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Cover photo: A Sudanese refugee is temporally accommodated with her husband and children in UNHCR Humanitarian Centre in Agadez. The Centre opened in 2017 and by July 2021, UNHCR and its partners had biometrically registered more than 1,400 people in need of international protection who came through the Centre. January 2022.

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Foreword

Having served as UNHCR's Special Envoy for the Central and Western Mediterranean Situation for nearly five years, I continue to be appalled by the abuses that refugees and migrants consistently face as they travel along routes through the Sahel and the East and Horn of Africa towards North Africa, and sometimes on to Europe. Too many lives have been lost or broken on these routes where essential life-saving protection services are almost nonexistent apart from humanitarian prevention and response efforts of a few dedicated actors who need and deserve our collective support.

We need to do more to prevent abuses and improve the provision of protection services all along these routes. This research is a modest contribution by UNHCR and its partners to clearly map the services available to asylum-seekers, refugees and migrants who have suffered or are at constant risk of unspeakable abuses, including trafficking and aggravated smuggling in specific locations, along the heavily trodden migratory routes of the Central and Western Mediterranean as well as the Atlantic route to the Canary Islands.

We will endeavor to keep this information updated and to disseminate it in the languages of the countries concerned with a view to improving access to services and tailored protection responses which can provide alternatives to dangerous journeys. In this edition, we have updated information on Burkina Faso, Chad, Djibouti, Niger, Mali, Somalia, and Sudan and have added new sections on services available in Cameroon, Ethiopia, Côte d'Ivoire, Mauritania, and Morocco. The current situation in Ethiopia, however, has not allowed us to conduct a comprehensive mapping beyond Addis Ababa.

In the second part of 2022, we will make some of this information available and accessible in the various languages of people on the move¹ to encourage them to reflect more on the risks they take, and to consider the alternative solutions available to them, if and where they exist. While we recognize that the provision of information, taken alone, can only serve to increase the awareness of the risks and may not necessarily change the intentions of those who are already on the move, their increased knowledge of risks, services, and the credible alternatives available has

¹ For the purpose of this mapping report, the term 'people on the move' is taken to include asylum seekers, refugees, and migrants. The term is used interchangeably in this report with 'refugees and migrants.'

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the potential of reducing unnecessary dangerous journeys, while opening the door to adapted responses. In making this information available, we also recognize that for some people, staying where they are (in their home countries or countries of asylum or transit) may involve greater risks than embarking on dangerous and uncertain journeys to cross borders.

While some organizations are providing valuable protection and assistance along the routes, the report highlights that there are some key gaps in services in geographical locations that present clear risks for people on the move.

This report will hopefully also assist donors to target resources to areas and the (often local) actors best placed to provide the essential services needed by survivors of abuses and other vulnerable people on the move. These actors need to be capacitated in ways that recognize and address the different constraints they face and build on the added value they bring in terms of knowledge of local environments and access to services. Local actors also often have a unique capacity to build trust with and among survivors, local authorities, and communities. These efforts must be sustainable and not ad hoc on a project-by-project basis. They must also be based around specific routes, specific critical locations and key intermediary cities and municipalities. They may also need to involve some form of twinning partnerships with more experienced cities and municipalities in other parts of the same route, and/or with mandated organizations and partners to whom referrals can be made. While the first edition of this report published in June 2021² did not generate significant response from donors to support key local protection service providers, it is hoped that this edition will, and we look forward to engaging with and encouraging donors in their funding decisions to support this very worthy

I sincerely thank all the organizations and partners who shared information with us in this mapping process for their valuable time and inputs. I also wish to thank donors, who provided UNHCR with the unearmarked funds that enabled us to undertake this study.

Vincent Cochetel

UNHCR Special Envoy for the Central & Western Mediterranean Situation June 2022

Introduction

Each year, thousands of refugees and migrants are subjected to horrific abuse as they move along different routes within the Sahel and East Africa, and towards North Africa and sometimes on to Europe.³ This includes being subjected to repeated gender-based violence (GBV), kidnappings for ransom, being left for dead in the desert, and many forms of physical and psychological abuse by a range of perpetrators including smugglers, traffickers and sometimes State actors.

UNHCR is entrusted with the global mandate to provide international protection and assistance to refugees, asylum-seekers and other persons who come within its mandate,4 and to find, together with governments, solutions to their problems. The work of UNHCR is entirely non-political, humanitarian, and social in character. UNHCR does not have a law enforcement or security mandate but has an interest and responsibility to act where serious crimes are committed against refugees, asylumseekers, and others of concern, including killings, GBV and trafficking in persons. In 2017, The High Commissioner, Filippo Grandi, addressed the UN Security Council and called for collective action to tackle the horrific abuses along the Central Mediterranean route and an end to the impunity of traffickers,⁵ a call he repeated to the Security Council in 2020.⁶

In July 2020, UNHCR and the Mixed Migration Centre (MMC) released a joint report highlighting the range of abuses refugees and migrants face as they travel along routes through West and East Africa to Libya and Egypt.⁷ The report highlighted the primary locations along the routes

² UNHCR, Mapping of Protection Services for Victims of Trafficking and Other Vulnerable People on the Move in the Sahel and East Africa, June 2021, available at: https://www. unhcr.org/protection/migration/60ded10b4/mapping-protection-services-victimstrafficking-other-vulnerable-people.html

³ UNHCR and Mixed Migration Centre, "On this journey, no one cares if you live or die": Abuse, protection, and justice along routes between East and West Africa and Africa's Mediterranean coast, July 2020, available at: https://www.unhcr.org/protection/ operations/5f2129fb4/journey-cares-live-die-abuse-protection-justice-along-routes-eastwest.html

⁴ UNHCR, Note on The Mandate of the High Commissioner for Refugees and His Office, October 2013, available at: https://www.refworld.org/docid/5268c9474.html

⁵ UNHCR, Statement to the United Nations Security Council, 2 November 2017, available at: https://www.unhcr.org/admin/hcspeeches/59fb25ad4/statement-united-nationssecurity-council.html

⁶ UNHCR, Briefing to the United Nations Security Council, 18 June 2020, https://www. unhcr.org/admin/hcspeeches/5eebac3a4/briefing-united-nations-security-council.html

⁷ UNHCR and Mixed Migration Centre, "On this journey, no one cares if you live or die": Abuse, protection, and justice along routes between East and West Africa and Africa's Mediterranean coast, July 2020, available at: https://www.unhcr.org/protection/ operations/5f2129fb4/journey-cares-live-die-abuse-protection-justice-along-routes-eastwest.html

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where refugees and migrants reported that deaths, gender-based violence (GBV), kidnapping, and physical violence took place, based on survey data collected by the MMC's Mixed Migration Monitoring Mechanism Initiative (4Mi) team in 2018 and 2019. In addition to deaths and violence reported in Libya, refugees and migrants also reported multiple episodes of violence as well as many deaths along the routes through the Sahel and the East and Horn of Africa.

UNHCR and MMC made a series of recommendations on other steps to break the cycle of abuse and increase protection along the journey. These recommendations included increasing access to legal aid for survivors of abuses, strengthening cross-border cooperation between law enforcement actors, and providing viable alternatives to these dangerous journeys by enhancing efforts to improve access to education and employment in the region.

Following evidence and recommendations in that report, in June 2021, UNHCR mapped the availability of selected protection services in key locations in Central, West, North Africa and in the East and Horn of Africa along routes heading to North Africa, notably to Libya and Egypt, as well as to Italy, Spain (including the Canary Islands) and Yemen⁸. It aimed to complement similar mapping undertaken in the North Africa region, such as the UNHCR MENA Community Protection Network map.

This updated 2022 mapping report continues to reveal that protection services for survivors of abuses along the route remain extremely limited in some key locations. For example, little is available in the way of safe shelters for victims of trafficking or survivors of other abuses in Sudan, with only two facilities in the whole country, which are both in Kassala in the east of the country. Similarly, specific support for access to justice for survivors of various forms of abuses is rarely available anywhere on the routes, while in several key mixed movement locations (such as in Dongola in northern Sudan, Ounianga-Kebit and Faya-Largeau in northern Chad, and in areas in Mali and Niger bordering Algeria or Libya), there are almost no protection services available to survivors of abuses. These locations are often the last stops before refugees and migrants embark on further dangerous journeys across the Sahara Desert. They present a critical opportunity for people, who may have already been subjected to abuses at the hands of state and/or non-state actors, to get help and to access protection instead of, and as an alternative to, moving onward to risk crossing the desert in the hands of unscrupulous human smugglers and traffickers. People expelled from some North African countries (Libya and Algeria) are abandoned in these locations, leaving them in vulnerable,

and often life-threatening situations. Identification and profiling capacities and support for victims of trafficking are generally very limited in these remote areas and all along the routes.

The people undertaking these routes through Central, West, and North Africa and the East and Horn of Africa vary greatly in their profiles, reasons for moving, their intentions, vulnerabilities, and their needs for protection services. They include refugees, asylum-seekers, victims of trafficking, unaccompanied or separated children, and migrants fleeing poverty. Their protection profile may evolve during a journey where circumstances can change quickly for the worse and without warning, where people are rendered helpless. In this fluid and treacherous context, this mapping of services focuses on helping people on the move to access protection services based on their vulnerabilities and needs rather than on their status. We hope that this vulnerability and needs based approach will contribute to greater availability of services for all, as well as increased efforts for identification and referral. With this mapping, UNHCR aims to support increased referrals to protection services, including across borders, to highlight areas where further resources are needed to address gaps in existing (protection) services, and to increase refugees' and migrants' awareness and use of the support available along the routes.

⁸ UNHCR, Mapping of Protection Services for Victims of Trafficking and Other Vulnerable People on the Move in the Sahel and East Africa, June 2021, available at: https://www.unhcr.org/protection/migration/60ded10b4/mapping-protection-services-victims-trafficking-other-vulnerable-people.html



Methodology

The mapping was commissioned by the Office of the Special Envoy for the Central and Western Mediterranean Situation and undertaken by an expert consultant between November 2020 and February 2022. It covers 12 countries: Burkina Faso, Cameroon, Chad, Côte D'Ivoire, Djibouti, Ethiopia, Mali, Mauritania, Morocco, Niger, Somalia, and Sudan. Mapping was conducted through remote interviews with UNHCR staff and partners and with other organizations and stakeholders to identify the key locations where refugees and migrants on the move transit or may seek assistance, and to take an inventory of the structures, capacities, and services available in these locations. In some locations, other actors had already undertaken similar mapping exercises, while in other countries, no similar work had yet been done. The mapping also draws on work previously done by the Regional Safe Spaces Network in the Americas⁹ and focuses mostly on eight categories of protection services for survivors:

- Identification and outreach
- Access to asylum procedures
- · Safety mechanisms, including safe shelter
- Legal support, including regarding access to justice
- Healthcare
- Mental health and psychosocial support
- GBV support services; and
- Child protection services

The report stemming from this mapping provides a non-exhaustive list of organizations providing services that fall under the above categories. 10 It does not specifically list all government services providers in the identified locations that provide services to refugees and migrants. However, some government service providers are included based on the information provided in interviews regarding existing referral pathways.

A Malian refugee teacher and advocate in south-eastern

⁹ UNHCR and Regional Safe Spaces Network, The Regional Safe Spaces Network in the Americas: Lessons learned and toolkit, June 2018, available at: https://www.acnur.org/publications/pub_ prot/5c05b97d4/the-regional-safe-spaces-network-in-the-americas-lessons-learned-and-toolkit.

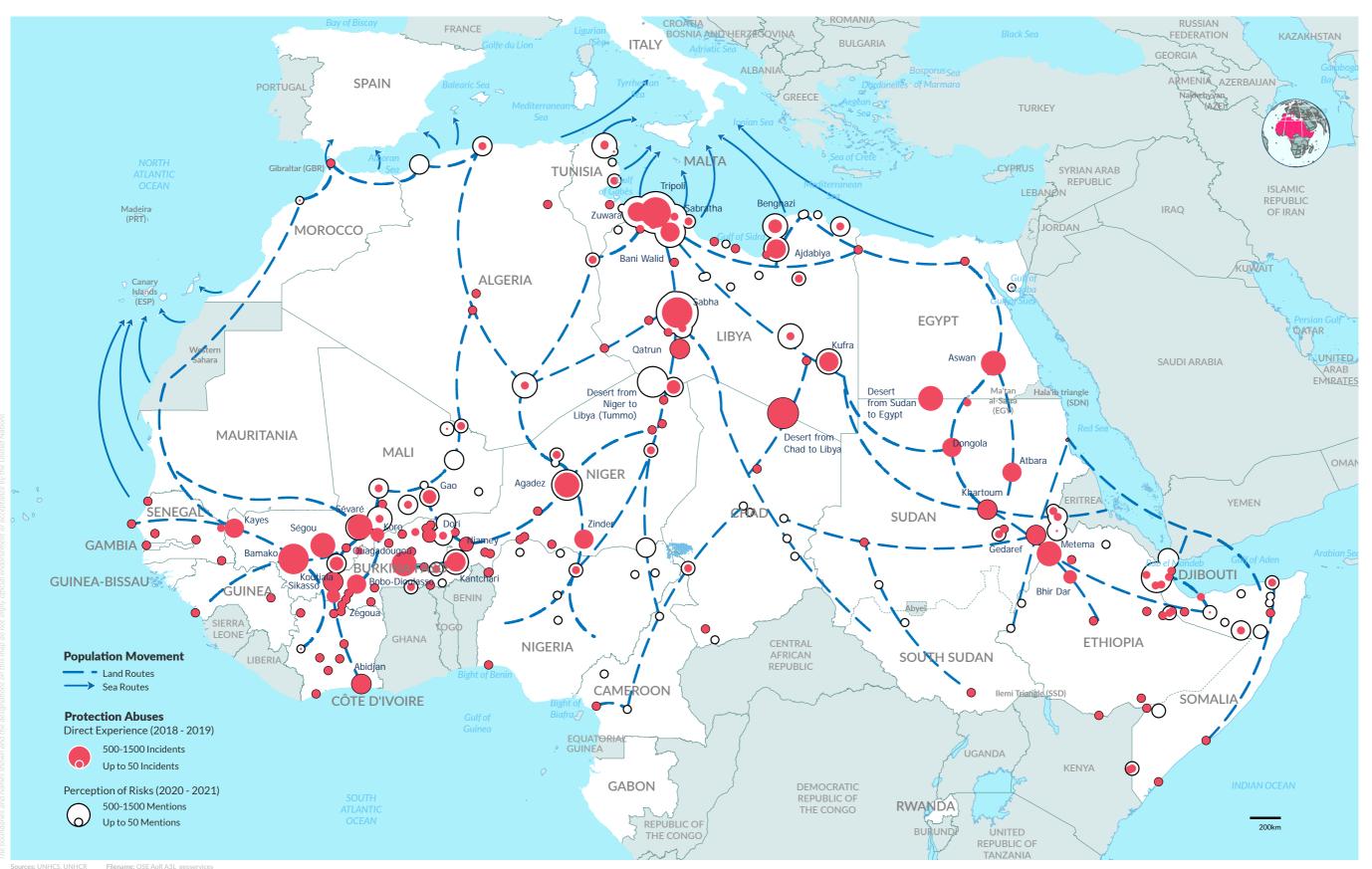
¹⁰ It does not include all organizations providing other forms of humanitarian assistance.

MAP1 • Routes within Africa towards North Africa and Europe, and reported abuses and perception of risks along the routes

CÔTE D'IVOIRE

D.JIBOUTI

BURKINA FASO CAMEROON



This map is based on 48,000 4Mi surveys by the Mixed Migration Centre with refugees and migrants in North Africa (Libya, Tunisia, and Sudan) West Africa (Niger, Mali, and Burkina Faso) and East Africa (Kenya, Somalia, Djibouti, and Ethiopia), collected between 2018-2021. Data from 2018-2020 focus on experiences with specific protection violations such as sexua physical violence and death, while data from 2021 focuses on the perception of risks to those same violations Mapping and analysis completed by UNHCR

Annex

SOMALIA

4Mi survey data and dashboard:



L I was living in a refugee camp in Sudan. Everyone knows there is no work in the camp. Education is very poor and healthcare as well. Services are not like in the city. I left alone and my family stayed in the camp. It was a very hard feeling that you can't describe. I was going on a journey full of dangers and anything could happen to me. He can sell you or do anything to you and you are powerless. In the end all they want is money. They tell you to call your family to pay the ransom. *Until the money or the things* they want from you arrive, they torture you and beat you.

They keep torturing you and the pain get very bad. You just feel that you are dead anyway. Sometimes you couldn't walk, and even when I was standing, I was shaking. It was a hard time. You can still see the scars on my body. They would use sticks and guns. And they even electrocuted some people. They used to heat rubber to burn the skin. I advise that before you take the decision. to think a thousand times about your family and yourself. Before you die at sea, you will die a thousand deaths inside a warehouse.



—Eritrean refugee interviewed by Telling the Real Story in Tunisia in 2021.

Observations

Among the key services where gaps seem to be recurrent is the provision of safe temporary shelter. Providing shelter can, if properly adapted, enable proactive and early identification of vulnerabilities and/or survivors of abuses. It can also facilitate the provision of core relief items, psychological first aid and counselling, and referrals can be made for emergency medical care and to other services as needed. Without the availability of some form of safe temporary shelter in key locations, the immediate protection of survivors is likely to remain elusive, if not theoretical. However, even when the provision of shelter is possible, managing these shelters for survivors poses numerous practical challenges in terms of resources and capacity. More community-based innovative shelter solutions and safe spaces for specific population groups could also be explored to improve protection capacities on the ground.

Another key gap highlighted is the provision of legal assistance. For example, survivors of trafficking should not be subject to arrest, detention, or prosecution, nor should they be penalized or otherwise punished for illegal conduct they may have engaged in or have been associated with as a direct consequence of being trafficked. However, knowing that traffickers often use their victims as shields against prosecution and to enjoy impunity, legal services for survivors are much needed in the interests of access to justice and remedies. These services would seek to safeguard the rights of survivors / potential witnesses, and to encourage them to report and participate in prosecutions to break the cycle of impunity. Incidents of abuse and extortion by State officials along migratory routes are also reported, and legal assistance is key to enable survivors of these abuses to bring the perpetrators to justice.

Along the routes used for mixed movements, there are clear links between human trafficking and violence against women. Stakeholders highlighted the lack of specialized services and assistance measures for female survivors. The absence of differentiated approaches to solutions for female survivors is problematic, as it tends to deny the GBV and

¹¹ The Inter-Agency Coordination Group against Trafficking in Persons (ICAT), Issue Brief: Non-punishment of Victims of Trafficking, August 2020, available at: https://www.unodc.org/documents/human-trafficking/ICAT/19-10800_ICAT_Issue_Brief_8_Ebook.pdf

gender dimension of human trafficking. This means that in addressing solutions, assisted voluntary return to their home countries cannot be the only solution considered, as it may lead to risks of re-trafficking upon return and the denial of international protection needs in situ.

The report makes a clear case for the need to increase access to information on available services for people on the move who have survived abuses or who are otherwise particularly vulnerable. Information can be empowering as it informs people about their rights and the options available to them, including to seek justice. Making information available does not, however, happen 'organically.' It requires targeted efforts by the relevant service providers and their partners, with support from donors and diasporas, using all available channels, including social media. This often involves comprehensive and inclusive strategies for communication with communities, who may view these dangerous journeys from different perspectives. However, the important thing is to inform diverse communities of the support available for those who need it. 12 Such communication efforts and the implementation of survivor- centered case management approaches are essential to enable survivors' disclosure and safer identification of specific needs and to step up efforts for more robust preventive strategies.

There is also a need for more information and communication on (albeit limited) safe and legal pathways that constitute viable alternatives to dangerous journeys. Too often, the focus of communication efforts is on preventing irregular journeys, and more resources are needed to strengthen complementary pathways for those in need of international protection and regular pathways for those fleeing poverty, natural disasters, or a lack of economic opportunities, and to inform people of their existence.

During the mapping exercise, participants made several key observations regarding the availability of services and access to support, as follows:

• More efforts are needed to ensure that more refugees and migrants on the move make use of the available protection services: Several interviewees noted that most beneficiaries of existing protection services are not people who are still on the move. In fact, many of the people who access the services listed here are reportedly those on the journey back, such as returnees or people waiting for Assisted Voluntary Return and Reintegration (AVRR) or people who have stopped for some time to work and make some money to continue their journey. Two recent studies suggested that people on the move along part of this route may often be reluctant to seek services for fear that they will be prevented or dissuaded from moving onwards or be detained and ultimately deported.¹³ While a variety of outreach and identification strategies are used by different organizations in the region covered in this mapping exercise to reach people on the move, more efforts could be made in this regard. Further examination is required of the strategies proving most effective and what service providers can do to gain the trust of people who most need the available protection and assistance and to ensure that they can access services in practice. For example, increased community-based approaches and remote support could be integrated in key protection services.

- Limited availability of shelter, as well as access to safety mechanisms: The number of shelters for survivors of abuses or particularly vulnerable people along the routes is very limited. Often, available shelters are for people awaiting AVRR and are in urban centres, with little availability for people who do not fall into this category. Safety mechanisms, in particular safe shelters that can be used for those facing high risks, including those pursuing access to justice, are even more limited with only two safe shelters, both in eastern Sudan.
- Lack of services in key areas: Services are very limited and need to be strengthened in some key areas along routes towards North Africa. These include in:
 - >> northern Sudan, areas such as Dongola and Atbara, last stops before crossing the desert; as well as the area known as the 'triangle' (a three-day car journey from Dongola) where people expelled from Libya arrive;
 - >> remote border areas of Mali and Niger along the edge of the Sahara Desert, where people returning or expelled arrive in a vulnerable situation with few or no services nearby;
- >> northern Chad and Abéché, in the East; and
- >> Somalia, areas along the Ethiopian border and in coastal areas of Somaliland, where people depart for or arrive from Yemen.

¹² See UNHCR, Communicating with Communities, available at: https://www.unhcr.org/ innovation/communicating-with-communities/

¹³ Independent Monitoring, Rapid Research and Evidence Facility (IMREF), Exploring migrants' trust in humanitarian organizations, March 2021, available at: https://reliefweb. int/report/world/exploring-migrants-trust-humanitarian-organisations-march-2021; and Danish Institute for International Studies (DIIS), Does information save migrants' lives? March 2021, available at: https://www.diis.dk/en/event/does-more-information-savemigrants-lives.

- Enhancing accountability and access to legal support: There is very
 little legal support available along the routes for survivors of abuses,
 especially with regard to access to justice. Similarly, it was observed
 that there are currently few mechanisms available to pursue
 accountability in the event of abuses by State actors against people on
 the move.
- Limited support for specific groups of survivors: There is currently limited support available for specific groups, such as male survivors of sexual violence and LGBTIQ+ persons. Survivors may be particularly reluctant to seek help in the absence of information of where they can do so safely, especially in the context of criminalization of same-sex relations and negative attitudes within some countries along the routes. There remains a need for specialized service provision for GBV survivors and LGBTIQ+ persons. In parallel, efforts should be made to bolster GBV identification and referral mechanisms amongst the service providers and key support agencies.
- Limited support for victims of trafficking: Services for victims of trafficking are generally very limited along the routes. Despite efforts to strengthen protection for victims of trafficking in countries including Niger, Mali, and Sudan, in general more needs to be done to identify and assist them, including by providing:
 - access to specialized shelters, emergency care and psychosocial first aid;
 - access to legal support, including support for access to justice;
 - >> stronger identification and referrals;¹⁴ including in the context of shipwrecks, interceptions and/or rescue at sea, and disembarkations;
 - access to support for male victims of trafficking, as men are often not eligible for the limited support that is available;
 - >> services that are adapted to respond to the needs of all survivors, including women, girls, men and boys, with diverse characteristics;
 - access to procedures of determination of international protection needs and legal counselling;¹⁵ and

- Solutions for survivors of trafficking including complementary and other regular pathways, such as family reunification, in addition to widening resettlement and humanitarian evacuation programmes, as well as regularization and longer-term support in the host countries.
- Strengthen identification and support for unaccompanied and separated children (UASC) and other children at risk: More needs to be done to strengthen current efforts to identify and support UASC and other vulnerable and at-risk children with relevant protection services along the routes. At present, among other initiatives, there are some efforts to provide shelter for UASC with local host families, but these efforts can be bolstered. Further efforts need to be made, inter alia, to increase access to civil status documentation, including birth registration, to reduce the protection risks experienced by children and mitigate risks of statelessness.
- Enhancing the provision of mental health and psychosocial support:
 Several partners interviewed highlighted the need for more mental
 health and psychosocial support services along the route, as existing
 services, including psychiatric care, are very limited (including for the
 local population).
- Abuses in areas where humanitarian agencies have little or no presence: There are concerns about abuses occurring in places where humanitarian agencies have little or no presence, such as in remote and inaccessible locations where people are held by smugglers, traffickers or others who detain refugees and migrants. In other hard-to-reach sites, such as gold mines, credible reports of human trafficking, child labor, and exploitation are frequent. Further support and the expansion of existing community protection networks are required to increase outreach and support. These include, for example, identification/support to community-led initiatives, such as outreach volunteers, host community associations, women, and youth groups. These initiatives may require capacity building and technical support.

¹⁴ UNHCR and IOM, Framework document on developing standard operating procedures to facilitate the identification and protection of victims of trafficking, June 2020, available at: https://www.refworld.org/docid/5ee22b4f4.html

UNHCR, Guidelines on International Protection No 7: The Application of Article 1A(2) of the 1951 Convention and/or 1967 Protocol Relating to the Status of Refugees to Victims of Trafficking and Persons at Risk of Being Trafficked, HCR/GIP/06/07, available at: https://www.unhcr.org/publications/legal/443b626b2/guidelines-international-protection-7-application-article-1a2-1951-convention.html



BURKINA FASO

Burkina Faso is a key country of origin and transit along routes towards Mali and Niger and then often onwards to North Africa. As an ECOWAS Member State, nationals of other ECOWAS Member States can stay visa-free in Burkina Faso for up to 90 days. This means that people on the move who are from ECOWAS countries can, in principle, travel legally on public transport if they hold national identification documents and valid vaccination cards. However, when borders closed in March 2020 in response to the COVID-19 pandemic, people appeared to be increasingly making use of smugglers and varying their routes. Even before COVID-19, ECOWAS citizens would rely on smugglers when they didn't have the required documentation and/or wanted support in liaising with the authorities to facilitate bribes, for example.16

According to the 4Mi data reported in the joint UNHCR-MMC report on abuses along the route through West Africa to North Africa, most incidents of physical abuse in Burkina Faso reported by refugees and migrants were allegedly perpetrated by State authorities, while most incidents of GBV were perpetrated by unknown individuals.¹⁷

UNHCR > MAPPING OF PROTECTION SERVICES FOR VULNERABLE PEOPLE ON THE MOVE, INCLUDING VICTIMS OF

UNHCR in Kaya,

¹⁶ See: Mixed Migration Centre, Players of many parts: The evolving role of smugglers in West Africa's migration economy, May 2019, available at: https://mixedmigration.org/wp-content/ uploads/2019/06/065_briefing-paper_smugglers_wa.pdf

¹⁷ UNHCR and Mixed Migration Centre, "On this journey, no one cares if you live or die: ": Abuse protection, and justice along routes between East and West Africa and Africa's Mediterranean coast," July 2020, available at: https://www.unhcr.org/protection/operations/5f2129fb4/journey-cares-live-die-abuseprotection-justice-along-routes-east-west.html

Ouagadougou and Centre region

Identification and outreach

- UNHCR has an agreement with the National Federation of Road Transport Actors for outreach to warn of the protection risks en route and the identification and referral of people on the move in need of international protection across the country. This covers the regions of Cascades, Hauts-Bassins and Sahel. To carry out these outreach activities, UNHCR has provided the National Federation of Road Transport Actors with audio-visual materials. In addition, staff of bus companies distribute flyers prepared by UNHCR and IOM to strengthen outreach to passengers, including vulnerable migrants and persons in need of international protection.
- Red Cross (Dr M. Nadège Ouedraogo, Health Coordinator, +226 70 04 19 84 and Abdoul Kader Kouanda, Migration Project officer, +226 70 98 82 02) volunteers make regular visits to hotspots in the Centre region, such as bus stations and reception centres for migrants, in order to identify people on the move who may need medical assistance (see below). The Red Cross also offers referrals to shelters. Depending on the level of vulnerability of people on the move who are in transit, the Red Cross offers a range of services, such as psychosocial support, restoration of family links, distribution of basic hygiene kits and food for a up to three days. This project is funded by the EU Trust Fund for Africa until January 2023.
- Terre des Hommes (TdH) (+226 25 36 91 82 or +226 07 53 59 32) deploys mobile units targeting children. Trained staff in child-friendly techniques tasked with identifying children, providing information, assessing needs, and referral of the most vulnerable cases to a one-stop centre (Guichet Unique Intersectoriel, GUIS) where they are received by social workers who, depending on their needs, help them access medical professionals, the police and judicial officials. These one-stop centres are often located near the offices of the Ministry of Women, National Solidarity, Family and Humanitarian Action (MFSNFAH). To identify children at risk, TdH also works with transport associations that help disseminate tailored information to children on the move and contact social workers when vulnerable cases are identified.
- The MFNSFAH and IOM have put in place a "National Referral Mechanism for Migrants in Transit in Burkina Faso" seeking to facilitate and systematize referrals of asylum seekers, refugees, unaccompanied or separated foreign minors and other vulnerable persons on the move. The document includes a mapping of services covering the Centre, Sahel, Cascades, Hauts-Bassins, East and Centre-East regions.

Access to asylum procedures

• Asylum seekers arriving in Burkina Faso must lodge an application for asylum by registering with the National Commission for Refugees (CONAREF) (+226 25 30 87 13) within 15 days of entering the country. The application for asylum is addressed to SP/CONAREF. In the application, asylum seekers must provide personal information, a copy of the identity card, an explanation about why they are applying for asylum, and any other relevant supporting documents relating to their individual situation. Following the Refugee Status Determination (RSD) interview, a document signed by the SP/CONAREF is issued to the asylum seeker and serves as a temporary residence permit. This document is valid for six months and renewable upon request.

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- Asylum cases are examined by an Eligibility Committee, which is composed of representatives of several ministries. Asylum seekers can file an appeal against negative RSD decisions at first instance.
- In line with the standard operating procedures (SOPs) between UNHCR, IOM and CONAREF, IOM refers asylum seekers to CONAREF or to UNHCR.

Shelter

- The MFSNFAH (Somé Sagnon, +226 70 30 74 40) manages a temporary shelter that
 can accommodate Burkinabè nationals who are destitute as well as vulnerable
 persons on the move. The shelter has limited capacity (no more than ten rooms for
 up to three people per room) and only accommodates women and children. Food
 and medical assistance are not provided.
- The Ministry of Foreign Affairs, Cooperation and African Integration and of Overseas Burkinabès (MAECIABE) is establishing a new shelter with the support of IOM (Valentin Ouedraogo, vouedraogo@oim.int, +226 73 01 849) to host Burkinabè returnees as well foreign migrants in transit in Burkina Faso. Expected to open in 2022, the shelter will have the capacity to host up to 80 persons. In the meantime, IOM provides shelter to migrants under assistance in a private centre. In the new centre:
 - >> services will include shelter, food, non-food items, basic medical assistance and psychosocial support as well as counselling. The centre will include an infirmary;
 - » persons in transit in Ouagadougou, who do not appear to have any specific vulnerabilities and who wish to continue their migratory journey, will receive assistance for up to 72 hours; and
 - persons who have opted for Assisted Voluntary Return and Reintegration (AVRR) will await their return.

^{18 [}In French] MFNSFAH and IOM, Mécanisme National De Référencement: Un guide pratique pour les acteurs intervenant dans la protection des migrants en transit au Burkina Faso, August 2021, available at: https://rodakar.iom.int/sites/g/files/tmzbdl696/files/documents/MNR_MFSNFAH.OIM_v.2021.pdf

CÔTE D'IVOIRE DJIBOUTI ETHIOPIA MAURITANIA MOROCCO SOMALIA

Healthcare and mental health and psychosocial support

- Basic medical assistance, which is free for Burkinabè nationals, is also free of charge for non-nationals.
- IOM can provide emergency assistance, works with the Red Cross, and refers cases equiring more than basic assistance to public hospitals. Most are treated at the Sainte Camille or Yalgado hospitals, and/or the Schiphra medical centre. Cases with more serious mental health and psychosocial needs are treated at the Assina clinic or the Yalgado hospital.
- In the Centre region, Red Cross volunteers refer people on the move in need of medical assistance to partner public hospitals. Assistance also includes psychosocial support, hygiene kits, restoring family links, counselling and referrals for those who wish to apply for international protection. The Red Cross also contributes to improving health facilities by building latrines and showers in targeted health centres along mixed movements routes.

Child protection

- Government shelters for minors include the Kadiogo and Somgande shelters, which are managed by the MFSNFAH. UASC can receive accommodation and assistance in the shelters. Depending on the cases and on the needs, IOM covers their meals and provides food items as well as medical and psychosocial assistance, family tracing and AVRR.
- There are 11 safe spaces (Points Espoir) run by Terre des Hommes in three provinces (Ouagadougou, Touga and Zorgo) in collaboration with the Association of Children and Young Workers of Burkina Faso (Association des Enfants et Jeunes Travailleurs du Burkina Faso, AEJTB) with the participation of social services. Information is provided on the various risks related to the worst forms of child labor and on protection risks faced by persons on the move as well as access to games and income-generating activities (such as producing soaps and necklaces). While the Points Espoir are often aimed mainly at children on the move, they are also open to, and often receive, other children.
- Emergency Reception Centres (Centres d'Accueil d'Urgence) are transit centres not only for children on the move, though they mostly host unaccompanied migrant children.
- The MFSNFAH identifies, approves and trains host families for children. Families are located in different parts of the country and host children in need, not only nonnational children.

GBV support services

 The Nonsin Government Shelter for GBV Survivors is managed by the government and occasionally supported by IOM. The shelter has the capacity to host up to 30 women. Migrant women who are survivors of GBV can receive accommodation and support in the shelter. Depending on the nature of the cases and on the needs, IOM covers their meals and provides food items as well as medical and psychosocial assistance, family tracing and AVRR.

Trafficking support services

- There are no specific services for male victims of trafficking.
- The organization Keoogo (+226 25 38 03 24) provides medical and psychosocial support as well as legal assistance to child survivors of trafficking and supports the reintegration of marginalized children. Keoogo is the focal point of the West Africa Network for the Protection of Children (WAN). In this context, Keoogo provides protection services (identification, referral, medico-psychosocial care and legal assistance) to children and young persons in a trafficking situation or on the move at the national and transnational level (in the ECOWAS region).

Legal assistance

- The Association of Female Lawyers of Burkina Faso (+226 25 36 15 56) sometimes takes on individual cases of people on the move, who have experienced trafficking.
- UNHCR receives support from the local NGO Information and Training Center on Human Rights in Africa (Centre d'Information et de Formation en Matière de Droits Humains en Afrique, CIFDHA) to provide legal and often judicial assistance to persons of concern to UNHCR.
- IOM can provide counselling, referrals and/or assistance with legal support, depending on the case, including for victims of trafficking.

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Bobo-Dioulasso and Hauts-Bassins region

Identification and outreach

- The National Federation of Road Transport Actors, under an agreement with UNHCR, disseminates information to passengers, including on services available en route.
- UNHCR conducts outreach in the Hauts-Bassins region on protection risks en route and has developed an identification and referral mechanism.
- Red Cross (Dr M. Nadège Ouedraogo, Health Coordinator, +226 70 04 19 84 or Abdoul Kader Kouanda, Migration Project Officer, +226 70 98 82 02) volunteers make regular visits to hotspots in the Hauts-Bassins region, such as bus stations and reception centres for migrants, in order to identify people on the move who may need medical assistance (see below). The Red Cross also offers referrals to shelters. Depending on the level of vulnerability of people on the move who are in transit, the Red Cross offers a range of services such as psychosocial support, restoration of family links, distribution of basic hygiene kits or food for up to three days. This project is funded by the EU Trust Fund for Africa until January 2023.

Shelter

- The Transit Centre of the MFSNFAH has 90 beds, including 30 for women, 30 for men and 30 for children. IOM does not have a presence in the centre, but it can provide food for people who are staying in the centre for at least 72 hours and/or until the AVRR process has been completed. IOM also supports social workers in the centre with case management and provides assistance with obtaining travel documents and AVRR. Other stakeholders are active in the centre, such as the Red Cross, which provides food, non-food items kits and basic medical and psychosocial support for a few days. IOM can provide these services to eligible migrants once the support provided by the Red Cross comes to an end.
- The Transit Centre of the organization Tie (+226 76 67 14 76) has 30 beds, including 10 for women and 20 for men. There is also a dorm that is not equipped but could accommodate more than 30 people. The centre accommodates people on the move as well as children living on the street.

Healthcare and mental health and psychosocial support

- Medical assistance is only available in public health centres, and people on the move must bear the costs. Medical care is also available in private centres at the patient's cost.
- Red Cross volunteers refer people on the move in need of medical assistance to

partner public. Assistance also includes psychosocial support, hygiene kits, restoring family links, counselling and referrals for those who wish to apply for international protection). The Red Cross also contributes to improving health facilities by building latrines and showers in targeted health centres along mixed movements routes.

Annex

Legal assistance

- There is no free legal assistance to people on the move.
- Persons of concern to UNHCR who reach out to CIFDHA may receive legal assistance if they require it.

Child protection

 Children on the move are often held in police stations as the police check their identity before referring them to the transit centre of the MFSNFAH (see above under shelter) and social services.

Banfora and Cascades region

Identification and outreach

- The National Federation of Road Transport Actors, under an agreement with UNHCR, disseminates information to passengers, including on services available en route.
- UNHCR conducts outreach in the Cascades region on protection risks en route and has developed an identification and referral mechanism.
- Red Cross (Dr M. Nadège Ouedraogo, Health Coordinator, +226 70 04 19 84 and Abdoul Kader Kouanda, Migration Project Officer, +226 70 98 82 02) volunteers make regular visits to hotspots in the Cascades region, such as bus stations and reception centres for migrants, to identify people on the move who may need medical assistance (see below). The Red Cross also offers referrals to shelters. Depending on the level of vulnerability of people on the move who are in transit, the Red Cross offers a range of services such as psychosocial support, restoration of family links, distribution of basic hygiene kits or food for up to three days. This project is funded by the EU Trust Fund for Africa until January 2023.

BURKINA FASO CAMEROON CÔTE D'IVOIRE DJIBOUTI ETHIOPIA MAURITANIA MOROCCO SOMALIA Annex

Shelter

• The Reception and Transit Centre of the local NGO Ton in Niangoloko (+226 70 13 35 80) has 30 beds, including 10 for men, 10 for women and 10 for children. Vulnerable people on the move are referred to this centre from around the Cascades region. Due to lack of funding, food is not provided to people on the move.

Healthcare and mental health and psychosocial support

- People on the move can only receive medical assistance in public medical centres if they cover the costs themselves. Medical care is also available in private centres at the patient's cost.
- Red Cross volunteers refer people on the move in need of medical assistance to partner public. Assistance also includes psychosocial support, hygiene kits, restoring family links, counselling and referrals for those who wish to apply for international protection. The Red Cross also contributes to improving health facilities by building latrines and showers in targeted health centres along mixed movements routes.

Services for victims of trafficking

• For its project to Strengthen Assistance to Child Survivors of Trafficking (SACTS), the organization Keoogo, working in partnership with the organization Ton (+226 **70133580**) provides reintegration services to survivors of trafficking such as research and family reunification, access to civil status documentation, alternative care arrangements, registration in schools and access to learning programs, as well as support for repatriation to the country of origin.

Dori and Sahel region

Identification and outreach

- The National Federation of Road Transport Actors, under an agreement with UNHCR, disseminates information to passengers, including on services available en route.
- UNHCR conducts outreach in the Cascades region on protection risks en route and has developed an identification and referral mechanism.
- Red Cross (Dr M. Nadège Ouedraogo, Health Coordinator, +226 70 04 19 84 and Abdoul Kader Kouanda, Migration Project Officer, +226 70 98 82 02) volunteers make regular visits to hotspots in the Cascades region, such as bus stations and

reception centres for migrants, to identify people on the move who may need medical assistance (see below). The Red Cross also offers referrals to shelters. Depending on the level of vulnerability of people on the move who are in transit, the Red Cross offers a range of services such as psychosocial support, restoration of family links, distribution of basic hygiene kits or food for up to three days. This project is funded by the EU Trust Fund for Africa until January 2023.

• Terre des Hommes deploys mobile units conducting outreach for children and providing referrals to a one-stop centre (see under Ouagadougou) as well as information on the location of the nearest Point Espoir. These activities have been on hold since February 2021 pending new funding.

Shelter

• The MFSNFAH manages a shelter restored by IOM with 90 beds including 30 for women, 30 for men and 30 for children. UNHCR provides food assistance via its implementing partner, and IOM covers the costs of transportation and documentation for those who request AVRR and are eligible.

Healthcare and mental health and psychosocial support

- People on the move can only receive medical assistance in public medical centres if they cover the costs themselves. Medical care is also available in private centres at the patient's cost.
- Red Cross volunteers refer people on the move in need of medical assistance to partner public. Assistance also includes psychosocial support, hygiene kits, restoring family links, counselling and referrals for those who wish to apply for international protection. The Red Cross also contributes to improving health facilities by building latrines and showers in targeted health centres along mixed movements routes.

Tenkodogo (Centre-East) and Bam and Sanmantenga (Centre-North)

- Caritas Switzerland (Olivier Dumont, +226 54381292, odumont@caritas.ch) under a new EU-funded project supporting the protection of vulnerable persons on the move in the Sahel (PROMISA), has mobile teams trained in social assistance, legal counselling and psychosocial support are deployed in key locations. They advise people on the move directly or refer them either to information points where they can receive vouchers for food and hygiene items, or to other actors (such as IOM for AVRR).
- In the Centre-North region, water holes are being drilled or restored in order to improve access to water in key locations that persons on the move transit through. The vouchers are for the most vulnerable (such as children, single women, persons with disabilities and victims of trafficking). The project is being rolled out in Tenkodogo, in the Centre-East Department, with the Burkinabè NGO the Catholic Organization for Development and Solidarity (Organisation catholique pour le développement et la solidarité, OCADES) and Caritas Burkina Faso, and in Bam and Sanmantenga, in the Centre-North region, with the German NGO Welthungerhilfe. Under the PROMISA project, accommodation for the most vulnerable is provided in local hotels close to the information points. The NGO Welthungerhilfe also has a pilot project in Kongroussi (northeast of Ouagadougou) to build 'Nubian vaults' (type of housing) that accommodate people on the move and will be transferred to the community once the project is over.
- The Centre-East is one of the main regions of origin of Burkinabè migrants who are assisted by IOM to return from abroad. There are also non-Burkinabè persons on the move in the Centre-East. The protection and assistance unit of the IOM office in Tenkodogo (Yempabou Guillaume Nadiouari; 67 39 65 33; ynadiouari@iom.int) provides reintegration assistance to returnee Burkinabè migrants in this region and can be contacted about cases of foreign migrants in need, in line with the National Referral Mechanism.



CAMEROON

Cameroon is a country of transit, origin and destination for refugees and migrants. Mixed movements from Cameroon are complex, with northbound and southbound flows, including to Equatorial Guinea.¹⁹ Trafficking in persons affects nationals, including IDPs, as well as refugees and migrants, with multiple forms of exploitation including forced labor, sexual exploitation and forced recruitment in armed conflicts. Trafficking may bring victims and survivors from Cameroon to other countries in West Africa, Europe and the Middle East among other regions.²⁰ There is, however, a lack of data regarding these movements.

Yaoundé

Identification and outreach

• With three partners (Association des Rapatriés et de Lutte contre l'Émigration Clandestine du Cameroun (ARECC), Organization pour l'Éveil des Jeunes sur la Migration Irrégulière et la Traite des Personnes (OEMIT), and Solutions aux Migrations Clandestines (SMIC)), IOM (Clotilde Essama, pessama@iom.int) organizes awareness-raising activities such as social gatherings with young people on the dangers of irregular migration, and shares information on pathways to regular migration.

¹⁹ Cameroun Web, Guinée Equatoriale: les camerounais chassés sont rrives au pays, 22 November 2021, available at: https://www.camerounweb.com/CameroonHomePage/NewsArchive/Guin-e-Equatoriale-lescamerounais-chass-s-sont-arriv-s-au-pays-629464

²⁰ US Department of State, 2021 Trafficking in Persons Report: Cameroon, 1 July 2021, available at: https://www.state.gov/reports/2021-trafficking-in-persons-report/cameroon/

Access to asylum procedures

- Access to asylum procedures is facilitated in the Centre region jointly by UNHCR and the government (Technical Secretariat in charge of RSD) and mainly by UNHCR in five regions (Adamaoua, East, Far North, Littoral, North). However, individual RSD procedures are only available in Douala and Yaoundé, whereas in the other locations, it is a collective procedure (for Nigerians in the Far North and for Central Africans in the regions of Adamaoua, the East and the North).
- Due a good collaboration between the two offices in Centre and Littoral Regions, the immigration authorities (services de l'immigration) regularly refer asylum seekers to UNHCR for registration when they identify them among people on the move who are arrested for lacking a residence permit.

Child protection

- Child protection services for persons of concern to UNHCR are provided by UNHCR's implementing partners in collaboration with the Delegations for Social Affairs and, for issues of GBV, with the Ministry of the Promotion of Women and the Family.
- Many social centres and organizations as well as an extensive network of social
 workers under the Ministry of Social Affairs (MINAS) are in charge of prevention and
 response in child protection cases. Their services can be accessed by nationals and
 foreigners (including people on the move and victims of trafficking).

Assistance to Cameroonian returnees

As part of its AVRR project, IOM (Dr Seyni Houdou, shoudou@iom.int) provides direct
assistance to Cameroonians returning mostly from Libya or Algeria, especially the
most vulnerable. Assistance includes covering medical expenses, hospital referrals,
subsistence assistance to cover urgent needs, accommodation assistance for one or
two nights in a hotel, and psychosocial assistance in partnership with the NGO
Trauma Centre.

Services for victims of trafficking

IOM and MINAS are working on a referral mechanism for victims of trafficking. A **1503** hotline has been set-up specifically for migrants, refugees, displaced and uprooted persons, including victims of trafficking.

City of Douala and Wouri department

Identification and outreach

• There are currently no specific activities on identification and outreach of people on the move in Douala or in its surrounding areas.

Access to asylum procedures

- A UNHCR field office conducts registration activities and RSD procedures in Douala.
- Due a good collaboration between the two offices in Centre and Littoral Regions, the immigration authorities (services de l'immigration) regularly refer asylum seekers to UNHCR for registration when they identify them among people on the move who are arrested for lacking a residence permit.

Shelter

• There are no specific measures for the accommodation of people on the move or of victims of trafficking. However, the departmental office for social affairs (Ms Etame, Departmental Delegate of Wouri for Social Affairs, +237 699 86 33 37) assists vulnerable people (including people on the move) by providing them with accommodation in social centres that have been approved. The capacity of the social centres varies from one centre to another.

Healthcare

Medical care is available in public health centres as well as private centres at the
patient's expense. Primary health care is provided in district medical centres, which
are public, at costs that are affordable for patients with fewer means, including
citizens, refugees and people on the move. Certain categories of vulnerable
refugees can receive free medical assistance in medical centres with which UNHCR
has partnerships in the city of Douala.

Services for victims of trafficking

• There are no specific services for victims of trafficking.

 There is no free legal assistance for people on the move. Those who fall under UNHCR's mandate can receive free legal assistance if needed. A law firm that has a partnership with UNHCR follows-up on cases that are taken to court.

Child protection

UNHCR's implementing partner PLAN International Cameroon handles child
protection services for people who fall under UNHCR's mandate, in collaboration
with the Departmental Delegation of Social Affairs. Social workers work on the cases
of children at risk, including people on the move and victims of trafficking, under the
coordination of the Departmental Delegate of Wouri for Social Affairs (Ms Etame,
+237 699 86 33 37) and through a network of approved social centres.

There are very few cases of human trafficking in the town of Garoua-Boulai in the department of Lom and Djerem. However, the town receives asylum seekers from CAR, in addition to a small population of other nationalities who have been in Garoua-Boulai for a long time.

Garoua-Boulai

Identification and outreach

• No specific activities relating to identification and outreach for people on the move or residing in Garoua-Boulai and its surroundings are carried out at the border. There is, however, an alert mechanism. It is activated in the event of an influx of asylum seekers or when irregular entries are reported. The border services notify the sub-prefect and the emigration/immigration commissioner who, in turn, inform the UNHCR office. UNHCR intervenes in such cases (through the provision of protection screening, documentation, legal protection and assistance).

Access to asylum procedures

UNHCR has a field office in Meiganga (90km from Garoua-Boulai). The office carries
out regular protection monitoring missions there and has set up a remote monitoring
mechanism. UNHCR implementing partners and other operational partners are
present almost daily. This border is accessible because it is connected to the UNHCR
office by a paved road.

 UNHCR conducts RSD procedures. The good collaboration between the authorities and UNHCR facilitates access to people seeking asylum and limits cases of refoulement. In the event of a massive influx, the Meiganga office receives support from the sub-delegation in Bertoua.

SOMALIA

MOROCCO

Shelter

There is no specific government mechanism to provide accommodation in the event
of large mixed movements, including victims of trafficking. A head of the social
centre, who has no response capacity, has an office within the sub-prefecture.
However, as this border area is a commercial centre, there are other options such as
hotels, inns, department stores, and empty spaces.

GBV support and mental health and psychosocial support

MAURITANIA

- A departmental delegate from the Ministry for the Promotion of Women and the Family (MINPROFF, Mr Ella Mbameyo Clovis, +237 696161122) has been assigned to Garoua Boulai since May 2021 and works in close collaboration with UNHCR and its partner International Medical Corps (IMC) as well as the Danish Refugee Council (DRC) which provides management of GBV cases in the Garoua Boulai district.
- IMC has a small listening space, where GBV survivors can speak with case management officers.
- UASC that are GBV survivors are referred by the Department of Social Affairs to humanitarian partners, who find foster families for them and provide a psychosocial response.
- GBV survivors and persons belonging to other vulnerable categories identified by UNHCR's partner are integrated into social integration programs. The town has a multifunctional training centre for young people which provides training sessions (for a fee) for cases referred by partners.

Healthcare

- Medical care is available in the city of Garoua-Boulai which has, in terms of technical
 facilities, a public district hospital and a private hospital (commonly known as "the
 Norwegian hospital"). These two facilities treat both national and foreign patients as
 long as they can cover their medical expenses.
- UNHCR, through its partner Action Humanitaire Africaine (AHA), provides medical assistance to the most vulnerable cases in health facilities that have been approved.
- In some cases, UNHCR partners use their own funds to cover the costs of care for asylum seekers or vulnerable refugees, in particular in emergency cases.

Services for victims of trafficking

• There are no specific services for victims of trafficking in Garoua-Boulai.

Legal assistance

- There is no free legal assistance for people on the move.
- People of concern to UNHCR can receive free legal assistance if they need it. Cases that are taken to court are followed by a law firm that has a partnership with UNHCR.

Child protection

Child protection services for persons of concern to UNHCR are provided by UNHCR implementing partner IMC in collaboration with the Delegation for Social Affairs (Mrs. Christine Marie Bouba, Head of the Social Affairs Centre, +237 696161122). In general, social workers working for UNHCR partners under the coordination of the head of the social centre respond in cases of children at risk as well as other categories of persons with vulnerabilities.



CHAD

Chad is at a crossroads for refugees, asylum-seekers, and migrants traveling from Sudan, Cameroon, the Central African Republic (CAR), and Nigeria towards Libya.

Northern Chad, in particular, is an area of transit for people traveling north to Libya or Europe. Vulnerable groups in this area include people who were expelled from Libya, unaccompanied children, victims of trafficking, and other people on the move attempting to return from Libya to their country of origin.

Some refugees, asylum-seekers, and migrants work in the gold-mining areas of the Tibesti region, in northeastern Chad on the border with Libya, to finance travel to Europe and/or to the Gulf countries and Saudi Arabia. As Chad has closed its borders with Libya, people cross via irregular routes, outside bus stations. Abéché is also an important city of transit for people on the move, mostly from CAR, Niger, Nigeria, and the Horn of Africa.

Abuses reported along the migratory route through Chad include physical abuse, destruction or confiscation of documents, sexual exploitation, kidnapping, arbitrary detention, and theft.

A young refugee student pursues a Master's in Audit and Management Accounting at HEC Tchad in N'Djamena, on a scholarship provided by the French Embassy in Chad. March 2021.

N'Djamena

Identification and outreach

- UNHCR conducts outreach activities on the protection risks faced by persons on the move including through local radio programmes, in schools, markets and bus stations.
- The Chadian Red Cross (Yacoub Mahamat Allamine, croixrougeabc@ yahoo.fr and Cherif Moussa Khalit, moussakhalit27@gmail.com), UNHCR's implementing partner, deploys volunteers in 10 districts (arrondissements) of N'Djamena. These volunteers are Chadians who live in neighbourhoods where people on the move reside and/or transit. Volunteers are tasked with the monitoring and profiling of mixed movements, collecting information on intentions to seek asylum among other topics.
- IOM (+235 22 52 53 62) conducts outreach activities in locations through which
 people on the move transit, such as bus stations, to inform them of the risks of
 irregular migration and existing services, including by distributing flyers with a
 toll-free number.

Access to asylum procedures

 The Chadian Red Cross refers asylum-seekers to the National Commission for the Reinsertion of Refugees and Returnees (Commission Nationale d'accueil de Réinsertion des Réfugies, CNARR) offices in Abéché or N'Djamena.

Shelter

- IOM's two transit centres have capacity for 150 people and accommodate refugees
 awaiting resettlement and migrants awaiting AVRR. There are sections for men,
 women, families, and unaccompanied children. Services provided include food,
 medical assistance, mental health and psychosocial support, and support to GBV
 survivors, but no legal assistance. Cases requiring more specialized medical
 assistance are referred to a hospital with which IOM has an agreement.
- The Ministry of Social Action, Women and Children, with support from UNICEF, has a shelter that can accommodate unaccompanied children on the move who were intercepted in the desert.
- For vulnerable groups, the Chadian Red Cross tries to find solutions through social services, but it is challenging given the lack of such services.

Healthcare and mental health and psychosocial support

- As mentioned above, IOM has two transit centres that provide medical and mental health and psychosocial assistance.
- The Chadian Red Cross refers people on the move to medical providers and covers
 the costs. If they are not referred, they must cover the costs themselves. People on
 the move can reportedly face discrimination and distrust when they go to hospitals,
 especially if they do not have documents.

Faya-Largeau (North)

Identification and Outreach

- IOM conducts outreach activities to inform people of the risks of irregular migration and existing services, including by distributing flyers with a toll-free number.
- The Chadian Red Cross (Mahamet Saleh, +235 66232500) refers refugees to UNHCR and migrants to IOM. If people express the wish to apply for asylum, the Chadian Red Cross informs CNARR and refers them to the CNARR offices in Abéché or N'Djamena.

Shelter

- IOM has two transit centres where it provides services including accommodation, food, medical and mental health psychosocial assistance, but no legal assistance.
 More serious medical cases are referred to a hospital that IOM has rehabilitated in the community.
 - >> One centre is for Chadians and has capacity for at least 100 people. People stay a short time until they are transferred to their places of origin.
 - A centre for non-Chadians: people stay for around two weeks until they are transferred to N'Djamena and then to their country of origin, while awaiting AVRR.

Healthcare and mental health and psychosocial support

 As mentioned above, IOM has two transit centres that provide medical and mental health and psychosocial assistance.

Child protection

- There are no organizations working specifically on child protection.
- UNICEF and the Chadian Red Cross have a project to reunite 200 Chadian children returning from Libya or from goldmines with their families.

Ounianga-Kebir

Identification and outreach

 An IOM partner that is in charge of the Displacement Tracking Matrix (DTM) alerts IOM in Faya if there are arrivals of people on the move in need of assistance, as do the local authorities. IOM staff travel to Ounianga to bring them to the transit centre in Faya.

Shelter

IOM has a transit centre where it provides services, including shelter (which includes
a seven-day quarantine), food and medical and mental health and psychosocial
assistance, but no legal assistance. Cases that need more specialized medical care
are referred to the medical centre of Ounianga. After a quarantine period, Chadian
migrants are transported to their places of origin and foreign migrants are transferred
to the transit centre of Faya while they await a transfer to N'Djamena where
administrative steps for their return to their country of origin are completed.

Healthcare and mental health and psychosocial support

• As mentioned above, IOM has a transit centre that provide medical and mental health and psychosocial assistance.

UNHCR and BPRM in discussion with a group of Ivorian returnees, Côte d'Ivoire



CÔTE D'IVOIRE

Côte d'Ivoire is a country of origin and destination of refugees and migrants, especially Malians and Burkinabés. In recent years, Côte d'Ivoire has been one of the main countries of origin of people arriving on the coasts of Italy and Spain, and IOM has identified a large number of Ivorian victims of trafficking along the Central and Western Mediterranean routes. ²¹

In terms of numbers, the long-standing mixed migration route between Burkina Faso to Côte d'Ivoire is considered as the second most widely used in Africa.²² As insecurity spreads in the Sahel and forced displacement increases and becomes protracted, refugees and IDPs are using routes to costal countries such as Côte d'Ivoire.²³ While movements may have so far remained temporary as an economic coping mechanism, more permanent move as family units may become more frequent.

In September 2021, in view of the changes in the country conditions in Côte d'Ivoire, UNHCR recommended to countries hosting Ivorian refugees to end their refugee status, and for this cessation to take effect on June 30,

²¹ IOM, Migration de retour: trafic et traite des migrants ivoiriens le long de la route Méditerranéenne centrale et occidentale, September 2021, available at : https://dtm.iom.int/reports/research-brief-migration-de-retour-trafic-et-traite-des-migrants-ivoiriens-le-long-de-la

²² IOM, World Migration Report 2020, 2019, available at: https://publications.iom.int/system/files/pdf/wmr_2020.pdf

²³ Mixed Migration Center, The impact of the Sahel conflict on cross-border movements from Burkina Faso and Mali towards Côte d'Ivoire and Ghana, October 2021, available at: https://mixedmigration.org/ resource/the-impact-of-the-sahel-conflict-on-cross-border-movements/

2022.24 The number of voluntary repatriations of Ivorians increased significantly in 2021, with more than 22,000 persons repatriated mainly from Liberia, Ghana and Togo.25

Abidjan

Shelter

- Côte d'Ivoire Prospérité (CIP) has a shelter in Abobo N'Dotre, north of Abidjan, which has been rehabilitated and rebuilt by IOM. The centre has a capacity of 80 places, with dormitories, an infirmary, as well as a multipurpose room for trainings, psychosocial counselling sessions and support groups. There are separate dormitories and bathrooms for men and women, but no designated space for children. The people who are accommodated there are mainly IOM beneficiaries, in particular Ivorians returning from the central Mediterranean route, or victims of trafficking referred by the National Committee for the Fight Against Trafficking in Persons (CNLTP) or other authorities. Most of the victims of trafficking are women who are foreign nationals. People stay at the centre for the time it takes to complete procedures such as identification and risk assessments, and to prepare their travel documents if they wish to return home.
- Dignité Droits de l'Enfant en Côte d'Ivoire (DDE-CI) has a shelter for unaccompanied minors that can host about 50 children.
- Cavoequiva has a shelter for girls and women with about 100 places and accommodates mainly minors. Trainings, psychosocial counselling and support groups are provided at the shelter.
- Tierra de Esperanza Côte d'Ivoire (TECI, +225 07 77 57 17 76, esperanzatierraci@ gmail.com) has a shelter that is also a support and listening centre for vulnerable people in Abidjan with a capacity of 57 places, but which can host up to 107 people if

needed. The centre is mainly dedicated to hosting women and accompanied children, but it can also host men in a separate space. TECI works in partnership with IOM and the Ministry of African Integration and Ivorians Abroad. The centre receives people of several different nationalities who arrive by charter flights from foreign countries such as Libya, Algeria or Tunisia, as well as migrants in Côte d'Ivoire who are seeking to return to their home country and Ivorians with vulnerabilities. Food is provided in the centre, as are shelter and medical assistance through auxiliary nurses who are based in the centre and regular visits by volunteer doctors. For GBV cases, the centre calls upon social workers and refers the most serious cases to the Ministry of Women.

Healthcare

• IOM (iomabidjanprotection@iom.int) refers its beneficiaries to clinics such as the Sacré Cœur Polyclinic in Cocody, with which it has an agreement, and to pharmacies, such as the Grande Pharmacie des II Plateaux in Cocody. IOM covers the costs.

Services for victims of trafficking

- IOM (iomabidjanprotection@iom.int) receives referrals of victims of trafficking from the authorities, NGOs or the CNLTP. Since 2020, IOM has provided assistance to more than 100 victims of trafficking, of whom 56% are from Nigeria and 36% are from Burkina Faso. Victims of trafficking are provided with shelter, psychosocial support, medical assistance, food, non-food items, support with documentation and access to
- There is a lack of identification of victims of trafficking and of durable support solutions for foreign victims of trafficking who wish to remain in Côte d'Ivoire.

Restoration of family links

• The ICRC (+ 225 07 08 08 49 70, abi_tracing_services@icrc.org) and the Côte d'Ivoire Red Cross (CRCI + 225 27 20 32 13 35, crci.servicerlf@croixrouge.org) provide services for restoring family links of people on the move who have been separated and lost contact with their families. In some vulnerable cases, ICRC and CRCI can assist with family reunification for persons who wish to return to their country. During field missions and through radio messages, ICRC and CRCI disseminate information on how people can access these services of restoration of family links, which are free of charge, for instance by visiting the nearest office of the Red Cross.

²⁴ UNHCR, UNHCR recommends the cessation of refugee status for Ivorians, 7 October 2021, available at: https://www.unhcr.org/news/press/2021/10/615ec5e74/unhcr-recommends-cessation-refugee-status-

and UNHCR, The Comprehensive Solutions Strategy for the situation of Ivorian refugees including UNHCR's recommendations on the applicability of the cessation clauses, September 2021, available at: https://reporting.unhcr.org/sites/default/files/COMPREHENSIVE%20STRATEGY%20CIV%20 REFUGEES%2020210930%20EN.pdf

²⁵ UNHCR, Côte d'Ivoire: Situation du Rapatriement Volontaire, 21 January 2022, available at: https://data2.unhcr.org/en/documents/details/90598



A Somali refugee sets up her boutique in

DJIBOUTI

Djibouti is a key country of transit for people crossing to Yemen and possibly on to Saudi Arabia and other destinations. Most of those using this route are Ethiopian nationals. Abuses by smugglers are sometimes reported at sea, including of incidents in which smugglers have forced people overboard resulting in multiple deaths.26 Others have reportedly been abandoned in the desert.²⁷ Djibouti has received people returning from Yemen, sometimes after enduring very difficult conditions during the journey, with no access to water in extreme heat.28 Key locations in Djibouti include Obock, where many stop on their way to and back from Yemen, along with Djibouti city.

Djibouti city

Access to asylum procedures

- When people cross the border, border officials give them information about the National Office for Assistance to Refugees and Affected People (ONARS, +253 21 35 67 51 or +253 21 35 16 26). UNHCR conducts joint registration with ONARS.
- People who have a document showing they had been granted international protection in Yemen are channelled directly to ONARS. Djibouti grants continuity of

²⁶ IOM, At Least 20 Dead After Smugglers Force Migrants into the Sea Off Djibouti, 4 March 2021, available at: https://www.iom.int/news/least-20-dead-after-smugglers-force-migrants-sea-djibouti

²⁷ IOM, Thousands of African Migrants Return from Yemen, Assisted by IOM in Djibouti, 25 September 2020, available at:

https://www.iom.int/news/thousands-african-migrants-return-yemen-assisted-iom-djibouti

²⁸ IOM, Ethiopian migrants returning from Yemen to Djibouti, 1 October 2020, available at: https://migration.iom.int/reports/ethiopian-migrants-returning-yemen-djibouti-qualitative-study

status to people who were granted status in Yemen.

- Following their registration, refugees and asylum-seekers can choose to stay in one
 of three refugee villages (Markazi in Obock, Holl-Holl and Ali Addeh near Ali Sabieh),
 where they can receive multisectoral assistance, or to stay in Djibouti city where no
 direct material assistance is provided. Markazi hosts refugees of Yemeni origin while
 Ali Addeh and Holl Markaz host other nationalities. The main nationalities are Somali,
 Ethiopian and Eritrean.
- Upon their registration, ONARS, in collaboration with UNHCR, transfers newly arrived people to the Holl-Holl refugee village, where they are provided with warm meals for three days before receiving multisectoral assistance.
- When someone at IOM's Migrant Resource Centre (MRC) wishes to apply for asylum,
 IOM contacts UNHCR and UNHCR then refers them to ONARS.

GBV support services

 Union Nationale des Femmes de Djibouti (UNFD, +253 21 35 04 21) provides GBV prevention and response services to refugees and asylum-seekers in Djibouti city and in the three refugee villages.

Child protection

- International Children's Action Network (ICAN, +253 21 25 01 19) provides child protection services for refugees and asylum-seekers in Djibouti city and in the three refugee villages.
- Caritas (+253 213 539 81) has a temporary night shelter (in collaboration with IOM and funded by the EU) for children waiting for AVRR (coordinated by IOM in coordination with the Ethiopian and Djiboutian authorities) and for children (including vulnerable children such as pregnant girls). It has 36 beds, one room for boys and one room for girls.
- Caritas has a day centre in Djibouti city for children where it provides food assistance and educational activities. Most beneficiaries are children living on the street, but 85% are unaccompanied children from Ethiopia. The centre also has a small medical unit and can refer more serious cases to the hospital.

Obock

Identification and outreach

• IOM focal points on the coast alert the Migrant Resource Centre (MRC) in Obock when boats arrive from Yemen, and the MRC sends an ambulance that provides first aid, water and dates to people who have disembarked, and transports the most vulnerable (including medical cases) to the MRC. From the disembarkation points located along the shores of Obock, migrants can walk up to 60 km, crossing desert terrain, to reach the MRC in Obock city. This is a particularly dangerous route, especially in the warmer months. Through its mobile unit, IOM provides live-saving assistance to migrants (water, food, medical first aid) arriving along the shores of Obock.

Shelter

- IOM's MRC has capacity to accommodate up to 250 migrants at a time and accommodates migrants waiting for AVRR services. Given the limited capacity at the MRC, IOM accommodates the most vulnerable migrants (including children, pregnant women, the elderly, people with medical conditions) at the MRC. At the MRC, there are four shelters: one for women and young children, one for families, one for unaccompanied minors and one for men.
 - >> Assistance to GBV survivors is provided by the psychosocial support worker.
 - >> For child protection, a Rapid Response Assessment is done but not a Best Interest Determination. The person in charge of AVRR does family tracing.
 - Once per week, the Red Crescent goes to the MRC to help migrants call their families.
 - When someone at the MRC wishes to apply for asylum, IOM contacts UNHCR and UNHCR then refers them to ONARS. Such cases are identified during their stay in the MRC, through discussions with the protection worker.

Healthcare and mental health and psychosocial support

- IOM's MRC has a small clinic with a doctor, a nurse and an assistant. For types of
 care that cannot be provided on site (such as laboratory tests), IOM has an
 agreement with the local hospital (Centre Medical Hospitalier of Obock). However,
 for psychiatric cases, there is a lack of providers to which they can be referred.
- There is a psychosocial support worker who is part of the MRC staff team.



ETHIOPIA

Ethiopia is a major country of origin, destination and transit for people on the move. Key countries of origin of refugees in Ethiopia are South Sudan, Somalia, Eritrea and Sudan. Ethiopians on the move travel east towards Yemen and Saudi Arabia via Djibouti or Somalia, south via Kenya towards South Africa, or north via Sudan to Libya and onwards to Europe. The northern route is also used by many refugees and migrants from Eritrea and Somalia transiting through Ethiopia.

Due to the conflict in Tigray, irregular movement routes previously used by refugees and asylum seekers might have changed. Consequently, the routes and border areas in the northwestern part of the country (such as Meteme and Humera) may not have been used since the outbreak of the war due to security issues and heavy military and security presence in those areas. However, migratory routes in other parts of the country still remain, such as the border crossing points of Moyale at the Ethiopia-Kenya Border, Togowuchale at the border with Somalia and Galafi at the border with Djibouti.

In view of the situation in Ethiopia at the time of writing, the services listed in this mapping are limited to Addis Ababa and the Somali region.

newly established Afar, Ethiopia. March

Addis Ababa

Identification and outreach

- UNHCR's TRS initiative (Frida Yohannes, yohannef@unhcr.org) works with local volunteers, artists and celebrities to conduct outreach activities with Eritrean and Somali refugee youth to inform them about the risks of irregular onward movement and about available services and opportunities in Addis Ababa. TRS also provides counselling to urban refugee communities on the issue of trafficking.
- With the support of TRS, the Jesuit Refugee Service (JRS) conducts awarenessraising activities and workshops for urban refugees about the risks of trafficking and secondary migration movements.

Shelter

- IOM Ethiopia (+251 (0)111301000; iomethiopia@iom.int) runs five Migration Response Centres (MRCs) in Dire Dawa, Metema, Moyale, Semera and Tog-Wajaale that facilitate the identification of and assistance to migrants in a vulnerable situation. Among other services, IOM offers temporary shelter to identified or referred migrants. Migrants are also assisted with food, non-food items, health and psychosocial assistance, and support to return voluntarily to their communities of origin in Ethiopia, among other types of assistance.
- IOM has three Transit Centres for AVRR close to the Addis Ababa airport. Services at these Transit Centres include providing food and non-food items, mental health and psychosocial support (including referrals to specialized shelters run by NGOs and psychiatric clinics), recreational activities, basic medical assistance by IOM medical staff at the transit centres and referrals to hospitals if needed, as well as family tracing and family reunification for unaccompanied children.

Mental health and psychosocial support

• Under UNHCR's program for urban refugees and asylum-seekers, people on the move who need psychosocial assistance can access counselling and other psychosocial services that are available to the refugee population.

Assistance to victims of trafficking

 Victims of Trafficking who are identified to be GBV survivors can access UNHCR protection services as well as medical and psycho-social support through UNHCR's partner agency the Development and Inter-Church Aid Commission (DICAC).

- UNHCR is a member of the National Partnership Coalition (NPC) to combat and control the crimes of trafficking and smuggling. Government line ministries, international organizations, NGO and civil societies are also members of the Coalition. When victims of trafficking and smuggling are identified, UNHCR refers victims to agencies from the taskforce based on available services from each agency.
- IOM Ethiopia (+251 (0)111301000; iomethiopia@iom.int) is partnering with the charities Hope for Justice, Good Samaritan Association and Agar Charitable Society to provide rehabilitation and reintegration services to children, adult victims of trafficking and migrants in situations of vulnerability in Addis Ababa (and surroundings areas) and Bahir Dar. IOM also provides AVRR for victims of transnational trafficking.

Child protection

• The Jesuit Refugee Service (JRS, Fitsum Biressaw, Acting Child Protection Programme Coordinator & Case Management Supervisor, fitsum.biressaw@jrs.net, +251 -944106164) provides child protection services for unaccompanied, separated and other vulnerable refugee children in Addis Ababa, including case management by case workers, arranging foster care for unaccompanied and separated minors, emergency individual protection assistance (cash and non-cash), psychosocial support and language courses. JRS's Refugee Community Centre (RCC) and Child Protection Centre (CPC) in Addis Ababa have safe spaces where children can access diverse recreational services.

Emergency assistance

 In Addis Ababa at its RCCs, JRS (Hana Petros, RCC Project Director, hanna.petros@ jrs.net, +251-911-613013) has been implementing emergency interventions for the most vulnerable urban refugees and asylum-seekers, and for Eritrean refugees who are relocated from Tigray refugee camps due to the ongoing conflict in northern Ethiopia. The assistance includes one-time cash, food or material assistance, and basic healthcare through referrals to a health centre for medical assistance for which JRS covers the costs.

Assistance to returnees from Saudi Arabia

 Under its Protection and Capacity Building Program, the Ethiopia Migration Program/ Danish Refugee Council provides the following support to returnees from Saudi Arabia: non-food items, as well as supplementary food items for breastfeeding and pregnant women and for children who stay in its shelter with their returnee mothers.

Jijiga

Identification and outreach

 Through its TRS initiative (Zamzam Abdi Jama, Jamaza@unhcr.org), UNHCR organizes awareness-raising events and workshops to refugee youth on the risks of irregular onward movements, including trafficking. UNHCR's TRS initiative also offers trainings and workshops on scholarship opportunities in Europe, which provide safe and legal alternatives to irregular movement. By highlighting access to complementary and durable pathways, the TRS initiative has been successful in empowering refugee youth and young adults to mobilize their communities to bring awareness to alternative viable solutions to smuggling and trafficking.



UNHCR and the group session with

MALI

As well as being a country of origin for many refugees and migrants, Mali is an important country of transit for many people moving towards other ECOWAS countries, such as Cote d'Ivoire and Ghana, and through West Africa towards Libya, Algeria, and Mauritania, and sometimes on to Europe. Key locations within Mali identified by UNHCR and partners during the mapping were Bamako, Gao and Timbuktu, from where people cross the desert to Algeria or Mauritania, or cross to Niger; and Mopti/Douentza, where many pass through on the way to Timbuktu or Gao.

Under ECOWAS regulations, nationals of member states are allowed to travel visa-free within the region with national identification documents for up to three months (or longer with an ECOWAS biometric identity card).29 As a result, ECOWAS nationals usually travel by bus (sometimes organized by smugglers) up to Gao or Timbuktu, from where they make use of smugglers' services to cross the desert. Citizens of non-ECOWAS countries reportedly use only private transport along these same routes, but there is a lack of data on these movements.

In the joint UNHCR-MMC report from July 2020, the issue of alleged physical and sexual abuse by some state

²⁹ UNHCR, Les risques d'apatridie au Mali et pour les Maliens vivant à l'étranger, August 2020, https://www.refworld.org/docid/5f3bf07c4.html

authorities at several points across Mali was highlighted. This was believed to be linked to checkpoints along the road. In addition, in December 2020, the Global Protection Cluster highlighted the issue of trafficking of children in the north to work on gold mines.30

Bamako

A range of services are available in Bamako for survivors of abuses and for other vulnerable groups. UNHCR, IOM and many other UN agencies as well as international and local NGOs have offices there.

Identification and outreach

- As part of Caritas Suisse's (Margaux Tharin, Country Director for Mali, mtharin@ caritas.ch) project to support the protection of the most vulnerable persons on the move along mixed movements routes (PROMISA), Caritas Mali mobile teams identify vulnerable people on the move, provide food, hygiene products and one-time cash assistance via vouchers. Guesthouses that can be used as shelters for short stays have been identified. Mobile teams have been trained on psychosocial support, legal counselling, social assistance and on referral mechanisms. Caritas Mali teams are implementing the project in San and Kayes, and Catholic Relief Services are implementing it in Timbuktu.
- Red Cross (+223 20 24 45 69) volunteers regularly go to mixed movements 'hotspots' such as bus stations and centres for migrants in Bamako to reach people on the move in need of medical assistance (see below). The Red Cross also refers vulnerable persons on the move to shelters. Depending on the level of vulnerability, the Red Cross offers a range of services such as psychosocial support, restoring family links, distribution of basic hygiene kits or access to food for up to three days. These activities, previously run under the AMIRA project, are continuing under a new project funded by the EU Trust Fund until January 2023.

Access to asylum procedures

- People seeking international protection in Mali should apply for asylum at the National Commission for Refugees (CNCR) in Bamako.
- The CNCR recently opened offices in Gao, Timbuktu, Koro (for the Mopti region), Ménaka and Anderamboukane and set up focal points in Tominian (for the Ségou region), and Sikasso. These field offices complement the office in Kayes. While those offices are still new, they can start the process by conducting identification interviews in collaboration with UNHCR (UNHCR Protection Hotline +223 82000438) offices in the regions before people are transferred to Bamako to complete the RSD procedure.
- For asylum applicants, no assistance is provided systematically by UNHCR, but CIAUD [Comité International pour l'Aide d'Urgence et le Développement] may provide shelter to people identified in the context of mixed movements via its partners on a temporary case-by-case basis at the beginning of the RSD procedure or before the transfer is organised.
- A rural shelter facility was recently reopened by the CNCR and UNHCR at Faragouaran (in the Bougouni region, 200km from Bamako), which will be accessible to asylum-seekers and refugees (but is more appropriate for long-term situations).

Shelter

 Shelters for people on the move in Bamako include the ARACEM (Association des Refoulés d'Afrique Centrale au Mali, +223 98 34 97 66) shelter in Bamako.

Services for victims of trafficking

- Enda Mali (+223 20 22 55 64) has a shelter for victims of trafficking, which is subsidized by IOM (IOM hotline +223 83 31 14 83; bkoprotection@iom.int). It has capacity for 40 people. Services include food and shelter; family tracing, psychosocial support, including recreational activities; non-food items; and medical assistance via a partner clinic in Bamako.
- IOM provides AVRR to and in the country of origin.
- IOM can also provide assistance to victims of trafficking in Gao, Mopti, Timbuktu and Kayes by working with partner organizations to provide housing, food, medical and psychosocial assistance, AVRR, and transfer to Bamako.

³⁰ UNHCR, Child-trafficking in Mali increasing because of conflict and COVID-19, 1 December 2020, https://www.refworld.org/docid/5f3bf07c4.html

Healthcare and mental health and psychosocial support

- Red Cross volunteers refer persons on the move in need of medical assistance to the Faladiè and Magnambougou Public Hospitals, with which they have agreements.
- Services offered by the Malian Red Cross (+223 76 84 49 69) in collaboration with the Danish Red Cross and the Spanish Red Cross include food assistance up to a maximum of three days; medical services (transportation to the health centre and the costs of treatment and of the medical consultation are covered); psychosocial support services through individual sessions in collaboration with reception centres; hygiene kits and clothing. The Malian Red Cross conducts awareness-raising activities through information sessions and makes referrals to institutions that provide more specialized services (such as lawyers for legal counselling). The Malian Red Cross also provides services for the restoration of family links. These services are offered subject to budgetary availability, as part of a project financed by the European Union Trust Fund for Africa through the end of 2022.

GBV support services

 The One Stop Centre (Yaye Diouf, +223 7604 1311) provides services for GBV survivors, including medical and psychosocial assistance, which refugees and migrants can access.

Child protection

- Guichet Unique (+223 76 71 83 34) runs a government shelter facility not specific to refugees or migrants that includes community liaison and social worker staff supported by Terre des Hommes and provides food and psychosocial support via external providers. It can provide temporary shelter for up to five nights and has five beds. Health providers come to the centre to deliver medical assistance, and more complicated cases are referred to health services of the State. After a maximum of five nights, children are referred to a CTO or to a host family.
- Centre de Transit et d'Orientation (CTO) and Centre Kanuya (+226 20 28 67 08, kanuyaong@gmail.com) are private centres that provides shelter, food, psychosocial support activities (with the support of Terre des Hommes), and income generating activities. They have up to 20 places and children can stay up to six months. Children staying outside the CTO can also take part in the activities.
- There are 66 host families across 14 locations in Mali, and placements are arranged by the Guichet Unique. Children stay with host families while family reunification is being arranged.

Legal assistance

 AT Services (+223 76 86 85 21 / 62 29 97 27; atservices7.justice@gmail.com), a legal clinic, provides assistance to refugees on issues relating to the asylum procedure and detention, as well as legal assistance in a variety of areas, including issues of naturalization and employment law. These activities are carried out in partnership with the NGO Association Malienne pour la Solidarité et le Développement (AMSODE).

Mopti

Identification and outreach

 CIAUD Canada deploys monitors across the region of Mopti to conduct identification and outreach for refugees and migrants in mixed movements. These monitors conduct sensitisation activities, collect data on mixed movement trends and protection concerns, and identify and refer people with specific needs to relevant services. Persons of concern to UNHCR wishing to seek asylum in Mali or return to their country of origin or asylum are referred to UNHCR/CNCR. CIAUD facilitates the transfer to Bamako as needed, provides direct assistance, and organises short-term accommodation in partnership with the shelters in a given zone.

Shelter

- There is no general shelter specifically for migrants in Mopti. However, the following may accept refugees and migrants on a case-by-case basis:
 - >> Le Centre Jean Bosco (+223 63 15 27 73) is a religious institution with dormitories. CIAUD makes referrals on a case-by-case basis;
 - Association pour le Progrès et la Défense des Droits des Femmes (APDDF, +223 76 32 62 30) is a local NGO working on women's rights. It can host women and girls, including women with children.

Mental health and psychosocial support

 Psychosocial support is currently not widely available, but the Danish Refugee Council has trained some medical workers.

GBV support services

• The One Stop Centre (+223 82 31 17 52) is run by UNFPA for GBV survivors from host and IDP populations. Refugees and migrants may also use their services, which include shelter, medical and legal assistance.

Child protection

- Guichet Unique runs a governmental shelter facility not specific to refugees or migrants that includes community liaison and social worker staff, with support from Terre des Hommes, and provides food and psycho-social support via external providers. It can provide temporary shelter for up to five nights and has five beds. After a maximum of five nights, children are referred to a CTO or a host family. Health providers come to the centre to provide medical assistance, and more complex cases are referred to health services of the State.
- The Centre de Transit et d'Orientation (CTO), owned by Bureau National Catholique de l'Enfance (BNCE, +223 69 10 94 90, bncemopti@yahoo.fr) provide shelter, food, clothing, psychosocial support, and basic medical assistance on site. Children stay around three months, but in some cases longer. For more complex cases, children are referred to health centres that the CTO has agreements with, and COOPI covers the costs.

Gao

Identification and outreach

 CIAUD Canada deploys monitors across the region of Gao to conduct sensitisation activities, collect data on mixed movement trends and protection concerns, and identify and refer people with specific needs to relevant services. This includes referring persons of concern to UNHCR/CNCR. CIAUD also provides food, non-food item kits and covers transportation and medical costs for persons under UNHCR's mandate who are identified in the context of mixed movements.

Healthcare and mental health and psychosocial support

• Services offered by the Malian Red Cross (+223 70 33 82 21 / 66 87 20 12) in collaboration with the Danish Red Cross and the Spanish Red Cross include food assistance up to a maximum of three days; medical services (transportation to the health centre and the costs of treatment and of the medical consultation are covered); psychosocial support services through individual sessions in collaboration with reception centres; hygiene kits and clothing. The Malian Red Cross conducts awareness-raising activities through information sessions and makes referrals to institutions that provide more specialized services (such as lawyers for legal counselling). The Malian Red Cross also provides services for the restoration of family links. These services are offered subject to budgetary availability, as part of a project financed by the European Union Trust Fund for Africa through the end of 2022.

Shelter

- La Maison du Migrant (+223 83 31 33 08, +223 62 30 06 87, maisondumigrantgao@ gmail.com) runs a shelter of Caritas Mali and that operates under the Mopti diocese and provides shelter and moral support to migrants, refugees and asylum-seekers. It provides basic health services and makes referrals to UNHCR, IOM and other relevant providers. The shelter conducts outreach by radio, holds information sessions for heads of transportation agencies and local communities and authorities to encourage them to refer migrants and other people on the move who are in need. The building is located in the centre of town with several rooms available, including a section reserved to unaccompanied children, and another to single mothers with their children.
- Centre Direy Ben (+223 73 33 09 92, +223 64 60 35 82, casedesmigrantsgaomali@ yahoo.com) is a shelter created by former migrants. It has capacity for up to 60 people. Services include shelter, information, referrals and food.
- Directorate of Civil Protection (Direction de la Protection Civile) is a governmental entity that provides shelter and health services for people on the move.

Child protection

- Guichet Unique (Ichiaka Maouloud +223 76 02 55 98) runs a governmental shelter facility not specific to refugees or migrants that includes community liaison and social worker staff, with support from Terre des Hommes, and provides food and psychosocial support via external providers. It can provide temporary shelter for up to five nights and has five beds. After a maximum of five nights, children are referred to a CTO or a host family. Health providers come to the centre to provide medical assistance, and more complicated cases are referred to health services of the State.
- Centre de Transit et d'Orientation (CTO), under Regional Directorate for the Promotion of Women, Children and Families (Direction Régionale de la Promotion de la Femme, de l'Enfant et de la Famille, Aliou Y Maiga +223 73 30 30 47) provides shelter for longer stays as well as food and psychosocial support. A medical team

Annex

provides basic medical assistance on site. For more complex situations, the centre has agreements with external health providers and covers the costs.

GBV support services

• One Stop Centre run by UNFPA for GBV survivors from host and IDP populations.

Timbuktu

Identification and outreach

- CIAUD Canada deploys monitors across the region of Timbuktu who to conduct sensitisation activities, collect data on mixed movement trends and protection concerns, and identify and refer people with specific needs to relevant services. This includes referring persons of concern to UNHCR/CNCR.
- Red Cross volunteers visit mixed movements 'hotspots' such as bus stations and centres for migrants to reach persons on the move who need medical assistance (see below). This is a new project funded by the EU Trust Fund until January 2023.
- As part of the PROMISA project, Catholic Relief Services (CRS, Aboubakrine Mohamed, Head of Office, aboubacrine.mohamed@crs.org, +223 74 96 92 49), mobile teams identify vulnerable people on the move, provide food, hygiene products and one-time cash assistance via vouchers. Guesthouses that can be used as shelters for short stays have been identified. Mobile teams have been trained in psychosocial support, legal counselling, social assistance and referral mechanisms.

Shelter

• The Directorate of Civil Protection (Direction de la Protection Civile) opened a new shelter in March 2021 to accommodate people on the move. It includes four rooms, including one for women, with six beds in each.

Healthcare and mental health and psychosocial support

• Red Cross volunteers (+223 74 90 40 41) refer persons on the move in need of medical assistance to the hospitals with which it has agreements, after filling in a referral form that they present at the hospital. This is a new project funded by the EU

Trust Fund until January 2023. Assistance also includes psychosocial support, hygiene kits, tracing family links, and counselling (such as referrals for those wishing to apply for international protection).

 Services offered by the Malian Red Cross (+223 74 40 15 07 / 65 58 60 60) in collaboration with the Danish Red Cross and the Spanish Red Cross in Bambara Maoude and Timbuktu include food assistance up to a maximum of three days; medical services (transportation to the health centre and the costs of treatment and of the medical consultation are covered); psychosocial support services through individual sessions in collaboration with reception centres; hygiene kits and clothing. The Malian Red Cross conducts awareness-raising activities through information sessions, and makes referrals to institutions that provide more specialized services (such as lawyers for legal counselling). The Malian Red Cross also provides services for the restoration of family links. These services are offered subject to budgetary availability, as part of a project financed by the European Union Trust Fund for Africa through the end of 2022.

GBV support services

- One stop centre run by UNFPA (Mohamed Abdoulaye, mabdoulaye@ unfpa.org, +223 79 86 84 52).
- Debbo Alafia (Amintou Hamadou, amintou.hamadou@gmail.com, +223 79 30 66 65) is a programme led by a consortium of organizations aiming to improve women and girls' rights and health and funded by the embassy of the Netherlands. Refugees and migrants can make use of its services, which include GBV case management and psychosocial support. In Timbuktu, it is implemented by the Malian NGO Association Malienne pour la Survie au Sahel (AMSS) and will run until June 2024.

Child protection

- Guichet Unique runs a governmental shelter facility not specific to refugees or migrants that includes community liaison and social worker staff, with support from Terre des Hommes and UNICEF, and provides food and psycho-social support via external providers. It can provide temporary shelter for up to five nights and has five beds. After a maximum of five nights, children are referred to a Centre de Transit et d'Orientation (CTO) or to a host family. Health providers come to the centre to provide medical assistance, and more complex cases are referred to government health services.
- Centre de Transit et d'Orientation, (Bakari Mariko, +223 76 72 01 17) run by the Regional Directorate for the Promotion of Women, Children and Families (DRPFEF), provides shelter for longer stays as well as food and psychosocial support. There is space for 20 children, but children staying outside can participate in the activities. A

medical team provides basic medical assistance on site. For more complex situations, the centre has agreements with external health providers and covers the costs.

Kayes

Identification and outreach

- Caritas Kayes (Etienne Honoré, etiennehonoretoe@gmail.com) has mobile teams to
 identify vulnerable people on the move and provide food, hygiene products and
 one-time cash assistance via vouchers. Guesthouses that can be used as shelters for
 short stays have been identified. Mobile teams have been trained on psychosocial
 support, legal counselling, social assistance and referral mechanisms.
- Two monitors of CIAUD will shortly be deployed to Kayes.

Access to asylum procedures

• Persons wish to apply for asylum in Mali can contact the CNCR office in Kayes.

Healthcare and mental health and psychosocial support

Services offered by the Malian Red Cross (+223 79 17 16 37 / 66792765) in collaboration with the Danish Red Cross and the Spanish Red Cross in Gogui, Kayes City and Diboli include food assistance up to a maximum of three days; medical services (transportation to the health centre and the costs of treatment and of the medical consultation are covered); psychosocial support services through individual sessions in collaboration with reception centres; hygiene kits and clothing. The Malian Red Cross conducts awareness-raising activities through information sessions and makes referrals to institutions that provide more specialized services (such as lawyers for legal counselling). The Malian Red Cross also provides services for the restoration of family links. These services are offered subject to budgetary availability, as part of a project financed by the European Union Trust Fund for Africa through the end of 2022.

Shelter

ETHIOPIA

• There are no shelters for people on the move in Kayes, and both Malians and non-Malians generally stay with locals through informal networks.

Child protection

 Guichet Unique runs a governmental shelter facility not specific to refugees or migrants that includes community liaison and social worker staff, with support from Terre des Hommes, and provides food and psychosocial support via external providers. It can provide temporary shelter for up to five nights and has five beds.

Kidal

Identification and outreach

- Red Cross volunteers go to migrant 'hotspots' such as stations and centres for migrants, including as far as Tessalit, to reach people who need medical assistance (see below for assistance provided).
- CIAUD Canada monitors conduct identification and outreach in Kidal.

Healthcare and mental health and psychosocial support

- Red Cross volunteers refer persons on the move in need of medical assistance to the hospitals with which the Red Cross has agreements, after filling in a referral form that they present at the hospital.
- Services offered by the Malian Red Cross (+223 71030907 / 89679663) in collaboration with the Danish Red Cross and the Spanish Red Cross in Kidal City and Tessalit include food assistance for up to a maximum of three days; medical services (transportation to the health centre and the costs of treatment and of the medical consultation are covered); psychosocial support services through individual sessions in collaboration with reception centres; hygiene kits and clothing. The Malian Red Cross conducts awareness-raising activities through information sessions and makes referrals to institutions that provide more specialized services (such as lawyers for legal counselling). The Malian Red Cross also provides services for the restoration of family links. These services are offered subject to budgetary availability, as part of a project financed by the European Union Trust Fund for Africa through the end of 2022.

MAURITANIA

People on the move largely access Mauritania by land. The main entry points are Rosso, on the border with Senegal, and Gogui Zemal, Hodh el Gharbi and Hodh el Chargui, on the border with Mali.³¹ Mbera camp, which hosts 68,424 registered Malian refugees, is 50km from Douankara border point, in the far southeastern corner of Mauritania.

In urban areas, around half of the people coming to Mauritania are from West African countries, and a third from Sahel countries. Only a small percentage of people (less than 15 percent) who enter Mauritania continue their journey further north or to the Canary Islands to access Europe.³² The majority of people coming to Mauritania, therefore, wish to earn income due to lack of such opportunities in their own countries or to access asylum due to ongoing violence, conflict or persecution at home.

Sea departures to the Canary Islands take place from the two main coastal cities in Mauritania, Nouadhibou and Nouakchott. There has been a sharp increase in movements along this Atlantic route since 2020.33 Boat

Mauritania, opened is now selling his thanks to UNHCR

³¹ IOM, Mauritanie - Enguête sur la migration à Nouadhibou, 29 December 2021, available at: https://dtm. $\underline{iom.int/reports/mauritanie\text{-}\%E2\%80\%94\text{-}rapport\text{-}d\%E2\%80\%99analyse\text{-}enqu\%C3\%AAte\text{-}sur\text{-}la\text{-}migration}$ %C3%A0-nouadhibou-mars-avril-2021; and IOM, Mauritanie Enquête sur la migration à Noua December 2021, available at: https://dtm.iom.int/reports/mauritanie-%E2%80%94-rapportd%E2%80%99analyse-enqu%C3%AAte-sur-la-migration-%C3%A0-nouakchott-mars-avril-2021

Mbera camp where he 32 UNHCR, Crossing Paths - A Respondent Driven Sampling survey of migrants and refugees in Nouadhibou, Mauritania, 5 September 2019, avalable at: https://data2.unhcr.org/en/documents/details/71198

³³ UNHCR, Europe Situations: Data and Trends - Arrivals and Displaced Populations, December 2021, available at: https://data2.unhcr.org/en/documents/details/90631

SOMALIA

Annex

journeys to the Canary Islands can take four days or more depending on the point of departure, with a high risk of shipwreck or drifting at sea for days, leaving the passengers stranded without food or water and serious medical needs. Along the Atlantic route through Mauritania, there have been some reports of abuse at the hands of smugglers, including extortion and physical abuse. 34

Malian refugees residing in the Hodh el Chargui region have access to humanitarian assistance and are progressively included in national services. As such, this report mainly maps out the services provided in the context of mixed movements in Nouakchott and Nouadhibou.

Nouakchott

Identification and outreach

- UNHCR conducts activities to identify individuals in need of international protection and makes referrals of other people on the move to partners, including IOM. Information about asylum procedures is disseminated through the different communities, UNHCR Hotline (8000 3000) and its protection desk located at the Association for the Fight against Poverty and Under-Development [Association pour la Lutte contre la Pauvreté et le sous Développement or ALPD] (llot K, Garage Guinee).
- IOM (iomnouakchott@iom.int, +222 49 43 99 84) is setting-up a new system of community organizers, who will raise awareness and potentially also identify

https://mixedmigration.org/wp-content/uploads/2021/02/160_a_gateway_reopens_research_report.pdf

migrants in vulnerable situations. Identification is conducted through local civil society organizations that come into contact with migrants. Migrant communities also refer cases to IOM, as do consulates and embassies. IOM also has a phone number and WhatsApp number (+222 28 88 89 67) that migrants can call directly. Some migrants are referred to IOM by the authorities (for instance following shipwrecks), mainly for medical treatment. IOM refers people with potential international protection needs to UNHCR.

- The Mauritanian Association for the Health of the Woman and the Child (AMSME. hotline 1013, +222 49901931, +222 44062674) and the Association of Female Heads of Households (AFCF, +222 22302527, +222 38030030) have mobile teams in police squads. These teams identify victims of GBV and direct them to specialized units at the hospital.
- Medicos del Mundo Spain (MDM, +222 45290876) works with health centres, hospitals, schools, student and youth clubs, and civil society organizations to enable officers to identify victims of GBV who are in need of support and to refer them to available structures. MDM has opened four listening and counselling centres in Nouakchott, which can make referrals to specialized units. With the organization Action (+222 46749371, +222 46412702), MDM also conducts awareness raising activities in neighbourhoods where migrant populations live.

Access to asylum procedures

- In Mauritania, UNHCR conducts mandate registration and RSD. People seeking international protection in Mauritania can apply for asylum at the ALPD Office (llot K, Garage Guinee) and will be required to fill out a registration form. Persons with specific needs are prioritized for registration interviews with UNHCR.
- Asylum-seekers can make enquiries about their case by visiting the protection desk (ALPD), calling the hotline (8000 3000) or writing an email (maunoprt@unhcr.org).
- Malian refugees are recognized on a prima facie basis in Mbera Camp at the Southern border with Mali.

Shelter

 IOM provides private emergency accommodation to a limited number of persons in situations of vulnerability, including victims of trafficking (iomnouakchott@iom.int, +222 49 43 99 84), who contact IOM directly or are referred by migrant communities or stakeholders. As part of IOM's AVRR programme, migrants can access temporary accommodation while they await to return to their country of origin. IOM also offers food assistance through its partner, the Catholic Mission in Nouakchott, which also distributes non-food items, as well as through private entities as needed. IOM supports local organizations such as the AFCF and the Association for the

³⁴ Mixed Migration Centre, A Gateway Re-opens: the growing popularity of the Atlantic route as told by those who risk it, February 2021, available at:

Involvement of Women in the Promotion of Democracy and Civic Education (AIFPDEC), which have temporary shelters for migrants (men and women) in Nouakchott.

Healthcare

IOM (iomnouakchott@iom.int, +222 49 43 99 84) has an agreement with the Cheikh
Zayed hospital and covers the costs of treatment and medication for migrants who
are referred there. To access this service, migrants must first receive an assessment
and a referral by IOM.

Mental Health and psychosocial support

• IOM (iomnouakchott@iom.int, +222 49 43 99 84) has set up, together with the French Red Cross, a listening centre (Espace d'écoute) in the offices of the AFCF. The centre is open to anyone in need of psychological assistance. Cases that require extensive psychological or psychiatric assistance can be referred to the Specialty Hospital in Nouakchott or to private psychologists, and the costs are covered by IOM. IOM refers people with potential international protection needs to UNHCR.

GBV support services

• Medicos del Mundo Spain (+222 45290876) supports special care units (Unités Spéciales de prise en charge intégrale médicale, psychosociale, et juridique des VBG – USPEC) at the hospitals Mère Enfant (+222 49313493) and Amitié (+222 47211901). The services are free of charge and open to survivors of sexual violence as well as other types of GBV (including FGM and forced marriage). The units provide medical, legal and psychosocial care. The medical unit includes midwives and nurses who call on the medical services of the hospital if needed, and a psychosocial assistant for psychosocial care. The service is open to all and free of charge, and it is available 24 hours a day. No identification or other documentation is required. However, there are no translation services other than for Mauritanian languages. Social workers from AMSME and AFCF are also available to follow up on psychosocial and legal matters, and for issues of emergency accommodation. There are two other units in the regional hospitals of Kiffa and Selibabi. An additional unit will open in Kaedi, in the Gorgol region.

Legal assistance

• UNHCR, through its partner El Insaniya (elinsaniya@gmail.com, hotline: + 222

80001002), provides legal and judicial assistance services to persons with international protection needs, including those in administrative detention.

- In the special care units managed by Medicos del Mundo Spain (+222 45290876), the focus is on supporting the victim, and explaining to them what a crime is and what their rights are. Those who wish to lodge a complaint receive support throughout the process. Social workers from AMSME and AFCF work with their lawyers in Nouakchott to provide legal follow-up. In other regions, social workers from the Mauritanian Association for the Promotion of the Family (AMPF) are present.
- IOM provides consular assistance (iomnouakchott@iom.int, +222 49 43 99 84) to migrants in need of travel documentation in support of the voluntary return, shipwreck survivors or people in administrative detention to return to places of origin or habitual residence. In providing these services, IOM liaises with consulates with the consent of the individuals concerned to provide information and obtain passports and other personal documents. For nationalities without consular representation in Mauritania, IOM liaises with consulates in Senegal, Morocco or Algeria. IOM refers people with potential international protection needs to UNHCR.
- Migrants in an irregular situation in Mauritania can access legal assistance to obtain residence permits as well as birth certificates for children born in Mauritania through a partnership between IOM and the National Agency for the Register of Populations and Secure Titles (ANRPTS).
- IOM and UNHCR advocate for alternatives to administrative detention of migrants and coordinate in facilitating solutions, case-by-case for refugees, asylum-seekers and migrants, particularly for children, women, persons with medical conditions, and victims of trafficking).

Child Protection

- UNICEF provides support to the Centre for Children's Protection and Social Inclusion (CPISE: +222 44 44 46 79), a government day centre to accommodate children on the move. The CPISE headquarters is located in Nouakchott and has seven antennas for the protection and social inclusion of children on the move: in the three wilayas of Nouakachott, Nouadhibou, Aleg, Kiffa and Rosso.
- UNICEF also support the Guichets Uniques, One-Stop Shops for children with protection issues, including children on the move (who come from other regions of Mauritania or from other countries), that provide referrals to the right services, including GBV services and medical services. There are three One-Stop Shops in Nouakchott, Nouadhibou and Rosso, and soon in Selibaby.
- UNICEF also supports safe spaces for girls in Nouakchott and Bassikounou and is working on establishing one in Selibaby.
- UNICEF is working with the Ministry of Social Affairs, Children and the Family (MASEF) to set-up a system of foster families for children on the move, starting with a

pilot project in Nouadhibou.

• IOM (iomnouakchott@iom.int, +222 49 43 99 84) conducts best interest of the child procedures, as well as family tracing, family assessment, and restoring family links. A new project of host families that can temporarily accommodate unaccompanied migrant children while family links are being restored is being set up. In the meantime, IOM is working closely with the government's Centres for Children's Protection and Social Inclusion (CPISE) on placing unaccompanied children in need of alternative care. If the child returns to their country of origin, IOM provides an escort for the trip.

Services for victims of trafficking

 Very few cases of victims of trafficking are identified along the Atlantic route, including because people arrested who are not identified as having international protection needs are quickly deported to their country of origin.

Assisted voluntary return and reintegration

 Migrants in vulnerable situations who wish to return to their country of origin can receive assistance for their voluntary return and reintegration from IOM. People not identified as in need of international protection following UNHCR's assessment rescued from shipwrecks on the Atlantic Route who, for humanitarian reasons, the authorities did not return to the borders can apply to IOM for AVRR.

Nouadhibou

Identification and outreach

- UNHCR conducts screenings in detention to identify persons of concern to UNHCR and refers other people on the move to partners, including IOM. Information about asylum procedures is disseminated throughout the different communities, UNHCR Hotline (8000 3001) and its protection desk located at the ALPD (quartier Khayran). Individuals are referred to UNHCR by local authorities, IOM and other actors engaged in protection activities in Nouadhibou and mainly NGOs involved in the Table Ronde de Coordination des Mouvements Mixtes de Nouadhibou.
- IOM (iomnouakchott@iom.int, +222 28 88 89 68) conducts outreach activities through its "Aware Migrant" project. A communication campaign on the dangers of

irregular migration is ongoing. Migrants in vulnerable situations and in need of assistance are identified and referred to IOM by NGOs, migrant organizations, migrant communities and the authorities. In situations of disembarkation, Mauritanian authorities refer cases of migrants to IOM for food and medical assistance and accommodation, and these services are provided through the French Red Cross and the Mauritanian Red Crescent. IOM in Nouadhibou has a WhatsApp number and a phone number that migrants can call directly for assistance.

SOMALIA

 Medicos del Mundo Spain (MDM, +222 45290876) works with health centres, hospitals schools, student and youth clubs and civil society organizations to enable officers to identify victims of GBV, including people on the move, who are in need of support and to refer them to available services.

Access to asylum procedures

- Also in Nouadhibou, UNHCR conducts mandate registration and RSD. People seeking international protection in Mauritania are able to access RSD procedures at UNHCR's Office (quartier Dubai) and will be required to fill out a registration form.
 Persons with specific needs are prioritized for registration interviews with UNHCR.
- Asylum seekers can make enquiries about their case by visiting UNHCR's office, the
 protection desk (ALPD, quartier Khayran), calling the hotline (8000 3001) or writing
 an email (maunuprt@unhcr.org).

Shelter

- Through agreements with two private entities, IOM (iomnouakchott@iom.int, +222 28 88 89 68) provides emergency accommodation services for vulnerable people on the move. Most of the beneficiaries are people who were rescued or intercepted at sea or in the desert as well as those awaiting voluntary return to their countries of origin. These are apartments that IOM has rented with capacity of up to 10 persons each. Children up to the age of 17 are accommodated in Centres for Children's Protection and Social Inclusion (CPISE) which, in addition to accommodation, provide educational activities as the children await family reunification. In general, there are very few families and women seeking shelter. IOM provides people who are accommodated in the apartments with food assistance and non-food items through its partnership with the Catholic Mission of Nouadhibou, as well as other entities as needed.
- The Organization of Migrants (Organisation des Migrants de Nouadhibou, +222 46
 58 83 10) in Nouadhibou provides accommodation for migrants, and IOM sometimes refers migrants there.

Healthcare

- At the regional hospital of Nouadhibou, IOM (iomnouakchott@iom.int, +222 28 88 89 68) covers the costs for the treatment and medication for migrants who are treated there. Migrants who live in Nouadhibou as well as those who are in transit or were rescued at sea are eligible. IOM has an agreement with the hospital centre, and people are referred with a referral form. Additionally, there is follow up with the French Red Cross through IOM's agreement with the organization. IOM covers the costs of treatment at the hospital. Only those who have a referral receive treatment at the hospital. For people who were rescued or intercepted at sea, the police call IOM and IOM sends the referral form to the hospital.
- The French Red Cross and the Mauritanian Red Crescent provide physical and psychological first aid to people who were rescued at disembarkation points and refer them to hospital if further treatment is needed. The French Red Cross and the Mauritanian Red Crescent refer people with potential international protection needs to UNHCR.

Mental health and psychosocial support

- In partnership with IOM, the Red Cross has a listening centre for migrants in Nouadhibou in the offices of the Organization of Migrants in Nouadhibou. They have trained volunteers and provide assistance through counselling. The Red Cross also provides psychological first aid to people who survived shipwrecks or were rescued or intercepted at sea.
- There are no psychologists in Nouadhibou.

GBV support services

• Save the Children (+222 45256693), in partnership with Medicos del Mundo Spain (+222 45290876) has a special care unit at the regional hospital of Nouadhibou (+222 41131511). Services are free of charge and open to survivors of sexual violence as well as other types of GBV (such as FGM and forced marriage). The unit provides medical, legal and psychosocial care. The medical unit includes midwives and nurses, and a psychosocial assistant for psychosocial care. The 24/7 service is open to all and free of charge. No identification or other documentation is required. However, there are no translation services other than for Mauritanian languages. Social workers from the Mauritanian Association for the Promotion of the Family (AMPF) are also available to follow-up on psychosocial and legal matters, and for issues of emergency accommodation.

Legal assistance

 UNHCR, through its partner El Insaniya (elinsaniya@gmail.com, hotline: + 222 80001002), provides legal and judicial assistance services to persons of concern to UNHCR, including in cases of administrative detention.

SOMALIA

- IOM (iomnouakchott@iom.int, +222 28 88 89 68): for migrants who live in Nouadhibou, do not have a residence card and wish to stay and work rather than to continue their journey, a project to help them regularize their status is in its pilot phase. There have been 50 people assisted so far.
- IOM advocates with the police for the release of migrants in a vulnerable situation (women, children, people who have been injured or who have medical conditions, as well as victims of trafficking), and IOM refers them to its system of assistance. People who were rescued or intercepted at sea are generally held by police for 24 hours and then deported unless they are identified as having international protection needs. If the migrant wishes to return to their country, IOM organizes their voluntary return. Vulnerable persons (children, older persons) are escorted, and a medical escort is arranged for medical cases. For those who do not have valid documents, IOM makes a connection with the diplomatic representation. Once travel passes have been issued, IOM coordinates with IOM in the country of origin, transfers the person to Nouakchott and assists them at the airport.

Child protection

- UNICEF provides support to Centres for Children's Protection and Social Inclusion (CPISE: +222 27 80 27 40), which are government day centres, so that they can accommodate children on the move. These centres have One-Stop Shops for children on the move (who come from other regions of Mauritania or from other countries) which provide referrals to the right services, including GBV services and medical services. There is a One-Stop Shop in Nouadhibou.
- UNICEF is working with the Ministry of Social Affairs, Children and the Family (MASEF) to set-up a system of foster families for children on the move, starting with a pilot project in Nouadhibou.
- UNICEF is working on setting-up a safe space for girls in Nouadhibou.

Other types of assistance

 Food parcels and non-food items are distributed by the Catholic Mission of Nouadhibou, a partner of IOM. Some beneficiaries are referred by their communities, by migrant organizations in Nouadhibou, or by civil society organizations. Caritas also distributes food parcels, as well as the Organization of Migrants in Nouadhibou Migrant Organization which receives support by IOM to distribute food kits.



MOROCCO

Morocco is a country of origin, transit and destination for people on the move. Given its location, Morocco is a key transit country for people on the move who are trying to reach Europe, notably nationals of sub-Saharan African countries, either by crossing the Atlantic to the Canary Islands or by crossing the Mediterranean, or by going through the Spanish enclaves of Ceuta and Melilla.

The main cities of transit or residence for people on the move are Rabat, Casablanca and Marrakech, as well as Tangier, Assilah and Tetouan in the north, Oujda and Nador in the northeast of the country near the Algerian border, and Fès and Meknès in the east.

As people on the move attempt to make their journey and/or apply for asylum, some fall victim to exploitation, physical violence and trafficking. Most of the victims of these abuses are women and children.

There are no service providers that are working solely on the issue of trafficking of persons in Morocco. Although Morocco adopted a law on human trafficking in 2016, there are significant gaps in terms of identification, access to care and durable solutions for victims of trafficking.

UNHCR staff and

Access to asylum procedures

• UNHCR conducts Registration and RSD. People seeking international protection in Morocco can apply for asylum by approaching UNHCR's offices in Rabat at 10 Avenue Mehdi Ben Barka, quartier Souissi, Rabat, or for those living outside of Rabat by contacting UNHCR's Registration helpline (+212537545400, +212670064782 (WhatsApp call or message), morrareg@unhcr.org).

Services for victims of trafficking

- In 2016, Morocco adopted a law on prevention of human trafficking, protection of victims of human trafficking and prosecution of perpetrators. The law created a National Commission on Human Trafficking, which has functioned since 2019. The law foresees a National Referral Mechanism, which has not yet been implemented.
- UNODC, IOM and the Council of Europe has developed capacity building activities for institutional and civil society actors.
- A platform coordinated by the Comité Contre l'Esclavage Moderne (CCEM), called "Projet SAVE" offers assistance to victims of trafficking in different regions of Morocco.
- The American Bar Association offers legal assistance to victims of trafficking (Youssef El Falah, youssef.elfalah@abaroli.org).
- Protection Working Groups in the different locations identify and refer potential victims of trafficking.

Rabat

Shelter

• The Foundation Orient Occident (Noureddine Dadoun, chef.soc@ fondationorientoccident.org, +212 6 14 00 47 39) offers assistance, accommodation for a very limited number of refugees and listening services to migrant women, men and children, and to refugees and asylum seekers.

Healthcare

• Maroc Solidarité Médico-sociale (MS2, +212 5 37 75 93 53) works on the sustainable promotion of the right to health of vulnerable groups by promoting equal access to

services, strengthening the protection of migrants' and women's rights, the integration of a comprehensive medico-psychosocial approach in primary healthcare and improving access for victims of violence to quality services. Some shelters are available for women, and victims of violence.

SOMALIA

Annex

- The Association for Combating AIDS (ALCS), Rabat (+212 5377 97331) works for the prevention of HIV infection and for medical and psychosocial care for people living with HIV.
- The Moroccan Association for Family Planning (AMPF, Rabat Salé-Kénitra branch, +212 5 37 72 12 24, ampf@ampf.org.ma) provides counselling and consultations in family planning to Moroccan men, women, youth and children, and to migrants and refugees, as well as consultations in specialized areas including gynaecological, paediatric, prenatal and postnatal. The AMPF also helps refugees and asylum seekers make appointments at and can accompany them to public hospitals.

Mental health and psychosocial support

• The Foundation Orient Occident (Nourredine Dadoum: chef.soc@ fondationorientoccident.org, +212 6 14 00 47 39) offers psychosocial support and listening services to migrant women, men and children, and to refugees and asylumseekers.

Services for victims of trafficking

- Association Afrique Culture Maroc (Mme Amal Jandali: afriqueculturemaroc@gmail. com / +212 619 559 808) has one accommodation centre for vulnerable migrant
- Association ISIA (Salé) (Mme Hayat Baraho: ass.isia2015@gmail.com / +212 671 833245) has one accommodation centre for migrant women originating from Asia in socially difficult situations.

Casablanca

Identification and outreach

• Bank de la Solidarité (bankdelasolidarite@gmail.com, +212 6 60 40 48 83) provides medical care to migrants and asylum seekers through the organization of "medical caravans." The organization also provides emergency humanitarian aid.

Legal Assistance

 The Association for Law and Justice (Abdelhadi@droitetjustice.org) assists refugees, asylum-seekers and migrants as they complete administrative procedures and asylum applications, and helps them with the process of renewing their residence permits.

Healthcare

• The Moroccan Association for Family Planning (AMPF, Mohamed Zouak, si.zouak@gmail.com) provides counselling and consultations in family planning to Moroccan men, women, youth and children, and to migrants and refugees, as well as consultations in specialized areas, including gynaecological, paediatric, prenatal and postnatal. The AMPF also helps refugees and asylum-seekers make appointments and can accompany them to public hospitals.

Shelter

SAMU Social (samusocialcasa@gmail.com, +212 5222 93939) runs a centre that
provides asylum seekers and migrants with social assistance through
accommodation and psychosocial care.

Services for victims of trafficking

 The Institut national de solidarité avec les femmes en détresse (INSAF), Casablanca (M Omar Saadoun: omar.saadoun@insaf.ma / +212 661-498658) has one accommodation centre for single mother victims of social exclusion, including exploitation and one accommodation centre for child victims of exploitation in Talat N'Yacoub (El Haouz).

Child Protection

Association Bayti (Mme Amina Lmaih / aminabayti@gmail.com) supports
unaccompanied and at-risk children by providing accommodation and educational
and psychological support.

Marrakech

Child protection

 Association Al Karam (alkarammkh@yahoo.fr, +212 5 24 30 86 95) supports unaccompanied and at-risk children by providing accommodation and educational and psychological support.

Healthcare and mental health and psychosocial support

- The Association for Combating AIDS (ALCS), Marrakech (+212 5 24 42 18 34, +212 5 24 43 98 43) works on the prevention of HIV infection and on medical and psychosocial care for people living with HIV.
- The Moroccan Association for Family Planning (AMPF, Marrakesh branch, Rachid El Bekali, +212 6 61 93 65 16, elbakaliampf@gmail.com) provides counselling and consultations in family planning to Moroccan men, women, youth and children, and to migrants and refugees, as well as consultations in specialized areas including gynaecological, paediatric, prenatal and postnatal. The AMPF also helps refugees and asylum seekers make appointments at and can accompany them to public hospitals.
- The Chams Association for Mental Health (chams_asso@yahoo.fr, +212 24302388)
 works on improving mental health for people in difficult situations in order to enable
 patients to access or regain their autonomy by helping them with psychological
 rehabilitation.

Services for victims of trafficking

Association Al Karam, Marrakech et Safi (Mme Hajar Belghachi: centrealkarammkh@gmail.com / +212 662-156697) has two accommodation centres for child survivors of violence in Marrakech and Safi.

Tangiers-Assilah

Identification and outreach

- ProgettoMondo (marocco.mannino@progettomondo.org) carries out information campaigns on the risks of irregular movement for Moroccan youth as well as migrants who are in transit in Morocco. This includes information on legal pathways for migration and employment and training opportunities.
- The Enabel project (fadwa.amharech@enabel.be, +212 6 63 80 58 02) helps reinforce access to rights for migrants, refugees and asylum-seekers in Morocco by strengthening knowledge on the rights of these groups, by promoting networking and coordination between different actors, by supporting the production of scientific thematic data and the sharing of information on access to rights, and by facilitating the exchange of information and recommendations between relevant actors with a view to contributing to adapting tools and service structures to the needs of people on the move.

Healthcare

- The Moroccan Association for Family Planning (AMPF, Northern Branch, aassouali@ ampf.org.ma, +212 661262373, +212 766701935) provides family planning counselling and consultations to Moroccan men, women, youth and children, and to migrants and refugees, and consultations in specialized areas including gynaecological, paediatric, prenatal and postnatal. The AMPF also helps refugees and asylum seekers make appointments at and can accompany them to public hospitals.
- Mujeres en Zona de Conflicto (MZC, Claudia Gallego Rodriguez; counselling. gallego@mzc.es) provides people on the move from sub-Saharan Africa, especially women and children, with medical and psychological assistance. MZC also participates in the identification and referral of potential victims of trafficking.
- The Association for Combating AIDS (ALCS) Tangiers works for the prevention of HIV
 infections and for access to medical and psychosocial care for people living with HIV.

Mental health and psychosocial support

- The Foundation Orient Occident (Loubna Akkaoui, soc.educ.tanger@
 fondationorientoccident.org, +212 6 60 43 50 90) offers psychosocial support and
 specialized mental health support as well as listening services to migrant women,
 men and children, and to refugees and asylum seekers.
- The Moroccan Initiative for Solidarity (IMS, i.m.s.maroc.officielle@gmail.com) provides consultations in mental and physical health to migrant women and their children.

Child protection

 The Tadamon Association for supporting children in difficult situations (asso. tadamon@gmail.com) offers medical and psychological assistance services to unaccompanied and separated migrant and Moroccan children.

Al Hoceima

Services for victims of trafficking

 Association Accueil, Ecoute et Orientation pour l'accompagnement, Al Hoceima (Mme Souad Benkachouch: rad.alhoceima@gmail.com / +212 661-503771) has one accommodation centre for women survivors of violence in Al Hoceima.

Tétouan

Healthcare

Mains Solidaires (manossolidariasmartil@yahoo.es) helps refugees, asylum seekers
and migrants (men, women and children) to access care in hospitals in the region
(Tétouan M'diq and Fnideq) and provides administrative support to register children
in Morocco's civil status system. The organization also provides humanitarian
assistance with medicine, clothes, shoes and blankets as well as food assistance.

Oujda

Identification and outreach

 The Moroccan Organization for Human Rights (OMDH, cajoujda@gmail.com, +212 662206757) supports migrants, asylum seekers and refugees who are victims of human rights violations, and works to protect, promote and raise awareness of human rights. The OMDH has established outreach mechanisms to identify new Contents Foreward Introduction Methodology Observations BURKINA FASO CAMEROON CHAD CÔTE D'IVOIRE DJIBOUTI ETHIOPIA MALI MAURITANIA MOROCCO NIGER SOMALIA SUDAN Conclusion

arrivals in need of international protection and refers them to UNHCR Rabat for registration.

Healthcare and mental health and psychosocial support

- The Al Wafae Association (adso.sabah@hotmail.com, +212 0666 03 17 98) offers
 psychological support and health assistance for refugees, asylum seekers and
 migrants in partnership with Médecins du Monde, as well as assistance with basic
 necessities such as food, mattresses, blankets, hygiene products and items for
 children and babies.
- MS2 (solidarite.ms.2@gmail.com, +212 669582194) works on the sustainable promotion of the right to health of vulnerable groups by promoting equal access to services, strengthening the protection of migrants' and women's rights, the integration of a comprehensive medico-psychosocial approach in primary healthcare and improving access for victims of violence to quality services. MS2 provides shelter for women, victims of violence.

GBV support services

 Association Ain Ghazel (+212 6 61 98 15 77, nezhaejaada@gmail.com, mainghazal2000@yahoo.fr) works on the promotion of gender equality and combating violence against women by setting-up a mechanism for equality and the fight against GBV, and by the economic empowerment of women in the Oriental region.

Fès-Meknès

Shelter

 Caritas (a.gueye@caritas.ma) provides housing assistance to migrant children and to asylum seekers, as well as food baskets for children, warm meals, blankets and clothes.

Healthcare and mental health and psychosocial support

The Moroccan Family Planning Association (AMPF, Kawtar Loukili, kloukili55@gmail.

com) offers sexual and reproductive health and family planning services to refugees, asylum seekers and migrants, including screening for sexually transmitted diseases. It also provides psychosocial support.

• The church Notre Dame des Oliviers (paulgabriel1988@yahoo.com, +212 06 21 63 48 03) provides services for migrants and asylum seekers, including health assistance, covering the costs of treatment and mediation with administrative, health and judicial authorities. The church also distributes food kits, hygiene products and clothing, and provides housing support and financial assistance to newcomers.

GBV support services

- The Association for Combating AIDS (ALCS, alcs@alcs.ma, +212 522223113)
 provides medical and psychological care to migrant survivors of sexual or GBV.
- The Initiative for the Protection of Women's Rights (ipdf2@yahoo.fr, +212 661 306644) is an organization whose mission is gender equality in law and in practice, through the defense of women's universal rights.

Agadir

Services for victims of trafficking

 Association Voix de Femmes Marocaines, Agadir (Mme Hayat TORDIOUINE: voix. femmes.saveagadir@gmail.com / +212 637 089 653) has one accommodation centre for women survivors of violence in Agadir.



NIGER

Niger is also an important country of transit, including for those traveling to Libya and Algeria. Travel as far as Agadez is usually by bus but further travel north will often involve the use of smugglers. Measures to reduce irregular movement towards Libya has resulted in a decrease of refugees and migrants on the move in locations such as Agadez.

Key locations identified by UNHCR and partners for protection services to survivors of abuses include Niamey, Agadez, and Arlit in the north, and Zinder, on the border with Nigeria.

In October 2020, IOM and the National Agency for the Fight Against Trafficking in Persons (ANLTP) announced Niger's first National Referral Mechanism (NRM) for victims of trafficking. The NRM describes the process for the identification of and assistance to victims of trafficking, the judicial process (including information on legal assistance and the rights of victims of trafficking), as well as the process of return to the country of origin. The NRM is accompanied by a mapping of actors involved in anti-trafficking.35

Refugees Filippo General of the

³⁵ Republique du Niger, Cartographie des Acteurs Intervenant dans le Domaine de la Traite des Personnnes et du Trafic Illicite de Migrants au Niger.

Identification and outreach

Under the EU- funded project to support the protection of the most vulnerable migrants along migratory routes in the Sahel (PROMISA), CRS (Christiane Benoit Gbago, christiane.gbago@crs.org) has mobile teams trained in social assistance, legal counselling and psychosocial support are deployed in key locations. These teams advise people on the move directly or refer them either to information points where they can receive vouchers for food and hygiene items, or to other actors (for instance IOM for AVRR). The vouchers are for the most vulnerable (such as children, single women, persons with disabilities and victims of trafficking).

Shelter

- IOM operates three transit centres in Niamey for migrants awaiting AVRR. One centre
 is specialized for unaccompanied migrant children (UAMCs) and families (50 places),
 one centre is for women and victims of trafficking (60 places), and one is for men
 (100 places). IOM transit centres provide accommodation, food, assistance with
 documentation, 24/7 medical services, MHPSS services, socio-educational activities,
 as well as training. Teams of protection assistants are present in each centre and
 provide individualized management of the most vulnerable cases as well as
 information on asylum.
- For asylum applicants, there is no systematic access to accommodation, but it can be provided on a case-by-case basis.

Access to asylum procedures

- One Stop Shop (Guichet Unique de protection et d'assistance):
 - Asylum applicants can apply for asylum with the National Eligibility Commission (Commission Nationale d'Eligibilité).
 - >> UNHCR provides guidance.
 - >> Action pour le Bien-Etre (APBE) provides medical assistance.
 - Humanite et Inclusion (HI, Madjimbaye Kladoum, m.kladoum@hi.org) provides shelter in urban areas and services including shelter for asylum-seekers on the migratory route and assistance to GBV survivors.
 - The One Stop Shop also has a toll-free number which asylum- seekers and refugees can call and ask for assistance on a confidential basis.

- CIAUD Canada (Mahamadou Yattara, mahamadou.yattara@ciaud.ca) conducts outreach on asylum processes in Niger. Monitors conduct identification and referrals of people wishing to apply for asylum to the National Eligibility Commission (CNE).
- Staff of the IOM transit centres (administrative, protection and MHPSS staff) follow
 the protocol for referrals to UNHCR for any person who expresses an interest in
 international protection or people whose case management reveals that voluntary
 return does not seem to be a realistic or safe option. The person is transferred to
 UNHCR's care once the asylum application has been submitted. Legal assistance is
 provided as needed, in partnership with the National Agency for Legal and Judicial
 Assistance (Agence Nationale d'Assistance Juridique et Judiciaire, ANAJJ).

Healthcare

 For people under UNHCR's mandate, Action pour le Bien-Être (APBE, Souleymane Dieye souleymane@apbe.org) is the partner that leads on access to healthcare.
 Refugees and asylum seekers are reimbursed for the costs of treatment in public health centres and private clinics with which APBE has an agreement, and for the cost of medicine.

Mental health and psychosocial support

Mental health centre run by COOPI (Morena Zucchelli, Chief of Mission, cm.niger@ coopi.org) has capacity to assist around 50 people. Most are from the Emergency Transit Mechanism (ETM) but it is also open to people on the move and to Nigeriens. A number of organizations make referrals to the centre.

Legal assistance

 Under the Ministry of Justice, ANAJJ provides legal advice and assistance in judicial proceedings. CÔTE D'IVOIRE

Agadez

A range of services are available in Agadez for people on the move, and many humanitarian organizations have offices there.

Identification and outreach

- Under the EU- funded project to support the protection of the most vulnerable migrants along migratory routes in the Sahel (PROMISA), CRS (Christiane Benoit Gbago, christiane.gbago@crs.org), has mobile teams trained in social assistance, legal counselling and psychosocial support are deployed in key locations. These teams advise people on the move directly or refer them either to information points where they can receive vouchers for food and hygiene items, or to other actors (for instance IOM for AVRR). The vouchers are for the most vulnerable (such as children, single women, persons with disabilities and victims of trafficking).
- Action pour le Bien-Être (APBE, Souleymane Dieye, souleymane@apbe.org) conducts monitoring activities in places where persons on the move are present such as bus stations, specific urban areas and banks.
- IOM community mobilisers (+227 96 98 32 25) go to places where there are many migrants and provide information about regular migration, the risks of irregular migration, and available services.
- Nigerien Red Cross (Maazou Oumarou, crdmigracrn@gmail.com) has a mobile team that goes to places where refugees and migrants are present, such as stations and specific urban areas. They provide medical services to those who need them and make referrals to the hospital where necessary.
- IRC in Niger (William, protection project coordinator, https://www.signpost.ngo) through its Signpost approach, will provide interactive and responsive information services to meet the needs of people on the move. This information is provided through: 1) direct outreach in specific urban areas and communities as well as information points set-up in strategic locations such as bus stops; 2) toll-free numbers and WhatsApp messages managed by moderators; and 3) via an online platform (Sheega.info) and a Facebook page.
- With the support of UNHCR, the Sultanate of Air organizes outreach caravans on the peaceful cohabitation between the host population, asylum-seekers and migrants. These activities have contributed to reducing social tensions linked to the presence of asylum-seekers and refugees in the city.

Shelter

- For persons under UNHCR's mandate, the UNHCR's Centre Humanitaire (+227 92 18 58 49) hosted 1,801 people as of January 2022 and is located 15km from Agadez.
- UNHCR has five Cases de passage (+227 80 06 81 62), which are houses with a total capacity of 292 people. Four are managed by APBE and one by COOPI. There are separate houses for men and women. APBE provides food and medical care (except psychosocial support).
- "Cases de protection" are run by UNHCR in Agadez (+227 80 06 81 62), which are specifically for people with particular vulnerabilities, which may include LGBTQ+ people.
- The IOM transit centre has 1,000 places for migrants awaiting AVRR. IOM transit centres provide accommodation, food, assistance with documentation, 24/7 medical services, MHPSS support services, socio-educational activities as well as training. Teams of protection assistants are present in each centre and provide individualized management of the most vulnerable cases as well as information on asylum.

Healthcare

- APBE (Souleymane Diete, souleymane@apbe.org) provides primary care. For specialist care, people are referred to public health centres in Agadez or other cities
- The French Red Cross (hosd-agadez.frc@croix-rouge.fr) has a clinic, which all people on the move through Agadez can access. The ICRC, Nigerien Red Cross and French Red Cross deploy mobile teams that provide medical assistance where people on the move are staying. More complex cases are referred to the regional hospital and to centres for mothers and children.
- Médecins du Monde (MDM) (Bonkana Traore, comed.niger@ medecinsdumonde.be) covers the costs of public health services.
- For people whose condition cannot be treated in Agadez, UNHCR (+227 80 06 99 66) arranges transportation to Niamey by plane or by bus, depending on their ability to travel.

Mental health and psychosocial support

 COOPI provides psychosocial support in UNHCR's Centre Humanitaire and in the 'cases de passage' for those who are staying there. Serious cases can be referred to the hospital. When necessary, asylum-seekers and refugees are referred to the Mental Health Centre in Niamey that is also run by COOPI.

Child protection

- 'Cases de passage' for children established in early 2021 is specifically aimed at the most vulnerable unaccompanied children (the youngest, aged 10 to 12). It will have capacity for 16 children.
- Intersos (Delphine Esso Zoha, sp.protection.niger@intersos.org) provides child protection and educational activities in the 'cases de passage' and the Centre Humanitaire.

Legal assistance

 Under the Ministry of Justice, ANAJJ provides legal advice and assistance in judicial proceedings.

Arlit

Identification and outreach

• CRS (Benoit, Christiane, christiane.gbago@crs.org has mobile teams trained in legal assistance and psychosocial support are deployed in key locations. These teams will advise people on the move directly or refer them either to information points where they can receive vouchers for food and hygiene items, or to other actors (for instance IOM for AVRR). The vouchers are for the most vulnerable (such as children, single women, persons with disabilities and victims of trafficking).

Shelter

 IOM transit centre with 400 places for migrants awaiting AVRR. IOM transit centres provide accommodation, food, assistance with documentation, 24/7 medical services, MHPSS support services, socio-educational activities as well as training. Teams of protection assistants are present in each centre and provide individualized management of the most vulnerable cases as well as information on asylum (see Access to asylum procedures above). As there is no UNHCR shelter in Arlit, persons identified as falling under UNHCR's mandate are provided with accommodation in IOM's transit centre, before being transferred to Agadez, where they receive assistance from UNHCR. As mentioned above, legal assistance is provided as needed in partnership with ANAJJ.

UNHCR > MAPPING OF PROTECTION SERVICES FOR VULNERABLE PEOPLE ON THE MOVE, INCLUDING VICTIMS OF

Mental health and psychosocial support

 COOPI (Morena Zucchelli, Chief of Mission, cm.niger@coopi.org) has a mental health technician and a psychologist who provide mental healthcare to refugees and migrants as well as the local population.

Assamaka

Identification and outreach

 UNHCR supports the Agadez Regional Council in implementing a mechanism for the monitoring of mixed movements in the region. A monitor is based in Assamaka, at the border between Niger and Algeria, to help with the identification and referral of people crossing the border who may fall under UNHCR's mandate.

Humanitarian assistance and transportation

• IOM (+227 80 06 66 22) assists people who arrive as a result of expulsions with food, non-food items, WASH and accommodation. IOM can also provide transportation to Arlit. Persons with vulnerabilities or specific needs are pre-identified so that they are provided with care within shorter time frames. When there are people of nationalities that do not have permission to enter Niger, IOM informs UNHCR so that UNHCR can obtain such a permission (autorisation de territoire). Upon UNHCR's confirmation, IOM supports these persons and takes them to the closest place in which UNHCR can provide care, which is generally Agadez or Arlit.

Emergency healthcare

• MDM (+ 227 92 18 60 81) provides medical assistance.

Mental health and psychosocial support.

• COOPI (Morena Zucchelli, Chief of Mission, cm.niger@coopi.org) has a mental health specialist and a psychologist who provide mental healthcare to refugees and migrants as well as host community members.

Dirkou

Shelter

• The IOM transit centre has 100 places for migrants awaiting AVRR. The centre provides accommodation, food, assistance with documentation, and 24/7 medical services. All migrants who are rescued in Dirkou are transferred to Agadez, where they can be provided with full assistance, within a few weeks. The staff of the transit centre are trained on referral protocols for people with vulnerabilities including victims of trafficking, unaccompanied minors and asylum seekers. The cases of vulnerable migrants are flagged and provided with care within shorter time frames.

Mental health and psychosocial support

 COOPI (Morena Zucchelli, Chief of Mission, cm.niger@coopi.org) has a mental health specialist and a psychologist who provide mental healthcare to refugees and migrants as well as host community members.

Zinder

Identification and outreach

• CIAUD Canada (Mahamadou Yattara, mahamadou.yattara@ciaud.ca) has monitors who are based at the border posting of Maimoujiya. Persons who may fall under UNHCR's mandate are identified and referred to the government's asylum services.

Shelter

 Government centre for victims of trafficking, set-up and supported by IOM, provides accommodation, food and non-food items are provided in the centre as well as legal assistance and case management. IOM is also setting-up MHPSS support. The centre is embedded in the community and medical care is provided by local healthcare services. Upon completion of the provision of care, IOM supports the reintegration of victims of trafficking in their community of return (within available funds).

SOMALIA

Somalia is a key country of departure for people traveling towards North Africa. It is also a key country of departure as well as country of transit for those crossing to Yemen in order to travel on to Saudi Arabia or other destinations. Some of those traveling to Libya also cross the sea to Yemen initially before again crossing the sea to Port Sudan, Sudan.

Bosaso is the key departure area for those crossing to Yemen, especially Ethiopians. There are several locations around the border with Ethiopia where people are crossing, including en route to Diibouti, but few services are available.

Bosaso

Identification and outreach

- Staff of the Ministry of Interior, Federal Affairs and Democratization (MOIFAD, +252 90 68 92 898), with the support from UNHCR target areas with high concentrations of migrants and refugees in Bosaso to disseminate information about how to seek international protection and the locations of offices. This includes putting up billboards, and, with the help of community leaders, going house to house to distribute leaflets.
- UNHCR's Telling the Real Story (TRS) project started in April 2021 across Puntland and has 31 community outreach volunteers currently engaged in community outreach and awareness activities in Bossaso (10), Gardo (5), Garowe (8) and Galkayo (8). The Community outreach volunteers provide information to people on the move about the dangers of irregular movement. Similarly, they provide awareness about the dangers of irregular movement to refugees, IDP and host communities in camps, through door-to-door, school, universities and colleges among forums that are

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organized on a monthly basis. TRS through the outreach volunteers also provide counselling and referral services to persons of concern across Puntland. TRS has also placed billboard and distributed more than 1,500 information materials and books about irregular movement ("Tahrib").

- IOM (Hotline number: 304) distributes non-food items in places with a high
 concentration of migrants and refers people needing medical assistance to the MRC
 or the hospital.
- IOM Way Station is located along the route at Arta, 105km outside Bosaso. Staff give
 people arriving refreshments and the number of the MRC (calls are free of charge).
 The centre is not able to provide transport into the MRC due to regulations on entry
 into Bosaso. The Ethiopian Community Committee can sometimes help to collect
 people from the reception centre. IOM also assists the most vulnerable with AVRR,
 who stay in the UNHCR shelter (see below).

Shelter

- The Ministry of Interior, Federal Affairs and Democratization (MOIFAD Reception Centre (+252 90 77 99 197), with the support from UNHCR, runs a reception centre that provides temporary shelter for up to five days to refugees and Somali returnees from Yemen. Transportation is provided from the port to the centre.
 - The centre has six big sections for women and men and can accommodate at least 500 people. There are separate spaces for men and women. Children are placed with their parents or, if unaccompanied, they are given a separate room.
 - >> The Red Cross supports Somali returnees to call their families.
 - Once registered at the centre, refugees are provided with shelter assistance to rent a house in the city (this includes Yemenis and Ethiopians who had refugee status in Yemen).
- The Ethiopian Community Committee Centre (+252 907412267) provides accommodation for the most vulnerable Ethiopian migrants and unaccompanied children and has capacity for 15 people.
- Tadamun Social Society has three safe houses for vulnerable people on the move of all nationalities as well as Somalis.

Healthcare and mental health and psychosocial support

 The IOM Migrant Response Centre (MRC, contact number: 304) has a health department, a registration department, and provides referrals to safe houses.
 Translators are available 24 hours per day and take calls for appointments via the MRC's toll-free line. Where necessary, the medical unit makes referrals to Bosaso General Hospital and IOM covers the cost of treatment as part of an MOU with the hospital. The MRC also has social workers and psychosocial workers, male and female. The MRC provides non-food items.

GBV support services

- The MOIFAD reception centre (+252 90 77 99 197) includes UNHCR and MOIFAD staff, who have been trained in assisting GBV survivors and are connected to local GBV working groups and referral systems to GBV service providers, including Bosaso General Hospital, Tadamun Social Society and the Danish Refugee Council.
- Galkayo Education Centre for Peace and Development (GECPD, +252 90 76 47 556), funded by UNHCR, provides services to refugees and asylum-seekers (as well as IDPs) including psychosocial counselling, facilitating access to medical care such as PEP treatment, and awareness raising on prevention of and response to GBV.

Child protection

- As part of its Children on the Move Project, UNICEF supports child protection desks across Puntland (mowdafaprotection@gmail.com) and Somaliland (khadar_nur@yahoo.com). UNICEF and its local partners provide case management to children on the move of various nationalities, and information on the risks of migration. Those who decide not to pursue their journey are accommodated in one of seven shelters where basic counselling and psychosocial support are provided, and they are referred to IOM for AVRR.
- IOM provides AVRR to unaccompanied children, once IOM in Ethiopia do family tracing and confirm that the family can receive the child.

Legal assistance

- Under UNHCR's Project Partnership Agreement (PPA), the humanitarian and development organization KAALO provides fee legal aid services for refugees and asylum seekers.
- When police (especially at the point of entry of Bosaso) receive a trafficking case, they refer them to the main police station of Bosaso, and once it is confirmed that it is a case of trafficking, they are referred to the safe house of the Ministry of Women Development & Family Affairs (MOWDAFA).

Access to asylum procedures

The Ministry of Interior registers Yemenis as prima facie refugees. For Ethiopians
coming from Yemen, UNHCR transfers their case to Bosaso if they were registered
as asylum-seekers in Yemen. For new asylum-seekers, the Ministry of Interior does
the initial registration and then UNHCR does a biometric registration. A UNHCR
Eligibility Officer in Bosaso conducts RSD procedures.

Somaliland

GBV support services

 UNICEF (kiin2014@hotmail.com) supports three one stop centres for GBV survivors in Somaliland. They are located in public hospitals and include case workers who refer children to the hospital wards for medical treatment. The fees are covered with UNICEF funding.



■ UNHCR conducts awareness raising sessions on gender-based violence and women empowerment in Burao, Somaliland.

SUDAN

Sudan is a critical country of destination, transit as well as country of origin along routes to Libya and Egypt.

Refugees and migrants departing from countries such as Eritrea, Ethiopia, and Somalia usually cross Sudan before traveling onwards. Key migration hubs include Gedaref and in the east, where people crossing from Eritrea or Ethiopia initially arrive, Khartoum, as well as Dongola, Atbara, Al Dabbah and Halfa in the north, along routes to Egypt or Libya.

Refugees and migrants crossing Sudan usually move with smugglers who may move them from one location to another for overnight stops along the route to Khartoum as a means of trying to avoid detection by authorities. From Khartoum, some then head north with smugglers using pickup trucks or buses and head to Dongola or Atbara before crossing the desert to Libya or Egypt. An alternate route used by some Somalis involves arriving by sea at Port Sudan and then traveling to Khartoum before moving onwards. In addition, many Darfuris cross to Chad before traveling on to Libya.

UNHCR and MMC's 2020 report highlighted particular risks reported in Khartoum, Gedaref, Atbara, Dongola, and Kassala. These included kidnapping, physical violence and sexual and GBV, with smugglers reportedly responsible for most incidents.

SOMALIA

Khartoum

Identification and outreach

- UNHCR Khartoum has an identification system through counselling services that are provided to persons of concern at the Protection Desk. Counselling is conducted jointly with UNHCR and staff of the Refugee Counseling Services (RCS) under the Sudanese Commission for Refugees (COR). Likewise, five hotlines are available: +249 900934474; +249 900934473; +249 900934467; +249 912167304; +249 912325161.
- UNHCR has a WhatsApp automatic chatbot developed by Telling the Real Story (TRS)³⁶ and the Innovation Unit at the UNHCR Regional Bureau. To activate, text 'hi' to **+249 900 934 472**.
- There is generally no identification and outreach in place aside from monitoring visits to detention facilities by UNHCR and COR, as well as by an IOM team from the Migrant Resource and Response Centre (MRRC) (see below). The IOM team also visits the community-run safe houses in Khartoum.
- Under the Telling the Real Story (TRS) project, UNHCR coordinates 23 community volunteers who identify children and youth who are at risk of onward movement and refer vulnerable cases to relevant UNHCR staff. Through communication with communities, they raise awareness about dangers of irregular onward movement, the rights of persons of concern and services available in English, Tigrinya, Amharic and Arabic.

Healthcare

- IOM Migrant Resource and Response Centre (helpline: +249 922 406 622, krtmrrc@ iom.int):
 - >> Medical services are provided by a medical team on site. If there is need for a specialist, surgery, or laboratory tests, the person is referred to a private clinic by the MRRC doctors and IOM covers the cost.
 - >> A case office team of the MRRC, consisting of three caseworkers with a background in psychology, provides psychological counselling. If a migrant requires a specialist intervention, the case office makes referrals.
 - >> Depending on the vulnerability, the MRRC provides dry foods and non-food items.
- >> For legal assistance, the MRRC refers to local NGO partners who provide probono support.
- 36 UNHCR, Telling the Real Story, available at: https://tellingtherealstory.org/en/

- >> IOM refers vulnerable Ethiopians to a safe house run by the Ethiopian Community Association. The MRRC receives referrals from the safe house for medical assistance, dry food support and AVRR. Similarly, an MRRC team comprising of a doctor, a caseworker, an outreach assistant and an interpreter (the composition changes depending on the needs) go once per week to the safe house (and once every two weeks to the detention centre) and provide direct assistance to the people who cannot visit the MRRC by themselves. They do a quick assessment on site.
- >> At the MRRC, the vulnerability assessment includes questions about fear of returning to the country of origin. If the person is eligible for AVRR, the staff responsible for the AVRR support checks that the person can return to their country. If the person expresses fear of return, the MRRC refers them to UNHCR. Tigrayans from Ethiopia, people from Eritrea, the Central African Republic, Syria, Yemen, and South Sudan are de facto refugees in Sudan and are referred to UNHCR.

Mental health and psychosocial support

- Vulnerable people staying in the community-run shelters are referred to a hospital, and some humanitarian agencies cover medical costs, but not for all.
- UNHCR, through the Commission for Refugees (COR), provides health services in urban areas and through Al Manner in south Sudanese settlements.
- UNHCR supports the Child Development Foundation (CDF) to provide psychosocial support to victims of trafficking, GBV survivors as well as conduct Best Interest assessments for children.
- The Danish Refugee Council (DRC) is providing GBV case management including Psychosocial Support Services (PSS) and referral to facilitate access to services.
- DRC is also providing protection services for victims of trafficking and other people on the move including case management, individual protection assistance, community engagement through Community Based Protection Networks, referrals to access external services, and protection monitoring.

Shelter

- There are no formal safe houses in Khartoum, including for victims of trafficking, or unaccompanied children.
- There are five shelters run by the local Ethiopian and Eritrean communities, but facilities are relatively basic. Some victims of trafficking are present in these shelters (see Child Protection below).
- Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) supports the

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presence of a legal assistant at the Ethiopian shelter and supports the Ahfad Trauma Centre to conduct weekly visits and covers emergency referrals to hospitals through the Better Migration Management programme (BMM) funded by the European Union and Germany. GIZ is planning on creating a child-friendly space in the shelter.

• Some embassies rent accommodation for people waiting for AVRR in cases where there is no shelter available.

Child Protection

- Child protection services in Khartoum are currently limited.
- The Commission for Refugees (COR) provides counselling for children as part of its general counselling, but this is not specifically tailored for children. Some unaccompanied migrant children are present in community-run safe houses, especially victims of trafficking apprehended by the Counter-Trafficking Unit of the Sudanese Police. Most are women and girls aged between 16 and 30 who were promised a job in the Middle East and apprehended on their way to Gulf Cooperation Council (GCC) states and Lebanon. IOM does family tracing with IOM in Ethiopia and supports their return if it is safe. When there have been cases of unaccompanied children aged between 10 and 15 years old, IOM coordinates with the National Council for Child Welfare (NCCW) and convenes a Best Interest Determination committee meeting with NCCW, UNHCR and UNICEF.
- UNHCR, COR and implementing partners work on identifying appropriate alternative care for unaccompanied migrant children, especially foster families. For the most vulnerable, UNHCR and COR also provide financial assistance.
- For family reunification, UNHCR has partnered with the NGO the International Refugee Assistance Project (IRAP) to provide legal aid assistance through IRAP's in-house or in-network pro bono lawyers to children and youth with biological parents in Sweden, Germany, Norway, Belgium, France, the UK, the United States and the Netherlands. UNHCR also works on family reunification cases to other countries including Italy, Canada and Switzerland.

Legal assistance

- UNHCR and COR have a joint legal team that regularly monitors the Alien Detention Centre and advocates for registration, but it is only in Khartoum.
- UNHCR provides legal aid and legal counselling to persons of concern through its legal aid partner, Mutawinat, who covers Khartoum as well as the Northern State.

Kassala

Identification and outreach

- Community volunteers and teachers try to identify children on the move and refer them to services as necessary.
- The TRS project carries out awareness raising and community engagement activities about the dangers of irregular onward movement in all languages commonly spoken in the camps. TRS has a network of community volunteers and networks with refugee leadership structures who are engaged in protection monitoring activities and refer any cases of concern.
- IOM opened an MRC in Kassala in June 2021. The MRC team consists of three regular and support staff, including an MRC coordinator, a social worker and a language assistant (interpreter). The MRC:
 - >>> provides protection and assistance to vulnerable migrants in the Kassala state;
 - >> raises awareness on the risks of irregular migration; and
 - supports local government agencies, civil society organizations and migrant community leaders and associations in their efforts to protect vulnerable migrants in the state.

Shelter

 UNHCR operates two gender-segregated safe houses managed by the Sudanese Red Crescent. They accommodate victims of trafficking, including those who are due to appear as witnesses and give testimonies in court, those facing serious risk of harm, and those with particular medical needs that cannot be monitored from within the camps.

Child protection

 UNHCR supports a centre for unaccompanied and separated children in the Shagarab refugee camp, where children can access basic services and be in an environment that mitigates the risk of human trafficking. UNHCR's family reunification project is also active in Girba, in Kassala State.

Gedaref

Identification and outreach

- IOM's MRC (see below) has an outreach team who go to migrant communities, provide dry food items and hygiene items and support to particularly vulnerable migrants, and refer people to the MRC. The team provides humanitarian assistance to migrants in administrative detention and under the custody of the local immigration and passport offices upon request.
- TRS engages in awareness raising on the dangers of onward irregular movement.

Healthcare, mental health and psychosocial support, and other humanitarian assistance

- The IOM Migrant Resource Centre (helpline: +249 922 406 691; gedarefmrrc@iom. int), open since March 2019, has a team of eight regular and support staff including an MRC coordinator, outreach staff, caseworkers and language assistants (interpreters).
- For medical services, the MRC refers people to the Sudan Family Planning Association (SFPA) clinic in Gedaref, as part of a partnership agreement it has. The MRC also supports the SFPA's mobile clinic, which visits remote localities in the state and provides medical assistance to both migrant and host community members. For more specialist interventions, the MRC makes referrals to the hospital. For psychosocial support, the MRC makes referrals to a trauma centre that is part of the Gedaref State Hospital and comes under the State Ministry of Health and Social Development.
- DRC provides protection services for Ethiopian refugees, including in-kind Individual Protection Assistance, community engagement through a network of community volunteers, information dissemination on available services and referrals to access external services.

66 When I left Niger for Algeria, we went with smugglers. Myself I didn't know the way. The driver came to take us. When they loaded the car, I noticed that this is a small car, that was supposed to take 10 passengers, but was carrying more than 40 people. Some people fainted and other were suffocated. They were abandoned and left behind. We spent five days in that desert. I saw horrible things. There were corpses and skeletons in the desert. When I saw these things, I didn't want to continue anymore. I

asked my compatriot how I could go back through the desert, and he asked me who could transport me back to Niger. He said I had no choice anymore. Better to go to Algeria because I would die if I didn't move on. When we reached the first city in Algeria which is Tamanrasset, a Senegalese came to take us. He has bought us. He told me to pay 500 euros. Then he started abusing those who didn't have any money. In the morning they put you into cold water and beat you. At one point I wanted to end my life because my life had no meaning.

—A Cameroonian refugee interviewed by Telling the Real Story in Morocco in 2021.

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Lit was March 2014 that I escaped from my military unit. I knew I was going to be jailed if I returned. I crossed to Ethiopia. After eight months I left Ethiopia. There was no work there. We were surviving on our savings. You must rely on money you get from your relatives and brothers. But I didn't have anyone to help me. So, I thought about going to Sudan and work there. I didn't know if the journey would be dangerous or not or anything about it at all. I didn't have anyone who could inform me. I started to learn once I begun the journey. There were challenges along the journey. It's hard and you may even lose your life. Traffickers only care about their profits. They don't care about human lives. Money has more value than a human being. I got to Sudan after many challenges and problems. In Sudan life was hard. I didn't have any options other than to leave again.



—Eritrean refugee interviewed by Telling the Real Story in Italy in 2021.

Conclusion

This mapping report reflects an attempt by UNHCR to identify the availability of specific protection services in key locations along widely used mixed movement routes in Central, West, North, and the East and Horn of Africa. As indicated in the Observations, and in frequent reports of abuses that occur along the routes, more needs to be done to increase the availability of protection services. This can be achieved by expanding their geographic coverage; enhancing the support available to specific categories of vulnerable individuals, including victims of trafficking, GBV survivors and UASC; and addressing gaps in certain types of services, including the lack of legal support for access to justice and the limited availability of safe shelters.

Annex

SERVICE PROVIDERS AND GOVERNMENT AUTHORITIES

BURKINA FASO

AEJTB: Association of Children and Young Workers of Burkina Faso (Association des Enfants et Jeunes Travailleurs du Burkina Faso)

Association of Female Lawyers of Burkina Faso

Caritas Suisse

CIFDHA: Information and Training Center on Human Rights in Africa (Centre d'Information et de Formation en Matière de Droits Humains en Afrique)

CONAREF: National Commission for Refugees

GUIS: Guichet Unique Intersectoriel

IOM: International Organization for Migration

Keoogo

MAECIABE: Ministry of Foreign Affairs, Cooperation and African Integration and of Overseas Burkinabès

MFSNFAH: Ministry of Women, National Solidarity, Family and Humanitarian Action

National Federation of Road Transport Actors

Nonsin Government Shelter for GBV Survivors

OCADES: Catholic Organization for Development and Solidarity (Organisation

catholique pour le développement et la solidarité)

Red Cross

SACTS: Strengthen Assistance to Child Survivors of Trafficking

TdH: Terre des Hommes

Tie

Ton

UNHCR: United Nations High Commissioner for Refugees

WAN: West Africa Network for the Protection of Children

Welthungerhilfe

CAMEROON

AHA: Action Humanitaire Africaine

ARECC: Association des Rapatriés et de lutte contre l'émigration clandestine du Cameroun

DRC: Danish Refugee Council

IMC: International Medical Corps

IOM: International Organization for Migration

MINAS: Ministry of Social Affairs

MINPROFF: Ministry for the Promotion of Women and the Family

OEMIT: Organization pour l'Éveil des Jeunes sur la Migration Irrégulière et la Traite des Personnes **PLAN** International

SMIC: Solutions aux Migrations

Clandestines

Trauma Centre

UNHCR: United Nations High Commissioner for Refugees

CHAD

Chadian Red Cross

CNARR: National Commission for the Reinsertion of Refugees and Returnees (Commission Nationale d'accueil de Réinsertion des Réfugies)

IOM: International Organization for Migration

UNHCR: United Nations High Commissioner for Refugees

UNICEF: United Nations Children Fund

CÔTE D'IVOIRE

Cavoequiva

CIP: Côte d'Ivoire Prospérité

CNLTP: National Committee for the Fight Against Trafficking in Persons

CRCI: Côte d'Ivoire Red Cross

DDE-CI:Dignité Droits de l'Enfant en Côte d'Ivoire

ICRC: International Committee of the Red

Cross

IOM: International Organization for

Migration

Ministry of African Integration and Ivorians Abroad

TECI: Tierra de Esperanza Côte d'Ivoire

UNHCR: United Nations High Commissioner for Refugees

DJIBOUTI

Caritas

CMH: Centre Medical Hospitalier

ICAN: International Children's Action

Network

IOM: International Organization for

Migration

ONARS: National Office for Assistance to Refugees and Affected

People

Red Crescent

UNFD: Union Nationale des Femmes de

Djibouti

UNHCR: United Nations High Commissioner

for Refugees

ETHIOPIA

Agar Charitable Society

CPC: JRS's Child Protection Centre

DICAC: Development and Inter-Church Aid

Commission

DRC: Danish Refugee Council

Ethiopia Migration Program

Good Samaritan Association

Hope for Justice

IOM: International Organization for Migration

JRS: Jesuit Refugee Service

NPC: National Partnership Coalition

RRC: JRS's Refugee Community Centre

TRS: UNHCR's Telling the Real Story

UNHCR: United Nations High Commissioner

for Refugees

MALI

AMSODE: Malienne pour la Solidarité et le Développement

AMSS: Association Malienne pour la Survie au Sahel

APDDF: Association pour le Progrès et la Défense des Droits des Femmes

ARACEM: Association des Refoulés d'Afrique Centrale au Mali

AT Services

BNCE: Bureau National Catholique de l'Enfance

Caritas Mali

Caritas Suisse

Centre de Transit et d'Orientation

Centre Direy Ben

CIAUD: Comité International pour l'Aide d'Urgence et le Développement

CNCR: National Commission for Refugees

COOPI: Cooperazione Internazionale

CRS: Catholic Relief Services

CTO: Centre de Transit et d'Orientation

Danish Red Cross

Debbo Alafia

Directorate of Civil Protection (Direction de la Protection Civile)

DRC: Danish Refugee Council

DRPFEF: Regional Directorate for the Promotion of Women, Children and Families (Direction Régionale de la Promotion de la Femme, de l'Enfant et de la Famille)

Enda Mali

GUIS: Guichet Unique Intersectoriel

IOM: International Organization for Migration

La Maison du Migrant

Le Centre Jean Bosco

Malian Red Cross

PROMISA: Caritas Suisse's Projet d'appui à la protection des migrants les plus vulnérables sur les routes du sahel

Spanish Red Cross

TdH: Terre des Hommes

UNFPA: United Nations Population Fund

UNHCR: United Nations High Commissioner for Refugees

MAURITANIA

AFCF: Association of Female Heads of Households

AIFPDEC: Association for the Involvement of Women in the Promotion of Democracy and Civic Education

ALPD: Association for the Fight against Poverty and Under-Development (Association pour la Lutte contre la Pauvreté et le sous Développement)

AMPF: Mauritanian Association for the Promotion of the Family

AMSME: Mauritanian Association for the Health of the Woman and the Child

ANRPTS: National Agency for the Register of Populations and Secure Titles

CPISE: Centre for Children's Protection and Social Inclusion

El Insaniya

French Red Cross

IOM: International Organization for Migration

MASEF: Ministry of Social Affairs, Children and the Family

Mauritanian Red Crescent

MDM Spain: Médicos del Mundo Spain

Organization of Migrants in Nouadhibou (Organisation des Migrants de Nouadhibou)

Save the Children

UNHCR: United Nations High Commissioner for Refugees

UNICEF: United Nations Children Fund

USPEC: Unités Spéciales de prise en charge intégrale médicale, psychosociale,

et juridique des VBG

MOROCCO

Al Wafae Association

ALCS: Association for Combating AIDS

AMPF: Moroccan Association for Family Planning

Association Accueil, Ecoute et Orientation pour l'accompagnement

Association Afrique Culture Maroc

Association Ain Ghazel

Association Al Karam

Association Bayti

Association for Law and Justice

Association ISIA (Salé)

Association Voix de Femmes Marocaines

Bank de la Solidarité

Caritas

CCEM: Comité Contre l'Esclavage Moderne

Chams Association for Mental Health

Foundation Orient Occident

IMS: Moroccan Initiative for Solidarity

Initiative for the Protection of Women's Rights

INSAF: Institut national de solidarité avec les femmes en détresse

IOM: International Organization for Migration

Mains Solidaires

MDM: Médicos del Mundo

MS2: Maroc Solidarité Médico-sociale

MZC: Mujeres en Zona de Conflicto

Notre Dame des Oliviers

OMDH: Moroccan Organization for Human

Rights

ProgettoMondo

SAMU Social

Tadamon Association

UNHCR: United Nations High Commissioner

for Refugees

NIGER

ANAJJ: National Agency for Legal and Judicial Assistance

APBE: Action pour le Bien-Être

CIAUD: Comité International pour l'Aide d'Urgence et le Développement

CNE: National Eligibility Commission (Commission Nationale d'Eligibilité)

COOPI: Cooperazione Internazionale

CRS: Catholic Relief Services

French Red Cross

GUIS: Guichet Unique Intersectoriel

HI: Humanite et Inclusion

Intersos

IOM: International Organization for Migration

IRC: International Rescue Committee

MDM: Médecins du Monde

MDM: Medicos del Mundo



Nigerien Red Cross

PROMISA: Caritas Suisse's Projet d'appui à la protection des migrants les plus vulnérables sur les routes du sahel

UNHCR: United Nations High Commissioner for Refugees

SOMALIA

DRC: Danish Refugee Council

Ethiopian Community Committee

GECPD: Galkayo Education Centre for

Peace and Development

IOM: International Organization for

Migration

KAALO: KAALO Aid and Development

MOIFAD: Ministry of Interior, Federal Affairs

and Democratization

MOWDAFA: Ministry of Women Development & Family Affairs

Tadamun Social Society

TRS: UNHCR's Telling the Real Story

UNHCR: United Nations High Commissioner

for Refugees

UNICEF: United Nations Children Fund

SUDAN

BMM: Better Migration Management

CDF: Child Development Foundation

COR: Commission for Refugees (COR)

DRC: Danish Refugee Council

Ethiopian Community Association

GIZ: Deutsche Gesellschaft für Internationale Zusammenarbeit

 $\textbf{IOM:} \ \textbf{International Organization for}$

Migration

IRAP: International Refugee Assistance

Project

MRRC: IOM's Migrant Resource and

Response Centre

NCCW: National Council for Child Welfare

RCS: Refugee Counseling Services

SFPA: Sudan Family Planning Association

Sudanese Red Crescent

TRS: UNHCR's Telling the Real Story

UNHCR: United Nations High Commissioner

for Refugees

UNICEF: United Nations Children Fund

GENERAL ACRONYMS

AVRR: Assisted Voluntary Return and

Reintegration

DTM: IOM's Displacement Tracking Matrix

ECOWAS: Economic Community of West

African States

MHPSS: Mental health and

psychosocial services

RSD: Refugee Status Determination

SOPs: Standard Operation Procedures

UASC: Unaccompanied and Separated

Children

MAPPING OF PROTECTION SERVICES FOR VULNERABLE PEOPLE ON THE MOVE, INCLUDING VICTIMS OF TRAFFICKING

ON ROUTES TOWARD THE CENTRAL AND WESTERN MEDITERRANEAN SEA AND THE ATLANTIC

July 2022

UNHCR, the UN Refugee Agency, is a global organisation dedicated to saving lives, protecting rights and building a better future for people forced to flee their homes because of conflict and persecution. We lead international action to protect refugees, forcibly displaced communities and stateless people.

We deliver life-saving assistance, help safeguard fundamental human rights, and develop solutions that ensure people have a safe place called home where they can build a better future. We also work to ensure that stateless people are granted a nationality.

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