



IOM NEWS

MANAGING MIGRATION FOR THE BENEFIT OF ALL



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The Football for Peace Programme is bringing together communities affected by the ongoing violence in Colombia.

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(Photo: Mauricio Moreno)

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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.

IOM News is available
online on the IOM website:

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© IOM 2004 (Photo: Mauricio Moreno)

Colombian child in an IOM-sponsored day-care centre

For more information on IOM's programmes in Colombia,
please turn to pages 10 and 11.

IOM Builds Shelters for Bam Earthquake Victims

IOM is appealing for \$1.85 million to complete a six-month project with the Iranian Red Crescent Society (IRCS) to build 3,000 semi-permanent shelters for victims of the December 2003 Bam earthquake in south-east Iran.

Construction of the shelters, which will house some 15,000 homeless people, began in February using IOM funds. Three hundred and fifty units are expected to be completed by the end of March.

The Bam earthquake, which struck on December 26th, killed an estimated 43,000 people. As of mid-February, 15,000 others were still undergoing medical treatment in

neighbouring Kerman and other cities throughout Iran. Some 80 per cent to 90 per cent of buildings, including nearly 50,000 homes, in and around the 2,000-year-old city were destroyed by the powerful quake, which measured 6.6 on the Richter scale.



Nearly 90% of buildings were destroyed.

© IOM 2004 (Photo: Sarat Das)



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Semi-permanent shelters built following the Gujarat earthquake.

The UN estimates that the disaster, which orphaned about 2,000 children, also left between 76,000 and 90,000 people displaced and at risk from lack of shelter and basic infrastructure including water, sanitation, power, hospitals and schools.

The Iranian authorities and the international community responded quickly and efficiently to the emergency with teams from the IRCS, the UN and NGOs arriving within hours and days to rescue survivors and deliver emergency shelter, food and non-food items.

When IOM Director General Brunson McKinley and an IOM assessment team arrived in Bam in mid-January, they quickly realized that the IRCS' massive coordination of volunteers and other local and foreign aid workers had nearly completed the immediate emergency response to the disaster.

“Almost all the affected families had already been provided with tents either in camps or close to their former homes,” says Sarat Das, a member of the assessment mission and head of IOM Ahmedabad – the office coordinating IOM’s response to the 2001 earthquake in the Indian state of Gujarat.

“But the whole city was reduced to rubble and we realized that it would take between one and two years to do much permanent reconstruction. Given the extreme summer heat and wind that will come in a few weeks, tents were just a stop-gap solution. So we decided to propose quick-to-build semi-permanent shelters similar to the ones that we developed in Gujarat,” he says.

In Gujarat IOM, working with local NGOs, used local materials and low-cost earthquake resistant technology to build 2,400 semi-permanent shelters in 2001 for displaced migrant workers in 45 villages.

IOM’s Iranian counterpart the Immigration Department BAFIA welcomed the plan and Das, together with P.R.Mehta, President of the Indian Council of Architects, IOM’s Gujarat design partner, presented design plans for the shelters in Teheran in the second week of February.

Under the project, IOM will produce shelter designs, prepare an inventory of locally available materials, resources and technology, and

manage the delivery and construction of shelters for vulnerable families identified by the IRCS.

The IRCS and local partner NGOs will be directly responsible for the building work under IOM’s overall supervision. IOM planners hope that this will provide on-the-job training for between 100 and 200 local craftsmen and technicians, transferring know-how and building Iran’s capacity to cope with future natural disasters.

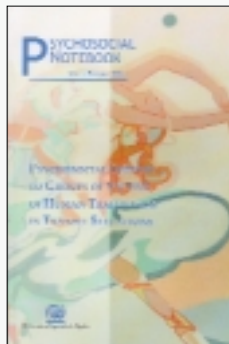
Each shelter will be a single-room unit of 180 sq feet area with an attached kitchen and basic electrical fittings. Water and sanitation facilities provided by partner agencies and NGOs will be located nearby.

Christopher Lom, IOM Geneva

New Titles!

Psychosocial Support to Groups of Victims of Human Trafficking in Transit Situations

This publication highlights the importance of considering the psychosocial approach not merely as a confined professional domain, but as a possible – and perhaps indispensable – component of a variety of programmes and interventions for mobile populations.



Psychosocial Notebook Vol. 4
113 pages – US\$25 – ISSN 1680-1970

The list of IOM publications can be found on the IOM website:

<http://www.iom.int>

Migration Trends in Selected EU Applicant Countries

Accession to the EU is expected to bring about changes in migratory routes and destinations, as well as societal changes in the future EU member states. How do new migration trends affect the local societies of these countries? How is the integration of migrants possible in societies marked mostly by emigration throughout the 1990s? Which approaches do governments envisage in the different countries? Are they becoming countries of immigration – what can be expected after May 2004?



These six country reports contain comprehensive information on the situation of migrants, both in and out of the countries, and the countries’ migration management approaches, illustrating the impact of migration trends on the local society:

Vol. I – Bulgaria: The Social Impact of Seasonal Migration (96 pages – ISBN 92-9068-181-0)

Vol. II – The Czech Republic: The Times They Are A-Changin’ (136 pages – ISBN 92-9068-182-9)

Vol. III – Poland: Dilemmas of a Sending and Receiving Country (94 pages – ISBN 92-9068-183-7)

Vol. IV – Romania: More ‘Out’ than ‘In’ at the Crossroads between Europe and the Balkans (109 pages – ISBN 92-9068-184-5)

Vol. V – Slovakia: An Acceleration of Challenges for Society (126 pages – ISBN 92-9068-185-3)

Vol. VI – Slovenia: The Perspective of a Country on the ‘Schengen Periphery’ (96 pages – ISBN 92-9068-186-1)

These reports are available from IOM Vienna, E-mail: mrfvienna@iom.int

IOM publications are available from:

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IOM publications are also available from the sales offices of the United Nations
E-mail: unpubli@unog.ch (Geneva) or publications@un.org (New York)

Helping Vulnerable Families Survive the Winter in Afghanistan

In the winter of 2001/2002 an estimated one million Afghans were internally displaced due to fighting and four years of consecutive drought. But in 2002 and 2003, increased political stability and rainfall prompted many Internally Displaced Persons (IDPs) to leave the camps where they had taken refuge and volunteer to return to their homes.

Since December 2001, IOM has been assisting IDPs to return to their places of origin. IOM provides the returning families with medical screening, transportation, overnight accommodations in transit centres, reintegration packages and project options. But lack of resources and a poor absorption capacity in the communities of origin, is the reason why some recently returned IDP families remain vulnerable. This vulnerable population is benefiting from IOM's winterization activities currently underway in northern and western Afghanistan.

Also receiving IOM's winter assistance are vulnerable individuals and families from the local resident population such as the disabled, widows, orphans, the elderly and families larger than 10 persons.

In the northern provinces of Baghlan, Faryab, Kunduz, Samangan, and Balkh, IOM is distributing winterized tents, blankets, tarpaulins and winterization kits with boots for men, women and children, men's winter coats, jerrycans, soap and plastic



Distribution of IOM winter assistance in Samangan Province

sheeting to some 8,000 families. Families affected by whooping cough in Badakhshan province and Afghan returnees who survived the recent earthquake in Iran are also receiving IOM winter assistance. In Ghor and Herat provinces in western Afghanistan, IOM is distributing tents, blankets, tarpaulins, lanterns and hand soap to some 2,500 families.

In order to assess the needs of the population, IOM and staff of the Ministry for Rural Rehabilitation and Development or the Ministry for Refugees and Repatriation have carried out joint assessment missions. Target areas were specially selected

based on IOM's IDP database, which allowed the assessment teams to target areas with large numbers of returnees.

These surveys not only assessed the immediate winter vulnerability and winter needs of the returned IDPs, but also will become a valuable tool for infrastructure reintegration projects planned for later this year.

Funding for IOM's winterization programme was provided by the German Foreign Ministry and the US Government's Office for Disaster Assistance (OFDA).

Julia Hartlieb
IOM Kabul

Marwa's Story

Sometimes it is the small things which mean the most, a look, a gesture, the things unsaid. God is in the detail, they say.

Marwa stood on a mine and lost a leg and her childhood. Even before the hideous wound had healed, before she had got the strength to hobble on crutches, she had learned to smile again. "Marwa is Marwa," said her mother Faliha. "She smiles...then she fights. Soon it will be as if she never needed two legs."

Marwa lives on the outskirts of Baghdad with her family. One night, as they were sitting down to eat, a single bomb passed through the roof of their building and on into the basement where it exploded.

Somehow they survived, and in the darkness, the smoke and the debris, 12-year-old Marwa led her family to safety. As they ran outside into the garden, Marwa stood on a mine – they never found her leg, not even a single piece.

At roughly the same time, in May 2003, IOM launched MEHRPI – a Medical Evacuation and Health Rehabilitation Programme that evacuates Iraqis requiring specialized treatment not currently available within Iraq.

The programme also contributes to the rehabilitation of Iraq's devastated national health infrastructure. It recently completed repairs to Basra General Hospital's burns ward and facilitated a retraining programme for its staff in Kuwait.

Marwa wants to be a footballer. Saif Adeen, Miriam, Mustafa, Mohammad, Aisha, Hassan – some of the 147



Marwa is fitted for an artificial leg at the Alpha Klinik in Munich.

mostly children whom MEHRPI has helped to get treatment abroad – want to be firefighters, farmers, business people and doctors.

Unlike most kids, these have sustained terrible injuries from the lethal flotsam of war – unexploded ordinance, car bombs, mortars and mines. But sometimes it's just the tragedies of ordinary life, like disease, congenital disorders and illness that threaten these young lives.

Working together with the Iraqi Ministry of Health, and with the help of the Coalition Provisional Authority and the World Health Organization, IOM coordinates referrals from doctors in Iraq, matching patient's needs with foreign donors – institutions and individuals willing to offer free treatment.

Marwa's journey began one rainy day in Baghdad, when 24 other children from all over Iraq – Sunnis, Shia,

and Christians, many of them never having travelled before – embarked on a parallel journey that would change their lives.

I met Marwa and her mother in a sandstorm at the cold and desolate Iraq-Jordan border. As the wind whipped across the road, an ambulance drew up, and out stepped a lady in traditional black niqaab.

Next to her was a girl with a devastating smile and a pretty blue dress. Into our car they jumped and off went Marwa like any other wanna-be-teenager; on went the aircon, up and down went the windows, click click went the ashtrays, then she was over the backseat to retrieve her walkman.

I caught myself looking for the missing leg amongst the blur of activity. She did too and gave the tiniest frown. “Marwa is Marwa, it said – stop worrying about a missing leg.” God is in the detail.

Soon the other patients arrived – buses, ambulances and taxis full of boisterous kids and frazzled carers. The sum of all childhood illness and catastrophe was in those vehicles... though you wouldn't think it.

As IOM staff passed out sweets and teddies, the sick, diseased and disfigured became just what they were, unselfconscious children, naughty, loud and funny. It was as if, like Marwa, they dared us adults, doctors and specialists to be caught with anguished looks, to shake our heads at the injustice of it all.

Soon, in a storm of singing and sweet throwing we left the border for the last few hours drive to Amman. Throughout the journey IOM staff and health professionals were on hand to cope with the constant, complex and seemingly endless detail of logistics.

Real life, though, did intervene several times on the trip, as many patients were given emergency treatment or check-ups on the way. Tiny Israh, with whom I shared the last few hours of the journey, had fluid in the lungs. This meant that every so often she would literally begin to drown in front of you.



Two-year-old Israh in an ambulance, on the way to Greece to receive laser therapy.

IOM's Dr Nidal would then begin the heartrending process of inserting a tube into the child's neck and pumping the liquid out. She didn't cry but I did – when she goes and gives me a tiny thumbs up halfway through a gagging series of chokes and coughs.

Arrival, a hurried supper and another late night in a hotel. Then the kids depart for Greece and Germany by air – a hysterically exciting first-time-in-a-plane experience, that has 250 other passengers entertained for four hours.

At Athens airport, medical staff, well-wishers and eager media crowded around the children, reflecting an almost overwhelming humanitarian impulse. Their treatment in Greece is sponsored by the Greek government and facilitated by IOM partners Médecins du Monde (MDM) Greece.

Marwa's destination was Germany. At the Alpha Klinik in Munich, she was treated like a princess. Counselling by medical staff about her condition she faced the terrors of the past and talked through the impossible dream that she would walk again – play football again – live again.

“Football?” was the unspoken question on her lips, as she fidgeted her way through glossy brochures of

up-to-date prosthetics, the different shades of skin, the hinges, the stump attachments, the creams and painkillers – the reality of artificial legs. And then she asked, her interpreter translated, and the surgeon said, “I think, yes.”

Marwa smiled a Mona Lisa smile and briefly closed her eyes. A journey was ending and another beginning.

Adrian Sutton
IOM Amman

Marwa's evacuation to Germany was made possible by generous and committed sponsors – Dr Toft and the Alpha Klinik in Munich provided free treatment; Bruce Reith paid for Marwa and Faliha's air tickets; and Dr Max Schlereth paid for their accommodation.

As of early February 2004, MEHRPI, which is funded by donations from Kuwait and ECHO, had facilitated the medical evacuation of 147 patients to Kuwait, the UAE, Greece, Italy, Poland, Hungary, USA, Bahrain, Germany, Jordan, Turkey, Saudi Arabia, the Czech Republic and Austria. 99 have already returned to Iraq after successful treatment. A further 389 patients in need of treatment abroad are still waiting for sponsors.

From Somalia to Syracuse

with Love

Somalia – the word alone is enough to invoke a moment of silence between Dadiri and Haljma Mehosa.

The Mehosa's are Somali Bantus, a marginalized group within Somalia since they were brought into forced labour in the eighteenth century from modern day Tanzania, Malawi and Mozambique. Physical and cultural differences perpetuated the divide in the Somali society even to the present day. Militias descended upon the Bantu people during the 1991 civil war, leaving little choice but to flee their homes.

The Mehosa family travelled from Somali to Dadaab refugee camp in Kenya after the start of the Somali civil war. Dadiri says, "There was no wood, not enough food, and the children were always sick with malaria." During the nine years the Mehosa family lived at Dadaab, they would walk some 8 kilometres a day for firewood, eat one meal per day and live in fear of attacks from disease and bandits who would steal, kill and rape. Those fears were made real when Dadiri's first wife died in childbirth and the second wife was shot and killed.

You might imagine a man who has lost his country, two wives, friends and family to more than a decade of violence to be bitter and devoid of hope. But Dadiri Mehosa sits with a smile from ear to ear in his new Syracuse,



Recently resettled Somali Bantu refugee in a day-care centre

© IOM 2004 (Photo: Erin Foster)

New York apartment. He wants to share many stories and his happiness of being resettled in the United States. The fact that he can communicate these stories with just five months of language training is a tribute to his dedication towards achieving a better life for his family and becoming part of American society.

A father of 11 children, Dadiri glows with pride and love as he introduces each child. The children have quickly taken to American dress and have a certain fondness for stickers and television, and they laugh hysterically when they see their picture on the digital camera, still unaccustomed to seeing pictures of themselves.

Haljma is holding the new baby and American citizen Haljda. Haljda is cooing and smiling and enjoying the

attention from her mother. Pregnant Haljma travelled more than three days from Kakuma to Syracuse in a situation that would have been less than comfortable for most women. She says she "was not brave" and was a bit anxious about the long voyage, but she exudes an amazing calm that only a woman with 11 children must know.

When time came for delivery the baby was turned the wrong way and the doctors needed to perform a Caesarean operation to save the baby and Haljma. This is enough to frighten most women, but surrounded by machines and voices difficult to understand, she simply remembers, "It was no problem."

Dadiri says, "The people help us here." He is referring to the Church World Service and Sponsors who work

with the United States resettlement programme and directly with refugees once they have arrived in the United States. The Church World Service together with other voluntary agencies will help to resettle 305 Somali Bantu in Syracuse over the next two years.

The Mehosa's stepped off the plane with their IOM bags and were taken to an apartment rented for them, the first month sponsored, and furnished with donated goods from the community. A family of now 13, the Mehosa's have four sponsoring churches.

The children were immediately enrolled in school. They are also involved in after-school programmes, mentoring programmes, and have started to make new friends. Dadiri knew the importance of sending his oldest son to school in Kenya to learn English while he alone worked to support the family. Now his 21-year-old son works and he learns English at school. Dadiri is also proud to show a folder of information about his own new job with an electric company.

He says he takes the bus to work at near midnight without having to fear walking down the street, "In Somalia or Kenya, I would have been robbed or ..."

When asked what are the biggest changes in his family's life since arriving in America he replies, "This is a big question." In Africa they did not wear shoes or many shirts and jackets and



Dadiri and Haljma with newborn Haljda

© IOM 2004 (Photo: Erin Foster)

gloves, there is no snow. Having electricity, running water, a refrigerator, and a stove has not taken long to get used to and is making life easier for the family. Dadiri was surprised to learn that Americans do not eat from one plate as is customary in their tradition, and Americans also have plates and cups that can be thrown away after being used only once.

As to everyday life, all of his children are in school or working and they have a good house and food to eat. He says, "Life is good in America."

Having just achieved his lifelong dream of the chance for a better life, it

is hard for him to imagine higher hopes, except to buy a large home for his family. His daughter Shamsa, in the Fifth Grade, is already thinking about going to University.

The Mehosa family has travelled from Somalia to Syracuse with love. Love for life, each other and the future.

Earlier in the day I visited Haljma and other members of the Somali Bantu women's group who meet every Thursday morning to learn and socialize. Led by Martha Nicholas and sponsors to help to transport the women and provide day care for mothers with young children the women discuss stress, health, and everyday life. A teacher along with a Somali interpreter uses picture and word association, and interactive learning to engage the women. I listened as the women staged a telephone conversation stating their name, phone number, and the problem they had such as a cut finger or stomach ache. There are smiles all around the table as each woman expresses their understanding. The women's group complements English classes either group or one-to-one, in which each woman participates. The women's group is supported by a grant from the local community. Syracuse is a city where the community has become actively involved in fostering positive paths for newly resettled refugees.

Erin Foster, IOM Washington

Transportation Assistance for the Somali Bantu Refugees

Between May 2003 and February 2004, IOM facilitated the movement of almost 2,000 Somali Bantu refugees to the United States.

In March 2004, IOM will organize three charter flights for another group of 750 Somali Bantu refugees.

IOM anticipates that 800 to 1,000 Somali Bantu refugees will be resettled to the United States every month between April and September 2004.

Pre-departure Assistance provided by IOM

- Medical screening at Kakuma Refugee Camp, Kenya.
- Five-day cultural orientation classes held at Kakuma.
- Pre-departure medical check at Kakuma – the day before the flight to Nairobi.
- Charter flight from Kakuma to Nairobi.
- Accommodations in Nairobi for 2 to 4 days prior to US departure.
- Pre-departure medical check in Nairobi.
- Clothing distribution for their voyage to the United States.
- Pre-departure flight orientation, conducted by IOM Cultural Orientation staff and flight escorts.



Post Emergency Assistance to Displaced Groups and Receptor Communities

This programme, funded by USAID, provides assistance to IDPs and residents of the host communities through micro credit schemes, housing, health care, and education. In the past three years IOM has provided direct assistance to more than 928,902 persons.

Internally displaced woman in Barrancabermeja receives IOM support to improve her home.

© IOM 2004 (Photo: Mauricio Moreno)



Strengthening Peace Programme in Colombia

This programme, funded by USAID, provides assistance to vulnerable groups, such as ethnic minorities and victims of landmines, and contributes to social cohesion through a series of projects that promote peace and stability. More than 400,000 persons have received direct assistance.

Children are encouraged to take photos as a way to relate to classmates and learn to live in peace.

© IOM 2004 (Photo: Mauricio Moreno)

IOM Activities

IOM has been present in Colombia since 1956. IOM works in partnership with the Government and civil society. IOM has offices in Cauca, del Cauca, Norte de Santander, Santander, Chocó, and Cundinamarca. IOM also has offices in Sucumbíos, Carchi y Esmeraldas.

Since the year 2000, IOM has put in place programmes to assist internally displaced persons. IOM programmes are providing support to internally displaced persons because of the ongoing armed conflict. The same programme is also providing support and reintegration assistance to returnees. In addition to this work, IOM Colombia is providing reintegration assistance to returnees.

IOM is working with UNAIDS, the Colombian Government, and the Global Fund against Tuberculosis, Malaria and HIV/AIDS by assisting some 600,000 internally displaced persons on sexual and reproductive health.

In northern Ecuador, IOM also implements community-based services to Colombian refugees and the host communities.



Prevention, Assistance and Reintegration of Victims of Trafficking

This programme, financed by the United States and the United Kingdom, provides health care, education, legal advice and micro credit to victims of trafficking. A mass information campaign is under way to educate potential victims of the dangers of irregular migration. In the past three years IOM has provided direct assistance to over 1,100 persons and trained 6,127 government officials.

To help the children of women who may be vulnerable to trafficking, IOM provides day care in the capital, Bogota. The 50 children assisted at the centre receive direct assistance and enjoy education and recreational activities.

© IOM 2004 (Photo: Mauricio Moreno)

ies in Colombia

I programmes in Colombia are carried out in cooperation with Bogota and in the provinces of Putumayo, Caquetá, Nariño, Valle uca y Huila. In Ecuador, in the northern border region, IOM has

mmes aimed at providing assistance for vulnerable populations. displaced persons (IDPs) that were forced to leave their homes grammes are assisting local communities hosting the IDPs. IOM to ex-combatant children. And as part of its counter-trafficking ance to victims of trafficking.

ernment and civil society to implement activities funded by the AIDS. The IOM programme will focus on displacement and aced youth with improved health care and increased awareness

unity development programmes that are providing vital basic nities.



Support Programme for Ex-combatant Children

Since March 2001, IOM and the Colombian Family Welfare Institute (ICBF) are helping former child soldiers who have managed to leave behind the armed struggle.

So far, some 11,000 minors have benefited – 1,375 demobilized children living in 22 centres run by the ICBF, 181 indigenous and Afro-Colombian children, and 9,243 children who have participated in recruitment prevention programmes. The programme provides shelter, education, vocational training and community development.

Ex-combatant minors continue their education at a specialized centre.
© IOM 2004 (Photo: Mauricio Moreno)

Technical Cooperation on Migration

IOM is working with the Governments of Colombia and Spain, following a labour migration accord between the two countries, to assist labour migrants from Colombia to travel to Spain. IOM is also working with IOM offices in Bern, London, Madrid, and Rome to assist Colombian migrants in those countries who opt for voluntary return to their country. A recently released study on remittances outlines the impact of the money sent home by Colombians working abroad.

IOM assists Colombians in Panama to return to their country.
© IOM Colombia 2003



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Netherlands, pro- t schemes to vic- erway to inform In the past three victims and has

ovides support for this e food and medical

Help Wanted: Domestic Worker, No Guarantees – A Form of Trafficking in Human Beings

For women, life and what lies ahead becomes a goal at the age of 20. It's also the time to discover their true calling, to fall in love, and choose their destiny. But at 20 life can also take an unexpected turn. Susana was reborn – as she describes it – after surviving an accident that left half of her body paralyzed. The hard work and abuse she endured eventually clipped her wings. Although caught in a situation that for many would be a living hell, this young woman speaks with optimism, hope and vows to continue fighting in order to walk again.

Dignity and courage prevent her from feeling sorry for herself. At her grandmother's modest home, several hours away from a provincial capital, Susana is confined to bed with the only help coming from her grandparents and medical care provided by her 15-year-old sister.

After leaving her home in the country, hoping for a new and more prosperous life in the provincial capital, Susana was surprised to learn that the education and other benefits promised by the woman who hired her as a domestic helper would never materialize.

She suffered six months of abuse inflicted by her employer, an elegant society lady. She withstood the humiliation, confinement, exhaustive

searches and verbal abuse in silence believing that with the money she would earn she would improve her situation and that of her family.

After some time she was forced to borrow money from her employer, as the situation at home became worse after her departure. What she did not envision was that this loan would literally enslave her. She was forced to clean the three-storey house over and over again, without a day off; she had to tend to the garden at night; was limited to one telephone call a week to her father; was confined to the house; and was forbidden contact with anyone but her employer.

Her boss was an influential lady and used this influence against Susana. Shortly after the 19-year-old girl decided to leave her job with more debts than money in her pocket,

exhausted and abused, she was surprised to find out that her employer accused her of stealing.

She spent three months in jail. A court-appointed lawyer took over the case and because of lack of evidence she was freed on bail. She returned to her parents' home. The trauma of prison and the months of abuse were too much for her physical and mental health. Susana felt as if she had lost her senses; she felt confused. As she wandered absentminded and in a daze, she fell and suffered a fracture which left her paralysed.

A short time later Susana was acquitted of all charges and declared innocent.

IOM is providing support to the rehabilitation efforts. Susana was transferred to a specialized institution and the judicial process is being

Domestic Workers in Colombia

- 60 per cent of domestic workers are paid less than the minimum wage.
- Most of them do not have social security benefits such as holidays, end-of-year bonuses, education, housing assistance, and medical care. Without social security they will not be entitled to a pension.
- They do not have a fixed work schedule, some start their day at 6 a.m. and work until midnight.
- Most minors who work as household helpers are subjected to sexual harassment, and physical and psychological abuse.



© IOM Colombia 2004

revisited to determine if at the time she was given proper access to justice, as stipulated by the law.

This story deeply troubled Jenny Hurtado, president of SIMTRASEDOM (Union of Domestic Service Employees). The main goal of the 750-member organization is to uphold workers' rights.

Hurtado contacted IOM when she heard of Susana's case, as she was aware of IOM's involvement and its projects to raise awareness amongst domestic workers as part of its counter trafficking programme.

The domestic service sector remains, in large part, in the informal economy, not only because of the low wages paid, but because many women are forced to work 12- and 18-hour days in clear violation of the law that protects the rights of domestic employees.

Susana is just one of the hundreds of women of peasant, indigenous and black origin who migrate day after day to the cities in search of work and

a better life for their families. And many times when they find jobs as domestic workers, their human rights are violated and they become victims of trafficking.

As part of the IOM Programme for the Prevention, Assistance and Reintegration of Victims of Trafficking, funded by the governments of the United States and Holland, IOM has provided direct assistance to more than 1,000 victims of trafficking and has trained 6,127 public officials.

As part of the training component, IOM has held a series of workshops for the domestic service sector.

A workshop held last November brought together 50 Colombian women who work as domestic helpers and two international lecturers.

Most of the participants learned that their employers are obliged to pay their social security benefits and the wages stipulated by law. Also, that they may not be subjected to physical or verbal abuse, sexual harassment or exploitation, and that

minors should be allowed to enjoy their childhood instead of working. According to studies carried out by international organizations and NGOs, some 567,000 minors 6 to 18 years old work in Colombia, 323,000 of them in the domestic service sector; 87 per cent of them are female.

Hurtado's organization has also held workshops on issues such as self-respect, leadership and human rights aimed at promoting increased respect for the rights of household employees.

Unfortunately Susana did not know her rights when she was employed as a domestic worker. But she says her goals are to triumph over evil and to overcome the abuse she suffered and live a dignified life. "I was born again after that accident," she says through her tears. "I live with the hope that I will walk again. Life's daily struggles make you stronger. That's what my grandmother has taught me."

Liliana Arias, IOM Bogota

Staff and Inmates at Bangkok's SuanPlu Immigrant Detention Centre Learn about HIV/AIDS and TB Prevention

As the most developed country in the Greater Mekong Region, Thailand attracts thousands of undocumented migrant workers every year from neighbouring southern China, Laos, Viet Nam, Cambodia and Myanmar.

Hoping to earn money to send back home, many cross Thailand's borders illegally in search of work with the help of clandestine agents operating in border areas.

If the migrants are apprehended in Thailand by Thai immigration police, they are usually brought to the immigration detention centre at SuanPlu in Bangkok.

Here they are processed and held for periods of a few weeks to a few months, before extradition to the border check points of their countries of origin.

The SuanPlu centre, which has a staff of 100, including 60 immigration police officers, usually houses about 1,200 migrants at any one time.

Infectious diseases like HIV/AIDS and tuberculosis are a serious con-

cern and three years ago the commander of the centre realized that inmates had no idea of how to protect themselves, either in SuanPlu or when they returned to their home communities.

The Thai authorities responded by asking IOM to set up a project that would educate detainees about safe behaviours to minimize the risk of infection, and would also educate staff to ensure safe working practices to protect themselves and their families.

In addition to teaching SuanPlu staff about HIV/AIDS and TB, the project was also to train staff in the main languages of the detainees, to help build relationships and make it easier to get the message across safely and efficiently.

At the same time, the centre streamlined its processing procedures to make them simpler and faster.

The new regime meant that detainees started to attend day-long training sessions which introduced

them to HIV /AIDS and TB and told them – for many the first time – about ways to prevent transmission.

At the same sessions, they were also told about legal ways to work in Thailand, under agreements reached between Thailand and some neighbouring nations.

Over the past three years, training sessions have been conducted twice a week, and 2,717 detainees have participated.

Every participant receives an HIV/TB information brochure in their own language, as well as personal hygiene items including soap, shampoo, toothpaste and toothbrush, underwear and condoms.

A group of detainees from countries in Africa also live at the centre. They need air tickets to get home and sometimes remain in SuanPlu for two to three years. The project arranged special sessions for this group, including yoga and exercises that can be performed in a very limited space.



© IOM 2004

An HIV/AIDS education class at the SuanPlu immigrant detention centre

All detainees attending the training sessions are also able to take in introductory vocational training courses, including traditional Thai foot massage and simple motorcycle repair, to give them some skills to take home with them.

Health has become a priority at the centre and all the detainees are given information about the transmission of tuberculosis. All detainees with TB symptoms are subjected to chest X-rays and laboratory testing. If the active disease is confirmed, they are given the World Health Organization (WHO) standard treatment for the required period of six months.

Some improvements in the infrastructure at the centre have been made to reduce possible TB transmission. Inlet fans and exhaust fans have been provided to improve ventilation in the holding rooms. Immigration police officers now ensure that separate rooms are provided for detainees with active infection.

During the project, 450 detainees have been screened for tuberculosis, and 24 were found to have active infection. They now stay in a separate

room, where they receive the required medication and monitoring.

During the training sessions, after ice-breaking activities, the detainees are asked to draw a "Tree of Life" to use as a metaphor for their lives. The roots and trunk represent their childhood and life until the present, the flowers and fruit represent their hopes for the future, the fruit representing goals already achieved.

The detainees often represent the money already sent to their homes as goals already achieved and the plans for establishing homes in their country of origin as flowers, or dreams yet to be realized.

Various media have been prepared for the training sessions, including videos on HIV/AIDS in the languages of the detainees, prepared by the health departments of their respective countries. A video of a mime presentation by Bangkok's Rainbow Sky theatre group is also shown. It demonstrates the action of the HIV virus attacking the T-cells and leaving the body open to opportunistic infections.

Role playing has also been incorporated into the training sessions. All

attendees are paired off and play the role of male and female. Their task is to negotiate safe sex behaviours with their role-play partners. The roles are then reversed.

The transmission of tuberculosis is demonstrated through an aerosol spray with perfume to show the way of infection. A jigsaw puzzle is also used to explain the pathogenesis of TB. It is explained that only 10 per cent of people infected actually get the disease and that treatment results in cure. Participants are shown the symptoms of the disease and how to get treatment in their own countries, as well as in Thailand.

The commander of the centre and the immigration police are enthusiastic about the project, which has now been running for three years and is currently being funded by the Rockefeller Foundation.

A further two-year US\$300,000 project is being prepared which will hand over operation of the project to the Thai authorities, centre staff, the Thai Ministry of Health and the Centers for Disease Control, Thailand.

**Warren Jones and
Siam Karnchanasai IOM Bangkok**

“We were dispossessed twice!”

The Bitter Story of a Candy Factory Owner



© IOM 2004 (Photo: Marie-Agnes Heine)

Zbigniew Sternal today

As part of IOM's German Forced Labour Compensation Programme (GFLCP), more than 32,000 persons have filed claims for property lost during the Nazi regime and with the direct participation of German enterprises. As of February 2004, the independent Property Claims Commission established in Geneva had resolved 12,700 claims; approximately 40 per cent⁷ of all claims received. So far, the claims of 2,700 victims have been approved and 10,000 persons received a negative decision, as they were not able to

show that their property was taken with the essential, direct and harm-causing participation of German enterprises as stipulated by the German Foundation Act. The Property Claims Commission plans to finish processing all claims by the end of the year and expects that all eligible claimants will have received their payments by spring 2005.

IOM's Marie-Agnes Heine spoke with a successful claimant whose candy factory was taken over by a German businessman in 1942.

Snow is falling softly when I arrive in front of the small square house in the industrial suburb of Lissa (Leszno) in south-western Poland. The snow cannot completely hide the fact that the home is in need of urgent repairs and a coat of paint.

I have an appointment with Mr. Zbigniew Sternal, whose candy factory was taken away by the Nazis during the German occupation of Poland. The welcome by Sternal and his family is warm and I am invited to share a coffee. Remembering the past brings a melancholic smile to his face. "The candy factory was my life," says the 84-year-old man as he begins to dig up old memories.

Stella (Star) was the brand name of the candies that almost every Polish child knew and loved in the late 1930s. At the time, any kiosk in Poland sold the popular candies in coloured wrappers. Stella also produced toffees, garlic pills and vitamin C drops.

Sternal and his father Antoni owned the factory, which had been in business since 1925. The most important raw materials for the candy production – sugar, potato syrup and flavours – were readily available in the area. Because of the use of modern technology, Stella and its candy production grew quickly. An article published in a local newspaper in 1937 praised the high quality of the

Familiennamen:	S t e r n a l	
Vorname:	Zbigniew	
geboren am	4. April 1920	
in	Grätz	Kreis Grätz
Fam. Stand:	led.	Beruf: Tableteur
Volkszugehörigkeit:	Pole	
Staatsangehörigkeit:	Schutzangehöriger	
Wohnort:	Lissa/Wartheland	
Neuer-Ring		Nr. 38
Kreis:	Lissa/Wartheland	
Personalbeschreibung:		
Gestalt:	schlank	Augen: blaugrau
Haare:	mittelblond	Kopfform: länglich
Besondere Kennzeichen:	keine	



Zbigniew Sternal
(Unterschrift des Inhabers)

Es wird hiermit bescheinigt, daß Inhaber des Ausweises die durch obiges Lichtbild dargestellte Person ist und die Unterschrift eigenhändig vollzogen hat.

Piff (Wartheland), den 29. 8. 44
Der Bürgermeister
der Amtskommissar
der Ortspolizeibehörde
Im Auftrage
Wissner

Verw. Gebühr: 1.- R.M.

Workbook issued by the German authorities confirmed he was a forced labourer.

Stella products and said that “due to its competitive prices”, Stella had conquered an important position in the market. In 1939 some 50 Stella employees produced 1,000 kilogrammes of candy per day.

But with the German occupation of Poland, the fate of the Sternals and their flourishing factory took a turn for the worse. “In June 1940 the Nazis took over our factory and put an inexperienced German businessman named Kriechel in charge. My father and I were degraded to ordinary labourers, but at the same time we had to show Kriechel how to run the business,” Sternal recalls.

Stella’s name was changed to “S.J. Kriechel Bonbonfabrik Lissa”. “Kriechel was a nice man. He didn’t seem to really like the Nazis and treated his employees well. But he could not spare me from being deported to Germany to perform forced labour,” Sternal says.

In Hamburg, the former factory owner was forced to work as boilerman. Later he was sent to Bremen to work in a pharmaceuticals company.

After the war, the Sternal family managed to regain their property. But they had to start from scratch as Kriechel had stripped the factory of all the machines as the Russians drew near. In 1952, after the Sternals had finally succeeded in bringing the candy factory back to its glory days, the family was expropriated for the second time. “That time it was the communists who came and took over the factory. It was very depressing to see that everything we had built with our own hands was again taken from us.”

Stella was first merged with another candy producer and was finally taken over by a multinational company. The former factory was destroyed and, today, not a trace of the former production site can be found.

Sternal reached the end of his working life as a metalworker.

In October 2003, more than 60 years after the Nazis took over his factory, Sternal received a positive response from the Property Claims Commission in Geneva. Sternal supported his claim with documents showing that he had lost his property with the direct participation of a German enterprise. “I was very lucky, that my entire family was not deported and that I was able to keep these documents,” Sternal says.

He’s aware that he will only receive the compensation after all claims and all requests have been decided. He’s looking forward to the opportunity of improving his family’s quality of life at least a little bit. “This German gesture is very important for me, although it has come a bit late. But it makes me sad to see that many of those who suffered under the Nazis have already died and cannot benefit from this programme.”

Lilya 4-Ever: Can a Movie Make a Difference?

In the fight against human trafficking, can a movie make a difference? Just ask Lena, a 25-year-old university student who, like many young Moldovans, faces dismal economic conditions and often contemplates looking for work abroad.

The movie is *Lilya 4-ever*, a Swedish film about a 16-year-old girl who becomes a victim of human trafficking. It is being shown across Moldova as the centerpiece of IOM's counter-trafficking information campaign.

"I just kept asking myself is that real? Can that be possible?" says Lena, after seeing the movie in Chisinau, Moldova's capital. "Can I, or some of my friends and relatives become Lilya? Yes, the danger is there, especially in the countryside, and all of us have to be aware of that."

The danger is all too real. Like so many men, women and teenagers in Moldova, Lena struggles to pave her future in a country so poor that many citizens lack indoor plumbing and running water, and burn corn husks in the winter for heat.

Traffickers prey on the false hopes of those who see no possibility of getting a job or any prospect for a decent future at home and are seduced by promises of good money abroad.



People line up to buy tickets for future showings.

And despite widespread coverage of trafficking in the Moldovan and the international media, the realities of human trafficking – slavery, sexual assault, beatings – are often overlooked or too easily dismissed.

"The movie really informed me," says Galina, a 14-year-old student from Chisinau. "Even though the problem is widely discussed in the press, there is so much that we don't know. Usually grown-ups try to mask the reality, to hide it from us, and movies like that help us to be more careful when making choices in life."

In Moldova, lack of understanding from public officials to the media and members of the government is not just a problem; it is endemic – and it is estimated that 25 per cent of this tiny

country's population of 4 million works abroad.

Young girls are vulnerable because they seldom see themselves as victims, a misperception that is aided and abetted by the traffickers who recruit them. Many of the public see the victims as prostitutes or outcasts that get what they deserve.

"The movie opened my eyes," said Eugeniu, a 39-year-old economist. "I was blind with clichés and stereotypes about trafficking. Now my opinion has changed drastically."

The campaign began last November with a special showing in Chisinau, and it kicked into high gear in late January with the movie's commercial release at Chisinau's Patria Cinema.



Billboard advertising the film in Chisinau

After the two-week run in the capital, the movie travelled to Belti, Moldova's second largest city, for a week and then on to Ungheni near the Romanian border for an additional seven days. Plans are underway to show the film in Tiraspol, the capital of the disputed territory of Transnistria, as well as in Cahul in the south, in 100 small villages throughout Moldova, and multiple showings on national television.

IOM Moldova has also teamed up with the NGO La Strada to take the movie and a specially developed curriculum into 200 schools and boarding schools (ripe recruiting centres for the traffickers) and train 300 educators.

A big part of the campaign is bringing the message directly to girls and young women who are most at risk so they can make more informed choices about their future. The movie is hitting home because it is the story of a girl like so many in Moldova.

The Russian-speaking Lilya is from a nameless suburb in the former Soviet Union. Her haunts are the concrete-block apartment buildings, abandoned factories and discos that make up the landscape of teenage life in Moldova and so much of the old Soviet bloc.

In the cultural fare and media images presented to teens across

Moldova, Lilya is the antithesis of the stock character; she is the unusual offering in a hungry nation with a rich history for storytelling and literature, a genuine story about being Moldovan.

"The roots of the problem lie in family relations," says Natalia, a mother of two. "If Lilya hadn't been abandoned by her mother, her life would have been different. The movie is a must-see for all parents and teachers. Unfortunately, Moldova is still facing a big problem of abandoned kids and family violence."

But not everyone who sees the movie is sympathetic to Lilya's plight.

Sixteen-year-old Vasiliï says, "I didn't feel sorry for Lilya. It's all her fault. She should have been more careful in selecting her friends, and then been more reasonable when trusting someone she didn't know who offered her paradise abroad."

But dissent is good as it provokes debate where little existed before.

"One of our biggest problems in Moldova is that we didn't have a common discourse about this problem," states Marielle Lindstrom, IOM Chief of Mission. "Lilya is giving us a way, a language, through which to talk about this problem for the first time."

From the start, the IOM campaign put a strong emphasis on reaching the grass roots. All of the campaign

advertisements and materials were designed by two Chisinau-based advertising firms run by men and women under the age of 25.

The campaign employed 60 volunteers in three cities to put up graffiti-style stickers on lamp posts and elsewhere and deliver handouts and the message of the campaign to schools, cafeterias, Internet cafés and wherever kids hang out.

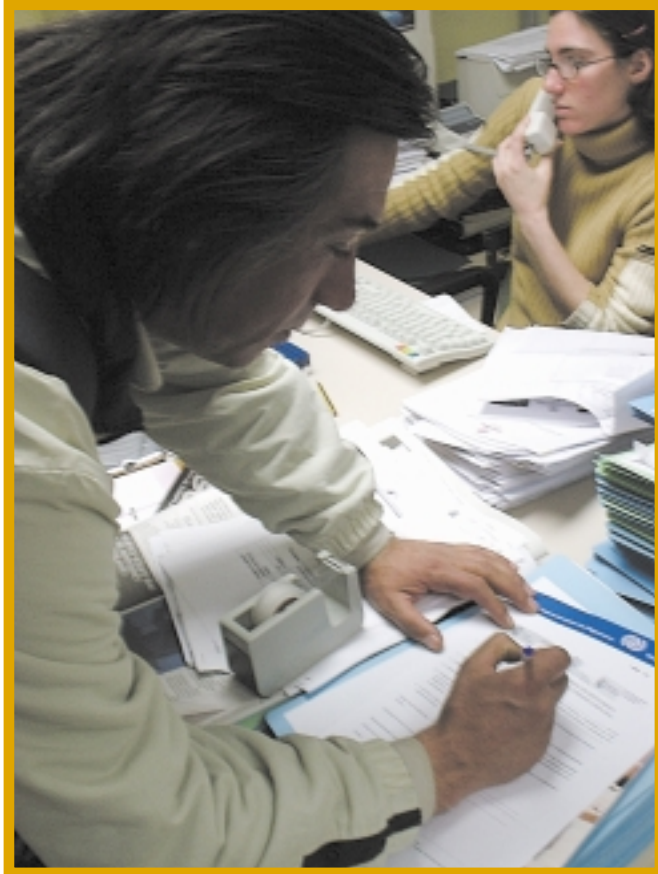
The young volunteers were also trained to conduct follow-up and education after the film, and were available for questions before and after each showing. They also handed out educational material to the audience.

Every performance has been filled to capacity, mostly with teenagers and young men and women, and nearly every school in Chisinau requested seats for the movie. School principals even threatened to call the Ministry of Education if they did not get seats for their students.

"Was there another way out for Lilya?" asks Andrei, a 20-year-old student. "I think yes. There is the police, there are other organizations that could have helped her. There is always hope, you just need to keep struggling."

Allan Freedman and Lilia Cojocaru
IOM Chisinau

The Shattered Dream of Migration



© IOM Madrid 2004 (Photo: Damian Popolo)

Luis Armando Aravena Rojas arrived from Chile in November 2003. He asked IOM Madrid for assistance to return to his country.

For some years now, Spain has been confronted with the challenge of a continuing and ever increasing influx of foreigners. Once a source of emigrants, Spain is becoming a receiving country for thousands of migrants trying to make it their temporary or permanent home.

According to the 2003 Balance Sheet prepared by Spain's Department of Foreigners and Immigration, the number of foreigners with a valid residence permit on 31 December 2003 was 1,647,011 – some 24 per cent more than at the end of 2002. This number does not include irregular migrants. A more realistic figure can be found in the municipal registers, in which foreigners can register in order

to notify their place of residence, regardless of their status in the country. According to data from the National Institute of Statistics, on 1 January 2003 the registered foreign population was 2,672,596, which constitutes 6.26 per cent of the total population of Spain.

Many migrants in Spain suffer from a shortage or complete lack of resources. In October 2003, the number of foreign citizens in possession of a health card for the needy was 619,598.

Because of the pressing need to respond to this situation, IOM signed a Cooperation Agreement with the Migration and Social Services Institute

(IMRSO) last July to put in place the Voluntary Return of Migrants in Spain Programme (PREVIE by its Spanish acronym).

PREVIE provides each returning migrant with an airline ticket home and financial assistance for their resettlement.

In order to take part in the programme, interested migrants must complete an application form and attach a report prepared by a social worker describing their situation. Each case is evaluated by a monitoring committee composed of representatives of IMRSO, the Ministry of the Interior and IOM. The committee makes a decision on each application and establishes an order of priority.

The response to the pilot phase from September to December 2003 confirmed that there are many migrants living in a destitute situation in Spain. IOM received 1,074 applications and at the same time 8,000 telephone calls from migrants, town councils, associations, and public and private institutions, as well as more than 1,500 visits to the IOM office. During the pilot phase, 199 persons were assisted to return to their countries. The vast majority of those assisted were from Ecuador, Colombia and Bolivia.

Mauricio Moreno Alvarez is one of the migrants asking for IOM return assistance. "I had days when I worked and days when I did not. The situation was becoming very difficult, because I cannot get work without papers. In my country I don't need papers to work as a painter, but here you have to have them." After three years in Spain Mauricio decided to return to Colombia: "I am going back to my country."

Vanina Modolo Olego, IOM Madrid