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▶ **Reintegration of irregular migrants
with criminal background in their
country of origin**

A Belgian Immigration Office Perspective

▶ Job Creation

- **Pilot project in Antwerp for Morocco** → ReMa: reintegration of irregular migrants (incl. former criminal detainees or persons with public order issues) in Belgium by giving them opportunity to find a job in Morocco
 - Temporary shelter in a halfway house if no place to stay
 - Job counselling in Morocco on the basis of existing skills / language knowledge
 - Aid in kind (not financial)
 - → if this works : widening of scope (other cities in BE, more funding, other third countries ...)

▶ Special Needs : Focus

Aim

Offer support to vulnerable migrants before, during and after return to country of origin. This support is a transitional measure, in order to give the migrant the possibility to organize his long-term reintegration.

Who ?

Belgium: Immigration Office with local partners

Duration ?

Maximum 1 year, shorter if possible

► Vulnerable migrants

Who ? (this could be former criminal detainees but also all kind of other irregular migrants)

- Unaccompanied minors (+ aged-out minors)
- Medical needs (physical or psychological)
- Pregnant women
- Seniors (> 65 years)
- Migrants who need a specific follow-up for other reasons
- Migrants who endanger the security and safety in the detention center or the prison, because of their medical problems

▶ Which support ?

3 categories:

1. Before return → follow-up in the detention center / prison (only pre-departure procedure)
2. During return → follow-up during flight
3. After return → reintegration measures in country of origin

▶ follow-up in detention center / prison (pre-departure)

- Admittance in psychiatric facility
- Availability of medication in third country → “MEDCOI”-database
- Purchase of medication before return
- Courses for staff members
- Coordinating psychologists: liaisons between detention centers, prisons, ... and central immigration office

▶ Follow-up during flight

Accompanied by :

- medical specialist or nurse
- Psychologist
- Person of trust
- Immigration liaison officer

▶ Reintegration measures in country of origin

- Reintegration support for maximum 1 year with a maximum budget
- Medical follow-up (psychiatry, medication, doctor's appointment, ...)
- Administrative support
- Practical support (temporary shelter, food, ...)
- NO economical support, NO cash money



depending on the possibilities in the country of origin

▶ Example 1: DRC – psychiatric problems

30-year old man with combination of psychiatric problems (depression, autism, mental issues, schizo-affective problems), family not traceable, cannot take care of himself

1. Identification → DRC
2. Medication → available in DRC ?
3. Psychiatric follow-up → contract with psychiatric institution near Kinshasa
4. Medical follow-up during flight
5. Accompanied to institution → medical follow-up
6. Family traced → sister takes care of him

▶ Example 2: Tunisia – kidney dialysis

28-year old man, kidney transplant in 2007, kidney failure, needs 3 times/week kidney dialysis, no social insurance, not voluntary to return

1. Identification → Tunisia
2. Contacting doctors/hospitals in Tunis
3. social security (CNAM)
4. Fixing price for 10 times dialysis (3 offers) → prise en charge with guarantee dialysis after return
5. Arrest → medical follow-up in detention center
6. Medical follow-up during flight (doctor)
7. Dialysis took place

► statistics

	2015	2016 (31/05)
Total number of requests	70	46
Admittance in psychiatry before return	3	4
Purchase of medication	31	4
Follow-up during return	10	2
Reintegration after return	46	6

▶ **Conclusions**

- **Humane return of vulnerable migrants is a basic obligation of every country**
- **Search for ad hoc solutions: time-consuming, costs but long-term perspective**
- **project does not replace the system of residence permits on the basis of medical reasons**
- **Project wants to keep voluntary return still more attractive**

► Questions ?

