

# Uganda Emergency Update

Covering the southwest, midwest and northwest

## 11 - 19 February 2014

For internal and external distribution

### Highlights

- The number of recent South Sudanese refugees surpassed **70,000** this week.
- The recently overcrowded transit / reception centres in Adjumani, Arua and Kiryandongo are largely empty following a **successful operation to relocate tens of thousands** of South Sudanese to land plots in settlements (see last page).
- Many partners are mobilizing to provide assistance for the South Sudanese influx in Adjumani while Arua and Kiryandongo have less partner support.
- In the midwest, **1,300 Congolese** remain at Bubukwanga transit centre in Bundibugyo District after many refugees spontaneously returned to the DRC.
- In the southwest, Nyakabande transit centre is hosting more than **2,000 Congolese** refugees.



On 19 February the last South Sudanese refugees left Dzaipi TC. ©UNHCR/D.Lusweti

### Regional dynamics:

On 12 February, Democratic Republic of Congo (DRC) President Joseph Kabila announced an amnesty for M23 rebels. The amnesty covers "acts of insurgency, acts of war and political offences" committed in the DRC up to 20 December 2013. More serious crimes are excluded from the amnesty, including genocide, crimes against humanity, terrorism, torture, sexual violence, child conscription and embezzlement and looting.

## **Preparedness & Response:**

The Office of the Prime Minister (OPM) and UNHCR, with the support of partners, are coordinating the maintenance in the northwest of Dzaipi transit centre (TC), Nyumanzi reception centre (RC), Ocea RC and Waju II TC; in the midwest of Bubukwanga TC; and in the southwest of Nyakabande TC and Matanda TC.

**Contingency Planning:** The Contingency Plan for a refugee influx from South Sudan has been overtaken by events and the operational planning figure has been raised to 100,000 individuals. The emergency response strategy for both South Sudanese and Congolese remains the same as outlined in the recently revised and circulated DRC contingency plan.

## **Statistics:**

### **Countrywide**

Following a return to calm in the mid-western border area many Congolese refugees have been returning home. For the moment though Uganda has a registered asylum seeker/ refugee population of more than 315,000 individuals.

### **Northwest/Midwest South Sudanese**

A total of **70,010 South Sudanese refugees** have arrived in Uganda since 16 December. OPM with support from UNHCR is recording refugees in the proGres database using biometric registration before they are relocated to settlements for longer-term assistance.

Adjumani has received a total of 49,582 refugees since 16 December. Dzaipi transit centre (TC) was near empty. Nyumanzi RC is accommodating about 1,800 individuals. Nyumanzi settlement now hosts about 22,000 individuals, other recently opened settlements include Baratuku with 4,000 individuals, Ayilo with 15,800, Boroli with 4,000, with the remaining refugees at a few other nearby settlement clusters.

Kiryandongo refugee settlement has received a total of 10,776 South Sudanese refugees in 2,342 households since 16 December. Out of this number, the reception centre is accommodating 1,828 individuals in 387 households. To date 10,279 individuals in 2,297 households have been registered in proGres.

Arua has received 9,476 individuals in 1,963 households since 16 December. Out of this number Ocea reception centre (RC), which is located within Rhino Camp settlement, is accommodating 2,690 South Sudanese refugees. All new arrivals at the RC are being recorded with biometric registration which has captured 9,359 individuals to date.

For both Kiryandongo RC and Ocea RC, the actual population is lower than the registered number mainly due to self-relocation of refugees to the settlement. A verification exercise is being planned for both sites.

### **Northwest: Congolese**

Koboko District, the population captured in biometric registration is 3,302 individuals in 813 households.

In Waju II TC, the population is 620 individuals in 233 households.

### **Midwest: Congolese**

In Bubukwanga TC, the population is 1,303 individuals in 262 households. The cumulative population assisted at the TC since July 2013 is 37,097 individuals.

The total number of refugees relocated from Bubukwanga TC to Kyangwali settlement since 14 August 2013 is 15,592 individuals.

Kyangwali refugee settlement population is 38,126 individuals.

### **Southwest: Congolese**

In Nyakabande TC, the population is 2,036 individuals.

In Rwamwanja refugee settlement the population is 52,776 individuals. The maximum capacity for the settlement is 55,000 individuals.

## **Northwest**

**Dzaipi TC,  
Nyumanzi RC /  
settlement and  
Adjumani  
settlements**

**and**

**Ocea RC and  
Rhino Camp  
settlement**

**Arua**

**(South  
Sudanese)**



**Borehole rehabilitation by ZOA Uganda in Rhino Camp, Arua. © UNHCR/A.Ndungu**

### **Developments**

In the north, the last 500 South Sudanese refugees at Dzaipi transit centre (TC) were relocated to settlements on 19 February, bringing to a close an enormous effort to decongest the TC. In mid-January, Dzaipi transit centre was dangerously overcrowded after receiving more than 30,000 refugees who had fled to Uganda when conflict erupted in South Sudan in mid-December.

The closure of Dzaipi TC is the first of an ongoing effort to decongest the four transit transit/reception centres in Adjumani, Arua and Kiryandongo. With the committed efforts of the Government, UNHCR and partner staff, the remaining three locations are also almost empty. The majority of recently arrived refugees have now been relocated to land plots provided by the Government of Uganda. In Adjumani District new arrivals are being received at Nyumanzi reception centre.

The semi-chaotic scenes at overcrowded transit / reception centres that followed the massive influx of South Sudanese have been mostly replaced by scenes of families erecting shelters on land plots and those of children playing.

### **Protection Issues:**

**Border monitoring:** During the last week some 2,500 South Sudanese were registered in Uganda, giving an average daily arrival rate of 345 refugees. However, many of these individuals were actually already in the country but had not yet registered. At the border, the arrival rate fluctuated from 70 to more than 200 individuals per day.

In Adjumani District, UNHCR is present at Elegu border point near Nimule, South Sudan, where a collection centre has been established and staff are in contact with border officials with regard to new arrivals. From Elegu refugees are relocated to Nyumanzi reception centre in Adjumani District.

In Koboko District, refugees arriving at Oraba border point are received at Keri collection centre and transferred to Ocea reception centre in Rhino Camp. Routine checks and searches of arriving refugees are conducted by the relevant authorities who respect the civilian nature of asylum.

Also in Koboko District, Keri collection centre was officially closed on 17 February and Kuluba way station is now operational. It is located one kilometre from the previous centre. WFP provides high energy biscuits to the refugees at collection sites and provision of hot meals is under discussion as relocations will be reduced given the decline in arrivals.

**Protection:** In Adjumani, OPM/UNHCR with partners Lutheran World Federation (LWF), Save the Children International (SCiU) and the Uganda Red Cross Society (URCS) are carrying out protection and community services activities in Nyumanzi settlement which is the largest in the District with some 22,000 individuals.

A significant number of refugees appear to have been self-relocating to various settlements in order to be with their ethnic group and ensure cultural and social ties and reportedly a sense of security. This tendency has caused a variety of complications for OPM/UNHCR and will require further head counts, verification and reorganization in the coming weeks.

The profile of the new arrivals includes 65% children under the age of 18 years, 86% are women and children, while men represent only 38% of the adult population. The majority of new arrivals are Dinka and there are also people from the Nuer, Murle, Madi, Anuak and Acholi ethnic groups.

**Persons with specific needs (PSNs):** In Adjumani and Arua districts PSNs are being identified, assessed and provided with appropriate assistance.

In Adjumani, relocation of PSNs to Ayilo settlement went smoothly with the use of vans to improve comfort. In Nyumanzi settlement, 75 PSNs were provided with energy saving stoves. World Vision is building shelters for PSNs.

In Arua, 1,653 PSNs have been identified among the new arrivals already profiled which constitutes 17.6% of the population.

**Child protection:** In Arua and Adjumani districts, unaccompanied minors (UAMs) and separated children (SC) are being registered by URCS, and URCS/ ICRC family tracing is fully operational. URCS is identifying foster families for UAMs for whom URCS/UNHCR are ensuring basic needs such as water, shelter and food. Best Interest Determinations and Best International Assessments (BIAs) are being conducted at receiving sites. Nyumanzi RC has a tracing centre for UAMs and SC.

**Gender-based violence (GBV):** In Adjumani, together with partners UNHCR raises awareness among refugees on "zero tolerance" of GBV and related violations. It implements awareness raising campaigns and activities among refugees, concentrating on empowering women, girls, boys and men of concern, so the message is sent further to other members of refugee communities.

GBV partners include UNFPA/ACCORD and LWF which carry out activities aimed at the identification and management of GBV in the community, psychosocial support, referrals, pregnancy mapping, and community mobilization and dialogue on GBV.

In Arua, a two-day GBV rapid assessment was carried out in Rhino Camp settlement targeting all refugees. The multi-partner effort conducted 105 Individual interviews of women, men, adolescent boys and girls. Police officers and health practitioners were also interviewed, the assessment will be expanded on with focus group discussions. Stakeholders also drafted a joint GBV prevention and response strategy.

**Community Mobilization:** UNHCR continues to have discussions with refugee communities to encourage their participation in various activities and help ensure their priorities are addressed accordingly.

**NFIs (non-food items):** In Adjumani/Arua districts a standard non-food items package is being distributed to refugees when they are relocated to land plots. Most non-food item are in stock now in the three locations and the backlog that was created with the massive influx has been largely cleared.

In Adjumani, the Lutheran World Federation (LWF) is distributing NFIs and is active in warehousing. ADRA is also distributing non-food items in Adjumani District. World Vision donated children's clothing which will be distributed through OPM/UNHCR.

Communities are in need to tools, especially spades, axes and hoes to excavate

## Sectoral Highlights:



pit latrines and prepare their land plots. Nevertheless the landscape in the settlements is changing rapidly with shelters going up and families settling in.

In Arua, families profiled at Ocea RC have been issued NFIs and UNICEF family packages where appropriate. Distribution is also being conducted by UNHCR in the clusters.

Also in Arua, UNICEF, Oxfam, Care International and OPM/UNHCR continue to supply assorted NFIs to support WASH activities in Rhino Camp settlement.

**Food:** In Adjumani two hot meals are being served with food provided by WFP from three kitchens in Dzaipi transit centre and Nyumanzi reception centre.

In Arua two hot meals are provided a day to refugees with WFP food rations and AAH-U is transporting firewood for food preparation. However, food shortages were reported with regard to distribution upon relocation.

**Health:** In Adjumani/Arua districts the District is providing health services at both sites as well as immunization, nutrition screening and curative services. Medical Teams International (MTI) is working

The meningitis outbreak reported in Adjumani and Arua districts was confirmed by Ugandan health authorities. Ugandan health authorities are leading the response which involves case management and host and refugee community sensitization, including public radio announcements. The outbreak is under control and no deaths have been reported. As well, health partners are carrying out surveillance of the outbreak. The Ministry of Health is working to get vaccines into the country and plans to carry out immunization in two sub counties of Adjumani for the moment. The MoH is being supported by UNICEF, WHO and other health partners. UNHCR has brought in four emergency health kits which are being distributed to health centres affected by the refugee influx.

In Arua MTI and GRI began offering health care services at Olujobo and Odobu respectively. From 15 February MSF-F began phasing out its services from Rhino Camp. Ocea health centre II which has been providing health care to Ocea settlement and Ocea transit centre was backed up by MSF-F day-OPD since 16 January 2014.

**Reproductive health:** In Adjumani, UNFPA will hire six midwives to operate in settlements for the next six months. UNHCR continues to monitor the situation of persons with specific needs, including expectant mothers and new mothers and provide them with support and assistance.

Arua: Maternal health care is being provided by all four health care centres however they are facing logistic inadequacy with the new pressure on services. UNHCR and partners are working closely to fill the gaps quickly to provide an optimum maternal and child health care. Preference for institutional deliveries appears high among the concerned community. Mama kits are made available in all health centres. Solar unit of Ocea centre was repaired by UNHCR enabling health care workers to attend maternal and other medical emergencies effectively during night. Under this program solar units of Odobu, Siripi and Olujobo will also be repaired. UNHCR supported repair of Olujobo health centre maternity wing and delivery room started last week.

**Nutrition:** In Adjumani, a nutrition assessment initiated by UNICEF was conducted and results will be shared with partners. Nutritional status screening for children is ongoing.

In Arua, therapeutic feeding option is available at all four health care centres supported by UNICEF. UNHCR raised concerns of developing supplementary feeding programs in Rhino camp with WFP.

**Water:** In Adjumani, 10.6 litres per person per day at Nyumanzi TC, 16.3 pp/pd at Nyumanzi settlement, 17 pp/dp at Baratuku settlement, 18.1 pp/pd at Ayilo

settlement. At Nyumanzi TC there 1 tap for every 307 people, at the settlement 1 for every 525 and at Baratuku settlement 1 tap for every 80 people.

In Nyumanzi settlement there are currently 11 boreholes, LWF has completed drilling 5 boreholes and three more are ongoing. UNICEF is drilling boreholes with plans for 15 there and WHH/Concern, ACF and UNHCR also have planned boreholes. Review of needs is ongoing. In Ayilo settlement, OXFAM began drilling two more boreholes out of seven already drilled. Pump-testing, development and casting will start in the coming days. In Baratuku settlement, Plan-Uganda has completed two boreholes.

In Arua, water supply in Rhino Camp rose to an average of 13l/p/d towards the end of the week. ZOA-Uganda rehabilitated 7 boreholes and all are now in use within the settlement. ADRA plans to install a 10cu.m tank which is already at Siripi health centre (HC) III complete with the rainwater harvesting system.

Also in Arua, water trucking is being supported by MSF-F, Oxfam, DRC-DDG / UNICEF and UNHCR. Water supply within Rhino Camp is gradually improving with support from hired trucks by Oxfam (2 trucks), DRC-DDG / UNICEF (2), UNHCR (3), and MSF-F (up until 14 Feb). MSF-F water tank was substituted by an additional UNHCR hired truck of the same capacity. The tankered water is emptied into storage tanks and 30cu.m onion bladder (total capacity of 110cu.m) all prepositioned by DRC-DDG/UNICEF, UNHCR and Oxfam in various clusters.

**Hygiene & Sanitation:** In Adjumani sanitation and hygiene promotion activities are being carried out by DRC-DDG, the Lutheran World Federation and UNICEF.

The ratio of latrines to persons is 1:34, in Nyumanzi settlement 1:612, Baratuku settlement 1:90, and Ayilo settlement 1:30. UNHCR is discussing with partners on procurement of latrine slabs, the lack of which is hindering construction.

In Arua, the average ratio of latrines to user at settlement clusters is 1:200 with some having to share with the old South Sudanese case-load. Lack of latrine slabs, treated logs and poles is hampering progress in the construction of latrines at household level.

CARE International completed construction of 2 blocks of 5 stance latrines each in Ocea cluster while DRC is completing 6 additional blocks of latrines and bath shelters in Tika and 3 additional similar blocks in Katiku, each with 3 stances. ADRA is constructing 12 stances of poly-drainable latrines at Ocea HC II.

Clean-up campaigns were successfully conducted at Ocea reception centre led by Oxfam and supported by URCS volunteers. Care International held group discussions and mobilized Ocea cluster members, through the leadership structure, to clean up the environment with the main target being the shopping and trading centre area along Ocea main road.

**Infrastructure:** In Adjumani settlements is a lot of hustle and bustle is going on as refugees are rebuilding their lives. Everywhere, including in the newly established Ayilo settlement, the landscape is changing very rapidly from shrub to human settlement.

UNHCR and partners are carrying work to improve infrastructure in the various settlements in all locations.

## **Northwest**

**Waju II transit  
centre and  
Lobule  
settlement in  
Koboko  
District**

**(Congolese  
Refugees)**



**A child at risk smiles after receiving some non-food items from UNHCR and Save the Children-International at Waju II transit centre. ©UNHCR/ C.Angua**

### **Protection Issues:**

**PSNs:** In Waju II TC and Lobule settlement DRC-DDG continues to identify and carry out PSN assessment.

**GBV:** LWF conducted five GBV sessions: two in host communities for 44 women and 38 men and three community sensitization which attracted 180 women and 130 men in Lobule settlement. Topics included the role of men and women in households, culture and gender, domestic violence, HIV prevention/ Behavioural Change Communication, access to ART, reporting/ referral mechanism for GBV cases, reproductive health and alcoholism. LWF also followed up individual cases.

**Relocations:** In the reporting period, a total of 158 individuals in 51 HH, where relocated from the Waju II TC to Ponyura cluster in Lobule settlement.

### **Sectoral Highlights:**

**NFIs and Shelter:** In Waju II TC and Lobule settlement refugees receive a standard NFI package of household items when relocating to plots. This week refugees relocating received NFIs from UNHCR (mosquito nets, pangas, slashers, plastic sheets), UNICEF (UNICEF Kit) and URCS (jerry cans and bucket). DRC-DDG procured 1,000 poles for household construction at Adologo cluster.

**Food:** In Waju II TC, WFP is supplying food rations to refugees. DRC-DDG is taking care of preparation of three hot meals.

**Water:** The water supply at Waju II TC is 35,000 litres. DRC-DDG assessed the functionality of all boreholes in Waju I cluster and a site for a planned borehole.

**Hygiene:** DRC, URCS and LWF continued with the general cleaning at Waju II TC and waste management. There was a joint follow up on household sanitation and hygiene in the clusters by DRC-DDG and LWF.

Pupils from Adrumaga primary school, which is attended by refugee children, took part in personal hygiene and sanitation sessions carried out by DRC-DDG, URCS and LWF.

**Sanitation:** DRC-DDG has completed the excavation of latrines and bath shelters in Waju I cluster and these will be completed by the end of this week. It also distributed 38 concrete slabs in Waju II cluster to facilitate the construction of household latrines.

**Mid-West  
Emergency**

**Kiryandongo  
refugee  
settlement  
(South  
Sudanese)**

**and**

**Bubukwanga  
transit centre  
and  
Kyangwali  
refugee  
settlement  
(Congolese)**



**Refugee children play at the Kiryandongo reception centre. ©UNHCR/P.Sacher**

**Protection  
Issues:**

**Border monitoring:** In Bundibugyo District, border monitoring was carried out at Busunga border point where it was noted that many Congolese have been repatriating to the DRC.

**Security:** In Kiryandongo some refugees, notably Nuer, remain concerned about their security situation given the influx of Dinka refugees and reports of South Sudanese elements roaming the area searching for allegedly deserted civil servants.

**Kyangwali:** AAH-U reported that survivors of capital offences were threatened and forced to sign the withdrawal of charges against perpetrators of prosecutable cases. Three cases have been recorded where perpetrators were released from custody under unclear circumstances. The issue will be raised at a high level with the authorities.

**Protection:** In Kiryandongo, a further physical verification was ongoing this week and improved registration processes were implemented to introduce the standard UNHCR registration form and the systematic verification of fingerprints of all household members prior to biometric registration.

**Community Services:** In Kiryandongo, calls for interest have been posted across the RC and the settlement inviting refugees to participate in refugee committees and groups in a range of fields, incl. women, children, environment, health and reproductive health, SGBV and water. The refugees have also been asked to voice their interest in the organization of community leadership elections as well as proposing candidates.

**Persons with Specific Needs (PSNs):** In Kiryandongo, PSNs are being identified during manual registration and follow-up activities are being carried out by UNHCR and AAH-U. As well, Uganda Red Cross Society volunteers were oriented on PSN-matters and encouraged to assist in identifying them during registration. In supporting PSNs with their shelter construction, URCS volunteers are building them temporary shelters based on a model created by the UNHCR site planner. Building materials for additional such shelters have arrived.



In Kyangwali, AAH-U / UNHCR are following up extremely vulnerable families who have been identified and relocated and ensuring shelters are constructed for them.

In Bubukwanga 35 PSNs were registered in ProGres in the reporting period making a total of 59 PSNs registered in ProGres since the start of February.

**Child Protection:** In Kiryandongo, follow-up activities were carried out for separated children at the RC. Also BIAs were carried out for unaccompanied minors and separated children. URCS volunteers are engaging in games with the children at the RC creating a de facto CFS. Recreational items are required. Further planning with potential partners would also be necessary for establishing Child Protection structures in the settlement.

In Kyangwali, SCiU responded to several cases of child abuse and provided psycho social support to the children and counseling to parents on good parenting. More than 1,200 children were engaged in different activities including physical education, music and storytelling at four child friendly spaces in the settlement. SCiU and AAH-U continued to encourage Child Protection Committees and advise parents to send their children to schools. Enrollment of newly arrived children in schools is reportedly low compared to the older case load.

In Bubukwanga 4 separated children (3 female and 1 male) were identified and 3 BIAs conducted bringing the number of separated children in ProGres to 8 for the month of February.

Also in Bubukwanga ACORD held a focus group discussion with adolescents on early marriage at the Child Friendly Space. 14 adolescents attended (9 females and 5 males). During the discussion the youth advocated for sensitization on early marriages with older men and women.

**GBV:** In Kiryandongo, it was observed that the most-frequent type of GBV is physical assault and that due to cultural habits GBV matters remain a difficult area of discussion.

In Kyangwali, ARC and ACORD are following up GBV incidents and providing counselling and referral.

In Bubukwanga a shelter to shelter sensitization was carried out by ACORD and no cases of SGBV were reported.

## Sectoral Highlights:

**Non-food items (NFIs) and Shelter:** In Kiryandongo, the backlog of non-food items has been cleared and almost all refugees have received items that were missing from the standard non-food item kit which they receive upon relocation to their land plots.

In Bubukwanga as an incentive 64 bars of soap were given to refugees working as cooks in the communal kitchens.

**Food:** In Kiryandongo, three hot meals a day are being provided at the reception centre with WFP food rations. UNHCR is facilitating kitchen management by supplying fuel wood, cooking utensils and assisting with organizing the communal cooks. On relocation to land plots refugees are provided one-month supply of WFP food rations distributed by Samaritan's Purse.

In Kyangwali, refugees at the RC are served three hot meals a day. Upon relocation to their allocated land plots they receive a monthly WFP food ration.

In Bubukwanga TC, three meals a day are being served to residents with WFP food rations.

**Health and nutrition:** In Kiryandongo settlement, the District is providing health services and immunization, nutrition screening, and curative services. AAH-U is providing medical services at the reception centre working closely with the District medical team. Serious medical cases are being referred to Payadoli Health Clinic III for management.

Also in Kiryandongo, nutritional screening continues for children and very few

cases of malnourishment have been identified to date.

In Kyangwali, AAH-U health team remained on standby for emergency treatment, health sensitization, immunization and child growth monitoring among the new arrivals at the Reception Centre in Kagoma. Integrated health service was provided to 280 patients in Malembo H/C II.

In Bubukwanga 1,112 out-patients were attended to during the reporting period (25% of which were refugees). 61 people (14 refugees and 47 nationals) were admitted to the In-patient department. There was 1 reported death. Malaria, URTI, skin diseases, intestinal worms and watery diarrhoea are the most common causes of morbidity. Trainings on the Health Information System and multi drug resistant Tuberculosis were carried out at the health centre. Discussions were held with the District Health Authorities on how the Ministry of Health could become more involved in the running of the health centre now that Humedica support has come to an end.

**Reproductive health:** In Kiryandongo, women and girls of reproductive age are receiving sanitary materials.

In Kyangwali, in Malembo village 19 pregnant mothers attended ante natal care (ANC) and 9 women received family planning services. In Mukunyu Mobile Clinic 5 pregnant women attended ANC, 6 mothers were offered family planning services with 2 getting long term implants.

In Bubukwanga there were 10 deliveries, 3 of whom were refugees. As well, 15 pregnant women were mapped by ACORD and 3 referred to the health centre for ante-natal care (ANC). A total of 136 mothers attended ANC at the health facility of which 14 were refugees.

**Immunization:** In Kiryandongo, routine immunization was ongoing at the RC where 19 children were immunized. Preparations and consultations amongst stakeholders are ongoing for the upcoming mass immunization set for 22-24 February and coordinated by KDLG and UNICEF.

Kyangwali, 168 children were immunized against different illnesses notably measles and tetanus.

In Bubukwanga 78 refugee children were immunized against polio and 76 against measles.

**Water:** In Kiryandongo, at the RC, the water availability stands at 16.7l/c/d. At Ranch 1, an average of 25.1l/c/d was available (2.2l/c/d less than yesterday). This was caused by breakdown of the one borehole near Panyadoli police post. Ranch 37 water availability average stood at 14.98l/c/d. A hydrogeological survey was initiated on 18 February to identify proposed borehole drilling sites and 3/8 sites earmarked were surveyed.

In Kyangwali, safe water availability in the settlement currently stands at 18.9 p/p/d for the new caseload and 26.4 p/p/f for all refugees in the settlement. Reduction in water availability was noticed when compared to the previous month due to arrival of convoys 19-21 with the new refugees sharing water from the same available sources.

224,000 litres of water was delivered by the water browser to Malembo village in 28 trips to alleviate water stress experienced by new arrivals. Repair of one borehole at Kabwoya way station was done which supplies water to Kabwoya primary school.

Construction work on UNICEF funded new piped water supply started. The pump house is currently under construction. The project aims to fill the gap for new arrivals in Malembo with a view to halting water trucking.

**Hygiene & Sanitation:** In Kiryandongo two URCS volunteers continue to monitor the situation and to sensitize the refugees on best practices, including hand-

washing. Sensitization talks were carried out with two groups of refugees (28 individuals) on hygiene matters. At the settlement, distribution of latrine construction materials and digging tools was carried out as well.

In Kyangwali, AAH-U WASH and core sectors conducted orientation training for Community Based Hygiene Mobilisers targeting 22 Health, Social and Hygiene Workers. As well, construction work on 3 of 4 incinerators was completed.

SCiU distributed hygiene kits including spades, hoes, wheel barrows, liquid soap, basin and washing brushes in seven learning centres. IOM completed the distribution of slabs and logs for latrine construction to planned 3,000 newly settled households in Kyangwali. Monitoring of the progress for latrine construction in the community is on-going.

**Education:** In Kyangwali, AAH-U distributed scholastic materials to 79 unaccompanied minors and separated children including mathematical sets, exercise books and pens. Meanwhile, 30 home visits were conducted to vulnerable children in the community as BID assessment for unaccompanied minors and separated children is being finalized.

Only 1 secondary school exists in the settlement forcing students to travel long distance every day. As well, most newly arrived parents complained of lack of money to meet education requirements for their children.

AAH-U successfully conducted interviews for secondary school teachers for English, Chemistry and French subjects with the vacant posts filled accordingly.

Construction of additional 5 classrooms, 8 drainable latrines under DRC-DDG in Malembo primary school is progressing well, and the Protection House, kitchen and 2 stance latrine is nearing completion.

SCiU installed 10 tents at Mukunyu, Malembo and Kasonga primary schools to create space for learners.

**Livelihoods and environment:** In Kyangwali, AAH-U mobilized and distributed construction poles to 105 households in Kirokole village for newly settled refugees. In the same village, 60 homes were mobilized for communal firewood collection at Mukarange woodlot.

The environment team also made home visits to assess environmental cleanliness and conservation in Malembo village in which 12 households were visited. AAH-U also organised a community meeting on environmental conservation in Malembo village attended by 28 community members.

**Infrastructure:** In Kyangwali, eleven communal shelters with the capacity to accommodate 1,000 persons and a kitchen and two hygiene and sanitation shelter facilities remain available to new arrivals in the settlement.

In Kyangwali, construction work commenced with bush clearing and installation of culverts on crossing points on 3 kilometres of road stretch in Kirokole village to improve accessibility and service delivery to the newly settled refugees. One additional km of road stretch is planned for opening in Kagoma to Mombasa village where new arrivals shall be settled.

In Bubukwanga the sub-county block has been completed and will be handed over to the sun-county on 19 February.

## **Southwest Emergency**

**Nyakabande  
and Matanda  
transit centres  
and  
Rwamwanja  
refugee  
settlement**



**A Congolese albino man is registered by OPM at Nyakabande transit centre.  
©UNHCR/L.Beck**

## **Protection**

**Border monitoring:** In Nyakabande TC border monitoring was carried out at Bunagana border and a total of 64 families were found to have spontaneously returned to the DRC.

**Protection:** In Nyakabande TC 628 asylum seekers are pending interviews by the Refugee Eligibility Committee.

In Rwamwanja a human rights and code of conduct training for police personnel was conducted with 109 police.

**Community Services:** In Nyakabande TC the first preparatory meeting for the celebration of International Women's day on 8th March was held and key activities to be undertaken were discussed.

In Rwamwanja 2 cases of conflict between 2 females, 4 cases of economic violence and 1 male survivor of sexual assault were counselled. 3 cases were referred to the health centre, 1 was referred to the police and 1 to the legal sector. 10 children with disabilities were assessed and will be supported with wheelchairs.

**Child protection:** In Nyakabande TC 5 separated children (3 boys and 2 girls) were registered at the transit centre during the week.

In Rwamwanja four home visits were made to families taking care of 4 identified children at risk. A child abuse case was followed up; the parents were counselled and informed of the legal implications and the surrounding community was mobilised and sensitised on child protection and child rights.

**Family reunification:** In Rwamwanja, in collaboration with Uganda Red Cross Society and Save the Children International, four family reunifications (all internal) were conducted.

**SGBV:** In Nyakabande TC 10 cases of rape were registered all of which occurred in the country of origin. The individuals were referred to Nyakabande health centre II for medical treatment and follow-up.

In Rwamwanja GBV case management training was conducted with 98 religious leaders from across the settlement. The training equipped leaders with the skills and knowledge to handle GBV survivors and the referral pathway. Leaders were encouraged to incorporate GBV messages and sessions into religious preaching.



## Sectoral

A community dialogue was also held with 31 Refugee Welfare Committees, GBV task force members, social workers, protection workers and religious leaders in Ntenungi A to discuss GBV issues such as rape, defilement and early marriages. During the dialogue, participants shared on issues leading to GBV and came up with solutions.

**Food:** There are 2 communal kitchens operational in Nyakabande TC with 3 hot meals served to refugees daily composed of breakfast, lunch and dinner with food provided by WFP. UNHCR continues to support with kitchen management with supply of fuel, wood and cooking utensils, while refugees participate fully in meal preparations.

**NFIs:** In Nyakabande TC mats, blankets, plastic cups, plates, sanitary pads and knickers, communal basins, collapsible jerry cans, bars of soap, pieces of plastic sheeting and buckets were distributed to refugees staying at the centre.

**Shelter:** In Nyakabande TC 16 family tents and 3 communal shelters are currently in use.

In Rwamwanja 500 building poles were distributed to newly arrived refugees for construction of their shelters.

**Health:** A total of 723 out-patient consultations were carried out across 3 locations in Rwamwanja. The number of in-patient admissions was 62 and 7 patients were referred to Fort Portal.

At Nyakabande HC II, 747 patients (39% of which were refugees) were seen in the out-patient department. The top five morbidity remain: Upper Respiratory Tract Infections, Lower Respiratory Tract Infections, Watery diarrhoea, skin infections and eye infections. There were 11 referrals to Kisoro Hospital.

**Maternal health:** In Nyakabande TC, 7 pregnant mothers were mapped by ACORD.

In Rwamwanja 108 pregnant women attended antenatal care services. There were 38 deliveries and 1 new-born birth. 8 mothers were referred to Fort Portal, Kyenjojo and Rukunyu health facilities due to obstetric complications.

**HIV/AIDS:** In Nyakabande TC 34 people were voluntarily tested for HIV.

In Rwamwanja 177 clients were tested at outreach and at the health centres for HIV of which 1 refugee and 5 nationals tested positive. 4 new clients were enrolled on ART and 3 on early infant diagnosis (EID). 17,568 condoms were distributed.

**Nutrition:** In Nyakabande TC 21 children are currently enrolled on the Supplementary Feeding Programme (SFP).

**Immunization:** In Nyakabande TC, MTI immunized 64 children in the transit centre. children 0-1yr were administered polio, measles, DPT and BCG vaccines as required by WHO and MoH protocols while those above 1yr to 15 yrs were given polio and measles vaccines only.

In Rwamwanja 83 children were vaccinated against BCG, 276 against Polio, 230 against DPT and 41 against measles while 26 were fully vaccinated.

**Education:** In Rwamwanja child right's training for teachers was carried out in Nkoma with 17 participants.

**Water and sanitation:** In Nyakabande TC, 15.9 litres of water per person per day was available in the TC. In Rwamwanja 2 boreholes were repaired in Kyempango A and 10 new pipes installed. Water user committees in 4 zones were reactivated. Hygiene & Sanitation:

In Nyakabande TC there are 131 stances of pit latrines and 109 stances of bath shelters. In Rwamwanja training was carried out with 66 members of Village Health Teams (VHTs) on hand washing, latrine usage, operation and maintenance of water points and review of the sanitation data collection tools.

**Livelihoods & Environment:** In Rwamwanja 11 agricultural extension workers were recruited as community based facilitators on agronomy practices.

**Infrastructure:** In Rwamwanja roofing of the first two blocks of IP accommodation was completed and plastering of ceiling was started. The superstructure for the second two IP accommodation structures was completed. The two new protection houses were also raised up to ring beam. OPM staff accommodation was also started and is now at slab level waiting for reinforcements and casting. The interview rooms were roofed, conduits laid and the construction is at ceiling plastering level.

## **Working in partnership**

### **OPM / UNHCR are being supported by partners on the ground:**

#### **Bundibugyo District**

Governmental partners: Bundibugyo District Local Government (DLG) authorities and various technical departments, the Uganda Police Force (UPF), and the Uganda Prisons Unit.

Humanitarian partners include: Agency for Cooperation and Research in Development (ACORD), African Initiative for Relief and Development (AIRD), Danish Refugee Council (DRC-DDG), Emesco Development Foundation, Humedica, International Committee of the Red Cross (ICRC), Lutheran World Federation (LWF), Malteser, Medical Teams International (MTI), Oxfam, Pentecostal Church of Uganda/fida International (PCU/fida), Save the Children in Uganda (SCiU), UNFPA, UNICEF, Uganda Red Cross Society (URCS).

#### **Kyangwali Settlement**

Governmental partners: Hoima DLG authorities and various technical departments and the Uganda Police Force.

Humanitarian partners: Action Africa Help Uganda (AAH-U), ADRA/ FAO, AIRD, American Refugee Council (ARC), ICRC, IOM, PCU/fida, Finnish Refugee Council (FRC), Médecins Sans Frontières France (MSF-F), Samaritan's Purse (SP), SCiU, UNFPA, UNICEF, URCS, Welthungerhilfe (WHH), WHO and WFP.

#### **Rwamwanja settlement, Nyakabande TC and Matanda TC**

Government partners: OPM, Kisoro, Kanungu and Kyenjojo DLG authorities and various technical departments.

Humanitarian partners: ACORD, ADRA, AHA, AIRD, FAO, Feed the Hungry, GOAL Uganda (GOAL), HIJRA, ICRC, LWF, MTI, IOM, PCU/fida, SP, SCiU, UNFPA, UNICEF, URCS, Water Missions, WFP, WHO, Windle Trust Uganda (WTU).

#### **Kiryandongo refugee settlement**

In Kiryandongo partners include: OPM, Kiryandongo District Local Government (KDLG) and the Uganda Police Force.

Humanitarian partners include: Action Africa Help Uganda (AAH-U), Danish Refugee Council (DRC), Samaritan Purse (SP), Real Medicine Foundation (RMF).

#### **West Nile**

Governmental partners: OPM, Adjumani, Arua and Koboko DLG authorities, various technical departments and Uganda police force.

Koboko humanitarian partners: AAH-U, AIRD, Associazione Centro Aiuti Volontari (ACAV), ACORD, AIRD, DRC-DDG, FAO, ICRC, Kids in Uganda (KIDS), LWF, MSF-F, MTI, UNFPA, UNICEF, URCS, WFP, WHO and World Renewal Ministries (WRM) and ZOA.

Adjumani humanitarian partners: ADRA, AIRD, Care International, DRC-DDG ICRC, LWF, MSF-F, MTI, PLAN, SCiU, URCS, World Vision International, UNFPA, UNICEF, URCS and WFP.

Arua humanitarian partners: AIRD, Care International, DRC-DDG, MSF-F, Oxfam, SCiU, ZOA, UNICEF, URCS and WFP.

**Coordination Meetings:**

See meeting schedule circulated with recent inter-agency meeting notes.

Kampala: The next interagency meeting will be held on Thursday, 6 March, the location will be announced.



Dzaipi transit centre in Adjumani as night falls in early January 2014. ©UNHCR/F.Noy



Dzaipi transit centre at 17:10 on 19 February 2014. ©UNHCR/A.Marei