



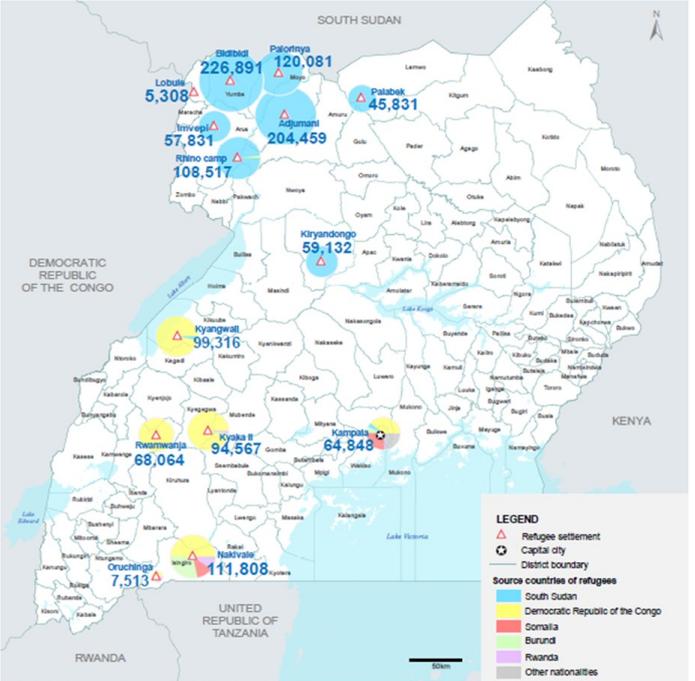
Total refugees and asylum-seekers  
**1,276,208**

Countries of origin

SOUTH SUDAN	825,492
DRC	346,527
BURUNDI	40,642
SOMALIA	30,184
RWANDA	15,438
OTHERS	17,925

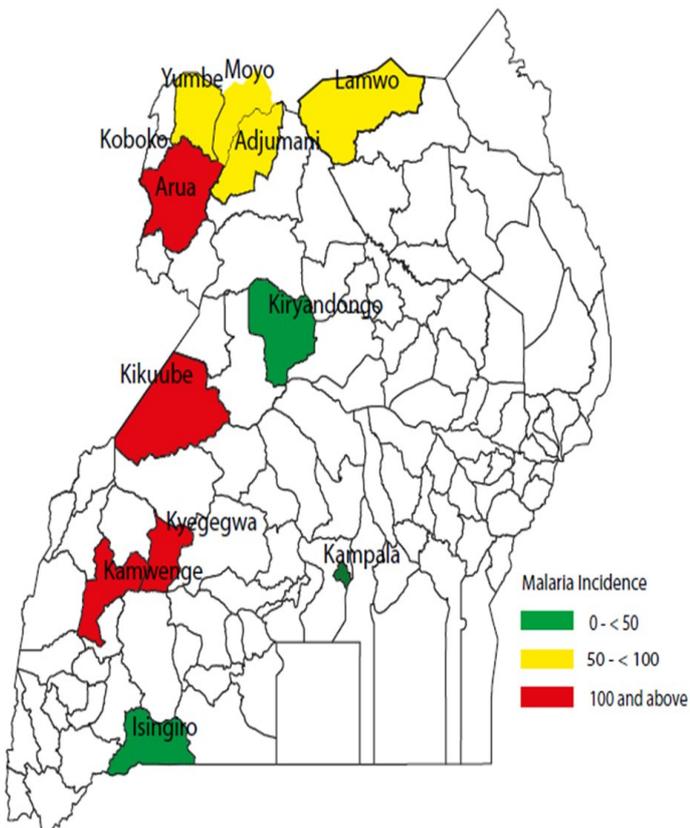
Refugees per settlement

BIBIBI	18%
ADJUMANI	10%
PALORINYA	8%
SARUYALE	8%
RHINO CAMP	8%
KYANGWALI	7%
KYAKA II	5%
MVEPI	5%
KAMPALA	5%
KIRYANDONGO	5%
RWAMWANLA	5%
PALABEK	5%
ORUCHINGA	0.8%
LOBULE	0.4%

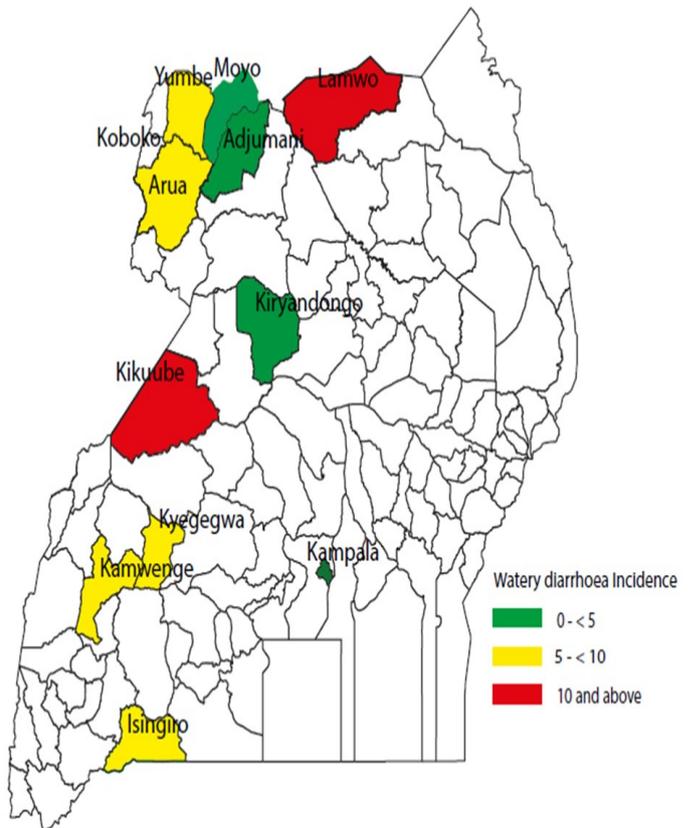


Refugee Health report  
UGANDA  
May 2019

Malaria incidence across settlements



Watery Diarrhoea incidence across settlements



## Health & Nutrition key highlights

A total of 241,134 consultations were made in all the refugee serving health facilities in the refugee settlements in Uganda compared to 167,225 of April 2019. 78% of the consultations were Refugees and 22% were the host populations. Malaria 42.1%, URTI 12.3%, LRTI 6.6%, Skin diseases 6.5% and Watery diarrhea 3.6%

8182 were admitted in the patient wards in the health clinics out of which 67% were refugees and 33% were the host population. The main causes for admissions were malaria at 56%, LRTI at 7%, watery diarrhoea at 3%, malnutrition at 1% and 30% were due to other causes not categorized.

3719 (68% Refugees) children under 5 years were vaccinated against measles and 4418 (79% Refugees) completed the polio vaccination.

A total of 4142 in May compared to 3933 in April deliveries were registered during the month of which 62% were refugees and 38% were nationals

Out of the 16,112 who were tested for HIV, 274 tested positive and were enrolled into HIV care and treatment. The total number of patients on ART by end of December stood at 16304 of which (35%) are refugees and (65%) are host population.

Held the Refugee health and Nutrition coordination meeting at Ministry of Health with partners where assessment results in the refugee settlements were discussed, FSNA updates shared, Partner mapping updated, Refugee response plan updates shared and updates from partners were shared as well.

### Summary of indicators



#### OPD consultations

<b>Total OPD Consultations:</b>	241,134
<b>Refugees:</b>	188,084 (78%)
<b>Nationals:</b>	53,050 (22%)
<b>Consultation/Clinician/day:</b>	64 ( Standard: 50)
<b>Top morbidity causes:</b>	Malaria 42.1%, URTI 12.3%, LRTI 6.6%, Skin diseases 6.5% and Watery diarrhea 3.6%



#### Disease surveillance and outbreak

- ◆ By end of May 2019, No Ebola case registered in Uganda so far following the outbreak in DRC. 2 alerts of Ebola were investigated and the results were all negative for VHF in Kyaka II settlement
- ◆ Intensified boarder point screening for EVD at all points of entry and cross boarder movement screening especially at boarder market places



#### In Patient department

◆ <b>Total admitted:</b>	14,131
◆ <b>Refugees:</b>	9,424(67%)
◆ <b>Nationals:</b>	4,707 (33%)
◆ <b>Hospitalization rate:</b>	89.5 (Std 50—150)
◆ <b>Bed occupancy rate:</b>	83.7% ( Std 75%)



#### Referrals & Mortality

◆ <b>Total referrals:</b>	1,899: <b>Referral rate:</b> Emergency 0.2, District 0.7, Regional 0.5%, National 0.1
◆ <b>Crude mortality rate:</b>	0.11 (Standard: < 0.75)
◆ <b>Under 5 mortality rate:</b>	0.22 (Standard: <1.5)
◆ <b>Infant mortality rate:</b>	9.7 (Standard: <30)
◆ <b>Neonatal mortality rate:</b>	3.8 (Standard: <20)



#### Vaccinations

◆ <b>Measles:</b>	4,716 <b>Ref:</b> 70% <b>Nat:</b> 30%
◆ <b>Polio 3:</b>	5,265 <b>Ref:</b> 68% <b>Nat:</b> 32%
◆ <b>DPT 3:</b>	5,229 <b>Ref:</b> 68% <b>Nat:</b> 32%
◆ <b>TT :</b>	12,394 doses administered



#### Nutrition & Food security

◆ <b>Number moderately malnourished:</b>	1,532
◆ <b>Number severely malnourished:</b>	151
◆ <b>SFP recovery rate:</b>	87.1% (Standard >75%)
◆ <b>ITC recovery rate:</b>	80.7% (Standard >75%)



#### Reproductive health

◆ <b>Proportion of 1st ANC within 1st trimester:</b>	32% (Std 95%)
◆ <b>Proportion of Mothers tested for HIV in ANC:</b>	89% (Std 95%)
◆ <b>Skilled deliveries by health workers</b>	94% (Std 95%)
◆ <b>Complete ANC at delivery:</b>	84% (Std 95%)
◆ <b>Total number of live births:</b>	4,700
◆ <b>Live births—Refugees:</b>	2,857 (61%)
◆ <b>Live births—Nationals:</b>	1,843 (39%)
◆ <b>Family planning: New users:</b>	6043
◆ <b>Repeat users:</b>	4533

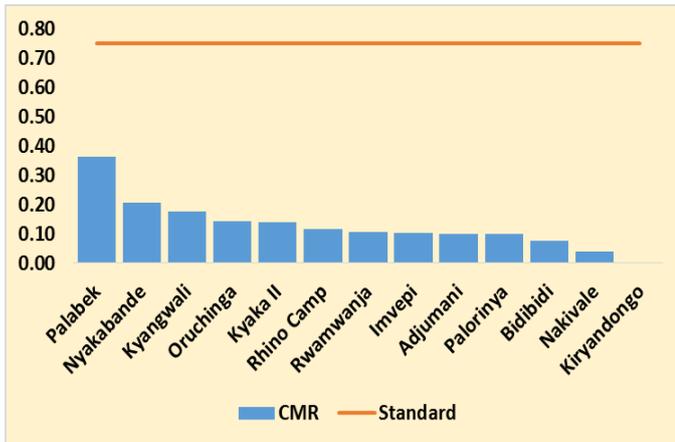


#### HIV/AIDS & TB

◆ <b>#Tested for HIV:</b>	18,672	<b>Ref:</b> 55% <b>Nat:</b> 45%
◆ <b>#Enrolled on ART:</b>	400	<b>Ref:</b> 34% <b>Nat:</b> 66%
◆ <b>#Cumulative on ART:</b>	17,208	<b>Ref:</b> 36% <b>Nat:</b> 64%
◆ <b>Condom distribution rate:</b>	0.23	
◆ <b>New TB cases started on treatment:</b>	117	<b>Ref:</b> 74% <b>Nat:</b> 26%

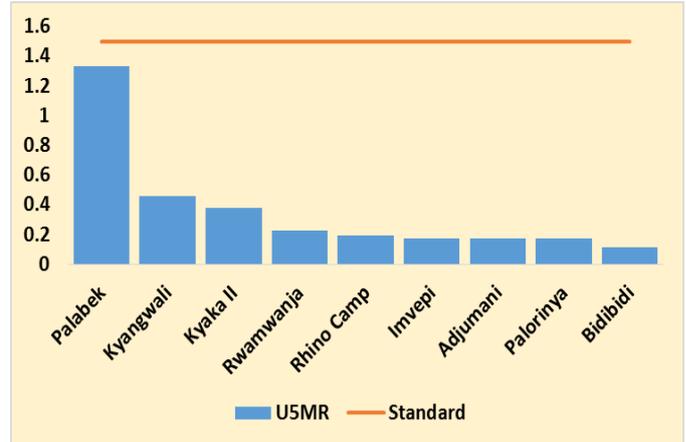
### Crude Mortality rate

The number of deaths per 1,000 population across all settlements is at 0.1 which falls below the maximum standard of 0.75 death per 1000 population implying good health status of the population. 6 maternal deaths were registered



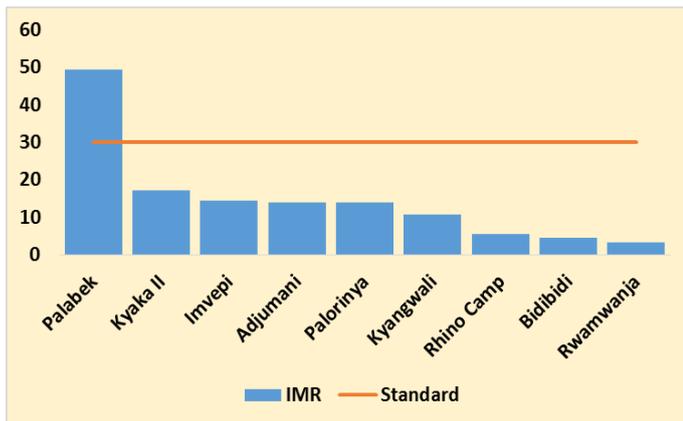
### U5 Mortality rate

The number of deaths of children under 5 years per 1,000 population across all settlements is at 0.22 which falls below the maximum standard of 1.5 death per 1000 population implying good health status of the population of under 5 years



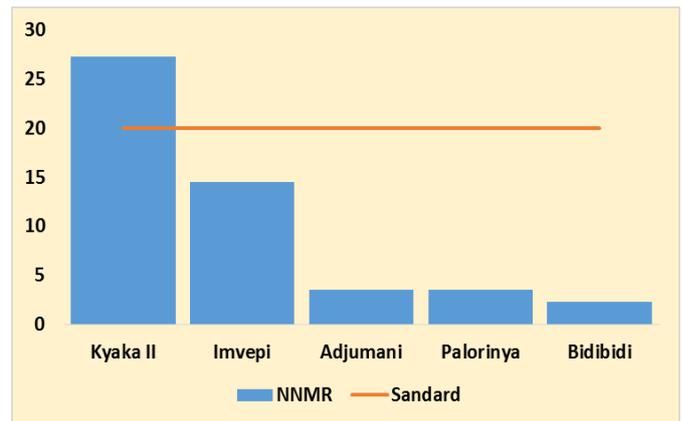
### Infant Mortality rate

The number of deaths of children less than one year was at 9.7 deaths per 1000 live births registered which falls within the acceptable ranges of less than 30 deaths of children less than one year implying good health status of the population



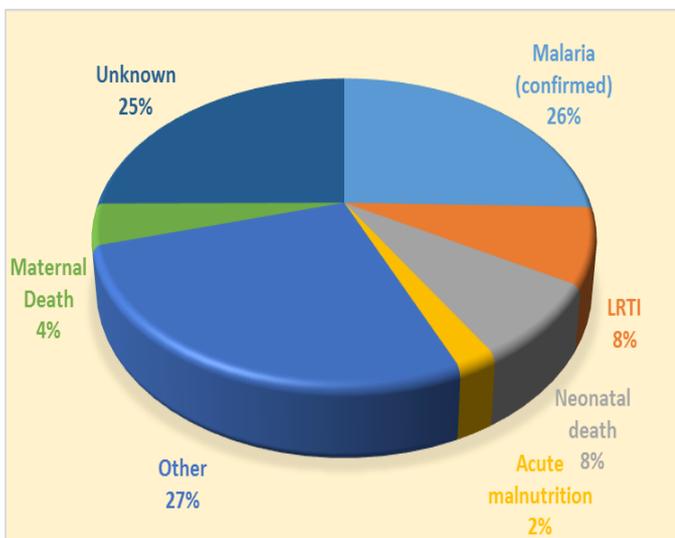
### Neonatal Mortality rate

The number of deaths of children less than 28 days of life was at 4.2 of every 1000 live births registered which falls within the acceptable ranges of less than 20 deaths of children less than one year implying good health status of the population



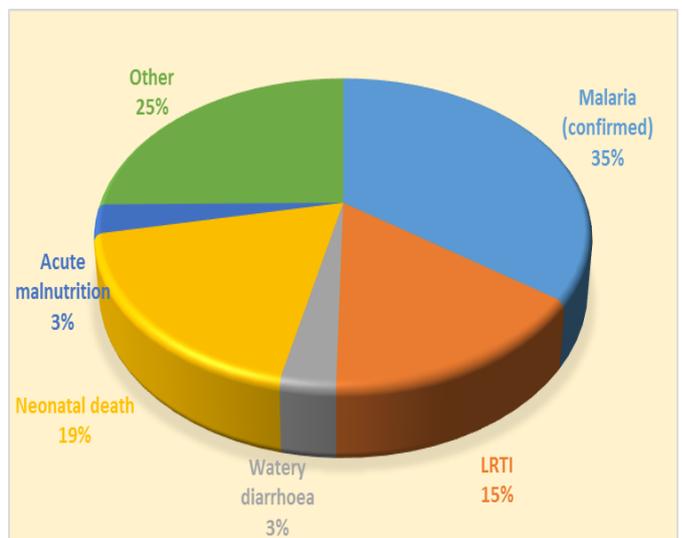
### Crude mortality

For every 1000 population, 1 death is registered among the refugees in Uganda. 6 maternal deaths were registered in Kyangwali and Palorinya settlement. The top mortality cause is malaria at 24% of the total causes of mortality



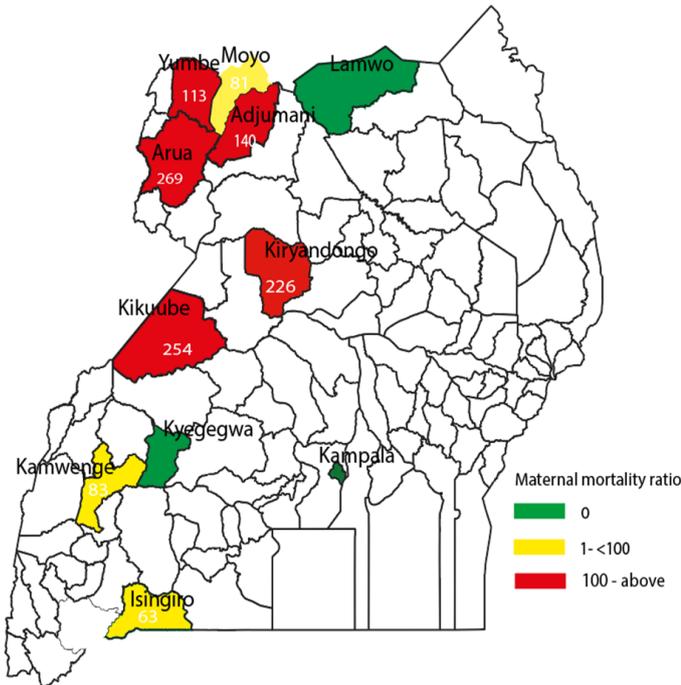
### U5 mortality

For every 1000 population of children under 5 years, 1 death is registered among the refugees in Uganda. The top mortality cause is malaria at 35%, neonatal death at 19% and LRTI at 15%



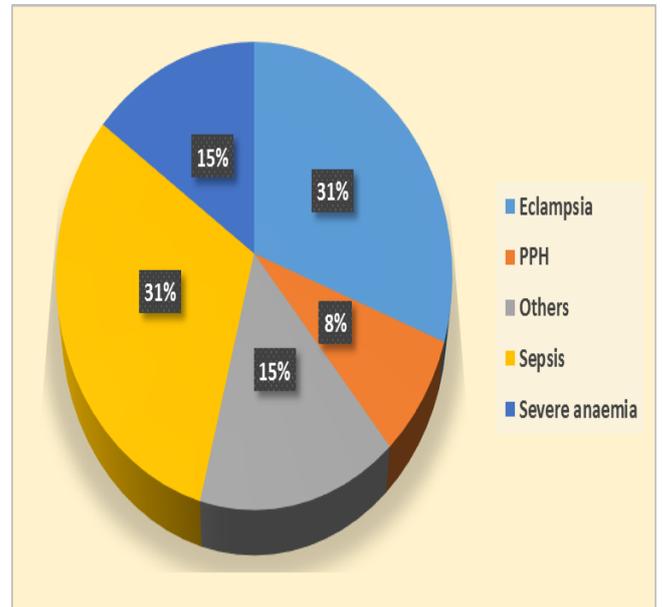
### Maternal mortality rate from Jan—May 2019

Maternal mortality ratio stands at 123 by end of May in all the refugee settlements



### Major causes of maternal deaths

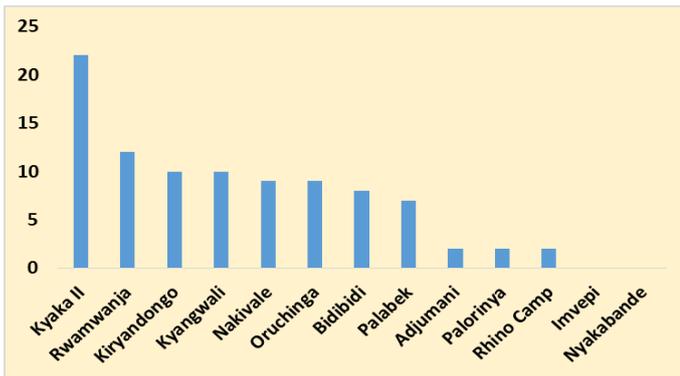
More than half of the maternal deaths are due to PPH. More than 50% of them having had 5 or more pregnancies coupled with 3rd delay at the health facilities.



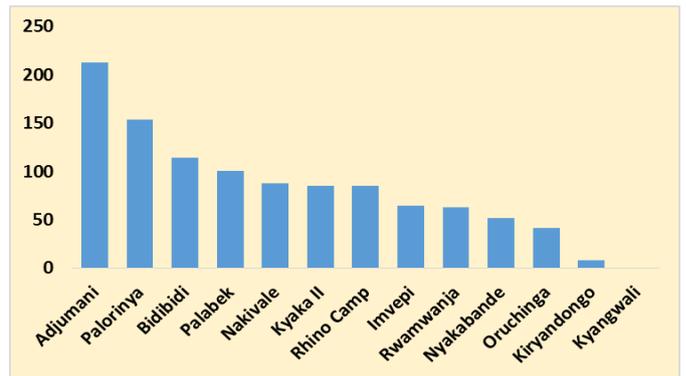
### Nutrition

A total of 1532 children under 5 years were admitted into SFP and 151 into CTC. SFP overall recovery rate is at 87.1% with all settlements within acceptable rates. High default rates were cited in Imvepi and Oruchinga settlements and follow up strategies with community health structures have been strengthened. Adjumani and Bidibidi had the least Cure/recovery rates

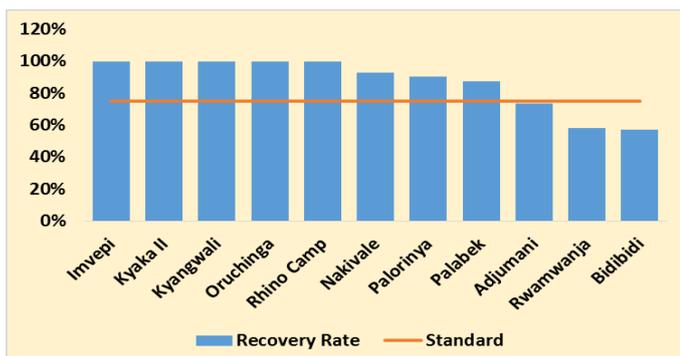
#### CTC Admissions



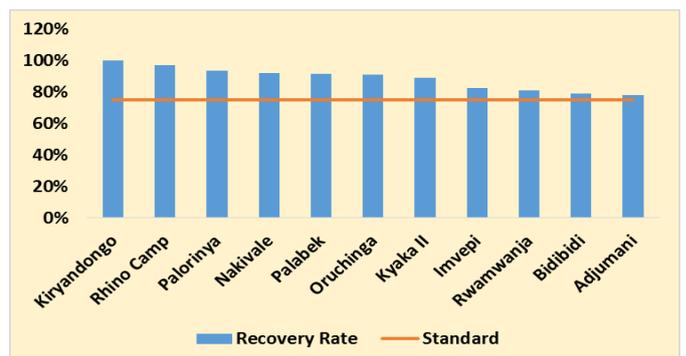
#### SFP admissions



#### CTC Recovery rates



#### SFP Recovery rates

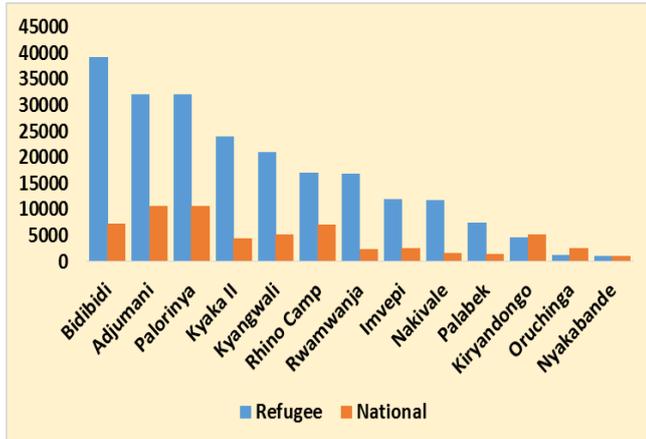


## OPD Consultation

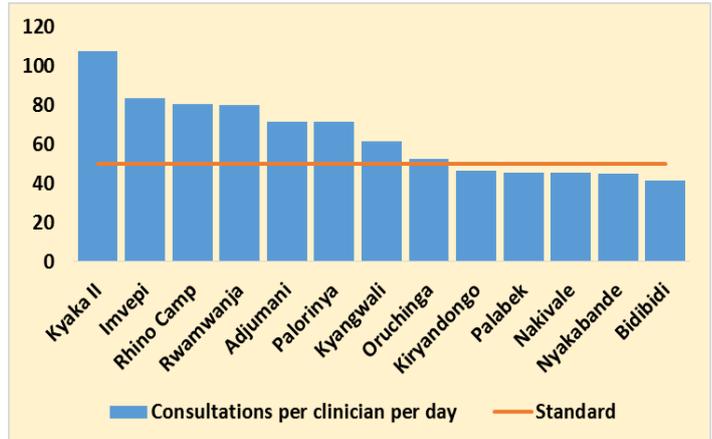
A total of 241,134 consultations were made in all the refugee serving health facilities in the refugee settlements in Uganda compared to 167,225 of April 2019. 78% of the consultations were Refugees and 22% were the host populations. Malaria 42.1%, URTI 12.3%, LRTI 6.6%, Skin diseases 6.5% and Watery diarrhea 3.6%.

Consultation/clinician/day is at 64 which is within the acceptable standards of 50 with refugees visiting the health facilities 1.3 times on average

### OPD Consultations—Refugees vs Nationals

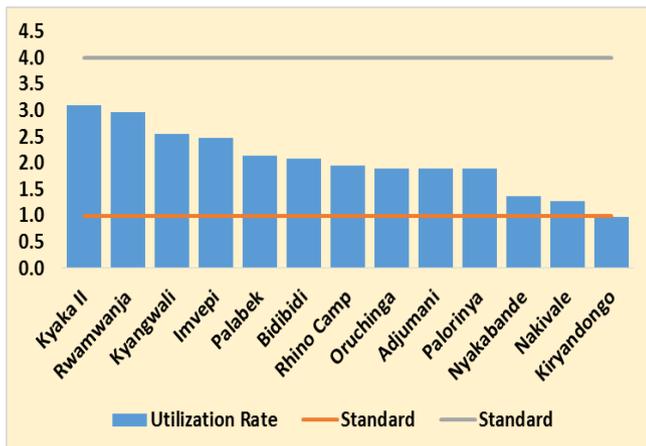


### Consultation/Clinician/Day



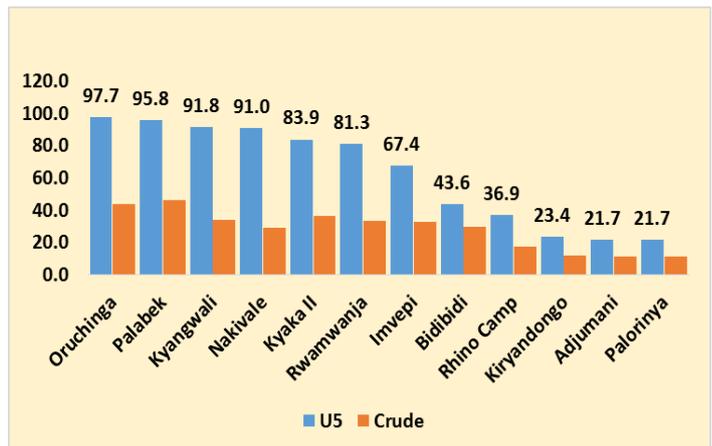
### Health Facility Utilization

On average, each refugee visited the health facility 1.2 times during the month. The standard is between 1 to 4 visits per refugee. Only Kiryandongo did not reach the standard of 1 visit per refugee among all the settlements and community sensitization/awareness campaigns are being conducted for refugees to promptly seek health care services



### URTI incidence

Upper respiratory track infection had the highest incidence in Palabek, Kyangwali, Nakivale and Oruchinga settlements. The incidence has increased from 18.3 in April to 123.8 in May 2019

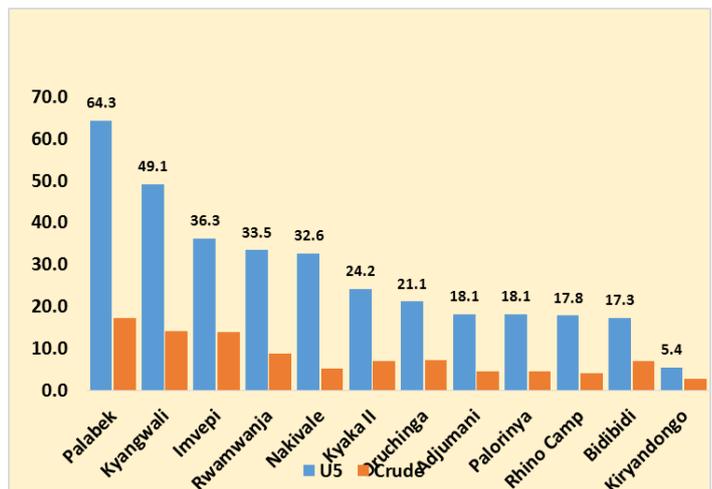
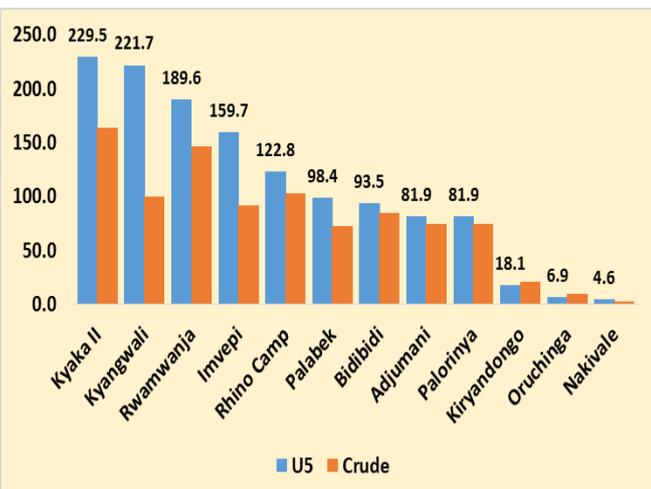


### Malaria incidence

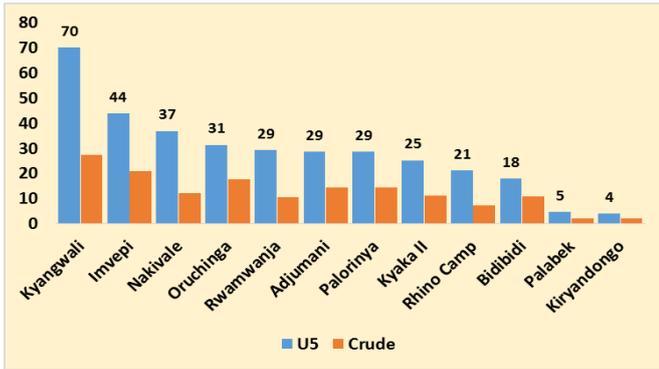
Kyaka II, Kyangwali, Imvepi and Rwamwanja had the highest incidences of malaria in May 2019. The incidence has significantly reduced from 68 in January to 82 in May 2019. Measures such as early detection and treatment of malaria cases both in the community and at the health facilities are on going in bid to reduce the malaria burdens

### Watery diarrhoea

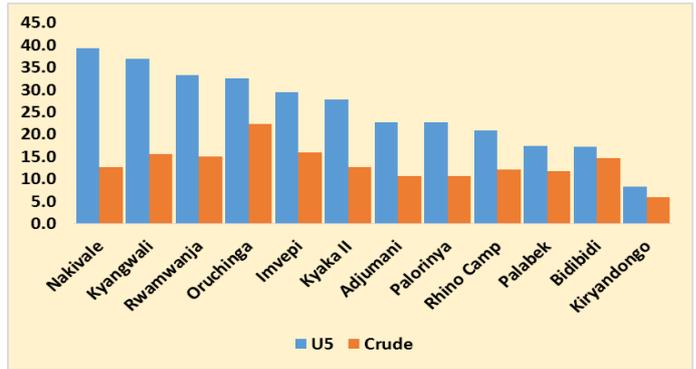
Watery diarrhoea has been a burden in settlements like Kyangwali and Palabek transit center inclusive. Efforts have been made hand in hand with the WASH sector of UNHCR to bring the incidences down with sensitization of proper hygiene, disposal of wastes and using proper storage of drinking water across all the settlements



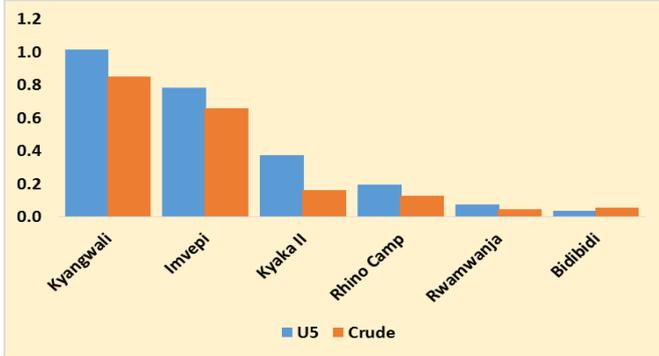
### LRTI incidence



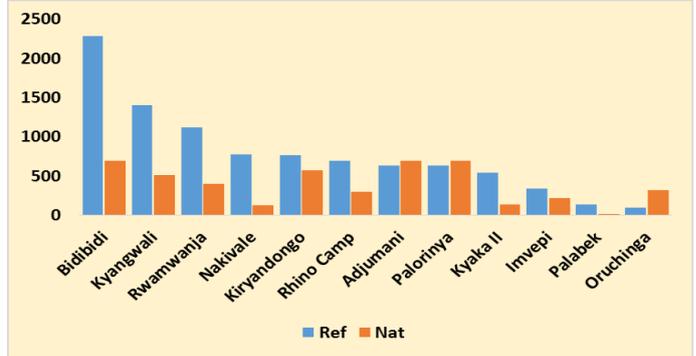
### Skin infection



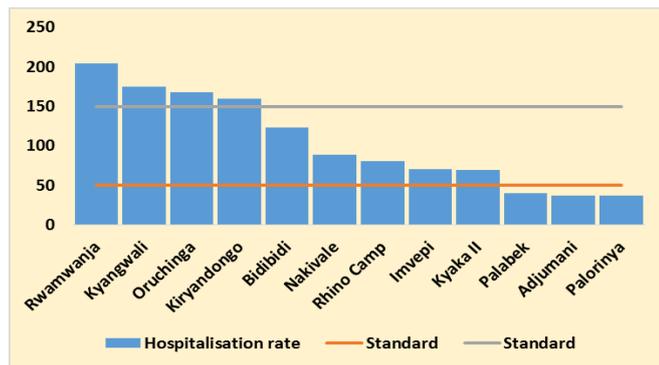
### Bloody diarrhea incidence



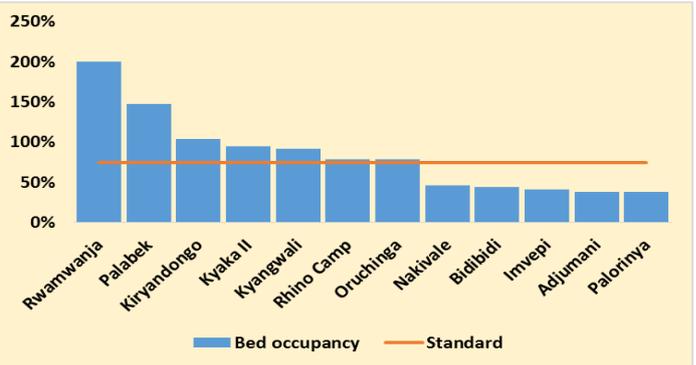
### IPD admissions



### Hospitalization rate

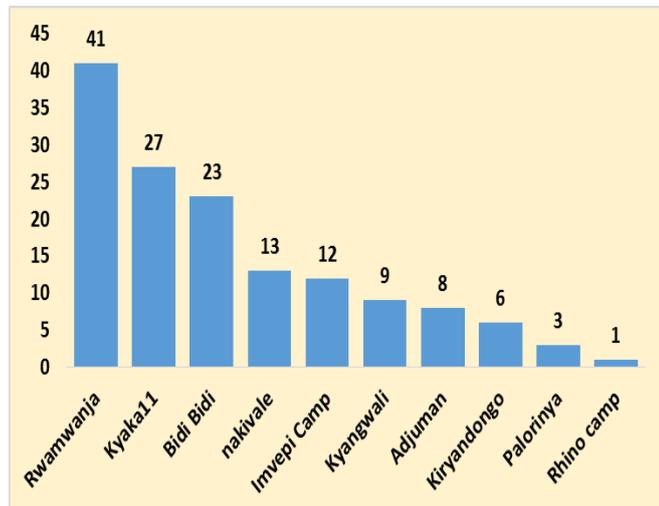


### Bed occupancy rate



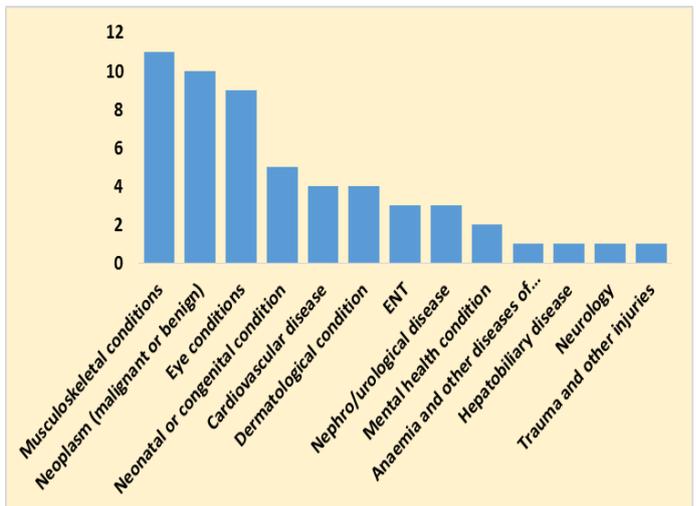
### Referrals to Kampala

Kyaka II, Rwamwanja and Bidibidi settlements and the highest referral rates to the national referral hospitals. A total of 143 referrals were received in Kampala by Inter Aid Uganda



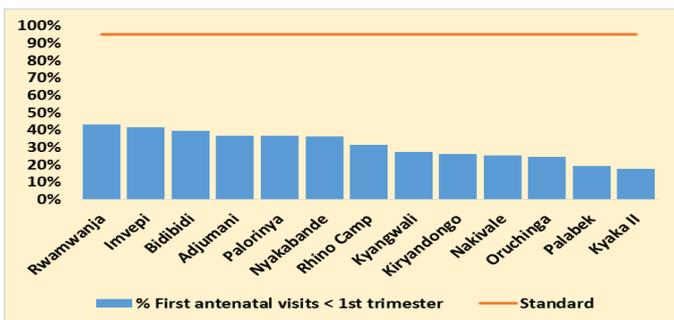
### Referrals to Kampala by diagnosis category

Musculoskeletal, Neoplasm and eye diseases are the major causes of referrals to the national referral hospitals



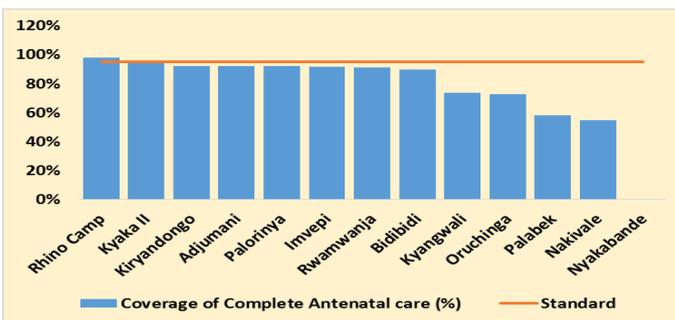
### 1st ANC <1st trimester

The proportion of 1st ANC within 1st trimester of pregnancy is at 32% far below the recommended 95% standard. This is due to late seeking of ANC for the first time during pregnancy



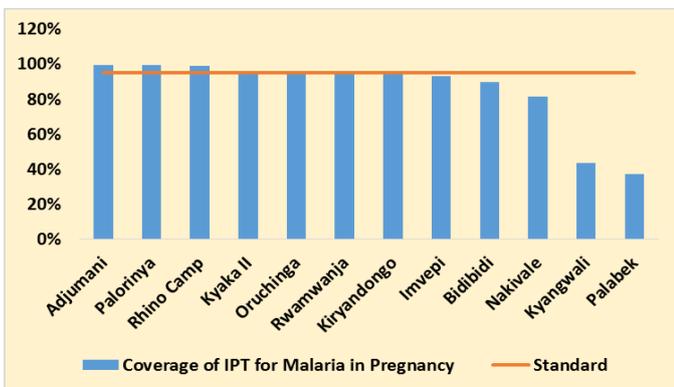
### Complete ANC

84% of the mothers who delivered during the month had completed all the scheduled ANC visits.



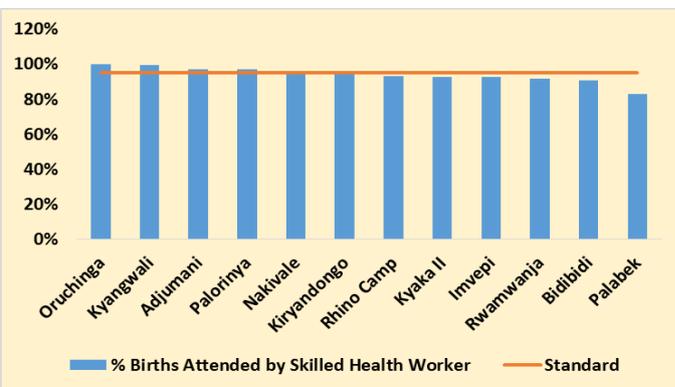
### IPT for Malaria

86% of the mothers who delivered had received malaria preventive treatment to protect them from malaria during pregnancy against the recommended 95% target



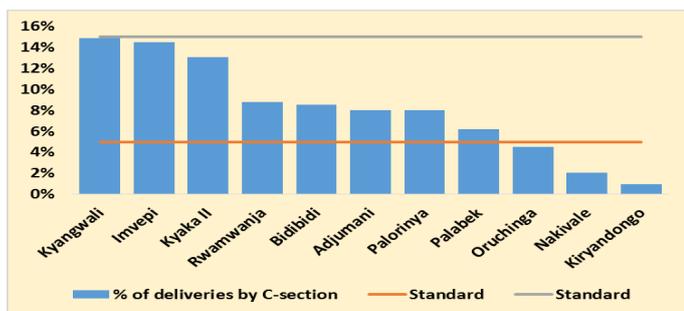
### Skilled delivery

94% of the deliveries registered in the month were by skilled health workers and at the health facilities.



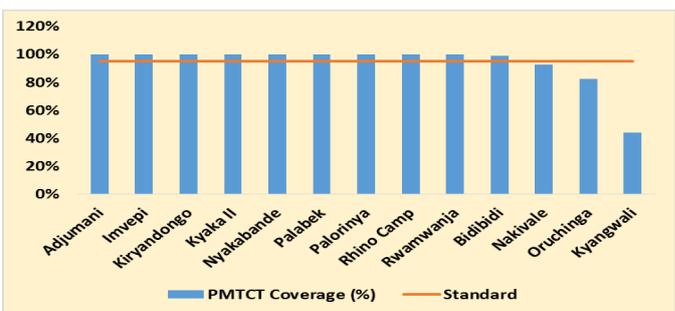
### C – Section

8% of the total deliveries were by Caesarean sections which falls within the acceptable ranges of 5% to 15%



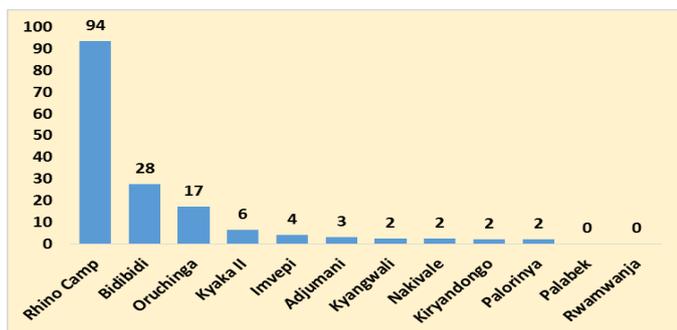
### PMTCT coverage

89% of the total first ANC visitors were tested for HIV in order to prevent transmission of HIV from mother to child during pregnancy by initiating all HIV positive mothers on ART



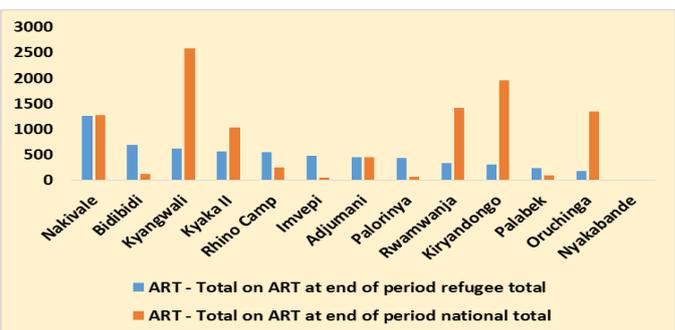
### Incidence of reported rape

The highest incidence of reported rape is from Rhino camp, Oruchinga and Bidibidi settlements. Those who report within 72 hours of the incidence are all provided with post exposure prophylaxis to prevent them from contracting HIV and also emergency contraceptive prevalence to prevent pregnancy among female of reproductive age and STI presumptive treatment



### #Patients on ART

A total of 17,208 patients are receiving treatment for ART across all refugee settlements health facilities of which 36% are refugees and 64% host population. All those tested positive for HIV are enrolled into the therapy for life.



## Notes:

The data used here are extracts from the monthly health service reports which are compiled by health facilities and submitted to Ministry of health—Uganda.



*For more help & support, please contact;*

### **Dr. Julius Kasozi**

Public Health Officer

UNHCR – Uganda

Email: [kasozi@unhcr.org](mailto:kasozi@unhcr.org)

### **Dr. Ronald Nyakoojo**

Asst. RH & HIV/AIDs officer

UNHCR – Uganda

Email: [nyakoojo@unhcr.org](mailto:nyakoojo@unhcr.org)

### **Wadembere Ibrahim**

Assoc. Public Health Officer

UNHCR-Uganda

Email: [wadember@unhcr.org](mailto:wadember@unhcr.org)

### **Emmanuel Omwony**

Snr. PH Information Associate

UNHCR-Uganda

Email: [omwonyi@unhcr.org](mailto:omwonyi@unhcr.org)

### **Kabazzi Isaac**

Associate Food Security & Nutrition officer

UNHCR-Uganda

Email: [Kabazzi@unhcr.org](mailto:Kabazzi@unhcr.org)

### **Balayo Ahmed**

Snr. Pharmacy Associate

UNHCR-Uganda

Email: [balayo@unhcr.org](mailto:balayo@unhcr.org)