

## Imvepi Refugee Settlement

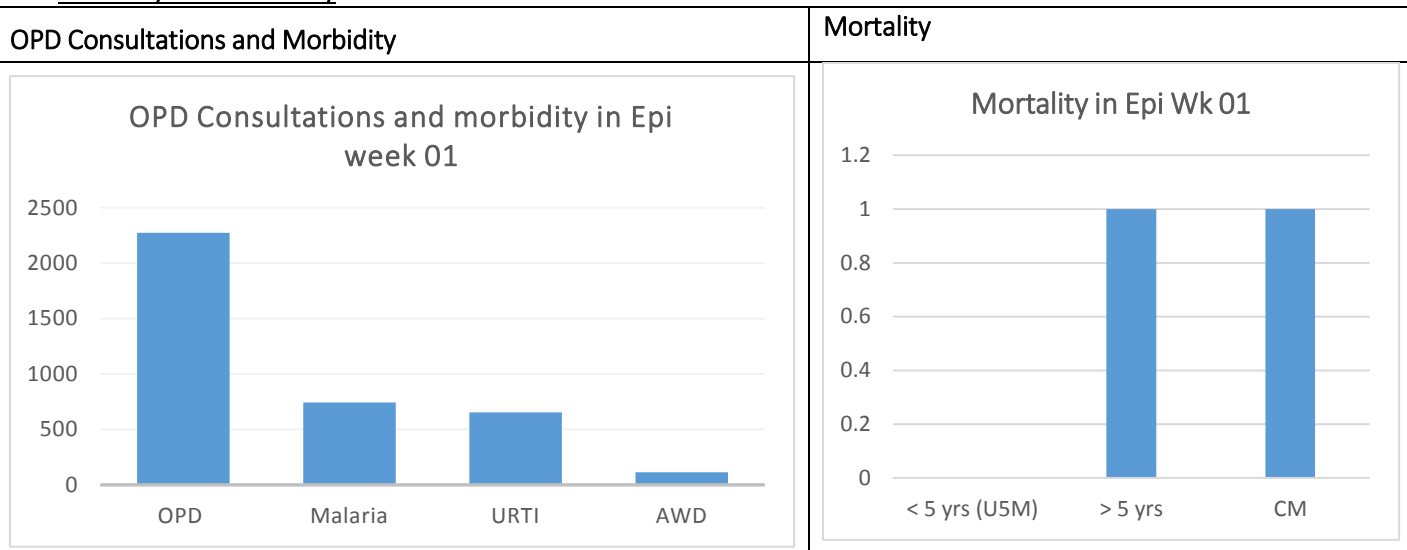
Health and Nutrition updates-Week 01 (28<sup>th</sup> December 2017 to 3<sup>rd</sup> January 2018)

Health & Nutrition															
Health															
Partners: UNHCR, UNFPA, UNICEF, ADLG/DHO, Medical Teams International, Save the Children International (SCI), Medi Sans Frontiers France (MSF-F), Global Refuge International (GRI), CARE Uganda International, CUAMM Doctors with Africa, Uganda Red Cross Society (URCS)															
<b>Total OPD/ IPD Consultations</b>	<ul style="list-style-type: none"> <li>▪ <b>OPD Consultations: 2,272</b> (1,976 refugees and 296 nationals) new OPD consultations were made. Of which 1,976 (87%) were to refugees and 296 (13%) to nationals.</li> <li>▪ <b>Mental Health and Psychosocial Support Services (MHPSS):</b> 01 (01 refugee and 00 national) new client and 00 revisit clients received MHPSS.</li> <li>▪ <b>IPD admissions: 65</b> (43 refugees and 22 nationals) new In-patients admissions were registered.</li> <li>▪ <b>New referrals:</b> 05 (04 refugees and 01 national) new referrals were made to Arua Regional Referral Hospital. While 13 referrals were made to health facilities within the settlements and managed within.</li> </ul>														
<b>Morbidity</b>	<b>Proportional Morbidity:</b> <ul style="list-style-type: none"> <li>• 742 (33%) confirmed malaria cases</li> <li>• 654 (29%) Acute RTI</li> <li>• 115 (5%) Watery Diarrhoea</li> <li>• 12 bloody diarrhoea cases.</li> </ul>	<b>Vaccination; Deworming; Vitamin A</b>	<b>Vaccination, deworming &amp; vitamin A supplementation for new arrivals in Imvepi RC:</b> <ul style="list-style-type: none"> <li>• 190 new arrival children &lt;5 year were vaccinated. (127 against measles, 63 against Polio, 08 mothers against T.T, 41 received Vitamin A Supplementation and 48 dewormed)</li> </ul> <b>Expanded programme on Immunization:</b> <ul style="list-style-type: none"> <li>• 159 individuals were vaccinated.</li> <li>• 37 received vitamin A supplementation</li> <li>• 29 mothers received TT</li> <li>• 02 dewormed</li> </ul>												
Disease	A F P	Anim al bites	Chole ra	Bloo dy diarr hea	Watery diarrhea	G u i n e a W o r m	Malaria	M e a s l e s	M E N I G I T I s	Yellow Fever	N N T	V H F	T y p h o i d	MD R TB	Human Influenza samples
cases	0	0	0	12	115	0	742	0	0	0	0	0	0	0	0
Deaths	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Suspect cholera Cases Identified in the Day</b>	0					<b>Suspect cholera Cases Undergoing Treatment</b>					0				

Suspect meningitis Cases Identified in the day	0	Suspected meningitis Cases Undergoing Treatment	0		
Suspect measles Cases Identified in the day	0	Suspected measles Cases Undergoing Treatment	0		
Mortality	<p><b>Deaths:</b> 01 (01 refugees and 00 nationals) death was reported. 01 death from health center's and 00 from the community. There was no (00) maternal death and 00 death among neonates and 01 premature.</p> <p><b>Crude mortality rate (CMR):</b> 0.01 deaths/10,000/day.</p> <p><b>Under Five Mortality (U5MR):</b> 0.0 deaths/10,000/ day.</p>	Health Workers per 10,000 Population	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 126,636 (25,501 children < 5 years) as at 31 <sup>st</sup> November 2017.		
Reproductive Health, HIV and AIDS and TB care	<ul style="list-style-type: none"> <li>▪ <b>Total ANC:</b> 80 (49 refugees and 31 nationals) pregnant mothers attended ANC.</li> <li>▪ <b>First ANC visits:</b> 32 (24 refugees and 08 nationals) pregnant mothers attended ANC1.</li> <li>▪ <b>Fourth ANC Visits:</b> 12 (12 Refugees and 0 Nationals) pregnant mothers attended ANC4 visit.</li> </ul> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><b>Labour and delivery care:</b></p> <ul style="list-style-type: none"> <li>▪ 20 (11 refugees and 09 nationals) deliveries were conducted by skilled health workers.</li> </ul> <p><b>Post Natal Care:</b> 17 (08 Refugees and 09 Nationals) lactating mothers attended PNC.</p> <p><b>Sexual Gender based Violence:</b> 00 reported SGBV cases.</p> <p><b>Elimination of mother to child HIV transmission (eMTCT):</b></p> <ul style="list-style-type: none"> <li>▪ 32 (24 refugees and 08 nationals) pregnant mothers who attended ANC1 were offered voluntary HIV counselling and testing and all were tested HIV negative. Non (00) HIV positive delivery took place, therefore, we registered 100% coverage of eMTCT.</li> </ul> </td> <td style="width: 50%; vertical-align: top;"> <p><b>HIV and AIDS services:</b></p> <ul style="list-style-type: none"> <li>▪ 04 (02 Refugees and 02 Nationals) individuals were newly tested HIV positive.</li> <li>▪ 394 (296 refugees and 98 nationals) individuals who were offered voluntary HIV testing services.</li> <li>▪ All the 04 (02 refugees and 02 nationals) newly identified HIV positives refugees were initiated on HIV care and support.</li> <li>▪ 1,666 pieces of condoms were distributed for HIV prevention in the community.</li> </ul> <p><b>TB treatment and care:</b></p> <ul style="list-style-type: none"> <li>▪ 01 (01 refugees and 00 nationals) individual was newly diagnosed with active TB.</li> </ul> </td> </tr> </table>			<p><b>Labour and delivery care:</b></p> <ul style="list-style-type: none"> <li>▪ 20 (11 refugees and 09 nationals) deliveries were conducted by skilled health workers.</li> </ul> <p><b>Post Natal Care:</b> 17 (08 Refugees and 09 Nationals) lactating mothers attended PNC.</p> <p><b>Sexual Gender based Violence:</b> 00 reported SGBV cases.</p> <p><b>Elimination of mother to child HIV transmission (eMTCT):</b></p> <ul style="list-style-type: none"> <li>▪ 32 (24 refugees and 08 nationals) pregnant mothers who attended ANC1 were offered voluntary HIV counselling and testing and all were tested HIV negative. Non (00) HIV positive delivery took place, therefore, we registered 100% coverage of eMTCT.</li> </ul>	<p><b>HIV and AIDS services:</b></p> <ul style="list-style-type: none"> <li>▪ 04 (02 Refugees and 02 Nationals) individuals were newly tested HIV positive.</li> <li>▪ 394 (296 refugees and 98 nationals) individuals who were offered voluntary HIV testing services.</li> <li>▪ All the 04 (02 refugees and 02 nationals) newly identified HIV positives refugees were initiated on HIV care and support.</li> <li>▪ 1,666 pieces of condoms were distributed for HIV prevention in the community.</li> </ul> <p><b>TB treatment and care:</b></p> <ul style="list-style-type: none"> <li>▪ 01 (01 refugees and 00 nationals) individual was newly diagnosed with active TB.</li> </ul>
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<ul style="list-style-type: none"> <li>▪ <b>Achievements and Impact</b></li> </ul> <p><b>OPD Consultations:</b></p> <ul style="list-style-type: none"> <li>▪ 2,272 (1,976 refugees and 296 nationals) new OPD consultations were made. Of which 87% of the new consultations were to refugees and 13% to nationals. The weekly proportional morbidity shows that the leading cause of morbidity in the week is malaria with 33%, Acute Respiratory Tract Infections accounted for 29% and Watery Diarrhoea/WD remained at 5%.</li> <li>▪ Therefore malaria, URTI and watery diarrhoea account for 67%.</li> <li>▪ The incidence of malaria, acute RTI and watery diarrhoea is estimated at 6 cases/1000 persons/week, 6 cases/1,000 persons and 1 cases/1000 persons /week respectively. During the week preventive measures through 85</li> </ul>					

active VHT's including mobile clinics and outreaches for treatment of malaria and other conditions were conducted.

**Mortality and Morbidity:**



- 01 (01 refugees and 00 nationals) deaths were reported from Imvepi settlement. 01 were among individuals above 5 years and 00 among individuals less than 5 years. 01 deaths were reported from health centers and 00 from the community. However, there was 01 premature delivery which resulted into death, 00 neonatal deaths/< 28 days old deaths, and 00 maternal deaths. Therefore, Crude Mortality Rate (CMR) was 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. The cause/ probable causes of mortality being 01 chronic condition/throat swelling and 01 premature delivery.

**Community based Control of Disease Outbreaks:**

- No (00) reported suspected disease of outbreak potential reported. Surveillance through 127 trained 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:**

- 222 asylum seekers were medically screened at Kuluba transit and 239 in Imvepi reception clinic.

**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.
- MSF-F continued to conduct mobile clinics in zone 3 point A tank 109 and point F and reached 210 individuals with medical consultations made in the community.
- Global Refuge International (GRI) continued to conduct routine OPD services at point I zone 2 and supported 383 individuals.

**Identified Needs and Remaining Gaps:**

- No reported major challenges.

**Nutrition**

Partners: Medical teams international, CUAMM Doctors with Africa, Action Against Hunger (ACF), Medi Sans Frontiers France (MSF-F), Global Refuge International (GRI), Save the Children international (SCI)

Imvepi Reception Center	2.4%	Community	2.0%
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Weekly Proxy Global Acute Malnutrition among children 6-59 months, MUAC (< 125 mm and/or oedema) <b>Imvepi reception centre screened 41 new arrivals and (01 MAM and 00 SAM) 07 pregnant and lactating mothers (01 &lt; 23 cm and 6&gt; 23 cm)</b>		overall weekly Proxy Global Acute Malnutrition among children 6-59 months, MUAC (< 125mm and/or oedema) <b>Overall settlement 1,207 (1,106 refugees and 101 nationals) screened of which (23 MAM and 01 SAM)</b>	
<b>Food Assistance</b>			
General Food Distribution <b>Imvepi</b> (kilocalories/person/day)	N/A	New arrivals ration (kilocal /person/day)	N/A
<b>Narrative</b>			
<p><b>Achievements and Impact</b></p> <ul style="list-style-type: none"> <li>▪ 41 children less than 5 years and 07 pregnant and lactating mothers were screened for their nutrition status at Imvepi reception center. One (01) child was found moderately malnourished and 01 mother had MUAC &lt; 23 cm.</li> <li>▪ Similarly, in the entire Imvepi settlement, 1,207 (1,106 refugees and 101 nationals) children less than 5 years were screened for their nutritional status.</li> <li>▪ Overall weekly proxy Global acute malnutrition among children 6-59 months screened in Imvepi settlement was 2.0% and at Imvepi reception center was 2.4%. 23 new malnourished children were enrolled in SFP and 01 in OTP. All the identified malnourished were initiated on therapeutic feeds and have been linked to Omugo extension settlement.</li> <li>▪ 31 (29 refugees and 02 nationals) individuals were exited from targeted SFP and all were cured and 00 defaulters registered. Therefore recovery rates was 100% and 0% defaulter rates, 0% death rate and 0% non-response rate.</li> <li>▪ 05 (05 refugees and 00 nationals) individuals were exited from the TFP and all were cured. Similarly recovery rates of 100%, defaulter rates of 0% and 0% non-response rate.</li> </ul> <p><b>Community nutrition activities</b></p> <ul style="list-style-type: none"> <li>▪ <b>IYCF through mother baby areas:</b> During the week SCI continued to run 2 MBA's in Imvepi settlement serving pregnant and lactating mothers with optimal breast feeding promotion messages.</li> <li>▪ <b>Distribution of hygiene (IMAM) kits:</b> 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.</li> </ul> <p><b>Identified Needs and Remaining Gaps</b></p> <ul style="list-style-type: none"> <li>▪ No major challenges reported.</li> </ul>			