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Operation Update Report

Bosnia and Herzegovina: Population Movement



Emergency appeal n° MDRBA011	GLIDE n° OT-2018-000078-BIH
Operation update n° 6 Date of issue: 13 October 2020	Timeframe covered by this update: 1 May 2020 – 31 August 2020
Operation start date: 8 December 2018	Operation timeframe: 24 months Operation end date: 8 December 2020
Funding requirements: CHF 3,800,000	DREF amount initially allocated: CHF 300,000
Appeal coverage: 40%	
N° of people being assisted: 35,000 migrants and 1,500 households from host community	
Host National Society: Red Cross Society of Bosnia and Herzegovina (RCSBiH)	
Red Cross Red Crescent Movement partners currently actively involved in the operation: American Red Cross, Austrian Red Cross, British Red Cross, Bulgarian Red Cross, Canadian Red Cross, China Red Cross – Hong Kong branch, Croatian Red Cross, German Red Cross, Iraqi Red Crescent, Irish Red Cross, Italian Red Cross, Japanese Red Cross, Kuwait Red Crescent Society, New Zealand Red Cross, The Netherlands Red Cross, Norwegian Red Cross, Red Cross of Monaco, Swedish Red Cross, Swiss Red Cross, Turkish Red Crescent Society, Red Crescent Society of the United Arab Emirates, ICRC.	
Other partner organizations actively involved in the operation: Ministry for Human Rights and Refugees, Ministry of Security, Una-Sana Cantonal Government, City of Bihac, IOM, UNHCR, UNICEF, Caritas, World Vision, MSF, Danish Refugee Council (DRC), Pomozi.ba, Catholic Relief Services, Save the Children, Austrian Embassy in Bosnia and Herzegovina	

Summary of major developments:

This Operations Update no. 6 is to report the progress in the implementation of activities and changing needs on the ground, covering the period from 1 May 2020 – 31 August 2020.

This document provides an up-to-date description of the migration situation in BiH in the reporting period, also bearing in mind the situation regarding the Red Cross Red Crescent Movement assistance provided to the most vulnerable in its response to COVID-19 pandemic in Bosnia and Herzegovina (BiH). It provides an overview of the Red Cross Society of Bosnia and Herzegovina (RCSBiH) and other actors' current response to migrants' needs on the ground.

Due to the increased numbers of migrants in-country during the reporting period as well as the deteriorating conditions due to the COVID-19 pandemic, additional funds were provided through the global COVID-19 Appeal to further support RCSBiH Mobile Teams' work funded by this appeal in order to address the increased COVID-19 related needs of both host communities and migrants.

During the reporting period, the Mobiles Teams (MTs) continued to provide their services including the provision of food, household and hygiene items, PSS and First Aid, among other activities. However, in light of the unprecedented pandemic situation, some of the activities such as trainings for volunteers, workshops and community-based surveys and activities could not be carried out as planned initially and are planned for the upcoming months.

No changes in the budget or the timeframe of the operation is reported through this Operation Update, however, a timeframe extension is currently being considered to respond to the continuous and increasing needs of the migrants in country.

A. SITUATION ANALYSIS

Description of the disaster

Countries throughout the Balkans experienced a significant increase of new arrival of migrants in 2015 and 2017. BiH, however, not being situated on the main migratory route, was only marginally affected at that time. Since the beginning of 2018, the country has seen a significant increase in the numbers of arrivals, with migrants arriving via two different routes: one through Albania and Montenegro; and the other through the Republic of North Macedonia or Bulgaria, and Serbia. Entry points to BiH were in the areas of Trebinje, Foča, Višegrad, Zvornik and Bijeljina in the Republika Srpska (RS) and Goražde in the Federation of Bosnia and Herzegovina (FBiH). The majority of people arriving were heading through Tuzla and Sarajevo to Una-Sana Canton (USC) and seeking to enter the European Union (EU) through Croatia.

More than 11,000 migrants have entered BiH between January 2020 until 30 August 2020. In the last week of August, 476 persons have been registered who have entered the country.¹ This presents a 37% drop in comparison to the same period last year, however, the number of arrivals was progressively increasing. In July, 1,432 persons arrived in Tuzla Canton. Arrivals in Tuzla doubled in the first week of August. Most of these persons stated that they wanted to move towards Sarajevo while a small number wanted to travel to USC right away. In Sarajevo Canton, during July, 961 persons arrived at the bus station: 862 arrived from Serbia and 99 arrived from Montenegro, via Mostar. The increase in arrivals in July filled reception centers and remaining places were scarce. The number of persons observed in Republika Srpska in July was 252, out of whom 85 moved back to Serbia, while 167 persons were newly arriving.

UNHCR estimated that there were still at least 9,200 migrants in the country. Around 5,616 of them were staying in reception centers, while an estimated 2,300 people were staying outside of formal accommodation,² squatting in abandoned buildings or sleeping by the roadside. As of the end of July there were 3,598 people accommodated in 5 reception centers in USC – 762 in Bira, 330 in Borići, 1,311 in Lipa, 848 in Miral and 347 in Sedra. Also, there were 857 people in the TRC (Temporary Reception Center) Ušivak and 2,195 in the TRC Blažuj.

The increase in arrivals to Sarajevo Canton and decrease in USC was noted as well as an increased number of departures from TRCs, Asylum Center (AC) Delijaš and Refugee Reception Center (RRC) Salakovac. The number of people in the RRC Salakovac (near Mostar, Southwest from Sarajevo) was extremely low showing the trend of the onward movement. Due to Covid-19 measures, the ban on new receptions in centers Delijaš and Salakovac was still active. It was necessary to provide additional capacity for most vulnerable persons, namely families with children. The number of pushbacks from the border with the Republic of Croatia recorded during the month of June alone was 1,500.

Regarding the issue of lack of registration in Tuzla Canton, the UNHCR held the meeting with the Director of the Service for Foreigners' Affairs (SFA) for resuming registration in Tuzla office and SFA was gradually increasing registrations. The Ministry of Security (MoS) started performing registration of asylum claims in Delijaš and Salakovac. The registration of asylum claims has not still been conducted in Ušivak, Blažuj and in Una-Sana Canton (people stayed there shortly and continued their journey). In Ušivak and Blažuj people could approach



Images 1, 2 & 3. Mobile team Ključ providing assistance to migrants in Ključ.
Photo: RCSBiH

¹ Source: IOM and National Authorities

² Inter-agency meeting, 8 May 2020

directly SFA. 165 asylum claims were registered by the MoS in total. Lack of proper registration and lack of effective access to asylum procedures is creating increasing protection challenges.

During the reporting period, fluctuations were noticed of the number of persons accommodated in the TRCs, arrivals and departures were reported daily as migrants were moving towards Una Sana Canton. Additionally TRC Bira was supposed to be closed by 22 May 2020, but that did not happen, however, the police still prevented all new arrivals and returns to TRC Bira. It was noticed that more families with small babies (from 8 days old to 4 months old) and little children with disabilities (approximate age up to 0-5 years old as reported by Mobile teams) as well more unaccompanied minors were arriving and were in need of food, footwear, clothing, etc. The increase of arrivals was observed in Velečevo, where persons were disembarked from commercial buses. During July, 1,599 persons were disembarked, among them 78 unaccompanied minors, 54 families and 1,300 single males.

In the reporting period, the mitigation and restrictive measures due to the COVID-19 pandemic continued in the Federation of Bosnia and Herzegovina as well as in the Republika Srpska entity, however, a huge increase in number of confirmed cases was still recorded in both entities. The authorities were calling for respect of the epidemiological measures in place country wide. Although the BiH Council of Ministers' decision on ban of movement between the TRC was still in force, this did not affect the movements except for the TRC Bira. Screening on COVID-19 symptoms was performed in all TRCs. 5,700 screenings were made at the TRCs by DRC in June. During July, more than 5,500 persons underwent a medical screening, half of them in the TRC Blažuj due to the high turnover. 13 persons were referred to symptomatic isolations, 21 were tested negative and 7 confirmed cases of COVID-19 among refugees/ migrants were detected. Since many reception centers were overcrowded, the conditions needed improving, especially given the risk posed by the COVID-19 pandemic.

On 11 and 12 August, the new Minister of Security visited Una-Sana Canton, having series of meetings with the Una-Sana Cantonal and local authorities in Bihać and Velika Kalduša. During the field visit a firm promise was made to rather soon develop a plan on migration crisis management.

The overall situation exposed people to severe protection risks and threats. The environment of the camps and the poor living conditions exacerbated the mental health of the affected people, resulting in increased form of violence and aggression. It was noted that the number of incidents significantly increased in TRCs. There were no big consequences and no injuries so far due to mitigation measures in place by UNDSS. An increase of SGBV incidents in the family centers in USC was noted (source of information: DRC – Interagency Meeting dated 03.07.2020).

Further, harassments against personnel decreased: during the month of May there were 30 cases, in June there were 19 cases, and 10 during July. Committed criminal acts among migrants population in USC increased in the first 6 months compared to the last year. The similar situation was with the violation of public peace and order, a decrease is 66% or 35 cases. There was a small increase of 9,6 % in other incidents which do not qualify as criminal acts, and which involved migrants (source of information: UNDSS) [Operational relevance for security of personnel working in the field].

Unaccompanied minors haven't been receiving safe accommodation and access to services (One of the conclusions of the National Outreach WG meeting was to organize a thematic meeting on contingency planning for winter response in the out-of-site areas..). The Government is planning to move unaccompanied minors to a camp established by state authorities operated by ISF-EMMAUS³ in place called Duje near Dobo. In June there



Images 4, 5 & 6. Mobile Team Una Sana Canton providing assistance to migrants in the area USC.
Photo: RCSBiH

³ International Solidarity FUND - EMMAUS

were large relocations organized by IOM between Ušivak and Blažuj, whereby single men were transferred to Blažuj while families and 193 unaccompanied minors were relocated to Ušivak, which could enable much better protection of the vulnerable individuals and families. The number of identified unaccompanied minors in July was 145 in BiH, out of which 59 were referred to accommodation in the camps but in a separate area. The rest could not be accommodated due to unavailable capacities or their unwillingness to separate from their groups and wish continue towards the Croatian border.

Due to the complicated political situation, migrants transiting through BiH find it increasingly difficult to reach their destination. They encountered prohibition of the movement, especially when entering Una-Sana Canton, where they are prevented from entry (by the Decision of Una-Sana Cantonal Authorities as of 19 August). The authorities have also banned people from transporting migrants on trains, buses or taxis, as well as from renting or providing housing to migrants. The Police in the Republika Srpska entity prevented people from going back. Therefore, migrants found themselves stuck and were sleeping in the open air and without basic support (food, water). Those that even made it through, found it difficult to enter official reception centers due to limited capacities. The official temporary reception centers have reached their capacities and governmental officials are not planning to open new camps.

Hostility towards migrants has been growing among the local population of Una-Sana Canton, with the protests organized in Velika Kladuša (15 August) and Bihać (29 August) requesting for the change of current situation, moving migrants from the streets and accommodating them at the TRCs.

Combination of all above mentioned factors (government measures, migrants stuck and getting nervous same as local population especially in Una Sana Canton) plus COVID-19 and upcoming winter are contributing to serious concern of escalation of situation in upcoming period.

Summary of current response

Overview of the Host National Society – RCSBiH

The RCSBiH, through its field and regional branches in Bihać, Mostar, Una Sana Canton, Ključ and Bijeljina/Zvornik continued distributing regularly household items (blankets, sleeping bags, raincoats, clothing and shoes), Meals Ready to Eat (MREs) /dry food lunch packages, hygiene kits, rendering psychosocial support (PSS) and implementing Restoring Family Links (RFL) activities.

The first aid (FA) services provision has changed in the period since the outset of the COVID-19 pandemic, and only most urgent cases were treated due to the orders for physical and social distancing.

To date, 155 RCSBiH staff and volunteers, including Mobile Teams, are engaged in the overall response operations. The MT services includes mainly: providing Psychosocial First Ais (PSFA), FA, referrals, and food distribution.

Considering that the highest concentration of migrants and number of TRCs are in USC and Bihać respectively, the workload continues to be still very heavy for the two Red Cross branches of Bihać and USC since majority of the TRCs, migrants and refugees continue to be in USC and resources are limited. Also the MT Ključ has been investing its utmost efforts at the hot-spot in Velečevo to provide humanitarian assistance (food and HH items) to migrants (100 migrants were arriving daily) coming from the direction of Sarajevo and Tuzla. They were staying there overnight (sometimes even 170 migrants at the time) in open space having no shelter from the rainfall. There were practical issues that affected proper assistance to those families staying in Velečevo, which posed both protection risks like feeling unsafe and uncertain of their future and health risks: difficulty to accommodate them in USC because the TRCs reached full capacity and obstacle to transport such huge number of people.

With such fluid and frequent changes in the situation on the ground, in USC in particular, but also in Sarajevo Canton and Tuzla Canton the context and the needs as planned in the Emergency Appeal as of 8 December 2018 have changed significantly and it was necessary to respond to the changing needs.

Red Cross volunteers were assisting approximately 200 people stuck in a no man's land between the borders of the Republika Srpska and the Federation of Bosnia and Herzegovina. The migrants have been expelled from Republika Srpska and refused entry to the Federation and were stuck with no food, water or shelter. The Mobile Teams were continuously distributing food to people on the move but with increased number of people stuck on route the RCSBiH food supplies were running out rapidly.

The RCSBiH Emergency Appeal Coordinator was working on all aspects of implementation of the Emergency Appeal as the NS focal point.

RCSBiH have established Emergency Operations Center (EOC) through regional project implemented by ROE. Equipment for center have been procured and installed in temporary room (conference room) and center have been up and running. RCSBiH also procured and installed equipment for entity RC EOCs and in Brčko district that will be linked with National HQ and further with ROE. Financing for entity and Brčko EOCs was provided by ICRC.

The RCSBiH was involved in the response to COVID-19 pandemic since the outset of the pandemic in the country, including representatives of the RC being involved in the work of crisis cells at state, entity, and local levels. In FBiH, RS and Brčko District local organizations of the RC continued to support different levels of government, civil protection units, and healthcare institutions, thus fulfilling their role as an auxiliary organ for humanitarian action. The Red Cross Society, through its entity organizations, delivered a significant number of cots, bedding, and tents to local branches that made their resources available to local crisis cells. Local organizations were also involved in the setting up triage tents and quarantines where necessary and in accordance with local Crisis cells instructions (schools, sport halls, tents). The biggest strength of the Red Cross, their volunteers, were helping citizens in over 80 cities and municipalities, purchasing food and medicine for them, and distributing food and hygiene packages to people from soup kitchens and to socially disadvantaged families. They distributed protective masks and gloves to citizens while informing them of preventive measures for the COVID-19 virus. Additionally, the Red Cross of Brčko District in cooperation with the police and in line with the standards set up by the World Health Organization transported at-risk people that reside in Brčko and who entered Bosnia and Herzegovina from the neighboring countries. They also disinfected public areas in their city. The Red Cross of Republika Srpska provided water bottles for drivers at borders and people in quarantine. For all citizens who had difficulties adapting to isolation and quarantine measures, members of the RCSBiH structure established psychosocial support hotlines. Many local organizations, in both entities, established an SOS number for citizens to call and ask for assistance or to refer RC to people in need. Soup kitchens in both entities continued to deliver hot meals to people. The RCSBiH also launched a "Viber community" to inform citizens about COVID-19 and activities it was undertaking. Additionally, information on the Red Cross activities implemented in the country were posted on the social networks (RCSBiH Facebook and Instagram).

Another aggravating circumstance was the situation with migrants, especially those outside official TRCs who were supported by the Red Cross Mobile teams. With increased number of COVID-19 cases in the region, the concern of personal health and safety for personnel was growing. The RCSBiH sent guidance and suggestions on how to reduce contact and ensure highest level of safety for the staff and volunteers while maintaining dignity of those served. Work hours and locations were reduced, and aid received signatures were revoked at this time to avoid close contact. Among other activities, the MTs were also tasked to perform the following activities: distribution of protective masks, gloves and disinfectant material for migrants in transit as well as providing COVID-19 related information to migrants.

The Red Cross with increase of engagement of volunteers supporting affected population was in need of additional PPE and funding to support daily work of volunteers. The RCSBiH has also received 432,000 Swiss Francs under the IFRC COVID19 appeal, which will help equip volunteers with PPE and assist the community.

The RCSBiH was using KoBo toolbox for collecting information on services provided and goods delivered.

In the reporting period, the preparations were made for cash transfer within the Emergency Appeal for the most vulnerable local population in 18 local communities in BiH aiming at reducing tension with the local communities. During the month of August, distribution of cash grants started to local population affected by the migration-related situation.

Overview of the Red Cross Red Crescent Movement in country

The IFRC Operations Manager of Emergency operations in Bosnia and Herzegovina has been providing support to the RCSBiH also in the field related to the activities on COVID-19 and other emergency operation (floods that affected North-Eastern part of BiH on 22 June). Additionally, support from the IFRC Regional Office for Europe (ROE) has been provided to the procurement processes, financial and operational management, as well as support in CVA component of the operation.

The International Committee of Red Cross (ICRC) supported the RCSBiH to produce 39,546 pieces of mine awareness leaflets, posters and billboards for 10 main entering / existing areas on the BiH migratory route in five different languages. ICRC continues to provide expertise and financial support in RFL services and tools countrywide, for migrants (mainly in USC) like internet cards distribution, distribution of leaflets, charging mobile phone services, distribution of cards for children and older persons, Trace the Face posters. Provision of IT equipment to USC RC central warehouse in Bihać, RC Mobile team in Ključ and the municipal RC in Trebinje were also ensured to facilitate operational action and warehousing support. The National Society of Red Cross of Bosnia and Herzegovina received financial support from ICRC (approx. CHF 15,000) that was used for needs

of the teams in the field. Also, support was provided for the regularly updated leaflet on RC COVID-19 action which is the tool for the RCSBiH further positioning and include migration and other RC key activities.

In addition, the RCSBiH has received technical, financial and in-kind support from the ICRC and multiple other RCRC partners who have long-standing partnerships with RCSBiH and/or have been present in the country. These include:

- **Austrian Red Cross** provided funding for procurement of container that is used for MT Bijeljina – Zvornik as a storage for goods distributed to migrants as well as for local population when needed by local RC. They also provided non-contact thermometers.
- **Swiss Red** During the reporting period Swiss Red Cross supported the work of Mobile teams in Tuzla, Sarajevo, USC and Trebinje. Within the first twelve months of the EA timeframe, the SRC supported the MT in Tuzla (from September 2019). The SRC also provided relief items support to the MT in Kalesija and Ključ. The National Society of Red Cross of Bosnia and Herzegovina received financial support from Swiss RC (50,000 CHF) that was used for needs of the teams in the field.
- **Turkish Red Crescent** The National Society of Red Cross of Bosnia and Herzegovina received in-kind support from Turkish Red Crescent - facemasks, overall, nitrile gloves, safety goggles in the quantity of 116,000 items (927 kg) in the total value of EUR 52,236.91. These items were distributed throughout the structure to entity and further to local levels.
- **The Red Crescent Society of the United Arab Emirates** remains present in the country and continues to engage with the RCSBiH in identifying areas for support.
- **Kuwait Red Crescent Society** Kuwait Red Crescent Society also continues to engage in bilateral discussions with the RCSBiH in identifying areas for support.

Overview of non-RCRC actors in country

The International Organisation for Migration (IOM), with support from European Union continues to be the main humanitarian actor, providing accommodation for migrants by renting facilities for TRCs in Sedra hotel and Bira and Miral factories in Una-Sana Canton. IOM also continues to support running of TRC Borići (Bihać-USC), TRC Ušivak, TRC in Blažuj and new TRC Lipa. IOM/EU continues to support food provision implemented by the RCSBiH in all official five TRCs in Una-Sana Canton and RRC Salakovac in Mostar, in exception of TRC Ušivak and TRC Blažuj.

UNHCR is in charge of health care as well as supporting vulnerable groups by providing international protection documentation, free legal aid both in and outside of the temporary reception centers and continue to advocate for the restoration of freedom of movement of migrants, asylum seekers and refugees and accommodation in hostels and private accommodation.

Danish Refugee Council (DRC) through funding from ECHO is providing health care to migrants staying in the TRCs in Una-Sana Canton and TRC Ušivak and TRC Blažuj in Sarajevo Canton. DRC also supports strengthening of four RCSBiH Mobile Teams with additional FA staff and other team members by strengthening their first aid services to migrants on the route and to provide protection and referral services.

MSF provided a container used by RC first aid teams in Borići at very early stages of the crisis before Borići became an official TRC and the Danish Refugee Council took over health care MSF international medical and continued to work with those outside of official camps and as such has been deployed in Velika Kladuša outside of TRC Miral and in a village near Vučjak camp (up to its closure on 10 December 2019) to assist those without access to health services.

On 22 July 2020, the Austrian Ambassador to BiH symbolically handed over the Austrian aid to the RCSBiH to the amount of EUR 200,000. The donation by the Austrian Government will assist the population groups in Bosnia and Herzegovina, primarily Roma population and migrants. The funds will serve mostly for the prevention of the spread of coronavirus, reducing mortality rates from the coronavirus, maintaining access to elementary welfare and mitigating the socio-economic consequences of pandemic.

MSF Emmaus have offered accommodation for 120 accompanied minors in Duje, near Doboje.

Local authorities and other actors

The central Government of BiH, with the MoS chairing the migration coordination forums, and the Ministry for Human Rights and Refugees (MoHRR) dealing with asylum seekers and the growing migration crisis in particular

related to identification of alternative accommodation facilities. However, while the existing TRCs (seven) continued to be run by the IOM, the Ministry of Security took over responsibility for coordination and supporting managing reception centers. The humanitarian response continues to rely mostly on the humanitarian community, where UN agencies are the biggest stakeholders.

Once Vučjak Camp was open, the Mayor of Bihać provided support for Vučjak Camp in daily water supply, garbage collection and one time off in cash donation to the RC Bihać for food preparation (from 21 October 2019 Bihać Municipality withdrew all its support from Vučjak and from that date until its closure water provision and garbage collection was taken over by local Civil protection).

Pomozi.ba, a local volunteer group, organized food distributions for migrants sleeping rough in Sarajevo and are also in charge of food provision in the Reception Centres Ušivak and Blažuj.

Coordination mechanisms

In addition to the regular participation in monthly UNHCR/IOM Inter-Agency Coordination Meetings held at national level in Sarajevo, the RCSBiH started to participate in national-level bi-weekly coordination meetings organized by UNHCR and IOM on outreach activities. Similar coordination meetings are held regionally in Una-Sana Canton and Salakovac.

Movement coordination is maintained by the RCSBiH with the support of the IFRC. So far, eight Movement Coordination meetings and one Partnership Meeting have been held with Partner National Societies supporting the Emergency Appeal including all in-country Partner National Societies and the ICRC. In addition to these meetings, regular coordination and information sharing meetings are held at country level between the IFRC Operations Manager and PNSs present in country and ICRC.

Further coordination meetings will be held in the course of the implementation of the revised Emergency Appeal Plan of Action, and RCSBiH will continue to maintain bilateral communications with all partners.

There is good coordination and also standardized approach, especially with Swiss RC and IFRC towards Mobile Teams (incentives, procedures).

Needs analysis and scenario planning

Needs analysis

From the beginning of the reporting period, there has been a significant number of new entries noticed from Serbia, and Montenegro, and increased number of migrants passing through Tuzla and staying in Sarajevo and Bihać. The IOM continued to provide food in the TRCs with the Red Cross of the Federation of BiH. The number of people outside TRCs was the same as number of those accommodated in the TRCs. During the field visit paid jointly with the IFRC from 16 to 17 June 2020 to Una-Sana Canton (USC), large groups of migrants were noticed moving towards and from Croatia. The Mobile Team from Bijeljina reported migrants going back to Serbia (due to the fact that camps were overcrowded and it has been unusual rainy weather for more than one and a half month). Some of migrants were using the new route via Banja Luka (which is 50 km closer for them to walk in comparison to being taken off the bus in Velečevo checkpoint). They were hungry, pulled away from towns, staying scattered around mountains and forests. In addition, increased number of families with babies were seen (families with 8-10 days old babies were moved on 6 June to the TRCs Borići and Sedra by the IOM after staying for some days in Velečevo checkpoint). Food needs were identified then as a key issue (during the month of Ramadan local people were providing dinner to migrants on the move, but after that period, this was no longer the case). Besides the need for providing dry food for migrants on the move (food parcels containing canned meat, canned tuna, one liter of water, bread, dates, jam), there were high need for household items such as raincoats, backpacks, flip-flops and shoes which has been in process of procurement through Emergency Appeal. Also, there is the need for CBHFA (both for training of migrants on how to provide FA themselves and also for basic FA kits).

Regarding the issue of warehouse in USC (for the RC of USC and City RC Bihać), the renting period was over, and RC of USC moved all the stuff to the military barracks to be stored there. There was also increased movement noticed in the area of Vlasenica and Bratunac (nearby the Drina river), where there is a risk of drownings.

There is need for in-kind support, such as food and household items, as well as hygiene items.

Operation Risk Assessment

The points below were considered to be the major risk factors:

- Unclear situation without a certain end date of the response; and the long commitment required from the National society
- Sudden or continuous increase in numbers of people arriving to BiH who need assistance quickly, especially with the weather conditions improving in the spring and summer time;
- Volunteers finding it difficult to commit to longer-term service;
- Heavy workload, long working hours and psychological stress on NS staff/ volunteers;
- Decreasing stocks and resources;
- Complex situation related to COVID-19, including restrictive measures to follow that had impact on work of the Red Cross Mobile Teams.

Training and Technical Assessments

Induction courses for new volunteers of the Mobile Teams have not been carried out due to the COVID-19 restrictions imposed by the National Government, as gatherings of larger number of persons were not allowed.

B. OPERATIONAL STRATEGY

Implemented strategy

Key achievements

The Red Cross continued to prepare and distribute food in four Temporary Reception Centres (Bira, Borići, Miral and Sedra) in Una-Sana Canton and in Salakovac centre, near Mostar. Additionally, in the reporting period USC branch continued with preparation and distribution of food for the residents of Lipa Camp.

In addition, with support provided through EA and by partners, the RCSBiH procured and through its MTs distributed 27,822 food items - dry food items and 1 litre of water as an emergency food supply for people on move. Food parcels are considered as an essential relief item that will continue to be distributed to people in need.

RCSBiH has been providing hygiene parcels to migrants since the beginning of the crisis, following the Sphere standards and using a kiosk system for distribution through MTs interventions. Under this EA a total of 30,000 hygiene kits were procured. The initial content of hygiene kits, after the feedback from final recipients, was revised and made more appropriate. Through MTs, household items were distributed at the same locations as hygiene items, provided to people on move or staying in open spaces outside of TRCs.

All shelter/household items distributed were in-kind donations donated by the Italian Red Cross, Turkish Red Crescent, German Red Cross/Bavarian Red Cross, Croatian Red Cross and other small NGOs or private or governmental organizations donations. Other humanitarian organizations have also made shelter/household donations to the Red Cross, including UN agencies, such as UNHCR and UNICEF.

At the initial stage of implementation, the RCSBiH was providing first aid in TRC Borići on a daily basis, when other medical teams were not present. Medical teams of other humanitarian agencies visited the Borići center once per day for two hours. In the remaining time RCSBiH First Aid teams filled the gap. Once the MTs were established, First Aid provision to people on the move became one of the essential services delivered. 8,310 persons were reached with 700 First Aid interventions provided and 7,610 PSS services provided through MTs interventions. Huge health risks remained with inadequate support to migrant population, as well as for those squatting in public spaces or abandoned building without access to health institutions, especially in the period since the outset of the COVID-



Images 7, 8 & 9. Mobile Team providing assistance to migrants in the area of Bijeljina and Zvornik towns.
Photo: RCSBiH

19 pandemic.

In the original Emergency Appeal and the plan of action, the RCSBiH planned and established MTs in five locations in the territory of BiH, with the aim of supporting migrants who are on their way between transit centers and have no access to basic services. Out of five planned vehicles for MTs, only three were procured due to lack of funding. The geographical locations of the teams were defined based on common transit routes for migrants: Bihać, Bijeljina/Zvornik, Ključ, Mostar, Una-Sana Canton cantonal teams. The RCSBiH started the process of re-establishing some Mobile Teams. There are eleven teams in total covering east and south part as well as Una-Sana Canton in the Federation of BiH. The new Mobile Team was established in Sarajevo and another new Mobile Team in the Republika Srpska entity in the south - region of Trebinje bordering with Montenegro. Swiss RC provides support to four mobile teams in: Tuzla, Sarajevo, USC, Trebinje. There might be a need to establish an additional team in the eastern part of country in Goražde or on route between Bratunac and Vlasenica.

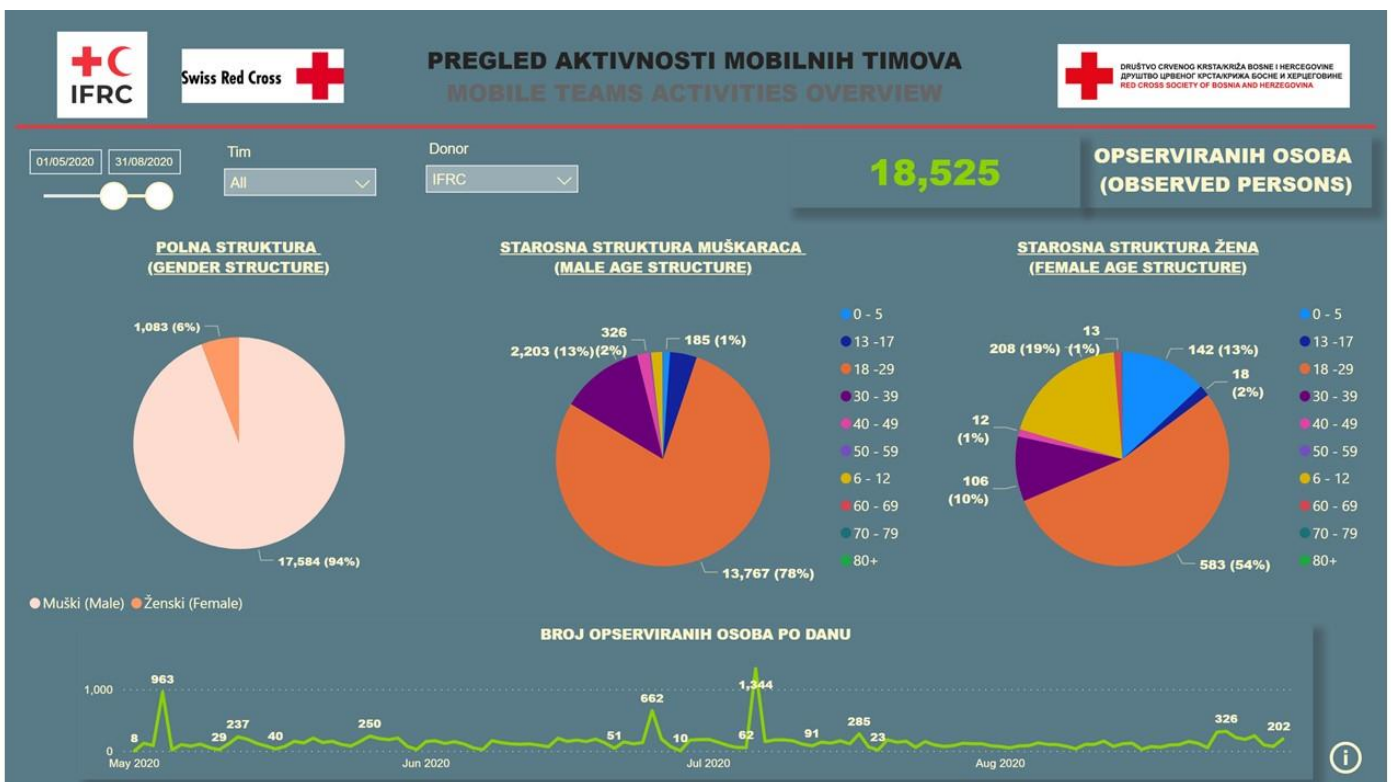
In addition to support to the migrants under the EA, the IFRC together with the RCSBiH has implemented the cash programme by identifying the recipient families in Bihać, Ključ, Cazin, Velika Kladuša, Bosanska Krupa, Bosanski Petrovac, Kladanj, Živinice, Kalesija, Bužim, Sanski Most, Tuzla, Bileća, Ljubinje, Zvornik, Čajniče, Bratunac and Vlasenica to cover their basic needs and by establishing systems with the financial service provider. This activity is well coordinated with ongoing support of the Swiss Red Cross that has been supporting the RCSBiH cash program for a while now and will support vulnerable families affected by the population movement.

Despite operating in an extremely challenging and complex context, the RCSBiH, with the support of the Red Cross and Red Crescent Movement partners, continues to be flexible and adapt to the ever-changing situation to deliver much needed basic humanitarian services on the ground. In the reporting period the RCSBiH, together and with the support of the IFRC, ICRC and Partner National Societies (PNSs) on bilateral basis, provided services to migrants in the transit routes (Bihać, Bijeljina, Zvornik, Cazin, Kalesija, Tuzla, Velika Kladuša, Vlasenica, Una-Sana Canton, Sarajevo and in any potential new locations), as well as migrants at the checkpoint in Ključ where the increase of arrivals have been especially evident.

134 volunteers were insured in the reporting period.

The details of the operational support are listed below:

Graph 1 & 2. Overview of Mobile Teams' Activities



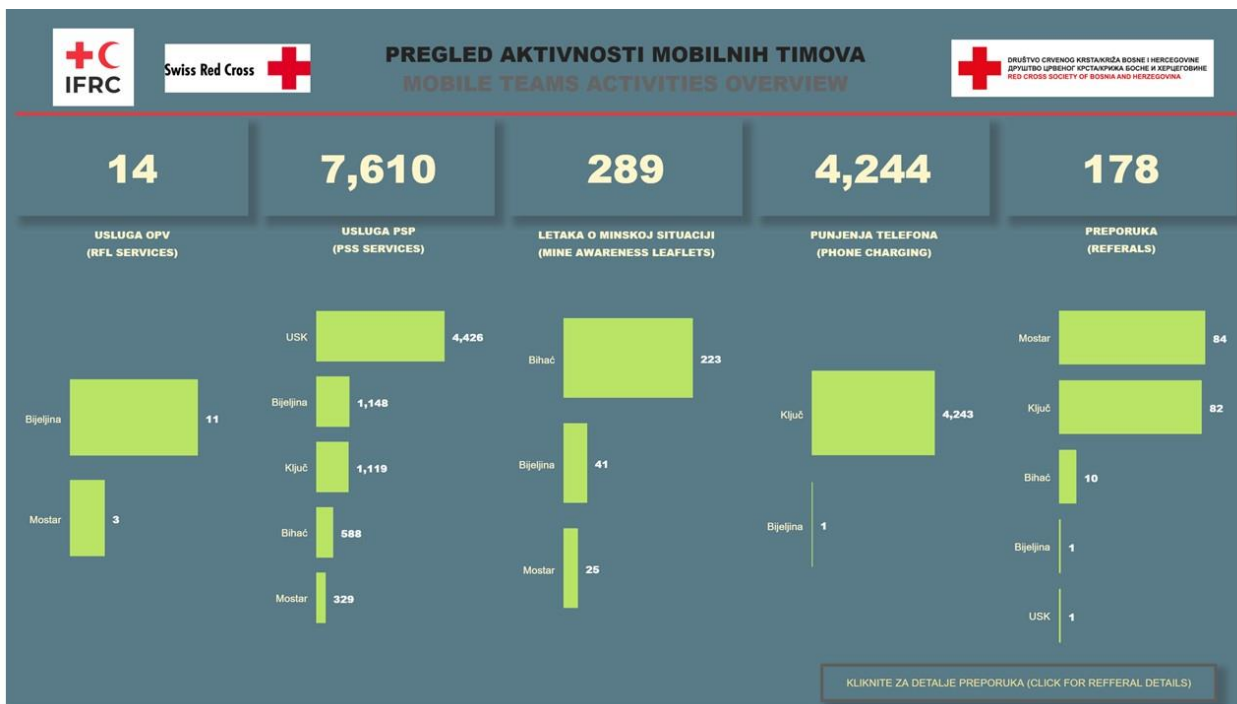


Table 1. Summary of RCSBiH Mobile Teams' response covering the period from 1 May 2020 until 31 August 2020

	Shelter	Livelihoods and basic needs	Health	WASH	RFL
# of people reached	10,841	27,822	8,310	6,757	
# of items/ services provided	<ul style="list-style-type: none"> 894 shoes, 5,432 clothing items, 957 underwear, 2,409 socks, 269 raincoats 623 blankets, 257 sleeping bags 	<ul style="list-style-type: none"> # of hot meals provided: 1,371 # of food items provided by Mobile Teams: 26,451 	<ul style="list-style-type: none"> 2,700 persons provided with FA services 7,610 PSS services provided 	-	<ul style="list-style-type: none"> In total 4,258 RFL services provided. information provided to 14 migrants on RFL services. 289 Mine-awareness information provided/ leaflets, posters & billboards

C. DETAILED OPERATIONAL PLAN

Note: Indicator 'Actual' values reported below reflect achievements in the reporting period.



Shelter

People reached: 10,841⁴

Male: 94%

Female: 6% (including children)

Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, wellbeing and longer-term recovery through shelter and settlement solutions

Indicators:	Target	Actual
# of people provided with safe, adequate and durable recovery shelter and settlement assistance	15,000	N/A

Output 1.1: Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.

Indicators:	Target	Actual
# of people provided with safe, adequate shelter and settlement assistance	15,000	N/A
# of household items distributed to affected people	20,000	10,841

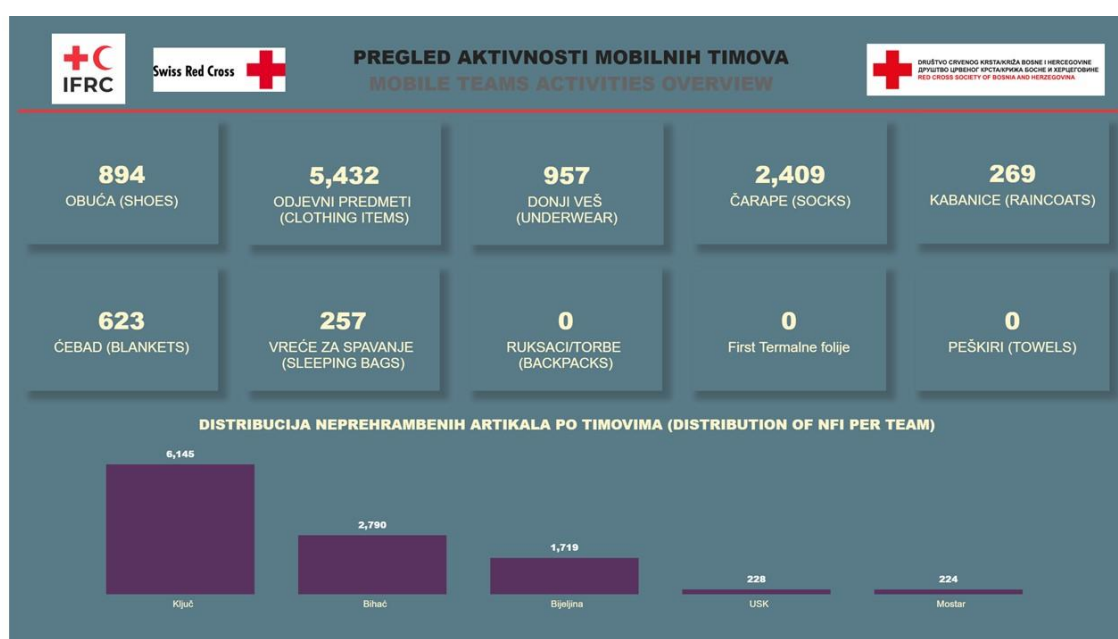
Progress towards outcomes

The figures in the table below show household items distributed by Red Cross Mobile teams in the locations where they operate.

Table 2. Number of distributed household items in the reporting period by Mobile Teams

Household items	
MT BIHAĆ	2,790 household items distributed
MT BIJELJINA	1,719 household items distributed
MT USC	228 household items distributed
MT KLJUČ	6,145 household items distributed
MT MOSTAR	224 household items distributed
TOTAL	10,841

Graph 3: Household items distributed by Mobile Teams



⁴ In the previous Operations Updates, people reached were counted from all MTs funded by different PNSs.

Challenges

- Volunteers retention – due to high level of stress/trauma and burn out due to lack of rest days, insufficient number of volunteers
- The delays in the procurement processes occurred due to COVID-19 restrictions that hindered the tendering processes, as well as the NS capacities and availability of the suppliers in the country.
- Frequent changes in political context which requires Red Cross organization to be prepared to respond at any location in the country



Livelihoods and basic needs

People reached: 27,822

Male: 80%

Female: 20% (including children)

Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Output 1.1: Basic needs assistance for livelihoods security including food is provided to the most affected communities

Indicators	Target	Actual
# of people reached with food assistance	30,000	26,451
# of meals provided to affected people	30,000	27,822

Progress towards outcomes

In the reporting period the RCSBiH and its branches in Bihać, USC and Mostar continued to provide hot meals at the TRCs with financial support by the IOM/EU. Also, USC continued with the hot meals preparation and distribution in the new TRC Lipa.

Migrants who were on their way between TRCs had no access to basic services; therefore, they urgently needed assistance, especially bearing in mind weather conditions during the months of May and June (uncommon cold and rainy season). The RCSBiH Mobile Teams provided the following items: 12,373 food parcels; 1,371 hot meals, as well as 14,078 individual food items as follows: 136 pcs of pate; 1,127 pcs of canned meat; 1,057 pcs of canned fish; 798 pcs of jam; 33 pcs of honey; 678 pcs of dates; 8 pcs of toast; 2,936 pcs of bread; 2,519 bottles of water; 660 juices; 4,126 pcs of fruits.

All MTs were established based on the developed Standard Operating Procedures during the Emergency Appeal timeframe, according to the experiences gained in the first months of the operation and adapted to migration trends.

Graph 4: Food provided by Mobile Teams



Output 1.2: Households are provided with unconditional/multipurpose cash grants to address their basic needs		
Indicators:	Target	Actual
# of targeted households that have enough cash to meet their survival threshold	1,500 (approx. 4,500 people)	0
Progress towards outcomes		
<p>In the reporting period, the preparations were made for cash transfer within the Emergency Appeal for the most vulnerable local population in 18 local communities (Bihać, Ključ, Cazin, Velika Kladuša, Bosanska Krupa, Bosanski Petrovac, Kladanj, Živinice, Kalesija, Bužim, Sanski Most, Tuzla, Bileća, Ljubinje, Zvornik, Čajniče, Bratunac and Vlasenica). The basic criterion for receiving cash assistance from the Red Cross is that families that do not have or have very low income and live in municipalities where migrants are present. Other criteria for receiving cash assistance are: older persons (65+), people with disabilities, families with more members (5+), one-member households. The affected population of RC soup kitchen list and Roma community have been added to the list of targeted population (only in Bihać). The aim of the cash transfer is the reduction of tensions between the local population and migrants. In total, 330 families will receive a one-time cash grant to the amount of BAM 150,00.</p>		
Challenges		
<ul style="list-style-type: none"> • Changing situation on the ground, huge number of people staying outside TRCs in need of emergency assistance. • Insufficient number of volunteers and staff to be allocated from emergency migrant assistance to work on cash program as during the reporting period situation has continued to be very critical in terms of migrant crisis in various parts of BiH and particularly in Una Sana Canton and Bihać • The delay in the procurement processes occur due to COVID19 restrictions that hinder the tendering. Another issue were the NS capacities and availability of the suppliers in the country. • Numbers of migrants in need of assistance over exceeded any expectation and capacities of local RC • Tension rising between local population and migrants, and between different migrant groups • Tension rising between police and migrants, especially in Una Sana Canton (in the Federation of BiH) but also in Republika Srpska 		



Health

People reached: 8,310

Male: 85%

Female: 15%

Outcome 1: The immediate risks to the health of affected populations are reduced		
Indicators:	Target	Actual
# of people reached by Red Cross with services to reduce relevant health risk factors	10,000	8,310
Output 1.1: Target population is provided with rapid medical management of injuries and diseases		
Indicators:	Target	Actual
# of people trained by Red Cross in first aid	50	50
# of people reached by First Aid services	9,000	700
Output 1.2: Psychosocial support is provided to the target population		
Indicators:	Target	Actual
# of people reached with psychosocial support activities	10,000	7,610
# of NS volunteers and staff trained in psychosocial support	100	15
Output 2.3: Community -based disease prevention and health promotion measures provided.		
Indicators:	Target	Actual
# of people reached with health promotion programming	10,000	8,310
Progress towards outcomes		
<p>Health challenges still remain insufficiently covered by involved stakeholders in the BiH migrant operation. Provision of healthcare to people of concern throughout BiH, irrespective of legal status continues to be inadequate. Migrants living outside of temporary reception centers or those accommodated in abandoned buildings or private houses</p>		

have had very limited or no access at all to the primary health assistance. Main health problems among these migrants are related to negative consequences of stress, malnutrition, unappropriated leaving conditions and risk of trauma, resulting low immune system lack of access to water and sanitation facilities, poor hygiene knowledge and practices. In result significant spread of the communicable diseases like scabies, tuberculosis, measles, respiratory infections, skin disease, ulcers as well as small injuries and wounds, blisters.

RCSBiH scaled up its First Aid and Community Based Health and First Aid approach (CBHFA) assistance through increased number of Mobile Teams deployment along migratory routes or places of large migrant population gatherings – through increased number of CBHFA and FA trained staff and volunteers. Special focus on rendering First Aid of trauma and other injures, community health with particular attention to Psychological first aid (PFA) and personal hygiene and sanitation is needed. Adequate information, support and continued interaction in prevention and promotion of health awareness and social habits will be provided to migrants. Furthermore, RCSBiH will aim to initiate basic CBHFA and FA trainings for the migrant communities staying inside of established TRCs. PSS will be a priority in the health sector. Given the shelter conditions as well as the fact that many of the migrants have been on the move for months, some even for years, and that it is becoming more and more difficult to cross the borders and as such to reach their final destination, in general migrants are experiencing heavy psychological stress due to long term traumatized situations. The RCSBiH, through its Mobile Teams interventions and PSS and PFA services provided to migrants on the move, has been filling those gaps and will continue to do so.

In the reporting period COVID-19 was becoming more deteriorating, and screenings of migrants were made by DRC at the TRCs. Public Health Institutions increased inspection of respect of the protective measures (keeping the measures pretty high in the TRCs but also outside TRCs is necessary to be done). So far, 7 COVID-19 cases have been officially confirmed among migrants, refugees and asylum seekers. Those staying in reception centers are being monitored and tested. Movement restriction measures apply both inside and outside reception centers.⁵ A new tent camp in Lipa, run by IOM has isolation zones for suspected COVID-19 cases.

The FA services provision has changed in the reporting period since the outset of the SARS COVID-19 pandemic, and only most urgent cases were treated due to the orders for physical and social distancing. The following

Table 3. *FA interventions as well as personal protective equipment (PPE) provided in the reporting period by Mobile Teams*

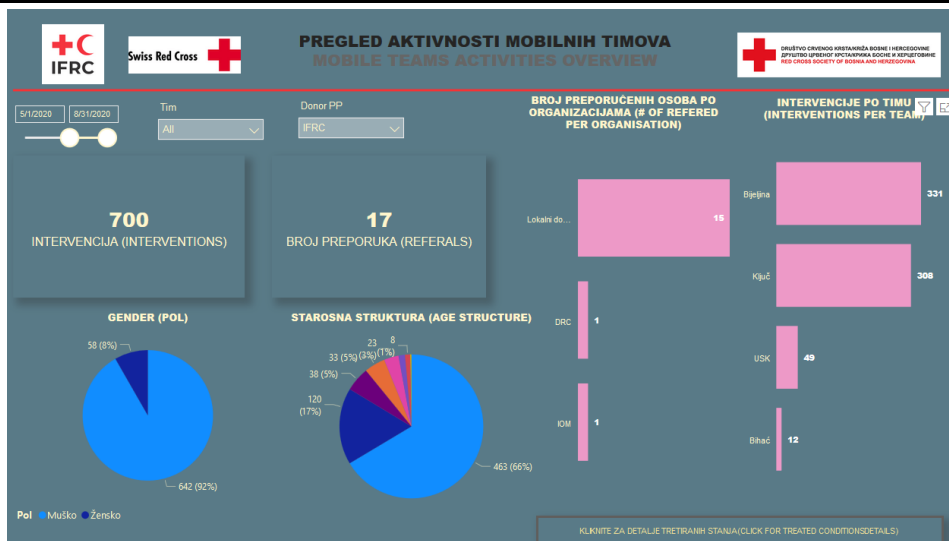
	First Aid services	Masks	Disinfectants	Gloves	Info Leaflets
MT BIHAĆ	12	266	70	220	417
MT BIJELJINA	331				
MT USC	49				
MT KLJUČ	308	61	22		
MT MOSTAR	N/A	70	29	2	2
TOTAL	700	379	121	222	419

Graph 5: *First Aid interventions by Mobile Teams*

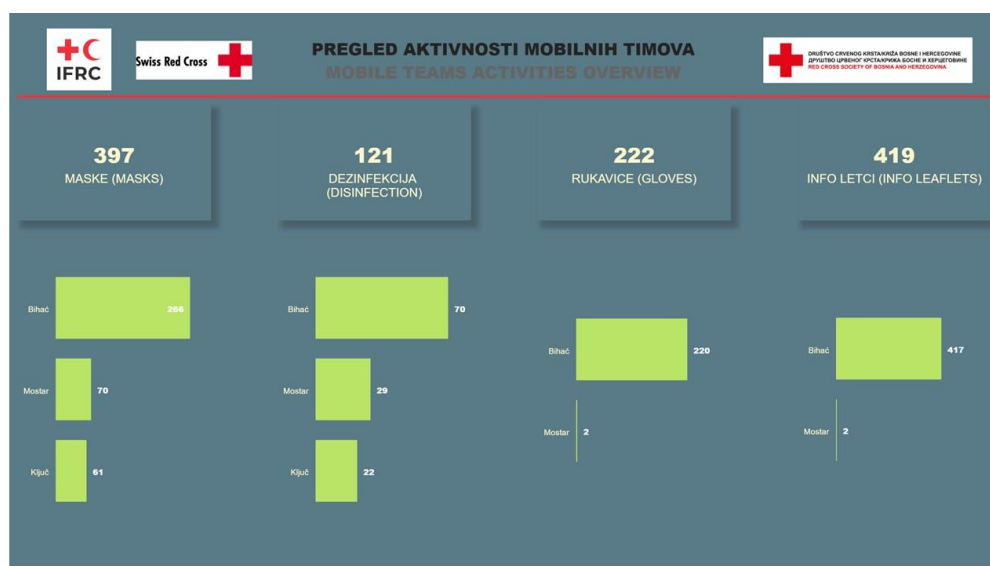
The RCSBiH has participated in the Field research - access of migrants to health and care services in Balkan countries, conducted in cooperation between the IFRC RoE, World Health Organization and Pecs Medical University together with the National Societies of Bosnia and Herzegovina, Monte Negro, Serbia and North Macedonia. The RCSBiH conducted the research in Sarajevo at the TRC Blažuj, as well as at the Railway station, supported by the IFRC and Norwegian Red Cross.

The RCSBiH Mobile Teams provided FA assistance to 700 persons outside the TRCs, as well as PSS services to 7,610 persons.

⁵ <https://data2.unhcr.org/en/documents/download/76250>



Graph 6: Overview of personal protective equipment (PPE) provided in the reporting period by Mobile Teams



Challenges

- Insufficient financial or in-kind support to cover growing needs which have increased due to significant increase of arrivals.
- Lack of FA materials/replenishments.
- Lack of access/opportunities to engage with migrants.
- Limited number of trained NS staff, lack of transportation means to be used for MT activities
- Limited quantities of relief/FA materials available for use/distribution by MTs on the ground
- Insufficient experienced medical staff to relieve current staff and ensure rotation in shifts
- Insufficient supply of water for hygiene purposes and extremely poor sanitation conditions posing huge health risks
- Many cases of scabies
- Restrictive measures by the Governments at all levels due to COVID-19
- The delay in the procurement processes occur due to Covid-19 restrictions that hinder the tendering. Another issue were the NS capacities and availability of the suppliers in the country.



Water, sanitation and hygiene

People reached: 6,757

Male: 80%

Female: 20%

Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities.

Indicators:	Target	Actual
# of people reached with key messages to promote personal and community hygiene	15,000	0

Output 1.1: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population

Indicators:	Target	Actual
# of people reached with hygiene promotion activities	15,000	N/A
# of volunteers involved in hygiene promotion activities (target TBC)	50	N/A

Output 1.2: Hygiene-related goods which meet Sphere standards and training on how to use those goods is provided to the target population

Indicators:	Target	Actual
# of sets of essential hygiene items distributed	30,000	6,757

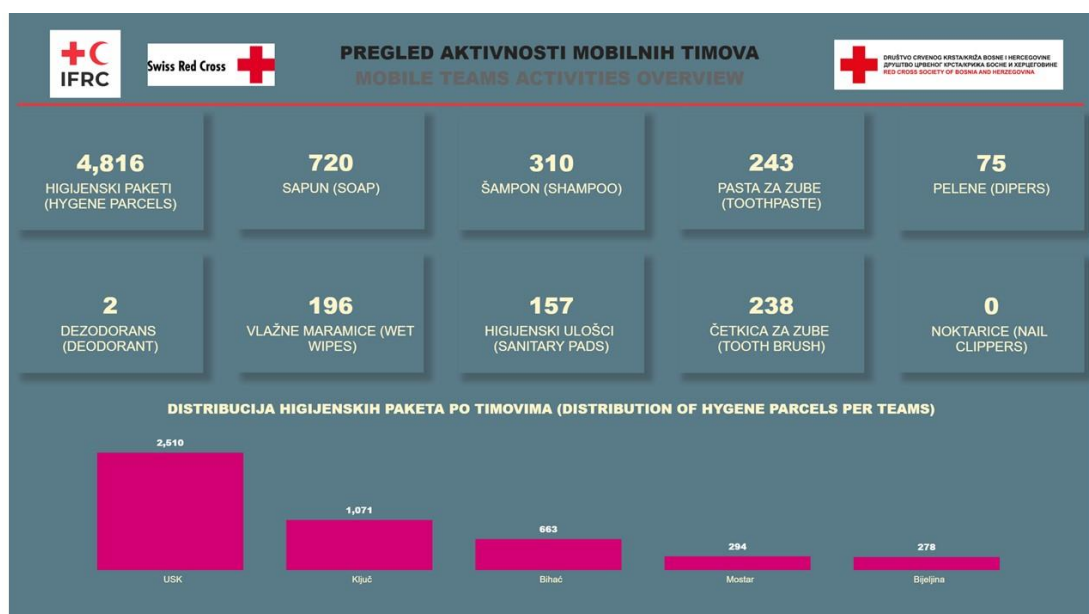
Progress towards outcomes

In the reporting period, the RCSBiH Mobile Teams provided the following hygiene items: 4,816 hygiene parcels as well as 1,941 individual hygiene items: 720 soaps; 310 shampoos; 243 toothpaste; 238 toothbrushes; 2 deodorants; 196 wet wipes; 157 sanitary pads and 75 diapers.

Following the recommendations of the IFRC Health delegate, RCSBiH has started designing a brochure with the basic First Aid steps, Health & Hygiene procedures, such as hand washing, prevention of scabies, etc. It will be translated in 5 different languages (Urdu, Farsi, Arabic, Pashtu and English). The brochures will be delivered to all Red Cross mobile teams and will be used during MT humanitarian and health assistance.

At the Inter-Agency Coordination meeting organized by the UNHCR Office for Southeastern Europe and the IOM held via WebEx platform on 03 July 2020, where the information regarding the refugee/migrant situation in BiH were exchanged, it was emphasized there was the need for WASH activities to be increased both in TRCs and outside TRCs.

Graph 7: Hygiene items distributed by Mobile Teams



Challenges
<ul style="list-style-type: none"> Limited number of trained volunteers. Poor sanitation conditions in checkpoint Velečevo (Ključ).



Protection, Gender and Inclusion

People reached: 18,525

Male: 80%

Female: 20%

Outcome 1: Outcome 1: Reduce harm and exposure to protection risks and strengthen wellbeing of affected population		
Indicators:	Target	Actual
# of people reached with services for protection assistance	5,000	4,725
Output 1.1: Mainstreaming protection in the response		
Indicators:	Target	Actual
# of people reached with services for protection assistance	5,000	4,725
# of NS staff and volunteers trained on protection	50	35
PGI Output 1.2: Strengthening outreach and protection monitoring		
	Target	Actual
# of people reached with Mobile Teams outreach services	10,000	18,525
PGI Output 1.3: strengthen the position of the NSs among protection actors		
	Target	Actual
# of people reached with RFL services (NS staff and volunteers)	50	22
Progress towards outcomes		
<p>A CEA/Protection survey has been developed in conjunction with the mobile teams to pro-actively collect feedback from people migrating through Bosnia. The KoBo survey has been finalized and is now waiting to be piloted prior to roll-out.</p> <p>SOPs were revised and disseminated to mobiles teams to strengthen their response to the people on the move and have in place protection standards. SOPs were translated into the local language and revised by the teams. Induction training planned for volunteers would support the team in the roll-out the procedures, which was not finalized but it is expected to be done in the coming period.</p> <p>PGI standards were also included in the cash component to have in place, basic referral mechanisms for those in need of specialized services. The cash assessment was also revised, and observation criteria were included in the assessment.</p>		



Migration

People reached: 4,725

Male: 80%

Female: 20%

Outcome 1: Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)		
Indicators:	Target	Actual
# of people reached with services for migration assistance and protection	5,000	4,725
Output 1.3: "Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster"		
Indicators:	Target	Actual

# of NS staff and volunteers trained on and protection	50	20
Output 1.4: Enhancing referral mechanisms		
Indicators:	Target	Actual
# of people reached with RFL services	2,500	4,258
Progress towards outcomes		
<p>RFL activities continued as in the previous reporting period. The NS RFL teams also provided daily information and were doing promotion of RFL and TTF services. ICRC Delegation is in continuous contact with NS and is providing technical support to NS RFL team. The additional staff/volunteers were equipped with RFL bags/equipment in order to increase RFL assistance on the ground.</p> <p>The vast majority of migrants have smart phones, with the vast majority of migrants using Viber, WhatsApp and FB to communicate with each other and their families, as well as to access information, news and entertainment. From January 2019 onwards, all TRCs have had internet access, through support provided by different organizations. However, due to the number of people accommodated in some centers, the internet is not accessible to all at all times. Internet access is critical for migrants, and as well as providing a critical link between families and loved ones, also represents an opportunity to reach people with practical life-improving and life-saving information – points that were picked up in the initial IFRC PGI-IM_CEA assessment in 2019. Recommendations were made for mobile teams to provide mobile Wi-Fi access through a dongle enabling those they attend to contact their families and travelling companions. Teams are also equipped with mobile phone chargers to help those whose batteries have run out. Recommendations have also been made to promote internet links to key sites providing useful information (First Aid and Health advice, language support, legal advice etc.) to migrants.</p> <p>In the reporting period Mobile Teams provided 14 RFL services, including 4,244 interventions of mobile phone charge service. The Mobile Teams also made 178 referrals (Social Welfare Centers, Health Institutions/Hospitals, IOM, UNHCR, Save the Children, Others).</p>		
Challenges		
<ul style="list-style-type: none"> • Number of trained volunteers. • Lack of financial means. 		

Strengthen National Society		
Outcome 1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform		
Indicators:	Target	Actual
# of volunteers engaged in implementation	150	155
Output 1.1.4: National Societies have effective and motivated volunteers who are protected		
Indicators:	Target	Actual
# of volunteers insured	150	134
# of PS sessions held for MT volunteers	4	0
# of volunteers reached with PSS	30	30
Output 1.1.7: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened		
Indicators:	Target	Actual
# of vehicles procured	5	3
# of Mobile teams established	5	11
# of NS staff participating in Emergency Needs Assessment training	5	1
# of NS volunteers trained (Mobile team members)	50	70
# of interventions of the Mobile teams	1,000	18,525

Progress towards outcomes
Another PGI-CEA-IM training was planned to be held in Bihać but due to COVID-19 restrictions in place in Bosnia and Herzegovina it had to be postponed.
Due to the complex setting in which volunteers work, it is necessary to provide PSS services to those volunteers to cope with the stressful situations they encounter every day, this will be considered for the upcoming months.

International Disaster Response		
Outcome 2.1: Effective and coordinated international disaster response is ensured		
Indicators:	Target	Actual
# of number of surge deployments that strengthened the NS capacity	6	6
Output 2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained		
Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved		
Indicators:	Target	Actual
70% of target population satisfied with level of consultation, information and involvement in the operation	70%	To be implemented in the upcoming period
70% of target population satisfied with support received	70%	To be implemented in the upcoming period
# of trainings completed	3	2 (Combined Mobile Teams Training, PGI-CEA-IM Training, PMER Training, Procurement and Logistics completed)
# of trained staff	40	20
# Surveys carried out	4	To be implemented in the upcoming period
# feedbacks that are received and resolved	20	To be implemented in the upcoming period
70% of service users satisfied with feedback/complaints system	100%	To be implemented in the upcoming period
Output 2.1.4: Supply chain and fleet services meet recognized quality and accountability standards		
# of staff and volunteers with enhanced knowledge on logistics and procurements (target TBC based on trainings provided)	n/a	2
Outcome 2.2: The complementarity and strengths of the Movement are enhanced		
Indicators:	Target	Actual
Number of coordination meetings/Skype calls with the Movement.	n/a	9
Output 2.2.1: In the context of large-scale emergencies the IFRC, ICRC and NS enhance their operational reach and effectiveness through new means of coordination.		
Indicators:	Target	Actual
# number of Movement Partners participating	10	15
Output 2.2.5: Shared services in areas such as IT, logistics and information management are provided		
Indicators:	Target	Actual
# of NS staff and volunteers with enhanced knowledge on information management	50	30
Number of virtual platforms and tools that have been implemented	2	2
Output S2.1.6: Coordinating role of the IFRC within the international humanitarian system is enhanced		
Indicators:	Target	Actual
# of coordination meetings	n/a	0
# of case studies developed and shared with wider audiences	n/a	0

Progress towards outcomes		
<p>During the reporting period, preparation work for CVA program (vouchers distribution) took place for the actual; distribution to start in Sep 2020. Following the cash transfer, NS is planning a post-distribution monitoring. Before the end of the year.</p> <p>NS Staff in place trained and educated on principles and rules of IFRC operations in order to alleviate misunderstanding and confusion when it comes to realization and implementation of activities financed by IFRC.</p>		
Challenges		
<ul style="list-style-type: none"> • Insufficient capacities of the NS to conduct surveys among staff and volunteers as well as target population • COVID-19 restrictions has caused cancellation of trainings and some physical group meeting which have not been carried out as planned 		

Influence others as leading strategic partner		
Outcome 3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.		
Indicators:	Target	Actual
Number of newsletters, press releases and reports.	n/a	
Output 3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues		
Number of NS staff trained in comms	n/a	2
Output 3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming		
Number of evaluation reports	1	n/a
Outcome 3.2: The programmatic reach of the National Societies and the IFRC is expanded.		
Output S3.2.1: Resource generation and related accountability models are developed and improved		
# of NS staff with enhanced knowledge on PMER	40	4
Progress towards outcomes		
Reporting tool for FA teams is under development.		

Effective, credible and accountable IFRC		
Outcome 4.1: The IFRC enhances its effectiveness, credibility and accountability		
Output 4.1.2: IFRC staff shows good level of engagement and performance		
Indicators:	Target	Actual
# of IFRC technical experts supporting the NS in implementation	n/a	8
Output 4.1.3: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders		
Indicators:	Target	Actual
# of financial reports following the IFRC standards	7	See progress below
Progress towards outcomes		
<p>Technical assistance from IFRC ROE was provided since the beginning of the implementation of the Emergency Appeal on operational management, Community Engagement and Accountability (CEA), disaster preparedness, information management, communications, protection gender and inclusion, planning, monitoring, evaluation and reporting, finance and procurement during technical staffs` mission to country.</p>		

D. BUDGET

The interim financial report is [annexed](#) to this report.

Contact information

For further information, specifically related to this operation please contact:

Reference documents

Click here for:

[Previous Appeals and updates](#)

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How we work

All IFRC assistance seeks to adhere to the [Code of Conduct](#) for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the [Humanitarian Charter and Minimum Standards in Humanitarian Response \(Sphere\)](#) in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and **peace**.

Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2018/12-2020/08	Operation	MDRBA011
Budget Timeframe	2018-2020	Budget	APPROVED

Prepared on 29 Sep 2020

All figures are in Swiss Francs (CHF)

MDRBA011 - Bosnia and Herzegovina - Population Movement

Operating Timeframe: 07 Dec 2018 to 08 Dec 2020; appeal launch date: 07 Dec 2018

I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	0
AOF2 - Shelter	342,000
AOF3 - Livelihoods and basic needs	1,360,000
AOF4 - Health	152,000
AOF5 - Water, sanitation and hygiene	231,000
AOF6 - Protection, Gender & Inclusion	62,000
AOF7 - Migration	77,000
SFI1 - Strengthen National Societies	426,000
SFI2 - Effective international disaster management	250,000
SFI3 - Influence others as leading strategic partners	170,000
SFI4 - Ensure a strong IFRC	730,000
Total Funding Requirements	3,800,000
Donor Response* as per 29 Sep 2020	1,524,873
Appeal Coverage	40.13%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	43	43	0
AOF2 - Shelter	0	0	0
AOF3 - Livelihoods and basic needs	855,110	846,549	8,561
AOF4 - Health	109,668	2,139	107,529
AOF5 - Water, sanitation and hygiene	11,934	0	11,934
AOF6 - Protection, Gender & Inclusion	11,881	53	11,828
AOF7 - Migration	86,907	65,470	21,437
SFI1 - Strengthen National Societies	238,667	118,027	120,640
SFI2 - Effective international disaster management	37,213	6,892	30,322
SFI3 - Influence others as leading strategic partners	8,995	1,248	7,747
SFI4 - Ensure a strong IFRC	164,838	51,183	113,655
Grand Total	1,525,256	1,091,603	433,653

III. Operating Movement & Closing Balance per 2020/08

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	1,524,873
Expenditure	-1,091,603
Closing Balance	433,270
Deferred Income	0
Funds Available	433,270

IV. DREF Loan

* not included in Donor Response	Loan :	300,000	Reimbursed :	300,000	Outstanding :	0
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Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2018/12-2020/08	Operation	MDRBA011
Budget Timeframe	2018-2020	Budget	APPROVED

Prepared on 29 Sep 2020

All figures are in Swiss Francs (CHF)

MDRBA011 - Bosnia and Herzegovina - Population Movement

Operating Timeframe: 07 Dec 2018 to 08 Dec 2020; appeal launch date: 07 Dec 2018

V. Contributions by Donor and Other Income

Opening Balance							0
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
American Red Cross	149,343				149,343		
British Red Cross	284,712				284,712		
Bulgarian Red Cross	2,500				2,500		
China Red Cross, Hong Kong branch	25,407				25,407		
Croatian Red Cross			4,037		4,037		
Iraqi Red Crescent Society	2,005				2,005		
Irish Red Cross Society	38,472				38,472		
Italian Red Cross	49,108				49,108		
Japanese Red Cross Society	90,380				90,380		
New Zealand Red Cross	1,672				1,672		
Norwegian Red Cross	159,055				159,055		
On Line donations	285				285		
Red Cross of Monaco	22,640				22,640		
Slovenia Government	43,598				43,598		
Swedish Red Cross	195,739				195,739		
The Canadian Red Cross Society (from Canadian Gov	119,153				119,153		
The Netherlands Red Cross (from Netherlands Govern	336,765				336,765		
Total Contributions and Other Income	1,520,836	0	4,037	0	1,524,873	0	
Total Income and Deferred Income					1,524,873	0	