

# Bosnia and Herzegovina

01 - 31 March 2019

On 11 March, the Council of Ministers adopted a Decision on Temporary Reception Centres (TRC), defining four locations in Una Sana Canton as TRCs.

Almost twice as many arrivals have been detected by the BiH authorities in 2019 than over the same period in 2018; March 2019 saw three times as many arrivals.

With voluntary transfers from the Bira TRC of families, occupancy in the Borići TRC increased by over 120 family members, offering them more appropriate accommodation.

## KEY INDICATORS

**5,000 – 5,500**

estimated refugee and migrant population at the end of March 2019

**4,779**

max available accommodation as of 31 March 2019

**>265,000**

meals provided in March 2019 in BiH

**>3,500**

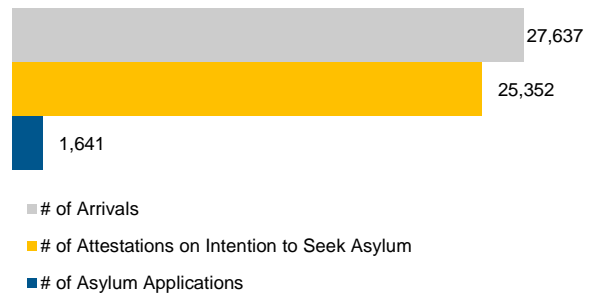
Medical check-ups conducted in March 2019

## ACCESS TO ASYLUM

**1,641 Asylum applications**

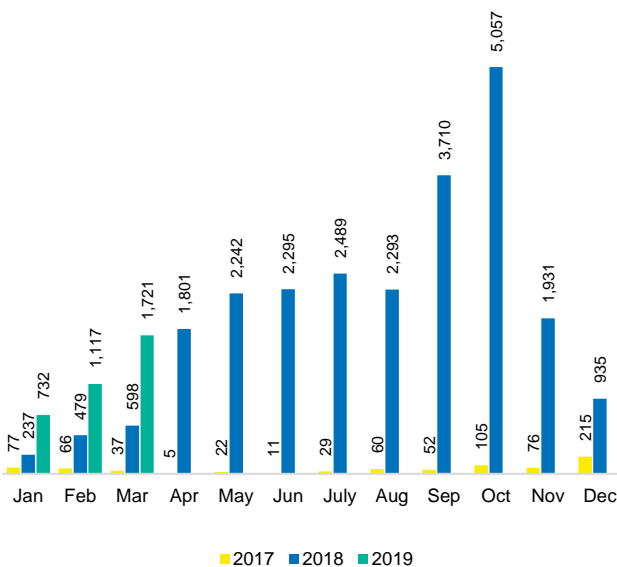
1 January 2018 – 31 March 2019

People who have expressed an intention to seek asylum must then wait for the Sector for Asylum to invite them for an asylum registration interview. Those with no registered address cannot schedule an interview.



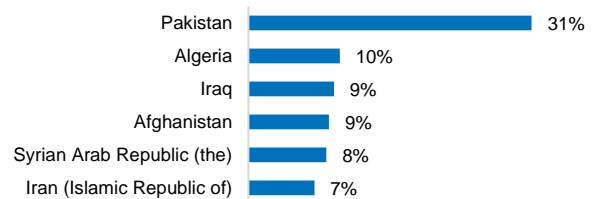
## POPULATION OF CONCERN

Number of detected refugee and migrant arrivals to BiH per month

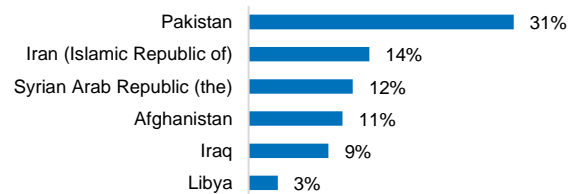


## POPULATION OF CONCERN

Top refugee and migrant CoO\* arrivals to BiH in March 2019



Top refugee and migrant CoO\* arrivals to BiH between 1 January 2018 and 31 March 2019



## Priorities and key gaps

### CCCM/Accommodation/Shelter:

- Additional sites for accommodation solutions need to be identified by the relevant authorities, especially as an increasing number of refugees and migrants are necessarily staying in private accommodation or squatting in open spaces, including families with children and unaccompanied and separated children (UASC).
- Response actors need to contingency plan and be prepared to collectively and rapidly deploy staff and resources once new accommodation sites have been identified.
- Expand capacity to accommodate families with children, UASC, and other vulnerable categories, in adequate and protection-sensitive accommodation that satisfies international standards.
- Seek appropriate accommodation solutions for UASC who are alleged perpetrators of misdemeanors or criminal offences.
- Establish efficient referral mechanisms to accommodation for refugees and migrants who arrive to Sarajevo or Una Sana Canton (USC) in the evening and at night, for example, after the last bus used for travel to the Ušivak Temporary Reception Centre (TRC) has departed.
- Improve the referral mechanisms to both the Delijaš Asylum Centre (AC) and the Salakovac Refugee Reception Centre (RRC) in collaboration with the Ministry of Security (MoS).
- Resolve issues related to the electricity supply at the Borići TRC to bring the site up to planned capacity and relocate families with children from other less appropriate sites.
- Improve the stability of the electricity supply at the Bira TRC.
- Develop and implement site specific protocols/SOPs with clear divisions of labour, clear roles, and concrete deliverables to which response actors can be collectively held accountable.
- Establish a rapid response mechanism within accommodation centres vis-à-vis large fights and security incidents.
- Increase information points at all accommodation sites and ensure that refugees and migrants are aware of services as well as ongoing processes and measures that affect them.
- Improve coordination between IOM TRC staff and between IOM and UNHCR/DRC and develop of clear guidelines and standard procedures within and between centres.

### Protection:

- Continue to advocate for the restoration of freedom of movement both within as well as to and from USC.
- Continually map locations where refugees and migrants are beginning to congregate outside of TRCs to better understand their extent, the needs, and support protection outreach and the provision of humanitarian assistance.
- Reinforce referral and case management mechanisms for protection services for refugees and migrants residing outside of TRCs in tandem with strengthened protection outreach capacity to monitor the protection environment and ensure minimum humanitarian assistance.
- Establish mechanisms for the provision of urgent humanitarian support – such as food, water, and first aid - to refugees and migrants in transit in BiH in location such as Tuzla.
- Improve access to fair and efficient asylum procedures by, among other actions, advocating for the Service for Foreigners' Affairs (SFA) to systematically renew expired attestations of intention to seek asylum, strengthening the asylum registration and refugee status determination capacities of the Sector for Asylum (SA), advocating for the removal of the BAM 10.00 administrative fee for

Certificates of Residence, advocating with the Sector for Asylum for the swift issuance and renewal of asylum seeker cards following registration to ensure access to rights.

- Advocate to improve access to free legal aid for refugees and migrants in the Immigration Centre in Lukavica which is currently limited by entry restrictions (VP are only able to enter the centre based upon a written request by a resident) as well as the lack of provision of free legal aid by the Ministry of Justice.
- Increase the availability of and access to information on assistance and the asylum procedure in languages used by refugees and migrants.
- Seek and implement solutions to limit the unauthorized entrance of unregistered people into the TRCs, in particular those predominantly hosting particularly vulnerable categories, such as the Borići TRC.
- Provide of 24/7 on-site child protection support and the organization of family strengthening/positive parenting programmes in the Borići and Sedra TRCs.
- Build the capacity of the SFA to properly identify UASC/conduct age assessments and foster cooperation between the SFA and Centres for Social Work (CSW) to improve UASC identification.
- Improve the security and protection of families with children and UASC specifically in the Bira TRC.
- Intensify efforts to ensure timely identification and referral of UASC outside of TRCs to adequate and protection-sensitive accommodation and to ensure that they have access to humanitarian assistance.
- Increase the number of cultural mediators/interpreters/translators to support actors in their work and facilitate access of refugees and migrants to information and services; include more women mediators/interpreters/translators for women refugee and migrant needs.
- Strengthen the capacity of the CSWs to conduct Best Interest Determination (BID) procedures for UASC and to respond to SGBV occurrence and other protection issues among families.
- Scale-up and ensure the provision of psychosocial support at all locations for men, boys, women and girls, in particular for single men.
- Streamline coordinated inter-agency prevention and response to GBV through a regular information update on available services and referral pathways for GBV survivors in USC.
- Conduct GBV safety audits to assist in the identification and mitigation of GBV risks in shelter, WASH, security, food, health, and other sectors in the TRCs.
- Integrate response to SEA into community based inter-agency complaint mechanisms within the TRCs in USC.
- Continue to advocate for adoption of the Standard Operating Procedures for Multi-sectoral Coordination, Prevention, and Provision of Services to Survivors of Gender Based Violence in Emergencies, including Clinical Management of Rape (CMR) procedures, by localisation of the CMR protocol already developed by Federal Ministry of Health and additional capacity building of health and other relevant sectors.
- Provide continuous sensitization and training in survivor centred GBV response and SEA principles for humanitarian staff.
- Advocate for the municipal registry in Mostar to record information on the father on the birth certificates of refugee and migrant children.
- Work to ensure immediate birth registration even in cases where parents do not hold asylum-seeker cards.

**Health:**

- Establish referral mechanisms for healthcare services for refugees and migrants residing outside of TRCs – often due to lack of space - and ensure solutions are in place for the provision of healthcare to all refugees and migrants throughout BiH, irrespective of legal status.
- Ensure secure and consistent access to adequate healthcare in USC, considering the limited capacities of state healthcare facilities and contingency plan for service interruptions (for example caused by strikes).
- Identify a solution for medical escort and transport of patients to and from healthcare service providers, including for emergency cases.
- Seek resources to increase vaccination coverage (including vaccines, check-ups, interpreters, etc.) among refugee and migrant children, including new arrivals on an ongoing basis.
- Build capacities of local health teams to reduce missed opportunities for vaccination.
- Raise awareness of the importance of immunization among parents and the community.
- Ensure high-quality primary healthcare for refugee and migrant children, including regular access to paediatricians and nurses specialised in child healthcare and development, including dental care.
- Improve access to mental healthcare services, in particular in USC and for cases requiring hospitalization.
- Support to First Aid provision at the Bira TRC to relieve pressure on the medical teams and to provide at least basic care on the weekends.
- Improve access to sexual and reproductive health services, in particular for women and girls.
- Increase capacities to monitor and ensure that refugees and migrants under quarantine adhere to the recommendations of medical personnel.
- Seek and implement solutions to limit the unauthorized entrance of unregistered people into the TRCs and thus without having undergone the medical screening.
- Seek solutions to address gaps in the provision and availability of rehabilitation therapy and treatment for substance users – this has been challenging in the Miral TRC where individuals have presented risks to themselves, other migrants and refugees, and the employees of all organizations working in the Miral TRC. (This is also a gap for local populations.)

**NFI:**

- Make addition NFIs available to meet the needs of the increased number of refugees and migrants, especially for those being treated for scabies and in need of additional clothing.
- Improve and diversify NFI availability in all centres.
- Improve the identification/coordination of NFI needs and NFI distribution.

**WASH:**

- Increase WASH capacity inside the Bira (including laundering), Miral, and Sedra TRCs.
- Seek and implement solutions to reduce damage caused by refugees and migrants in the Miral and Bira TRCs to WASH facilities.
- Ensure sufficient hot water in the Sedra TRC.
- Increase the availability of WASH to those residing outside of TRCs.
- Connect a UNICEF procured sanitary container (near the Child Friendly Space (CFS) and Mother Baby Corner (MBC) in Ušivak TRC) to water and electricity.

### **Food:**

- Provide complementary food and nutrition to pregnant and lactating women.
- Establish dedicated cooking spaces for refugees and migrants in the Sedra, Ušivak, Bira, and Miral 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:**

- Advocate for approval from the Government of Herzegovina-Neretva Canton (HNC) for refugee and migrant children to access primary education and ensure school-age children in the Salakovac RRC are enrolled in the public education system.
- Intensify efforts to integrate primary school age UASC into formal education
- Continue and enhance efforts to integrate refugee and migrant children into regular classes together with their peers from BiH.
- Advocate for the approval for children to access structured, non-formal education in the Salakovac RRC to provide them with opportunities to learn different life skills (for example, to organize Science, Technology, Engineering and Mathematics Education for children of primary school age). (Approval by the MoS for this is pending.)
- Seek formal education solutions for refugee and migrant children above the age of 15.

### **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 Assisted Voluntary Return and Reintegration as a solution for those wishing to return to their respective countries of origin.
- Seek additional funding to properly support initiatives aimed at promoting social cohesion and interactions between refugees/migrants and the local population in host communities, including initiatives engaging single men.

### **Security and safety:**

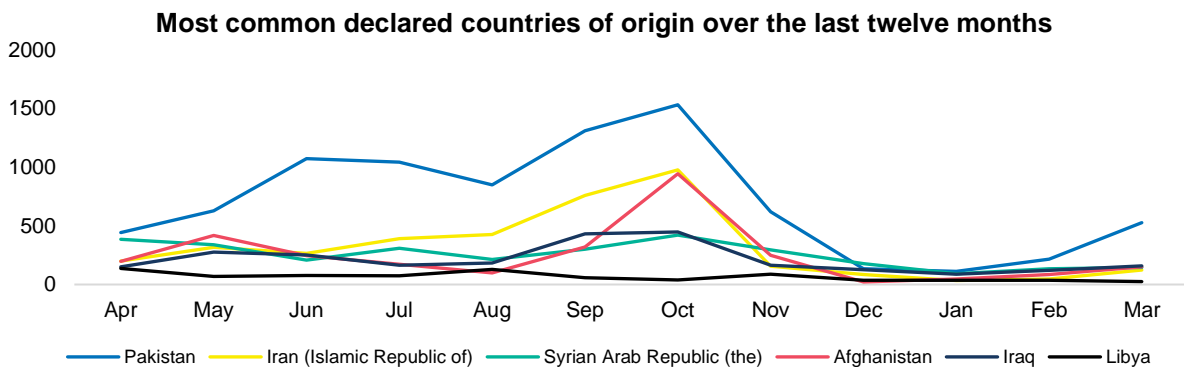
- Take measures to improve the security situation in TRCs including through non-security and preventative measures.

## Key Updates and Operational Context by Sector

### Population:

The authorities in Bosnia and Herzegovina (BiH) detected the arrival of 27,637 refugees and migrants to the country between 1 January 2018 and 31 March 2019. Despite unpredictable weather and low temperatures at night, refugees and migrants continued to arrive to BiH, with 1,721 detected arrivals in March 2019, compared to 598 in March 2018. There remains a significant probability of increased arrivals in the spring and over the summer with improved travel conditions. The majority arrive overland in an irregular manner (i.e. at non-official border crossings) at a number of entry points. It is estimated that between 5,000 and 5,500 refugees and migrants remain in BiH in need of a range of types of humanitarian assistance at various locations, in particular in Sarajevo and USC. The latter location is linked to attempts to enter Croatia and the European Union. Refugees and migrants in transit are also increasingly frequently sighted in other parts of BiH and in need of humanitarian support, such as Kalesija, Bijeljina, and Tuzla. [More detailed population estimates with age, gender, and location information are available below in the 3W.](#)

In March 2019, the largest declared Country of Origin (CoO) among new arrivals was Pakistan (31 per cent), followed by Algeria (10 per cent), Iraq (9 per cent), Afghanistan (nine per cent), Syria (eight per cent), and Iran (seven per cent). The composition of arrivals – according to declared CoO – varies over time, as shown in the below chart.



### CCCM/Accommodation/Shelter

IOM Centre Managers or CCCM support staff lead CCCM meetings on a weekly basis in accordance with Terms of Reference (ToRs), including clear definitions for the structure of recording and sharing of minutes, conclusions, action points, and agencies responsible for follow-up. [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. [Feedback community councils have been established](#), with representation of IOM CCCM staff, partner agencies, and the centre population, responsible for the review and follow up on received input. [While a separate form has been used for reporting of incidents of more serious nature, including Sexual Exploitation and Abuse \(SEA\)](#), partner agencies are working to strengthen Prevention/Response of (SEA) mechanisms, including reporting mechanisms and awareness raising and prevention efforts. [IOM also initiated a service mapping of all actors/agencies present and providing services in IOM-managed centres](#) as a first step in

coordinating the development of site-specific SOPs. Draft SOPs are circulating for relevant partners to provide input.

[In March, challenges were presented by the increased turnover rate](#), related to both the increased number of arrivals and an observed increase in attempts at onward movement. In particular, this created [difficulties vis-à-vis the functioning of the established IOM community councils](#), with rapidly changing membership. While the participation and representation of these councils were strengthened in some TRCs, in others, alternative solutions to centre population participation were sought. [An open 'Meet the TRC Manager' hour was introduced in Miral TRC](#). In Bira TRC, the organization of separate community meetings and focus groups with UASCs was suggested and is awaiting approval from CWS/legal guardians.

[A second challenge relates to the allocation of spaces in TRCs vacated by those attempting onward movement](#). Most do not announce their departure and it remains unclear if a particular space is in fact vacant and can be reallocated. Many return after unsuccessful attempts and their space has already been reallocated. Relatedly, in March, IOM received an increasing number of requests from the SFA for IOM to transport people back to IOM-managed TRCs in USC, following failed attempt to cross the border, taking up a significant share of IOM centre staff to the detriment of their presence in the TRCs.

[A Decision made by the USC authorities on 2 February to restrict the entry of newly arriving single men to the Bira and Miral TRCs, continued to effectively reduce the overall capacity](#) in the country and in USC – for example the Bira TRC has 1,935 beds but a maximum approved capacity of 1,500 set by the Canton. At the same time, the Ušivak TRC had reached its maximum capacity by the end of the month, leaving no alternatives for single men.

Further, [towards the end of March, there was a noticeable increase in the number of families arriving to the TRCs](#), highlighting the need for additional protection-sensitive accommodation capacity appropriate for families and vulnerable groups.

[Given the pressure on accommodation, UNHCR and partners, in collaboration with other actors on the ground, work to identify, profile, and prioritize cases for referral to appropriate available spaces](#). In March, relocation of families accommodated in the Bira TRC to the Borići and Sedra TRCs was ongoing.

[The SFA increased its involvement in the system of referral to accommodation for asylum-seeking families to the Delijaš AC and the Salakovac RRC](#). Referrals to these locations can no longer be conducted, as was previously the case, from the UNHCR Information Centre, but exclusively from the Ušivak TRC. Efforts are being made to release pressure on family accommodation in Ušivak TRC by prioritising transfers of newly arrived families to the Delijaš AC and Salakovac RRC, but since transfers take a few days, the lack of temporary accommodation capacity in Ušivak TRC remains a concern.

[An unidentified number of refugees and migrants are privately accommodated or squatting in Sarajevo and USC and migrants and refugees in transit have been observed sleeping rough](#) in other locations. The sanitary and living conditions in these squats are sub-standard and MSF have previously reported that a number of the residents choose, among other reasons, to reside in these squats due to fears of inter-communal violence in the centres.

As of 31 March, the maximum available capacity across eight formal and informal centres in BiH (USC, Sarajevo Canton, and HNC) was 4,779, not including safe accommodation and hostels made available to a limited number of particularly vulnerable cases or spaces in the Immigration Centre in Lukavica.

**Currently, the below accommodation and shelter is available in BiH:**

### **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 refugees and migrants. The centre is managed by the SFA, with centre management 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 has a maximum agreed accommodation capacity of 700, but currently provides up-to 800 beds](#) (400 in six-bed housing containers and 400 in a large provisional tent).

[At the end of March, the site hosted 703 refugees and migrants.](#) The number of new arrivals increased significantly in March, among them a relatively high number of newly arrived families, and at the end of the month, the Ušivak TRC reached its full capacity. Following a decision of the SFA in March, all families with valid attestations arriving to the Ušivak TRC were relocated to the Salakovac RRC or Delijaš AC. IOM supported the relocation. Five families were transported to the Delijaš AC and one to the Salakovac RRC. In March, IOM replaced small tents and mattresses in the pre-registration area with 130 beds. Supported by the Qatar Charity, IOM initiated construction works on one of the facilities on the premises that will be able to house up to 170 beds. This will not increase the overall capacity of the centre but replace the large provisional tent.

**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 March, 100 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 Delijaš AC and lack of transportation options. As of March, the transportation company “Centrotrans” established a bus line to Delijaš AC, filling a significant gap.

**An additional location in Sarajevo, called House of All**, managed by independent volunteers, offers accommodation up to 90 people in Sarajevo, largely to families, and provides a number of key services to residents.

### **Una-Sana Canton**

[On 11 March, the Council of Ministers \(CoM\) adopted a Decision to define four locations in USC as formal TRCs: the Borići TRC, the Miral TRC, the Sedra TRC, and the Bira TRC, and appointed the SFA to operationalize the decision.](#) MoUs on cooperation between the SFA, IOM and other competent bodies, shall prescribe the details of functioning, financing, coordination of work and cooperation to ensure efficient work of the TRCs.



**The Borići TRC (opened in January 2019 following a complete renovation supported by the EU)**, in the City of Bihać, exclusively hosts families and other vulnerable groups. Centre management is led by IOM, which oversees the daily running of the camp in coordination with partners providing other services, pending a hand over to the SFA in accordance with the 11 March Decision by the BiH CoM, in accordance with a to-be-developed MoU. IOM staff and security personnel are present 24/7. [The Borići TRC has a planned max capacity of 580](#) (with 150 spaces to be provided through housing containers). Families are accommodated in rooms with capacities of either 4, 6, 8, or 16 beds.

[At the end of March, the site hosted 276 refugees and migrants.](#) While the aforementioned housing containers have already been delivered to the site, their installation is on hold due to political pressure not to further expand the site's capacity. Further, insufficient electricity supply to the TRC continues to prevent the main building reaching its planned capacity of 430: final works are expected to be completed in April.

**The Bira TRC (opened in October 2018)**, in the City of Bihać, predominantly accommodates single men, and on a temporary basis, families, and UASC. Centre management is led by IOM, which oversees the daily running of the camp in coordination with partners providing other services, pending a hand over to the SFA in accordance with the 11 March Decision by the BiH CoM, in accordance with a to-be-developed Memorandum of Understanding. IOM staff and security personnel are present 24/7. [While the Bira TRC has an approved accommodation capacity of 1,500, there are 1,935 available beds](#) in six-bed housing containers or in large provisional tents (which are gradually being replaced).

[At the end of March, the site hosted 1,610 refugees and migrants.](#) While the site predominantly accommodates single men, in March the TRC only accepted families and vulnerable individuals. During the month, family members accommodated in the Bira TRC were relocated to the Borići and Sedra TRCs, making space available at the Bira TRC for those previously accommodated in the provisional tents. In March, an additional info container was placed in the centre by a local company, internet was provided for the new office-containers (SFA, DRC, and IOM containers) and improved overall across the centre. Free internet connectivity with Wi-Fi access is provided at the Bira TRC by Télécoms Sans Frontières (since 1 November) - over 100 TB of data has been provided. The malfunctioning of electricity remains an issue.

**The Miral TRC (opened in October 2018), in Velika Kladuša**, predominantly accommodates single men, and on a temporary basis, families, and UASC. Centre management is led by IOM, pending a hand over to the SFA in accordance with the 11 March Decision by the BiH CoM, in accordance with a to-be-developed MoU. IOM staff and security personnel are present 24/7. [The site has a maximum accommodation capacity of 700.](#)

[At the end of March, the site hosted 661 refugees and migrants.](#) During March, the remaining families were relocated to other TRCs, providing more appropriate and protection sensitive housing solutions. The centre still hosts 21 UASC boys, whom will be relocated to other TRCs as soon as possible. Télécoms Sans Frontières provides internet access to humanitarian workers in the Miral TRC.

**The Sedra TRC (opened in July 2018), in Cazin Municipality**, is exclusively for families and vulnerable individuals, who are prioritized for voluntary relocation from other sites in partnership with UNHCR. Centre management is led by IOM, pending a hand over to the SFA in accordance with the

11 March Decision by the BiH CoM, in accordance with a to-be-developed MoU. IOM staff and security personnel are present 24/7. [The site has a maximum capacity of 420 beds.](#)

[At the end of the month, the site hosted 321 people.](#) The site continues to be affected by the poor conditions of the building’s structure and water, electricity and heating infrastructure.

**Herzegovina-Neretva Canton**

**The Salakovac Refugee Reception Centre (RRC) (in operation since 2000)** in Salakovac near Mostar, provides accommodation to 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 250 spaces.](#)

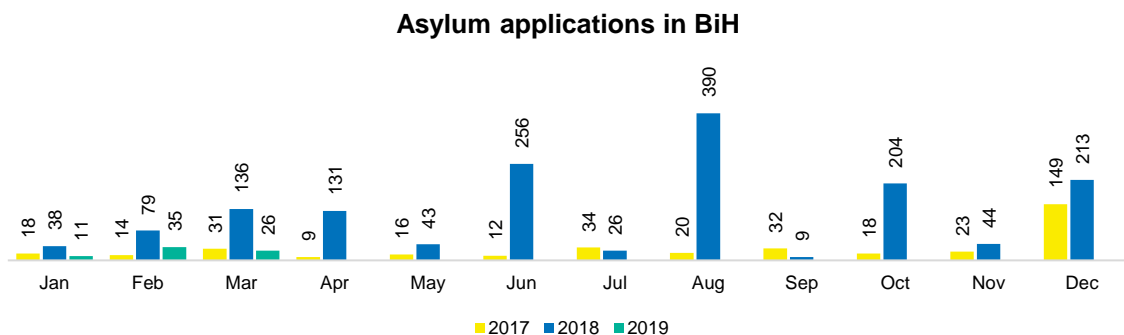
[At the end of the March, 108 asylum seekers were accommodated at this site.](#) The MoS recently assumed responsibility of admitting families (from MHRR) in Salakovac which now follows strict rules, as with the Delijaš AC. Very few new families were accepted in March and capacity remains available.

**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 (upon invitation only) with the SA. The SA are then responsible for deciding upon someone’s asylum claim. The MHRR is responsible once a person has been granted refugee status or subsidiary protection.

[From 27,637 arrivals between 1 January 2018 and 31 March 2019, 25,352 formally expressed intention to seek asylum with the SFA. Of these 25,352, 1,641 chose and were able to formally lodge an asylum claim with the SA over the same period.](#) In March, 26 asylum seekers underwent registration interviews and filed asylum claims with the SA. Further the SA, conducted 5 Refugee Status Determination Interviews in the month.



[Several factors hinder fair and efficient access to asylum for those in need of international protection.](#) Among others: the SA has limited capacity to register and process asylum claims and has been slow to schedule registration procedures, often causing expressions of intention to seek asylum to expire;

the need to register an address with the SFA and have a Certificate of Residence – except in the Delijaš AC and the Salakovac RRC which remain the only two formally recognized centres for the reception and accommodation of asylum seekers - to register an asylum claim; the need to pay a BAM 10.00 administrative fee for Certificates of Residence; 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, while significant improvements have been made in recent months, challenges remain with regard to the timely identification of UASC and the subsequent appointment of a legal guardian – a necessary first step to enter the asylum process.

[This limited access, as well as slowness issuing asylum seeker cards, prevents 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. [In response, 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.](#)

On 28 March, [UNHCR jointly with VP and UNICEF met with the Institution of the BiH Ombudsmen to discuss access to asylum procedure in BiH,](#) including issue related to the requirement for asylum seekers residing in TRCs to register their address prior to applying for asylum, as well as the access of asylum seeking children to education and birth registration. Further, [UNHCR and VP continued working with the relevant authorities towards the timely registration of new-borns in birth registries and issuance of birth certificates to the children of asylum-seekers – without which there is a risk of statelessness and the need to be registered through complex subsequent birth registration procedures.](#)

[Legal assistance is regularly provided at sites throughout the country and the VP team works to ensure that persons of concern are properly informed of their rights and are represented in the asylum procedure;](#) as part of this VP also supports preparation for the interview procedure and collects country of origin reports. [In March, VP provided free legal aid services to 1,054 persons of concern across BiH \(644 new arrivals and 410 previously assisted\) and provided a further 260 with information on the asylum procedure.](#) VP provide these services at formal and informal sites as well as at hostels and other forms of private accommodation. VP also provide support to detained asylum seekers in the Immigration Centre in Lukavica, assisting 10 in March. Of note, in March, the MoS started to schedule registrations in private accommodation more frequently, upon urgent requests sent by VP to the Ombudsman.

On 6 March in Mostar, the OSCE Mission in cooperation with the Prosecutor's Office of HNC, organized a coordination meeting for judicial institutions, relevant police and security agencies, free legal aid providers, as well as other governmental and non-governmental bodies. The aim of the meeting was to assess problems in investigation and court proceedings in cases involving representatives of the migrant population with victim or suspect status. It served to assess the capacity, practice of work, and level of co-ordination among relevant state authorities and institutions which have jurisdiction for the migrants in HNC. Special consideration was given to the treatment of migrants, in accordance with international HR standards, of asylum seekers and those who want to claim asylum.

### Protection environment and protection services inside TRCs

A number of protection risks and concerns exist for refugees and migrants in BiH, many of which are exacerbated by either a lack of appropriate accommodation, for example 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 refugees and migrants to a range of protection related services. Among others, these services include transportation to and from key services, interpretation, free legal aid (as mentioned above), 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.

During March, IOM implemented a number of measures to address the issue of unauthorized entries to TRCs – primarily in the Bira, Miral, and Ušivak TRCs, and to a limited extent in the Borići TRC - including the closing and repair of fences, stricter routines of security staff at centre entry/exit gates, and closer monitoring by IOM staff to ensure that the TRC populations adhere to the House Rules and stay in the rooms/beds assigned to them. In spite of these measures, unauthorized entries, and the usage of the ID cards of registered persons continued to be a concern throughout the month. While this is primarily a protection and security concern, it also encourages the spread of lice and scabies as people enter centres without undergoing a medical screening.

Throughout the month, DRC protection monitoring teams/staff, with support from ECHO, conducted protection related activities 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. Activities were conducted in USC, namely Bihać (Bira and Borići TRCs), Cazin (Sedra TRC) and VK (Miral TRC), as well as Sarajevo (Ušivak TRC) and HNC (Salakovac RRC).

In partnership with UNHCR, DRC completed a first round of Focus Group Discussions (FGD) in the Bira TRC with the single male population, applying the age, gender and diversity, mainstreaming (AGDM) principles, right-based, and community-based perspectives. (FGDs with family members were completed in February and FGDs with UASC are planned and agreed among the relevant stakeholders (including UNICEF, Save the Children (StC) and CSWs.) The aim, and in support of a community based protection approach, is to define evidence based priority responses for the affected communities and to then design and implement an interagency response.

IOM staff present in the Ušivak, Sedra, Bira, Miral, and Borići TRCs, with the support of and in collaboration with a number of UN and NGO actors, ensures that information on protection and assistance service providers is available in the centres. IOM staff present at the TRCs further refer persons of concern 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 refugees and migrants between TRCs, to medical facilities, and to other service providers.

The Bosnia and Herzegovina Women's Initiative (BHWI) social workers, psychologists, and interpreters/cultural mediators are present in the Ušivak TRC, the Salakovac RRC, the UNHCR Information Centre (Monday - Friday), the Delijaš AC (two or three 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. BHWI also provide services in the Sarajevo urban area in locations such as HoA. Among other activities BHWI organized SGBV prevention meetings/workshops with women and with UASC, undertook individual counselling for the identification of victims of SGBV, provided individual and group psychosocial support, organized music therapy, made referrals for psychiatric examinations, organized sports, fitness, and recreational activities. **BHWI worked with a total of 483 individuals in March.**

**UNHCR protection staff conducted weekly visits to monitor the protection environment in all TRCs as well as the Salakovac RRC and AC.** The UNHCR protection team identified vulnerable individuals including through systematic profiling of families and UASC, in cooperation with other protection partners. They further performed protection monitoring to identify and address protection issues and to ensure that the residents of centres are referred to relevant service providers and have access to all essential rights. **The protection team also makes ad-hoc visits to the Immigration Centre and other sites in Sarajevo (House of All, the Community Centre).** UNHCR and their partners also organise focus group meetings with residents in order to identify and address protection concerns as well as widen communication channels and reach out to all persons of concern with a particular focus on families, UASC, women and girls.

**Workshop groups established by Žene sa Une (ŽsU) in the Sedra and Borići TRCs continue to operate, including 111 women in March.** These groups offer psychosocial support and social integration activities and 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, protection outreach, and protection services**

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

Inherently related to movement, **push-backs at the border with Croatia continue to be reported by refugees and migrants.** VP and DRC protection teams, in collaboration with UNHCR, are working to identify and record alleged cases of violent push-backs. **Amnesty International published “Pushed to the Edge: violence and abuse against refugees and migrants along the Balkans route” in March<sup>1</sup>.** Monthly reports continue to be published by NGOs documenting such instances<sup>2</sup>. Relatedly, in March, IOM TRC staff reported a higher degree of movement and attempts to cross the border with Croatia, including many families with children, UASCs and other vulnerable individuals.

**Of note, measures put in place by cantonal authorities in USC in October to limit the freedom of movement of asylum seekers and migrants in USC, without a clear legal basis, remained in effect throughout March.** Related police checks of buses and trains continue. Restrictions placed on freedom of movement, inter alia, inhibit access to rights such as access to the asylum procedure,

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<sup>1</sup> *Pushed to the Edge*, published by Amnesty International is available [here](#).

<sup>2</sup> *March Issue* available [here](#).

healthcare, and cause and prolong family separation. [These measures also expose refugees and migrants 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. The UN in BiH advocates for these restrictions to be removed and the situation is continually monitored.



*People on the move / UNHCR 2019*

As part of its regular protection monitoring activities, UNHCR with VP and BHWI visited bus stations and public places in Mostar, Čapljina, Zvirici, and Stolac. Few refugees and migrants were directly observed but the team were informed that up to 70 persons of concern per day buy tickets towards Croatia in Mostar and up to 50 per day buy tickets to Sarajevo/Mostar in Čapljina.

In March, while vulnerable categories were admitted, 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 this regard, while DRC and UNHCR Protection staff are present on the locations during the day](#) and conduct profiling and screening activities to identify extremely vulnerable individuals, arrivals also occur during the late evening/night.

By the end of March, in partnership with UNHCR, DRC launched outreach protection monitoring teams to ensure effective early warning mechanisms and the timely identification and referral of the [most vulnerable refugees and migrants outside of TRCs](#), in collaboration with UNHCR and other UN agencies, international and local partners, and other actors as appropriate, ensuring proper follow-up and accompaniment for a range of services, including protection sensitive and alternative accommodation and care arrangements, legal guardianship appointment, other legal support, psychosocial support, and referral to medical services, including mental healthcare.

Furthermore, [individual cases identified \(depending on the case specific circumstances and vulnerability\)](#) are referred to DRC protection teams present in the TRCs, or, when possible, to medical teams, funded by ECHO. Efforts were also made to map the key locations of arrivals to the Canton, exit points towards Croatia, and informal locations where refugees and migrants are present. Further,

the team worked to identify the key informants to provide relevant information on a regular basis and to establish communication channels for early warning mechanisms. Moreover, through Protection Monitoring Tools, DRC started to map key protection needs and risks to support planning.

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. Visits to the UNHCR Info Centre were made on 52 occasions in March.

In March, UNHCR launched the BiH specific iteration of its global <https://help.unhcr.org> initiative. The page can be found at <https://help.unhcr.org/bosniaandherzegovina/> and offers information on available services and the asylum system in BiH. The page is being translated into relevant languages.

The Community Centre in Sarajevo, managed by Aid Brigade, continued to function by providing meals and a place to rest and socialize during the day. The Community Centre provided day shelter for approximately 300 refugees and migrants on a daily basis in March.

On 12 March 2019, the OSCE Mission organized a capacity building training session in Banja Luka for members of the BiH Border Police, RS Ministry of Interior and Social Welfare Centres on indicators of gender based violence and human trafficking with emphasize on irregular migrants - UASC and vulnerable groups. The session was attended by 25 participants who are in daily contacts with migrants and refugees.

### **Child Protection**

StC, with UNICEF support, continued to provide 24/7 on-site child protection support at the Bira TRC for refugee and migrant children with a focus on UASC. The team's 16 child protection officers work in three shifts and provide on-site support and make referrals to external support services when required and monitor the provision of services to UASC in close partnership with the Bihać CSW. In March support was provided to a total of 934 UASC (all boys) in the Bira TRC, with an average of some 210 on a daily basis. Services provided were: general advice and assistance and referral to relevant institutions/organisations; medical escort and follow-up on medical cases; psychological first aid; individual and group counselling; follow-up support for UASC identified at-risk of protection issues; English and Bosnian/Serbian/Croatian classes; literacy classes; art therapy and creative workshops; educational workshops (hygiene, sexual reproductive health); sport activities and board games; 'Tea & talk' (Community Protection Officers engage UASC in conversation), and life skills education in line with the "Boys on the Move" methodology introduced by UNFPA.

SOS Children's Villages and World Vision, with UNICEF support, 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 refugee and migrant children with a focus on UASC and make referrals to external support services (legal representation and assistance, medical services) when required and monitor the provision of services to UASC in close partnership with the Hadžići CSW. In March, support was provided to a total of 69 UASC, including psychosocial support to 41 UASC, education activities to 40 UASC and sports/recreational activities to 43 UASC

UNICEF supports the CSW in Bihać, Cazin, and VK through the appointment of additional professionals (two social workers and one psychologist in Bihać, one social worker in Cazin, and two

social workers in partnership with StC in 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 refugee and migrant children, with a special emphasis on UASC. In March, social workers at the CSW in Bihać, Cazin, and VK provided legal guardianship for 210 UASC, medical escorts for eight UASC, 45 escorts to the SFA, and 70 escorts to the TRCs. BHWI have also made social workers available to the Hadžići CSW in Sarajevo Canton to be appointed as legal guardians, conduct Best Interest Assessments, and provide psychosocial support. BHWI social workers provided guardianship for three UASC at the Ušivak TRC in March, pending guardianship decisions from the Hadžići CSW.



*Child friendly Space in the Sedra TRC / UNICEF, Zene Sa Une 2019*

Supported by UNICEF, and operated by ŽsU, StC, 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, the Sedra TRC (where there are two spaces, one for children under twelve and one Youth Centre for children 12 – 17), and at the First Elementary School - the branch school "Šiljkovača" in VK<sup>3</sup>. The CFS in VK ceased operating in VK toward the end of March as no families with children were accommodated in Miral and families with children in private accommodation in VK stated no interest in their children participating in CFS activities. In March, a total of 574 (257 girls, 317 boys) children benefitted from CFS services across all sites: 82 at the Salakovac RRC (48 girls, 34 boys), 73 at the Ušivak TRC (33 girls, 40 boys), 115 at the Borići TRC (52 girls, 63 boys), 98 at the Bira TRC (37 girls, 61 boys), 112 at the Sedra TRC CFS (57 girls, 63 boys), 83 at the Sedra TRC Youth Centre (21 girls, 62 boys), and 11 in VK (9 girls, 2 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,

<sup>3</sup> RRC (SOS and WV, 09:00 – 15:00, Monday to Friday), the Ušivak TRC (SOS and WV, 08:00 – 16:00, Monday to Friday), the Borići TRC (ŽsU and StC, 10:00 – 18:00, daily), the Bira TRC (ŽsU and StC, 12:00 – 20:00, Monday, Wednesday, Friday), the Sedra TRC (ŽsU and StC, 10:00 – 18:00, daily), and at the First Elementary School - the branch school "Šiljkovača" in VK (SOS and WV, 09:00 – 17:00, Monday to Friday).



referral, and follow-up, and/or direct support of at-risk children. In March, CFS provided a total of 4,281 services.

### **Extremely vulnerable individuals and GBV prevention and response**

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 March, 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 (with regular follow-up on 25 cases) as well as MHPSS Case Management (16 case in total). Over the month, a total of 27 individuals from 15 families were accommodated in the safe house for a total of 398 overnights (all new arrivals are provided with welcome packages and refill packages – 54 in March - are available thereafter). In March, two persons of concern were accommodated in the Duje Centre.

In March, the UNFPA-led GBV-working-group initiated the renewal and update of the GBV referral pathway for the TRCs in USC and agreed to advocate to fill the gap and standardise the practice of recording, storing, and exchange of information among the key humanitarian services using elements of the GBV Information Management System.

UNFPA is actively advocating with the USC government for the enactment of the jointly developed draft Standard Operating Procedures for Multi-sectoral Coordination, Prevention, and Provision of Services to Survivors of Gender Based Violence in Emergencies (GBViE) in USC. The current draft was submitted to the government in February 2019.

UNFPA announced the methodology and dates of the upcoming GBV safety audits in the Sedra, Borići, and Bira TRCs. The physical infrastructure of shelter, safe and secure access to wash, food, healthcare and other essential facilities will be examined and recommendations for mitigating GBV risks will be developed for partner organisations. IOM is confirmed to join UNFPA in the conduct of safety audits.

UNFPA, as the lead GBV actor, is closely working with IOM and other partner organizations in integrating PSEA into the complaint mechanism for TRCs. The SOP, encompassing the role distribution among actors, standardization of intake, recording, referral and follow-up on potential SEA cases, as well planning and organizing awareness raising campaigns for beneficiaries and trainings for humanitarian staff, were discussed at the GBV working group and the way forward identified.

In USC, UNFPA continued managing three Centres for Women and Girls (WGC) which are fully functional and provide group and individual psycho social support to GBV survivors or persons at high risk, as well as empowerment programmes (educative, protective and preventative, activities for women and girls). UNFPA provided PSS to 59 women, including GBV survivors, through group and individual counselling. The UNFPA run empowerment and rehabilitation programs supported 151 women vulnerable to GBV risks. English language classes and sessions for occupational and art therapy and life-skills education were held three times a week in the Borići TRC and twice a week in the Bira and Sedra TRCs. At the end of March, UNFPA conducted a pilot assessment in Sarajevo Canton at the Ušivak TRC. In this location, through the Women and Girls' Safe Spaces, five

empowerment sessions (with 64 women and 15 girls), two focus groups and three individual interviews held.

## **Health:**

### **Immunization and communicable diseases**

The WHO, in partnership with the USC Ministry of Health (MoH), organized a two-day training on 26 – 27 March on “Migrant Health”. The training was conducted by a group of experts from the University of Pecs and attended by over 60 participants from local institutions and authorities and international organizations.

A WHO consultant continued to support the USC MoH with its efforts coordinating the response to the health needs of refugees and migrants in USC. Particular attention was given to the immunization of refugee and migrant children, a process which commenced in March.

The Federal Public Health Institute (PHI), and especially the USC PHI, with UNICEF support, rolled out training on *Interpersonal Communication in Immunization*. The Representatives of UNICEF and WHO jointly conducted a media interview with Anadolu Agency, which was broadcasted 23-24 March 2019, urging citizens to vaccinate their children as this would be the safest, most efficient and best way for protection. A Q&A on immunization has been made available on the UNICEF BiH website. The Federal PHI, with the support of UNICEF, increased vaccine stocks in the Bihac and Cazin Health Centres. Vaccination of refugee and migrant children, ages 1-15, accommodated in Borići, Bira, and Sedra TRCs against MMR (measles, mumps and rubella) is expected to commence in partnership with DRC and local health centres by mid-April.

Three persons of concern were diagnosed with tuberculosis (TB) in March. Necessary follow up actions were communicated and coordinated with the relevant authorities, including the PHI, the Bihac Primary Healthcare Centre (PHC), and the Cantonal Hospital. Two of the three are undergoing treatment, while the third departed against advice. Follow-up measures are being taken with persons of concern from the Bira TRC identified as in close contact with those diagnosed with TB.

The number of scabies cases in the Miral TRC increased in March. The response is hindered by the fact that refugees and migrants enter the TRC without registering and undergoing the entrance screening and thus also have no access to NFIs or services. To ensure proper treatment, adequate conditions are needed, including WASH, NFIs, treatment, and a quarantine areas. Regular DDD measures that recently commenced in the Miral TRC should significantly limit the spread of skin diseases.

### **Primary and Secondary Healthcare**

DRC, with support from ECHO, provides healthcare for refugees and migrants who are registered in six TRCs: in USC, the Bira, Borići, Miral, and Sedra TRCs; in Sarajevo Canton, in the Ušivak TRC; in HNC, in the Salakovac RRC (as of 1 March). In each of these TRCs, primary healthcare is provided on-site through the engagement of medical teams from local PHCs. Specialized services on the primary level (including laboratory analysis, gynaecological, paediatric and other services) are covered and provided at the Bihac, Cazin and VK PHCs in USC, at the Hadžići PHC in Sarajevo Canton, and at the Stari Grad Mostar PHC in HNK. Secondary healthcare services are provided through Cantonal Hospital Dr. Irfan Ljubijankic in USC and through the General Hospital in Sarajevo Canton. Specific cases are referred to the University Clinical Centre Sarajevo. For those

accommodated in the Delijaš AC, primary healthcare in March was provided with the support of UNHCR by the Trnovo PHC. IOM continued to provide medical transportation from the TRCs in March – this is a temporary solution and a more permanent solution needs to be identified. In March, teams engaged through PHCs conducted 3,467 medical examinations and made 797 medical interventions. JRS, in partnership with DRC, provided accompaniment and translation services for the beneficiaries referred to specialized services and secondary healthcare services.

IFS-Emmaus facilitate primary healthcare access for asylum seekers and migrants accommodated in the Centre in Duje. In March, one general medical examinations and one instance of psychological counselling were provided.

DRC continued with the provision of medication for migrants 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.

The City of Bihać Red Cross first aid team was present at the Bira TRC and made 288 first aid interventions, mainly treating minor injuries, in March. While IPSIA provided the Red Cross with a range of First Aid materials/items in March, the City of Bihać Red Cross ceased this activity on 19 March due to limited resources.

A medical worker strike affecting the Bihać PHC as well as the Cantonal hospital continued in March, significantly limiting scope for refugees and migrants to be referred to specialist healthcare services. Despite the strike, medical workers were regularly present in the TRCs, and specific examinations for TB went ahead.

### **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. MSF continued to offer mental healthcare services in Sarajevo, referring patients to psychologists or psychiatrists as needed. MSF also provided community mental health activities with refugee and migrant communities living in Sarajevo outside of centres. Services are not available for the hospitalization of more serious cases and rehabilitation therapy and treatment for the addicts is not available.

### **Sexual and Reproductive Healthcare**

In terms of the provision of sexual and reproductive healthcare in USC, UNFPA followed-up with the distribution of prescribed medication after having previously organized sexual and reproductive health screening and services for women and girls in the Bira, Borići, and Sedra TRCs.

### **Paediatric Healthcare**

World Vision and SOS Children's Villages, with UNICEF support, supported a PHC in Sarajevo Canton to conduct laboratory tests and medical check-ups for 13 school-age children accommodated in the Ušivak TRC. Further, a doctor from the Poliklinika SaNaSa visited House of All and examined the children and check-up scabies was conducted. A medical report on their health issues was provided to the primary school in Ilidža.

A health and nutrition expert, contracted by DRC with the support of UNICEF, held a three-day counselling/training sessions on the hygiene needs of new-borns, infants and young children, targeting MBC staff, medical/paediatric teams and relevant staff from the Sedra, Bira and Borići TRCs. Special emphasis was placed on identifying opportunities to improve and upgrade service provision for beneficiaries based on identified gaps and needs and considering available resources.

In March, the paediatric infirmary in the Sedra TRC, supported by UNICEF and operated by DRC, started operations. Medical support is provided through a medical team from the private health clinic "Muminovic". A paediatrician conducts check-ups twice (Monday and Thursday, 12:00 – 16:00), while a paediatric nurse provides services to children and caregivers in the Sedra TRC five times a week, (Monday to Friday 12:00 – 16:00). To medical assistance in the form of medical examinations, medication treatment, and referrals has been provided for 31 children (15 girls and 16 boys – most under 2 years of age). With the support of both UNICEF and ECHO, DRC also referred children and adults in need of dental care.

### **NFI:**

IOM continues to provide NFIs for newly arriving refugees and migrants in all five IOM-managed TRCs. In all TRCs, the NFIs distribution system is in place and operational with set schedules displaying distribution times. IOM provides NFIs welcome kits to new arrivals, 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 March, IOM distributed 6,472 NFIs to 359 people in the Borići TRC, 6,332 NFIs to 1,478 people in the Bira TRC, 4,776 NFIs in the Miral TRC, 4,177 NFIs to 111 people in the Sedra TRC, and 6,533 NFIs in the Ušivak TRC. The centre populations 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. With the increased number of refugees and migrants with scabies and lice, needing new clothes during the treatment period, it was challenging to ensure new clothes for everyone in need.

In March, the Red Cross received and distributed a range of NFIs. The Bihać Red Cross distributed 509 jackets and clothes for 1,007 people, 73 blankets, and 270 pairs of shoes, to refugees and migrants in the Borići and Bira TRCs. The USC Red Cross distributed 366 hygiene packs, 150 clothing items, 343 blankets, 5 sleeping bags, and 5 tents.

UNFPA continued distributing hygienic pads and modern contraceptives for women and girls through WGCs according to the need. Further, UNFPA distributed 53 dignity kits through the Women and Girl Safe Space in the Ušivak TRC.

In March, Caritas supported migrants and refugees at the Ušivak TRC with NFIs, mostly hygiene products, including shampoo (160L), wet wipes (160 packets), liquid soap (128L), solid soap (100 pieces), toothpaste (520 pieces), and toothbrushes (400 pieces).

SOS Children's Villages and World Vision, with the support of UNICEF, distributed 61 hygiene kits (shampoos, shower gels, and soaps – adjusted by number of children per family) to families with children in the Miral and Ušivak TRCs.

IPSIA provided a range of clothing supplies in Bihać in March, including shoes (200 pairs), coats (200), hats (1000), socks (400), and gloves (500).

All asylum seekers and migrants accommodated at the Duje Reception Centre are provided with necessary NFIs and clean bedding.

House of All provide residents with NFIs, such as hygiene and sanitary items, pillows, sleeping mats, towels, blankets, and shoes and clothing as necessary.

Aid Brigade offer a sock exchange at the Sarajevo based Community Centre.

### **WASH:**

During March, IOM supported the desinsection, deratisation, disinfection (DDD) of all TRCs in USC. Disinfections are now taking place on a weekly basis, while full DDD will be organized every month.

The Bira TRC has 99 toilets and 44 showers and facilities are separated by gender. Drinking water is available in the centre. A number of repairs take place every week in the centre to repair broken facilities – in most cases damaged by the refugees and migrants staying in the TRC. Despite efforts made, including both the investments to expand the TRC's WASH capacity, and the efforts made to enhance the communication and participation of the centre population, Bira TRC continues to struggle to with broken facilities and equipment, a lack of hot water, and the accumulation of water between containers, as a result of handwashing of clothes and dishes. Initiated through IOM's social cohesion initiative, joint cleaning actions are now organized regularly - twice a week – in the area around the facility. Caritas continued to provide laundry services in the Bira TRC on a daily basis: 4,300 kg of clothing were laundered for 1,525 individuals in March. The capacity of the laundry system is still limited and representatives of Caritas informed IOM management of low water pressure, affecting already insufficient laundry operations.

The Miral TRC has 54 toilets and 27 showers and facilities are gender separated (even though the TRC, from the end of the month, only hosts single men and UASC boys). Drinking water is available in the centre. In March, IOM organized cleaning actions in and around the centre involving the TRC population. These are organized on a weekly basis. The laundry system is still in the process of being set-up, and the centre population is therefore washing their clothes by themselves, affecting access to hot water. IOM provides clean sheets and linen upon arrival and for those in scabies treatment, or other medical cases as per need.

The Sedra TRC has 53 toilets and 59 showers, with 43 rooms having private facilities for a total of 163 persons of concern, the remaining TRC population having 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 the TRC population on a voluntary basis contributing to its operation. A higher number of requests was noted due to this month's high number of departures and arrivals. The Sedra TRC continues to face challenges with the number of toilets and showers, and the provision of sufficient hot water. While the centre population contributes to the cleaning and maintenance of the WASH facilities, IOM supports cleaning staff to ensure that toilets, showers, and common areas are kept clean.

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. With gradual increasing involvement in the previous months, the centre population are now actively involved in cleaning and maintenance of the centre, and during food distribution, and in the organization of the centre's communal activities and spaces. A laundry system is in place with 3 industrial washing machines and 3 industrial dryers.

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 is available in the centre. Four washing machines out of six as well as four dryers out of six are installed and operational. The four additional appliances will become operational as soon as the electricity issue is solved.

All asylum seekers and migrants accommodated at the Duje Reception Centre are provided with necessary hygiene/sanitary supplies. WASH facilities are gender separated with hot water and laundry services available also.

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

Aid Brigade continue to offer drinking water and the use of three toilets during the day at the Sarajevo Community Centre.

In March, MSF continued to support showers run by volunteers in Sarajevo. These showers are available to refugees and migrants in Sarajevo, including those outside of centres.

### **Food:**

Over 265,000 meals were provided to refugees and migrants in BiH in March 2019. The majority of these, over 176,000, were provided in USC.

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. Caritas continued to support with fresh food and sundries and delivered over 300 kg in March, including fruit, vegetables, tea/coffee, and chocolate. BHWI provide additional support with nutritional needs in specific cases as per recommendations made by a doctor.

The Red Cross Mostar Branch prepares and distributes three meals per day to refugees and migrants at the Salakovac RRC. In March, over 17,000 meals were distributed. BHWI provide additional support with nutritional needs in specific cases as per recommendations made by a doctor

In the four TRCs in USC managed by IOM, IOM/the Red Cross continued to support the provision of three meals (breakfast, lunch and dinner) and two fruit snacks per day according to standardized menus ensuring sufficient calorie and nutrition. In March, IOM provided a total of 17,855 meals in the Borići TRC, 92,603 meals in the Bira TRC, 27,349 meals in the Sedra TRC, and 37,667 meals in the Miral TRC. Meals are prepared and distributed in-line with international standards that guarantee sufficient nutritional value, variety and a daily intake of 2,100 Kcal. Meals are prepared on-site at the Sedra and Bira TRCs, while for the Borići and Miral TRCs, the Red Cross prepares meals at their own premises transporting the food to the respective sites.

For the TRCs in USC, amendments were made to the standardized menus, which were also expanded to include new dishes based on feedback from the centres' population. A new contract was concluded with the wholesaler, and will be implemented starting in April. In the Bira TRC a new practice for food distribution was introduced allowing vulnerable individuals, not able to stand in the

queue, to bring food directly back to their accommodation containers. Additional kitchen equipment in the Bira and Sedra TRC was also delivered and installed in March.

In the Sedra TRC, specialized food is provided to those with specific dietary requirement upon Doctor's recommendation/medical prescription. Vegetarian meals are served in the Sedra TRC to refugees and migrants who are vegetarian, or in need meat-free food for medical reasons. School children receive an early breakfast on school-days. The Sedra TRC received new open kitchen equipment so the centre population can cook their own food; the open kitchen will be operational shortly.

In the Ušivak TRC, three meals per day (breakfast, lunch and dinner) plus two fruit snacks are prepared and distributed with the support of Pomozi.ba. Meals are prepared and distributed in-line with international standards that guarantee sufficient nutritional value, variety and a daily intake of 2,100 Kcal. A total of 41,008 meals was distributed in March. Pomozi.ba informed IOM that they will be unable to provide food beyond 400 persons per day, and that they do not have the capacity to provide for specialized food for medical cases, or for extra nutritional food for pregnant and lactating women. Supported by the EU, IOM will therefore complement the food provision of Pomozi.ba.

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

In March, Aid Brigade continued to provide two meals per day (breakfast and lunch) for refugees and migrants in a community centre in Sarajevo. Approximately 300 people were provided with meals per day over the month.

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. In March, 1,200 meals and 800 snacks were provided. IFS-Emmaus provides hot meals to those accommodated at the Duje Reception Centre; in March, 105 hot meals and 74 dry meals were provided.

Supported by UNICEF, and operated by ŽsU, StC, SOS Children's Villages, and World Vision, Mother Baby Corners (MBC) at the Salakovac RRC, the Ušivak TRC, the Borići TRC, the Bira TRC, the Sedra TRC, and in VK<sup>4</sup>, 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 March, a total of 82 mothers, three pregnant women, four fathers, and 81 children under five benefitted from MBC activities: 11 mothers and 13 children at the Salakovac RRC (8 girls, 5 boys); 15 mothers, at the Ušivak TRC; 10 mothers, three fathers and 14 children (five girls, nine boys) at the Borići TRC; 10 mothers, and 13 children (four girls, nine boys) at the Bira TRC; 37 mothers, one fathers and 41 children (17 girls, 24 boys) at the Sedra TRC; and one mother 21 in VK. Some 1,000 assistances, 25 workshops, four lectures and 21 educational activities on the importance of breastfeeding and child health, 20 individual consultations, 18 psychosocial services to mothers, and 10 referrals of infants to paediatric ambulance were provided. In March, 880 baby food jars, 880

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<sup>4</sup> RRC (SOS and WV, 08:00 – 16:00, Monday to Friday), the Ušivak TRC (SOS and WV, 09:00 – 10:30, Monday to Friday), the Borići TRC (ŽsU and WV, 10:00 – 18:00, daily), the Bira TRC (ŽsU and StC, 12:00 – 20:00, Monday, Wednesday, Friday), the Sedra TRC (ŽsU and StC, 10:00 – 18:00, daily), and in VK (SOS and WV, mobile, 09:00 – 17:00, Monday to Friday)

juices for children and 930 supplements for lactating women and pregnant women were provided through MBCs.

In March, with support of UNICEF, DRC provided training to the MBC staff, medical teams and IOM staff dealing with food procurement and distribution in the Sedra, Bira and Borići TRCs on counselling on breastfeeding, IYCF, and the use of food supplementation products. In total 19 people (16 women, three men) took part in these trainings. The trainings covered: breastfeeding; milk formula: when to give, how to prepare, rhythm of meals; complementary feeding and nutrition as a mother-child relationship. Special emphasis was placed on identifying possibilities for improving and upgrading service provision based on identified needs and according to available resources.

### **Education and leisure:**

In March, 139 refugee and migrant children continued to regularly attend five primary schools (three in Bihać and two in Cazin), with the support of UNICEF and StC and in cooperation with the Ministry of Education. Classes were provided by teachers trained in the 'HEART' methodology by StC. An additional 35 teachers were trained in the 'HEART' methodology in March. Daily, five persons as escorts for migrant and refugee children and three cultural and language mediators accompanied the children during transport to and from schools and stayed with them during classes. On a daily basis, children received sandwiches, fruit, and juices at school. Schools were provided with the supplies for teaching and hygiene. In cooperation with the Ministry of Education, a new class schedule was developed and some 50 children started attending regular school classes with local children. Another 408 children in the Borići, Bira, and Sedra TRCs benefitted from structured non-formal education. A total of 278 workshops (educational, creative, sports, music, etc.) and 82 HEART workshops were organized in the month.

In Sarajevo, UNICEF in partnership with World Vision and SOS Children's Villages supported regular school attendance of 12 children (eight boys, two girls), including escort during the transport from the Ušivak TRC and House of All to primary schools in Ilidža and Pazarić. Safeguarding Persons/CP Assistants and interpreters escort children to and from school every day, and they are present in the school to prevent and immediately address any possible issues. School snacks and school bags with accessories are provided to all refugee/migrant children attending school. During March, IOM continued to provide transportation of school-aged children from staying in the Bira, Borići, Miral, Sedra, and Ušivak TRCs, as well as from House of All.

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 (attended by 14 children), occupational and recreational activities (attended by 16 people), and Bosnian/Croatian/Serbian lessons (attended by nine people).

In the Salakovac RRC, BHWI, supported by UNHCR, provide a range of activities, including separate Bosnian/Croatian/Serbian and English lessons for women and men three times per week (attended by five women and ten men), knitting workshops three times a week (attended by 13 women), sewing workshops three times a week (attended by 10 women), women's aerobics three times a week (attended by 10 women), and sports and recreational activities two times a week (attended by 17 adults). Childcare services are provided during the aforementioned activities as needed. In lieu of approval from the HNC Ministry of Education for refugee and migrant children to attend school, "My



School”, a custom education program (attended by 30 children) continued in March in the Salakovac RRC.

In the Ušivak TRC, BHWI, supported by UNHCR, provide a range of activities, including fitness workshops for women (10 women attend) and Jiu-Jitsu for UASC (18 UASC attend). In March, with the support of SOS Children’s Villages and World Vision, 60 refugees and migrants (60 male) attended non-formal education activities (IT, Spanish and Italian language classes), 46 (46 male) participated in sport and recreational activities (table tennis, badminton etc.), and 150 (5 female and 145 male) used the Info desk assistance provided by SOS Children’s Villages, and World Vision.

In Sarajevo, BHWI provide support to asylum seeker children in private accommodation with educational activities. BHWI also held an SGBV workshop on 8 March with 17 women from House of All. The workshop discussed women’s rights and equality in a context of migration and looked at the position of women in the family and the wider community across cultures.

When children are accommodated at the Duje Reception Centre they can participate in creative workshops as well as literacy courses held in the IFS-Emmaus Centre for Children and Youth at Duje by professional staff.

Aid Brigade continue to provide language classes at the Community Centre in Sarajevo.

Supported by the UK Government, IOM and ŽsU continued to provide Integration Centre Units in the Sedra and Borići TRCs with the aim of supporting migrants and refugees, including UASC, to have access to high quality and comprehensive integration services and are integrated into the local community. The centres offer a range of intercultural activities and the spaces are equipped with computers, board games, playing cards, handicrafts, internet, library, etc. Activities are organized on a regular basis by ŽsU. A total of 132 individuals (71 women and girls, and 61 boys and men) participated in activities in the month of March.

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

VP, in partnership with UNHCR, supported asylum seekers who applied for asylum more than nine months ago<sup>5</sup> to register with the Employment Bureau and Tax Office and now have access to the BiH labour market.

UNHCR together with VP BiH continue to provide information and assistance to persons of concern regarding the family reunification procedure. Currently, three families/individuals are regularly counselled to reunify with other family members using legal pathways.

UNHCR had a meeting with the Canton Sarajevo Minister of Labour, Social policy, Displaced persons and Refugees to discuss further cooperation related to refugees and migrants in the Canton, particularly in order to increase their integration possibilities.

Due to limited funding, IOM is only providing Assisted Voluntary Return and Reintegration (AVRR) to particularly vulnerable individuals. In March, IOM supported one person to return to their CoO. In late

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<sup>5</sup> Asylum seekers have the right to work in BiH if a decision on their asylum application is not made within nine months and the burden of failure to make a decision cannot be placed on the asylum seeker.

March, IOM received confirmation of future support for AVRR from the Western Balkans and will resume AVRR activities from mid-April.

Supported by the British Embassy in Sarajevo, IOM/ŽsU organized social and non-formal educational activities for adult refugees and migrants in the Borići and Sedra TRCs, including activities fostering integration and inter-actions with the members of the local community. Activities were organized in the Integration Centre Unites where the centre population was provided with the opportunity to learn the local language, and participate in various social, cultural and creative activities and workshops.



*The UK Ambassador at the Sedra TRC Integration Centre / IOM 2019*

In March, IOM concluded its project supporting community stabilization and promoting social cohesion in migrant host communities, financed by the British Embassy in Sarajevo. The project, addresses perceived negative externalities associated with the stay of migrants in BiH, while also highlighting positive and human aspects of migration. During March, IOM supported the renovation of the NK Jedinstvo Stadium, and the revitalization of the city park and the Borići park in Bihac, installing new benches and garbage bins, and providing free public Wi-Fi, and planting trees. IOM also repaired the Partisan Memorial Cemetery. All sites were damaged by the stay of migrants in the summer of 2018. At the end of the month, the sites were officially inaugurated and the British Ambassador to BiH visited the aforementioned projects.

A quantitative survey was commissioned by IOM within the framework of the same project. A representative sample of residents of areas of Bihac particularly affected by the presence of migrants were asked, among other, about their perception of the current situation pertaining to the stay of migrants in their communities, its potential [negative] effects of their stay on public spaces, goods and services, as well as the trust and satisfaction with the response of the government and the international community. The public perception survey was conducted through face-to-face interviews at two points in time, in January and in March. Compared to the Baseline, citizens of Bihac in March were more inclined to think that migrants who are currently in BiH, share the same values as them, but have generally less sympathy for them than before. Additionally, even if the majority does not believe that migrants have the right to be in the country, most respondents still expressed that those

already in the country have the right to basic shelter and assistance, and to have their basic food, hygiene and health needs met. Respondents are divided regarding the potential for migrants to integrate into BiH society, with half respondents expressing a positive attitude towards migrant integration, for instance by believing that local sport clubs, NGOs, Youth Centres, etc., should include migrants in their activities. Furthermore, almost half of the respondents to some extent agree that migrants should be given the opportunity to stay in BiH if they wish to. The support for migrant children, regardless of their status, having the right to attend school in BiH is overall very strong.

IPSIA serves hot tea in the Bira TRC, operating between 11:00 and 13:30 (filling a gap between breakfast and lunch distribution) on Monday, Wednesday, Thursday, and Friday, and serves approximately 600 cups per day. 10,000 cups were served in March. The service operates from a kiosk, in front of which IPSIA established an area with tables and benches for socialization. [Playing cards, table-top games, and books \(in a range of relevant languages\) are available.](#) Refugees and migrants from the Bira TRC took part in painting murals on the walls of the centre in the area, organized by Italian NGO, Per un Mondo Migliore.



*Murals in the Bira TRC / IPSIA and Per un Mondo Migliore 2019*

In terms of other small scale initiatives:

- In March, two girls from Bihać contacted IOM and initiated a #trashchallenge action at five different locations in the City of Bihać. On Saturday 23 March, they cleaned these sites together with 50 people from the IOM managed TRCs. One of IOM's related social media posts reached over 39,000 people.
- IOM's project Sounds of Migration continued throughout the month of March, with recordings taking place and a video recording event in the centre of Bihać.
- On 27 March, a music night was organized by Jall Aux Yeux in order to film the documentary "Here we move, here we groove", which saw the participation of many refugees and migrants from the Sedra TRC. The film will be released in 2020.
- The organization "Caravana Artistica" visited the Miral TRC and involved centre population in various artistic activities.
- Children from the Borići TRC football train together with local children.

- Integration activities for children from Borići TRC who attend Elementary School "Harmani 2" continue, including creative reading workshops, illustration, puppet creation, and art.
- Dance classes held in the local dance studio Virus Bihać continued to be attended by children from the Sedra TRC twice a week.

### **Safety and security**




The high number of unauthorized entrances, especially in the Bira, Miral and Ušivak TRCs, constitutes a challenge for security and centre management. For example, during a check in the Bira TRC in late March, over 250 unregistered persons were identified in the centre. In response, IOM took action to strengthen the safety and security localising points where unauthorized entries take place and changing the monitoring routines of the security company. In the Miral TRC, IOM numbered all the beds and rooms, assigning each individual to a specific rooms/bed. Accommodation containers and rooms are now being checked twice a day in order to detect possible irregularities.







Overall, the number of incidents has decreased during the month of March, despite the increase in the number of arrivals. Although the security situation somewhat stabilized, fights between different migrant groups continue to be a challenge in the Bira and Miral TRCs, as well as in the Ušivak TRC. All incidents in March were reported to the Police.

Other measures taken by IOM during March to enhance the safety and security of TRCs, was the installation of video surveillance systems, completion of evacuation plans, training of IOM centre staff in fire safety and first aid.

## Map of Key Sites and Locations



<b>3W</b>															
<b>Location</b>															
	Una-Sana Canton						Sarajevo Canton				HNC	Tuzla Canton	Lukavica	Other	-
	USC, Other, estimate	Bihać, Borići TRC	Bihać, Bira TRC	Cazin, Sedra TRC	Velika Kladuša, Miral	Zene sa Une	Ušivak, Hadžići TRC	Sarajevo, HoA	Sarajevo, Other, estimate	Asylum Centre, Delijaš	Refugee RC, Salakovac	Reception Centre Dujje	Immigration Centre	Awaiting asylum, private accomm.	Totals
<b>Key population estimates</b>	<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)</i>														
<b>Total Size</b>	1,000	276	1,610	321	661	6	703	59	300	100	108		71	133	5348
<b>Of which, UASC</b>	-	0	152	7	21	0	77	0	-	0	0		0	1	258
<b>Of which, children</b>	-	116	212	138	21	1	123	24	-	41	50		1	51	778
<b>Of which, women &amp; girls</b>	-	130	61	133	0	1	41	24	-	44	56		7	7	540
<b>Of which, single women</b>	-	13	1	2	0	0	1	2	-	0	0		0	0	19
<b>Of which, family members</b>	-	258	120	301	0	2	99	57	-	95	108		0	82	1,122
<b>Of which, asylum seekers</b>	-	12	29	128	130	2	6	13	-	22	105		8	106	561
<b>Of which, awaiting asylum registration</b>	-	31	324	155	34	0	304	46	-	78	3		7	25	1,007
<b>Sector</b>															
<b>Shelter</b> 	-	SFA, IOM	SFA, IOM	IOM	SFA, IOM	ŽsU/ UNHCR	SFA, IOM	HoA	-	MoS/AS/ UNHCR	MHRR/ MoS/AS/ UNHCR	Emmaus / MoS/ UNHCR	MoS, SFA	-	-
<b>Centre Management</b> 	-	SFA, IOM	SFA, IOM	SFA, IOM	SFA, IOM	ŽsU	SFA, IOM	HoA	-	MoS/AS	MHRR/ MoS/AS	Emmaus	MoS, SFA	-	-
<b>Protection</b> 	UNHCR/ DRC/VP/ BHWI, IOM, CSW, UNICEF	UNHCR/ DRC/VP, UNICEF/ ŽsU/SIC, CSW, IOM, UNFPA	UNHCR/ DRC/VP, UNICEF/ SIC/ UNFPA, IOM, CSW	UNHCR/D RC/VP, JRS, UNICEF/Žs U/SIC, CSW, UNFPA, IOM	UNHCR/ DRC/VP, UNICEF, IOM	ŽsU, DRC/ VP/UNH CR	UNHCR/VP /BHWI/DR C, CSW, UNICEF/ SoS/WV, IOM	HoA, BHWI/ VP/ UNHCR, UNICEF	UNHCR/ VP/ BHWI	MoS/AS, UNHCR/ BHWI/ VP, CSW	UNHCR/ BHWI/VP, UNCEP/ WV, CSW	Emmaus UNHCR/ BHWI/ VP, CSW	UNHCR/ BHWI/VP, CSW	VP/ UNHCR	-

<b>Health</b>		-	DRC, UNFPA/JRS, UNICEF, DZ, CH, WHO	DRC, UNFPA/JRS, UNICEF, DZ, CH, WHO	DRC, UNFPA/JRS, UNICEF, DZ, CH, WHO	DRC, DZ, CH, WHO	DRC, DZ, CH	DRC, UNICEF/WV/SoS, DZ, CH	UNICEF/WV/SoS, DZ	MSF	MoS/AS/UNHCR, DZ, CH, DRC	MoS/AS, UNHCR, DZ, CH, DRC	Emmaus	SFA, DZ	-	-
<b>Non-food items</b>	<b>NFI</b>	IOM	CoBRC, IOM, UNFPA	CoBRC, IOM, UNICEF/CSW, UNFPA, ŽsU	IOM, UNFPA	CoBRC, IOM	ŽsU	IOM, Pomozi/AB, UNHCR, RC, Caritas	HoA	Pomozi.ba, CA/AB	MOS/AS/UNHCR/BHWI, CRS/Caritas	RC, UNHCR/BHWI, UNICEF/WV	Emmaus	MoS/SFA	-	-
<b>WASH</b>		IOM	IOM	IOM, Caritas	IOM	IOM	ŽsU	IOM	HoA	Pomozi.ba, MSF	MoS/AS/UNHCR	MHRR/MoS, UNHCR/BHWI, UNICEF/WV	Emmaus / MoS	MoS/SFA	-	-
<b>Security/Safety</b>		N/A	MoS/SFA	MoS/SFA	MoS/SFA	MoS/SFA	ŽsU	MoS/ SFA	HoA	N/A	MoS/AS/UNHCR	MHRR/UNHCR	Emmaus / MoS	MoS/SFA	-	-
<b>Transport/ Logistics</b>		IOM	IOM	IOM	IOM	IOM	ŽsU, IOM	IOM, UNHCR/BHWI	-	-	MoS/AS/UNHCR/BHWI, IOM	UNHCR/BHWI, IOM	Emmaus / MoS, IOM, UNHCR/BHWI	IOM	-	-
<b>Administrative/ Legal</b>		MoS/SFA/AS, IOM, UNHCR/VP	MoS/SFA, IOM, UNHCR/VP	MoS/SFA/AS, IOM, UNHCR/VP	MoS/SFA/AS, IOM, UNHCR/VP	-	ŽsU, VP	MoS, UNHCR/VP	VP/UNHCR	-	MoS/AS/UNHCR/VP	MHRR/MoS/SFA/AS, UNHCR/VP	Emmaus, UNHCR/VP	MoS/SFA, UNHCR/VP	VP	-
<b>Education</b>		-	UNICEF/PA/ StC/ MoE, IOM	UNICEF/PA/ StC/ MoE, IOM	UNICEF/PA/ StC/ MoE, IOM	-	UNICEF/PA/ StC/ MoE, IOM	AB/CA, UNICEF, WV/ SoS, IOM	UNICEF/WV/ SoS, HoA, IOM	-	MoS/AS/UNHCR/BHWI	UNHCR/BHWI, UNICEF/WV	Emmaus	-	-	-
<b>Food and nutrition</b>		IOM/CoBRC	IOM/CoBRC, UNICEF/ŽsU/StC	IOM/CoBRC, UNICEF/ŽsU/StC	IOM/CRC, UNICEF/ŽsU/StC	IOM/CRC	ŽsU	Pomozi.ba, UNICEF/WV/ SoS	HoA	Pomozi.ba, CA/AB	MoS/SA/UNHCR, CRS/Caritas	RC/IOM, UNICEF/WV	Emmaus	MoS/SFA	-	-

**Acronyms:** AB, Aid Brigade / AS, Asylum Sector / BHWI, Bosnia and Herzegovina Women's Initiative / CA, Collective Aid / 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 / 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 / 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 / WV, World Vision / ŽsU, Žene sa Une.

## Working in partnership

- Monthly UNHCR-IOM led coordination meetings take place in Sarajevo, widely inviting stakeholders concretely engaged in the ongoing response and providing a forum for discussion.
- Bi-weekly coordination meetings take place in USC, widely inviting stakeholders concretely engaged in the ongoing response.
- Sector specific meetings are organized as required in Sarajevo and USC.

Sector	Organizer	Contact
<b>Sarajevo Monthly Coordination Meeting and Monthly Update</b>	UNHCR/IOM	<a href="mailto:doane@unhcr.org">doane@unhcr.org</a>
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<b>Gender Based Violence</b>	UNFPA	<a href="mailto:kristesashvili@unfpa.org">kristesashvili@unfpa.org</a>
<b>Health</b>	WHO	<a href="mailto:palom@who.int">palom@who.int</a>
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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 Bosnia and Herzegovina Migration Response: <https://bih.iom.int/ioms-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](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 refugee and migration statistics presented in this document are provided by the authorities of BiH and partner agencies. UN in BiH is not responsible for the accuracy of information provided by non-UN sources.*