 people from Sange to Lusenda Camp. In June, the number of refugees who were outside of camp structures was reduced from 1,017 to 440.

- **Progress on the new site of Mulongwe** (Fizi Territory, South Kivu) continues with preparations for clearing and parcelling out the land for shelters. The site plan has been discussed with all relevant actors (Comision Nationale pour les Refugies, Agence de Développement Economique and Social (ADES), African Initiative for Relief and Development) were involved and finalized. Currently, access to the site is restricted due to the conflicts taking place in the South Kivu region since late June, and preparations are on hold until the security situation improves.
- **A measles outbreak has plagued Lusenda Camp** since the beginning of June. A vaccination campaign for children between 6 months and 15 years old by partner ADES, with the support of MSF Holland, is planned for the beginning of July.
- According to medical consultations carried out by ADES in June, the most frequent diseases across Lusenda Camp and Kavimvira Transit Centre, Sange and Mongemonge Transit Centre were malaria, respiratory infections, and intestinal parasites.
- Starting in July, WFP intends to replace paper vouchers with electronic cards, to give refugees more freedom to buy food supplies during the whole course of the month.
- Focus group discussions with refugees are ongoing to review the main community structures (child protection, SGBV) and leadership in Lusenda camp.

UGANDA

- The total number of Burundian refugees in Uganda in June stands at **36,278**. The majority of Burundian refugees entered Uganda through Mutukula, Mirama Hills and Katuna borders.
- In an effort to curb the trend of incidents of **SGBV** in an environment in which survivors face stigma and discrimination from family members and the community, partners, community action groups, cultural and religious leaders and drama groups rolled out the SASA! Faith initiative which uses the SASA! Methodology to prevent and respond to SGBV. These methodologies were developed in Uganda and have been evaluated and are seen to be among the most effective in fostering an attitude change, leading to a sustained reduction in SGBV.
- In Nakivale, access to **safe drinking water** stands at 18.1 l/p/d (UNHCR standard: 20l). The average water available per person per day in the Burundian emergency villages is at 21.1 l/p/d. The settlement's latrine coverage was at 73.4% while for emergency villages it stands at 71%.
- There is an urgent need to **increase capacity building for child protection committees** to strengthen child protection, including provision of non-food items such

as mattresses and warm clothing for children at risk, more support to foster parents and training for police.

Financial Information

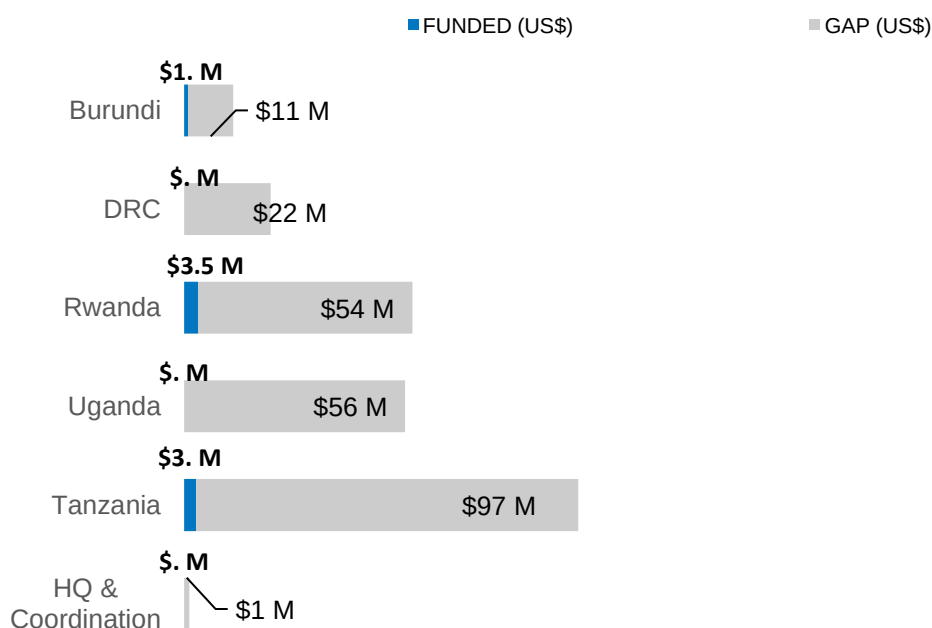
UNHCR is very grateful for the financial support provided by donors who have contributed to their activities with un-earmarked and broadly earmarked funds as well as for those who have contributed directly to the operation.

Donors who have contributed to the Burundi Situation:

- African Union
- Denmark
- European Union
- France
- Germany
- Private Donors USA
- Sweden
- The Global Fund

Funding (in million USD)

A total of US\$ 10 million out of the US\$250 needed has been funded (4%)



Special thanks to the major donors of unrestricted and regional funds in 2017

United States of America (95 M) | Sweden (76 M) | Netherlands (52 M) | Norway (41 M)
| Priv Donors Spain (24 M) | Denmark (23 M) | Australia (19 M) | Canada (16 M) |
Switzerland (15 M) | France (14 M) | Germany (12 M) | Priv Donors Republic of Korea
(12 M)

Thanks to other donors of unrestricted and regional funds in 2017

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LINKS

<http://data2.unhcr.org/en/situations/burundi>
<http://reporting.unhcr.org/node/8488>

Burundi Situation

Displacement of Burundians into neighbouring countries since April 2015

as of 30 June 2017

