

whole-of-government and whole-of-society approach to migration
governance in Sierra Leone

DR.

ALKALI KALLAY MUSA CONTEH
DIRECTOR OF DIASPORA ENGAGEMENT AFFAIRS

SIERRA LEONE



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- **Evidence of Partnerships for Migration governance in Sierra Leone**
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Introduction

- Migration has, historically, been an integral part of livelihoods in Sierra Leone.
- While migration from the country dates back to the 1960s, the recent civil war and endemic poverty have contributed to massive outmigration in the 1990s.
- The number of Sierra Leoneans in the Diaspora is estimated to be 336, 000 (World Bank, 2016).
- Emigration is estimated at 5.4% of the population (World Bank, 2016) and the major destination being proximal African countries (Guinea, Liberia, Senegal, and Nigeria), Europe (the UK, Germany and the Netherlands), North America (the USA and Canada) and Australia.
- About 33.7% of Sierra Leoneans living in OECD countries are tertiary-educated (World Bank, 2016).
- About 1.8 % of the population are immigrants of which 97% are of West African descent, mainly from Guinea (65.3%) and Liberia (23.5%).

INTRODUCTION CONT..

- As in other West African countries, the government of Sierra Leone and its development partners have been working to leverage migration for development in Sierra Leone.
- This presentation will focus on the relevance of a whole-of-government and whole-of-society approach to migration governance, with specific reference to Sierra Leone.
- I argue that this partnership can be achieved by creating inter-ministerial mechanisms to address all migration-related policy issues. And by creating mechanisms for regular engagement with non-governmental actors essential to good migration governance: employers and recruiters of migrants, unions, migrant and diaspora associations, academia, and, most importantly, migrants themselves. Local authorities have a paramount role in day-to-day practices and are usually ahead of the game. Mayors and local leaders are at the forefront of making migration—including economic, social and cultural integration—work in practice.

WHOLE-OF-SOCIETY PARTNERSHIPS FOR GOOD MIGRATION GOVERNANCE

THE MIGOF IS COMPRISED OF THREE PRINCIPLES AND THREE OBJECTIVES

PRINCIPLE

Principle 1: Good migration governance would require adherence to international standards and the fulfilment of migrants' rights

Principle 2: Migration and related policies are best formulated using evidence and whole of government approaches

Principle 3: Good migration governance relies on strong partnerships.

OBJECTIVES

Objective 1: Good migration governance and related policy should seek to advance the socioeconomic well-being of migrants and society

Objective 2: Good migration governance is based on effective responses to the mobility dimensions of crises

Objective 3: Migration should take place in a safe, orderly and dignified manner.

THE THREE PRINCIPLES AND THREE OBJECTIVES BASED ON THE ABOVE ARE DESCRIBED BELOW.

PRINCIPLE 1: good migration governance would require adherence to international standards and the fulfilment of migrants' rights

Humane and orderly migration requires compliance with international law. The obligation to respect, protect and fulfil the rights of individuals is paramount and applies to all individuals within a State's territory, regardless of nationality or migration status and without discrimination, in order to preserve their safety, physical integrity, well-being and dignity. Protecting the rights of individuals includes combating xenophobia, racism and discrimination, ensuring adherence with the principles of equality and non-discrimination, and ensuring access to protection.

PRINCIPLE 2: Migration and related policies are best formulated using evidence and whole-of-government approaches

Migration policy is often the subject of intense political debate and can be based on populist sentiments. Migration policy must be based on facts and a well-founded analysis of the benefits and risks the movement of people poses to the State. To govern migration well, a State would collect, analyse and use credible data and information on, among other things, demographics, cross-border movements, internal displacement, diasporas, labour markets, seasonal trends, education and health. Furthermore, a State would seek to understand migration trends and reflect them in policies, including links with environmental degradation, climate change and crises.

PRINCIPLE 3: Good migration governance relies on strong partnerships

By their very nature, migration and mobility implicate multiple actors: States and their neighbors, subnational authorities, local communities, migrants and their families, diasporas, employers and unions. In addition, there are dozens of intergovernmental and non-governmental organizations whose mandates touch on migration and humanitarian action. Governing migration well requires partnerships to broaden the understanding of migration, and to develop comprehensive and effective approaches. This means maintaining close partnerships with:

- Subnational governments, local authorities, cities and municipalities;
- Non-governmental actors at the domestic level, including employers, unions, diasporas, migrant associations, civil society, local community groups, religious organizations and academia, ensuring that the entities consulted are representative of all those in the population concerned; this could include, among others, public–private partnerships;

OBJECTIVE 1: Good migration governance and related policy should seek to advance the socioeconomic well-being of migrants and society

Poverty, instability, lack of access to education or other basic services are only some of the factors that can push individuals to migrate. Those who are pushed to migrate—unlike those who choose to migrate—may be more likely to do so under undesirable or dangerous conditions, including by accessing the services of unethical recruiters, smugglers or traffickers. This has negative consequences for migrants and for communities of origin, transit and destination, and undermines other efforts to govern migration well. Governing migration well would therefore mean promoting stability, education and employment opportunities and reducing the drivers of forced migration, including by promoting resilience, thereby enabling individuals to make the choice between staying or migrating.

OBJECTIVE 2: Good migration governance is based on effective responses to the mobility dimensions of crises.

In 2014, almost 60 million individuals were displaced as a result of natural and man-made disasters; a large number of forced migrants remain in protracted displacement situations, including in urban areas. Crises have significant long-term effects on migrants and society. Therefore, concerted action by the international community is required to: prevent and prepare for crisis; support migrants, displaced persons and communities affected by crises in accordance with humanitarian principles; and promote durable solutions to end displacement. Addressing the root causes of crises and associated population movements needs to be part of longer-term approaches towards recovery, transition and sustainable development. In addition, the international community should respond to crises with the understanding that migration is an inevitable consequence, and that recovery and transition efforts require consideration of the needs of migrants and their communities.

OBJECTIVE 3: Migration should take place in a safe, orderly and dignified manner.

Migration systems need to be designed to ensure that policy objectives are met and that they operate with efficiency and effectiveness. This includes effective implementation of policies and systems, and access to regular channels for migration, mobility, long-term residency and citizenship, for all individuals regardless of gender, age or other diversity characteristics. It also includes well-administered visa and entry schemes, with limited wait times and reasonable fees; access to dual nationality; timely asylum determination processes; effective identity management practices, including the issuance of reliable identity and travel documents; timely responses to requests for documentation or re-documentation; and acceptance of returning nationals.

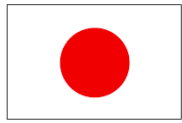
IOM MIGRATION GOVERNANCE FRAMEWORK

- **A) WHEN IT:** (i) Adheres to international standards and fulfils migrants' rights;
- (ii) Formulates policy using evidence and a “whole-of government” approach;
- (iii) Engages with partners to address migration and related issues;

- **(B) AS IT SEEKS TO:**
- (i) Advance the socioeconomic well-being of migrants and society;
- (ii) Effectively address the mobility dimensions of crises;
- (iii) Ensure that migration takes place in a safe, orderly and dignified manner.

Some partnerships for migration governance in Sierra Leone

- Collaboration ILO which led to establishment of labour migration unit of the ministry of Labour and social security
- Collaborations for managing remittances
- Partnerships for migration policy development (National migration, Labour migration policy etc)
- Collaboration with IOM for diaspora mapping



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Approach for Diaspora Mapping



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- Research Sierra Leonean medical Diaspora staffs in USA/ UK/ German and Canada on 2013-2014
- It is funded by internal IOM fund
- Report mentions that some diaspora who never come back after civil war hopes to come back to contribute country
- Based on this mapping, IOM SL can receive two projects fund from Japanese Government.

Mapping of Sierra Leonean Health Professionals in the United Kingdom, Germany, United States and Canada

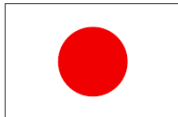
A consolidation of three studies conducted for the
International Organization for Migration (IOM)



International Organization for Migration (IOM)



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Project Brief



SIERRA LEONE GOVERNMENT
MINISTRY OF HEALTH AND SANITATION

Duration

1st March 2017- 28th
February 2018 (12
Month)

Objective

- To strengthen the Sierra Leonean health care system through the deployment of experienced diaspora health care workers to Sierra Leone.

Output

Increased
availability and
quality of health care
Strengthened capacity
of local health care
force

Migration Development in Africa (MIDA):

“MIDA is a capacity-building program, which helps to mobilize competencies acquired by African nationals abroad for the benefit of Africa's development.”

- MIDA project in West and Central Africa:
 - Burkina Faso, Cameroon, Cap-Vert, Chad, Congo, Ghana, Mauritania, Nigeria, Sierra Leone, Togo
(9 of 11 countries conducts Diaspora project)



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MIGRATION FOR DEVELOPMENT IN AFRICA (MIDA) PROJECT IN SIERRA LEONE.

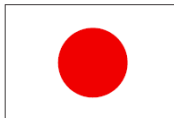
The International Organization for Migration (IOM), the United Nations migration agency, Sierra Leone Mission, the Office of Diaspora (ODA), Sierra Leone and the Ministry of Health and Sanitation (MOHS), Sierra Leone are collaborating to implement the project entitled “Strengthening Sierra Leonean National Health Care Capacity through Diaspora Engagement” –a project funded by Japanese government to strengthening Sierra Leonean national health care capacity through Diaspora engagement.

The main objective of the project is to strengthen the Sierra Leonean health care system through the deployment of experienced Diaspora health care workers to Sierra Leone. The project will facilitate the temporary return of Sierra Leonean health professionals from the diaspora for the benefit of local health institutions.

The Result of Mapping Sierra Leonean Health Professional (2014)



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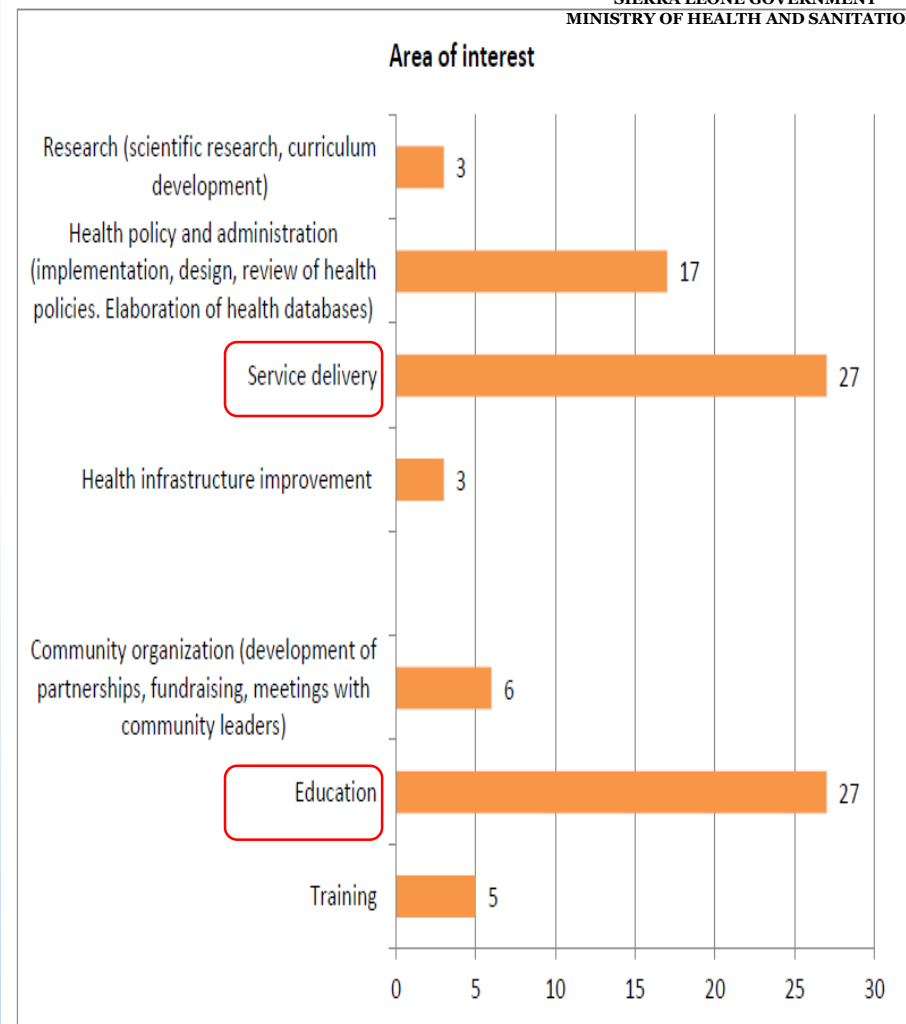


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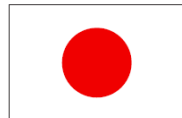
About **78 per cent of medical doctors** aged 55+ expressed a willingness to offer training to medical students in Sierra Leone in specializations such general medicine, surgery, ENT surgery, internal and family medicine, radiography, psychotherapy, psychoanalysis and health management.

About **98 per cent of pensioned doctors** were ready to train younger Sierra Leoneans on condition that this renewed effort from the IOM would be consequential.

Source: Mapping of Sierra Leonean Health Professionals in the United Kingdom, Germany, United States and Canada (2014) Page 55
http://unitedkingdom.iom.int/sites/default/files/doc/publications/SL%202003_VH2.pdf



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Project result based on Indicator



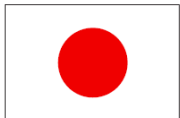
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Outcome	Output	Indicators	Targ et	Tota l Mal e	Tota l Fem ale	TOTA L	% of achievem ent	
Outcome 1. Increased availability and quality of health care in Koinadugu district.	Output 1.1. Assess required health human resource and service delivery for health professionals at district-level health facilities.	1. Baseline assessment report is available and disseminated	1		2	0	2	200%
		2. Final Project Health Assessment report is available and disseminated	1	0	0	0	To be completed	
	Output 1.2: Increased number and capacity of skilled health care workers in Koinadugu district	1. Number of Diaspora Health care professional accredited and deployed in Sierra Leone	15		9	17	26	173%

- Research Sierra Leonean medical Diaspora staffs in USA/ UK/ German and Canada on 2013-2014



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Project result based on Indicator



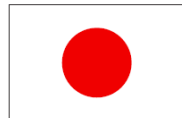
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Outcome	Output	Indicators	Target	Tot al Mal e	Tot al Fe mal e	TOT AL	% of achieve ment
Outcome 2. Strengthened capacity of local health care force	Output 2.1. Enhanced health care workers' technical knowledge through delivery of in-service training package in selected districts	1. Number of health care providers benefiting by Diaspora health experts	120	50	220	270	225%
		2. Percentage of recruited diaspora health care workers with high performance at the end of evaluation	>80%	90 %	90 %	180 %#VALUE!	
		3. Number of People benefiting curative care at the secondary health service	4897	129 0	135 0	264 0	54%
		4. Number of Children Under-five benefiting curative care at the Primary service	8672	338 8	338 8	677 6	78%

- Research Sierra Leonean medical Diaspora staffs in USA/ UK/ German and Canada on 2013-2014



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Project result based on Indicator



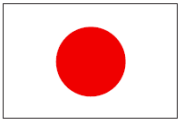
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Outcome	Output	Indicators	Targ et	Tota l Mal e	Tota l Fem ale	TOTA L	% of achievem ent	
Outcome 2. Strengthened capacity of local health care force	Output 2.1. Enhanced health care workers' technical knowledge through delivery of in-service training package in selected districts	5. Number of Children less than 1 year receiving Immunization service (DPT 3).	285	7	310	380	690	24%
		6. Number of Pregnant women receiving Antenatal Care	244	9	0	107	1071	44%
		7. Number of delivery in the supported health facility	306	0	27	27		9%
		8. Number of health facilities supported by Diaspora health experts	7	11	0	11		157%

- Research Sierra Leonean medical Diaspora staffs in USA/ UK/ German and Canada on 2013-2014



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Project Current Outcome



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1. Strengthen Network between home country and diaspora organization

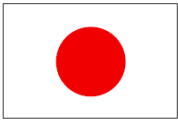


The screenshot shows the website's header with navigation links: Home, About, Jobs, Success Stories, Returnee University, Financial Services, Picture Gallery, Contact, Electronic Bulletin, Blogs, Latest News, Project. The main banner features a smiling man in a white shirt and tie, with the text "WELCOME TO DIASPORA AFFAIRS" and "By far the best place to receive fast and professional services". Below the banner are buttons for "LEARN MORE" and "MAKE AN APPOINTMENT". A sidebar on the left contains a "Returnee University" menu with items like "Investing in Sierra Leone", "Duty Waiver for Returnees", "Professional Associations", "Government Offices", "Government Officials", "Education", "Taxes", "Doing Business in S.Leone", "Returnee Interests", and "Company's Act 2009". The main content area is titled "Picture Gallery" and shows a "User Panel" with statistics: "Total images in all categories: 305" and "Total number of hits on all images: 225,833". Below this are two categories: "ODA Desk Offices at Gbalamuya (0 images) Hits: 0" and "ODA Desk At Lungi International Airport (0 images) Hits: 0".

Increase the access number up to **150%**.



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Project Current Outcome



SIERRA LEONE GOVERNMENT
MINISTRY OF HEALTH AND SANITATION

2. Free Medical Services

- Provided high skilled health service to rural Sierra Leone
 - 150 Surgical Cases
 - 48 Dental Services
 - 45 Dermatology/ General medical services

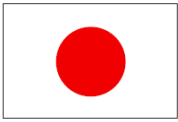


3. World Diabetes Day Campaign 2017

- Screened 178 local residents of health conditions, BMI, Hypertension (HTN), Fasting blood sugar Level (FSL).
- 88.8% of screened residents were giving health consultation.



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Project Current Outcome



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4. Sensitization to local health worker/ citizens in SL

- Provided health information
 - 200 nurse
 - 350 school children
 - 50 local authorities personnel



5. Outreach Activity

- Provide several services 6 rural Peripheral health unit (PHU)
 - Renovation to 3 PHU
 - Provision medical services
 - Support delivery
 - ANT care



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Challenges of establishing and maintaining partnerships

- Coordination challenges
- Lack of resources for meetings etc
- Issues of autonomy and control by international donors

Conclusion

- Migration is a complex phenomenon with both positive and negative outcomes
- If well managed, migration can lead to inclusive growth and development in both migrants sending and receiving countries
- Effective partnerships are very key to enhancing the developmental impacts of migration
- The diaspora affairs bureau, other state agencies and international organisations have established effective collaborative partnerships for managing migration management.

Acknowledgement

On behalf of the Office of Diaspora Engagement Affairs in Sierra Leone, I would like to thank the Director general of IOM His Excellency William Lacy swing, the organisers of first IOM workshop, and the IOM Management team under the astute leadership of Alhaji Sanusi savage, chief of mission IOM Sierra Leone.

• I Thank you all !.