



IOM

# RESETTLEMENT

2018

IOM

RESETTLEMENT

2018

Resettlement and Movement Management (RMM)  
RMM@iom.int

Migration Health Division (MHD)  
mhddpt@iom.int

Labour Mobility and Human Development (LHD)  
LHD@iom.int

## PUBLISHER

### INTERNATIONAL ORGANIZATION FOR MIGRATION

17 route des Morillons  
P.O. Box 17, 1211 Geneva 19  
Switzerland  
T. +41.22.717 91 11  
F. +41.22.798 61 50  
hq@iom.int  
[www.iom.int](http://www.iom.int)

---

© 2018 International Organization for Migration (IOM)

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise without the prior written permission of the publisher.

The opinions expressed in the report are those of the authors and do not necessarily reflect the views of the International Organization for Migration (IOM). The designations employed and the presentation of material throughout the report do not imply the expression of any opinion whatsoever on the part of IOM concerning the legal status of any country, territory, city or area, or of its authorities, or concerning its frontiers or boundaries.

IOM is committed to the principle that humane and orderly migration benefits migrants and society. As an intergovernmental organization, IOM acts with its partners in the international community to: assist in meeting the operational challenges of migration; advance understanding of migration issues; encourage social and economic development through migration; and uphold the human dignity and well-being of migrants.

Last updated: July 2018

#### COVER

A newly resettled family in Argentina look forward to their future.  
© IOM 2017

## TABLE OF CONTENTS

### I. PURPOSE AND PARTNERSHIP

IOM's Mandate	6
Resettlement and Relocation	7
Complementary Pathways	7
Overview of Global Resettlement Operations	10

### II. RENEWED INTERNATIONAL COMMITMENT TO SAFE MIGRATION

Sustainable Development Goals	12
New York Declaration for Refugees and Migrants	13

### III. CORE AREAS OF WORK ALONG THE RESETTLEMENT CONTINUUM

Overview of the Four Core Areas	14
Case Management	18
Health Assessments and Related Assistance	22
Movement Management and Operations	26
Addressing Integration Pre-Departure and Post-Arrival	30

### IV. EMERGING RESETTLEMENT COUNTRIES MECHANISM (ERCM)

How the ERCM Works	34
--------------------	----

### V. TWO PRINCIPLES FOR PROGRAMMING

Refugee-centred Programmes	36
Linking Pre-Departure and Post-Arrival to Facilitate the Integration Process	37

### VI. ANNEXES

Flow Chart of Activities	38
Overview of Activities by Resettlement Country	40
Description of Activities per Core Area	44
One Day in Resettlement: Map of Air Movements on 16 May 2017	46
One Day Statistics on 16 May 2017	48
Dedication Page to Airline Partners	50

# I. PURPOSE AND PARTNERSHIP

The safe and dignified resettlement of refugees and other humanitarian entrants requires a comprehensive, humane approach – one which recognizes the interdependencies of travel, health and integration as integral components of the resettlement process. Certain essential elements of movement operations benefit both the beneficiaries and the States undertaking to receive them. IOM believes that this holds true regardless of the type of scheme, the destination country or the profile of the migrants and refugees being assisted.

At the earliest opportunity prior to departure, it is important that each refugee is well informed and empowered, proper care is given to their health and well-being, and necessary arrangements are in place for their safe travel and meaningful integration. These equally important and specialized areas of work support people with significant vulnerability who have fled from conflict, violence and disaster and who may have been living in exile for years with interrupted health care, work and education. Though their life, liberty and livelihood is at risk, forcibly displaced persons have also expressed how daunting it can be to begin life anew, especially in another country.

## IOM'S MANDATE

The International Organization for Migration (IOM) was founded in 1951 to ensure the safe and dignified movements of vulnerable migrants and refugees. IOM has since grown into the UN Migration Agency with 169 Member States and its global presence has expanded to around 400 field locations. Article 1<sup>1</sup> of IOM's Constitution states "The purposes and functions of the Organization shall be:

(a) to make arrangements for the organized transfer of migrants, for whom existing facilities are inadequate or who would not otherwise be able to move without special assistance, to countries offering opportunities for orderly migration; and

(b) to concern itself with the organized transfer of refugees, displaced persons and other individuals in need of international migration services for whom arrangements may be made between

the Organization and States concerned, including those States undertaking to receive them."

(c) provide, at the request of and in agreement with the States concerned, migration services such as recruitment, selection, processing, language training, orientation activities, medical examination, placement, activities facilitating reception and integration, advisory services on migration questions."

In the aftermath of World War II, no government alone could help the many displaced survivors to resume their lives and IOM was created to assist with the resettlement of Europeans displaced by the war. To this day, moving people to safety to start a new life remains a core function of the Organization.



The Avianca lands in Bogota. A crowd of around 15,000 people welcome the arrival of the Hungarian refugees. ©IOM/ 1957

1) IOM Constitution, resolution adopted 5 December 1951.

## RESETTLEMENT AND RELOCATION

Resettlement is an international protection tool to meet the specific needs of refugees. Resettlement is also a durable solution for refugees as well as a demonstration of international solidarity and responsibility-sharing, relieving pressure on countries hosting large numbers of refugees. It gives a chance to begin life anew to many who would otherwise have neither home nor country to call their own.

The United Nations High Commissioner for Refugees (UNHCR) defines resettlement as "the selection and transfer of refugees from a State in which they have sought protection to a third State which has agreed to admit them – as refugees – with permanent residence status".<sup>2</sup> The status protects against refoulement, provides for rights similar to those enjoyed by nationals, and establishes a

pathway towards citizenship in the receiving country. Nevertheless, the status and rights extended to resettled refugees varies depending on the resettlement country.

Of the 21 million refugees worldwide, UNHCR estimates that 1.2 million refugees need resettlement in 2018. However, resettlement is not an option for the vast majority of refugees as global resettlement opportunities are in decline and only reach around 110,000 places each year. When the other two durable solutions for refugees – voluntary repatriation and local integration – are unattainable, resettlement may be the only feasible option to provide effective protection and meet the needs of refugees whose life, liberty, safety, health or other fundamental rights are at risk.<sup>5</sup>

### Resettlement versus relocation within the European Union

Resettlement in the European Union (EU) forms a core aspect of the external dimension of the EU's asylum policy. In the EU context, resettlement involves the selection and transfer of eligible refugees from a country outside the EU to an EU Member State. Member States jointly define common resettlement priorities and exchange operational support through structures such as the European Resettlement Network and the European Asylum Support Office (EASO). Member States' cooperation in the field of resettlement has significantly increased and currently a Union Resettlement Framework is being negotiated in the Council and European Parliament to be finalized by June 2018. In the EU, resettlement should not be confused with relocation. Relocation is the transfer of asylum seekers who are in need of international protection from one EU Member State to another Member State where their asylum application will be examined once the relocation has taken place. Relocation is an expression of internal EU solidarity and responsibility sharing, particularly with those countries at the external borders of the European Union that are most affected by rapid increases in the arrival of asylum seekers.

## COMPLEMENTARY PATHWAYS

By the end of 2017, there were more than 68.5 million people forcibly displaced in the world, due to persecution, conflict, violence, or human rights violations.<sup>6</sup> The overwhelming scale and complex nature of global displacement has renewed the debate on enhancing access to safety for those forcibly displaced that is safe, regular and sustainable. While resettlement remains a vital protection tool and durable solution, there is a widening gap between an increasingly large number of refugees and other vulnerable persons of concern in desperate need of a third country solution and the number of resettlement places available which is gravely inadequate. Therefore,

complementary pathways serve to increase the range of safe and legal means to achieving a third-country solution for those in need of international protection.<sup>7</sup> Several States are interested in or currently employ the use of complementary pathways through humanitarian admission programmes, humanitarian visas, community-based private sponsorship, academic scholarship and labour mobility schemes. The development of these avenues helps to provide legal alternatives to perilous irregular secondary movements by land and sea, which are currently affecting several countries around the Mediterranean and other locations in Africa, Asia, and the Americas.

2) UNHCR Resettlement Handbook, UNHCR, 2011.

3) European Resettlement Network (ERN), coordinated by UNHCR, ICMC and IOM.

4) UNHCR, Projected Global Resettlement Needs 2018 (2017).

5) European Resettlement Network.

6) UNHCR, Global Trends - Forced Displacement in 2016 (2017).

7) UNHCR definition of complementary pathways from "Solution for Refugees" in the 10 Point Action Plan (pg. 176, 195).

**Table 1: Description and Scope of Complementary Pathways**

Type of Complementary Pathway	Description and Scope
Humanitarian admission	An expedited process offering a pathway for admission into a country on a temporary or permanent basis to persons or groups of persons with protection needs. Humanitarian admission can be used for persons in need of protection, including but not limited to migrants in vulnerable situations, persons with urgent protection needs, extended family members, or persons in need of medical assistance and care. <sup>8</sup>
Humanitarian visa	A state-issued authorization granting the applicant of a visa requirement (based on nationality) access to the border of the issuing state. Humanitarian visas can be granted by the visa-issuing authority of the State either in a third country or the country of origin of the applicant, and exceptionally at the border of the State. They are granted on grounds/merits specified in national or regional law, in compliance with relevant international human rights and refugee law. Normally, the immigration or asylum status of a person with a valid humanitarian visa needs to be established upon arrival through various pertinent regularization procedures. Humanitarian visa can support humanitarian admission programmes, family reunification, medical evacuations and other programmes/practices aimed at vulnerable migrants and asylum seekers in need of protection, family unity, or medical care but it does not in itself constitute humanitarian admission. <sup>9</sup>
Community-based private sponsorship	In general, private sponsorship refers to a public-private partnership whereby the government facilitates legal admission for refugees and private actors provide financial, social and/or emotional support to welcome and receive refugees in their local community. Such programmes add to the capacity of governments to meet increased needs for resettlement and help to ensure a more sustainable and holistic integration of refugees into their new host societies. Established and new actors include individual citizens or family members of refugees, community and volunteer organizations, faith-based groups, private companies, NGOs, as well as local authorities and small municipalities. <sup>10</sup>
Academic scholarship	Higher education enables displaced people to pursue productive and meaningful lives, while providing a safe, stable environment during study and into the future. Access to higher education is not only a right enshrined in the Universal Declaration of Human Rights, but it also represents an important way in which refugees can establish a secure future for themselves and their families. Among other vital considerations, it is of crucial importance that higher education initiatives do not jeopardize the legal status, protection or psychosocial well-being of refugees, and that they ensure that students do not find themselves in situations of expired residency, destitution or forced return to their countries of origin as a result of pursuing studies abroad. <sup>11</sup>
Family reunification	Family reunification provides an additional safe and regular pathway for refugee situations or mixed movements of migrants by protecting them from unscrupulous visa brokers, unsurmountable fees, and other factors that lead migrants to seek unsafe and irregular channels <sup>12</sup> . The respect for the right to family reunification not only requires States to refrain from action that would lead to family separation, but also obliges them to proactively take measures to maintain the unity of the family and reunite family members who have been separated. <sup>13</sup>
Medical evacuation	Medical evacuation provides for the admission of humanitarian entrants with urgent medical needs for treatment in a third country. Medical evacuation programmes may facilitate the admission of refugees with medical needs as part of resettlement, humanitarian admission, humanitarian visa or other programmes, along with their families who are a key source of support. <sup>14</sup>
Labour mobility	Labour mobility schemes allow for a person to enter or stay in another country for the purposes of employment with the right to either permanent or temporary residence. Labour mobility can help refugees realise their human right to work, recognised in many international and regional human rights instruments, and in the 1951 Refugee Convention. It provides opportunities for refugees to re-establish an independent, productive life in safety and security through employment, attain an adequate standard of living and contribute to their host country. Labour mobility schemes may be part of traditional immigration or migration systems, which could be modified to be accessible to refugees, and they can also include temporary and permanent skilled entry arrangements. <sup>15</sup>

8) International Organization for Migration, Glossary on Migration, IML Series No. 34, forthcoming. Please note that the Glossary's definitions are subject to change until its publication.

9) Description is paraphrased from a forthcoming publication by UNHCR and IOM on "Establishing Resettlement Programmes: A Short Guide", Unit 1, 2018.

10) Description is paraphrased from the European Resettlement Network.

11) Description is paraphrased from the European Resettlement Network.

12) UNHCR Statement for the 6th thematic discussion on the Global Compact for Safe, Orderly and Regular Migration

13) Description is paraphrased from a forthcoming publication by UNHCR and IOM on "Establishing Resettlement Programmes: A Short Guide", Unit 1, 2018.

14) Ibid.

15) Description is from a forthcoming publication by UNHCR and IOM on "Establishing Resettlement Programmes: A Short Guide", Unit 1, 2018.

## Other Protection Pathways

IOM defines protection pathways as "pathways for admission to third countries which may provide opportunities for protection and solutions."<sup>16</sup> Programmes of this nature can be established to protect family members of already resettled refugees, dissuading them from seeking life threatening journeys and protecting them from misinformation and exploitation. For example, the IOM Family Assistance Programme (FAP) is funded by the German Federal Foreign Office to facilitate the reunification of vulnerable migrant families with a recognized refugee in Germany, fleeing from the

protracted Syrian and Iraqi conflicts. In practice, families that have been separated face many obstacles in the reunification process leading to prolonged separation which negatively affects the ability of resettled refugees to integrate and thrive. The obstacles that families face include restrictive eligibility criteria, onerous financial and evidentiary requirements, lack of information and support as well as logistical obstacles. Resettlement countries should therefore make more effective use of programmes and instruments that facilitate family reunification.



FAP Centre in Turkey. ©IOM/ 2017



An IOM staffer helps a client at the newly opened FAP centre in Erbil. ©IOM/ 2017

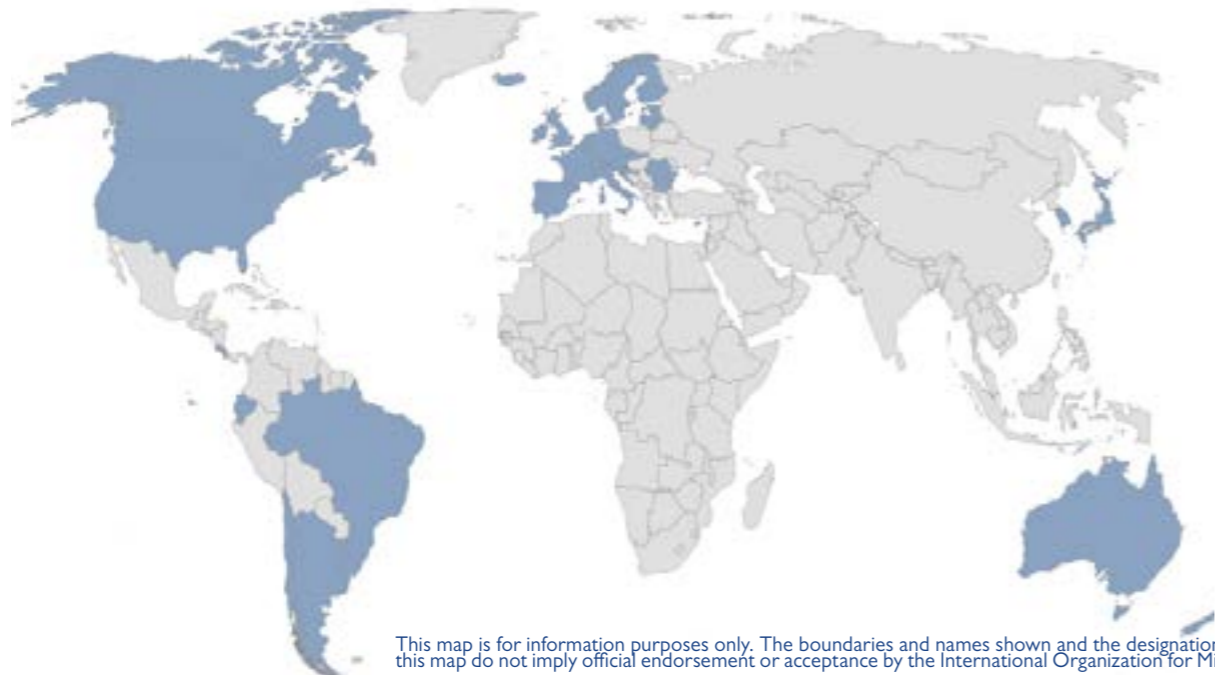


Bedour reunited with her husband in a German airport. This is the first time Bedour's husband met his first child. ©IOM/ 2017

16) Adapted from Global Compact on Refugees, draft 2 as of 30 April 2018, para. 89, in International Organization for Migration, Glossary on Migration, IML Series No. 34, forthcoming. (Please note that the Glossary's definitions are subject to change until its publication).

## OVERVIEW OF GLOBAL RESETTLEMENT OPERATIONS

### MAP OF COUNTRIES WITH RESETTLEMENT OPERATIONS IN 2017



This map is for information purposes only. The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the International Organization for Migration.

ARGENTINA	CHILE	ESTONIA	JAPAN	NEW ZEALAND	SLOVENIA	UNITED KINGDOM
AUSTRALIA	COSTA RICA	FINLAND	LATVIA	NORWAY	SPAIN	UNITED STATES OF AMERICA
AUSTRIA	CROATIA	FRANCE	LITHUANIA	PORTUGAL	SWEDEN	URUGUAY
BELGIUM	CYPRUS	GERMANY	LICHTENSTEIN	REPUBLIC OF KOREA	SWITZERLAND	
BRAZIL	CZECHIA	ICELAND	LUXEMBOURG	ROMANIA	TRINIDAD AND TOBAGO	
BULGARIA	DENMARK	IRELAND	MALTA	SLOVAKIA		
CANADA	ECUADOR	ITALY	NETHERLANDS			

IOM works closely with governments, UNHCR, non-governmental organizations and other partners such as the airlines, to enable solutions for refugees and migrants. In the last decade alone, IOM has organized the resettlement movements of well over 1.19 million refugees and other vulnerable persons of concern from 166 locations around the world.

During 2017, IOM supported 42 countries to conduct resettlement, relocation and humanitarian admissions for 137,839 refugees and other vulnerable persons, with significant operations out of Afghanistan, Jordan, Greece, Italy, Iraq, Lebanon, Turkey, Ethiopia, the United Republic of Tanzania, Uganda, Rwanda, Kenya and Nepal. Of the above-mentioned figures, 23,224 persons in need of

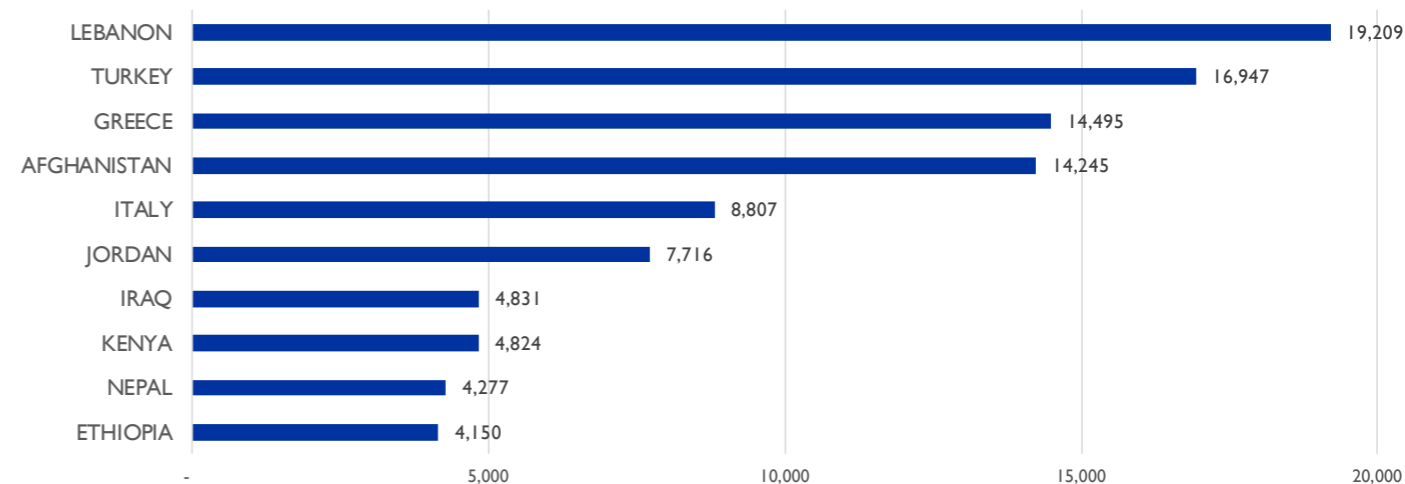
international protection were relocated to 24 different European countries, of which 8,794 persons departed from Italy, and 14,430 persons departed from Greece in 2017. Moreover, the Emerging Resettlement Countries Joint Support Mechanism (ERCM) helped strengthen resettlement to South America. During 2017, a total of 102 Syrian refugees were resettled to Chile (66 persons) and Argentina (36 persons) through the ERCM.

IOM helps its Member States carry out a variety of resettlement, relocation and other humanitarian admission schemes, many of which are well-established programmes, while others are ad hoc responses to specific forced migration crises.



Syrian refugees at the airport in Beirut, Lebanon, for resettlement to Chile. ©IOM/ 2017

### TOP 10 COUNTRIES OF DEPARTURE IN 2017 FOR RESETTLEMENT, RELOCATION AND HUMANITARIAN ADMISSION BY NUMBER OF BENEFICIARIES TRAVELLED UNDER IOM AUSPICES



## II. RENEWED INTERNATIONAL COMMITMENT TO SAFE MIGRATION

### SUSTAINABLE DEVELOPMENT GOALS

IOM's mandate on the organized transfer of migrants and refugees aligns with the Sustainable Development Goals (SDGs), in particular 10.7 focused on reducing inequalities by "facilitating orderly, safe, and responsible migration and mobility of people, including through implementation of planned and well-managed migration policies."<sup>17</sup>

Being and staying healthy is a fundamental precondition for migrants to work, be productive and contribute to the social and economic development of communities of origin and destination. Accordingly, SDG 3 on good health and well-being is another important area of alignment with IOM's mandate, particularly target 3.8 on universal health coverage and target 3.d on increasing the capacity of countries for early warning, risk reduction and management of national and global health risks. IOM's health assessment practices follow public health principles and international standards of care, including migrants and mobile populations in disease prevention and control programmes and addressing public health risks associated with migration and population mobility.

Moreover, when families are forced to leave their homes, schooling and skills-building opportunities are frequently interrupted or curtailed and access to learning and critical information can be agonizingly limited. In support of SDG 4, quality education and information are essential elements to successful and safe migration, and benefit host countries and communities of origin as well as refugees themselves. Informed refugees are also less likely to fall victim to exploitation and are better equipped to stay safe while on the move. Because knowledge speeds integration, IOM implements a range of assistance to resettling refugees prior to departure and upon arrival in receiving countries. IOM orientations provide refugees with realistic and useful information on culture, laws, rights, living and working conditions and available services like language learning, vocational training and job-matching.



IOM employ internationally accepted protocols and practices for detection and treatment of tuberculosis. ©IOM / 2009

<sup>17</sup> Sustainable Development Goals, Department of Economic and Social Affairs, United Nations.

### NEW YORK DECLARATION FOR REFUGEES AND MIGRANTS

States recently renewed their commitment to resettlement and other safe and legal pathways at the United Nations Summit for Refugees and Migrants on 19 September 2016. The New York Declaration committed signatory States to strengthening and enhancing mechanisms to protect people on the move and has also led to the creation of two international agreements to be adopted in December of 2018: a global compact on refugees and a global compact for safe, orderly and regular migration.

Three paragraphs of the New York Declaration directly concern access to admission:

- "We intend to expand the number and range of legal pathways available for refugees to be admitted to or resettled in third countries. In addition to easing the plight of refugees, this has benefits for countries that host large refugee populations and for third countries that receive refugees." (paragraph 77)
- "We urge States that have not yet established resettlement programmes to consider doing so at the earliest opportunity. Those which have already done so are encouraged to consider increasing the size of their programmes. It is our aim to provide resettlement places and other legal pathways for admission on a scale that would enable the annual resettlement needs identified by the Office of the United Nations High Commissioner for Refugees to be met." (paragraph 78)

- "Consider the expansion of existing humanitarian admission programmes, possible temporary evacuation programmes, including evacuation for medical reasons, flexible arrangements to assist family reunification, private sponsorship of individual refugees and opportunities for labour mobility for refugees, including through private sector partnerships, and for education, such as scholarships and student visas." (paragraph 79)

The New York Declaration also promotes "broadening the criteria for resettlement and humanitarian admission programmes in mass displacement and protracted situations"<sup>18</sup>. Building on IOM's experience in resettlement, transition and recovery, labour mobility and border management expertise, and comprehensive health services, the UN Migration Agency has enhanced opportunities through family reunification and explored options for displaced populations to progress towards achieving solutions using migration pathways.<sup>19</sup>

With forced displacement levels at an all-time high, the search for solutions is of paramount concern. IOM continues to urge States to exercise leadership with compassion, and generosity toward refugees and vulnerable migrants in need of protection.<sup>20</sup> Ultimately, resettlement and access to other safe and legal pathways is not about programming, processes or procedures; it is about providing life-changing international protection to fellow human beings.



With the signing of the New York Declaration for Refugees and Migrants in September 2016, UN Member States committed to increase their efforts to find new homes for all refugees identified by UNHCR as needing protection and solutions to third countries.



Assisting refugees with check-in at the Conakry International Airport. © IOM / 2017

<sup>18</sup> United Nations, New York Declaration for Refugees and Migrants (2016), Annex I, CRRF paras 14 a) and c).

<sup>19</sup> Progressive Resolution of Displacement Situations (PRDS).

<sup>20</sup> Forced Migration Review, Issue 54, February 2017.

# III. CORE AREAS OF WORK ALONG THE RESETTLEMENT CONTINUUM

## OVERVIEW OF THE FOUR CORE AREAS

Providing essential support to States resettling refugees and other humanitarian entrants is a fundamental purpose of the Organization and among its largest ongoing activities. Along the resettlement continuum from identification to integration, IOM provides comprehensive resettlement activities which broadly fall under four areas: case management; health assessments and related assistance; movement management and operations; and addressing integration pre-departure and post-arrival. IOM supports refugees and counterparts across the resettlement continuum, contributing to safe and dignified migration.

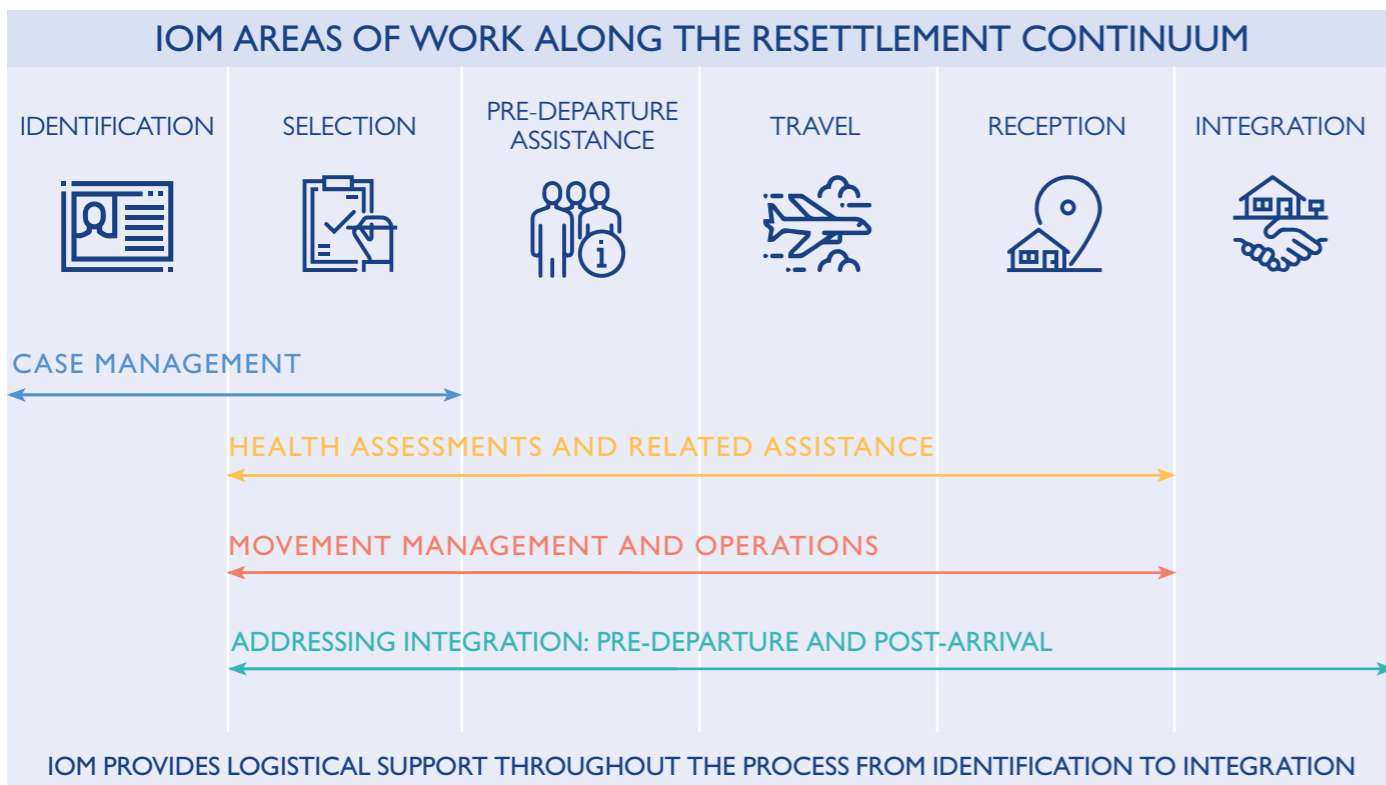


To prepare refugees for resettlement and to prepare States to receive them, IOM works closely with governments on the design and implementation of their resettlement programmes. At the earliest opportunity prior to departure, States should ensure that each refugee is well informed, appropriate attention is given to their health and well-being, and by extension to host and receiving communities to ensure necessary arrangements are in place for their safe travel and meaningful integration.

Another cross-cutting area of cooperation is the facilitation and logistical support provided by IOM to various missions and visits of Member States carried out throughout the resettlement process. The logistical support extended by IOM varies from assisting with internal and domestic transportation from far flung or difficult to reach areas, accommodation of the refugees during missions, provision of interpreters, assistance with document verification and general support in composition, schedules and travel itineraries for refugees.



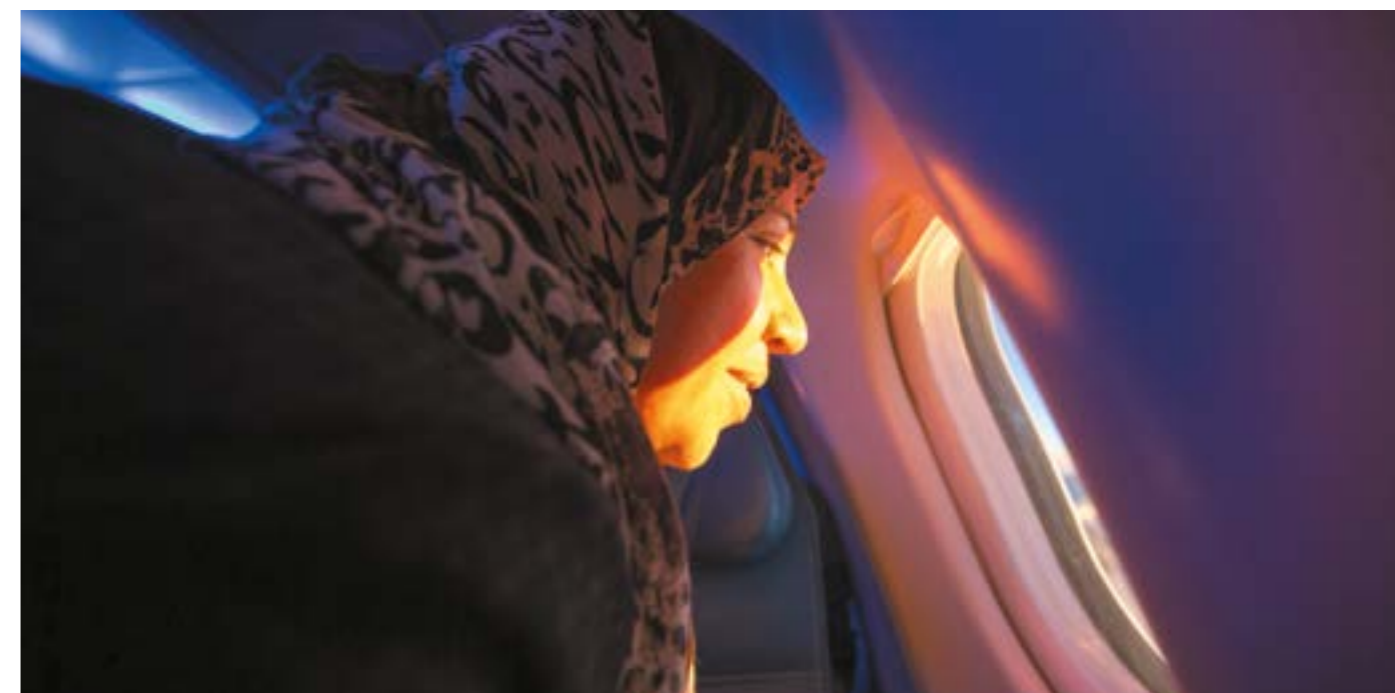
Syrians refugees travel to the main facility to apply for resettlement to Canada. © IOM/2015







As part of the PDO process, IOM staff assists a refugee family to try on new shoes in Mae Sot, Thailand. © IOM/ 2017



A Syrian women leaving from Amman, Jordan, bound for Toronto, Canada. © IOM/ 2015



IOM partners with a non-government organization to provide clothing for refugees. Every week, Somali, Ethiopian, Sudanese and Congolese refugees from Kakuma and Dadaab Refugee Camps are brought to the IOM's Transit Centre in Nairobi to complete preparations for their journey to the United States. The flight toolkit provided for them is produced by Heshima Kenya, a local non-governmental organization that provides protection to unaccompanied refugee minors and young refugee women without familial support. © IOM/ 2013

## CASE MANAGEMENT

### Case Processing

In some contexts, IOM assists States with case processing which is larger in scope than UNHCR's Resettlement Registration Form (RRF) and is sometimes a requirement for determination. These case processing activities are informed by pre-screening interviews with refugees consisting of gathering information on their profile, family relationships, education and employment, and reason for fleeing their country and applying for refugee status. The goal is to ensure that accurate and detailed information is captured and presented to governments to facilitate the determination of cases.

IOM case processing support is designed to:

- Help refugees in lodging correct and complete visa applications for resettlement; and
- Assist governments by providing selection authorities with accurate, detailed and objective information in standard formats in order to streamline the interview and selection process.

For refugees, the identification and referral process typically begins with UNHCR. UNHCR identifies, interviews and submits refugee cases to countries for resettlement consideration; subsequently, under agreements with those same countries, IOM resettlement operations takes place. However, not all resettlement cases who move under IOM auspices are referred by UNHCR. For non-UNHCR referrals the process can vary.

IOM caseworkers are trained to conduct thorough non-adversarial interviews and case assessments to ensure the case application meets programme requirements, verify the identity of each refugee applicant, obtain biographic and demographic information required by governments and resettlement agencies and accurately chronicle each applicant's claim for refugee status. A focus on intensive initial case preparation is aimed at reducing the number of times each case must be reviewed or deferred by selection authorities pending further information.

### Facilitating Selection Missions and Visa Processing

Selection missions to the field are an important opportunity for States to consider a large number of resettlement cases at the same time through face-to-face interviews with refugees, while gaining familiarity with the asylum and protection context of the refugee population. Once each resettlement State has determined the size and composition of its resettlement programme, and as part of

Through the use of its proprietary case management tools, IOM tracks refugee applicants through each stage of the resettlement process, including health assessments, pre-departure orientation (PDO) and movement operations to ensure that approved refugee cases are ready to travel in the timely manner required by the resettlement countries.

Hallmarks of IOM case processing activities are adherence to standard operating procedures, strict confidentiality and data protection standards, multi-level quality assurance controls at each stage of processing and robust anti-fraud measures to ensure programme integrity.

Case processing may include any or all of the following elements:

- Conducting in-depth personal interviews with refugee applicants to elicit complete case information and an accurate record of testimony;
- Gathering all required bio-data;
- Providing on-site assistance during selection missions, including scheduling refugee appointments, managing case files, distributing government decision letters at the conclusion of interviews and supervising interpreters, requesting and receiving reception and placement information for all approved cases;
- Referring approved applicants to designated panel or IOM physicians for medical exams;
- Receiving completed medical exams for each case member;
- Notifying relevant government authorities and/or resettlement agencies of health conditions requiring follow up treatment in receiving countries.

its collaboration with UNHCR and IOM, the timing and selection missions are negotiated. Planning and follow-up of a resettlement selection mission will generally be divided into three phases, namely, pre-mission, during the mission and post-mission.<sup>21</sup>

IOM facilitates selection missions and visa processing by providing on-site logistical assistance such as: scheduling refugee appointments; arranging transportation to the place of interview; childcare, security and interpretation services. Moreover, IOM also assists with obtaining travel documents (visa issuance/processing) for refugees, and in some cases, may pick up or deliver refugee travel documents from embassies. States contact IOM for a briefing to confirm the logistical and operational support that is required by governments during a selection mission and other relevant information.

Assistance for visa processing and during selection missions may include:

- Visa processing including application, support at embassies, transportation and collection;

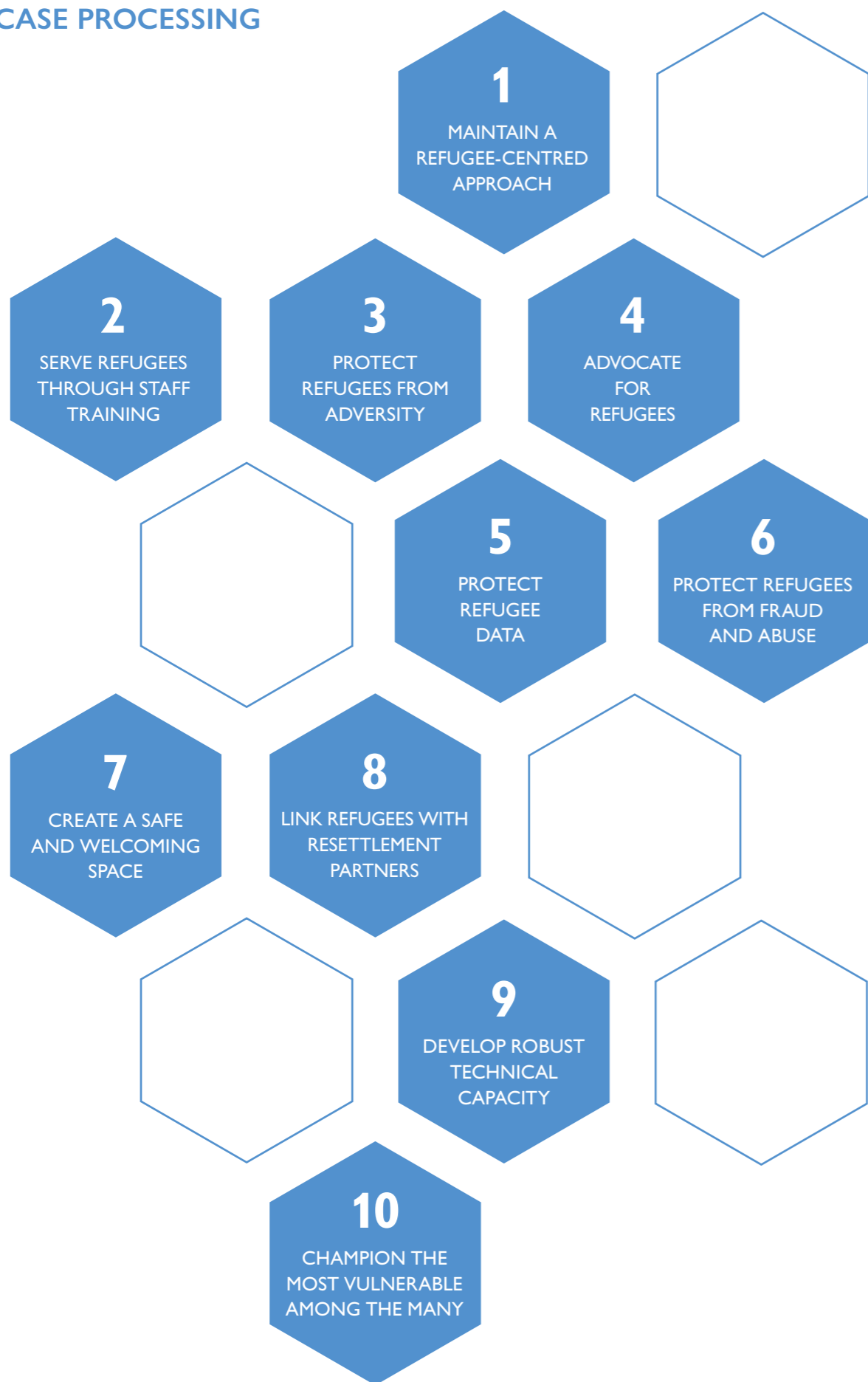
- Accommodation for refugees during selection mission and/or visa processing;
- Transportation of refugees from place of residence to interview site or Embassy for visa processing, including processing travel reimbursements;
- Interview facilities and technical equipment;
- Interpreters for selection mission and/or visa processing;
- Security services for selection mission and/or visa processing;
- Childcare services for selection mission and/or visa processing when parents are being interviewed;
- Catering during interview and/or visa processing.



IOM Case Processing improves the efficiency of country selection missions. © IOM/2009

<sup>21</sup> Text in this paragraph is from a forthcoming publication by UNHCR and IOM on Establishing Resettlement Programmes: A Short Guide, Unit 3, 2018.

## 10 BEST PRACTICES FOR CASE PROCESSING



### 1. Maintain a refugee-centred approach within a systematic process.

The centre of case processing is a person. All interaction with refugees and all efforts on their behalf must be done with a mind to their unique challenges and concerns. Where possible, interviews should be conducted in the refugee's native language and an effort should be made to understand the social, cultural, and religious context of the refugee's background. Examples of good practice include conducting multiple case processing interviews, individual counselling, and maintaining information centres to respond to phone, email and walk-in inquiries.

### 2. Serve refugees through staff training.

Training on current procedures and new requirements keeps staff engaged and invested in the programme within and beyond their routine assignments. Cross-training, as well as targeted training for working with vulnerable refugees (e.g. LGBTI refugees or minors) provides a platform for awareness building, motivating staff and innovating practices.

### 3. Protect refugees from the adversity of a complex and dynamic process through standardized procedures.

Even minor programme changes can affect the status of an applicant's case. In order to ensure a consistent level of service and programme integrity, each step in the process as well as possible outcomes and actions need to be documented and updated on a continual basis.

### 4. Advocate for refugees using multi-level quality assurance controls.

Being vigilant about the quality of our work is the best way to advocate for refugees. Putting in place assurance controls at various stages in the process and by multiple actors helps us to minimize errors and enhance our value of service.

### 5. Protect refugee data and maintain confidentiality.

Collecting accurate and honest testimony from refugees obliges us to manage information in a way that reinforces programme integrity along with the dignity of the refugees who share their stories.

### 6. Protect refugees from fraud and abuse.

Examples of anti-fraud measures include monitoring contact with refugees and providing channels for feedback, filming interview areas, providing information on the process as well as informing refugees that our work is voluntary and free of charge.

### 7. Create a safe and welcoming space for all refugees.

Case processing staff are trained to interview refugees in a respectful manner. Specialized training is given based on the needs of refugees with special protection concerns, including women at risk, LGBTI refugees, victims of domestic and gender-based violence, disabilities, etc. Safe space signs posted in processing centres and/or transit centres let applicants know that they can request to be interviewed by a staff member of a particular gender.

### 8. Link refugees with resettlement partners and receiving communities.

Resettlement impacts the lives of refugees, partner agencies and receiving communities. To facilitate a positive resettlement experience, case processing efforts must include information sharing with all stakeholders involved as well as counselling refugees on the entire process and importance of providing an accurate account of their skills, capacity and potential contacts in the receiving communities. Such information may help the resettlement agency to place refugees in a location where they have a better chance of successfully integrating. Examples of good practice include regular partner meetings, programme material for refugees, individual case counselling/orientation and ad-hoc correspondence with resettlement agencies concerning specific applicants.

### 9. Develop robust technical capacity.

Case processing requires a sophisticated data management system in order to document activity, report to stakeholders and conduct quality control. Data management is an integral part of the process. Proper utilization of technology also paves the way to more efficient use of staff resources, accountability and innovation. In current programmes, staff run hundreds of daily reports, use technology to track documents, integrate biometric tools with the database, and monitor correspondence.

### 10. Champion the most vulnerable among the many.

Refugees face real harm. There must be mechanisms in place to recognize needs, whether protection or medical related, as they appear and with clear procedures for intervention and action. Current policies include a case expedite process whereby staff and partner agencies can raise urgent concerns and request accelerated processing on behalf of an applicant.

## HEALTH ASSESSMENTS AND RELATED ASSISTANCE

IOM health assessments in the context of refugee resettlement constitute one of IOM's most established activities. Refugees are a particularly vulnerable population, with health profiles that vary according to the displacement experience, pre-existing health conditions and epidemiological profiles, among other factors. Pre-departure health assessments and related services, including travel health assistance, ensure that refugees are fit to travel and meet the requirements of the resettlement country.

Health assessments of refugees admitted for resettlement to third countries are funded and carried out at the request of resettlement countries such as Argentina, Australia, Belgium, Canada, Chile, Croatia, Estonia, Finland, France, Germany, Iceland, Ireland, Italy, Japan, Latvia, Lithuania, Netherlands, New Zealand, Norway, Portugal, Republic of Korea, Spain, Switzerland, United Kingdom, the United States and others. Health assessment protocols are based on the legislation and/or best practices of resettlement country governments, and are performed prior to a refugee's departure for resettlement. IOM doctors are specifically trained to meet the requirements of resettlement country medical health assessment protocols. Pre-departure health assessments are intended to ensure that refugees travel in a safe and dignified manner, are fit to travel, receive appropriate assistance when required, and do not pose a hazard to other travellers or receiving communities. By sharing information on medical needs

with receiving country authorities prior to the refugees' arrival, pre-departure health assessments also serve to enable proper reception preparation and ensure that the continuum of care can be maintained.

Traditional components of refugee health assessments conducted by IOM's Migration Health Division (MHD) include medical history taking and physical exam, an assessment of certain conditions of public health significance, pre-departure treatment and referrals (including pre-travel hospital stabilization), pre- and post-test counselling, and pre-embarkation fitness-to-travel checks. Individuals in need of travel health assistance (e.g. wheelchairs, supplemental oxygen, medical escorts, etc.) during transportation are identified at the time of the health assessment to ensure that they travel safely and without undue hardship to themselves or to other travellers, and to avoid in-flight medical emergencies or flight deviations.

Specific provisions to the health assessment protocol (e.g. additional diagnostics, treatment for parasites, immunizations) are made upon request of resettlement countries in order to ensure safe travel, to facilitate proper follow-up of medical cases after arrival and to facilitate the integration of refugees into their receiving communities. Health assessments are increasingly recognized as an important tool for public health promotion and prevention in the pre-departure resettlement phase.



The IOM health clinic in Amman, Jordan, is a regional hub for coordinating health assessments for Middle East and North Africa (MENA). ©IOM/ 2018



At Le Bon Samaritan Polyclinique, Kigali, Rwanda, IOM performs health assessments before the refugees are resettled in third countries, mostly in the United States of America. ©IOM/ 2017

## 10 BEST PRACTICES FOR HEALTH ASSESSMENTS AND RELATED ASSISTANCE



### 1. Uphold accountability to all stakeholders: refugees, Member States, the Organization and the international health community.

IOM is liable for the delivery of migration health assessments that are comprehensive, uphold national and international health legislation, are delivered in a timely and efficient manner, and are beneficial, accessible and equitable for migrants. Qualified personnel adhere to reputable ethical standards that respect the dignity and self-determination of migrants as well as global health codes and strategies.

### 2. Provide refugee-centred health assistance.

The refugee is at the centre of the migration health assessment process. Health assessments are carried out by technically competent professionals who adhere to a deontological code based on respect for the dignity and expectations of the individual, confidentiality of medical information and documents, and the appropriateness of service delivery.

### 3. Empower refugees to advocate for their health through health education and pre- and post- test counselling.

Health assessments promote positive health-seeking behaviours through pre-departure health education and awareness campaigns. Refugees are empowered to take preventative or curative actions to improve their health. The counselling offered is confidential, language-, gender- and age- sensitive and is carried out by professional counsellors.

### 4. Ensure culturally competent services.

Physicians are culturally competent and provide health assessment services that respect the individual's gender, age and cultural context.

### 5. Employ public health approaches to address the health of refugees prior to departure.

IOM aims to protect the health of migrants and communities across the resettlement continuum. Services such as outbreak surveillance and management, immunizations and early detection and treatment for both target and hosting populations identify and address health needs and avert health-related delays in resettlement. Pre-departure treatment, vaccinations and other public health interventions are also tailored to meet the needs of refugees and immigration authorities.

### 6. Address health throughout travel.

Travel health assistance addresses the migrant's health and safety and manages conditions of public health concern as people move across geographical, health system and epidemiological boundaries. Pre-embarkation checks and pre-departure medical screenings assess refugees' fitness to travel and provide last-minute medical clearance. Refugees who need medical assistance and care during travel are escorted by health professionals. These measures help to ease any adverse effects of the movement process on refugees' health outcomes, and ensure that refugees are referred to appropriate medical services upon arrival.

### 7. Foster refugee integration through early detection, early treatment and information-sharing.

Migration health assessments promote the health of refugees through preventive and curative health interventions for conditions that, if left untreated, could have a negative impact on the refugees' overall health status and on the public health of receiving communities. In addition, the collection and analysis of aggregate data from health assessments provide resettlement countries with valuable information on the health profiles of refugees and enable resettlement countries to better prepare for the sustainable integration of resettled refugees. With the refugee's consent, health-care providers in the receiving community can obtain information on conditions that require follow-up treatment or specialized investigation. Bridging health management systems between source, transit and receiving communities enables resettlement countries to properly prepare for migrants' arrivals and facilitates continuity of care. Migration health assessments adhere to the IOM goal of "healthy migrants and refugees in healthy communities" and, as such, positively impact refugees' capacity to successfully integrate into receiving societies.

### 8. Employ evidence-based and risk-based approaches.

Move from health screening practices meant to identify medical grounds for inadmissibility to risk-based protocols adapted to refugees' specific profiles and exposures to risk. Evidence- and risk-based approaches address particular concerns and foster post-arrival integration while enhancing both health promotion and overseas health initiatives. Wherever possible, technological advances in diagnostics and treatment should be applied for improved assessment quality.

### 9. Facilitate national and local capacity-building within the health sector.

IOM integrates its assistance with existing national disease control and prevention programmes by aligning with local health systems. IOM collaborates locally with partners through confidential data sharing, and by outsourcing services locally, training providers and employing local personnel. Health promotion services are extended to local populations whenever applicable.

### 10. Link with broader migration health goals.

IOM contributes to global migration health priorities by delivering comprehensive health services for refugees, through researching and communicating the determinants of migrants' health, by advocating for policy revisions and providing technical expertise to support the capacity of local health systems, and by promoting and strengthening inter-country dialogue and coordination.

## MOVEMENT MANAGEMENT AND OPERATIONS

Migration implies movement. For 67 years, moving refugees and other migrants at risk in a safe, orderly and dignified manner has been and continues to be a fundamental purpose of the Organization.

IOM's international movement operations continue to grow in scope and complexity, with over 60 nationalities represented among global refugee admissions, often from far-flung or difficult to reach locations posing significant logistical challenges including transportation, accommodation and security arrangements. In 2017, large-scale resettlement operations were organized out of Afghanistan, Iraq, Jordan, Kenya, Lebanon, the United Republic of Tanzania, Rwanda, Uganda, Ethiopia and Turkey, with smaller operations taking place in over 116 other countries. Organizing resettlement, humanitarian admission and evacuation from several locations with high security risks such as Afghanistan, Iraq, Libya, the Syrian Arab Republic and Yemen is now a regular rather than intermittent part of movement operations.

This complex undertaking requires close coordination in house and strong partnerships within the travel industry. IOM has over 40 agreements in place with leading airlines including agreements with charter operators to respond in a timely manner and effectively to the mobility dimensions of humanitarian crises at the request of States.<sup>22</sup> While most refugees travel by scheduled commercial air service, through unique network of agreements with airlines; certain operations need tailor made arrangements for which air charter operators are used. Donor requirements as well as a level of urgency might warrant a charter. To this end, global agreements with most major airlines and air charter operatives are negotiated to ensure the availability and cost-effective transport options worldwide.

In some circumstances, alternative forms of transportation may be organized in very difficult and potentially dangerous locations such as by air or land bridges. For example, vulnerable populations of Yemenis in-country have been transport out by boat to Djibouti for onward travel to the resettlement State. In other cases, refugees may travel outside of their country of origin by land bridges to a country where diplomatic relations exist for onward air travel to the resettlement State such as Syrians to Lebanon.

Moving individuals or groups, especially from remote and sometimes dangerous locations, require a large network of IOM offices with experienced, trained and dedicated staff during departure,

transit and arrival phase of movement. Well-versed movement procedures and professional staff are required for internationally travel to ensure a smooth journey.

Real-time information management and monitoring of refugee movements and established communication protocols ensure that passengers under IOM auspices travel safely and that all partners are kept informed of their progress from take-off to landing.

To assist those in need IOM provides comprehensive movement assistance that includes in-country and international transportation by land, air or sea. It requires:

- Receipt of the Travel / Booking request which includes the beneficiary's identification details, expected travel dates, destination address including the nearest airport where refugees will be met;
- Tracing of the refugees and initiation of the necessary exit procedures which in certain first countries of asylum may be very lengthy, requiring up to a month before the travel;
- Recording bio-data of beneficiaries in IOM's proprietary tools;
- Obtaining, collecting and distributing travel documents;
- Booking domestic and international travel and ticket issuance;
- Coordination of travel plans with the authorities and stakeholders in the departure, transit (including transit visa waivers) and destination countries;
- Accommodation and catering arrangements during departure, transit and arrival (IOM transit centres);
- Pre-embarkation session focused on departure, transit and arrival procedures;
- Passenger assistance at departure (immigration, customs and check-in);
- Transit assistance;
- Operational escorts during travel;
- Reception upon arrival and handover to responsible authorities or partner organizations for further assistance;
- Real-time information sharing;
- Monitoring movements; and
- Reporting to donors, governments and partners.

### Use of Emergency Transit Facilities<sup>23</sup>

The Emergency Transit Facility (ETF) concept was inspired by a number of ad hoc experiences where UNHCR was required to provide urgent or emergency protection to refugees in need of resettlement at short notice. A more predictable, systematic and swift mechanism was established to supplement resettlement under the emergency and urgent priority and which allows the transfer to safety of refugees who would otherwise not receive the protection they need in a timely manner.

Since the inception of the ETFs, the use of these facilities has expanded to include situations which are not an emergency as such, but where resettlement countries have difficulties with accessing the refugees concerned, whether due to security reasons in the country of asylum, or for political reasons, thereby requiring the refugees to be moved for purpose of further processing.

Two models of emergency transit facilities have been established – an Emergency Transit Centre (ETC) model, as in Romania and Slovakia, which has physical facilities available for housing evacuated refugees, and an Emergency Transit Mechanism (ETM) such as those

in the Philippines and Niamey, where refugees are accommodated in a variety of urban housing rather than in a central location.

Evacuation to an ETF/ETM offers benefits and advantages to all involved. While enabling refugees a chance to live in a safe and secure environment in a location where services and assistance are available while awaiting resettlement, it also offers resettlement countries a stable location in which resettlement procedures such as interviews, cultural orientation courses and language classes may be carried out in optimal conditions. In addition, it allows UNHCR, IOM, and other partners an opportunity to provide needed services and assistance to refugees coming from the most precarious situations.

The complexity of the transfer process varies from one situation to the next, and may involve a greater or lesser number of partners. Consequently, active coordination of the overall transfer process is required on the part of all stakeholders to ensure that emergency transfer movements take place efficiently and in a predictable manner, minimizing unintended negative consequences.



A family receives movement assistance at El Salvador airport on the way to the United States. © IOM/ 2018

<sup>22</sup>) Migration Governance Framework (MiGOF) Objective 2.

<sup>23</sup>) Text in this section is from a forthcoming publication by UNHCR and IOM on "Establishing Resettlement Programmes: A Short Guide", Unit 3, 2018.

## 10 BEST PRACTICES FOR MOVEMENT MANAGEMENT AND OPERATIONS



### 1. Arrange for the safe, orderly and dignified movement of refugees and other vulnerable persons.

A network of experienced operations staff, supported by global airline agreements along with proprietary movement management applications and protocols, all help to ensure that refugees are transported smoothly from remote, often far-flung locations to their final resettlement destinations. For example, clothing and hygiene packages are provided when needed.

### 2. Maintain high quality service to refugees through IOM staff training on latest programme requirements and standard operating procedures.

Providing refugees with safe and orderly travel requires the Organization to continuously adjust to the complex and evolving transportation environment. Movement specialists offer beginning to advance training programmes in effective movement management ensuring expert staff in field missions uphold quality assistance to beneficiaries, partners, and governments. Informed and qualified staff monitors, tracks, and compiles movement information, arranges charter agreements, and maintains quality control by providing the rules and regulations for transport.

### 3. Maintain global agreements with airline partners for reduced fares, wide geographical coverage, and flexible access.

IOM moves most migrants and refugees by scheduled commercial air service using its unique negotiated agreements with leading airlines; however, the Organization also maintains agreements with air charter operators to conduct movement operations in remote locations or for large caseloads. It is a priority of movement staff to negotiate cost effective fares and access to carriers whose network and partnerships, through airline alliances, offer the largest possible destinations and routes worldwide.

### 4. Support refugees in obtaining proper travel documentation.

IOM informs applicants on visa application procedures and stands by to support them in properly preparing documents required for exit permits, transit and entry visas, etc.

### 5. Prepare refugees for travel through pre-embarkation session.

Before taking a plane, IOM informs refugees about the requirements for international air travel and explains what refugees can expect at the airport, during take-off and landing and onboard the flight.

### 6. Find best available tickets and ensure safe conditions for travel.

Orderly transportation is in the details. Informed and qualified staff arrange agreements, book international and domestic flights, issue ticketing, monitor, track, and compile movement information, and adhere to rules and regulations essential for safety and quality control.

### 7. Assist refugees before departure, during transit and upon their arrival.

Many migrants and refugees are new travelers and require guided assistance through formal procedures in preparation for travel, in-flight, during transit, and upon arrival at their final destination. IOM staff meet and assist migrants and refugees throughout their journey with regard to check-in, immigration formalities, meals and accommodation, flight connections, adjustments, notification and handover to reception authorities, IOM staff also provide guidance at connection points and travel orientation.

### 8. Provide operation and medical escorts for those in need.

Where required, IOM helps passengers with special needs by monitoring and attending to their medical requirements en route and liaising with flight staff and other authorities. IOM employs well-developed standard protocols using customized tools to better advise assisted passengers and partners, track cost reduction, provide real time notifications, and train escorts and inform migrants who have travel requirements to ensure the passenger is comfortable and well cared for during their journey.

### 9. Build robust proprietary tools and technology.

Real-time information management and monitoring of refugee movements, alongside established communication protocols, ensure that passengers under IOM auspices travel safely and that all partners are kept informed of their progress from take-off to landing. IOM standardizes processes and integrates data systems to connect a global network of offices allowing for staff to focus on the quality of service delivered.

### 10. Remain institutionally flexible and adept for emergency response.

IOM has the agility to deploy movement experts to work in crisis situations around the world, in difficult and sometimes dangerous conditions, providing emergency evacuation and rapid response to humanitarian need.

## ADDRESSING INTEGRATION PRE-DEPARTURE AND POST-ARRIVAL

Integration can be understood as a two-way process that occurs in a continuum: the process of integration begins long before a refugee leaves his or her country of first asylum, and continues well past their arrival in the country of resettlement as they forge new connections and begin to thrive in their new communities. There is a growing consensus on the value of addressing integration at the earliest possible stage of a refugee's resettlement journey. This includes providing refugees with accurate, timely and relevant information at multiple points by multiple actors along their integration journey.

A starting point is Pre-Departure Orientation (PDO) where refugees receive practical information on the resettlement country and have an opportunity to reflect upon their upcoming resettlement, raise questions regarding the integration process, and express any concerns they may have. Strong partnerships between PDO programmes and post arrival reception and orientation programmes are the cornerstone of an integration continuum ensuring a successful transition of refugees towards integration.

Linking the various integration stages through standardized messaging and through culturally appropriate methodology contributes to positive learning experiences, and facilitates trust and long-term integration outcomes. IOM has done the following to promote integration and ensure linkages between pre-departure and post-arrival settlement:

- Designed Pre-Departure Orientation (PDO) curricula and supporting handbooks and activities. Key priority messages are developed in close collaboration with receiving countries. The topics addressed in the orientation include housing, health, money management, role of settlement service providers, education, cultural adaptation, rights and responsibilities, and others.
- Delivered training of trainers' courses to both PDO and post-arrival trainers focusing on participatory and learner-centred methodology.

- Engaged bicultural or cross-cultural trainers with a keen linguistic familiarity and cultural understanding of the refugee population concerned.
- Provided cultural background information through needs assessments, cultural profiles and through focus group sessions with refugees prior to departure and post-arrival.
- Held information sessions for municipalities, including teachers, law enforcement officials, health workers, and service providers on refugee groups.
- Developed and compiled social intake forms that capture information on educational and linguistic skills, as well as vocational and employment experience to facilitate labour market access.
- Held video-conferencing with receiving communities to connect refugees and local authorities prior to arrival to promote mutual understanding of settlement priorities and expectations.
- Conducted trainings on skills development specifically focusing on employment, soft skills (CV writing, interviewing skills, and identification of transferable skills).
- Carried out capacity-building for local authorities and settlement service providers, specifically focusing on methodology, intercultural competency and cross-cultural communication.
- Organized conferences in host countries to discuss integration challenges and successes and ways of improving information dissemination and management of expectations of all parties involved.
- Disseminated information and awareness-raising campaigns in destination countries to highlight the positive contributions of migrants to their host communities and counter anti-immigrant sentiment.
- Assisted migrant organizations in developing volunteer programmes to bring together members of the community and newcomers into various practical activities.

### Spotlight on Pre-Departure Orientation

IOM provides PDO training courses for refugees accepted for resettlement to a third country. Over the past 25 years, IOM has conducted courses for over 500,000 refugees in over 70 refugee processing locations around the world. PDO is an integral component of successful resettlement programmes and is most effective when linked closely to domestic settlement services.



Canadian Orientation Abroad in Nepal. © IOM/2010

### Spotlight on Innovative Practices

#### *Pre-departure Interviews to Facilitate Placement and Matching at Destination*

IOM assists government authorities to conduct pre-departure interviews using videoconferencing and telephone facilities to identify the needs of refugees selected for resettlement. The feedback received from the refugees selected for interview has been overwhelmingly positive they are pleased to have had direct contact with government authorities and they comment on the care and sensitivity with which the interviewers responded to concerns they raised. IOM provides this technical and implementation support to better match refugees to specific local authority areas in the receiving country and tailor integration support provided to refugees upon their arrival.

#### *Tailoring Pre-Departure Information to Meet the Needs of Children in Resettlement*

Pre-departure orientation programmes can be developed with tailored curriculum for children that includes child-centred methodologies to convey the key priority messages. The information is communicated to children in age-appropriate ways. It aims to provide children with practical information about their resettlement journey, help them develop realistic expectations, prepare them for cultural differences, and introduce them to their responsibilities. Resources developed will include child-friendly material that gives them an early insight into life in the receiving country aimed at reducing some of the fears and anxieties associated with resettlement.

#### *Addressing Gender-Based Violence*

With a view to ensuring that refugees are well informed on their rights and responsibilities in the receiving country, pre-departure programmes can be designed with a specific module addressing the gendered dimensions of violence be it domestic violence, honor crimes or female genital mutilation. The entire focus of the module is aimed at victim protection and the various options of legal and community support that is available to individuals who might experience gender based violence upon resettlement. The key priority messages that are delivered in this module should be re-emphasized in post-arrival orientation sessions thereby ensuring a continuum of information provision.



## 10 BEST PRACTICES FOR PRE-DEPARTURE ORIENTATION



### 1. Develop curricula and supporting activities with destination country.

Key messages should be identified in consultation with receiving countries, and include the cultural, linguistic and socioeconomic challenges that refugees will face.

### 2. Facilitate integration activities across the resettlement continuum.

Pre-departure and post-arrival activities need to be aligned through consistent messaging, standardized information and enhanced coordination between service providers at the different ends of resettlement continuum.

### 3. Consider the timing of courses.

IOM recommends that the pre-departure orientation be carried out over a period of minimum three days, though ideally more, to allow for sufficient time for the beneficiaries to reflect on the content and the life-changing event of moving to another country as well as gives them the chance to address their concerns, worries and expectations. Courses should be scheduled as close to departure as possible to increase relevancy of the lessons, and maximize refugees' focus and retention.

### 4. Develop trainings that are participatory and learner centred.

Refugees learn best and the lessons are more meaningful when the course is experiential and highly participatory. One example is for refugees to teach one another, an approach that increases retention and builds self-esteem and self-confidence.

### 5. Address content, skills and attitudes.

While accurate information about the country of destination is relevant, it is equally important to build productive attitudes for successful adaptation, including pro-activity, self-sufficiency, and resourcefulness.

### 6. Train in refugees' native language.

Whenever possible, pre-departure orientation courses should be conducted in refugees' native language, ideally by trainers who share refugees' cultural background. Both of these points are particularly relevant when working with pre-literate and or vulnerable refugees.

### 7. Address psychosocial issues in pre-departure training.

Pre-departure orientation goes beyond dispensing information about receiving countries; it should also address the psychosocial well-being of participants, taking into account the social, anthropological, cultural and the psychological aspects of resettlement. As such, it is vital to develop pre-departure courses which are holistic and address the concerns of all participants, including youth, children and elderly. Topics include cultural adaptation, culture shock, communication, family dynamics, gender, and cross-generational issues among others.

### 8. Create a non-threatening learning environment.

A welcoming training atmosphere of inclusion – in which all participants are shown respect – fosters a greater sense of belonging and encourages risk-taking and learning. Many refugees have little or no formal education, and therefore it is critical that trainers consider both the educational and cultural backgrounds of their participants in planning lessons.

### 9. Promote gender equality.

It is important to provide an open and secure learning environment in which gender equality is promoted. This sends an important message that the destination country values the role that both men and women play, and paves the way for future social interaction and learning opportunities where participation of all genders is not only encouraged but expected.

### 10. Reaffirm the dignity and positive contributions of every refugee.

Refugees should be made to feel valued for their rich cultural background and experiences and, conversely, receiving communities should be made aware of the positive contributions that refugees offer, including social, economic and cultural contributions.

# IV. EMERGING RESETTLEMENT COUNTRIES MECHANISM (ERCM)

The Emerging Resettlement Countries Joint Support Mechanism (ERCM), led by IOM and UNHCR, provides financial and technical support to new and emerging resettlement countries. The ERCM was created and launched as a 3-year project (2016–2019) following the commitments made at the Leaders' Summit for Refugees in late September 2016.

The overarching goal of the ERCM is to support emerging resettlement countries expand opportunities and solutions for vulnerable person in need while demonstrating solidarity and responsibility sharing with countries hosting large numbers of refugees.

The ERCM has three main objectives:

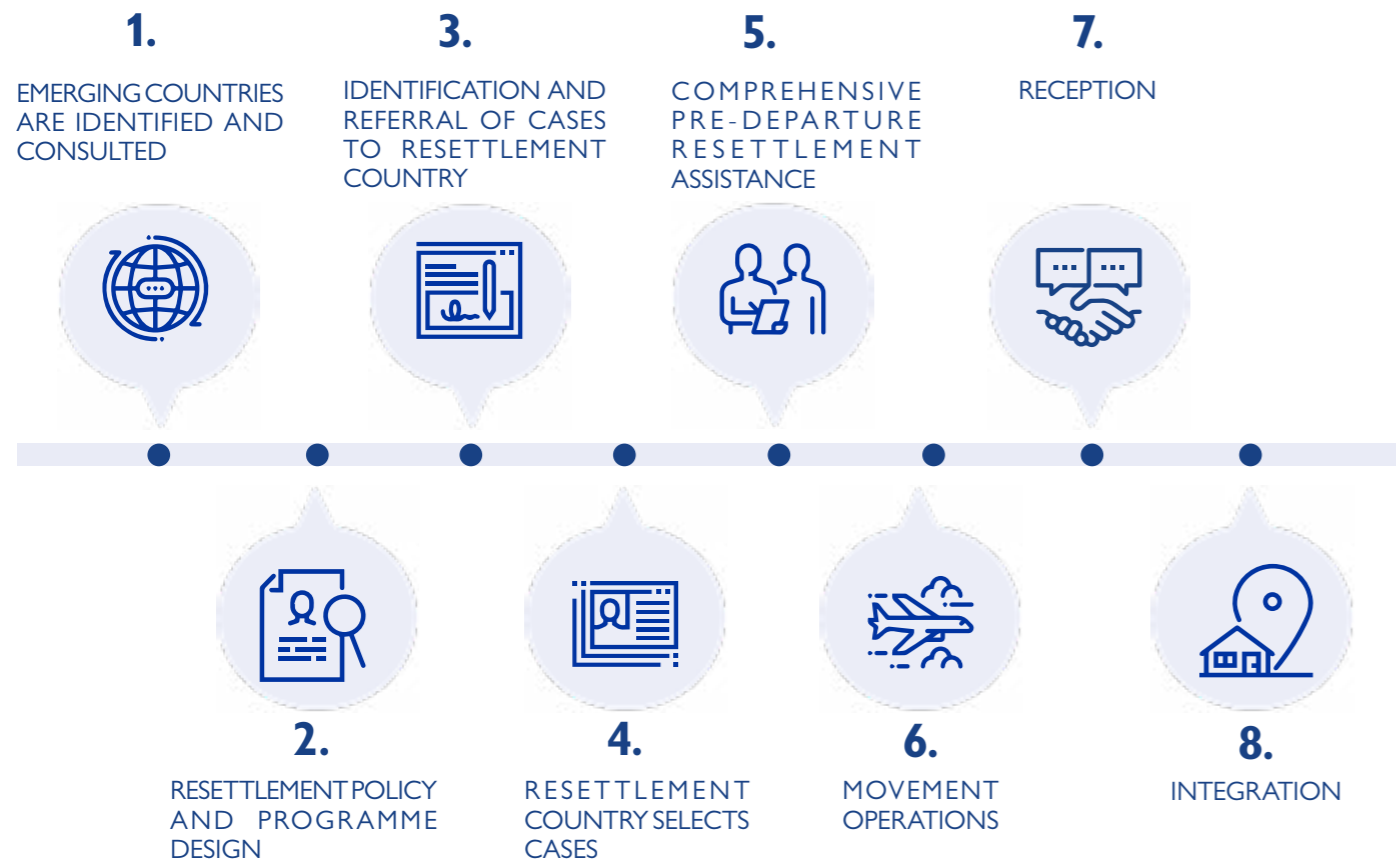
1. Provide a mechanism for governments, private sponsors and donors to harness expertise and contribute financially and technically to supporting resettlement;
2. Assist emerging resettlement countries assess programme sustainability, and help identify areas in need of targeted assistance;
3. Channel and support the sharing of technical expertise and good practices among all interested stakeholders.

The ERCM has initiated support the countries of Chile, Argentina and Brazil to strengthen their resettlement and humanitarian admission programmes, linking to other relevant initiatives such as private sponsorship as a means of ensuring sustainability of these programmes and optimizing integration outcomes. Due to the nature of political commitments made by these three governments, the beneficiaries assisted thus far are of Syrian nationality.



ERCM beneficiaries receive a tailored pre-departure orientation. © IOM/2017

## HOW THE ERCM WORKS

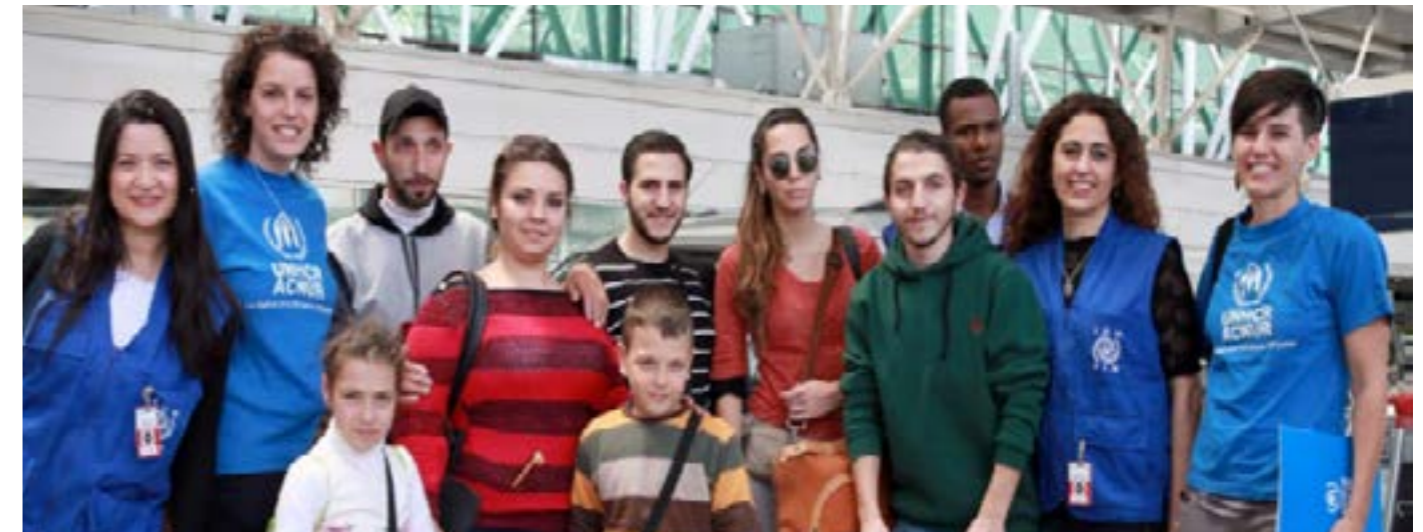


**102**  
Refugees resettled in 2017

**Policy tools developed:**  
1. Self-Evaluation Matrix  
2. Country Readiness

Number of Pre-Departure Orientation packages developed : **2**

Number of Health Assessment protocols adopted : **2**



A group of Syrians are received by IOM and UNHCR at the airport in Buenos Aires, Argentina. In the weeks leading up to departure, a security check mission was led by a delegation of Argentinian officials in Beirut to produce a final list of beneficiaries of the Syria Programme that was received by IOM and UNHCR. The ERCM supported the selection mission of Argentinian officials and interviews in Beirut in order to receive clearance by States. In parallel, IOM coordinated with the Ministry of Health to finalize the Health Assessment Protocol and Pre- Departure Orientation materials for arrivals in route to Argentina. © UNHCR/ 2017

## V. TWO PRINCIPLES FOR PROGRAMMING

On the basis of 67 years of experience, IOM advocates for two broad approaches as a foundation for any resettlement operation: refugee-centred programmes and strengthening the link between pre-departure and post-arrival orientation and support. Movement operations are complex and resource-intensive, involving the synchronized actions of many partners within and outside the State therefore there is a need for close and regular consultation with concerned parties, as well as strong, informed partnerships.

### REFUGEE-CENTRED PROGRAMMES

Successful resettlement programmes are refugee-centred and have protection as their main driver. Resettlement programming should include comprehensive and well-coordinated pre-departure and post-arrival assistance, and be designed and implemented to support refugees and counterparts at every phase of the resettlement process to maximize meaningful integration. This means caring for the health and well-being of refugees, arranging their safe and dignified travel, ensuring they are well informed about resettlement and prepared for integration into welcoming communities. The need to involve, empower and prepare refugees applies whether States are resettling one hundred people or one hundred thousand people.

Health assessments in the pre-departure phase of resettlement are increasingly recognized as an important tool for public health promotion and disease prevention. Health assessments prior to resettlement and addressing refugees' health needs early on can also be cost-effective in reducing the demand for domestic health or social services in the destination country. Health-related assistance before, during and after travel is a key requirement to ensuring a safe and dignified journey and continuum of care for refugees with medical conditions or other health needs. Referrals for additional investigations or stabilization treatment prior to departure, special travel arrangements and the provision of medical escorts are all important components in mitigating risk during travel. The efficient, timely exchange of medical information over electronic platforms also allows health providers and resettlement agencies to prepare adequately for the arrival of refugees and ensure continuity of care.

Integration requires comprehensive and coherent policy approaches across sectors based on partnerships between States and various stakeholders, including intergovernmental organizations, civil society

organizations, private sector actors and migrants themselves. Integration policies are more effective when they take a "whole-of-community" approach, and when there is a clear understanding of expectations and obligations from all involved – the refugees and the receiving society, including authorities at the local, regional and national levels. IOM believes that integration is continuum and occurs across multiple dimensions: it begins before migrants set foot in the receiving country and can extend well beyond the initial stages of resettlement. Linking various integration stages through alignment of activities and improved coordination between pre-departure and post-arrival support facilitates trust and long-term integration outcomes.

Refugees are eager to learn as much as they can about the resettlement process and what awaits them in resettlement countries. Providing refugees with accurate, objective information about the process and the country of destination can help refugees make an informed decision about resettlement. Moreover, providing settlement actors with an accurate account of refugees' skills, strengths and desires can help place refugees in a location which offers a better chance of successfully integrating.

Pre-departure orientation goes far beyond simply sharing information about the receiving country; it prepares refugees by helping them to develop the skills and attitudes they will need in order to succeed in their new environment. It also addresses the psychosocial well-being of refugees, taking into account the social, anthropological, cultural and psychological aspects of resettlement. Orientation must address the real concerns of participants, and emphasize cultural adaptation, inter-generational communication, gender roles, changing family dynamics and other challenges.

### LINKING PRE-DEPARTURE AND POST-ARRIVAL TO FACILITATE THE INTEGRATION PROCESS

An important policy development is the increasing involvement in preparation process of both countries of origin and receiving countries to ensure a continuum of care and services for refugees and enable receiving communities to plan for the integration of newcomers. This more joined up approach to preparing refugees for resettlement builds on the recognition that integration supports made available to migrants upon arrival are more likely to be effective when they continue an integration process that started prior to arrival. IOM developed a range of tools to strengthen the linkage between these pre-departure and post-arrival assistance.

Recognizing the importance of informing and preparing receiving communities for sustainable integration, IOM has developed a number of specific tools to assist municipalities and service providers better understand the profile and needs of the migrant population they are serving. Through direct access to the refugee, IOM has the unique ability to collect and mobilize rich data about specific characteristics of refugee population (e.g. their history, experiences, culture, psychosocial profile and skills) and tailor this information to the needs of the post-arrival service providers to support their

planning of integration support. Tools include cultural and social profiles, comprehensive needs assessments and skills profiles profile to help inform post-arrivals measures in the area of social and labour market integration. In addition, IOM supports active engagement of local residents early on in the resettlement process through dialogue and information sessions and awareness campaigns and strengthens the capacity of front line officers in local administrations to cater for needs of diverse communities.

To enable the best opportunities for people to settle well and be productive requires comprehensive health assessments and interventions to prevent disease that enhances the health of the refugees and the communities. Pre-departure health assessments are an effective public health instrument, and when non-discriminatory and non-stigmatizing, benefit both the individual and community. Linked to this is the continuity of care through effective and secure sharing of health information and how these can be made portable and secure in effective ways. e.g. Health profiles, Electronic platforms for sharing health information and referrals.



Ethiopian sponsored refugees attended Canadian Orientation Abroad (COA) at the IOM Addis Ababa Transit Centre prior to departure. © IOM / 2015

## FLOW CHART OF ACTIVITIES

This chart is indicative of the resettlement process, from the point before a case is selected by a resettlement country until arrival in that country. Not all resettlement cases go through this exact process, and there may be some variation in the order of activities.



A group of newly arrived Vietnamese refugees show their appreciation to the people of Britain after their first emotional night in London. © IOM / 1988

# OVERVIEW OF ACTIVITIES BY RESETTLEMENT COUNTRY

Countries with resettlement operations in 2017	Argentina	Australia	Austria	Belgium	Canada	Chile	Croatia	Denmark
NB.: Figures include predominantly persons with refugee status but also other vulnerable persons of concern. <sup>24</sup>	36	7'998	381	1'309	24'002	66	40	5

## CASE MANAGEMENT

1. Refugee interviews								
2. Completion of government forms		•			•			
3. Translation and interpretation		•	•	•	•	•	•	
4. Selection mission preparation, logistical support and scheduling		•		•	•	•	•	
5. Case file management								
6. Database management, reporting and statistics	•	•	•	•	•	•	•	•
7. Information campaigns								

## HEALTH ASSESSMENT AND RELATED ASSISTANCE

8. Physical Exam (PE)	•	•	•		•	•	•	•
9. Chest x-ray and radiologist interpretation	•	•	•		•	•	•	•
10. Diagnostic tests for TB (Sputum smear and culture testing)	•	•	•		•	•	•	•
11. Other laboratory examinations	•	•	•		•	•	•	•
12. Immunizations	•	•			•			•
13. Pre-Departure Medical Screening (PDMS)	•	•	•	•	•	•	•	•
14. Pre-Embarkation fitness-to-travel Check (PEC)	•	•	•	•	•	•	•	•
15. Medical escort/medical travel arrangement	•	•	•	•	•	•	•	•
16. Selected conditions treatment/stabilization	•	•	•	•	•	•	•	•
17. Refugee groups morbidity profiling								•

## ADDRESSING INTEGRATION: PRE-DEPARTURE ORIENTATION AND POST-ARRIVAL

18. Needs assessments / social in-take			•				•	
19. Cultural profiles of refugee populations								
20. Curriculum development	•	•	•		•	•	•	
21. Pre-departure orientation courses	•	•	•		•	•	•	
22. Language and/or literacy training							•	
23. Pre-embarkation briefing	•	•	•	•	•	•	•	•
24. Post-arrival integration							•	

## MOVEMENT MANAGEMENT AND OPERATIONS

25. In-country transportation	•	•	•	•	•	•	•	•
26. Refugee transit centres accommodation		•	•	•	•		•	•
27. Pre-embarkation flight orientation	•	•	•	•	•	•	•	•
28. International airline bookings	•	•	•	•	•	•	•	•
29. Passenger assistance at departure, transit and arrival airports	•	•	•	•	•	•	•	•
30. Operational and/or medical escorts	•	•	•	•	•	•	•	•
31. Reporting	•	•	•	•	•	•	•	•

<sup>24</sup> who moved under resettlement and humanitarian admission programmes (excluding relocation, family reunification, special immigrant visas, etc.)

	Estonia	Finland	France	Germany	Iceland	Ireland	Italy	Japan	Korea, Republic of	Latvia	Lithuania	Luxembourg
	19	1'102	2'526	3'015	70	273	985	29	30	40	59	182

## CASE MANAGEMENT

1.												
2.												
3.	•									•	•	
4.	•			•		•				•	•	•
5.												
6.	•	•	•	•	•	•	•	•	•	•	•	•
7.												

## HEALTH ASSESSMENT AND RELATED ASSISTANCE

8.				•		•	•	•	•		•	
9.				•		•	•	•	•			
10.				•		•	•	•	•		•	
11.				•		•	•	•	•		•	
12.				•		•		•				
13.			•	•		•	•	•	•		•	
14.	•	•	•	•	•	•	•	•	•	•	•	•
15.		•	•	•	•	•	•	•	•		•	•
16.		•	•	•	•	•	•	•	•		•	•
17.								•				

## ADDRESSING INTEGRATION: PRE-DEPARTURE ORIENTATION AND POST-ARRIVAL

18.							•					
19.												
20.		•		•	•		•		•		•	
21.		•	•	•	•		•	•	•		•	
22.		•			•		•	•				
23.			•	•		•	•	•	•		•	•
24.							•					

## MOVEMENT MANAGEMENT AND OPERATIONS

25.	•	•	•	•	•	•	•	•	•	•	•	•
26.	•	•	•	•	•	•	•	•	•	•	•	•
27.	•	•	•	•	•	•	•	•	•	•	•	•
28.	•	•	•	•	•	•	•	•	•	•	•	•
29.	•	•	•	•	•	•	•	•	•	•	•	•
30.	•	•	•	•	•	•	•	•	•	•	•	•
31.	•	•	•	•	•	•	•					

## OVERVIEW OF ACTIVITIES BY RESETTLEMENT COUNTRY

Countries with resettlement operations in 2017	Malta	Netherlands	New Zealand	Norway	Portugal	Romania		Spain
							ETC	
NB.: Figures include predominantly persons with refugee status but also other vulnerable persons of concern. <sup>25</sup>	17	2267	1'018	2'817	171	43	ETC	1'071

CASE MANAGEMENT								
1. Refugee interviews								
2. Completion of government forms			•					
3. Translation and interpretation	•	•	•	•	•			•
4. Selection mission preparation, logistical support and scheduling	•	•	•	•	•			•
5. Case file management								•
6. Database management, reporting and statistics	•	•	•	•	•	•		•
7. Information campaigns								

HEALTH ASSESSMENT AND RELATED ASSISTANCE								
8. Physical Exam (PE)	•		•			•	•	•
9. Chest x-ray and radiologist interpretation			•			•	•	•
10. Diagnostic tests for TB (Sputum smear and culture testing)	•		•			•	•	•
11. Other laboratory examinations	•		•			•	•	•
12. Immunizations			•			•	•	
13. Pre-Departure Medical Screening (PDMS)		•				•	•	•
14. Pre-Embarkation fitness-to-travel Check (PEC)	•	•	•	•	•	•	•	•
15. Medical escort/medical travel arrangement	•	•	•	•		•	•	•
16. Selected conditions treatment/stabilization	•	•	•	•		•	•	•
17. Refugee groups morbidity profiling								

ADDRESSING INTEGRATION: PRE-DEPARTURE ORIENTATION AND POST-ARRIVAL								
18. Needs assessments / social in-take						•	•	
19. Cultural profiles of refugee populations				•				
20. Curriculum development	•			•	•	•		
21. Pre-Departure Orientation (PDO) courses	•			•	•	•		•
22. Language and/or literacy training						•		
23. Pre-embarkation briefing	•		•	•	•	•	•	•
24. Post-arrival integration				•	•	•		

MOVEMENT MANAGEMENT AND OPERATIONS								
25. In-country transportation	•	•	•	•	•	•	•	•
26. Refugee transit centres accommodation	•	•	•	•	•	•	•	•
27. Pre-embarkation flight orientation	•	•	•	•	•	•	•	•
28. International airline bookings	•	•	•	•	•	•	•	•
29. Passenger assistance at departure, transit and arrival airports	•	•	•	•	•	•	•	•
30. Operational and/or medical escorts	•	•	•	•		•	•	•
31. Reporting	•	•	•	•	•	•	•	•

<sup>25)</sup> ibid.

	Sweden	Switzerland	United Kingdom	United States of America
	3'401	672	6'208	33'359

1.				
2.			•	
3.			•	•
4.			•	•
5.				
6.	•	•	•	•
7.				

8.			•	•
9.			•	•
10.			•	•
11.			•	•
12.			•	•
13.		•	•	•
14.	•	•	•	•
15.	•	•	•	•
16.	•	•		•
17.				

18.				
19.				
20.		•		•
21.		•		•
22.				
23.		•		•
24.		•		

25.	•	•	•	•
26.	•	•	•	•
27.	•	•	•	•
28.	•	•	•	•
29.	•	•	•	•
30.	•	•	•	•
31.	•	•	•	•

### CASE MANAGEMENT

- Refugee interviews:** Collection of biographical data and case histories in the refugees' native language, and translated in English.
- Completion of government forms:** Data entry of resettlement country immigration forms, including application, Health Assessment and biometric forms.
- Translation and interpretation:** Contracting, training and supervision of interpreters for interviews and translation of documents.
- Selection mission preparation, logistical support and scheduling:** Accommodations, workspace, on-site clerical support, ground transportation for selection mission officials and refugees, arrangement of interview schedules.
- Case file management:** Creation, distribution and control of physical case files in secure storage facilities equipped with electronic inventory systems.
- Database management, reporting and statistics:** Maintenance of resettlement country database systems and/or IOM proprietary databases used to generate real-time statistics and reports.
- Information campaigns:** In coordination with UNHCR and the countries of resettlement, implement information campaigns to promote resettlement or increase awareness of current program requirements or developments.

### HEALTH ASSESSMENTS AND RELATED ASSISTANCE

- Physical Exam (PE):** Detailed physical examination, with pre- and post-test counseling, aspects of mental health evaluation and review of medical and immunization history. Signed informed consent is a pre-condition for the service.
- Chest x-ray and interpretation:** Systematic radiological screening for those of appropriate age (e.g. above 11 or 15 years); Certified radiologist interpretation of the chest x-ray images.
- Diagnostic tests for TB (Sputum smear and culture testing):** Microbiological investigations of sputum samples, including drug susceptibility testing (DST), performed in case of abnormal chest x-rays or clinical determination.
- Other laboratory examinations:** Based upon resettlement country requirements, e.g. syphilis, HIV, hepatitis B and C, DNA serology, urinalysis and stool parasitology.
- Immunizations:** Immunization schedules generally include BCG, MMR, hepatitis B, Hib, DTaP, meningitis, polio and Td. Immunization programmes are administered overseas and may differ from those offered in the country of resettlement.
- Pre-Departure Medical Screening (PDMS):** Additional diagnostics, treatment and immunizations conducted in close proximity to departure to detect recent conditions that may have appeared since the initial exam or the deterioration of certain conditions already detected.
- Pre-Embarkation Check (PEC):** A rapid fit-to-travel assessment of refugees 24 – 48 hours before departure, in order to ensure they are free of acute or new conditions that could compromise the safety of refugees and other passengers.
- Medical escort/medical travel arrangement:** To respond to potential deterioration during travel, patients are escorted to destination by doctors/nurses appointed by IOM. Special arrangements may include stretchers, ambulances, in-flight interventions, etc.
- Treatment/referrals for select conditions and/or stabilization:** Conditions include active, infectious tuberculosis, syphilis and other STDs, malaria, intestinal parasites and conditions requiring stabilization before travel.
- Morbidity profiling of refugee groups (other health data processing):** Presentation of health profiles of refugee groups assisted by IOM. Data generated using IOM's MiMOSA database analyzed using the International Classification of Disease (ICD) 10 coding.

### ADDRESSING INTEGRATION: PRE-DEPARTURE AND POST-ARRIVAL

- Needs assessments:** Designed to enhance integration potential, these surveys are conducted through refugee family interviews in collaboration with service providers in the country of resettlement prior to arrival.
- Cultural profiles:** Comprehensive, detailed descriptions of refugee groups designed to enhance integration. Contents include: daily lives, livelihoods, education, language, culture, religion, integration strengths/challenges.
- Curriculum development:** Tailored to refugees' background. Content determined by country of resettlement to include priority messages.
- Pre-Departure Orientation (PDO) courses:** 3–5 day courses taught by cultural trainers in refugees' native language for adults, youth and children.
- Language and/or literacy training:** Most recently, 30-day ESL courses conducted for Bhutanese refugees with little or no English.
- Pre-embarkation sessions:** Designed for first-time travelers. Half-day briefing focused on departure, in-flight-safety, transit and post-arrival formalities. Hygiene, packing and travelling with infants also included.
- Post-arrival integration:** Building capacity of local authorities, delivering information sessions to service providers working with refugee populations, conducting orientation for newcomers and developing evaluation and feedback mechanisms to assess the impact of pre-departure orientation programmed and improve their effectiveness.

### MOVEMENT MANAGEMENT AND OPERATIONS

- In-country transportation:** Ground and air charter transportation from refugee-hosting sites to international airports.
- Refugee transit centres:** Required at large refugee processing locations (e.g., Nepal, Kenya, Ethiopia, Thailand) transit centres provide accommodation and serve as a final point for health checks and orientation prior to departure.
- Pre-embarkation flight orientation:** Supplemental to the pre-embarkation briefing, this orientation provides itinerary-specific information.
- International travel:** IOM maintains an extensive network of agreements with airlines providing preferential fares to refugees travelling under the auspices of IOM.
- Passenger assistance at departure, transit and arrival:** IOM assists refugees to complete immigration, customs and baggage formalities and ensures that refugees board the assigned flights.
- Operational and/or medical escorts:** As required, IOM provides appropriate escorts to accompany vulnerable individuals or groups who require special assistance en route.
- Reporting:** Using its proprietary MiMOSA database and other reporting protocols, IOM keeps internal and external parties apprised of each movement in real time. The database generates a variety of reports and statistics.

ONE DAY IN RESETTLEMENT: MAP OF AIR MOVEMENTS ON 16 MAY 2017



This map is for information purposes only. The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the International Organization for Migration.

- Point of Origin
- Point of Destination
- Movements

IOM movements on 16 May 2017 during which 1,214 persons, from more than 23 nationalities travelled under IOM auspices from 34 countries of departure to destinations around the world.



FACTS AND FIGURES



Movements by air  
**96**



Number of passengers transported  
**1,214**



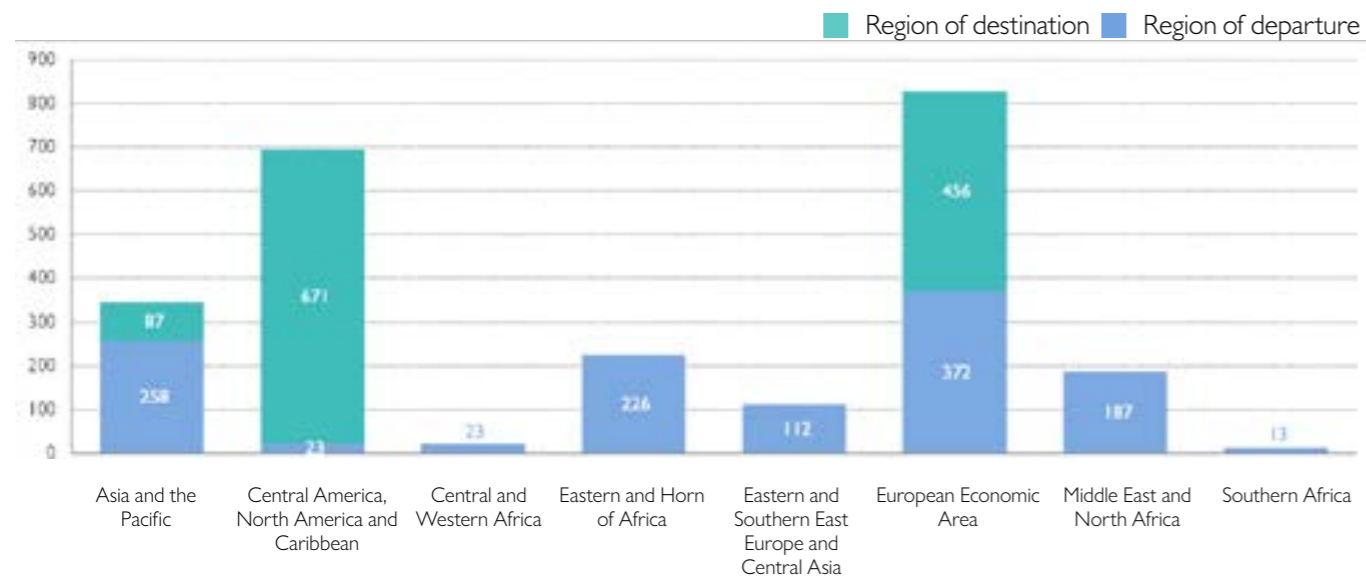
Number of departure countries  
**34**

Number of flight sectors  
**193**

Number of passenger nationalities  
**23**

Number of resettlement countries  
**14**

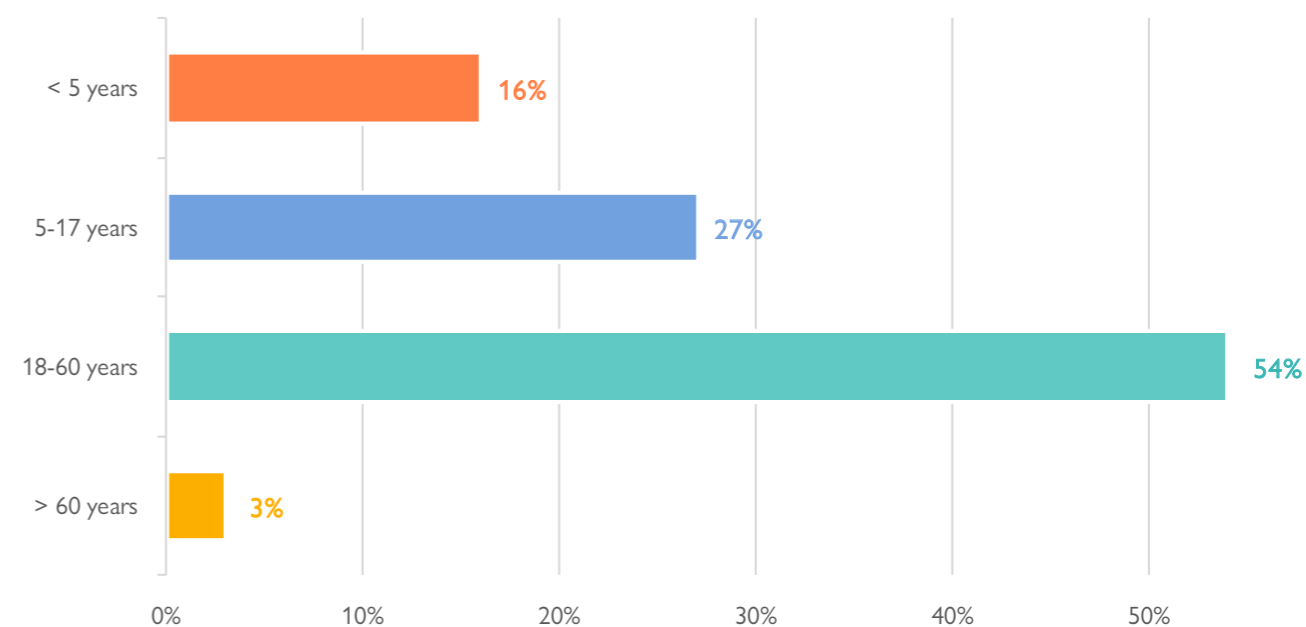
NUMBER OF PERSONS BY REGION



BENEFICIARIES BY GENDER



BENEFICIARIES BY AGE



## DEDICATION PAGE TO AIRLINE PARTNERS

The following companies have been key partners of IOM for many years and in this and other respects their assistance has contributed to helping hundreds of thousands of refugees begin life anew.

Adria Airways	Cathay Pacific	KLM Royal Dutch Airline
Aegean Airlines	China Airlines	Lufthansa
Air Algerie	Customer Ground Services	Next Jet
Air Canada	Delta Airlines	Norwegian Air
Air Charter Service – France	Egypt Air	Qantas
Air Contact	Emirates	Qatar Airways
Air France	Ethiopian Airlines	Royal Air Maroc
Air Libya	Etihad	Royal Jordanian
Alitalia	Everest Travel / Deutsche SkyLink Aviation and Travel GmbH	Scandinavian Airlines
Amadeus	Fly Dubai	South African Airways
American Airlines	Hunt and Palmer PLC	Swiss International Airlines
Austrian Airlines	Iberia	TAP Portugal
Avianca	Icelandair	Turkish Airlines
British Airways	Japan Airlines	Ukraine International Airlines
Brussels Airlines	Jet Airways	United Airlines
Buraq Air	Kenya Airways	WestJet Airlines

