

Bosnia and Herzegovina

01 - 30 April 2019

April saw an increased number of refugees and migrants in Una-Sana Canton (USC) and in particular of unaccompanied and separated children and families.

Protection outreach efforts have been intensified and a dedicated Working Group established in USC to coordinate protection efforts outside of centres.

Measles, mumps, and rubella, immunization of refugee and migrant children commenced in April, with the support of the WHO, UNICEF, and partners.

KEY INDICATORS

6,000 – 6,500

estimated refugee and migrant population at the end of April 2019

4,294

max available accommodation as of 30 April 2019

>240,000

meals provided in April 2019 in BiH

>5,250

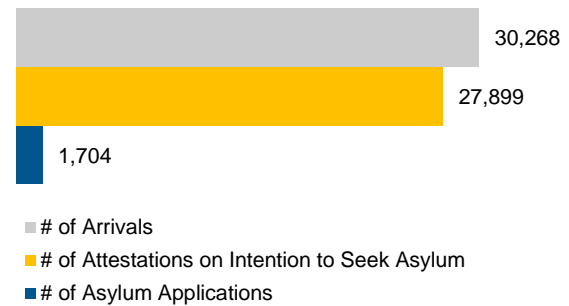
Medical check-ups conducted in April 2019

ACCESS TO ASYLUM

1,704 Asylum applications

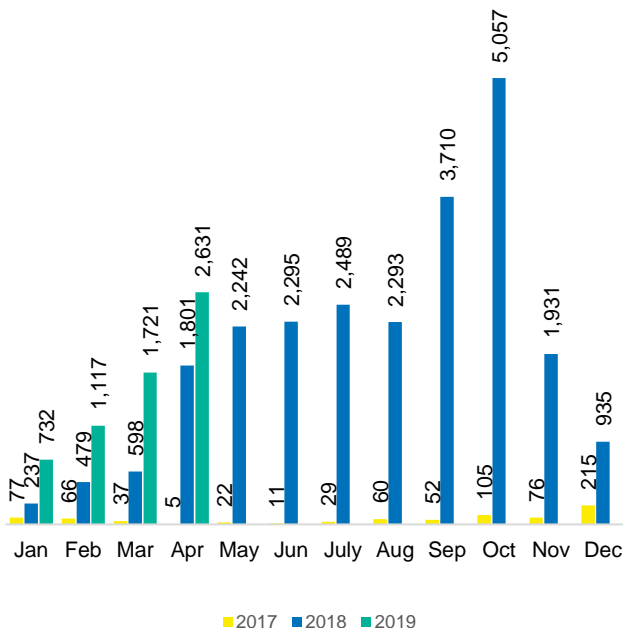
1 January 2018 – 30 April 2019

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.



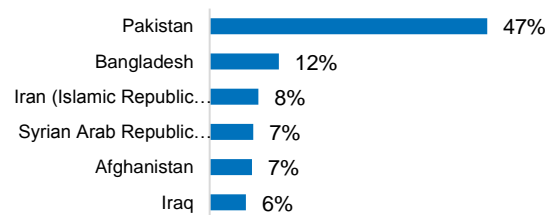
POPULATION OF CONCERN

Number of detected refugee and migrant arrivals to BiH per month

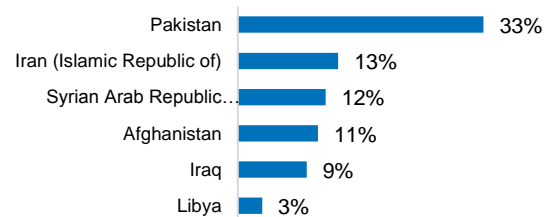


POPULATION OF CONCERN

Top refugee and migrant CoO* arrivals to BiH in April 2019



Top refugee and migrant CoO* arrivals to BiH between 1 January 2018 and 30 April 2019



Priorities and key gaps

CCCM/Accommodation/Shelter:

- Additional sites for accommodation solutions need to be identified by the relevant authorities, especially as an increasing number of refugees and migrants are necessarily staying in private accommodation or squatting in open spaces, including families with children and unaccompanied and separated children (UASC).
- Expand capacity to accommodate families with children, UASC, and other vulnerable categories, in adequate and protection-sensitive accommodation that satisfies 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.
- Continue the relocation of families and vulnerable categories from the Bira Transit/Reception Centre (TRC) to more suitable TRCs as well as the relocation of UASC from the Miral TRC to more suitable TRCs.
- 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 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.
- Improve coordination between IOM TRC staff and between IOM and UNHCR/The Danish Refugee Council (DRC).

Protection:

- Strengthen outreach activities to ensure an enhanced protection environment for those outside of reception centres and for those denied entry into USC.
- 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.
- Reinforce referral and case management mechanisms for protection services for refugees and migrants residing outside of TRCs in tandem with strengthened protection outreach capacity to monitor the protection environment and ensure minimum humanitarian assistance.
- 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.
- Continue to advocate for the restoration of freedom of movement of migrants and asylum seekers.
- Establish mechanisms for the provision of urgent humanitarian support – such as food, water, and first aid - to refugees and migrants in transit in BiH in location such as Tuzla.
- Improve access to fair and efficient asylum procedures by, among other actions, advocating for the 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.
- 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.
- 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, the high turnover of this category, and the lengthy procedures for appointing legal guardians.
- Increase the number of social workers willing to perform legal guardian duties and participate in outreach teams.
- 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.
- 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.
- 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.
- 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, including Clinical Management of Rape (CMR) procedures, by localisation of the CMR protocol already developed by Federal Ministry of Health and additional capacity building of health and other relevant sectors.
- Advocate for the municipal registry in Mostar to record information on the father on the birth certificates of refugee and migrant children.
- Work to ensure immediate birth registration even in cases where parents do not hold asylum-seeker cards.

Health:

- Establish referral mechanisms for healthcare services for refugees and migrants residing outside of TRCs – often due to lack of space - and ensure solutions are in place for the provision of healthcare to all refugees and migrants throughout BiH, irrespective of legal status.
- Identify a solution for medical escort and transport of patients to and from healthcare service providers, including for emergency cases.
- Seek resources to increase vaccination coverage (including vaccines, check-ups, interpreters, etc.) among refugee and migrant children, including new arrivals on an ongoing basis.
- Build capacities of local health teams to reduce missed opportunities for vaccination.
- Continue to raise awareness of the importance of immunization among parents and the community.
- Ensure high-quality primary healthcare for refugee and migrant children, including regular access to paediatricians and nurses specialised in child healthcare and development, including dentistry.

- Ensure and administer the whole immunization plan for children younger than two years; currently, only systematic MMR immunization is being implemented.
- Ensure and expedite medical check-ups for children awaiting school enrollment (at the end of the month 73 children were awaiting medical check-ups).
- Support to first aid provision at the Bira TRC to relieve pressure on the medical teams and to provide at least basic care on the weekends. (The Red Cross used to provide this service but no longer have sufficient material resources.)
- Improve access to sexual and reproductive health services, in particular for women and girls.
- Increase capacities to monitor and ensure that refugees and migrants under quarantine adhere to the recommendations of medical personnel.
- Seek and implement solutions to limit the unauthorized entrance of unregistered people into the TRCs and thus without having undergone the medical screening.
- Seek solutions to address gaps in the provision and availability of 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.)

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 Bira, Miral, and Sedra TRCs.
- Seek and implement solutions to reduce damage caused by refugees and migrants in the Miral and Bira TRCs to WASH facilities.
- Ensure sufficient hot water in the Sedra, Miral, 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 all three TRCs accommodating families and children.
- Resolve the issuing of financing the provision of food in the Salakovac RRC over the longer-term.
- 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 MoS 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:

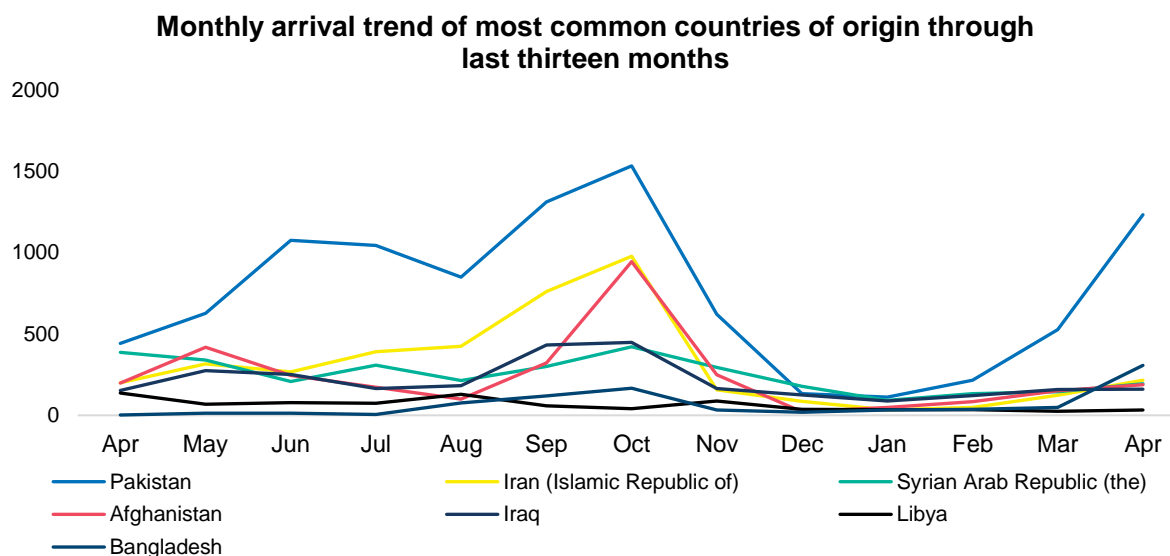
- Take measures to improve the security situation in TRCs including through non-security and preventative measures.
- Establish a rapid response mechanism within accommodation centres vis-à-vis large fights and security incidents.

Key Updates and Operational Context by Sector

Population:

The authorities in Bosnia and Herzegovina (BiH) detected the arrival of 30,268 refugees and migrants to the country between 1 January 2018 and 30 April 2019. Monthly arrivals in 2019 continue to exceed those in 2018, with 2,631 detected arrivals in April 2019 compared to 1,801 in April 2018. 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 6,000 and 6,500 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 towards the foot of this document.

In April 2019, the largest declared Country of Origin (CoO) among new arrivals was Pakistan (47 per cent), followed by Bangladesh (12 per cent), Iran (eight per cent), Syria (seven per cent), Afghanistan (seven per cent), and Iraq (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 30 April, the maximum available capacity across eight formal and informal centres in BiH (USC, Sarajevo Canton, and HNC) was 4,294, not including safe accommodation and hostels made available to a limited number of particularly vulnerable cases or spaces in the Immigration Centre in Lukavica.

During the month of April, there was a noticeable increase in the number of families and particularly of UASC arriving to the TRCs. Large numbers could not be accommodated, highlighting the need for additional protection-sensitive accommodation capacity appropriate for these groups.

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 1,935 beds but a maximum approved capacity of 1,500.

Given the pressure on accommodation, UNHCR and partners, in collaboration with other actors on the ground, work to identify, profile, and prioritize cases for referral to appropriate available spaces. Relatedly, in April, the relocation of families accommodated in the Bira TRC to the Borići and Sedra TRCs continued, as well as the relocation of UASC from Miral TRC to more suitable centres.

Complicating matters, the TRCs continued to see a high turnover rate in April. This was 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 and so it remains unclear if a given space is available for reallocation. Further, many of those who attempt unsuccessfully to cross into Croatia return to the TRCs to find their space reallocated, often resulting in complaints and protest. Moreover, in April, IOM received an increasing 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).

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 and Médecins Sans Frontières (MSF) have previously reported that a number of the residents choose, among other reasons, to reside in these squats due to fears of inter-communal violence in the centres.

The below accommodation and shelter was available in BiH in April:

Sarajevo Canton

The Ušivak TRC (opened in October 2018), in Hadžići Municipality, is a mixed profile centre, predominantly for single men, but also for families and vulnerable refugees and migrants. The centre is managed by the SFA, with centre management support provided by IOM who oversees the daily running of the centre in coordination with partners providing other services. IOM CCCM staff and security personnel are present 24/7. The Ušivak TRC has a maximum agreed accommodation capacity of 700, but currently provides up-to 800 beds (400 in six-bed housing containers and 400 in a large provisional tent).

At the end of the last week commencing in April, the site hosted 450 refugees and migrants. Construction works on one of the facilities on the premises that will be able to house up to 170 beds supported by the Qatar Charity are ongoing. This will not increase the overall capacity of the centre but replace the large provisional tent.

The current SFA presence at the Ušivak TRC (10:00-14:00) is not sufficient 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 the last week commencing in April, 23 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: [in April only six families/20 people were referred to the Delijaš AC.](#) On occasion, asylum seekers refuse to be accommodated there, among other factors, because the remote location of the AC.

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

Una-Sana Canton

[On 11 March, the Council of Ministers \(CoM\) adopted a Decision¹ to define four locations in USC as formal TRCs: the Borići TRC, the Miral TRC, the Sedra TRC, and the Bira TRC,](#) and appointed the SFA to operationalize the Decision. Memorandums of Understanding (MoU) on cooperation between the SFA, IOM and other competent bodies, shall prescribe the details of functioning, financing, coordination of work and cooperation to ensure efficient work of the TRCs.

[Currently, in all four centres in USC, centre management is led by IOM,](#) which oversees the daily running of the camp in coordination with partners providing other services, pending a hand over to the SFA in accordance with the 11 March Decision by the BiH CoM.

The Borići TRC (opened in January 2019 following a complete renovation supported by the EU), in the City of Bihać, exclusively hosts families and other vulnerable groups. IOM staff and security personnel are present 24/7. [The currently approved maximum capacity is 430 \(as opposed to the previously planned 530\).](#)

[At the end of the last week commencing in April, the site hosted 396 refugees and migrants](#) with families accommodated in rooms of either 4, 6, 8, or 16 beds. An additional 25 housing containers have already been delivered to the site, but their installation is on hold due to a political decision not to further expand the site's capacity. Further, insufficient electricity supply continues to be a struggle for the TRC and continues to prevent the main building reaching its planned capacity of 430.

The Bira TRC (opened in October 2018), in the City of Bihać, predominantly accommodates single men, and on a temporary basis, families, and UASC. IOM staff and security personnel are present 24/7. [While the Bira TRC has an approved accommodation capacity of 1,500, there are 1,935 available beds](#) in six-bed housing containers or in large provisional tents (which are gradually being replaced).

[At the end of the last week commencing in April, the site hosted 1,683 refugees and migrants.](#) While the site predominantly accommodates single men, the majority of refugees and migrants admitted by

¹ The Decision was gazetted in BiH O.G. no.28/19 on 12 April, 2019.

the centre in April were families and vulnerable individuals. 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 accommodation capacity of 700.

At the end of the last week commencing in April, the site hosted 678 refugees and migrants. During April, the remaining families and UASC were relocated to other TRCs, providing more appropriate and protection sensitive shelter solutions. The centre still hosts six UASC boys, who will be relocated to other TRCs as soon as possible. Télécoms Sans Frontières provides internet access to humanitarian workers in the Miral TRC.

The Sedra TRC (opened in July 2018), in Cazin Municipality, is exclusively for families and vulnerable individuals, who are prioritized for voluntary relocation from other sites in partnership with UNHCR. IOM staff and security personnel are present 24/7. The site has a maximum capacity of 420 beds.

At the end of the last week commencing in April, the site hosted 362 people. The site continues to be affected by the poor conditions of the building's structure as with the water, electricity and heating infrastructure.

Herzegovina-Neretva Canton

The Salakovac Refugee Reception Centre (RRC) (in operation since 2000) in Salakovac near Mostar, provides accommodation to refugees and persons granted subsidiary protection. The centre management, services - with basic services, free legal aid, psychosocial support, and primary healthcare - and running costs have been continuously supported through a partnership with UNHCR since 2000. As part of the contingency plan of the BiH authorities the Salakovac RRC opened its doors to asylum seeking families as of May 2018, pursuant to a protocol between the Ministry for Human Rights and Refugees (MHRR) and the SA of the MoS. The Salakovac RRC has a maximum capacity of 250 spaces.

At the end of the last week commencing in April, 91 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. Just four families/12 people were referred to the centre in April and capacity remains available.

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 input received through a complaint mechanism.

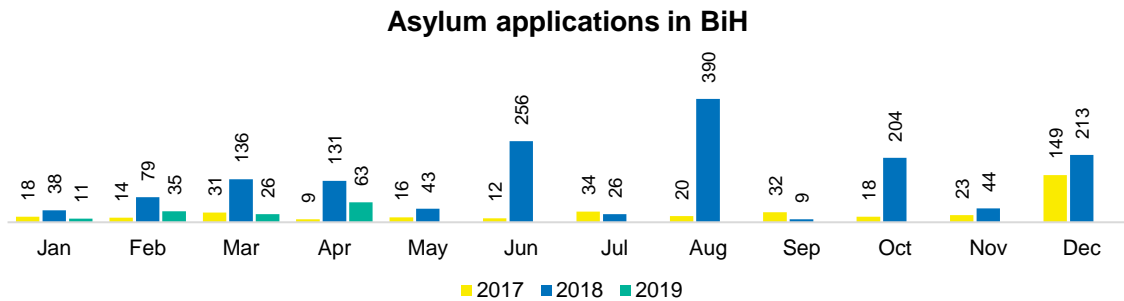
Established Community Representative Councils also meet regularly in the Bira, Sedra, and Ušivak TRCs, and are being established in the Miral and Borići TRCs. The main nationalities are represented in these councils and participate in community meetings organized regularly by IOM with partner agencies. These Community Representative Councils serve as a platform for discussion of centre issues and between the centre population and the centre management. For instance, in April, the arrangements and schedules for food distribution during Ramadan was discussed. The Councils are also used for conflict resolution. In April, 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 Sedra 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 30,268 arrivals between 1 January 2018 and 30 April 2019, 27,899 (92 percent) formally expressed intention to seek asylum with the SFA. Of these 27,899, 1,704 (6 percent) chose and were able to formally lodge an asylum claim with the SA over the same period. In April, 63 asylum seekers underwent registration interviews and filed asylum claims with the SA.



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; the need to pay a BAM 10.00 administrative fee for Certificates of Residence; that while although there is no legal provision that forbids the expression of intent to seek asylum on multiple occasions, the SFA re-issue attestations on intention to seek asylum on a case-by-case basis, often precluding people not considered to be vulnerable from expressing intent following the expiration of their initial expression; a lack of interpretation; restrictions on freedom of movement in USC. Furthermore, and with specific reference to UASC, while significant improvements have been made in recent months, challenges remain with regard to the timely identification of UASC and the subsequent appointment of a legal guardian – a necessary first step to enter the asylum process.

This limited access, as well as slowness issuing asylum seeker cards, prevents access to the rights provided by the Law on Asylum. Previously issued asylum seeker cards have also been allowed to expire, despite timely requests for their extension. In response, UNHCR and its partner VP work to promote access to the asylum procedure through information, free legal aid, and advocacy with relevant institutions and ministries.

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 reports. In April, VP provided free legal aid services to 1,282 persons of concern across BiH and provided a further 195 with information on the asylum procedure. VP provide these services at formal and informal sites as well as at hostels and other forms of private accommodation. VP also provide support to detained asylum seekers in the Immigration Centre in Lukavica, assisting 14 in April.

In April, the MoS continued to more frequently schedule registrations for beneficiaries in private accommodation upon request by VP to the Ombudsman. Of note, the MoS also started to conduct registration interviews for families and UASC accommodated in the Ušivak TRC. This represents a significant step, although only an initial one, in addressing the lack of access to asylum procedures for asylum seekers residing in the TRCs.

On 23 April, the Council of Europe (CoE) published its *Report on the fact-finding mission by Ambassador Tomáš Boček, Special Representative of the Secretary General on migration and refugees, to Bosnia and Herzegovina and to Croatia 24 – 27 July and 26 – 30 November*. While the report overall commends the joint efforts of the government and of the international organizations and their partners to provide shelter and basic services, it highlights how “largely due to administrative obstacles, access to asylum procedures and support services remains limited” and the importance of strengthening the public system’s capacity to co-ordinate the emergency response and to take full ownership of the country’s migration management².

UNHCR and VP continued working with the relevant authorities towards the timely registration of new-borns in birth registries and issuance of birth certificates to the children of asylum-seekers – without which there is a risk of statelessness and the need to be registered through complex subsequent birth registration procedures.

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.

² <https://rm.coe.int/report-of-the-fact-finding-mission-by-ambassador-tomas-bocek-special-r/1680940259>

The UNHCR protection team conducts weekly visits to monitor the protection environment in all reception centres. The UNHCR protection team identifies vulnerable individuals through a range of protection tools including systematic profiling, in cooperation with other protection partners, and works to ensure that the residents of centres are referred to relevant service providers. The protection team also makes ad-hoc visits to the Immigration Centre.

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, DRC conducted Focus Group Discussions (FGD) in TRCs. In April, 17 FGDs were conducted in total with 136 participants: seven in the Sedra TRC and 10 in the Miral TRC. 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. Age, gender, diversity mainstreaming, rights-based, and community-based approaches are applied. Four additional FGDs were planned in each of the TRCs in USC with regards to the needs and religious customs of refugees and migrants for Ramadan with the outputs intended to serve as reference and guidance for food provision during the fasting period, taking the various religious backgrounds into consideration.

On 16 and 17 April UNHCR in partnership with DRC, led a series of protection workshops in USC for service providers operating in the Borići, Bira, Miral, and Sedra TRCs. The workshops covered a range of topics including protection mainstreaming, protection information management, and key approaches in working with SGBV.



Protection Workshop in USC / UNHCR 2019

IOM staff present in the Ušivak, Sedra, Bira, Miral, and Borići TRCs, with the support of and in collaboration with a number of UN and NGO actors, ensures that information on protection and assistance service providers is available in the centres. IOM staff present at the TRCs further refer persons of concern with identified protection needs to the SFA, UNHCR and partners, NGOs, and other service and information providers. Additionally, IOM has on-call mobile teams available 24/7 for assistance and transportation of refugees and migrants between TRCs, to medical facilities, and to other service providers.

IOM has also established info-desks in the Sedra, Bira, and Ušivak TRCs and set-up is underway in the Borići and Miral TRCs. These function as a point where the centre population can access

information about available assistance and protection services within and outside of the TRCs and ask questions or 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 or for food distribution schedule adapted to Ramadan.

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 HoA (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 636 individuals in April.**

Žene sa Une (ŽsU) operate a trauma recovery programme for women in the Sedra and Borići TRCs 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 April, there were 150 participating women.

Protection environment outside TRCs, protection outreach, and protection services

Due to limited accommodation capacity, increased arrivals, and objective reasons for individuals and families to choose not to stay in the available accommodation capacity, an increasing number of refugees and migrants are present outside of the established TRCs, the AC, and the RRC. Refugees and migrants are also in transit between locations in BiH and exposed to a range of protection risks. April in particular saw a large increase 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 April, IOM TRC staff reported a higher degree of movement and attempts to cross the border with Croatia, including many families with children, UASCs and other vulnerable individuals. Inherently related to movement, **push-backs at the border with Croatia continue to be reported by refugees and migrants.** VP and DRC protection teams, in collaboration with UNHCR, are working to identify and record alleged cases of violent push-backs. In April, VP submitted a case to the Croatian Ombudsperson. Relatedly, 30 Members of the European Parliament addressed an open letter to the European Commissioner of Migration and Home Affairs and the Commissioner of the European Civil Protection and Humanitarian Aid Operations raising concerns over alleged push-packs from Croatia to BiH and a lack of infrastructure and institutional support to refugees and migrants in BiH. They called upon the European Commission to action a number of points, including requesting the

“Croatian authorities to immediately halt the violence and the practice of pushbacks and collective expulsion from its territory”³. Monthly reports continue to be published by NGOs documenting such instances⁴.

Of note, [measures put in place by Cantonal authorities in USC in October to limit the freedom of movement of asylum seekers and migrants in USC, without a clear legal basis, remained in effect throughout April](#). 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, 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. The UN in BiH advocates for these restrictions to be removed and the situation is continually monitored.

[In April, while vulnerable categories were admitted, newly arriving single men continued to be denied access to the TRCs in USC](#). In addition to the risks related to a lack of safe and secure shelter, due to the absence of an individual approach to assessing and determining access to shelter (assessment based simply on gender and family status), [it is likely that extremely vulnerable individuals were among the single men denied accommodation](#). In this regard, while DRC and UNHCR protection staff are present on the locations during the day and conduct profiling and screening activities to identify extremely vulnerable individuals, arrivals also occur during the late evening/night. [Towards the end of the month, between 50 and 100 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, a range of actors increasingly conduct protection outreach activities in BiH, and in particular in USC, and work to monitor the protection environment and to identify those in need and to directly provide or refer these refugees and migrants to a range of protection related services](#). [UNHCR coordinates a Protection Outreach Working Group which includes DRC, UNICEF, Save the Children \(StC\), and IOM, that supports the coordination of outreach activities in USC](#). An initial mapping of push-back locations (both from Croatia and from the Canton), locations where refugees and migrants gather, and informal accommodation sites identified key locations for intervention and informed initial outreach activities. [Further, an early warning system related to arrivals through public transport has been put in place and UNHCR, DRC, UNICEF, and StC together work to ensure presence and referral to accommodation and services](#). Over the month, in partnership with UNHCR, [DRC Outreach Protection Teams operated in USC, and supported the timely identification and referral of the most vulnerable refugees and migrants](#). With a view to supporting more harmonized data management

³ https://www.guengl.eu/content/uploads/2019/04/Croatia-and-Bosnia-push-backs-Letter-EC.pdf?fbclid=IwAR3An_h6ZJb902RxdDwzSF8FD64iAsNaQMNxjPpfd4gcEI8bLgYI-cpvP7o

⁴ *March Issue available [here](#).*

and better planning, a joint protection outreach data tool has been agreed upon and is being developed.

The abovementioned early-warning system includes UNHCR and partners screening the departure of persons of concern to Bihać at the train station in Sarajevo before informing outreach teams in USC of the number of families and vulnerable individuals that can be expected. The number of refugees and migrants using the train often reaches 100 with up to eight families in a day. UNHCR and partners also inform the refugees and migrants at the train on the risks of travelling to USC and the poor conditions there.

UNHCR, VP, BHWI and IOM conducted a joint Border Protection Monitoring (BPM) visit to Tuzla, Kalesija, Bijeljina, Milići, and Zvornik in April. They held meetings with the OSCE, SFA, border police, local police and CSWs. The team also visited places of congregation such as bus stations and SFA offices to observe movements. Interlocutors reported on the movement of refugees and migrants from Serbia through Republika Srpska (RS), often undetected until Tuzla. In Tuzla, many are in need of assistance including water, food and blankets which is provided only by volunteers. One potential new route was identified by the border police with refugees and migrants travelling from Tuzla to the north of the RS (Gradiška/Brod) to cross into Croatia

UNHCR maintains an information centre in Sarajevo which makes referrals to relevant and available services, as well as offers psychosocial support, through its partner BHWI, and free legal aid, through its partner VP. Visits to the UNHCR Info Centre were made on 39 occasions in April.

The Community Centre in Sarajevo, managed by Aid Brigade, continued to function by providing meals and a place to rest and socialize during the day. The Community Centre provided day shelter for approximately 150 to 250 refugees and migrants on a daily basis in April.

Child Protection

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

For instance, UASC relocated to the Bira TRC – through efforts to provide more appropriate shelter and because the Miral TRC was deemed unsuitable for UASC - often quickly return to the Miral TRC in an irregular manner or seek shelter in squats and other informal locations. This renders them without access to the services available in the centres, including healthcare. 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). Further, the majority of UASC decline offers to be relocated to the Bira TRC in the first place. As such, there is a need to redesign programme of support to UASC in Velika Kladuša (VK).

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 in partnership with StC continued to provide 24/7 on-site child protection support at the Bira TRC for refugee and migrant children, focusing on UASC. The team of 16 Child Protection Officers (CPO) provided on-site support in close cooperation with the Bihać CSW. Services provided included

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 April, support was provided to a total of 238 newly arrived UASC \(all boys\).](#)

[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 April, support was provided to a total of 101 UASC,](#) including psychosocial support to 56 UASC, the inclusion of 17 UASC in sport/recreational activities, and 54 UASC individual work.

[In the second half of April, UNICEF in partnership with StC engaged CPOs to provide 24/7 support to families in the Borići and Sedra TRCs.](#) CPOs are responsible for provision of general advice and assistance, referral to relevant institutions/organizations, psychological first aid, individual and group counselling, follow-up support for accompanied children identified at-risk of protection issues, etc.

[In terms of child protection work outside of centres, in the second half of April, a UNICEF and StC-supported child protection outreach team started to regularly visit a range of locations in USC to identify, refer, support, and provide protection by presence to the most vulnerable, in coordination with the related Working Group.](#)

[UNICEF continued to support the CSWs in Bihać, Cazin, and VK through the appointment of additional professionals](#) (two social workers and one psychologist in Bihać, one social worker in Cazin, and two social workers in partnership with StC in VK) [and a multi-disciplinary team from the CSW in Bihać operating after working hours and during weekends,](#) with a focus on the protection of refugee and migrant children, with a special emphasis on UASC. [This additional social workforce provides legal guardianship to identified UASC, conducts BIA, and provides escort to transfer UASC to the designated zone in the Bira TRC or other accommodation \(e.g. safe house\).](#) [In April, legal guardianship was appointed on 413 occasions.](#) With the increase of new arrivals, many UASC were identified in Ključ, Bosanska Krupa, and Bosanska Otoka. Respective CSWs are jointly providing BIA/BID and aiming to ensure referral to proper and protection-sensitive accommodation. During the reporting period, legal guardians provided 20 escorts to the SFA and 53 escorts to accommodation sites.

[BHWI have also made social workers available to the Hadžići CSW](#) in Sarajevo Canton to be appointed as legal guardians, conduct Best Interest Assessments, and provide psychosocial support.

[Supported by UNICEF, and operated by ŽsU, StC, SOS Children's Villages, and World Vision, Child Friendly Spaces \(CFS\) operate at the Salakovac RRC, the Ušivak TRC, the Borići TRC, the Bira TRC, and the Sedra TRC](#) (where there are two spaces, one for children under twelve and one Youth Centre

for children 12 – 17)⁵. In April, a total of 709 (319 girls, 390 boys) children benefitted from CFS services across all sites: 48 at the Salakovac RRC (29 girls, 19 boys), 103 at the Ušivak TRC (41 girls, 62 boys), 172 at the Borići TRC (76 girls, 96 boys), 115 at the Bira TRC (48 girls, 67 boys), 181 at the Sedra TRC CFS (100 girls, 81 boys), and 90 at the Sedra TRC Youth Centre (25 girls, 65 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 April, CFS provided a total of 4,467 services.**

Extremely vulnerable individuals and GBV prevention and response

In April, an increase in the number of SGBV incidents was noted by both BHWI and DRC.

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 April, 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 13 cases) as well as MHPSS Case Management (31 cases in total). **Over the month, a total of 21 individuals from 12 families were accommodated in the safe house for a total of 361 overnights** (all new arrivals are provided with welcome packages and refill packages are available thereafter). **In April, two persons of concern were accommodated in the Duje Centre.**

In USC, UNFPA continued managing three Centres for Women and Girls (WGC) which provide group and individual psychosocial support to GBV survivors or persons at high risk, as well as empowerment programmes (educative, protective and preventative, activities for women and girls). UNFPA provided psychosocial support to 193 women, including identified GBV survivors, through group and individual counselling, and provided 440 empowerment activities.

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 counselling focused on self-protection in camp and migration contexts.

The UNFPA-led Working Group in USC streamlined the referral pathway for the Sedra TRC, calling for improved cooperation between relevant service providers to address identified shortcomings in the GBV response. A dedicated GBV Working Group meeting on PSEA resulted in agreement on the use of the GBV referral pathway for SEA survivors. The development of the PSEA awareness raising strategy and training action plan will be facilitated by UNFPA and IOM in USC.

⁵ RRC (SOS and WV, 09:00 – 15:00, Monday to Friday), the Ušivak TRC (SOS and WV, 08:00 – 16:00, Monday to Friday), the Borići TRC (ŽsU and StC, 10:00 – 18:00, daily), the Bira TRC (ŽsU and StC, 12:00 – 20:00, Monday, Wednesday, Friday), the Sedra TRC (ŽsU and StC, 10:00 – 18:00, daily), and at the First Elementary School - the branch school "Šiljkovača" in VK (SOS and WV, 09:00 – 17:00, Monday to Friday).

GBV safety audits in the Sedra and Borići TRCs, led by UNFPA, assisted the camp management and service provider organizations to identify GBV risks and initiate appropriate action in the shelter, WASH, health, and safety sectors.

On 3 and 4 April, in Višegrad and Foča, respectively, the OSCE Mission, with the participation of UNHCR, facilitated capacity building events for the Border Police, SFA, CSWs, local Police, and Prosecutors from the Foča region. The participants gained relevant knowledge and information regarding human trafficking and gender-based indicators that might be utilised in recognition of victims of human trafficking and gender-based violence in mixed migration flows.

On 17 and 18 April, in Teslić, a two-day training course on trafficking in human beings (THB) and migration was organized by the OSCE Mission and IOM in co-operation with Judicial and Prosecutorial Training Centres in FBiH and RS. The training was attended by 20 judges and prosecutors with the aim to increase their knowledge of the processing of THB and migration-related cases. Particular focus was placed on identifying victims of THB among the migrant and refugee population and psychological aspects of working with them in order to ensure that the victims are provided with the assistance and protection they need.

While a separate form has been used to report incidents of more serious nature, including Sexual Exploitation and Abuse (SEA), in April, partner agencies continued to work to strengthen Prevention/Response of SEA mechanisms in the TRCs, including reporting mechanisms and awareness raising and prevention efforts. IOM developed draft centre-specific SOPs for all TRCs.

Health:

Assessments

A team of WHO international experts together with representatives of the Ministry of Civil Affairs and the Ministry of Health of the Federation of BiH conducted an assessment of health system capacities to deal with the current mixed migration flow. Using a WHO methodology, visits were made to hospitals and primary healthcare centres in key locations and visits were made to reception centres and key authorities at state, entity, and cantonal levels. A final report will be drafted and issued after validation by the relevant BiH authorities.

MSF conducted a medical, mental health, and WASH assessment for those living outside of TRCs in VK and Sarajevo.

Immunization and communicable diseases

UNICEF in partnership with DRC organized immunization information sessions for parents and caregivers in the Sedra TRC (11 April), the Bira TRC (19 April), and the Borići TRC (21 April) to support the process of medical counselling and healthcare awareness raising prior to the immunization process. Approximately 90 parents and caregivers participated and had an opportunity to ask questions they had regarding measles, mumps, and rubella (MMR) immunization.

Additionally, striving to reach more beneficiaries for MMR vaccination, DRC provided a translation (in Arabic and Persian) of a Public Health Institute (PHI) information leaflet with key facts on measles and the MMR vaccine. Info leaflets were distributed in each of targeted TRCs.

In April, a total 96 children in the Sedra TRC and 44 children in the Borići TRC were vaccinated for MMR. MMR immunization will continue in May 2019.

Further to the three persons of concern were diagnosed with tuberculosis (TB) in March, **an additional PoC was diagnosed with TB in April**. Necessary follow up actions were communicated and coordinated with the relevant authorities, including the PHI, the Bihać Primary Healthcare Centre (PHC), and the Cantonal Hospital. Follow-up measures are being taken with persons of concern from the Bira TRC identified as in close contact with those diagnosed with TB.

Primary and Secondary Healthcare

DRC provides healthcare for refugees and migrants who are registered in six centres: in USC, the Bira, Borići, Miral, and Sedra TRCs; in Sarajevo Canton, in the Ušivak TRC; in HNC, in the Salakovac RRC (as of 1 March). In each of these centres, **primary healthcare is provided on-site through the engagement of medical teams from local PHCs**. Specialized services on the primary level (including laboratory analysis, gynaecological, paediatric and other services) 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 in March was 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. Specific cases are referred to the University Clinical Centre Sarajevo. In HNC, the secondary health care services are ensured through Cantonal Hospital Dr. Safet Mujic, Mostar and University Clinical Hospital Mostar. **IOM continued to provide medical transportation to and from the TRCs in April** – this is a temporary solution and a more permanent solution needs to be identified.

In April, teams engaged through PHCs conducted 5,253 medical examinations and made 710 medical interventions, with 260 referrals to further primary healthcare and 181 referrals to further secondary healthcare. The Jesuit Refugee Service (JRS), in partnership with DRC, provided accompaniment and translation services for 424 patients referred to specialized services and secondary healthcare services.

In April, an increasing number of difficult medical cases from private accommodation was recorded, which demanded outreach activities, referral and follow up, supported by the DRC Medical Team.

IFS-Emmaus facilitate primary healthcare access for asylum seekers and migrants accommodated in the Centre in Duje. In April, one general medical examination was 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.

The medical worker striker affecting the Bihać PHC as well as the Cantonal hospital ceased and the health institutions resumed their regular operations, receiving the patients in need of specialized examinations, including provision of gynaecology, paediatrics, and other examinations, as well as laboratory analysis.

DRC has frequent consultations with the PHIs 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.

First aid is offered in the community centre run by Aid Brigade in Sarajevo.

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 61 mental health and psychosocial support consultations were made, with the largest number of patients residing in the Borići and Miral TRCs.

MSF continued to offer mental healthcare services in Sarajevo, referring patients to psychologists or psychiatrists as needed. MSF also provided community mental health activities with refugee and migrant communities living in Sarajevo outside of centres.

Services are not available for the hospitalization of more serious cases and rehabilitation therapy and treatment for the addicts is not available.

Paediatric Healthcare

The paediatric infirmary in the Sedra TRC, supported by UNICEF and operated by DRC, started operations in March and continued in April. Medical support is provided through a medical team from the private health clinic "Muminovic". A paediatrician conducts check-ups twice (Monday and Thursday, 12:00 – 16:00), while a paediatric nurse provides services to children and caregivers in the Sedra TRC five times a week, (Monday to Friday 12:00 – 16:00).

In April, the paediatric team conducted 50 paediatric examinations and provided 47 interventions for 73 children (35 boys and 38 girls) aged 0-14 years (including four babies younger than nine months). Paediatric counselling was provided for 28 beneficiaries and their parents regarding children's health problems, nutrition, and hygiene care. The most frequent type of assistance/diagnosis were related to respiratory and intestinal infections.

Five children from HoA underwent medical check-ups and subsequently were enrolled in school; 15 children from the Ušivak TRC underwent medical check-ups and nine children were subsequently enrolled in school.

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 April, IOM distributed 10,167 NFIs to 543 people in the Borići TRC, 8,008 NFIs to 1,389 people in the Bira TRC, 3,479 NFIs in the Miral TRC, 6,045 NFIs to 145 people in the Sedra TRC, and 8,845 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. In April, IOM also started distributing specialized NFIs packages to hospitalized refugees and migrants from Sedra TRC, which contains pyjamas, slippers, a towel and other NFIs necessary for hospital stays.

In April, UNICEF in partnership with ŽsU, StC, SoS, and WV, distributed 1,427 NFI packages (hygiene items for mothers and infants) through MBCs in the Borići, Bira, Sedra, and Ušivak TRCs.

In April, the Red Cross received and distributed a range of NFIs. The Bihać Red Cross distributed 1,242 hygiene packages, 106 jackets, clothing for 891 people, underwear for 70 people, 48 pairs of socks, 1,164 blankets, 2014 pairs of shoes, and 20 sleeping bags, to refugees and migrants in the Borići and Bira TRCs. The USC Red Cross distributed 130 hygiene packs, 100 blankets, 124 sleeping bags, and 200 pairs of shoes. The Red Cross in Mostar distributed 130 hygiene packages, clothing for 24 people, 24 jackets, underwear for 24 people, 24 pairs of socks, 32 blankets, 22 pairs of shoes, and 20 packages of baby diapers. Further, at the checkpoint in Velečevo, the Ključ Red Cross distributed 33 jackets, clothing for 22 people, 150 pairs of socks, 33 blankets, 35 sleeping bags, 38 hygiene packages, and 26 pairs of shoes.

In April, Caritas supported migrants and refugees at the Ušivak TRC with NFIs, mostly hygiene products for individual use, including shampoo (200L), wet wipes (32000 pocket-sized packets), liquid soap (257L), solid soap, toothpaste (1,040 pieces), and toothbrushes (800 pieces).



NFIs / Caritas 2019

BHWI provided a range of NFIs in the Delijaš AC, including pyjamas, clothing, shoes, socks, towels, and pillow-cases. In the Ušivak TRC, BHWI distributed hygiene kits to 23 families and to 26 UASC. In the Salakovac RRC, BHWI provided a range of NFIs to 67 asylum seekers.

All asylum seekers and migrants accommodated at the Duje Reception Centre are provided with necessary NFIs and clean bedding. IFS-Emmaus also provided 110 refugees and migrants at the Tuzla bus station with clothing and blankets in April.

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

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

WASH:

During April, IOM supported desinsection, deratisation and disinfection measures of all TRCs in USC. Disinfections are now organized weekly in all TRCs, while disinsections take place monthly, and deratization every three months.

The Bira TRC has 99 toilets and 44 showers and facilities are separated by gender. Drinking water is available in the centre. A number of repairs take place every week in the centre to repair broken facilities. 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 now 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: 4,220 kg of clothing

were laundered for 1,506 individuals in April. The capacity of the laundry system is still limited and representatives of Caritas informed IOM management of low water pressure, affecting already insufficient laundry operations. However, an industrial washing machine was delivered to the centre in April, which will enhance the overall laundry system capacity.



Laundry in Bira / Caritas 2019

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. In April, IOM organized a few cleaning actions in and around the centre involving the TRC population. The laundry system is still in the process of being set-up, and the centre population is therefore washing their clothes by themselves, affecting access to hot water. IOM provides clean sheets and linen upon arrival and for those in scabies treatment, or other medical cases as per need.

The Sedra TRC has 53 toilets and 59 showers, with 43 rooms having private facilities for a total of 163 persons of concern. The remaining TRC population 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 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 levels of chlorine in the water was measured in the centre in April, and a dirt collector was installed in the chlorinator.

The Ušivak TRC has 33 toilets and 28 showers and facilities are separated by gender. Hot water and drinking water is available at the centre. The centre population is actively involved in cleaning and maintenance of the centre, and during food distribution, and in the organization of the centre's communal activities and spaces. A laundry system is in place with three industrial washing machines and three industrial dryers.

The Borići TRC has 23 toilets and 16 showers inside the building and 21 toilets and 13 showers outside the building (in sanitary containers) and facilities are separated per gender. Hot water and drinking water is available in the centre. Six washing machines and six dryers are installed and operational.

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. IFS-Emmaus also provided 110 refugees and migrants with bottled water at the Tuzla bus station.

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

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

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

Food:

Over 234,000 meals were provided to refugees and migrants in BiH in April 2019. The majority of these, over 157,000, were provided in USC.

Given continued challenges with access to USC and a related check-point in Ključ Municipality, the Ključ Red Cross provided 530 food parcels to refugees and migrants at this location over the month.



Food in USC / IOM 2019

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

The Red Cross Mostar Branch prepares and distributes three meals per day to refugees and migrants at the Salakovac RRC. In April, over 11,046 meals were distributed along with a further 130 packages of baby food. BHWI provide additional support with nutritional needs in specific cases as per recommendations made by a doctor. Caritas supported with the provision of baby tea (120 bags), cookies and oatmeal (four bags), baby food (two boxes), and juice (six bottles).

In the four TRCs in USC managed by IOM, IOM/the Red Cross (the Bihać and USC branches) continued to support the provision of three meals (breakfast, lunch and dinner) and two fruit snacks per day according to standardized menus ensuring sufficient calorie and nutrition. In April, IOM provided a total of 24,572 meals in the Borići TRC, 79,576 meals in the Bira TRC, 22,871 meals in the Sedra TRC, and 29,097 meals in the Miral TRC. Meals are prepared and distributed in-line with international standards that guarantee sufficient nutritional value, variety and a daily intake of 2,100 Kcal. Meals are prepared on-site at the Sedra and Bira TRCs, while for the Borići and Miral TRCs, the Red Cross prepares meals at their own premises transporting the food to the respective sites.

In the Sedra TRC, specialized food is provided to those with specific dietary requirement upon Doctor's recommendation/medical prescription. Vegetarian meals are served in the Sedra TRC to refugees and migrants who are vegetarian, or in need 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.

Open kitchens with all the equipment for centre's population to cook their own food were completed in the Sedra TRC and in Bira TRC and are now operational, the latter designated for the use of the single male population of the centre.

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 48,189 meals was distributed in April. 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.

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

In April, 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.

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 April, 1,100 meals and 720 snacks were provided.

IFS-Emmaus provides hot meals to those accommodated at the Duje Reception Centre; in April, 105 hot meals and 74 dry meals were provided. IFS-Emmaus also provided food to approximately 110 refugees and migrants at the bus station in Tuzla.

UNICEF, in partnership with ŽsU, StC, SOS Children's Villages, and World Vision, operated Mother Baby Corners (MBC) at the Salakovac RRC, the Ušivak TRC, the Borići TRC, the Bira TRC, the Sedra TRC, and in VK⁶. MBCs provide parents with IYCF counselling, information/awareness raising on breastfeeding and hygiene, psychosocial counselling, and support the provision of infant food and hygiene products. In April, a total of 95 mothers, 11 pregnant women, four fathers, and 83 children under five benefitted from MBC services: 11 mothers and 13 children at the Salakovac RRC (8 girls, 5 boys); 26 mothers and 34 children (16 girls and 18 boys), at the Ušivak TRC; 25 mothers and 27 children (10 girls, 17 boys) at the Borići TRC; six mothers and six children (three girls, three boys) at the Bira TRC; 26 mothers and 35 children (13 girls, 22 boys) at the Sedra TRC; and one mother and two children in VK. Some 1,159 assistances, 14 workshops, 12 lectures and 20 educational activities on the importance of breastfeeding and child health, 22 individual consultations, 33 psychosocial services to mothers, and eight referrals of infants to paediatric ambulance were provided. In April, 1,140 baby food jars, 1,140 juices for children and 155 supplements for lactating women and pregnant women were provided through MBCs in USC. In the Ušivak TRC, 103 children (41 girls, 62 boys) had access to nutrition food on a daily basis (Monday to Friday) and in the Salakovac RRC 48 children (29 girls, 19 boys) had access to nutrition food on a daily basis (Monday to Friday).

A meeting on IYCF with the focus on breast milk substitutes (BMS) distribution and complementary feeding was organized by UNICEF and partner organizations participated. It has been agreed to work together on improving the existing conditions in all TRCs in order to provide purposeful and comprehensive assistance to beneficiaries in line with international standards and to ensure full

⁶ RRC (SOS and WV, 08:00 – 16:00, Monday to Friday), the Ušivak TRC (SOS and WV, 09:00 – 10:30, Monday to Friday), the Borići TRC (ŽsU and WV, 10:00 – 18:00, daily), the Bira TRC (ŽsU and StC, 12:00 – 20:00, Monday, Wednesday, Friday), the Sedra TRC (ŽsU and StC, 10:00 – 18:00, daily), and in VK (SOS and WV, mobile, 09:00 – 17:00, Monday to Friday)

compliance with the International Code on the Marketing of the BMS. An IYCF Working Group was established and will be led by UNICEF. The working group will involve all relevant partners, including IOM CCCMs, StC, ŽsU, and DRC.

[Education and leisure:](#)

[UNICEF in partnership with StC facilitated a study visit to Serbia between 8 - 10 April for representatives of the Ministry of Education of USC and Sarajevo Canton, as well as representatives of seven schools.](#) During the study visit, participants took part in panels held by representatives of the Ministry of Education, Science and Technological Development of the Republic of Serbia, UNICEF Serbia, schools and school administrations, as well as relevant NGOs. In addition, two schools in Belgrade were visited. The study visit contributed to knowledge and information sharing, including mutual learning from everyday practice and experiences.

[By the end of April, 168 refugee and migrant children continued to regularly attend five primary schools](#) (three in Bihac and two in Cazin), with the support of UNICEF and StC and in cooperation with the Ministry of Education. Classes were provided by teachers trained in the 'HEART' methodology by StC. 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 screen refugee and migrant children at the Sedra TRC who attend school for lice and scabies.](#)

[Further, 565 children accommodated in Bira, Sedra, and Borići TRCs and three children accommodated in a Safe House \(in total 568\) benefitted from structured non-formal education in April.](#)

Over the month 20 HEART workshops were organized, and 32 teachers were trained in psychosocial support (based on a model from Croatia) on 24 and 25 April.

In partnership with StC, Musicians without Borders held a workshop in the school Haramni II for 30 children. Local musicians engaged for the project also participated in the Child Safeguarding training organized in April.

[In Sarajevo, UNICEF in partnership with World Vision and SOS Children's Villages supported the regular school attendance of 21 children](#) (13 boys, 8 girls), including escort during the transport from the Ušivak TRC and House of All. Safeguarding Persons/CP Assistants and interpreters escort children to and from school every day, and they are present in the school to prevent and immediately address any possible issues. School snacks and school bags with accessories are provided to all refugee/migrant children attending school. During April, IOM continued to provide transportation of school-aged children from staying in the Ušivak TRC as well as from House of All.

[In the Delijaš AC, BHWI, supported by UNHCR, provide activities for children and adults, including, educational activities for children with a focus on preparing for school enrolment in the BiH education system](#) (attended by six children), sports and recreational activities (attended by 16 people) and Bosnian/Croatian/Serbian lessons (attended by four people). Additionally, in April, BHWI marked Earth Day in the Delijaš AC, planting two fruit trees in the camp with the participation of residents.

[In the Salakovac RRC, BHWI, supported by UNHCR, provide a range of activities,](#) including separate Bosnian/Croatian/Serbian and English lessons for women and men three times per week (attended

by two women and two men), knitting workshops three times a week (attended by six women), sewing workshops three times a week (attended by 10 women), women's aerobics three times a week (attended by 10 women), and sports and recreational activities two times a week (attended by 17 adults). [Childcare services are provided during the aforementioned activities as needed.](#) In lieu, of approval from the HNC Ministry of Education for refugee and migrant children to attend school, "My School", a custom education program (attended by 22 children) continued in April in the Salakovac RRC. Additionally, in April, BHWI marked Earth Day in the Salakovac RRC, planting two fruit trees in the camp with the participation of residents, after which the children designed a poster.

[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. Aid Brigade started to offer recreational/educational activities for children in the Ušivak TRC, four days per week.

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

[Aid Brigade continue to provide language classes at the Community Centre in Sarajevo.](#)

[The Integration Centre Units \(ICU\) ran by ŽsU with the support of IOM, continue to offer a range of intercultural activities in the Sedra TRC.](#) Activities were ceased in the Borići TRC due to a lack of funds. The space is equipped with computers, board games, playing cards, handicrafts, internet, library, etc. In April, 118 refugees and migrants participated in ICU activities.

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 ago⁷ to register with the Employment Bureau and Tax Office and now have access to the BiH labour market.](#) Subsequent issues with opening bank accounts - related to banks currently 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.

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

[With the support of the EU, and with confirmed support of the Netherlands, at the end of April, IOM resumed its provision of Assisted Voluntary Return and Reintegration \(AVRR\) to those expressing the wish to return to their CoO. In April, IOM supported seven people to return to their CoO.](#) IOM provides outreach, dissemination of information, provision of counselling and logistical assistance to return and reintegration applying established eligibility criteria for assisted voluntary return assistance, as well as for the more comprehensive reintegration assistance, implemented consistently by IOM

⁷ *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.*

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.

[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 April. 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. In April, the location welcomed a group of clowns from Italy called "Terraferma Clown" who provided entertainment with magic shows and juggling.](#)

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 April, with video recordings taking place in April.
- Children from the Borići TRC football train together with local children.
- Integration activities for children from the Borići TRC who attend Elementary School "Harmani 2" continue, including creative reading workshops, illustration, puppet creation, and art.
- Dance classes held in the local dance studio Virus Bihać continued to be attended by children from the Sedra TRC twice a week.
- A hair dressing saloon was established in April in Sedra TRC by IOM. With oversight by ŽsU, hair dressing services will be provided by the refugees and migrants themselves.

Safety and security

[The high number of unauthorized entrances, especially in the Bira, Miral, and Ušivak TRCs continues to present a challenge to security and centre management.](#)




[During April, IOM TRC staff, in coordination with partner agencies present in the TRCs, the IOM Security Coordinator, the security service provider and the maintenance staff, implemented a number of measures to address the issue of unauthorized entries to TRCs. IOM closed and repaired fences, implemented stricter routines of security staff at centre entry/exit gates. IOM also closely monitored the TRC populations' adherence to the House Rules and stay in the rooms/beds assigned to them.](#)





[Despite these measures, unauthorized entries, the lending or loss of TRC-ID cards, and the usage of fake ones continued to be a concern.](#) 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. This is particularly the case in Bira TRC, where just one week after the disinfection measures (at which point the premises was completely vacated), up to 400 people were found to be staying irregularly in the centre. This needs to be viewed in light of the imposed cap preventing IOM from receiving newly arrived refugees and migrants beyond the agreed max accommodation capacity, placing pressure on IOM and causing frustration among those who cannot be accommodated.

Other measures taken by IOM during April to enhance the safety and security of TRCs include the installation of video surveillance systems (now in place and operational in the Bira and Miral TRCs), the completion of evacuation plans, and the training of IOM centre staff in fire safety and first aid.

Map of Key Sites and Locations



3W															
Location															
	Una-Sana Canton						Sarajevo Canton				HNC	Tuzla Canton	Lukavica	Other	-
	USC, Other, estimate	Bihać, Borići TRC	Bihać, Bira TRC	Cazin, Sedra TRC	Velika Kladuša, Miral	Zene sa Une	Ušivak, Hadžići TRC	Sarajevo, HoA	Sarajevo, Other, estimate	Asylum Centre, Delijaš	Refugee RC, Salakovac	Reception Centre Dujje	Immigration Centre	Awaiting asylum, private accomm.	Totals
Key population estimates	<i>(Population numbers below are a mixture of estimates and counts, depending on location. The numbers below are the most recent available. It must be kept in mind that populations at this sites fluctuate on a daily basis)</i>														
Total Size	2,000	396	1,683	362	678	11	450	80	150	23	91	2	62	141	6,129
Of which, UASC	-	-	315	4	6	-	40	0	-	0	0	-	-	1	366
Of which, children	-	168	334	147	6	-	91	42	-	6	45	1	5	57	902
Of which, women & girls	-	176	23	160	0	-	54	39	-	14	49	-	3	51	569
Of which, single women	-	12	0	4	0	-	3	1	-	0	0	-	-	0	20
Of which, family members	-	369	49	344	0	-	127	79	-	22	91	-	-	86	1167
Of which, asylum seekers	-	38	34	112	2	4	14	15	-	23	83	-	6	102	433
Of which, awaiting asylum registration	-	99	246	138	85	0	352	4	-	0	8	-	10	36	978
Sector															
Shelter 	-	SFA, IOM	SFA, IOM	IOM	SFA, IOM	ŽsU/ UNHCR	SFA, IOM	HoA	-	MoS/AS/ UNHCR	MHRR/ MoS/AS/ UNHCR	Emmaus / MoS/ UNHCR	MoS, SFA	-	-
Centre Management 	-	SFA, IOM	SFA, IOM	SFA, IOM	SFA, IOM	ZsU	SFA, IOM	HoA	-	MoS/AS	MHRR/ MoS/AS	Emmaus	MoS, SFA	-	-
Protection 	UNHCR/ DRC/VP/ IOM, CSW, UNICEF/ST C	UNHCR/D RC/VP, UNICEF/Žs U/StC, IOM, CSW, UNFPA	UNHCR/D RC/VP, UNICEF/Žs U/StC, IOM, CSW, UNFPA	UNHCR/D RC/VP, UNICEF/Žs U/StC, IOM, CSW, UNFPA	UNHCR/D RC/VP, UNICEF/Žs U/StC, IOM, CSW, UNFPA	ŽsU, DRC/ VP/UNH CR	UNHCR/VP /BHWI/DR C, CSW, UNICEF/ SoS/WV IOM	HoA, BHWI/ VP/ UNHCR, UNICEF	UNHCR/ VP/ BHWI	MoS/AS, UNHCR/ BHWI/ VP, CSW	UNHCR/ BHWI/VP, UNICEF/ WV, IOM, CSW	Emmaus UNHCR/ BHWI/ VP, CSW	UNHCR/ BHWI/VP, CSW	VP/ UNHCR/	-

Health		-	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	MSF	MoS/AS/ UNHCR, DZ, CH, DRC	MoS/AS, UNHCR, DZ, CH, DRC, IOM	Emmaus	SFA, DZ	-	-
Non-food items	NFI	IOM	CoBRC, IOM, UNFPA	CoBRC, IOM, UNICEF/ CSW, UNFPA	IOM, UNFPA	CoBRC, IOM	ŽsU	IOM, Pomozi/AB, UNHCR, RC, Caritas	HoA	AB	MOS/ AS/ UNHCR/ BHWI, CRS	RC, UNHCR/ BHWI, UNICEF/ WV, CRS	Emmaus	MoS/SFA	-	-
WASH		IOM	IOM	IOM, Caritas	IOM	IOM	ŽsU	IOM	HoA	Pomozi.ba, MSF	MoS/AS/ UNHCR	MHRR/ MoS, UNHCR/ BHWI, UNICEF/ WV	Emmaus / MoS	MoS/SFA	-	-
Security/Safety		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	-	-
Transport/ Logistics		IOM	IOM	IOM	IOM	IOM	ŽsU, IOM	IOM, UNHCR/ BHWI	-	-	MoS/AS/ UNHCR/ BHWI, IOM	UNHCR/ BHWI, IOM	Emmaus / MoS, IOM, UNHCR/ BHWI	IOM	-	-
Administrative/ Legal		MoS/SFA/ AS, IOM, UNHCR/ VP	MoS/SFA, IOM, UNHCR/ VP	MoS/SFA/ AS, IOM, UNHCR/ VP	MoS/SFA/ AS, IOM, UNHCR/ VP	MoS/SFA/ AS, IOM, UNHCR/ VP	ŽsU, VP	MoS/ SFA, IOM, UNHCR/VP	VP/ UNHCR	-	MoS/AS/ UNHCR/ VP	MHRR/ MoS/SFA/ AS, UNHCR/VP	Emmaus / UNHCR/ VP	MoS/SFA, UNHCR/VP	VP	-
Education		-	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	-	-	-
Food and nutrition		IOM/ CoBRC	IOM/ CoBRC, UNICEF/ ŽsU/StC	IOM/ CoBRC UNICEF/ ŽsU/StC	IOM/CRC, UNICEF/ ŽsU/StC	IOM/CRC	ŽsU	Pomozi.ba, IOM UNICEF/ V/ SoS	HoA	AB	MoS/SA/ UNHCR	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 Bihac Red Cross / CRC, Cantonal Red Cross / CRS, Catholic Relief Services / CSW, Centre for Social Welfare (Municipal) / CT, The Czech Team / CWS, Church World Service / DZ, Public Health Centre (Municipal) / DRC, Danish Refugee Council / HoA, House of All / ICRC, International Committee of the Red Cross / IPSIA, Istituto Pace Sviluppo Innovazione Acli / Emmaus, International Forum of Solidarity-Emmaus / IOM, International Organization for Migration / JRS, Jesuit Refugee Services / 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 Une.

Coordination/Working in partnership

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

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Sarajevo Monthly Coordination Meeting and Monthly Update	UNHCR/IOM	doane@unhcr.org
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LINKS

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

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

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

IOM Bosnia and Herzegovina Migration Response: <https://bih.iom.int/ioms-migration-response>

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

Asylum Information Brochure: https://issuu.com/unhcrsee/docs/information_for_as_in_bih



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.