

Bosnia and Herzegovina

1 - 30 September 2019

KEY INDICATORS

4,300

estimated asylum seeker and migrant population in BiH outside formal accommodation capacities at the end of September 2019

3,554

Number of people assisted in formal accommodation sites (gov. and IOM run centres, NGO and formal private accommodation) at the end of September 2019

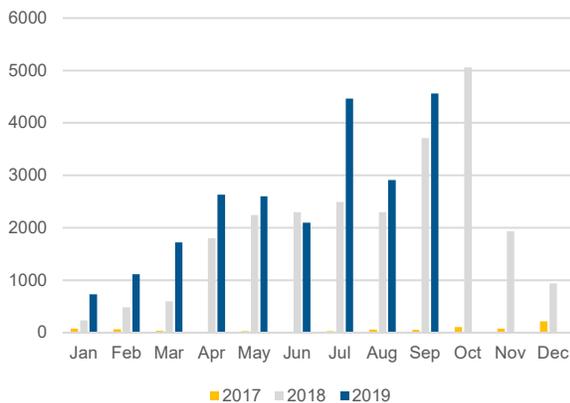
>5,409

Medical check-ups conducted in August 2019

>5,409 – meals!

POPULATION OF CONCERN

Number of detected asylum seeker and migrant arrivals to BiH per month

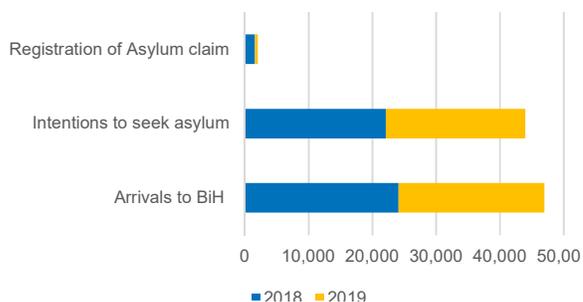


ACCESS TO ASYLUM

2,027 Asylum applications

1 January 2018 – 30 September 2019

People who have expressed an intention to seek asylum must wait for the Sector for Asylum to invite them for an asylum registration interview. A prerequisite for this invitation, is either registration of residence (10 BAM with the Service for Foreigners' Affairs) or residence in one of the official reception centres. Those without registration of residence will not be considered for an interview.



POPULATION OF CONCERN

36%

assisted asylum seeker and migrant population in BiH belonging to family groups at the end of September 2019

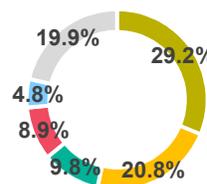
194

UASC assisted by UN and partners, of which 15 boys under the age of 15

16%

assisted asylum seeker and migrant female population in BiH at the end of September 2019

Most frequent declared country of origin of asylum seekers and migrants assisted by UN and partners in BiH at the end of September 2019



■ Pakistan ■ Iraq ■ Afghanistan ■ Syrian Arab Republic (the) ■ Bangladesh ■ OTHER

Priorities and key gaps

Shelter:

- Continue to advocate for the relocation of migrants, asylum seekers, and refugees from the Vučjak location to appropriate reception centres.
- There is an urgent need for relevant authorities to identify additional sites for accommodation solutions, including for single males and protection-sensitive accommodation for vulnerable groups, in particular UASC, LGBTI, survivors and those at risk of GBV.
- Contingency plan and prepare to collectively and rapidly deploy staff and resources once new accommodation sites are identified.
- Advocate for streamlined and accelerated referral mechanisms to both the Delijaš Asylum Centre (AC) and the Salakovac Refugee Reception Centre (RRC) with the Ministry of Security (MoS).
- Advocate for the Salakovac RCC to not only admit asylum seekers but also those with valid attestations.
- Resolve electricity supply issues at Bira TRC.

Protection:

International protection, documentation, and free legal aid

- Advocate for improved migration management respecting all international and national human rights standards.
- Enable the reporting and filing of complaints by refugees and migrants who have been mistreated.
- Improve access to fair and efficient asylum procedures through a range of advocacy measures.
- Facilitate access to legal pathways and durable solutions for refugees, asylum seekers, and migrants.

Protection environment and protection services inside TRCs

- Establish pre-registration area with designated zone for vulnerable categories in all Temporary Reception Centres (TRC).
- Increase the number of cultural mediators/interpreters/translators to support actors in their work and facilitate migrant, asylum seeker, and refugee access to information and services; include more women mediators/interpreters.
- Scale-up and ensure the provision of psychosocial support at all locations for all groups.
- Implement solutions to limit the unauthorized entrance of unregistered people into the TRCs.
- Establish child safeguarding policies and adequately child protection trained personnel in all TRCs and outreach.

Protection environment outside TRCs and protection outreach

- Continue to advocate for the restoration of freedom of movement of migrants, asylum seekers, and refugees both within and to Una-Sana Canton (USC).
- Increase outreach activities and services to ensure an enhanced protection environment and humanitarian assistance for those outside of reception centres and for those denied entry into USC and in other parts of the country.
- Seek the termination of the disembarkation of UASC arriving to USC via Klujuč and the delay of their referrals for appropriate accommodation and basic services.

- Reinforce referral and case management mechanisms for protection services for migrants, asylum seekers, and refugees residing outside of TRCs.
- Continually map locations where migrants, asylum seekers, and refugees congregate outside of TRCs to better understand their extent, their needs, and to support protection outreach and the provision of humanitarian assistance.
- Establish mechanisms for the provision of urgent humanitarian support – such as food, water, and first aid - to migrants, asylum seekers, and refugees in transit in BiH.

Child protection

- Advocate and work with Centres for Social Work (CSW) for solutions to foster families for UASC and use of available accommodation facilities for care of UASC nationals.
- Capacitate CSWs to conduct best interest assessment (BIA) and best interest determination (BID) of refugee and asylum-seeker children.
- Ensure access of UASC to education, recreational activities, psychosocial support and free legal aid and information.
- Ensure timely guardianship appointments for UASC and clarify the roles and responsibilities of legal guardians.
- Establish common agreement on procedures for accommodating UASC in the Miral TRC.
- Enhance reception capacities for UASC at the Miral TRC, including the provision of basic services, a designated zone, and regularly register UASC on the site to ensure access to these basic services and protection.
- Seek and implement solutions to better cope with the high number of arrivals of UASC and the high turnover of this category.
- Ensure the presence of child protection mobile teams at points of entry into to USC.
- Strengthen outreach work by deploying additional workforce to support CSWs.
- Develop tools and build the capacity of the SFA to properly identify UASC/conduct age assessments where needed and foster cooperation between the SFA and CSW to improve UASC identification.
- Seek and implement a solution vis-à-vis the increased number of 'fake family compositions' with at least one minor who is instrumentalized for favourable accommodation.

Extremely vulnerable individuals and GBV prevention and response

- Follow-up on the implementation of gender-based violence (GBV) safety audits in the Sedra and Borići TRCs and conduct GBV safety audits in the Bira TRC.
- Further coordinate GBV prevention and response by prioritizing inter-agency GBV case management, requiring updated referral pathways and the utilization of available GBV services inside of and outside of TRCs.
- Assist the Federation of BiH Ministry of Health (MoH) and the USC MoH and Social Policy to strengthen healthcare professional preparedness vis-à-vis the revision and implementation of the upcoming protocol on Clinical Management of Rape (CMR) for USC.
- Continue to collect and analyse input on prevention of sexual exploitation and abuse (PSEA) and GBV training needs, gather and distribute online training links on PSEA and GBV, and coordinate the organization of trainings.

- Assist members of the GBV Working Group (WG) to adapt international tools for recording, storage, and exchange of information among key humanitarian services using elements of the GBV Information Management System (IMS).

Health:

Primary and Secondary Healthcare

- Establish referral mechanisms for healthcare services for migrants, asylum seekers, and refugees outside of TRCs and ensure solutions are in place for the provision of healthcare to all, irrespective of legal status – specific solutions need to be found for those who take measures to minimize their visibility.
- Provide support to first aid provision to relieve pressure on medical teams and to provide at least basic care on the weekends.
- Streamline and coordinate the approach for dealing with complex health cases - joint collaboration should be strengthened in seeking solutions.
- Provide support to healthcare institutions in Cantons outside of USC, Herzegovina-Neretva Canton (HNC), and Sarajevo Canton (SC) that are beginning to engage in the response.
- Increase and improve quarantine capacities and procedures and develop a related standard operating procedure (SOP).
- Increase capacities to monitor and ensure that migrants, asylum seekers, and refugees under quarantine adhere to the recommendations of medical personnel.
- Raise awareness about personal hygiene and overall sanitation in TRCs; increase adherence to protocols to avoid larger health care concern and act in line with cost-effectiveness.
- Increase the number of medical staff by facilitating the certification process of employing foreign personnel.

Mental Healthcare Services

- Seek solutions to address gaps in the provision and availability of services for patients with mental health problems and rehabilitation therapy and treatment for substance users.

Paediatric Healthcare

- Ensure high-quality primary healthcare and dentistry for migrant, asylum seeker, and refugee children (access to paediatricians/nurses specialised in child healthcare/development).
- Seek resources to ensure that all new-born migrant, asylum seeker, and refugee children have access to full a vaccination programme, as well as that all children have access to regular vaccination according to the national vaccination schedule.
- Continue to raise awareness of the importance of immunization among parents and the community.
- Increase and improve quarantine space for UASC and families with children and develop an SOP for quarantine, especially as it's a precondition for entry to reception facilities.
- Ensure medical examinations (laboratory analysis and microbiology tests of various specimen) for primary school children prior school enrolment.

Sexual and Reproductive Healthcare

- Improve access to sexual and reproductive health (SRH) services.
- Continuous sensitization of humanitarian staff and training in survivor centred GBV response and SEA principles.

- Ensure use of the SOP for Multi-sectoral Coordination, Prevention, and Provision of Services to Survivors of Gender Based Violence in Emergencies (GBViE) in USC.
- Assist MoH FBiH and the MoH and Social Policy of USC in strengthening preparedness of healthcare professionals in revision and implementation of upcoming protocol on CMR for USC.

NFI:

- Make additional NFIs available to meet the needs of the increased number of migrants, asylum seekers, and refugees, especially winterized NFIs for the coming autumn/winter season.

WASH:

- Increase the availability of WASH services to those residing outside of TRCs.
- Seek and implement solutions to reduce damage caused by migrants, asylum seekers, and refugees to WASH facilities in the Miral and Bira TRCs.
- Ensure sufficient hot water in the Sedra and Bira TRCs.

Food:

- Improve the system of complementary nutrition for young children and pregnant and lactating women in the Bira and Borici TRCs.
- Improve communication between health actors and the Red Cross to ensure that doctors' prescriptions of special dietary requirements can be followed in a timely manner.

Education and Leisure:

- Intensify efforts to integrate primary-school age UASC into formal education.
- Ensure that all children older than 15 have access to high school education and learning.
- Advocate for approval from the government of HNC for all asylum seeker children in Salakovac to access primary education in the public education system. (Approval by the cantonal government for this is pending.)

Durable solutions and social cohesion:

- Advocate for and support the authorities to plan and implement holistic policies and programmes directed at the local integration of persons granted international protection in BiH.
- Seek additional funding to properly support initiatives aimed at promoting social cohesion and interactions between migrants, asylum seekers, refugees, and the local population in host communities, especially for initiatives engaging single men.

Security and safety:

- Take measures to improve the security situation in and around the Miral and Bira TRCs including through non-security and preventative measures, such as leisure activities, psychosocial support etc. as currently capacities only allow for limited services.

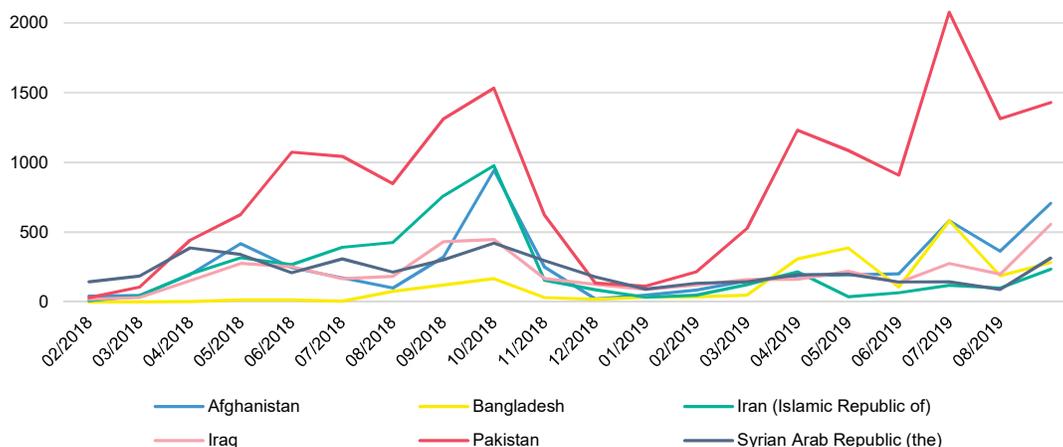
Key Updates and Operational Context by Sector

Population:

The authorities in Bosnia and Herzegovina (BiH) detected the arrival of 46,902 migrants, asylum seekers, and refugees to the country between 1 January 2018 and 30 September 2019 – an average of over 2,000 per month. Arrivals in September 2019 were the highest to-date for 2019. The majority continue to arrive overland in an irregular manner (i.e. at non-official border crossings) at several entry points. It is estimated that about 8,000 migrants, asylum seekers, and refugees remain in BiH in need of a range humanitarian assistance at various locations, especially in Sarajevo and USC. The latter location continues to be linked to attempts to enter Croatia and the European Union. Migrants, asylum seekers, and refugees in transit and in other parts of BiH and are also in need of humanitarian support. More detailed population estimates with age, gender, and location information are available in the 3W table at the end of this document.

In September 2019, the largest declared Country of Origin (CoO) among newly arriving migrants and asylum seekers was Pakistan (31 per cent), followed by Afghanistan (15 per cent), Iraq (12 per cent), the Syrian Arab Republic (seven per cent), Bangladesh (six per cent), and Morocco (six per cent). The composition of arrivals – according to declared CoO – varies over time, as shown in the below chart.

Monthly arrival trend of most common countries of origin since February 2018



CCCM

IOM Centre Managers or camp coordination and camp management (CCCM) support staff led CCCM meetings in the Bira, Borići, Miral, Sedra, and Ušivak TRCs. During September, all partner agencies agreed to hold bi-weekly, as opposed to weekly, CCCM meetings in the Sedra and Borići TRCs. House rules and inter-agency complaint and feedback mechanisms are in place in all TRCs and continue to be improved and amended together with partner agencies.

Community Feedback Committees are established in all TRCs, with representation of IOM CCCM staff, partner agencies, and the centre population. They are responsible for the regular review and follow-up on feedback received by the centre population on matters related to the life in the centres.

Community Representative Councils are also established in all TRCs with the main nationalities represented. These councils participate in community meetings organized by IOM with partner agencies, serving as a platform for discussion of TRC issues, dialogue between centre populations and centre management, and for conflict prevention and resolution. Ideally, Council meetings should take place weekly, however this is not always possible due to both partner organizations being unavailable to participate and elected community leaders departure or attempt of onward movement. IOM and partners agree this must be addressed swiftly to avoid undermining accountability to affected populations.

IOM also established and runs info-desks in the Sedra, Bira, Borici, Miral and Ušivak TRCs. These function as points where the centre populations can access information about available assistance and protection services within and outside of the TRCs and ask questions, submit feedback and complaints, or report incidents. They are also a platform used by IOM TRC management and other partner agencies to communicate and share information and updates with the TRC populations. IOM started screening a video containing house rules, service schedules and similar relevant information on the public TV displays in TRCs in USC.

IOM conducts comprehensive beneficiary satisfaction surveys on a monthly basis¹. For the August/September round of surveys, 92 people were surveyed across the five TRCs, and an overview of their responses, satisfaction levels, and major concerns was shared with IOM staff and partners operating in the TRCs. When it comes to CCCM and Community Engagement, 62% of the respondents stated being aware of the mechanisms in place in their centre to report cases in which they were victims of or witnesses to any form of violence, exploitation or abuse, and 75% of those who had used these mechanisms responded that they felt their complaints were heard.

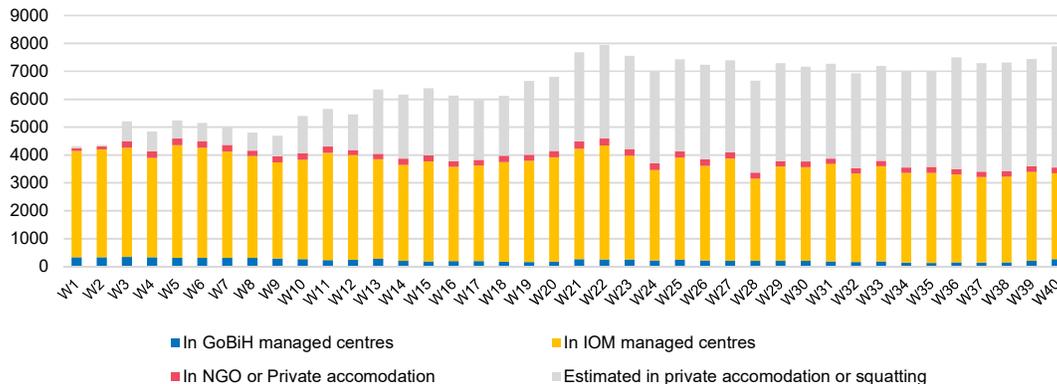
Accommodation/Shelter

The UN Country Team continues to consider the Vučjak location inadequate vis-à-vis the reception of migrants and asylum seekers and calls for the authorities to immediately cease relocations to this site and to allow migrants and asylum seekers already relocated to this site to return. Vučjak poses very significant health and safety risks and is not equipped to accommodate migrants and asylum seekers in accordance with international standards.

As of 30 September, the maximum available capacity across eight formal and informal centres in BiH (USC, Sarajevo Canton, and HNC) was 4,194, not including safe accommodation made available to a limited number of particularly vulnerable cases or spaces in the Immigration Centre. The approved capacity limit of 3,200 migrants and asylum seekers in USC remained unchanged, effectively reducing the overall capacity in the country and in USC – for example the Bira TRC has a maximum approved capacity of 1,500 beds but could potentially host up to 2,000 people.

¹ Data for the monthly reports are based on data from the 20th of the previous month to the 20th of that month approximately.

In-the-country presence of asylum seekers, refugees and migrants in BiH since January 2019



The situation remained unchanged with regards to the large number of families with children and UASC arriving to the TRCs in September, some of whom could not be accommodated, once again highlighting the need for additional protection-sensitive accommodation capacity appropriate for these groups. At the same time, the Delijaš Asylum Centre, with a capacity of 154 persons, hosted only 49 persons, and the Salakovac Refugee Reception Centre, with a capacity of 213 persons, hosted only 150.

Given the discrepancy between suitable accommodation and the population in-country, an unidentified number of migrants, asylum seekers, and refugees are privately accommodated, sleeping rough, or squatting, primarily in Sarajevo and USC.

UNHCR, UNICEF, DRC, and Save the Children, in collaboration with other actors on the ground, work to identify, profile, and prioritize cases for referral to appropriate spaces, as available. In September, the relocation of families accommodated in the Bira TRC to the Borići and Sedra TRCs (where the overall protection environment and services are more appropriate) continued.

The TRCs continued to experience a high turnover rate in September related to the number of arrivals as well as attempts at onward movement. Allocating vacated spaces remained a challenge as most do not announce their departure, leaving it unclear if a given space is available for reallocation. Moreover, in September, IOM continued to receive a high number of requests from the SFA for IOM to transport people back to the TRCs in USC following failed attempts to cross the border (taking up a significant share of IOM centre staff time to the detriment of their presence in the TRCs).

In September, IOM started to replace mattresses in all the TRCs in USC. In the Borići TRC, IOM delivered 300 new mattresses from IOM's main warehouse. In the Sedra TRC, IOM replaced 320 mattresses. In the Miral TRC, IOM delivered 700 mattresses, which will be replaced gradually as needed. In the Bira TRC, IOM delivered 200 mattresses and replaced 100.

IOM staff checked the radiators and heating convectors in all TRCs in preparation for winter and made some minor repairs. IOM maintenance staff constantly work to improve the TRCs, repairing and replacing facilities, but also catering to cultural and spiritual needs – e.g. in September, a shelf for holy books and another for shoes in front of the prayer room in the Miral TRC were installed.

The below accommodation and shelter were available in BiH in September:

Sarajevo Canton

The Ušivak TRC (opened in October 2018), in Hadžići Municipality, is a mixed profile centre, predominantly for single men, but also for families and vulnerable migrants, asylum seekers, and refugees. The centre is managed by the SFA, with support provided by IOM who oversees the daily running of the centre in coordination with partners providing other services. IOM CCCM staff and security personnel are present 24/7. The Ušivak TRC currently provides up-to 800 beds.

At the end of September, the site hosted 745 migrants and asylum seekers. The centre was full or close to full throughout the month, with irregular entries occasionally overwhelming the centre's capacity. Construction works supported by the Qatar Charity to improve the TRC facility and to replace the large provisional tent are ongoing. IOM maintenance staff fixed eight electrical heaters in preparation for the winter.

The Delijaš Asylum Centre (AC) (in operation since 2014), in Trnovo Municipality, exclusively accommodates individuals who have sought asylum in BiH and is managed by the SA of the MoS, with management, services – including free legal aid, psychosocial support, and primary healthcare - and running costs supported through a partnership with UNHCR. The Delijaš AC has a maximum capacity of 154 spaces.

At the end of September, 49 asylum seekers were accommodated at the Delijaš AC. Referrals to the centre are limited by strict conditions put in place by the SA of the MoS. On occasion, asylum seekers refuse to be accommodated there, among other factors, because the remote location of the AC. In particular, complaints have been made about the lack of internet, the poor telephone reception at the location, and the lack of sufficient transportation.

An additional location in Sarajevo, called House of All, managed by independent volunteers, continued to offer accommodation for up to 90 people in Sarajevo, largely to families, and provides several key services to residents. VP, BHWI and DRC provide respectively free legal aid, psychosocial support and health care assistance to the residents.

Una-Sana Canton

Following the 11 March 2019 decision by the Council of Ministers to formally recognize the four TRCs in USC, and the MoUs through which the SFA assumed responsibility for the centre management of the Sedra and Borići TRCs, the SFA has dedicated focal points at both centres, while IOM continues to support the management and coordination of the centres. MoUs defining the centre management and coordination for the Miral and Bira TRCs remain to be signed.

The Borići TRC (opened in January 2019 following a complete renovation supported by the EU), in the City of Bihać, exclusively hosts families with children, UASC, and other vulnerable groups. IOM staff and security personnel, as well as UNICEF and Save the Children child protection officers (CPOs), are present 24/7. The currently approved maximum capacity is 430.

At the end of September, the site hosted 275 migrants and asylum seekers.



TRC Borići/ IOM 2019

The Bira TRC (opened in October 2018), in the City of Bihać, predominantly accommodates single men, and on a temporary basis, families with children, and UASC. IOM staff and security personnel, as well as UNICEF and Save the Children CPOs, are present 24/7. While the Bira TRC has an approved accommodation capacity of 1,500, it has 1,595 beds.

At the end of September, the site hosted 1,343 migrants and asylum seekers, predominantly single men. Over the month, family members accommodated in the Bira TRC were regularly relocated to the Borići and Sedra TRCs. The layout and organization of tents and beds in the centre is constantly readapted to respond to the fluctuations of the number and composition of migrants and asylum seekers. Free Wi-Fi access is provided at the TRC by Télécoms Sans Frontières. The malfunctioning of electricity remains an issue.

To prepare for winter, IOM relocated the pre-registration area to be part of the Bira TRC building and removed the temporary tent which was outside. The new area inside the building has three rooms with a total capacity of 52 beds (36 in one room, and eight twin rooms respectively). The pre-registration area accommodated 356 persons throughout the reporting month.

The Miral TRC (opened in October 2018), in Velika Kladuša, predominantly accommodates single men, and on a temporary basis, UASC. IOM staff and security personnel are present 24/7. The Miral TRC has a maximum capacity of slightly over 600, since the areas which were destroyed during the fire on 1 June are getting renovated and equipped with beds and mattresses.

At the end of September, the site hosted 613 migrants and asylum seekers. IOM maintenance staff continuously works to improve the site and cleaning staff regularly deep clean the centre premises. During the reporting month, IOM equipped the doctor's container with water, a drainage system and air conditioning.

The Sedra TRC (opened in July 2018), in Cazin Municipality, is exclusively for families with children, UASC, and other vulnerable individuals who are prioritized for voluntary relocation from other sites in partnership with UNHCR, UNICEF, DRC, and other actors as relevant. IOM staff and security personnel, as well as UNICEF and Save the Children CPOs, are present 24/7. The site has a maximum capacity of 420 beds, of which 160 ensure more privacy.

At the end of September, the site hosted 315 migrants and asylum seekers. The site continues to be affected by the poor conditions of the building's structure and the water, electricity and heating infrastructure. The pre-registration area accommodated 212 persons during September. During the reporting month, IOM started renovating two rooms in the bungalows to be used as quarantine.

Herzegovina-Neretva Canton

The Salakovac Refugee Reception Centre (RRC) (in operation since 2000) near Mostar, provides accommodation to asylum seekers, refugees, and persons granted subsidiary protection. The centre management, services - with basic services, free legal aid, psychosocial support, and primary healthcare - and running costs have been continuously supported through a partnership with UNHCR since 2000. As part of the contingency plan of the BiH authorities the Salakovac RRC opened its doors to asylum seeking families as of May 2018, pursuant to a protocol between the Ministry for Human Rights and Refugees (MHRR) and the SA of the MoS. **The Salakovac RRC has a maximum capacity of 213.**

At the end of September, 112 asylum seekers were accommodated at this site. The MoS assumed responsibility for admitting families (from MHRR) to the Salakovac RRC which now follows strict rules, as with the Delijaš AC.

Protection:

International protection, documentation, and free legal aid

In BiH, the asylum process is the responsibility of the SFA and SA of the MoS. A person first needs to express intention to seek asylum with the SFA and then, within two weeks of expressing intention, register an asylum claim (something which can take place upon invitation only) with the SA. The SA are then responsible for evaluating and deciding upon someone's asylum claim. **The MHRR is responsible once a person has been granted refugee status or subsidiary protection.**

From 46,902 detected arrivals between 1 January 2018 and 30 September 2019, 43,902 (94 percent) formally expressed intention to seek asylum with the SFA. Of these, 2,032 (4 percent) chose and were able to formally lodge an asylum claim with the SA.

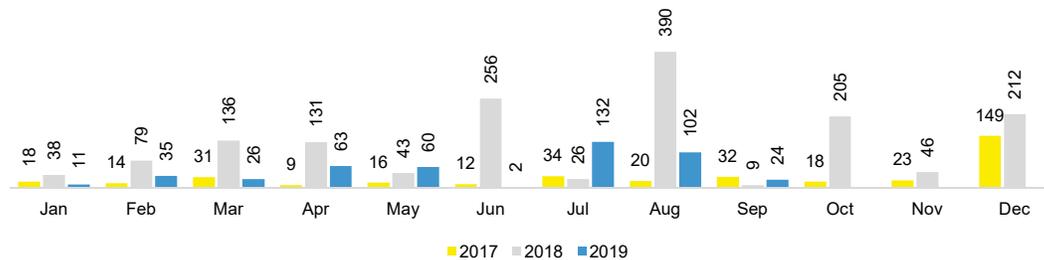
In September, there was a decrease in the number asylum seeker registrations, (24 for September while in August there were 102). Moreover, many who were registered are still waiting for asylum-seeker cards. Due to the increased number of arrivals, MoS is scheduling registrations with delay.

Several factors continue to hinder fair and efficient access to asylum for those in need of international protection. The latest available information indicate that some 700 asylum seekers are awaiting refugee status determination (RSD) interviews or a decision on their claim. UNHCR is aware of a further 1,000 individuals who wish to register their asylum claim and have been unable to. Among others factors: the SA has limited capacity to register and process asylum claims; the need in some TRCs to register an address with the SFA and have a Certificate of Residence to register an asylum claim; challenges to registering an address at Bira and Miral TRCs, including the need to pay a BAM 10.00 administrative fee (including for those residing at the ŽsU safe house); limited visits by the SA to conduct asylum registrations; short notice for asylum interviews preventing proper preparation and attendance; that while although there is no legal provision that forbids the expression of intent to seek asylum on multiple occasions, the SFA re-issue attestations on intention to seek asylum on a case-by-case basis, often precluding people not considered to be vulnerable from expressing intent

following the expiration of their initial expression; a lack of interpretation; restrictions on freedom of movement in USC.

Furthermore, and with specific reference to UASC, challenges remain regarding the appointment of legal guardians – a necessary first step to legal representation, the promotion of a child’s well-being and the safeguarding of the best interests of the child, and to enter the asylum process.

Asylum applications in BiH



This limited access, slowness issuing asylum seeker cards, as well as challenges reporting lost asylum seeker cards in several locations, prevent access to the rights provided by the Law on Asylum. Previously issued asylum seeker cards have also been allowed to expire, despite timely requests for their extension.

UNHCR and its partner VP work to promote access to the asylum procedure through information, free legal aid, and advocacy with relevant institutions and ministries. Legal assistance is provided at sites throughout the country and the VP team works to ensure that asylum seekers and refugees are properly informed of their rights and are represented in the asylum procedure; VP also supports preparation for the interview procedure and compiles CoO information reports.

In September, VP provided information on the asylum procedure and free legal aid services to 980 asylum seekers and refugees across BiH, including representation for 480 cases. VP provide these services at formal and informal sites as well as at hostels and other forms of private accommodation.

Given the challenges, UNHCR with VP continue efforts to identify those in need of international protection and to provide them with support processing their claims in BiH. Together, UNHCR and VP continued to conduct a specifically designed asylum and integration questionnaires in reception centres. The aim is to provide counsel on asylum procedures, identify those with a genuine interest in asylum in BiH, and to assess their integration potential.

At the end of September, the UN Special Rapporteur on the human rights of migrants, Felipe Gonzalez Morales visited BiH in order to monitor the human rights situation for migrants and engage discussions with relevant stakeholders. During his visit he urged the State of BiH to improve access to asylum and enhance the efficiency of the asylum procedures by setting state outreach teams that will identify and refer asylum seekers at the border, waiving the mandatory address and the administrative fee requires for registration but also by registering and assessing the asylum claims within a reasonable timeframe. Additionally, he underlined the need for reception capacities and the lack of appropriate alternative housing for UASC and victims of abuse. Finally, he raised how

inappropriate and inadequate Vučjak is, shared his concerns over the safety and health risks at the site and reiterated his call for timely solutions for those without appropriate shelter.

Protection environment and protection services inside TRCs

A number of protection risks and concerns exist for migrants, asylum seekers, and refugees in BiH, many of which are exacerbated by either a lack of appropriate accommodation, in particular for UASC and families with children, or by generally inadequate accommodation conditions. A range of actors at the various accommodation sites operate in BiH and work to identify those in need and to directly provide or refer these migrants and asylum seekers to a range of protection related services. Among others, these services include transportation to and from key services, interpretation, free legal aid, protection sensitive accommodation, psychosocial support, child protection, and SGBV related services, referral to medical care, and ad hoc provision of basic needs such as food, water, and NFIs.

The UNHCR protection team conducts weekly visits to monitor the protection environment in all reception centres and to work to identify and address protection issues. The protection team also makes ad-hoc visits to the Immigration Centre. The UNHCR protection team, in cooperation with other protection partners, work to identify vulnerable individuals including through systematic profiling, provide information, and make referrals to relevant service providers. UNHCR and their partners also organise focus group discussions (FGD) with residents in order to identify and address protection concerns as well as widen communication channels with asylum seekers and refugees. In September 25 FGDs were organised in all four TRCs in USC.

Throughout the month, DRC protection monitoring teams and staff conducted protection related activities in TRCs including the provision of information, the identification of protection needs and gaps, the identification of vulnerable individuals, profiling and referrals to authorities and services, as well as psychosocial support, GBV, and Mental Health and Psycho-Social Support (MHPSS) case management. DRC also undertake a range of community-based protection activities, including to strengthen community participation and engagement. Activities were conducted in USC, in the Bira, Borići, Sedra, and Miral TRCs, as well as in Sarajevo at the Ušivak TRC, and in HNC at the Salakovac RRC. These protection monitoring officers also supported DRC's health program component, ensuring protection mainstreaming throughout.

In September, DRC protection monitoring teams profiled 669 vulnerable migrants, asylum seeker, and refugees, including family members, UASC, and vulnerable single adult males newly arriving to reception centres in USC or returning after unsuccessful attempts to cross the border. They were all referred to the authorities and partner agencies for various services (231 were referred for accommodation). Further, and supporting the health response in USC, DRC Protection Monitoring Officers identified and referred 623 (both inside and outside the TRCs) to the medical units in TRCs for health and mental health services (18 referrals).

IOM staff present in the Ušivak, Sedra, Bira, Miral, and Borići TRCs, as well as in the Salakovac RRC, with the support of and in collaboration with several UN and NGO actors, ensures information on protection and assistance service providers is available in centres. IOM staff present at the TRCs refers migrants, asylum seekers, and refugees with identified protection needs to the SFA, UNHCR and partners, NGOs, and other service and information providers.

Additionally, IOM has on-call mobile teams available 24/7 for assistance and transportation of migrants and asylum seekers between TRCs, to medical facilities, at the request of the SFA or to other service providers. In September, in addition to 236 transportations to medical facilities and those at the request of SFA, IOM carried out 301 transports for 1,114 people for other services.

BHWI social workers, psychologists, and interpreters/cultural mediators, supported by UNHCR, are present in the Ušivak TRC, the Salakovac RRC, the UNHCR Information Centre (Monday - Friday), the Delijaš AC (four times per week), the Immigration Centre in Lukavica (at least once per week), and at the Duje Reception Centre (upon need), and provide a range of services with a focus on psychosocial support, SGBV prevention and response, and the identification of vulnerable categories, along with referrals to relevant services. BHWI also provide services in the Sarajevo urban area in locations such as House of All (twice per week). Among other activities BHWI organize SGBV prevention meetings/workshops with women and with UASC, undertake individual counselling for the identification of victims of SGBV, provide individual and group psychosocial support, psychological first aid, organized music therapy, make referrals for psychiatric examinations, organize sports, fitness, and recreational activities.

Žene sa Une (ŽsU) operate a trauma recovery programme for women in the Sedra TRC as well as in their safe house. The programme works to promote psychological recovery and social integration. Two groups of women participate in workshops which work to reduce the symptoms of depression and anxiety and support recovery from trauma. Moreover, they work to identify problems or issues experienced by the women in a participatory manner and act as an entry and referral point to other specific programs and individual work organized by other actors.

Protection environment outside TRCs and protection outreach

Due to limited accommodation capacity, increased arrivals and, in cases, objective reasons for individuals and families to choose not to stay in the available accommodation capacity, an increasing number of migrants and asylum seekers are present outside of the established TRCs, the AC, and the RRC. Migrants and asylum seekers are also in transit between locations in BiH and exposed to a range of protection risks.

Measures put in place by Cantonal authorities in USC to limit the freedom of movement of asylum seekers and migrants both to and within USC continued in September. Related police checks of buses and trains continued. Further, the Cantonal authorities continue the practice whereby no newly arriving migrants, asylum seekers, or refugees can enter USC, regardless of vulnerabilities, without prior confirmation of available accommodation space.

Such restrictions placed on freedom of movement can, *inter alia*, inhibit access to rights such as access to the asylum procedure, healthcare, and cause and prolong family separation. These measures also expose migrants, asylum seekers, and refugees to protection risks, in particular for those disembarked from transport at the Cantonal border and in locations without services, and place additional burden on humanitarian workers and limited outreach capacity.

As during previous months, while vulnerable categories were admitted (as above, assuming available space), newly arriving single men continued to be denied access to the TRCs in USC. In addition to the risks related to a lack of safe and secure shelter, due to the absence of an individual approach to

assessing and determining access to shelter (assessment based simply on gender and family status), it is likely that extremely vulnerable individuals were among the single men denied accommodation.

In September 2019, the authorities continued to transfer migrants, asylum seekers, and refugees living in squats or on the street in Bihać municipality to the Vučjak location (and in some cases people residing in private accommodation, including registered asylum-seekers) - groups of up to 200 people were obliged to walk to the location (as far as 10 km in cases). Police are also said to inhibit movement from the site unless it is to attempt to cross the border into Croatia. In cases, UASC are transferred to the site and are later allowed to return to reception centres, but only through the intervention of the local social services.

Such practices encourage migrants and asylum seekers to limit public outings, to avoid systems of support, as well as to select less visible and often more dangerous routes when moving/transiting, exposing themselves to greater protection risks.

Inter alia, the following protection risks have been identified at the Vučjak location: restriction of freedom of movement; lack of safe and dignified accommodation conditions; lack of registration and legal assistance; exposure to coercive measures; exposure to health risks; stigmatization and degrading treatment; exposed to negative coping strategies.

With regards to restricted movement in USC, VP was informed that the file has been closed and agreed with Ombudsperson to submit additional appeal, including more personal details of affected beneficiaries with special focus on asylum seekers. Additionally, the Constitutional court of BiH rejected the request for interim measures regarding forcible relocation to Vučjak as it has been submitted by unauthorized person. The request should be submitted by a person directly affected by the violation of guaranteed rights.

Given the increased presence of migrants and asylum seekers outside of accommodation centres, UNHCR, DRC, UNICEF, in close cooperation with IOM, deploy outreach and protection monitoring teams in USC, and work to monitor the protection environment, provide protection by presence, to identify vulnerable individuals (families, single women, UASC, persons with disabilities or serious health issues), to provide key information, and to directly provide or refer these migrants and asylum seekers to a range of protection related services.

Individual cases identified, depending on the case specific circumstances and vulnerability, are referred to the DRC Protection Team in the TRCs or, when needed, to Medical Teams, funded by ECHO. During the reporting period, the UNHCR/DRC and UNICEF/StC Outreach Protection Team observed 3,726 arrivals to Bosanska Otoka (3,102 single men, 11 single women, 198 adults in families, and 264 children, of whom 128 were UASC). During September, 351 vulnerable persons were identified, provided with information and referred to accommodation.

Further, UNHCR, in partnership with DRC and VP, continues to monitor and register incident allegations of persons attempting onward movement from BiH to Croatia. To-date in 2019, partners registered 56 reports relating to 425 people. Of these reports, 96 percent contain alleged protection incidents that happened during pushbacks on the territory of Croatia and of which 67 percent relate to theft, extortion or destruction of property and 61 percent relate to denial of access to asylum.

UNHCR maintains an information centre in Sarajevo which makes referrals to relevant and available services, as well as offers psychosocial support, through its partner BHWI, and free legal aid, through its partner VP. Translation and childcare support are provided.

Child Protection

In September, 93 UASC were observed staying outside of reception facilities in USC, due to limited capacities in appropriate reception facilities, lack of family- and community-based alternative care options, as well as an unwillingness to be accommodated due to immediate onward movement intentions. This is of serious concern as it renders UASC at heightened risk of protection incidents and often without access to basic humanitarian assistance.

Matters are further complicated because UASC are not easily identified in public spaces. For example, when UASC arrive by train/bus in USC, they are often not identified as minors and are referred back to Republika Srpska, although they should be identified and able to be referred to accommodation within USC. Within the territory of USC, when in public spaces, they are often not identified as UASC and are referred to Vučjak.

In addition, there is often a challenge to provide timely accommodation in the Bira TRC as its pre-registration capacities are limited. Compounding this, following disembarkation from trains from Sarajevo to Bihać, during the night when doctors are not present, and if there is no quarantine space in the Bira TRC, families and UASC are left between two entities on the street in the middle of the night, exposing them to protection risks.

Further complicating matters, as TRCs in USC primarily accept families and UASC, there is an increasing trend of single men who claim to be UASC or part of bogus family compositions comprised of a single man and UASC, to get preferential access to services. Often the single adult of one of these bogus family compositions leaves the child behind, leaving the child unaccompanied. So far, 43 children have been left behind and assigned legal guardianship by the Bihać CSW. UNICEF is closely working with Ministry of Health and Social Policy and CSWs to promote foster care and, in cooperation with UNHCR, to establish a BID panel for the most vulnerable. UNICEF is advocating with authorities and other agencies for foster care for the youngest, support for independent living for older ones, and shelter for the most vulnerable UASC.

UNICEF continues to strengthen outreach activities and child protection teams at points of entry to USC with four social workers (three for the Bihać CSW and one for the Ključ CSW) enhancing the protection and guardianship appointments for identified UASC. Basic NFIs and food items – such as baby food, procured by UNICEF exclusively for outreach activities, are distributed by outreach teams to the most vulnerable, especially children and pregnant women.

UNICEF deployed three outreach workers who operate in different locations in USC including: Ključ, Velečevo, Velika Kladuša, Canton 10, Bosanska Otoka, etc., and, in partnership with Save the Children, supports another outreach team which operates in Bihać, Velika Kladuša, Bosanska Otoka, and the Bira TRC. Their task is to identify UASC and refer them to existing services including accommodation, MHPSS, free legal aid, and medical support. In September, these outreach workers identified 186 UASC and 145 families, and among them 93 UASC and 128 families were referred to accommodation. As pre-registration areas in the Bira and Sedra TRCs have started operating and

capacities have increased since mid-August, it has been easier to refer identified UASC and families with children to accommodation.

During the reporting period, UNICEF continued to support the CSWs in Bihać, Cazin, and VK, and a multi-disciplinary team from the CSW in Bihać operating after working hours and during weekends, with a focus on the protection of migrant and asylum seeker children, with a special emphasis on UASC. This additional social service workforce provides legal guardianship to identified UASC, conducts BIA, and provides escort to transfer UASC to the designated zone in the Bira TRC or other accommodation (e.g. safe house). In September, through UNICEF support, the CSWs in Bihać, Cazin, and Ključ assigned legal guardianship in total to 173 newly arriving UASC

Social workers from the CSWs are reluctant to appoint a legal guardian to UASC who are not registered and to whom a social worker cannot guarantee accommodation. In VK, more than 45 UASC that were not admitted to a TRC were recorded and only 12 of them agreed to be relocated to the Bira TRC. Due to pressures from authorities, UASC and families resort to hiding in abandoned houses or nearby woodlands and are less visible. UNICEF in partnership with Save the Children and IOM are still in are working to establish a designated zone for UASC in Miral TRC and to recruit Child Protection Officers. It is foreseen that this will be operationalized during the beginning of November.

UNICEF, in partnership with Save the Children, continued to provide 24/7 on-site child protection support at the Sedra, Bira, and Borići TRCs for migrant and asylum seeker children and their families. 15 Child Protection Officers (CPO) provided general advice and assistance, referral to relevant institutions/organizations, psychological first aid, individual and group counselling, follow-up support for children identified at risk of protection issues or victims of violence and engagement with parents to enhance their parental skills. In September, a total of 264 children were reached: 121 in the Borići TRC (85 boys, 36 girls), 44 in the Sedra TRC (32 boys, 12 girls), and 99 in the Bira TRC (99 boys).

In the Bira TRC, UNICEF and Save the Children support a team of 16 CPOs for UASC and two CPOs for families provide 24/7 on-site support in close cooperation with the Bihać CSW. The CPOs provide information, psycho-social support, psychological first aid, case-management, general assistance and referral to relevant institutions/organizations, medical escort and follow-up on medical cases, individual and group counselling, English and Bosnian classes, literacy classes, art therapy and creative workshops, educational workshops (hygiene, sexual reproductive health), sport activities and board games, and life skills education, in-line with the “Boys on the Move” methodology introduced by UNFPA. In September, support was provided to 449 UASC (all boys) in the Bira TRC.

The Miral TRC, regarding UASC, is concerning. While the location generally doesn't provide an adequate protection environment for UASC, not only has it proven challenging to prohibit UASC from accessing the site but there are also limited alternatives. For instance, the majority of UASC decline offers to be relocated from the Miral TRC to the Bira TRC. Further, those UASC who do agree to be relocated from the Miral TRC – through efforts to provide more appropriate shelter - often quickly return to the Miral TRC in an irregular manner or seek shelter in squats and other informal locations. Returning irregularly renders UASC without access to the services available in the Miral TRC, including food/NFIs and healthcare. Staying in squats or sleeping rough exposes UASC to heightened protection risks. Moreover, in the process, legal guardianship is lost (when UASC move from one municipality to another in an organised manner then the transfer of guardianship is organised

accordingly between the CSWs). As such, there is a need to increase reception capacities for UASC at the Miral TRC.

During the reporting period, in the Bira TRC, two social workers, seconded to the Bihać CSW, with the support of UNICEF, and in partnership with Save the Children, are present on daily basis and perform the role of legal guardians to UASC and providing child protection support. Since the end of April, 675 children in the Bira TRC were appointed legal guardians (109 new legal guardianships in September). The social workers also provided outreach support and accompanied children from different locations in USC where they are identified to the Bira TRC, including UASC.

In the Miral TRC, two social workers, seconded to the VK CSW, with the support of UNICEF and Save the Children, are present daily and perform the role of legal guardians for UASC and provide child protection support. Since mid-February, 64 children in the Miral TRC were appointed legal guardians. The social workers also accompany children from different locations in USC where they are identified to the Bira TRC, including UASC identified in front of the Miral TRC.

UNICEF and SOS Children's Villages continued to provide 24/7 on-site child protection support at the Ušivak TRC. The child protection team provides on-site support (case management, psychosocial support, education, and recreational activities) for migrant and asylum seeker children with a focus on UASC and makes referrals to external support services (legal representation and assistance, medical services) when required and monitors the provision of services to UASC in close partnership with the Hadžići CSW. In September, support was provided to a total of 164 UASC, including psychosocial support to 47 UASC and other child protection support to 117 UASC. The continuous fluctuation of UASC influences the number of participants, since many UASC stay for one or two nights only.

UNICEF and World Vision continued to provide protection support at the Salakovac RRC. A World Vision CPO provided psychosocial, educational, and recreation support

BHWI have made social workers available to the Hadžići CSW in Sarajevo Canton to be appointed as legal guardians, conduct BIA, and provide psychosocial support. Only a minority of UASC at the Ušivak TRC are appointed legal guardianships, largely due to their short stays at the TRC. Some inefficiencies in the procedures of appointment also contribute. In September, BHWI identified 46 UASC at the TRC – 10 were appointed a guardian in the month.

Supported by UNICEF, and operated by ŽsU, SOS Children's Villages, and World Vision, Child Friendly Spaces (CFS) operate at the Salakovac RRC, the Ušivak TRC, the Borići TRC, the Bira TRC, and the Sedra TRC (where there are two spaces, one for children under twelve and one Youth Centre for children 12 – 17). In September, a total of 492 (192 girls, 300 boys) children benefitted from CFS services across all sites: 47 at the Salakovac RRC (26 girls, 21 boys), 154 at the Ušivak TRC (62 girls, 92 boys), 118 at the Borići TRC (46 girls, 72 boys), 10 at the Bira TRC (10 boys), 114 at the Sedra TRC CFS (40 girls and 74 boys), and 49 children at the Youth Centre (18 girls, 31 boys). CFS operate as multi-functional centres to prevent and respond to protection concerns and connect children and their families with a variety of humanitarian services. They provide children with opportunities to develop, play, learn, and strengthen their resilience, as well as access psychosocial support. CFS also offer a space for the identification, referral, and follow-up, and/or direct support of at-risk children. In August, CFS provided a total of 532 services (437 educational/recreational, 95 psychosocial/HEART): 130 activities at the Ušivak TRC (120 educational/recreational, 10

psychosocial); 102 activities at the Salakovac RRC (93 educational/recreational, 9 psychological/HEART); 31 at the Bira TRC (27 educational/recreational and 4 HEART); 96 at the Borići TRC (84 educational/recreational, 12 HEART); and 173 at the Sedra TRC (113 educational/recreational, 60 HEART).

Extremely vulnerable individuals and GBV prevention and response

Médecins du Monde (Mdm) in cooperation with UNFPA, continued to support GBV survivors and women and girls at high risk through targeted group and individual psychosocial support counselling provided by two psychologists operating in the Bira, Sedra, and Borići TRCs three times per week – UNFPA psychologist were available for crisis interventions. In September, a total number of 56 women received psychosocial support, including 11 GBV cases with follow-up and referral to other services in cases of need.

In USC, UNFPA, through Mdm, continued to manage three Centres for Women and Girls (WGC) in the Bira, Borići, and Sedra TRCs, assisting vulnerable women and girls and GBV survivors to rehabilitate and strengthen resilience through empowerment programs and life-skills education. In September, 444 participations of women were recorded in the WGCs. Noting that a significant number of the women and girls who access services in the WGCs are illiterate, a literacy program commenced in July. UNFPA ensures that WGCs are closely linked to reproductive health services – UNFPA/MDM ensure gynaecological examinations are conducted by a female gynaecologist with the support of three women empowerment officers who speak Arabic, Farsi and Turkish.

In September, UNFPA in cooperation with its partners, presented a GBViE mapping diagram at the first GBViE interagency coordination meeting in USC.

BHWI continued to work on SGBV prevention, identification, and response in the Delijaš AC, the Immigration Centre, the Ušivak TRC, House of All, and the Salakovac RRC, including through individual counselling, family counselling, and counselling focused on self-protection in camp and migration contexts. BHWI also provide workshops and training sessions.

A limited number of spaces in specialized accommodation facilities are available for people identified as extremely vulnerable, including UASC and victims of SGBV, through the IFS-EMMAUS Centre for Children and Youth at Duje and with ŽsU. In September, Protection teams continued to identify and refer particularly vulnerable individuals to ŽsU for safe accommodation, where they also receive counselling and psychosocial support, in collaboration with DRC who continued to provide GBV case management as well as mental health and psychosocial support case management.

Health:

Primary and Secondary Healthcare

DRC continues to provide healthcare for migrants and asylum seekers who are registered in six centres: in USC, the Bira, Borići, Miral, and Sedra TRCs; in Sarajevo Canton, in the Ušivak TRC; in HNC, in the Salakovac RRC. In each of these centres, primary healthcare is provided on-site through the engagement of medical teams from local primary healthcare centres (PHCs) (the Bihać, Bosanska Krupa, Cazin, Hadžići, and VK PHCs). Specialized services on the primary level (including laboratory analysis, gynaecological, paediatric and other services) have also been covered through the Bihać, Cazin, and VK PHCs in USC, at the Hadžići PHC in Sarajevo Canton, and at the Stari Grad Mostar



PHC in HNC. For those accommodated in the Delijaš AC, primary healthcare continued to be provided with the support of UNHCR by the Trnovo PHC.

Secondary healthcare services are provided through Cantonal Hospital Dr. Irfan Ljubijankic in USC and through the General Hospital in Sarajevo Canton. In HNC, the secondary health care services are ensured through Cantonal Hospital Dr. Safet Mujic, Mostar and University Clinical Hospital

Mostar. Specific cases are referred to the University Clinical Centre Sarajevo.

In September, WHO in cooperation with DRC, held a Health Coordination meeting between the Ministry of Health of the Federation of BiH, the Ministry of Health, Labour and Social Policy of USC, UN agencies, implementing partners, and ECHO. Discussion covered the need for accommodation solutions, an increase of medical staff, mobilization of funds and resources for winter, and the establishment of regular health coordination meetings. Furthermore, WHO and DRC facilitated a field monitoring visit of the representatives of the Federal Ministry of Health of Sarajevo and USC to the TRC medical units.

During the reporting period, 6,055 medical examinations and 1,371 medical interventions were carried out by the medical teams engaged through the respective PHCs in the six centres. A total of 239 primary healthcare referrals and 143 secondary healthcare referrals were made. JRS and DRC assisted 399 patients through 261 accompaniments towards various health care institutions, providing accompaniment and translation services for the beneficiaries referred to specialized services and secondary health care services.

DRC continued with the provision of medication for migrants, asylum seekers, and refugees in need through the medical teams engaged in the field. According to the established system, medications were provided according to the requisition designed by the medical teams. Disposable medical supplies, necessary for provision of health services, are provided by DRC in accordance with requisition designed by the medical teams, and in accordance with funds available.

DRC has frequent consultations with the Primary Health Institutes (PHI) in Sarajevo Canton and USC for counterchecking and updating the protocols for proper maintenance of premises of temporary infirmaries, as well as for the treatment of scabies and pediculosis in TRCs. These will be shared again with the CCCM and other service providers for consideration and action taking.

Mental Healthcare Services

In partnership with DRC, mental health services were provided in the Bira, Borići, and Miral TRCs, through the regular presence of psychologists engaged through Mental Health Centres within the engaged PHCs. In September, a total of 87 (MHPSS) consultations were made, of which 55 took place in the Borići TRC. Services are not available for the hospitalization of more serious cases and rehabilitation therapy and treatment for the addicts is not available.

MDM in cooperation with UNFPA, continued to support GBV survivors and women and girls at high risk through psychosocial support counselling (target groups and individual). In September, a total

number of 56 women (182 participation recorded) received psychosocial support, of which - 11 GBV cases, referrals to others potential services in cases of need were included. Women were assisted with psychosocial support by two psychologists operating in the Bira, Sedra, and Borići TRCs three times per week. In addition, the UNFPA psychologists were available for crises interventions.

Paediatric Healthcare

In September, UNICEF in partnership with DRC, supported three paediatric teams (two outreach to the Borići and Bira TRCs and one based within the Sedra TRC). The outreach teams provided a total of 99 services to 75 children (aged 1-17 years). The paediatric team in the Sedra TRC, provided 141 services to 78 children (50 boys and 28 girls) aged 1-17 years. In September there was a noticeable increase in family departures from the Sedra TRC, reducing demand for paediatric medical assistance. The paediatric team provided healthcare services to patients with diverse symptoms, mostly attributed to the common cold/flu.

The paediatric team from the Bihać PHC and the Cazin PHC conducted the final phase of August school entrance medical examinations - 89 beneficiaries, twelve of which were UASC, from Bihać, the Borići TRC, the Bira TRC, and the Sedra TRC were referred for laboratory and microbiological analysis by the UNICEF/DRC teams. In total, 26 beneficiaries were issued a medical certificate for school enrolment.

Sexual and Reproductive Healthcare

UNFPA organised a SRH workshop in September, for USC, to raise awareness, empower women, and identify those in need of gynaecological examination - 22 women participated.

UNFPA ensures that WGCs are closely linked to reproductive health services. UNFPA/MdM ensure gynaecological examinations are conducted by a female gynaecologist with the support of three women empowerment officers who speak Arabic, Farsi and Turkish.

In all centres, Protection Monitoring Officers supported DRC medical teams with regular follow-up on chronic medical cases of migrants, asylum seekers, and refugees. The Protection Monitoring officer in the Borići and Sedra TRCs support with the distribution of sanitary pads and condoms.

NFI:

IOM continues to provide NFIs for newly arriving asylum seekers and migrants in all five TRCs. An NFI distribution system is in place and operational with set schedules displaying distribution times. IOM provides NFIs welcome kits, after which individual NFIs refills are provided. The Red Cross, receiving many donations from the public, regularly complements and contributes to IOM's NFIs distribution.

In September, IOM distributed a total of 54,594 NFIs in the five TRCs (8,651 NFIs to 409 people in the Borići TRC, 16,805 to 3,319 people in the Bira TRC, 10,864 to 945 people in the Miral TRC, 7,677 to 287 people in the Sedra TRC, and 10,597 to 1,527 in the Ušivak TRC). The centre population in the Bira and Sedra TRCs, where IOM has a small NFI warehouses and storage halls, contributes to the organization and unpacking of delivered NFIs. The distribution of specialized NFIs packages to hospitalized migrants and asylum seekers from the Sedra TRC, which contains pyjamas, slippers, a towel and other NFIs necessary for hospital stays, continued during the month of September. IOM provides clean sheets and linen upon arrival and for those in scabies treatment, or other medical

cases as per need. IOM provides exceptional additional NFIs in the Salakovac RCC, especially during transportation from the Ušivak TRC or from SFA offices.

During the reporting month, IOM increased distribution of second-hand clothes to migrants, asylum seekers, and refugees in the Sedra and Borići TRCs due to colder weather. These were mostly donations from the local population.

IOM arranged for two Migrant Assistants to work at the warehouse in the Bira TRC, resulting in more frequent distributions. This helped reduce minor arguments among those queuing.

[In September, a total of 454 NFI packages \(primarily hygiene products\) were provided to women by UNICEF: 446 at the MBCs in Sedra, Borići and Bira and 8 at the Ušivak TRC. Additionally, UNFPA continued to distribute hygienic pads and modern contraceptives for women and girls as needed, through the WGCs.](#)

The level of satisfaction of the TRCs' populations with NFIs was generally high among the respondents to IOM's beneficiary satisfaction survey in September, with the majority of respondents stating that they have everything they need. The two major items that respondents complained not having enough of were clothes/shoes and a good WiFi connection, especially in the Bira and Miral TRCs.

WASH:

[The Borići TRC has 23 toilets and 16 showers inside the building and 21 toilets and 13 showers outside the building](#) (in sanitary containers) and facilities are separated per gender. Hot water and drinking water are available in the centre. Six washing machines and six dryers are installed, and operational and centre residents are involved in the laundry operations on a voluntary basis. During the reporting month, IOM provided laundry services to an average of 95 people weekly, washing over 120 bags of laundry each week.

[The Bira TRC fixed additional toilets which increased the capacity from 92 to 132 toilets and has 58 showers. Facilities are separated by gender and](#) drinking water is available in the centre. Several repairs take place every week in the centre to repair broken facilities. Although the Bira TRC continues to struggle with broken facilities and equipment, which usually results in an average of 25 toilets being out of order and a considerable number of showers lacking hot water, the awareness raising campaigns promoted by IOM in coordination with the JRS cultural mediation team on how to take better care of common WASH facilities have proved to be successful.

[Initiated by IOM through a previous project, joint cleaning actions are organized regularly in the area around the facility](#) with the voluntary participation of many migrants and asylum seekers staying in the TRC. [Caritas continued to provide laundry services in the Bira TRC, washing on average 250 bags of clothes in September, in addition to IOM washing bed linens and blankets.](#)

[The Miral TRC has 55 toilets and 34 showers.](#) Facilities are not gender separated since the centre only hosts single males and a few UASC boys. Drinking water is available in the centre. IOM completed the construction works on additional drainage for the sanitary containers during September. An operational laundry system is in place, allowing the centre population to wash their personal belongings. [In September, an average of 260 laundry bags were washed and dried weekly for an average of 155 people,](#) in addition to the bed-linen and other centre inventory washed by the centre staff. During the reporting month, IOM installed a wheelchair ramp for sanitary containers.

The Sedra TRC has 53 toilets and 59 showers, with 43 rooms with private facilities for a total of 163 people. The remaining TRC population has access to shared toilets and showers, separated by gender. Drinking water is available in the centre. The laundry system is in place and operational with six washing machines and six dryers washing an average of 320 laundry bags for an average of 230 residents weekly. The TRC population contributes to the laundry operations on a voluntary basis. Minor challenges with the availability of hot water and WASH facilities persist.

The Ušivak TRC has 33 toilets and 28 showers and facilities are separated by gender. Hot water and drinking water is available at the centre. The centre population is actively involved in cleaning and maintenance of the centre, during food distribution, and in the organization of the centre's communal activities and spaces. A laundry system is in place with two industrial washing machines and one industrial dryer. During the reporting month an average of 270 bags were washed weekly. In September, IOM started to improve the heating system in the toilets in preparation for winter. The TRC's sewage system was connected to the public system in September.

In the Salakovac RRC Caritas provided a range of WASH/hygiene items in September.

IOM continues to support disinfection, deratization and disinsection measures in all TRCs in USC. Disinfections are organized weekly, while disinsections take place monthly, and deratization take place every three months.

WASH facilities at House of All are separated by room, with 21 toilets and 21 showers for approximately 70 residents.

Food:

Asylum seekers accommodated in the Delijaš AC are provided with a monthly food package by the MoS in accordance with recommendations made by a nutritionist at the Sarajevo Federal Institute for Public Health. Further to this food package, additional food and supplements are provided for pregnant women, chronically ill individuals, and children up to the age of 10. A fresh food allowance to the amount of BAM 30 per month is also given to every asylum seeker at the Centre. BHWI provide additional support with nutritional needs in specific cases as per recommendations made by a doctor.

The Red Cross Mostar Branch, supported by IOM, prepares and distributes three meals per day to asylum seekers and migrants at the Salakovac RRC. In September, 8,104 meals were provided. BHWI provides additional support with nutritional needs in specific cases as per recommendations made by a doctor. Caritas supported with food babies in coordination with the management of the centre.

In the four TRCs in USC managed by IOM, IOM/the Red Cross (the Bihać and USC branches) continued to support the provision of three meals (breakfast, lunch and dinner) and two fruit snacks per day. During the reporting month IOM worked to improve the menus together with a nutritionist to reflect the centres populations' suggestions. Meals are prepared and distributed in-line with international standards that guarantee sufficient nutritional calorie intake. In the Sedra and Miral TRCs, meals are prepared on-site, whereas for Bira and Borići TRC, the Red Cross prepares meals at their own premises and transports them to the site.

In September, IOM/the Red Cross provided a total of 18,635 meals in the Borići TRC, 82,786 meals in the Bira TRC, 16,095 meals in the Sedra TRC, and 11,693 meals in the Miral TRC.

In all TRCs, IOM provides specialized food (gluten-free, vegetarian) to those with specific dietary requirement upon a doctor's recommendation/medical prescription or to those who are vegetarians. School children receive an early breakfast on school-days and additional milk is distributed daily to parents or care-takers of children. A man accommodated in the Sedra TRC who has experience as a chef regularly assists the Red Cross during food preparation in order to together adapt the taste of the food to one that a large portion of the centre's population is accustomed to. Additionally, IOM/Red Cross provide food for the families who wait for transportation to Bihać in front of Miral TRC.

Open kitchens equipped by IOM for the centre populations to cook their own food are operational in the Sedra, Miral and Bira TRCs. In the Borići TRC, works to establish an open kitchen are ongoing. The centre population is actively involved in keeping these spaces clean. In Bira TRC, one voluntary focal point has been appointed for this purpose.

In the Ušivak TRC, three meals per day plus two fruit snacks are prepared and distributed with the support of Pomozi.ba and the EU. Meals are prepared and distributed in-line with international standards that guarantee nutritional value, variety and a daily calorie intake. 38,133 meals were distributed in September. Pomozi.ba does not have the capacity to provide for specialized food for medical cases, or for extra nutritional food for pregnant and lactating women.

Migrants and asylum seekers accommodated by House of All are provided with food such that they can prepare three meals for themselves per day.

Asylum seekers accommodated in the ŽsU protective shelter are provided with groceries such that they can prepare meals for themselves in-line with their own practices and schedules.

UNICEF, in partnership with ŽsU, SOS Children's Villages, and World Vision, operated Mother Baby Corners (MBC) at the Salakovac RRC, and the Ušivak, Borići, Bira, and Sedra TRCs. MBCs provide parents with IYCF counselling, information/awareness raising on breastfeeding and hygiene, psychosocial counselling, and support the provision of infant food and hygiene products. In September, a total of 96 mothers and 117 children under five benefitted from MBC services: seven mothers and 14 children (six girls and eight boys) at the Salakovac RRC; 42 mothers and 50 children (18 girls and 32 boys) at the Ušivak TRC; 23 mothers and 27 children (nine girls, 18 boys) at the Borići TRC; one mother and one child (one boy) at the Bira TRC; 23 mothers and 25 children (14 girls, 11 boys) at the Sedra TRC. UNICEF and DRC prepared IYCF materials and printed them in English, Arabic, and Persian. The materials were disseminated to target migrants and asylum seekers in TRCs in USC within MBC and medical/paediatric units following parents/caregiver counselling. UNICEF and DRC continue to follow up with IYCF activities and strengthen the capacities of relevant staff.

Outreach Protection Teams supported by ECHO and UNHCR, during the month of September, provided energy saving food supplies and emergency non-food items for the most vulnerable refugees, asylum seekers and migrants (including families, UASC and single adult males) identified in the pushback areas or disembarkation points in USC (Ključ and Bosanska Otoka). In total, 2,189 people were assisted (238 children, 1,951 adults) and 8,645 food items and 995 NFIs distributed. Provision of emergency food and non-food items was supported through ECHO funding.

Education and leisure:

UNICEF, in cooperation with the Ministry of Education in USC and with Save the Children, enrolled 187 children (52 girls and 135 boys) in five primary schools in Bihać and Cazin municipalities. Of these, 36 already attend classes while the remaining children await the obligatory pre-school medical certificates. In two schools (Ostrožac – unit Prošići and Prekounje), in USC, the organisation of two preparatory HEART groups was agreed. Children will be start in this preparatory classroom prior to their placement into regular classrooms. Furthermore, UASC between 6 and 15 years were also enrolled into primary schools in Bihać. All children that were enrolled in the previous school year are to continue this school year within the same schools.

UNICEF jointly with Save the Children team of cultural mediators in education, held informative meetings with the UASC from the Bira TRC, regarding the procedure of their enrolment into primary education in USC. The teams continued to support the children at schools by accompanying them to and from the school, assisting them in their individual school work as well as by organising workshops for about 130 teachers on cultural competencies.

Further, children attending the CFS in the Bira, Borići, and Sedra TRCs, as well as in protective shelter, participated in educational and creative workshops over the month, provided by ŽsU in partnership with UNICEF.

Asylum seeker children in the Salakovac RRC are still excluded from formal and structured non-formal education, pending approval of the Cantonal Government. VP previously submitted appeals to the Ombudsperson and in May received reply that appeals have been submitted to the MoS and the Ministry of Education (MoE) of HNC for further observations. In lieu of approval from the HNC MoE for asylum seeker children to attend school, "My School", a custom education program (attended by 28 children) run by BHWI continued in September in the Salakovac RRC.

In the Salakovac RRC, BHWI, supported by UNHCR, provide a range of activities, including knitting workshops, women's aerobics, and sports and recreational activities. Childcare services are provided during the activities as needed.

In the Delijaš AC, BHWI, supported by UNHCR, provide activities for children and adults, including, educational activities for children with a focus on preparing for school enrolment in the BiH education system, sports and recreational activities and Bosnian/Croatian/Serbian lessons.

In the Ušivak TRC, recreational activities provided by BHWI were affected by the high turnover of people in the TRC. Despite this, several activities were organized in smaller groups or on an individual level. These included occupational therapy sessions such as drawing, decoupage, board games, and manicure workshops. In September, IOM organized a tennis, volleyball and chess tournament in Ušivak TRC, in addition to IT workshops organized by the World Vision.

In the Bira TRC, during the month of September, Church World Service (CWS) provided educational and recreational activities. The aim of the activities was to strengthen the capacity of beneficiaries for easier integration into the local community, to contribute to their resilience, and to increase their knowledge on the challenges ahead. In addition, IPSIA organized a picnic for 50 UASCs.

In Miral TRC, IOM started organizing the formation of football and folklore groups at the requests of the centre population. IOM plans to organize tournaments with each team representing their country. These teams will be used to select the best players to form a mixed Miral TRC football team. The

location will be in the Miral TRC’s outdoor area, which has been used as a football pitch since IOM provided footballs and built football goal posts.

The Integration Centre Units (ICU) ran by ŽsU, continue to offer a range of intercultural activities in the Sedra TRC and Bira TRCs. The spaces are equipped with computers, board games, playing cards, handicrafts, internet, library, etc. IOM staff continued to organize English classes twice a week in the Miral TRC.

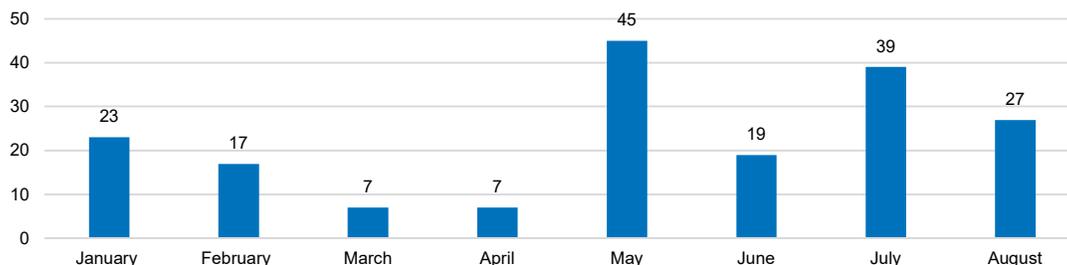
Durable solutions, support to host communities, and social cohesion:

DRC, with the support of UNHCR-funding and in cooperation with the Swiss Agency for Development and Cooperation (SDC), started the reconstruction works of the existing Pulmonary & Infectious Department of the Cantonal Hospital *Dr. Irfan Ljubijankić* in Bihać. The works are expected to be concluded within two months will enable the accommodation of approximately 18-26 patients in this specific Department of the Cantonal Hospital.

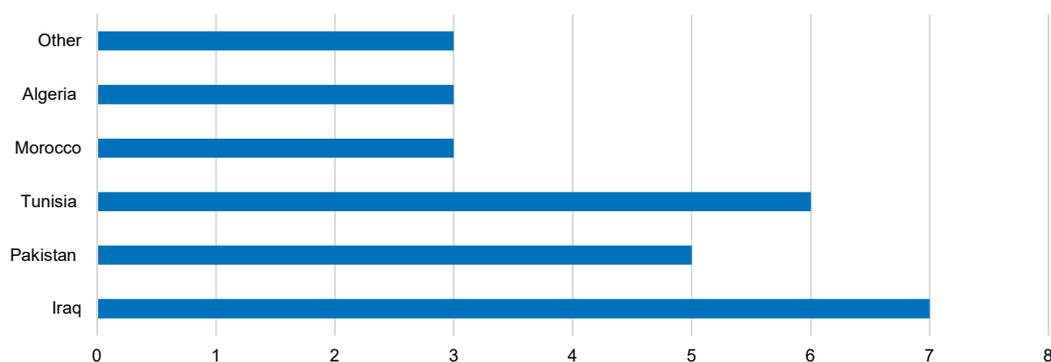
UNHCR together with VP BiH continue to provide information and assistance to asylum seekers and refugees regarding the family reunification procedure.

With the support of the EU and the Netherlands, IOM provided more than 607 information sessions in the centres assisted 25 people in returning to their CoO in September.

Assisted Voluntary Returns from BiH - 2019



Top countries of return in August 2019



IOM provides outreach, dissemination of information, provision of counselling and logistical assistance to return and reintegration applying established eligibility criteria for AVR assistance, as well as for more comprehensive reintegration assistance, implemented consistently by IOM throughout the Western Balkan region. IOM provides operational and logistical support in obtaining

travel documents, facilitating fit-to-travel health checks, and providing airline tickets as well as transit assistance as required. IOM AVRR assistance includes limited accommodation while waiting for repatriation (two days for all cases, and for the entire waiting period for vulnerable cases only), support in obtaining travel documents, travel costs, and limited cash-transfer for reinstallation and onward transportation in the country of return. For medical and vulnerable cases, medical costs as well as in-kind reintegration assistance in the form of grants for education, training or business start-ups is provided.

[The Bihać CSW multidisciplinary team, in cooperation with UNICEF, continued organizing activities aimed at social cohesion of UASC and local adolescents.](#)

In terms of other small-scale initiatives:

- Integration activities for children from the Borići TRC take place at the CFS, including creative reading workshops, illustration, puppet creation, and art.
- The hair dressing salon established in the Sedra TRC by IOM is running with the supervision of ŽsU. The centre population provides hair dressing services.
- IOM organizes weekly “movie nights” for the population of the Miral and Borići TRC. Each week, a movie from a different country is screened in the centres.
- IOM continued with the organization of cooking events in the Miral TRC and, during the reporting month, in other TRCs as well, where each national group was provided with ingredients and cooking facilities to prepare traditional dishes from their country. These events help centre residents of different backgrounds to bond and to know each other’s cultures through food tasting.
- World Vision provided a range of activities for those in the Ušivak TRC, including non-formal education activities, sports and recreational activities, and an information desk.

Safety and security

IOM and Security staff are present 24/7 at all TRCs and working to prevent and respond to safety and security risks and incidents. Inspections and internal investigations of thefts and misconduct of the centre population are regularly carried out and video-surveillance or other distant monitoring mechanisms are in place in all centres excluding the Sedra TRC.

During the reporting period (23-27 September) UNFPA continued the GBV sensitization training sessions for humanitarian personnel, as part of IOM’s security briefings. A total of 144 staff members from various humanitarian organisations and security agencies participated.



TRC Miral/IOM 2019

UNDSS provided Country Specific Security [Orientation Briefings for new personnel deployed in USC.](#)

[Throughout the month of September, the security situation in all TRCs was relatively stable, with only a few security incidents reported. One of the incidents was an attack on an IOM staff by a migrant residing in one of the TRCs. The police and the SFA were informed immediately and the incident was reported to UNDSS.](#)

IOM took initiative on several activities to improve the security situation in Bira TRC such as moving the security container to the south side of the TRC which resulted in a better overview of unauthorized entrances for the security staff. Unauthorized entrances still however constitute an issue in the centre.

In the Sedra TRC, the evacuation route was repaired and the TRC now has a route from the west side of the hotel.

The main recurrent security issues relate to tensions and over-crowdedness caused by irregular entrances, fights among the centre population (mostly caused by thefts of money and mobile phones), and abuse of alcohol and drugs. Additional tension deriving from the worry of being relocated to Vučjak sporadically resulted in minor fights and tensions across TRCs in USC.

IOM has a Security Unit composed of an IOM staff member appointed as Security Assistant for each centre. Security Assistants oversee the implementation of the Minimal Operating Security Standards and of coordinating all the security procedures.

At the end of the month, a security briefing and a fire prevention briefing were organized at the IOM Bihać office, where 146 representatives of all partner agencies gathered. The meeting resulted in constructive discussions and conclusions in favour of commonly defined improvement measures and steps for the safety of all personnel. The briefings were led by the IOM Regional Security Coordinator and topics of discussion included fire safety, emergency and evacuation, warden system, first aid, transportation, and overall safety and security situation.

Communication and visibility

In September, the United Nations Special Rapporteur on the human rights of migrants, Mr Felipe Gonzales Morales visited all TRCs during his official visit to BiH. In addition, the EU Delegation to BiH as well as the EU Special Representative visited all the TRCs in USC. His detailed statement can be found here:

<https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25088&LangID=E>

The German and Italian Red Cross visited TRCs in USC during the reporting month. Red Cross BiH also provided leaflets containing information on mines which were distributed by IOM.

Map of Key Sites and Locations



| 3W | | | | | | | | | | | | | | | | | |
|---|---|--------------------------------------|--|--|---|---|---------------------|---|------------------------------|-----------------------|------------------------------|--|----------------------------------|--------------------|----------------------------------|-----------------|---|
| Location | | | | | | | | | | | | | | | | | |
| | Una-Sana Canton | | | | | | Sarajevo Canton | | | | HNC | Other | | | | - | |
| | USC, Other, estimate | Borići TRC, Bihać | Bira TRC, Bihać | Sedra TRC, Cazin | Miral TRC, Velika Kladuša | Žene sa Une | Ušivak TRC, Hadžići | House of All | Sarajevo, Other, estimate | Delijaš Asylum Centre | Salakovac Refugee RC | Vucjak (not counted in total) | Tuzla and Mostar Other, estimate | Immigration Centre | Awaiting asylum, private accomm. | Totals | |
| Key population estimates | <i>(Population numbers below are a mixture of estimates and counts, depending on location. The numbers below are the most recent available. It must be kept in mind that populations at this sites fluctuate on a daily basis and the below is a snapshot) (22 September)</i> | | | | | | | | | | | | | | | | |
| Total Size | 3,500 | 297 | 1,275 | 305 | 545 | 7 | 655 | 49 | 200 | 9 | 83 | - | 200 | 53 | 140 | 7,318 | |
| Of which, UASC | - | 3 | 162 | 4 | 11 | 0 | 20 | 0 | - | 0 | 0 | - | - | 0 | 0 | 200 | |
| Of which, children | - | 131 | 206 | 134 | 11 | 3 | 99 | 23 | - | 0 | 40 | - | - | 0 | 54 | 701 | |
| Of which, women & girls | - | 128 | 3 | 120 | 0 | 3 | 75 | 21 | - | 6 | 39 | - | - | 0 | 56 | 451 | |
| Of which, single women | - | 13 | 0 | 3 | 0 | 0 | 2 | 0 | - | 0 | 5 | - | - | 0 | 5 | 28 | |
| Of which, family members | - | 269 | 136 | 287 | 0 | 0 | 168 | 49 | - | 1 | 19 | - | - | 0 | 89 | 1,018 | |
| Of which, asylum seekers | - | 50 | 18 | 101 | 1 | 0 | 20 | 17 | - | 0 | 29 | - | - | 9 | 111 | 356 | |
| Of which, awaiting asylum registration | - | 23 | 521 | 14 | 162 | 1 | 387 | 4 | - | 1 | 45 | - | - | 0 | 29 | 1,187 | |
| Sector | | | | | | | | | | | | | | | | | |
| Shelter |  | - | SFA, IOM | SFA, IOM | IOM | SFA, IOM | ŽsU/ UNHCR | SFA, IOM | HoA | - | MoS/AS/ UNHCR | MHRR/ MoS/AS/ UNHCR | Red Cross Bihać | - | MoS, SFA | - | - |
| Centre Management |  | - | SFA, IOM | SFA, IOM | SFA, IOM | SFA, IOM | ŽsU | SFA, IOM | HoA | - | MoS/AS | MHRR/ MoS/AS | Red Cross Bihać | - | MoS, SFA | - | - |
| Protection |  | UNHCR/ DRC/VP/ IOM, CSW, UNICEF/ SiC | UNHCR/ DRC/VP, UNICEF/ ŽsU/SiC, IOM, CSW, UNFPA/ MdM | UNHCR/ DRC/VP, UNICEF/ ŽsU/SiC, IOM, CSW, UNFPA/ MdM | UNHCR/ DRC/VP, UNICEF/ ŽsU/SiC, IOM, CSW, UNFPA | UNHCR/ DRC/VP, UNICEF/ ŽsU/SiC, IOM, CSW, UNFPA | ŽsU, DRC/ VP/UNH CR | UNHCR/ VP /BHWI/ DRC, CSW, UNICEF/ SoS, IOM | HoA, BHWI/ VP/ UNHCR, UNICEF | UNHCR/ VP/ BHWI | MoS/AS, UNHCR/ BHWI/ VP, CSW | UNHCR/ BHWI/ VP, DRC, UNICEF/ WV, IOM, CSW | - | - | UNHCR/ BHWI/VP, CSW | UNHCR/ VP/ BHWI | - |

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| | | | | | | | | | | | | | | | | | |
|------------------------------|---|------------------------------|--------------------------------------|---|--------------------------------------|------------------------------|---------------------------|--|---------------------------|------------|-------------------------------|--------------------------------------|-----------------|---|-------------------|----|---|
| Health |  | - | DRC, JRS, UNICEF, UNFPA/ MdM, DZ, CH | DRC, JRS, UNICEF, UNFPA/ MdM, DZ, CH | DRC, JRS, UNICEF, UNFPA/ MdM, DZ, CH | DRC, DZ, CH, JRS | DRC, DZ, CH | DRC, UNICEF/ WW/SoS, DZ, CH | UNICEF/ WW/ SoS, DZ | - | MoS/AS/ UNHCR, DZ, CH, DRC | MoS/AS, UNHCR, DZ, CH, DRC, IOM | - | - | SFA, DZ | - | - |
| Non-food items | NFI | IOM, UNICEF | CoBRC, IOM, UNFPA, UNICEF/ SiC/ŽsU | CoBRC, IOM, UNICEF/ SiC/ŽsU, CSW, UNFPA | IOM, UNFPA, UNICEF/ SiC/ŽsU | CoBRC, IOM | ŽsU | IOM, Pomozi, UNHCR, RC, Caritas, UNICEF/ SoS | HoA | - | MOS/ AS/ UNHCR/ BHWI, Caritas | RC, UNHCR/ BHWI, UNICEF/ WW, Caritas | Red Cross Bihac | - | MoS/SFA | - | - |
| WASH |  | IOM | IOM | IOM, Caritas | IOM | IOM | ŽsU | IOM | HoA | Pomozi. ba | MoS/AS/ UNHCR | MHRR/ MoS, UNHCR/ BHWI, UNICEF/ WW | Red Cross Bihac | - | MoS/SFA | - | - |
| Security/Safety |  | N/A | MoS/ SFA | MoS/ SFA | MoS/ SFA | MoS/ SFA | ŽsU | MoS/ SFA | HoA | N/A | MoS/AS/ UNHCR | MHRR/ UNHCR | - | - | MoS/SFA | - | - |
| Transport/ Logistics |  | IOM | IOM | IOM | IOM | IOM | ŽsU, IOM | IOM, UNHCR/ BHWI | - | - | MoS/AS/ UNHCR/ BHWI, IOM | UNHCR/ BHWI, IOM | - | - | IOM | - | - |
| Administrative/ Legal |  | MoS/ SFA/ AS, IOM, UNHCR/ VP | MoS/ SFA, IOM, UNHCR/ VP | MoS/ SFA/ AS, IOM, UNHCR/ VP | MoS/ SFA/ AS, IOM, UNHCR/ VP | MoS/ SFA/ AS, IOM, UNHCR/ VP | ŽsU, VP | MoS/ SFA, IOM, UNHCR/ VP | VP/ UNHCR | - | MoS/AS/ UNHCR/ VP | MHRR/ MoS/SF A/ AS, UNHCR/ VP | - | - | MoS/SFA, UNHCR/VP | VP | - |
| Education |  | - | UNICEF/ PA/ SiC/ MoE, IOM | UNICEF/ PA/ SiC/ MoE, IOM, CWS | UNICEF/ PA/ SiC/ MoE, IOM | - | UNICEF/ PA/ SiC/ MoE, IOM | UNICEF, WW/ SoS, IOM | UNICEF/ WW/ SoS, HoA, IOM | - | MoS/AS/ UNHCR/ BHWI | UNHCR/ BHWI, UNICEF/ WW | - | - | - | - | - |
| Food and nutrition |  | IOM/ CoBRC | IOM/ CoBRC, UNICEF/ ŽsU/SiC | IOM/ CoBRC, UNICEF/ ŽsU/SiC | IOM/CR C, UNICEF/ ŽsU/SiC | IOM/ CRC | ŽsU | Pomozi. ba, IOM, UNICEF/ WW/ SoS | HoA | - | MoS/SA/ UNHCR, Caritas | RC/IOM, UNICEF/ WW, Caritas | Red Cross Bihac | - | MoS/SFA | - | - |

Acronyms: AS, Asylum Sector / BHWI, Bosnia and Herzegovina Women's Initiative / CH, Cantonal Hospital / CoBRC, City of Bihac Red Cross / CRC, Cantonal Red Cross / CRS, Catholic Relief Services / CSW, Centre for Social Welfare (Municipal) / CT, The Czech Team / CWS, Church World Service / DZ, Public Health Centre (Municipal) / DRC, Danish Refugee Council / HoA, House of All / ICRC, International Committee of the Red Cross / IPSIA, Istituto Pace Sviluppo Innovazione Acli / Emmaus, International Forum of Solidarity-Emmaus / IOM, International Organization for Migration / JRS, Jesuit Refugee Services / MdM, Médecins du Monde / MHRR, Ministry of Human Rights and Refugees / MoE, Ministry of Education / MoS, Ministry of Security / PA, Pedagogic Academy / RC, Red Cross / RCSBiH, Red Cross Society of Bosnia and Herzegovina / SFA, Service for Foreigners' Affairs / SoS, SoS Children's Villages / UNFPA, United Nations Population Fund / UNHCR, United Nations High Commissioner for Refugees / UNICEF, United Nations Children's Fund / VP, Vaša Prava BiH / WHO, World Health Organization / WW, World Vision / ŽsU, Žene sa Une.

Coordination/Working in partnership

- Monthly UNHCR-IOM led coordination meetings take place in Sarajevo, widely inviting stakeholders engaged in the ongoing response and providing a forum for discussion.
- IOM organize weekly CCCM meetings in TRCs for partners to share updates, discuss the centre's situation and define action points.
- Bi-weekly coordination meetings take place in USC, widely inviting stakeholders.
- Sector specific meetings are organized as required in Sarajevo and USC.
- UNFPA lead GBV WG meetings on a monthly basis to ensure a coordinated, survivor centred inter-agency GBV response.
- Earlier this year the Sarajevo Canton Ministry of Labour, Social Policy, Displaced Persons and Refugees established an operational team to improve coordination of all governmental, non-governmental and international organizations dealing with the situation.

| Sector | Organizer | Contact |
|---|-----------|---|
| Sarajevo Monthly Coordination Meeting and Monthly Update | UNHCR/IOM | doane@unhcr.org trigka@unhcr.org |
| USC | UNHCR/IOM | husagic@unhcr.org vmitkovski@iom.int |
| CCCM, Shelter, WASH and Food | IOM | drozic@iom.int |
| Protection | UNHCR | kokotovi@unhcr.org |
| Child protection | UNICEF | aluedeke@unicef.org |
| Gender Based Violence | UNFPA | jurela@unfpa.org |
| Health | WHO | palom@who.int |
| NFI | IOM | isadikovic@iom.int |
| Education | UNICEF | skabil@unicef.org |

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LINKS

UNHCR Data Portal: <https://data2.unhcr.org/en/situations/mediterranean>

UNHCR Help: <https://help.unhcr.org/bosniaandherzegovina/>

IOM Data Portal: <http://migration.iom.int/europe/>

IOM Support for Migrants Application: <http://supportformigrants.com/>

IOM AVR Information: <https://bih.iom.int/assisted-voluntary-return>

IOM Migration Response: <https://bih.iom.int/iom-migration-response>

Media guidelines: <https://bih.iom.int/pbn/reporting-migration-and-refugees-brochure>

Asylum Information Brochure:

https://issuu.com/unhcrsee/docs/information_for_as_in_bih



UNHCR prepares these monthly updates on behalf of the inter-agency response in BiH. They are published on the United Nations in Bosnia and Herzegovina website. Information on the actions of institutions/organizations/individuals are collected on voluntary basis. The asylum seeker and migration statistics presented in this document are provided by the authorities of BiH and partner agencies. The UN in BiH is not responsible for the accuracy of information provided by non-UN sources.