

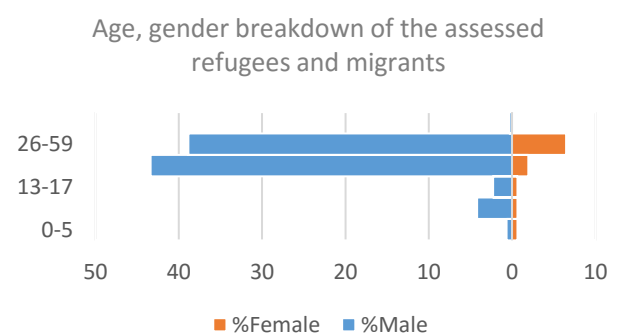
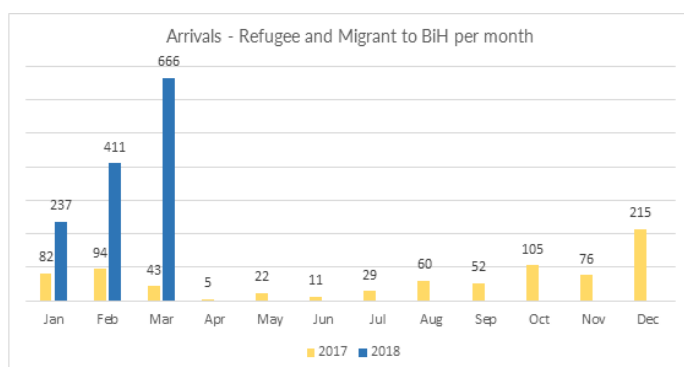
The Multi-Cluster/Sector Initial Rapid Assessment - MIRA Summary of Key Findings and Recommendations

The MIRA is a rapid inter-agency process that enables actors to reach - early on in an emergency or potential emergency - a common understanding of the situation at hand and its likely evolution. The findings of a MIRA provide evidence allowing humanitarian actors to identify strategic humanitarian priorities, develop a joint response, mobilize additional funding if needed, and to monitor the situation as it progresses. A MIRA is often a first step which informs possible subsequent more detailed needs assessment and analysis. Importantly, a MIRA provides an important channel for the affected population to voice their various perspectives, concerns, and needs.¹

PILOTING MIRA IN BIH – BACKGROUND

Initiated by the UN Resident Coordinator in BiH, the Multi-cluster/sector Initial Rapid Assessment was piloted in March and April of 2018 involving UNHCR, IOM, UNICEF, UNDSS, UNFPA, OSCE, the Office of the UN Resident Coordinator, the Ministry for Human Rights and Refugees of Bosnia and Herzegovina², Refugee Aid Serbia, Save the Children, Médecins Sans Frontières, Hilfswerk Austria International, Catholic Relief Services, Vaša Prava BiH, Caritas, and the Bosnia and Herzegovina Women’s Initiative.

A total of 50 questionnaires were completed by seven teams, interviewing 51 individuals, mostly migrants and refugees themselves, who provided information on a population of 308 migrants and refugees (90% men, 11% women and 5% children, of which 3% were understood to be Unaccompanied and Separated Children (UASC). in the greater Sarajevo area, Bihać, Velika Kladuša, and Goražde.



¹ MIRA Guidance, IASC, revision July 2015.

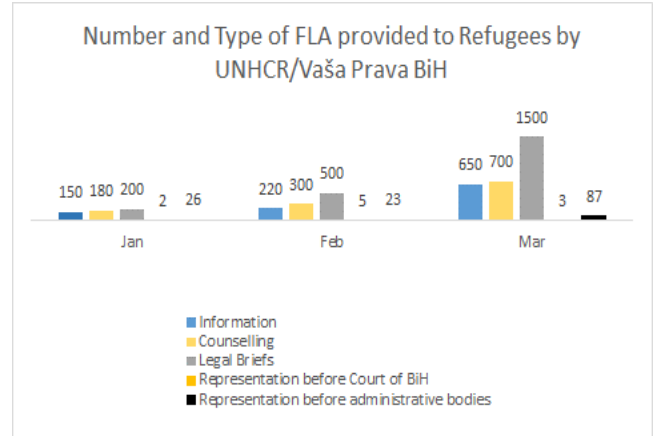
² The Ministry for Human Rights and Refugees of Bosnia and Herzegovina participated as observers.



KEY FINDINGS

Access to asylum procedures and legal assistance, including Assisted Voluntary Return and Reintegration (AVRR):

- Due to onward movement and limited access to asylum procedure, out of 70% of people who expressed intention to seek asylum in BiH, only 30% formally lodge a request for asylum. The asylum procedure gets more complicated for those not accommodated at the asylum centre.
- UNHCR alleviates gaps to a certain extent by providing free legal aid (FLA) and registration facility in Sarajevo.
- IOM provides counselling on Assisted Voluntary Return and Reintegration (AVRR) to migrants. Between January and March, IOM supported the return to and reintegration in the country of origin of 30 migrants, of which one was a child and three were infants.



Access to Accommodation:

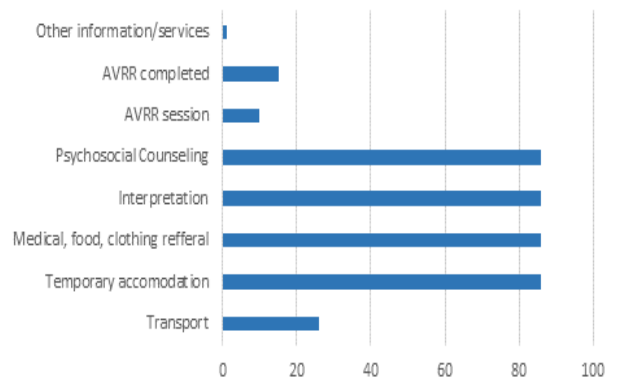
- Given the increase in arrivals, only a limited number of asylum seekers are able to access the Asylum Centre on a given day (in March, only 58 people of 437). In addition, appropriate accommodation is not provided to refugees and migrants apprehended at times pending referral to the Asylum or Immigration Centers. Between January and March 2018 only, the UN provided accommodation to 538 asylum seekers and additional 139 vulnerable persons.
- In some cases, asylum seekers refused accommodation or vacated the center due to unsatisfactory conditions and distance from city centers, resulting in a growing number of people, including vulnerable groups, found sleeping in open areas or abandoned buildings

Vulnerable groups³:

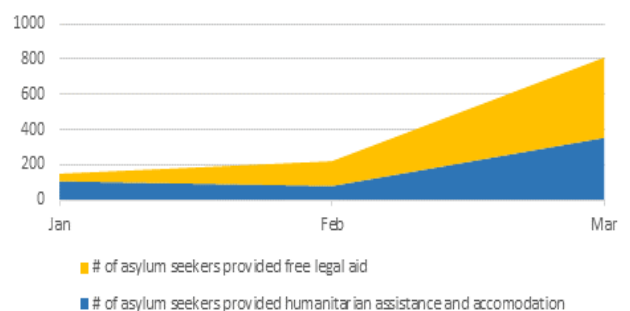
- Although most of the refugee and migrant population surveyed is composed of adult individuals in decent health conditions and with no particular vulnerabilities, MIRA exercise, the UN and partners have identified a number of persons in vulnerable situations, such as families with minor children, UASC, people with health conditions

³ The specific needs and vulnerabilities of families and children were not covered by primary data collection in MIRA; this particular issue needs to be addressed with targeted research.

Number and type of assistance provided to refugees and migrants by IOM Mobile Teams in March 2018



Number of asylum seekers provided humanitarian assistance, accommodation and free legal aid by UNHCR/BHWI/Vaša Prava BiH to Asylum Seekers, January-March 2018

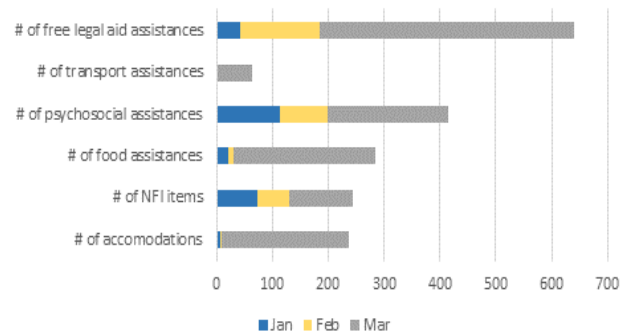




(including chronic illnesses) or disabilities, elderly individuals, pregnant women, etc. The MIRA exercise identified 28 children (of which, eight were unaccompanied minors), 2 elderly individuals, one person with disability, and 3 with chronic illnesses. UNHCR and partners have identified approximately 40 unaccompanied minors, including two girls, since January.

- Data collected by IOM Mobile Teams since June 2017, also indicate the presence of individuals and families who have been exposed to beatings, robberies and sequestering during the journey to BiH or are particularly at risk of becoming victim of violence, exploitation and abuse
- Provision of adequate accommodation and services to vulnerable migrants and asylum seekers (unaccompanied and separated children, people with health conditions or disabilities, etc.) is a challenge, impeded by the difficulty to duly appoint guardians beforehand. According to UNHCR data, six unaccompanied minors have been appointed a guardian in BiH.
- A number of irregular migrants and asylum seekers (including some families with children) are held in the Immigration Centre in East Sarajevo (close type of center/detention).
- There are limited institutional capacities to accommodate vulnerable persons and families in appropriate structures, especially outside Sarajevo. MIRA informants aside the Asylum Centre were not aware of the availability of any child friendly spaces for children who stay longer with their families in the country.

Number and type of assistances provided by UNHCR/BHWI to Asylum Seekers, January-March 2018



Health condition of refugees and migrants and access to health services, including psychosocial assistance:

- Access to health, including hygiene, mental health care and sexual and reproductive health is a major concern, often connected with protracted travel in difficult circumstances.
- Primary health care is provided by BiH authorities and accessible to individuals residing in the asylum and immigration centers. Persons who have not managed to lodge their intention to seek asylum residing outside the centre do not have access to health care, unless provided by the UN, civil society or volunteers.
- A large number of individuals have experienced traumatizing events during their journey and show signs of depression, post-traumatic stress disease (PTSD) and other mental health issues. So far in 2018, UNHCR's partner BHWI have identified 114 people with symptoms of psychological problems and 7 people diagnosed with a mental disorder.
- Infants, babies and pregnant women are exposed to particular health risks due to incomplete/inadequate levels of immunization and limited access to maternity care. From January to March, 12 pregnant women were identified.

Food Security:

- Food security varies by location. 67 % of informants confirmed having at least one meal/day, provided through donations and gifts; 14 % eat twice/day; 4 % eat three meals/day.
- Second or third meals are often purchased by refugees and migrants themselves. However, reports from Bihac and Velika Kladuša indicate that personal funds are running out and some refugees and migrants beg for money.



- From January to March, IOM Mobile Teams supported over 200 migrants with meals, while UNHCR's partner, BHWI, provided meals to 284 asylum seekers.

Transportation:

- Access to rights and services is often dependent on the provision of transportation, which is provided on a case-by-case basis to vulnerable groups of refugees/migrants at the request of the SFA, and other actors, (to public offices, hospitals, and hostels).
- Since the beginning of the year, IOM Mobile Teams have transported 211 individuals. UNHCR's partner, BHWI, provided transport to the Asylum Centre to a further 63 individuals over the same period.

Non-Food items (NFIs):

- 82 % of refugees and migrants covered through the MIRA exercise expressed a need for clothing and shoes, 48% expressed a need for a sleeping bags (mainly in western BiH).
- From January to March, through the UNHCR Information Centre, 243 people in Sarajevo were assisted with NFIs. In addition, the Red Cross of the city of Trebinje is supported by IOM to provide NFIs.

Education:

- Though asylum seekers are entitled to primary and secondary education by law, at present, the population in question is sufficiently transient that there is no demand for primary or secondary education. Should the situation evolve, this aspect will need to be reassessed.

Security:

- No violence against refugees or migrants was reported through the MIRA in BiH.
- Cross border attempts in mine suspected areas are of major concern.
- The Velika Kladuša Police have registered house break-ins without intention to steal and a few cases of theft, which may or may not have been perpetrated by refugees or migrants. Further to this, there have been five reported cases of criminal activity, of which one involved a member of the local population

KEY RECOMMENDATIONS⁴

Improve access and capacities for asylum procedures and legal assistance

- Improve provision of information and continuation of asylum procedures, in particular by the Service for Foreigners' Affairs (SFA), allowing asylum seekers to renew their attestation on expressed intention to seek asylum.
- Strengthen capacity to register asylum seekers through hiring and training of additional registration interview staff.
- Improve the registration process for asylum-seekers staying outside the Asylum Centre, in particular when they have no access to accommodation in the Asylum Centre.
- Enhance staff and equipment capacity of the Service for Foreigners' Affairs Field Offices for processing intentions to seek asylum/issuance of attestations.
- Record intentions to seek asylum by unaccompanied children and ensure attestation is issued in presence of the guardian appointed by the relevant Centre of Social Welfare.
- Establish free legal aid office under the Ministry of Justice, capacitate employees on asylum matters and strengthen partnerships with NGOs providing free legal aid services.
- Ensure availability of interpretation services at all stages

Strengthen government capacities for preparedness and response to refugee/migrant emergency scenarios:

- Conduct/update mapping of available human, financial and operational government resources for response to refugee and migrant needs and share with the United Nations to inform strategic support prioritization.
- Increase staff capacity and provision of trainings to Border Police to identify and refer migrants and refugees to relevant services and provide necessary information on rights and obligations.
- Strengthen capacities of relevant actors for provision of services to vulnerable individuals at all stages, regardless of status, in cooperation with major humanitarian stakeholders in the country.
- Include the needs of refugees and migrants in the contingency plans of specific institutions relevant to response and with special focus on local-level responders operating in the areas of high refugee and migrant concentration.
- Strengthen Government Information and Data Management in order to establish a harmonized, collaborative tool for planning, reporting and early warning, including with age and sex-disaggregated data.
- Enhance coordination between all relevant actors to ensure timely information sharing and avoid duplication of activities.
- Ensure deployment of Mobile Teams to monitor the situation and respond to immediate needs.

Enhance accommodation capacity with consideration of vulnerable groups' needs:

- Accommodation capacity of the Ministry of Security for asylum-seekers should be urgently increased, e.g. enable use the Refugee Reception Centre in Salakovac to accommodate asylum seekers

⁴ Given the inherent uncertainty, the recommendations should be prioritised or adjusted based on the evolution of the refugee and migrant situation.



- The SFA should increase coordination with SA to ensure referral of asylum seekers to designated accommodation facility (once new accommodation facilities for asylum seekers are provided by MoS).
- Safe accommodation, especially for UASC, should be provided to ensure safety, health and wellbeing and avoid any potential threats in private accommodation and/or public spaces, and set conditions for monitoring of general living conditions. Children and people seeking asylum should not be accommodated in Immigration Centre i.e. detained.

Improve access and quality of services for people in vulnerable situation (across the board, regardless of status):

- Conduct more in-depth assessment on the needs and vulnerabilities of families with children in order to ensure proper protection of children, and their rights to care, protection, health care and education.
- Strengthen screening mechanism to identify vulnerabilities and establish Standard operating procedures (SOPs) that clearly indicate the actors responsible for taking care of potential victims of trafficking and other vulnerable migrants and refugees.
- Ensure SOPs are in place to guide all response actors on how to deal with vulnerable population in emergency situations (in particular in refugee/migrant contexts) and effectively address specific risks such as human trafficking, possible increases of drug abuse, and the potential for exploitation of vulnerable groups.
- Develop and finalize clear referral mechanisms and guidelines for the provision of protection services specifically designed for UASC, in particular for the appointment of guardians with defined roles, responsibilities, and accountability mechanisms.
- Improve capacities to respond to and prevent cases of violence, including gender-based violence (GBV) and violence against children in general.
- Consider the establishment of child friendly spaces to provide safe space for children and ensure their protection from violence and abuse.

Improve access to health care:

- Enhance coordination between all health actors already providing services to refugees and migrants and conduct a mapping of available resources.
- Establish a referral system that ensures access to primary health care for all registered asylum seekers outside of the Asylum Centre.
- Consider establishing mobile health units/mobile clinics for all who are not guaranteed access to health care due to non-registration. This is especially important from the perspective of pregnant female migrants.
- Provide trainings to refugee and migrant first line responders to identify communicable diseases and effectively deal with them.

Improve refugee and migrant access to health care services, including mental health:

- Conduct in-depth research – in collaboration with key stakeholders - on the psychosocial needs of refugees and migrants, including an assessment of the available capacities to respond and provide relevant and quality services. The research should make recommendations vis-à-vis the expansion of services and capacity building needs, and should also look into the *specific* psycho-social needs of women and children (boys and girls).



Enhance food security:

- Strengthen partnerships and coordination with local actors and organizations with capacity to provide food on a regular and sustainable basis to migrants and refugees across the country, and in particular in hotspots.
- Consider establishing partnerships with private enterprises through their corporate social responsibility arms, such as supermarkets to complement food provision efforts.

Increase safety level to prevent discrimination and xenophobia:

- Build capacity of relevant responders to prevent and react to potential tensions/incidents among refugees, migrants and local population in timely and appropriate manner.
- Share land mine data widely through channels relevant for migrants and refugees.

Ensure vulnerability-sensitive and responsible media reporting:

- Analyse and continually monitor media reporting on refugees and migrants to assess its impact on public perception and build the capacity of media to report in a vulnerability-sensitive and responsible manner.