

# Bosnia and Herzegovina

01 - 31 May 2019

Official TRCs are at full capacity and there is an urgent need to identify locations for new TRCs to-be quickly operationalized.

The security situation in and around the Bira and Miral TRCs continues to be challenging with tensions between nationalities and un-authorized entries.

There is an urgent need for expanded outreach activities and to facilitate access to services for refugees and migrants outside of centres.

## KEY INDICATORS

**7,500 – 8,500**

estimated refugee and migrant population in BiH at the end of May 2019

**4,344**

max available accommodation as of 31 May 2019

**>228,000**

meals provided in May 2019 in BiH

**>5,424**

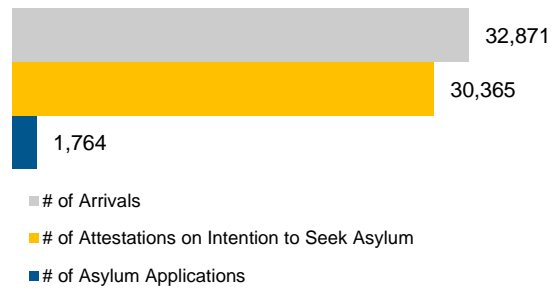
Medical check-ups conducted in May 2019

## ACCESS TO ASYLUM

**1,764 Asylum applications**

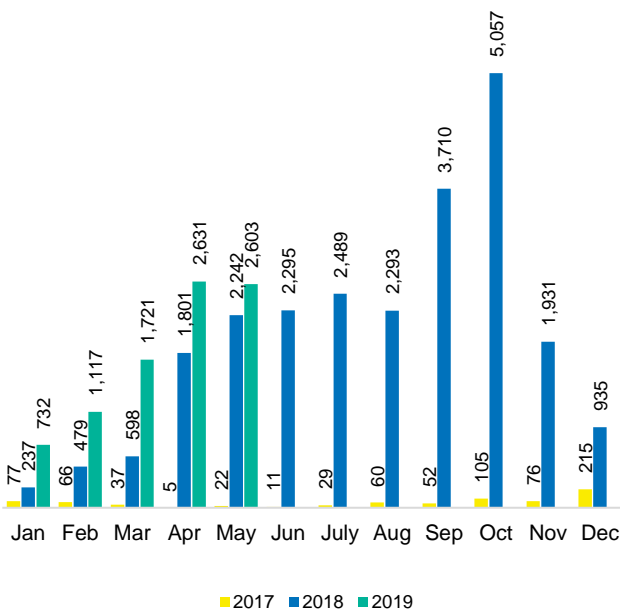
1 January 2018 – 31 May 2019

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.



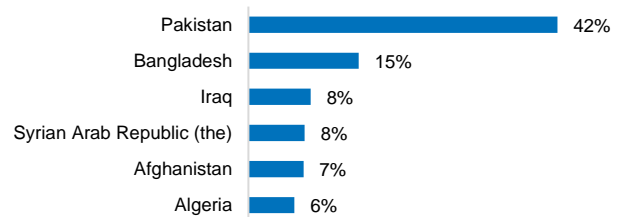
## POPULATION OF CONCERN

Number of detected refugee and migrant arrivals to BiH per month

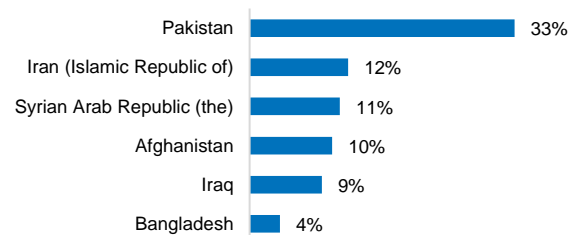


## POPULATION OF CONCERN

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



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



## Priorities and key gaps

### CCCM/Accommodation/Shelter:

- There is an urgent need for relevant authorities to identify additional sites for accommodation solutions, 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).
- Expand capacity to accommodate families with children, UASC, and other vulnerable categories, in adequate and protection-sensitive accommodation that meets international standards.
- Contingency plan and prepare to collectively and rapidly deploy staff and resources once new accommodation are identified.
- Seek appropriate accommodation solutions for UASC who are alleged perpetrators of misdemeanors or criminal offences.
- Improve and advocate for accelerated referral mechanisms to both the Delijaš Asylum Centre (AC) and the Salakovac Refugee Reception Centre (RRC) with the Ministry of Security (MoS).
- Resolve issues related to the electricity supply at the Borići temporary reception centre (TRC) to bring the site up to planned capacity and improve the stability of the electricity supply at the Bira TRC.
- Continue to develop and implement site specific protocols/standard operating procedures (SOPs) with clear divisions of labour, clear roles, and concrete deliverables to which response actors can be collectively held accountable.

### Protection:

#### **International protection, documentation, and free legal aid**

- Improve access to fair and efficient asylum procedures by, among other actions, advocating for the 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.
- Increase the availability of and access to information on assistance and the asylum procedure in languages used by refugees and migrants.
- Advocate for expanded Service for Foreigners' Affairs' (SFA) working hours (currently weekdays from 10:00 until 14:00) at the Ušivak TRC in response to the increased arrivals to the centre.
- 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.

#### **Protection environment and protection services inside TRCs**

- Seek and implement solutions to limit the unauthorized entrance of unregistered people into the TRCs, especially by finding a solution for the issue of fake ID cards.

- 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.
- Scale-up and ensure the provision of psychosocial support at all locations for all groups.
- Increase space available in the Ušivak TRC for the provision of psychosocial support.

### **Protection environment outside TRCs and protection outreach**

- Continue to advocate for the restoration of freedom of movement of migrants and asylum seekers to Una-Sana Canton (USC).
- Increase outreach activities and services to ensure an enhanced protection environment and humanitarian assistance for those outside of reception centres and for those denied entry into USC.
- Reinforce referral and case management mechanisms for protection services for refugees and migrants residing outside of TRCs.
- Continually map locations where refugees and migrants congregate outside of TRCs to better understand their extent, the needs, and support protection outreach and the provision of humanitarian assistance.
- Establish mechanisms for the provision of urgent humanitarian support – such as food, water, and first aid - to refugees and migrants in transit in BiH in locations such as Tuzla.

### **Child protection**

- Enhance reception capacities for UASC at the Miral TRC and regularly register UASC on the site to ensure access to basic services and protection.
- Ensure the presence of child protection mobile teams at points of entry into to USC.
- Seek and implement solutions to better cope with the high number of arrivals of UASC and the high turnover of this category.
- Strengthen outreach work by deploying additional workforce to support the work of the CSWs.
- 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.
- 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.

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

- Follow-up on the implementation of recently conducted GBV safety audits in the Sedra and Borići TRCs and 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 Ušivak, Bira, and Miral TRCs.
- Further coordinate GBV prevention and response by prioritizing inter-agency GBV case management, requiring updated referral pathways and the utilization of available GBV services inside of and outside of TRCs.
- Continue to advocate for adoption of the SOPs for Multi-sectoral Coordination, Prevention, and Provision of Services to Survivors of Gender Based Violence in Emergencies.
- Assist the Federation of BiH Ministry of Health and the USC Ministry of Health and Social Policy to strengthen healthcare professional preparedness vis-à-vis the revision and implementation of the upcoming protocol on Clinical Management of Rape (CMR).

- Assist members of the GBV Working Group to adapt international tools for recording, storage, and exchange of information among key humanitarian services using elements of the GBV Information Management System (IMS).
- Identify and gather SEA/GBV staff capacity needs to be addressed through custom training.
- Continually sensitize and train humanitarian staff in survivor centred GBV response and SEA principles.

## **Health:**

### **Immunization and communicable diseases**

- Seek resources to increase vaccination coverage (to ensure that all new-born children have access to full a vaccination programme, as well as that all children have access to regular vaccination according to the national vaccination schedule (including re-vaccination)) among refugee and migrant children, including new arrivals on an ongoing basis.
- Continue to raise awareness of the importance of immunization among parents and the community.

### **Primary and Secondary Healthcare**

- 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.
- Support to first aid provision to relieve pressure on the medical teams and to provide at least basic care on the weekends. (The Red Cross used to provide this service but no longer have sufficient material resources.)
- Increase and improve quarantine capacities and develop an SOP for quarantine.
- 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.

### **Mental Healthcare Services**

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

### **Paediatric Healthcare**

- Ensure high-quality primary healthcare for refugee and migrant children, including regular access to paediatricians and nurses specialised in child healthcare and development, including dentistry.
- Expand paediatric health services to the Bira and Borići TRCs.
- Seek additional funds to ensure dental care for children.
- Advocate for administering the whole immunization plan for children born in BiH and children who are staying in BiH for longer periods.
- Ensure continuation of medical check-ups for children awaiting school enrollment in August.

## **Sexual and Reproductive Healthcare**

- Improve access to sexual and reproductive health services, in particular for women and girls.
- Improve CMR procedures, by localization of CMR protocol already developed by Federation of BiH Ministry of Health and additional capacity building of health and other relevant sectors.

### **NFI:**

- Make additional 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 Sedra TRC.
- 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 and Bira TRCs.
- Increase the availability of WASH to those residing outside of TRCs.

### **Food:**

- Develop a system of complementary nutrition for young children and pregnant and lactating women in three TRCs accommodating families and children.
- Resolve the issuing of financing the provision of food in the Salakovac RRC beyond November 2019.
- Improve communication between health actors and the Red Cross to ensure that doctors' prescriptions of special dietary requirements can be followed in a timely manner.

### **Education and Leisure:**

- Strengthen a systemic approach to education, including development of an official instruction about how the integration of refugee and migrant children should be done and define stakeholder responsibilities.
- 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.
- Advocate, in lieu of access to formal education, 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 Cantonal Government for this is pending.)
- 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.
- Address the gap for educational opportunities and vocational training 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 initiatives aimed at promoting social cohesion and interactions between refugees/migrants and the local population in host communities, especially for initiatives engaging single men.

**Security and safety:**

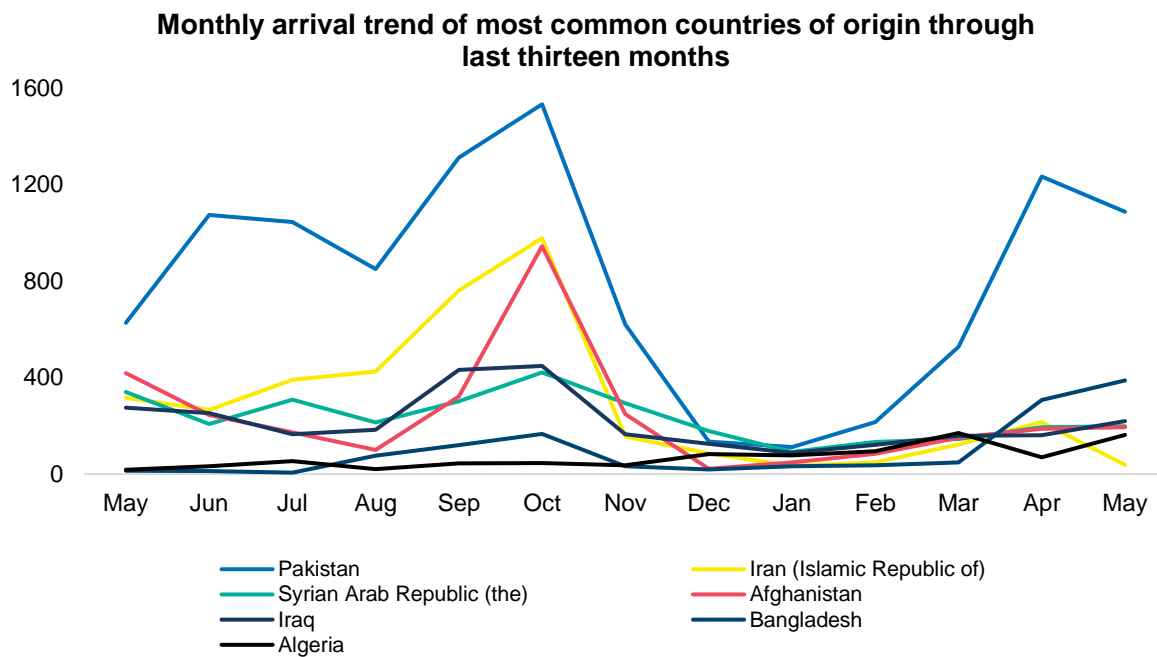
- Take measures to improve the security situation in and around the Miral and Bira TRCs including through non-security and preventative measures, such as leisure activities, psychosocial support etc. as currently capacities only allow for limited services for vulnerable categories.
- Increase the number of centre and security staff in the Miral and Bira TRCs during both day-shift and night-shifts.
- Conduct a thorough security assessment and action plan, presenting a plan for immediate and inter-mediate responses to improve the security for both the centre population and humanitarian workers.

## Key Updates and Operational Context by Sector

### Population:

The authorities in Bosnia and Herzegovina (BiH) detected the arrival of 32,871 refugees and migrants to the country between 1 January 2018 and 31 May 2019. Monthly arrivals in 2019 continue to exceed those in 2018, with 2,603 detected arrivals in May 2019 compared to 2,242 in May 2018. May was characterised by heavy rainfall and there remains a significant risk of increased arrivals in 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 7,500 and 8,500 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 in the 3W at the end of this document.

In May 2019, the largest declared Country of Origin (CoO) among new arrivals was Pakistan (42 per cent), followed by Bangladesh (15 per cent), Iraq (eight per cent), Syria (eight per cent), Afghanistan (seven per cent), and Algeria (six per cent). The composition of arrivals – according to declared CoO – varies over time, as shown in the below chart.



### CCCM/Accommodation/Shelter

As of 31 May, the maximum available capacity across eight formal and informal centres in BiH (USC, Sarajevo Canton, and HNC) was 4,344, not including safe accommodation and hostels made available to a limited number of particularly vulnerable cases or spaces in the Immigration Centre in Lukavica. The TRCs in USC are essentially full.

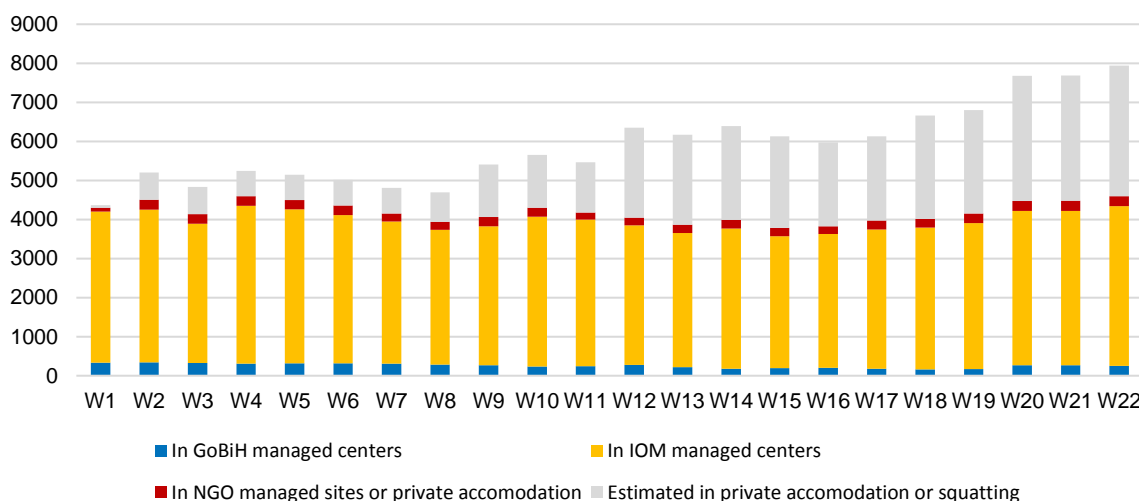
There was again a large number of families and UASC arriving to the TRCs in May, large numbers of whom could not be accommodated, highlighting the need for additional protection-sensitive accommodation capacity appropriate for these groups. Shelter was unavailable for even the most vulnerable categories.

The approved capacity limit of 3,200 refugees and migrants in USC remained unchanged, effectively reducing the overall capacity in the country and in USC – for example the Bira TRC has 1,940 beds but a maximum approved capacity of 1,500.

Given the discrepancy between suitable accommodation and the population in-country, an unidentified number of refugees and migrants are privately accommodated, sleeping rough, or squatting in Sarajevo and USC. Migrants and refugees in transit have been observed sleeping rough in other locations also. The sanitary and living conditions in these squats are sub-standard.

UNHCR, UNICEF, DRC, and Save the Children, in collaboration with other actors on the ground, work to identify, profile, and prioritize cases for referral to appropriate spaces, as available. Relatedly, in May, the relocation of families accommodated in the Bira TRC to the Borići and Sedra TRCs continued.

**In-country presence of refugees and migrants since January 2019**



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

The heavy rains in May caused a degree of damage to the TRCs which already faced infrastructural problems, especially in USC, which was affected by floods. The newly constructed kitchen in the Bira TRC, for example, was flooded at the beginning of the month and several consistent leaks were caused by the rain in the Sedra TRC across many different sections of the building, constituting a



safety risk given the weight placed on the roof. The rain also slowed down a number of construction works across IOM-managed TRCs.

In a context of political pressure to relocate migrants and refugees from the Bira and Miral TRCs to a less urban area, a potential location was identified by the Bihać City Council. At the Ministry of Security-led Operational Headquarters for Migration Issues on 27 May, IOM presented the preconditions and cost estimates for the establishment and operationalization of the identified location. IOM's assessment concludes that the minimum total cost for the establishment of the facility would be approximately 20 million BAM. The estimate does not include operational costs. Following the meeting, authorities agreed that they would identify budget lines to which they could contribute, based on the bills of quantities. Later in the month, IOM received further information stating that it is not possible to connect a centre at this location to the public water supply.



**The below accommodation and shelter was available in BiH in May:**

### **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.**

**At the end of May, the site hosted 843 refugees and migrants.** Construction works, supported by the Qatar Charity, to improve the TRC facility and to replace the large provisional tent are ongoing - work to clear the old building lot was completed and works to prepare the foundation are ongoing.

**The current SFA presence at the Ušivak TRC (10:00-14:00) is insufficient for the registration of the increased arrivals to Sarajevo Canton and the centre.** Large numbers of refugees and migrants can be seen waiting for registration at the centre on most days. The practice of providing visitors cards in order for persons of concern to access services continues, however these individuals are not properly registered at this point nor have they been medically screened prior to accessing the centre, posing protection and health risks.

**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 May, 60 asylum seekers were accommodated at the Delijaš AC.](#) Referrals to the centre are limited by strict conditions put in place by the SA of the MoS. On occasion, asylum seekers refuse to be accommodated there, among other factors, because the remote location of the AC. The number of referrals to the Delijaš AC increased in May: 16 families from the Ušivak TRC and three single men from the Immigration Centre.

**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**

[Currently, in all four centres in USC, IOM supports the SFA in centre management and oversees the daily running of the camps in coordination](#) with partners providing other services, pending a hand over to the SFA in accordance with the 11 March Decision by the BiH Council of Ministers.

**The Borići TRC (opened in January 2019 following a complete renovation supported by the EU)**, [in the City of Bihać, exclusively hosts families with children, UASC, and other vulnerable groups.](#) IOM staff and security personnel, as well as UNICEF and Save the Children child protection officers (CPOs), are present 24/7. [The currently approved maximum capacity is 430](#) (as opposed to the previously planned 580).

[At the end of May, the site hosted 380 refugees and migrants](#) with families accommodated in rooms of either 4, 6, 8, or 16 beds. [The centre ran at full capacity during the entire month of May](#) highlighting the need for protection sensitive accommodation appropriate for vulnerable refugees and migrants. Installation of the 25 planned housing containers to be placed in front of the building is currently on hold as the City of Bihać authorities withdrew previously agreed support for any expansion of accommodation capacities of the Borići TRC. [The electricity issues in Borići TRC continue to be an issue](#); the public electricity company cannot move forward, referring to property permit issues. In the meantime, to ensure electricity and heating to the TRC population, IOM is using an external power generator, a costlier solution.

**The Bira TRC (opened in October 2018)**, [in the City of Bihać, predominantly accommodates single men, and on a temporary basis, families with children, and UASC.](#) IOM staff and security personnel, as well as UNICEF and Save the Children CPOs, are present 24/7. [While the Bira TRC has an approved accommodation capacity of 1,500, there are 1,940 available beds](#), of which 1,300 are in six-bed housing containers and 640 in large provisional tents (which are gradually being replaced).

[At the end of May, the site hosted 1,848 refugees and migrants, predominantly single men.](#) Over the month, family members accommodated in the Bira TRC were regularly relocated to the Borići and Sedra TRCs, freeing space at the Bira TRC for those previously accommodated in the centre's provisional tents. 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, UASC. IOM staff and security personnel are present 24/7. The site has a maximum planned accommodation capacity of 700.

At the end of May, the site hosted 658 refugees and migrants. In light of the fact that many UASC continue to refuse to be relocated to other more appropriate and protection sensitive TRCs or return to the Miral TRC within a few days of being relocated, IOM and UN partners agreed to start accommodating UASC in the Miral TRC to ensure access to basic humanitarian assistance (food, NFIs) as well as access to social workers and legal guardians during work days. UNICEF and Save the Children are working to ensure 24/7 child protection presence. Due to its proximity to the Croatian border, the Miral TRC is viewed by many as the last stop before 'the Game'. Télécoms Sans Frontières provides internet access to humanitarian workers in the Miral TRC. During the month of May, a new quarantine area was put in place: it is isolated from the rest of the accommodation units and has capacity for 20 people.

In the morning of 1 June 2019<sup>1</sup>, a fire broke out on the first floor of the building, which hosted 247 refugees and migrants. IOM staff present in the centre quickly responded and evacuated persons from the building according to the established evacuation plan. The fire brigade reached the location within minutes and the fire was put out shortly after. In total, 31 residents were injured, of which 14, as of 3 June 2019, were still in hospital (12 in the Cantonal Hospital in Bihać and two in Sarajevo). Fortunately, there were no casualties. No centre staff were injured.

By the evening of the same day, tents provided by the Red Cross, and beds, mattresses and sleeping equipment, provided by IOM, had been set-up offering the centre population temporary housing on the premises of the TRC. The Red Cross distributed dinner, IOM provided additional NFIs to those in need, and all agencies present at the site cooperated in effectively responding to the incident. The arrangement of beds is currently under consideration. The floor affected by the fire is closed off until the investigation of the insurance company planned for 6 June 2019, after which IOM will conduct its own assessment and estimate the losses, damage, and refurbishment costs.

**The Sedra TRC (opened in July 2018), in Cazin Municipality,** is exclusively for families with children, UASC, and other vulnerable individuals who are prioritized for voluntary relocation from other sites in partnership with UNHCR. IOM staff and security personnel, as well as UNICEF and Save the Children CPOs, are present 24/7. The site has a maximum capacity of 420 beds, of which 150 ensure more privacy.

At the end of May, the site hosted 357 people. The site continues to be affected by the poor conditions of the building's structure as with the water, electricity and heating infrastructure. Due to these poor pre-conditions, the Sedra TRC was heavily affected by the rain in May causing new and worsening existing leakages.

### **Herzegovina-Neretva Canton**

**The Salakovac Refugee Reception Centre (RRC) (in operation since 2000) near Mostar,** provides accommodation to refugees and persons granted subsidiary protection. The centre management,

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<sup>1</sup> Early June is exceptionally included in the May update due to the severity of the incident.

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.](#)

[At the end of May, 120 asylum seekers were accommodated at this site.](#) The MoS assumed responsibility of admitting families (from MHRR) in Salakovac which now follows strict rules, as with the Delijaš AC.

**In terms of on-site CCCM in the TRCs, IOM Centre Managers or CCCM support staff lead CCCM meetings in each of Bira, Borići, Miral, Sedra, and Ušivak TRCs on a weekly basis.** House rules and inter-agency complaint and feedback mechanisms are in place in all TRCs and continue to be improved and amended together with partner agencies.

[Community Feedback Committees have been established,](#) with representation of IOM CCCM staff, partner agencies, and the centre population, responsible for the review and follow-up on feedback received through a complaint mechanism.

[Established Community Representative Councils also meet regularly in the Bira, Sedra, and Ušivak TRCs.](#) The main nationalities are represented in these councils and participate in community meetings organized regularly by IOM with partner agencies. [These Community Representative Councils serve as a platform for the discussion of centre issues and between the centre population and the centre management.](#) For instance, in May, the arrangements and schedules for food distribution during Ramadan were discussed. [The Community Representative Councils are also used for conflict resolution.](#) In May, as the TRCs continued to see a high turnover rate, alternatives to the Community Representative Councils as a means to ensure TRC population participation, such as the open 'Meet the TRC Manager' hour, continued in the Borići and Miral TRCs.

## **Protection:**

### **International protection, documentation, and free legal aid**

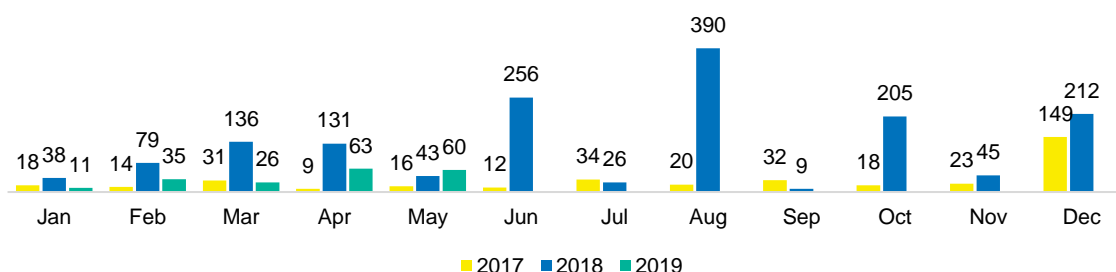
[In BiH, the asylum process is the responsibility of the SFA and SA of the MoS.](#) A person first needs to express intention to seek asylum with the SFA and then, within two weeks of expressing intention, register an asylum claim (upon invitation only) with the SA. The SA are then responsible for deciding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

[From 32,871 arrivals between 1 January 2018 and 31 May 2019, 30,365 \(92 percent\) formally expressed intention to seek asylum with the SFA. Of these 30,365, 1,764 \(6 percent\) chose and were able to formally lodge an asylum claim with the SA over the same period.](#)

[Several factors continue to 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; multiple challenges to registering an address at all TRCs, including the need to pay a BAM 10.00

administrative fee for Certificates of Residence; the fact that aside from the Delijaš AC and Salakovac RRC, the Ušivak TRC remains the only TRC where access to asylum is enabled and even here this is available only to families with children and UASC; very short notice for asylum interviews (in the Ušivak TRC) preventing proper preparation and attendance; that while although there is no legal provision that forbids the expression of intent to seek asylum on multiple occasions, the SFA re-issue attestations on intention to seek asylum on a case-by-case basis, often precluding people not considered to be vulnerable from expressing intent following the expiration of their initial expression; a lack of interpretation; restrictions on freedom of movement in USC. Furthermore, and with specific reference to UASC, 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 legal representation, the promotion of a child’s well-being and the safeguarding of the best interests of the child, and to enter the asylum process.

**Asylum applications in BiH**



This limited access, slowness issuing asylum seeker cards, as well as challenges reporting lost asylum seeker cards at the SFA and police station (in Sarajevo and Mostar), prevent access to the rights provided by the Law on Asylum. Previously issued asylum seeker cards have also been allowed to expire, despite timely requests for their extension.

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. 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 CoO information reports. In May, VP provided free legal aid services to 792 persons of concern across BiH and provided a further 286 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.

Further, in a context of mixed-migration flows, UNHCR and VP are stepping up efforts to identify those in need of international protection and to provide them with support processing their claims in BiH. Together, UNHCR and VP started to conduct asylum and integration interviews in reception centres, using specifically designed questionnaires. The aim is to provide counsel on asylum procedures, identify those with a genuine interest in asylum in BiH, and to assess their integration potential. In May, VP and CRS conducted these interviews in the Ušivak TRC (with seven families, six single men, and one UASC) and in the Delijaš AC (with three families).



In May, VP also challenged detention and expulsion orders for two asylum seekers, managing to overturn these decisions in one case and ensure release of one asylum seeker while the second case remains pending.

A UNHCR delegation headed by the Regional Representative for Southeast Europe met with the BiH Border Police Director to exchange information, assess the challenges of the border police, and to discuss issues related to asylum.

UNHCR organised a workshop on international protection for the staff of the Ministry of Security Sector for Asylum and for BHWI and VP. The training focused on aspects of international protection, including international standards, the BiH law on asylum, the role of the interpreter, interviewing techniques and research on CoO information. The aim was to train newly hired staff and to increase cooperation between governmental and non-governmental partners.

A five-day Refugee Law Clinic, for the third consecutive year, was organised by UNHCR for 19 students from the Sarajevo law faculty. Students were trained on international refugee law and the asylum system in BiH, including on the rights and obligations of refugees and asylum-seekers. Refugee Law Clinics also aim to raise awareness on refugee and migration issues.

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. VP submitted an appeal to the Ombudsperson regarding birth registrations conducted by the Mostar Registry Office where issued birth certificates omit the father's name, contrary to the Convention on the Rights of the Child. Depending on CoO, the acquisition of nationality can be related to the father and the absence of the father on a birth certificate can in cases lead to statelessness.

### **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.

The UNHCR protection team conduct weekly visits to monitor the protection environment in all reception centres and to work to identify and address protection issues. The protection team also makes ad-hoc visits to the Immigration Centre. The UNHCR protection team identify vulnerable individuals including through systematic profiling of persons of concern, in cooperation with other protection partners, provide information, and make referrals to relevant service providers. UNHCR and their partners also organise focus group discussions (FGDs) with residents in order to identify and address protection concerns as well as widen communication channels with persons of concern with a particular focus on families, UASC, women and girls. In May, the UNHCR Deputy Regional Representative met with representatives of the SFA as part of efforts to establish a "Traffic Light System" to systematically monitor and improve protection conditions in reception centres.

Throughout the month, DRC protection monitoring teams and staff 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, in the Bira, Borići, Sedra, and Miral TRCs, as well as in Sarajevo at the Ušivak TRC, and in HNC at the Salakovac RRC.

In partnership with UNHCR, with a focus on community based protection, DRC continued to conduct FGDs in all TRCs in USC. Additionally, in May, with the support of UNICEF, Save the Children, and the Bihać CSW, FGDs took place in the Bira TRC with UASC. 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. In total in May, seven FGDs were held, applying age, gender, and diversity mainstreaming approaches, as well as rights based and community-based approaches. Participant inputs are shared with CCCM in the TRCs.

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 refers 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.

IOM has also established info-desks in the Sedra, Bira, and Ušivak TRCs and set-up is underway in the Borići TRC, where the furniture delivery and the installation of cables are still pending. In the Miral TRC, an area of the registration container is currently used as info-desk. These function as points where the centre population can access information about available assistance and protection services within and outside of the TRCs and ask questions, submit feedback and complaints, or report incidents. They are also a platform used by IOM TRC management and other partner agencies to communicate and share information and updates to the centre populations. In the Ušivak TRC, it is also the point where the centre population sign up, for example, to social, sports and non-formal educational activities.

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 (four times per week), the Immigration Centre in Lukavica (at least once per week), and at the Duje Reception Centre (upon need), and provide a range of services with a focus on psychosocial support, SGBV prevention and response, and the identification of vulnerable categories, along with referrals to relevant services. BHWI also provide services in the Sarajevo urban area in locations such as House of All (twice per week). Among other activities BHWI 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, psychological first aid, organized music therapy, made referrals for psychiatric examinations, organized sports, fitness, and recreational activities. BHWI worked with a total of 643 individuals in May.

Žene sa Une (ŽsU) operate a trauma recovery programme for women in the Sedra TRC as well as in their safe house. The programme works to promote psychological recovery and social integration.

Two groups of women participate in workshops which work to reduce the symptoms of depression and anxiety and support recovery from trauma. Moreover, they work to identify problems or issues experienced by the women in a participatory manner and act as an entry and referral point to other specific programs and individual work organized by other actors. **In May, there were 95 participating women.**



**In May, IOM organized a training session for the staff of the Bira, Borići, Miral, Sedra, and Ušivak TRCs, as well as representatives of the SFA, on proactive approaches to the identification of the smuggling of migrants in mixed-migration flows at transit hotspots. The training**

session was held on 22 and 23 May for a total of 17 TRC staff and five SFA representatives. Focus was placed on preventing the smuggling of migrants and ways of proactive cooperation of TRC staff and the institutions competent in dealing with the prevention of migrant smuggling, and the identification of smuggling of migrants, as well as migrants vulnerable to other forms of exploitation, abuse or violations of the rights of their rights.

### **Protection environment outside TRCs and protection outreach**

Due to limited accommodation capacity, increased arrivals and, in cases, objective reasons for individuals and families to choose not to stay in the available accommodation capacity, an increasing number of refugees and migrants are present outside of the established TRCs, the AC, and the RRC. Refugees and migrants are also in transit between locations in BiH and exposed to a range of protection risks. **May saw further increases in the number of arrivals and in the number of those staying in private accommodation or squatting in open spaces, including UASC and families with children.**

**In May, IOM TRC staff reported a higher degree of movement and attempts to cross the border with Croatia, including many families with children, UASC, and other vulnerable individuals. 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. DRC collected 19 push-back reports in May.**

**The BiH Ombudsperson Office made a joint visit with UNHCR, the OSCE and IOM to the Klobuk border crossing point and met with the border police in order to assess media allegations that migrants and refugees were detained in inhuman conditions pending their readmission to Montenegro.**

**Measures put in place by Cantonal authorities in USC to limit the freedom of movement of asylum seekers and migrants to USC, without a clear legal basis, remained in effect throughout May. Related police checks of buses and trains continue. Further, the Cantonal authorities introduced a practice**



whereby no newly arriving persons of concern can enter USC, regardless of vulnerabilities, without prior confirmation of available accommodation space. Restrictions placed on freedom of movement can, inter alia, inhibit access to rights such as access to the asylum procedure, healthcare, and cause and prolong family separation. These measures also expose 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.

[As during previous months, while vulnerable categories were admitted \(assuming available space\), newly arriving single men continued to be denied access to the TRCs in USC.](#) In addition to the risks related to a lack of safe and secure shelter, due to the absence of an individual approach to assessing and determining access to shelter (assessment based simply on gender and family status), it is likely that extremely vulnerable individuals were among the single men denied accommodation. [Towards the end of the month, between 200 and 250 single men could routinely be seen sleeping rough in the area in front of the Bira TRC;](#) some erected tents while others slept in the open with blankets and sleeping bags.

[Given the increased presence of refugees and migrants outside of accommodation centres, UNHCR, DRC, UNICEF, and Save the Children, in close cooperation with IOM, deploy outreach and protection monitoring teams in USC,](#) and work to monitor the protection environment, provide protection by presence, to identify vulnerable individuals (families, single women, UASC, persons with disabilities or serious health issues), to provide key information, and to directly provide or refer these refugees and migrants to a range of protection related services. UNICEF and Save the Children support a child protection outreach team. Follow-up and accompaniment is provided 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. [These teams recorded over 2,753 refugees and migrants reaching the Canton in May,](#) primarily from the direction of Tuzla and Sarajevo, of which 15 percent were families with children, single women, and UASC.

[An early warning system related to arrivals through public transport is in place.](#) As part of this early warning system, UNHCR and partners continued to screen the departure of persons of concern to Bihać at the train station in Sarajevo. This allows outreach teams in USC to receive advance information about the number of families and vulnerable people that can be expected and to ensure presence. People at the train station are also informed about the risks of travelling to USC and the poor conditions there.

[UNHCR maintains an information centre in Sarajevo which makes referrals to relevant and available services,](#) as well as offers psychosocial support, through its partner BHWI, and free legal aid, through its partner VP. Translation and childcare support are provided. Visits to the UNHCR Info Centre were made on 25 occasions in May.

[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 until 21 May.](#) On 22 May, Aid Brigade ceased all activities and vacated the premises following joint action by the SFA, the Ministry of the Interior of Sarajevo Canton, and the Ilidža Municipality Building Inspection on the grounds of an absence of the necessary licences for the activities being conducted.

In May, IOM started a second update of the information about services available to refugees and migrants in BiH through the *Support for Migrants mobile application* ([www.supportformigrants.com](http://www.supportformigrants.com)). The application contains general information on six countries in the Western Balkans, information about refugees and migrants' rights as well as services available to them. The application can be accessed via computer or downloaded on mobile phones (IOS and Android) and is available in eight languages. In May, IOM conducted a number of focus groups and interviews with refugees, migrants and staff operating in TRCs to collect feedback on the application, with the objective of further improving its functionality and relevance.

### **Child Protection**

A large increase in the number of UASC was observed in May, exacerbating challenges to work on the child protection environment. Further, challenges were presented by the lack of appropriate accommodation.

Matters are further complicated because professionals responsible for the identification of UASC and issuing documents lack resources, tools, and adequate skills to conduct age assessment, which leads to an increasing number of single adult men claiming to be UASC in order to be admitted to TRCs, including to designated zones for UASC, and to have access to services, thus posing potential protection risks to UASC.

UNICEF is in the process of strengthening outreach activities and child protection teams at points of entry to USC with four social workers (three for the Bihać CSW and one for the Ključ CSW) enhancing the protection and guardianship appointments for identified UASC. UNICEF has procured basic NFIs which will be distributed by all outreach teams to the most vulnerable persons of concern, especially children.

In most instances, UASC identified by outreach teams in Ključ, Bosanka Otoka and Bosanka Krupa and VK cannot be referred to accommodation in any of the TRCs in USC as there is no space for UASC. At the same time, social workers from centres for social welfare are reluctant to appoint a legal guardianship to an unaccompanied child who is not registered and to whom social worker cannot guarantee accommodation.

UNICEF, in partnership with Save the Children, continued to provide 24/7 on-site child protection support at the Sedra, Bira, and Borići TRCs for refugee and migrant children, both for children within families and UASC.

At the Borići, Bira, and Sedra TRCs, ten Child Protection Officers (CPO) provide 24/7 support, including general advice and assistance specifically to families with children, referral to relevant institutions/organizations, psychological first aid, individual and group counselling, and follow-up support for children identified at risk of protection issues or victims of violence. In May, a total of 130 families were supported (58 in the Borići TRC, 53 in the Sedra TRC, and 19 in the Bira TRC).

In the Bira TRC, a team of 16 CPOs provide 24/7 child protection support specifically for UASC, jointly working with two legal guardians on the Bira TRC site in close cooperation with the Bihać CSW, where they provide general advice and assistance, referral to relevant institutions/organizations, 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. In May, support was provided to 297 UASC (all boys) in the Bira TRC.

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

In the Miral TRC, two social workers, seconded to the VK CSW, with the support of UNICEF, and in partnership with Save the Children, are present from Monday to Friday and perform the role of legal guardians to UASC and providing child protection support. From mid-February, in total 46 children in the Miral TRC were appointed legal guardians. During May, UNICEF/Save the Children social workers identified an additional 35 UASC staying in the Miral TRC irregularly. In cooperation with IOM, 10 were registered in order to access basic services (NFI, food, healthcare) and legal guardianship, bringing the total number of registered UASC in the Miral TRC to 18 and unregistered to 25. Unregistered UASC do not have access to NFIs, food, and adequate protection.

UNICEF in partnership with SOS Children's Villages and World Vision 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 makes referrals to external support services (legal representation and assistance, medical services) when required and monitors the provision of services to UASC in close partnership with the Hadžići CSW. In May, support was provided to a total of 204 UASC, including psychosocial support to 43 UASC, the inclusion of 15 UASC in sport/recreational activities, 20 in educational activities, 32 in leisure, and 204 UASC individual work. The present fluctuation of UASC dictates the number of participants, since there were cases where they stayed for one or two nights only.

UNICEF continued to support the CSWs in Bihać, Cazin, and VK, and a multi-disciplinary team from the CSW in Bihać operating after working hours and during weekends, with a focus on the protection of refugee and migrant children, with a special emphasis on UASC. This additional social service workforce provides legal guardianship to identified UASC, conducts best interest assessments (BIA), and provides escort to transfer UASC to the designated zone in the Bira TRC or other accommodation (e.g. safe house). In May, through UNICEF support, the CSWs in Bihać, Cazin, and VK assigned legal guardianship to 538 newly arriving UASC – making a total of 1,290 assignments in this manner to-date. The rate of assigning guardianship declined significantly in the last week of the month due to the fact that most newly identified UASC could not be accommodated in a TRC, owing to the lack of

capacity; CSWs are reluctant to appoint guardians when accommodation cannot be guaranteed. In May, 208 UASC were identified in Ključ, Bosanska Krupa, and Bosanska Otoka, where the Bihać and Ključ CSWs jointly provide guardianship.

BHWI have also made social workers available to the Hadžići CSW in Sarajevo Canton to be appointed as legal guardians, conduct BIA, and provide psychosocial support. As part of their activities, BHWI profiled 135 UASC and 68 families in the Ušivak TRC in May. Only a minority of UASC at the Ušivak TRC are appointed legal guardianships, largely due to their short stays at the TRC. Some inefficiencies in the procedures of appointment also contribute.

Supported by UNICEF, and operated by ŽsU, Save the Children, SOS Children's Villages, and World Vision, Child Friendly Spaces (CFS) operate at the Salakovac RRC, the Ušivak TRC, the Borići TRC, the Bira TRC, and the Sedra TRC (where there are two spaces, one for children under twelve and one Youth Centre for children 12 – 17)<sup>2</sup>. In May, a total of 865 (379 girls, 486 boys) children benefitted from CFS services across all sites: 54 at the Salakovac RRC (27 girls, 27 boys), 103 at the Ušivak TRC (41 girls, 62 boys), 220 at the Borići TRC (97 girls, 123 boys), 145 at the Bira TRC (64 girls, 81 boys), 201 at the Sedra TRC CFS (108 girls, 93 boys), and 120 at the Sedra TRC Youth Centre (27 girls, 93 boys). CFS operate as multi-functional centres to prevent and respond to protection concerns and connect children and their families with a variety of humanitarian services. They provide children with opportunities to develop, play, learn, and strengthen their resilience, as well as access psychosocial support. CFS also offer a space for the identification, referral, and follow-up, and/or direct support of at-risk children. In May, CFS provided a total of 4,917 services.

In May, UNICEF, in cooperation with Save the Children organised workshops on child protection referral pathways for UASC, with the participation of relevant stakeholders from USC, HNC and Sarajevo Canton, responsible for identification, referral, and provision of services to UASC. As a result of these workshops, Cantonal inter-agency Guidance notes on child protection referral pathways for UASC were finalized.

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

SGBV occurrence remains at a high level within reception centres. The lack of training/awareness of the local public institutions and the lack of implementation of existing SOPs and referral mechanisms represent significant challenges to the SGBV response.

With the aim of strengthening local capacities Médecins du Monde (MdM), in partnership with UNFPA, organized a training session on the Clinical Management of Rape (CMR) Protocol with a group of national and international experts who shared their knowledge and best practices for the staff working in health and non-health institutions. The training session was attended by 60 professionals, with additional specialised training provided to 35 health workers, from a range of institutions across USC. The CMR will be adapted to the local context in close cooperation with the USC Ministry of Health and Social Policy.

<sup>2</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, daily).

UNFPA initiated and started the process of gathering the PSEA training needs in the field and together with IOM started discussing and developing SEA awareness raising tools.

UNFPA continues to advocate with the USC government for the enactment of the jointly developed draft SOPs for Multi-sectoral Coordination, Prevention, and Provision of Services to Survivors of GBV in Emergencies (GBViE) in USC.

The GBV Working Group led by the UNFPA meets on a bi-weekly basis, promoting inter-agency cooperation in providing timely and quality assistance to GBV survivors. In terms of filling the gaps and standardizing the practice of recording, storage and exchange of information, a UNFPA GBViE specialist delivered a presentation on relevant GBV information management system (IMS) tools, and adapted several forms, such as the information sharing protocol and referral forms for usage among the key humanitarian services using elements of the GBV IMS. The documents were shared for further review and potential inputs from relevant actors, and they will be signed for the future usage in the upcoming weeks.

MdM in cooperation with UNFPA, continued to support GBV survivors and women and girls at high risk through targeted group and individual psychosocial support counselling provided by two psychologists operating in the Bira, Sedra, and Borići TRCs three times per week – UNFPA psychologist were available for crisis interventions. In May a total number of 82 women received psychosocial support, out of which, 30 GBV cases were identified and provided with further followed-up and referral to other services in cases of need.

In USC, UNFPA, through MdM, continued to manage three Centres for Women and Girls (WGC) in the Bira, Borići, and Sedra TRCs, assisting vulnerable women and girls and GBV survivors to rehabilitate and strengthen resilience through empowerment programs and life-skills education. In May 610 participations of women was recorded in the Centres for Women and Girls.

BHWI continued to work on the prevention of SGBV prevention, identification, and response in the Delijaš AC, the Immigration Centre, the Ušivak TRC, House of All, and the Salakovac RRC, including through individual counselling, family counselling, and counselling focused on self-protection in camp and migration contexts. BHWI also provide workshops and training sessions; in May, among others, BHWI ran a session attended by 22 women at the Salakovac RRC on *Women, Men, and Society: Stereotypes and the Concept of Work*.

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 May, 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 14 cases, seven of which were identified in May) as well as mental health and psychosocial support case management (42 cases in total). **Over the month, a total of 53 new individuals were referred to protective shelter** (all new arrivals are provided with welcome packages and refill packages are available thereafter). In May, one person of concern was accommodated in the Duje Centre.

On 30 and 31 May, in Doboje, the OSCE Mission to BiH organized a two-day training course on the use of technology in combating trafficking in human beings (THB) in mixed migration flows for law



enforcement, judges, and prosecutors from across Bosnia and Herzegovina (BiH). The course was organized in co-operation with the entity Judicial and Prosecutorial Training Centres (JPTCs), the International Organization for Migration (IOM), the US Homeland Security Investigations (HSI) and the OSCE Office of the Special Representative and Co-ordinator for Combating Trafficking in Human Beings (OSR/CTHB). More than 20 law enforcement officers, prosecutors, and judges from across BiH took part in the event. The training course focused on the use of technology to recruit, control and exploit victims of human trafficking, special techniques in online investigations, using evidence from the internet, and the use of digital forensics tools to track proceeds of crime on the internet.

The OSCE Mission to BiH translated the recently developed [OSCE Uniform Guidelines for the Identification and Referral of Victims of Human Trafficking within the Migrant and Refugee Reception Framework in the OSCE Region](#). The publication offers a set of practical measures designed to enhance the identification of victims of human trafficking by front-line professionals engaged in migrant and refugee reception procedures in the OSCE region. The Bosnian language version of this publication can be found at: <https://www.osce.org/bs/secretariat/422063?download=true>

## **Health:**

### **Immunization and communicable diseases**

In May, with the support of UNICEF and in partnership with DRC, a total of 122 children were vaccinated for measles, mumps, and rubella (MMR) (80 from the Borići TRC, 21 from the Sedra TRC, three from Safe House/Protective Shelter, and 18 children from the Bira TRC, including nine UASC). To-date, a total of 262 children have been vaccinated in USC. Prior to vaccination, the DRC team conducted two information sessions for legal guardians and beneficiaries. Information leaflets on MMR, presenting key facts, were prepared in English, Arabic, Farsi, and Bosnia/Croatian/Serbian and distributed. UASC are vaccinated in the presence of legal guardians and child protection officers. Parents at the Borići TRC refused to allow their child to be vaccinated in eight cases. Immunization for newly arrived children in all TRCs will continue through the agreement between UNICEF, Primary Healthcare Centres (PHC), and partners in the field.



### **Primary and Secondary Healthcare**

DRC continued to provide healthcare for refugees and migrants who in six centres: in USC, the Bira, Borići, Miral, and Sedra TRCs; in Sarajevo Canton, in the Ušivak TRC; in HNC, in the Salakovac RRC. In each of these centres, primary healthcare is provided on-site through the engagement of medical teams from local PHCs (the Bihać, Bosanska Krupa, Cazin, Hadžići, and VK PHCs). Specialized services on the primary level (including laboratory analysis, gynaecological, paediatric and other services) have also been covered through the Bihać, Cazin, and VK PHCs in USC, at the Hadžići PHC in Sarajevo Canton, and at the Stari Grad Mostar PHC in HNC. [For those accommodated in the Delijaš AC, primary healthcare continued to be provided with the support of UNHCR by the Trnovo PHC.](#)

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

In May, there was a trend of increasing medical cases sleeping rough or staying in private accommodation which demands increased outreach activities, referral, and follow-up, supported by the DRC medical teams. Referral pathways for refugees and migrants outside of the centres are limited. While all cases that are referred to DRC or identified by DRC protection teams are followed-up on and referred firstly to TRCs for examination and further referral to primary and secondary healthcare, the mechanism functions on an ad hoc basis without a systematic approach and is affected by the limited accommodation capacity.

Teams engaged through PHCs conducted 5,424 medical examinations and made 672 medical interventions, with 290 referrals to further primary healthcare and 190 referrals to further secondary healthcare in May. The Jesuit Refugee Service, in partnership with DRC, provided accompaniment and translation services for 531 patients 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 May, one general medical examination and more specialised examinations 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, and in accordance with funds available.

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

### **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 (MHC) within the engaged PHCs. A total of 63 mental health and psychosocial support consultations were made, with the largest number of patients residing in the Borići TRC. Services are not available for the hospitalization of more serious cases and rehabilitation therapy and treatment for the addicts is not available.

MSF suspended its mental healthcare services in Sarajevo, (referring patients to psychologists or psychiatrists as needed) as there are no longer doctors working for migrants living outside of the TRCs. MSF also suspended the provision of community mental health activities with refugee and migrant communities living in Sarajevo outside of TRCs.

## Paediatric Healthcare

During May, the paediatric team, supported by UNICEF and in partnership with DRC, provided 227 services for 186 children (82 boys and 104 girls) aged 1 - 16 years, including 24 babies up to 23 months. The paediatric doctor conducted 151 paediatric examinations while the nurse followed-up on prescribed therapies and provided services to 76 children. The most frequent type of assistance/diagnosis was related to respiratory and intestinal infections, but the number of children patients with allergy symptoms and dermatological problems is also increasing. Paediatric counselling was provided for 58 beneficiaries and their parents regarding the usage of prescribed therapy, children's nutrition, and hygiene care. In the reporting period, four children were diagnosed with varicella (chickenpox), 14 children with hair lice, and one child with scabies. All children received prescribed therapies and the CCCM at Sedra TRC has been informed of these cases and accommodated the patients in quarantine.



On 14 May, a dental care workshop and on-site dental check-ups were organized for children accommodated at the Sedra TRC. Children and parents were informed about the importance of dental care in early childhood. Approximately 50 children and 20 parents participated in the workshop, 40 children were examined, and 23 children received dental treatment. The majority of children were visiting a dentist for the first time in their life and many already have severe dental problems (e.g. dental infections, facial swellings, recent dental trauma, severe cavities etc.) that may cause significant and permanent tooth damage and affect their overall health.

In-line with the agreement with the Cazin PHC, pre-school medical check-ups have been organized for newly arrived school-age children accommodated at the Sedra TRC. Of 30 children identified for pre-school medical check-ups, 16 received health certificates and are now enrolled in school. The remaining children left the TRC in the meantime. The DRC team will monitor the situation and timely refer those who have to conduct pre-school check-ups.

Eleven children from HoA underwent medical check-ups and subsequently were enrolled in school.

## Sexual and Reproductive Healthcare

In May, 53 women were referred from the TRCs in USC by the DRC medical teams to gynaecologists in the PHCs. DRC protection monitoring officers support the DRC medical teams with regular follow-up on specific medical cases in the Borići and Sedra TRCs,

UNFPA, in partnership with MdM will continue to identify the sexual and reproductive health (SRH) needs of persons of concern. Due to cultural sensitivities and fear of intimate partner violence, migrant women often don't access SRH services outside of maternity related services. To address this, in cooperation with the Bihać PHC, a female gynaecologist will be available in the WGC with the aim of SRH awareness raising and educational activities. After the gynaecologist identifies the needs, a slot for check-ups for persons of concern only, will be available once a week.



**NFI:**

IOM continues to provide NFIs for newly arriving refugees and migrants in all five IOM-managed TRCs. An NFI 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 May, IOM distributed 8,009 NFIs to 357 people in the Borići TRC, 12,955 NFIs to 1,481 people in the Bira TRC, 5,281 NFIs in the Miral TRC, 4,744 NFIs in the Sedra TRC, and 6,841 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. The distribution of specialized NFIs packages to hospitalized refugees and migrants from Sedra TRC, which contains pyjamas, slippers, a towel and other NFIs necessary for hospital stays, continued during the month of May. IOM provides clean sheets and linen upon arrival and for those in scabies treatment, or other medical cases as per need.

In May, UNICEF in partnership with ŽsU, Save the Children, SoS, and WV, distributed 1,402 NFI packages (hygiene items for mothers and infants) through MBCs in the Borići, Bira, Sedra, and Ušivak TRCs, as well as the Salakovac RRC.

In May, the Red Cross received and distributed a range of NFIs. A total of 2,287 NFIs were distributed countrywide by Red Cross Mobile Teams. The Bihać Red Cross distributed 1,238 hygiene packages, clothing for 2,674 people, underwear for 84 people, 175 pairs of socks, 375 pairs of shoes, 1,126 quilts, and 1,000 thermal foils to refugees and migrants in the Borići and Bira TRCs. The USC Red Cross distributed 320 blankets. The Red Cross in Mostar distributed 120 hygiene packages and 20 packages of baby diapers.

In May, UNFPA continued to distribute hygienic pads and modern contraceptives for women and girls as needed, through the Women and Girl Centres. Also UNFPA and MdM agreed with IOMs CCCM that 2,220 packs of modern contraceptives will be distributed in the four TRCs in USC as part of the NFI welcome pack. DRC also supported with the distribution of sanitary pads and condoms, provided by UNHCR.

In May, Caritas supported migrants and refugees at the Ušivak TRC with NFIs, mostly hygiene products for individual use, including shampoo (480 individual bottles), wet wipes (16,000 pocket-sized packets), toothpaste (520 pieces), and toothbrushes (400 pieces). Caritas also provided a range of personal hygiene NFIs to persons of concern at the Delijaš AC and the Salakovac RRC.

BHWI provided a range of NFIs in the Delijaš AC for over 96 persons of concern, including pyjamas, clothing, shoes, socks, towels, and pillow-cases. In the Ušivak TRC, BHWI distributed hygiene kits to 69 families and to 69 UASC. In the Salakovac RRC, BHWI provided a range of NFIs, including 87 packages of clothing, footwear, underwear, and hygiene items.

All asylum seekers and migrants accommodated at the Duje Reception Centre are provided with necessary NFIs and clean bedding. IFS-Emmaus also provided a number of hoodies, trousers, and blankets to refugees and migrants outside the SFA Office in Tuzla in May.

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

**WASH:**

During May, tap water was declared unsafe to drink across USC because of the heavy floods which infiltrated the pipes. Throughout the whole period of alert as indicated by the authorities, IOM and the Red Cross provided bottled water to all refugees and migrants accommodated in the TRCs and outside.

In May, IOM supported disinsection, deratisation and disinfection measures in all TRCs in USC. Disinfections are organized weekly in all TRCs, while disinsections take place monthly, and deratization every three months.

The Bira TRC has 95 toilets and 58 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. 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, the Bira TRC continues to struggle 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 organized regularly in the area around the facility with the voluntary participation of many refugees and migrants staying in the TRC. Caritas continued to provide laundry services in the Bira TRC on a daily basis: 4,300 kg of clothing were laundered for 1,520 individuals in May.

The Miral TRC has 54 toilets and 27 showers. Facilities are not gender separated since the centre only hosts single males and a few UASC boys. Drinking water is available in the centre. The laundry system was set up in May and is now operational, allowing the centre population to wash their personal belongings. The establishment of the laundry system also indirectly contributed to improved access to hot water, as the number and frequency of people hand-washing clothes in the sinks were reduced. IOM also installed five water heaters: two connected to the shower containers and two connected to the main building, which also significantly contributed to improved access to hot water. In May, 35 to 40 bags of laundry were washed daily for 25 to 30 persons, in addition to the bed-linen and other centre inventory washed by the centre staff.

The Sedra TRC has 53 toilets and 59 showers, with 43 rooms having private facilities for a total of 163 people. The remaining TRC population has access to shared toilets and showers, separated by gender. Drinking water is available in the centre. The laundry system is in place and operational with six washing machines and six dryers. The TRC population contributes to its operation on a voluntary basis. 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 regularly 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. Four additional sanitary containers were ordered and delivered in May and are in the process of being set-up. Hot water and drinking water is available at the centre. The centre population is actively involved in cleaning and maintenance of the centre, during food distribution, and in the organization of the centre's communal activities and spaces, despite reduced participation compared to the previous month due to the high turnover. A laundry system is in place with three industrial washing machines and one industrial dryer.

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. Six washing machines and six dryers are installed and operational and one centre resident is involved in the laundry operations. Additional industrial washing machines have been set up and will be operational after being connected to the main electricity system.

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.

### **Food:**

Over 228,000 meals were provided to refugees and migrants in BiH in May 2019. The majority of these, over 162,000, 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. In May, Caritas supported with over 600 kg of fresh fruit and vegetables as well as coffee and tea supplies and baby food. 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 May, 8,883 meals were distributed along with a further 2,961 interim meals and 198 packages of baby food. BHWI provide additional support with nutritional needs in specific cases as per recommendations made by a doctor. Caritas supported with food for children and tea for babies and in the Mother Baby Corner.

In the four TRCs in USC managed by IOM, IOM/the Red Cross (the Bihac and USC branches) 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 May, IOM provided a total of 25,664 meals in the Borići TRC (2,735 of which were Iftar meals and/or Suhoor breakfast packages), 83,952 meals in the Bira TRC (9,781 of which were Iftar meals and/or Suhoor breakfast packages), 24,331 meals in the Sedra TRC, and 26,790 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. For the Borići and Miral TRCs, the Red Cross prepares meals at their own premises and transports the food to the respective sites. In May, IOM supported the construction of a new kitchen for the Red Cross to prepare their meals directly inside the Miral TRC, connected to water and electricity, and will operate as of June.

IOM adjusted their food distribution schedules in all TRCs to account for Ramadan (5 May - 3 June) and those who were fasting. Food distribution modalities varied across centres, but in all TRCs a

regular meal distribution schedule (three meals a day and two fruit snacks) was maintained for the non-fasting centre population and at least one Iftar meal and in some cases a Suhoor early breakfast were distributed to all those who had declared they were fasting. The Merhamet NGO donated dates for refugees and migrants located in the Borići, Sedra, Miral, and Bira TRCs during the month of Ramadan.

In the Sedra TRC, IOM provides specialized food to those with specific dietary requirement upon Doctor's recommendation/medical prescription. IOM also provides vegetarian meals in the Sedra TRC to refugees and migrants who are vegetarian, or in need of meat-free food for medical reasons. School children receive an early breakfast on school-days and additional milk is distributed daily to parents or care-takers of children.

The open kitchens equipped by IOM for centre populations to cook their own food are operational in the Sedra and Bira TRCs, the latter designated for the use of the single male population of the centre. In May, IOM finalised the construction of an open kitchen in the Miral TRC and it is now operational. The kitchen is connected to electricity and is equipped with a sink connected to the sewage system.

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 calorie intake. A total of 42,143 meals were distributed in May. Pomozi.ba does not have the capacity to provide for specialized food for medical cases, or for extra nutritional food for pregnant and lactating women. Supported by the EU, IOM complements the food provision of Pomozi.ba. Pomozi.ba hired additional local staff in May.

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

In May, until 21 May, Aid Brigade continued to provide two meals per day (breakfast and lunch) for refugees and migrants in a community centre in Sarajevo. Approximately 150 -250 people were provided with meals per day over the month. Aid Brigade ceased activities on 22 May, as outlined above.

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 May, 1,785 meals and 1,190 snacks were provided.

IFS-Emmaus provides hot meals to those accommodated at the Duje Reception Centre; in May, 90 hot meals and 60 dry meals were provided. IFS-Emmaus also provided food to migrants and refugees waiting in front of the SFA office in Tuzla.

UNICEF, in partnership with ŽsU, Save the Children, SOS Children's Villages, and World Vision, operated Mother Baby Corners (MBC) at the Salakovac RRC, the Ušivak TRC, the Borići TRC, the Bira, and the Sedra TRC<sup>3</sup>. MBCs provide parents with IYCF counselling, information/awareness

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<sup>3</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, 09:00 – 17:00, daily).

raising on breastfeeding and hygiene, psychosocial counselling, and support the provision of infant food and hygiene products. In May, a total of 87 mothers, 10 pregnant women, four fathers, and 104 children under five benefitted from MBC services: 10 mothers and 19 children at the Salakovac RRC (9 girls, 10 boys); 30 mothers and 32 children (15 girls and 17 boys), at the Ušivak TRC; 28 mothers and 30 children (9 girls, 21 boys) at the Borići TRC; five mothers and five children (three girls, two boys) at the Bira TRC; 14 mothers and 18 children (four girls, 14 boys) at the Sedra TRC. Some 985 assistances, 30 workshops, 61 educational activities on the importance of breastfeeding and child health, 47 individual consultations, 75 psychosocial services to mothers, and nine referrals of infants to paediatric ambulance were provided. In May, 905 baby food jars, 905 juices for children and 260 supplements for lactating women and pregnant women were provided through MBCs in USC. In the Ušivak TRC, 125 children (56 girls, 69 boys) had access to nutrition food on a daily basis (Monday to Friday) and in the Salakovac RRC 54 children (27 girls, 27 boys) had access to nutrition food on a daily basis (Monday to Friday).

On 10 – 14 May, UNICEF, in partnership with DRC, facilitated the third visit of a health and nutrition expert. Staff working in MBCs were given new knowledge and skills for group work with mothers on breastfeeding, child nutrition, and developing children's hygiene habits in collective accommodation settings. In addition to staff, 24 mothers and pregnant women participated in the workshops at the Sedra and Borići TRCs. In addition to counselling during workshops, MBC nurses will continue to work for mothers on a daily basis to support mothers facing challenges breastfeeding. Issues include a lack of information regarding re-lactation and worries that breast milk is not sufficient.



The Infant and Young Child Feeding (IYCF) working group, established in April and led by UNICEF, involves all relevant partners, including IOM CCCMs, Save the Children, ŽsU, and DRC, and is responsible for improving IYCF practices, monitoring breastmilk substitute (BMS) distribution, ensuring appropriate complementary feeding, and implementation of the International Code on BMS Marketing, etc. A second meeting was held on 15 May, and discussed and agreed on the following:

- The finalization of the protocol for safe and targeted distribution of BMS at the Bira TRC by responsible UNICEF, IOM, and ŽsU staff;
- The MBC at the Sedra TRC meets required criteria for infant formula preparation. IOM and ŽsU confirmed BMS/formula could be prepared in this MBC upon identification of infants who need formula and assessment of their needs. However, need for improved collaboration and exchange of data is required between MBC and IOM staff in order to have targeted and monitored distribution of BMS.
- The MBC at the Borići TRC faced obstacles in operating due to the lack of access to water and was resolved by implementing partner by end of the week.
- ŽsU prepared a draft Rapid Assessment Tool with key parameters of IYCF to identify children who need infant formula.



- DRC, in partnership with UNICEF, developed IYCF brochures in English, Arabic and Persian and distributed them to target beneficiaries in TRCs in USC.

### **Education and leisure:**

At the end of May, 179 refugee and migrant children were regularly attending five primary schools (three in Bihac and two in Cazin), with the support of UNICEF and Save the Children and in cooperation with the Ministry of Education. Classes were provided by teachers trained in the 'HEART' methodology by Save the Children. During workdays, nine persons as escorts for migrant and refugee children and three cultural and language mediators, accompanied 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, while IOM provided transport to and from schools. In addition, schools were provided with the supplies for teaching and hygiene. **Every Monday and Thursday, the USC Red Cross first aid team screens refugee and migrant children at the Sedra TRC who attend school for lice and scabies – in May they conducted 270 screenings.** Further, children attending the CFSs in the Bira, Borići, and Sedra TRCs, as well as in protective shelter, participated in educational and creative workshops over the month. **The Faculty of Pedagogy started providing Bosnian/Croatian/Serbian language classes in Primary Schools Harmani II (Tuesdays and Thursdays – two groups) and Brekovica (Wednesdays – two groups).**

In Sarajevo, UNICEF in partnership with World Vision and SOS Children's Villages supported the regular school attendance of 27 children (16 boys, 11 girls), including escort during the transport from the Ušivak TRC and House of All. During May, IOM continued to provide transportation of school-aged children staying in the Ušivak TRC as well as from House of All.

Refugee children in the Salakovac RRC are still excluded from school pending approval of the Cantonal Government. VP previously submitted appeals to the ombudsperson and in May received reply that appeals have been submitted to the Ministry of Security and the Ministry of Education of HNC for further observations. 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 19 children) run by BHWI continued in May in the Salakovac RRC.

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 two times per week (attended by two women and two men), knitting workshops three times a week (attended by four women), sewing workshops three times a week (attended by nine women), women's aerobics three times a week (attended by 18 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 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 12 children), sports and recreational activities (attended by 25 people) and Bosnian/Croatian/Serbian lessons (attended by 7 people).

In the Ušivak TRC, recreational activities provided by BHWI were affected by the high turnover of people in the TRC. Despite this, a number of activities were organized in smaller groups or on an individual level. These included creative decoupage, an "I have skills" workshop where skills are shared, and board games. BHWI also commenced Bosnian/Croatian/Serbian lessons for UASC.

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.

The Integration Centre Units ran by ŽsU with the support of IOM, continue to offer a range of intercultural activities in the Sedra TRC. The space is equipped with computers, board games, playing cards, handicrafts, internet, library, etc. A total of 114 people participated in integration centre units activities in May.

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. Around 10,000 cups were served in May. 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.

### **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>4</sup> to register with the Employment Bureau and Tax Office to obtain access to the BiH labour market. Subsequent issues with opening bank accounts - related to banks not recognizing asylum seeker cards as valid identification documents - and concluding labour contracts (which require bank accounts to action salary payment) have arisen and VP are working to address these and requested the MoS to provide interpretation of the law, with particular reference to the paragraph enabling access to work.

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

IOM continued to see a high number of migrants interested in returning to their CoO through IOM's Assisted Voluntary Return (AVR) and reintegration programme. With the support of the EU and of the Netherlands, IOM provided several information sessions and assisted 45 people to return to their CoO in May. IOM provides outreach, dissemination of information, provision of counselling and logistical assistance to return and reintegration applying established eligibility criteria for AVR assistance, as well as for more comprehensive reintegration assistance, implemented consistently by IOM throughout the Western Balkan region. IOM provides operational and logistical support in obtaining travel documents, facilitating fit-to-travel health checks, and providing airline tickets as well as transit assistance as required. IOM AVRR assistance includes limited accommodation while waiting for repatriation (two days for all cases, and for the entire waiting period for vulnerable cases only), support in obtaining travel documents, travel costs, and limited cash-transfer for reinstallation and onward transportation in the country of return. For medical and vulnerable cases, medical costs as well as in-kind reintegration assistance in the form of grants for education, training or business start-ups is provided.

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<sup>4</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.

**In terms of other small-scale initiatives:**

- IOM's project *Sounds of Migration* - brings together hundreds of children from Bihać with migrant and refugee children from the Sedra TRC in a series of music workshops and helps them get to know each other and share their musical heritage – continued throughout May.
- Integration activities for children from the Borići TRC take place at the CFS, including creative reading workshops, illustration, puppet creation, and art.
- The hair dressing saloon established in the Sedra TRC by IOM is running with the supervision of ŽsU. The centre population provide hair dressing services.
- The Bihać CSW multidisciplinary team organised two football matches for UASC from the Bira TRC and local children, while UNICEF provided sport equipment.

**Safety and security**

Throughout May, the security situation in the Borići and Sedra TRCs was considered fairly stable, with the exception of sporadic security incidents. The overall security situation continued to be challenging in the Bira and Ušivak TRCs, while at the end of the Month, the situation in the Miral TRC worsened significantly.

High numbers of unauthorized entrances, the lending or loss of TRC-ID cards, and the usage of fake ones continued to present a challenge to security and centre management, especially in the Bira, Miral, and Ušivak TRCs. While this is primarily a protection and security concern, it also encourages the spread of lice, scabies or of contagious diseases as people enter centres without undergoing a medical screening. *At the beginning of June, IOM will start enforcement of access control to all TRCs, to reduce the number of unauthorized entrances.*

There were also a number of serious security incidents inside and outside of TRCs, including larger fights between different groups of refugees and migrants, involving knives and improvised weapons, a continued high number of reports of thefts, as well as verbal assaults and one physical assault of one centre staff member in the Miral TRC.

On 2 June, a large fight broke out involving around 100 individuals of the centre population<sup>5</sup>. IOM staff responded in accordance to procedure, including calling the police and starting the evacuation of centre staff in the administrative office area. A few warning gun-shots were fired by the Police to stop the fighting, which involved knives and iron bars. Six of the involved refugees and migrants involved in the fight were arrested. Three Police Officers were injured. Following the incident, the Red Cross expressed concern and publicly reported that they do not feel safe in the centre generally, or during food distribution times. On 5 June, IOM and the Red Cross took the joint decision to only distribute breakfast and lunch (while dinner packages were given at lunch distribution). The regular distribution schedule was re-introduced as the situation improved.

A new trend, primarily in the Miral TRC/VK, of fights taking place outside of the premises of the TRC, predominantly in the surrounding area of Polje in and around abandoned buildings and in open fields was also noted in May. A video was spread on news portals and social media.

Towards the end of the month, police officers demanded that refugees and migrants sleeping outside of Bira TRC move from the parking space and the field surrounding the TRC. *As a result, tension rose and refugees and migrants gathered in front of the TRCV gate and demanded to enter the centre's premises, threatened, and verbally assaulted centre and security staff.*

<sup>5</sup> Early June is exceptionally included in the May update due to the severity of the incident.



In the Ušivak TRC the safety and security situation is challenging due to the high number of arrivals, but manageable, and clear procedures are in place and implemented by IOM staff and security. The general security situation can be considered OK.

In order to improve the safety and security situation, IOM implemented a number of measures.

First, in order to minimize unauthorized entrances into the centres, IOM instructed the security companies to increase the number of foot patrols and centre inspections accompanied by IOM Migrant Assistants, and to escort those identified without ID cards out of the centre. UASC were exceptions to this procedure, who were instead registered and accommodated.

Second, IOM took the decision to move the booths of the security company both in the Bira and Borići TRCs, which were placed outside of the respective entrances, to inside the centre premises. The compound was turned into a parking space, to avoid possible attacks of staff at the parking lot and damage of the cars.




Third, after the fire in Miral, part of the standard contingency security procedure, IOM initiated a review and evaluation of the fire prevention measures and evacuation plans, for any potential update based on identified areas to be improved. In the coming period, IOM will organize fire drills in all centres.




In conclusion, the deteriorating security situation in the Miral TRC, and potential worsening of the situation in the Bira TRC, the latter mainly caused by the imposed cap preventing IOM from accommodating refugees and migrants currently residing in front of the Bira TRC, is an obvious reason of concern and highlights the need for additional centre staff and security staff during both day-shift and night-shifts, or to reduce the number of persons accommodated in the centres. There is also need for non-security measures, such as leisure activities, psychosocial support etc. as the current capacities only allow for limited services for single men.

A thorough security assessment and action plan is being prepared by IOM, in coordination with UNDSS, presenting a plan for immediate and inter-mediate responses to improve the security for both the centre population and humanitarian workers.

## Map of Key Sites and Locations



3W																	
Location																	
	Una-Sana Canton						Sarajevo Canton				HNC	Tuzla Canton		Lukavica	Other	-	
	USC, Other, estimate	Borići TRC, Bihać	Bira TRC, Bihać	Sedra TRC, Cazin	Miral TRC, Velika Kladuša	Žene sa Une	Ušivak TRC, Hadžići	House of All	Sarajevo, Other, estimate	Delijaš Asylum Centre	Salakovac Refugee RC	Reception Centre Duje	Tuzla, Other, estimate	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>	3,000	380	1,848	357	658	28	843	80	100	60	120	1	250	73	146	7,944	
<b>Of which, UASC</b>	-	3	223	9	18	0	49	1	-	0	0	-	-	0	1	304	
<b>Of which, children</b>	-	162	273	159	18	11	134	41	-	19	58	-	-	1	62	938	
<b>Of which, women &amp; girls</b>	-	168	28	157	0	12	85	37	-	27	60	-	-	4	51	629	
<b>Of which, single women</b>	-	12	0	4	0	1	6	1	-	2	0	-	-	-	0	26	
<b>Of which, family members</b>	-	352	109	336	0	22	194	79	-	48	120	-	-	-	95	1,355	
<b>Of which, asylum seekers</b>	-	38	34	112	2	12	1	8	-	53	75	-	-	10	112	457	
<b>Of which, awaiting asylum registration</b>	-	106	255	150	85	0	0	40	-	7	45	-	-	8	31	727	
Sector																	
<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	ZsU	SFA, IOM	HoA	-	MoS/AS	MHRR/ MoS/AS	Emmaus	-	MoS, SFA	-	-
<b>Protection</b>		UNHCR/ DRC/VP/ IOM, CSW, UNICEF/ SiC	UNHCR/ DRC/VP, UNICEF/ ŽsU/SiC, IOM, CSW, UNFPA	UNHCR/ DRC/VP, UNICEF/ ŽsU/SiC, IOM, CSW, UNFPA	UNHCR/ DRC/VP, UNICEF/ ŽsU/SiC, IOM, CSW, UNFPA	UNHCR/ DRC/VP, UNICEF/ ŽsU/SiC, IOM, CSW, UNFPA	ŽsU, DRC/ VP/UNH CR	UNHCR/ VP /BHWI/D RC, CSW, UNICEF/ SoS/WV IOM	HoA, BHWI/ VP/ UNHCR, UNICEF	UNHCR/ VP/ BHWI	MoS/AS, UNHCR/ BHWI/ VP, CSW	UNHCR/ BHWI/VP, UNICEF/ WV, IOM, CSW	Emmaus UNHCR/ BHWI/ VP, CSW	-	UNHCR/ BHWI/VP, CSW	VP/ UNHCR/	-

<b>Health</b>		-	DRC, JRS, UNICEF, DZ, CH	DRC, JRS, UNICEF, DZ, CH	DRC, JRS, UNICEF, DZ, CH	DRC, DZ, CH, JRS	DRC, DZ, CH	DRC, UNICEF/ WV/SoS, DZ, CH	UNICEF/ WV/ SoS, DZ	-	MoS/AS/ UNHCR, DZ, CH, DRC	MoS/AS, UNHCR, DZ, CH, DRC, IOM	Emmaus	-	SFA, DZ	-	-
<b>Non-food items</b>	<b>NFI</b>	IOM, UNICEF	CoBRC, IOM, UNFPA, UNICEF/ StC/ŽsU	CoBRC, IOM, UNICEF/ StC/ŽsU, CSW, UNFPA	IOM, UNFPA, UNICEF/ StC/ŽsU	CoBRC, IOM	ŽsU	IOM, Pomozi/ AB, UNHCR, RC, Caritas, UNICEF/ SoS/WV	HoA	AB	MOS/ AS/ UNHCR/ BHWI, CRS, Caritas	RC, UNHCR/ BHWI, UNICEF/ WV, CRS, Caritas	Emmaus	Emmaus	MoS/SFA	-	-
<b>WASH</b>		IOM	IOM	IOM, Caritas	IOM	IOM	ŽsU	IOM	HoA	Pomozi. ba	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	MoS/ SFA/ AS, IOM, UNHCR/ VP	ŽsU, VP	MoS/ SFA, IOM, UNHCR/ VP	VP/ UNHCR	-	MoS/AS/ UNHCR/ VP	MHRR/ MoS/SF A/ AS, UNHCR/ VP	Emmaus , UNHCR/ VP	-	MoS/SFA, UNHCR/VP	VP	-
<b>Education</b>		-	UNICEF/ PA/ StC/ MoE, IOM	UNICEF/ PA/ StC/ MoE, IOM, CWS	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/CR C, UNICEF/ ŽsU/StC	IOM/ CRC	ŽsU	Pomozi. ba, IOM UNICEF/ WV/ SoS	HoA	AB	MoS/SA/ UNHCR, Caritas	RC/IOM, UNICEF/ WV, Caritas	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 Bihać Red Cross / CRC, Cantonal Red Cross / CRS, Catholic Relief Services / CSW, Centre for Social Welfare (Municipal) / CT, The Czech Team / CWS, Church World Service / DZ, Public Health Centre (Municipal) / DRC, Danish Refugee Council / HoA, House of All / ICRC, International Committee of the Red Cross / IPSIA, Instituto 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 / MSF, Médecins Sans Frontières / 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 Unu.

## Coordination/Working in partnership

- Monthly UNHCR-IOM led coordination meetings take place in Sarajevo, widely inviting stakeholders engaged in the ongoing response and providing a forum for discussion.
- Bi-weekly coordination meetings take place in USC, widely inviting stakeholders in the response.
- Sector specific meetings are organized as required in Sarajevo and USC.
- UNFPA lead GBV Working Group meetings on a monthly basis to ensure a coordinated, survivor centred inter-agency response to GBV.
- Earlier this year the Sarajevo Canton Ministry of Labour, Social Policy, Displaced Persons and Refugees established an operational team to improve coordination of all governmental, non-governmental and international organizations dealing with the refugee and migrant situation. UN organisations, partners, and the SFA participated in the second meeting, in May, to map actors in the Canton and the challenges encountered.

Sector	Organizer	Contact
<b>Sarajevo Monthly Coordination Meeting and Monthly Update</b>	UNHCR/IOM	doane@unhcr.org
<b>USC</b>	UNHCR/IOM	husagic@unhcr.org vmitkovski@iom.int
<b>Protection</b>	UNHCR	kokotovi@unhcr.org
<b>Child protection</b>	UNICEF	aluedeke@unicef.org
<b>Gender Based Violence</b>	UNFPA	jurela@unfpa.org
<b>Health</b>	WHO	palom@who.int
<b>NFI</b>	IOM	isadikovic@iom.int
<b>Education</b>	UNICEF	skabil@unicef.org

### CONTACTS

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### LINKS

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

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

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

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

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

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

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

Asylum Information Brochure: [https://issuu.com/unhcrsee/docs/information\\_for\\_as\\_in\\_bih](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. The UN in BiH is not responsible for the accuracy of information provided by non-UN sources.*