The HIMS project
(Household International Migration Survey)

Information note

CCSA, Luxembourg
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EUROSTAT, MEDSTAT III, the World Bank and UNHCR
A. Background

1. MEDSTAT is the European Commission’s statistical cooperation programme for the countries of North Africa and the Eastern Mediterranean\(^1\) – also referred to as the MED region. MEDSTAT is currently in its third phase, which will run until the end of 2013. Migration is one of nine themes covered by MEDSTAT II and continues to be covered by MEDSTAT III.

2. In a MEDSTAT regional workshop in Wiesbaden in March 2008, all participating countries except Israel called for the implementation of a household migration survey to overcome the lack of data on international migration for the MED region. The survey should collect reliable and representative data on the characteristics and behaviour of migrants. The workshop asked MEDSTAT to develop Model Questionnaires (MQs) that could be used for coordinated ‘Mediterranean Household International Migration Surveys’ to be undertaken under a new project (MED-HIMS).

3. Following these recommendations, ‘Project Documents’ for conducting such surveys were prepared by the Egyptian, Jordanian, Palestinian and Syrian national statistical offices (NSIs) with direct assistance by MEDSTAT II experts. The four countries agreed that the migration surveys should be implemented within a coordinated regional MED-HIMS programme. Interest in the proposed MED-HIMS was expressed later by Algeria, Lebanon, Morocco and Tunisia.

4. The methodological framework and the first draft of the MQs for MED-HIMS were discussed in four MEDSTAT regional workshops held in Brussels (twice), Cairo and Marrakech from February 2009 to January 2011. The work was undertaken in collaboration with the MED NSIs, EUROSTAT and the World Bank and several national and international entities in the Euro-Mediterranean Region.

5. In Spring 2010, the draft MQs available at that stage were adapted to national needs by the Palestinian Central Bureau of Statistics and used in the Palestinian National Migration Survey, an operation undertaken with financial support from the UN and EC. Despite the degree of diversification and the operational constraints imposed by political circumstances, the Palestinian survey demonstrated the feasibility of the MED-HIMS, and identified potential methodological improvements, particularly with regard to the sample design and selection of the sample households.

6. Following the launch of MEDSTAT III in 2010, two groups - an international MED-HIMS Coordination Committee and a technical ‘Manual Panel’ – involving experts from EUROSTAT, MEDSTAT III, the World Bank and UNHCR, were set up to supervise the further development of MQs and the preparation of survey manuals. As the project has now grown bigger than foreseen by the MEDSTAT III programme, additional funding for this work is provided by the World Bank and the UNHCR. In 2011, the UNFPA joined the MED-HIMS Coordination Committee, and has agreed to commit funds to the programme.

\(^1\) The countries covered by MEDSTAT are: Algeria, Egypt, Israel, Jordan, Lebanon, Morocco, Syria and Tunisia, as well as the Palestinian Authority.
7. In April 2011, the MEDSTAT Directors’ Committee\(^2\) mandated the MED-HIMS Coordination Committee to prepare a Project Proposal for a sub-regional programme, covering four countries in the first phase, and to approach international and regional donors on their behalf, so as to secure the funding necessary to carry out the programme. The Project Proposal includes a ‘Central Implementation Unit’ which will be responsible for managing such a complex initiative and providing technical assistance, training, etc.

B. MED-HIMS today

8. As a result of this joint work and consultation, the MED-HIMS proposal aims today to collect data in the MED countries on the determinants and consequences of international migration, covering many aspects including out-migration, return migration, forced migration, migration of highly-skilled persons, irregular migration, type and use of remittances, behaviour, attitudes, perceptions and cultural values of people with regard to international migration. The implementation of this proposal would result in the collection of reliable and representative multi-topic, multi-level, retrospective and comparative data on the characteristics and behaviour of migrants.

9. The Project Proposal is now available. It foresees that the full implementation cycle for one country survey will take around 18 months, from initial training, adaptation of questionnaires to local conditions, selection of sample, through to analysis and publication of the results. It proposes to implement Phase One in two stages, starting with two countries, Egypt and Jordan, in 2012 and another two in 2013. Phase Two would then be launched in the remaining three countries in around 2015 – after the population censuses foreseen in Morocco and Tunisia in 2014.

10. The MED-HIMS project has been well received by international and national institutions. UN-ESCWA has expressed an interest in extending MED-HIMS to Arab countries beyond the Medstat region (e.g. to Iraq, Sudan and Yemen). And if it is successful in the MED region, the UNFPA is interested in adapting it for use beyond Arab countries.

11. Direct financial support has been provided by the European Commission - via the MEDSTAT Programme - the World Bank and UNHCR. The UNFPA has undertaken to provide funds in 2012 of around US$ 50 000 per country - from the regional funding assigned to the national programmes of participating countries - with the possibility of further funding from the Global Fund.

12. However additional funds will be required. The Coordination Committee has jointly developed a Project Document for the first phase of the Project, including an estimate of the required technical, human and financial resources. The estimate indicates that about € 3.3 million, or US$ 4.7 million, of international funding would be necessary for the \emph{MED-HIMS Phase One Project}. It is proposed that funds would be managed through a World Bank administered Trust fund.

\(^2\) The MEDSTAT Directors Committee oversees the implementation of the MEDSTAT III programme. It is composed of the Directors of the NSIs of the MED countries, the EC (EuropeAid and Eurostat) and the Medstat contractors.
13. Therefore, the MED-HIMS Coordination Committee will hold a Stakeholders and Donors Meeting in Cairo on 20 September, 2001, addressed to other international institutions such as ESCWA, ECA, the UN Population Division, UNICEF, IOM, ILO, PARIS21, the League of Arab States, the Arab Labour Organization, bilateral cooperation agencies and potential donors such as the Islamic Development Bank, the African Development Bank, AGFUND (Arab Gulf Fund for the United Nations Development Organizations), AFSED (Arab Fund for Social and Economic Development), and Abu Dhabi Development Fund.

C. Summary overview of MQs and related manuals (June 2011)

14. As outlined above, the proposed MQs for MED-HIMS aim to collect data in the MED countries on the determinants and consequences of international migration. It is also proposed to gather information on socioeconomic status of the household and on characteristics of local communities in sample areas. The MQs and the associated manuals will be reviewed in a regional workshop scheduled for the fourth quarter of 2011.

15. The MQs are designed to meet a number of objectives:

- To collect data in order to understand the nature of MED-migration and the demographic and socio-economic characteristics of migrants;
- To collect data on migration histories and the migration experiences and practices, including the case of forced migration (the migration asylum nexus, secondary movements, conditions in host countries, returns and intentions of refugees and people in need of international protection);
- To collect data on migration intentions and potential destination;
- To assess the impact of migration on household socio-economic behaviour and practices;
- To assess the impact of remittances, their utilization and their impact on socio-economic development in the MED-region;
- To assess the impact of migration on unemployment and labour dynamics;
- To assess the impact of migration on the skill-level of return migrants;
- To assess the overall awareness of migration issues and practices;
- To assess migrants’ future plans;
- To elucidate the processes leading to the decision to migrate;
- To evaluate the effectiveness of governmental intervention aiming at preventing illegal migration;
- To develop specific methodologies for collecting and analyzing international migration data; and
- To improve data utilization by promoting and encouraging their use by planners, policy makers and managers of international migration and development programmes.
11. The MQs include the following seven questionnaires:
   MQ-1: The Household Questionnaire
   MQ-2: Individual Questionnaire for Out-migrant
   MQ-3: Individual Questionnaire for Return Migrant
   MQ-4: Individual Questionnaire for Non-migrant
   MQ-5: Individual Questionnaire for Forced Migrant
   MQ-6: The Household Socio-economic and Environmental Conditions Questionnaire
   MQ-7: The Community Characteristics Questionnaire

12. The experts participating in the workshops and development of MQs have discussed at length a number of fundamental issues, including responding to both national and international data requirements, the criteria for eligibility for the various survey interviews, the concept of ‘multi-level eligibility’, the formulation of specific questions, the classification and coding of variables to be applied, and the proposed sampling and data collection procedures.

13. For all participating countries, the MED-HIMS will provide the following manuals:
   M1 - Model Questionnaires
   M2 - Survey Design and Organization Manual
   M3 - Instructions to Supervisors
   M4 - Instructions to Interviewers
   M5 - Manual on Sample Design
   M6 - Coding and Recode Specifications Manual
   M7 - Manual on Guidelines for Principal Country Report:
      Part 1: Statistical Tabulations
      Part 2: Data Analysis