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Producing migration data using household surveys and other sources

The Programme of Household International Migration Surveys in the Middle East and North Africa (MED-HIMS): Evolution, methodology and first regional project

Note by the MED-HIMS Technical and Coordination Committee

A. Origin and evolution of the MED-HIMS Programme

The ‘Mediterranean Household International Migration Survey’ (MED-HIMS) is a regional programme of coordinated national household surveys requested by the National Statistical Offices (NSOs) of most of the countries of the Middle East and North Africa (MENA)/ENPI South region(2) to overcome the lack of reliable and representative data on the characteristics and behaviour of migrants from their region. The project originated in the European Commission’s MEDSTAT Programme, and since its initial inception in 2008, it has gone through a wide preparatory and consultation process with support from the European Commission (EC), the World Bank, the UNHCR and the UNFPA.

The development of MED-HIMS Model Questionnaires (MQs) and other reference tools was requested by the eight NSOs in a workshop organized by the MEDSTAT II(3)

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2 All Arab countries participating to MEDSTAT II, namely Algeria, Egypt, Jordan, Lebanon, Morocco, the occupied Palestinian territory, Syria and Tunisia.

3 MEDSTAT II (2006-2009) and MEDSTAT III (2010-2013) are the regional programmes funded by the European Commission for strengthening the national statistical systems in the MENA/ENPI South countries. They both focused on Migration Statistics as one of priority statistical sectors of intervention.
Programme in Wiesbaden in March 2008. Following this recommendation, by the end of 2008, ‘Project Documents’ for conducting such surveys were prepared by the NSOs in Egypt, Jordan, the occupied Palestinian territory and Syria with direct assistance by MEDSTAT II experts. These project documents included a request for technical assistance and external funding to the EC and other international donors, within a regional coordinated survey programme. However, in 2010 the Palestinian Central Bureau of Statistics had the opportunity to implement a National Migration Survey based on adapted version of the then available MQs.

At the beginning of MEDSTAT III, in spring 2010, the involved NSOs reaffirmed their interest in the proposed MED-HIMS. During the MEDSTAT Directors’ Committee Meeting of April 2011 mandated the EC and the other international institutions supporting MED-HIMS to prepare a proposal for a Phase 1 project and to look for the funds necessary for its implementation in a first group of countries under the coordination of a project implementation unit.

The proposal of national surveys and coordinated programme was promoted in a series of national and international meetings including the XXVI IUSSP International Population Conference (Marrakech, September 2009), the 5th Arab Forum for Statistical Capacity Building (Amman, July 2011) and the MED-HIMS Stakeholders and Donors Meeting (Cairo, September 2011) and other forums. This promotion activity aimed at ensuring that the many national and international bodies working in the field of migration were aware of the wide range of data the MED-HIMS will produce, as well as the potential for different types of analysis. All the international meetings welcomed and endorsed the programme proposal, in particular the direct involvement of the NSOs, the centrally coordinated activities and the plans for making publicly available the survey micro-data. Moreover, these meetings found that MED-HIMS is likely to promote a wide and free discussion on international migration in the participating countries and the MENA/ENPI South region, and suggested its extension to other countries, particularly in the Arab region.

The objectives and scope of the survey programme, the development of the draft of the MQs and data collection manuals were discussed in a series of regional workshops held in Brussels, Cairo and Marrakech (from February to September 2009), again in Brussels (January 2011) and then in Amman (March 2012). The work on MQs and other model tools carried out so far was undertaken on behalf of the EC (through MEDSTAT II and III), The World Bank and UNHCR, in collaboration with the involved NSOs, EUROSTAT and UNFPA and in consultation with other international and national entities in the MENA/ENPI South and EU regions.

So far MED-HIMS was supported and funded by the EC (through the MEDSTAT Programme), The World Bank, UNHCR and UNFPA, i.e. the institutions constituting the initial MED-HIMS Technical and Coordination Committee (TCC). During 2012 the League of Arab States (LAS) joined the TCC. In addition, the EU Delegations to Egypt and Jordan, ILO and WHO committed funds for the national survey operations.

B. Objectives, Model Questionnaires (MQs) and other methodological aspects

The main objectives of the MED-HIMS are (i) to study the recent trends, causes, determinants, dynamics and consequences of international migration and mobility, and the inter-linkages between migration and development; and (ii) to explore scenarios for a closer cooperation in the area of migration and development between the MENA/ENPI South region and receiving countries, particularly the European Union. Given the more qualitative status, the survey would not provide estimates on stocks of migrants.

The MQs are designed to collect data that are multi-topic, multi-level, retrospective and comparative. Another feature of the MQs is that they have an explicit policy orientation, so
that strategic topics and research questions included focus on variables that might potentially be influenceable by policy instruments. The MED-HIMS new research lines are thus strategic in two senses: they pertain to issues crucial for policy-making in both sending and receiving countries, and they offer a theory-based design in which both the participating countries and future new participants will implement new research within a shared framework.

The target population includes four groups: current migrants, return migrants, non-migrants, and forced migrants. Among the topics covered are: the demographic and socio-economic characteristics of migrants; behaviours, attitudes, perceptions and cultural values of people with regard to international migration; migration histories and the migration experiences and practices; the processes leading to the decision to migrate; migration networks and assistance; work history and the impact of migration on labour dynamics; circular migration; migration of highly-skilled persons; irregular migration; type and use of remittances and their impact on socioeconomic development; migration intentions; the skill-level of return migrants; the overall awareness of migration issues and practices; and mixed migration (migration asylum nexus) and secondary movement of refugees. Information on socio-economic status of the household and on characteristics of local communities in sample areas may also be gathered, depending on the availability of sources of information and other conditions in each country.

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-level Questionnaire

The MQs can be used by interviewers to obtain answers from respondents that are both reliable and valid. The questions are drafted in a clear simple language and follow clearly and logically from one to the other, while the layout is designed to make it easy for interviewers to administer the questionnaires. The wording and question sequence are designed to motivate respondents and help them recall information on past events. Using the MQs verbatim is most likely to ensure that the results of the surveys are comparable across participating countries in order to maximise the understanding of the determinants and consequences of international migration and mobility in the MENA/ENPI South region. Therefore, the participating countries are recommended to follow as closely as possible the proposed MQs, planning only for minor modifications which may be required to meet local circumstances.

The main output data of the MED-HIMS may be summarized as follows:

- data on the trends, patterns, determinants and consequences of international migration and the demographic and socio-economic characteristics of current and return migrants;
- data on why, when and how migration has occurred and might occur in the future;
- data on migration histories and the migration experiences and practices;
- data on migration intentions and potential destination;
- data on forced migration;
- data on pre-migration situation and motives for moving abroad;
- data on migration networks and assistance;
- data on work history before and after migration;
- data on views about social, economic and labour integration and social exclusion;
- data on patterns of circular migration and skills and knowledge acquired by migrants;
- data on remittances and their utilization and how they contribute to local development-oriented initiatives and investments in the country;
- data on the impact of migration on household economic behaviour and practices;
- data on the impact of migration on unemployment and labour dynamics;
- data on the pattern of gender-selective migration and the nature of the consequences engendered for women by male outmigration and its impact on children;
- data on the overall awareness of migration issues and practices;
- data on migrants’ future plans;
- data on the pattern of return migration and reintegration measures;
- data on the processes leading to the decision to migrate;
- data on the qualifications and skills of potential migrants;
- data on the effectiveness of governmental interventions aiming at preventing illegal emigration.

One of the aims of the project is to improve data utilization by promoting and encouraging their use by planners, policy makers, and managers of international migration and development programmes. The output data may be used as evidence-based information for:

- the establishment of a ‘National Migration Profile’ that will allow to identify certain common characteristics of the migration flows to the main receiving countries;
- the development of migration policies and future migration programming;
- the development of scenarios to support circular and managed migration, and to design successful action programmes to be coordinated in collaboration with the main receiving countries, particularly the EU countries through the mechanisms of the EU Global Approach to Migration and Mobility;
- the identification of priority areas in the field of education and vocational training;
- the development of policy measures on recognition of qualifications and the use of transparency tools for the skills of migrants acquired at home and abroad;
- the development of policy measures on mitigating the adverse effect of brain drain;
- the development of policy measures dealing with forced migration;
- achieving better understanding of how remittances can be used to foster local development, and developing relevant policy measures in collaboration with the main receiving countries;
- promoting ‘migration governance’ from a development perspective and improving the understanding of the development and migration nexus;
- fostering institutional partnership in the field of migration with the main receiving countries;
- assessing the effects of future legislative measures on labour immigration that might be taken by receiving countries in line with their demographic changes.

The above examples of the utilization of the MED-HIMS outputs clearly illustrate that the project will provide authorities in both sending and the main receiving countries with a
wealth of information necessary for addressing mutually relevant migration and mobility issues and themes in a comprehensive and balanced manner through dialogue and cooperation.

The set of MED-HIMS model manuals is composed of the following:

- Manual 1: MED-HIMS Model Questionnaires
- Manual 2: Design and Organization of MED-HIMS
- Manual 3: Instructions to Supervisors
- Manual 4: Instructions to Interviewers
- Manual 5: Sample Design
- Manual 6: Data Dictionary and Recode Specifications
- Manual 7: Guidelines for Country Report:
  - Part 1: Statistical Tabulations
  - Part 2: Data Analysis Guidelines

The MED-HIMS sample will be a nationally representative probability sample of households designed with the aim of providing estimates with acceptable precision for key international migration practices and intentions for the country as a whole and for the main regions. A relevant number of migrants and non-migrants will be fixed in each country. The main methodology should base on the principle that areas with a higher concentration or prevalence of international migrants are selected (sampled) with higher probabilities than other areas, but all areas of the country can still be represented by the sample. In addition to the main sample, targeted samples of forced migrants will be selected using specific UNHCR sources.

C. Organisation and implementation of the MED-HIMS Phase 1 Project

Introduction

The MED-HIMS will be a programme of national household sample surveys in 8 countries in the MENA/ENPI South region. The project will be implemented in two phases. In its Phase 1, the MED-HIMS project will focus on 4 MENA/ENPI South countries, namely: Egypt, Jordan, Lebanon and Morocco, with data collection in both Egypt and Jordan starting at beginning of 2013.

The highlights of the design of MED-HIMS at the national level include:

- survey design which provides unbiased estimates for the population of inference through proper frame coverage and the use of a new, ambitious and innovative sampling design that will allow the survey to focus on the target populations;
- survey design that recognizes data needs for decentralised planning and implementation of migration policies, based on the priorities and needs of different regions in the country;
- survey design that recognises and controls sources of non-sampling error as well as sampling error;
- extensive training of national staff and insistence on proper field procedures;
- state-of-the-art data processing;
- analysing the different sets of results in various domains of interest for both policy makers and academics with a view of developing scenarios of policies and measures, supported by evidence, addressing a broad range of challenges and opportunities through dialogue and cooperation between the Southern Mediterranean sending countries and European and other receiving countries;

- disseminating and discussing results and the proposed scenarios with national and international stakeholders and raising awareness about such scenarios through key channels (e.g., comparative studies, expert groups, workshops and conferences) that will impact both policy and future research.

The information that will be collected and analyzed through MED-HIMS will also be useful for meeting the information requirements of measuring international migration in the MENA/ENPI South-region. Therefore efforts will be made to ensure that where possible there is close coordination in the development of information bases between the MENA/ENPI South countries participating in the MED-HIMS programme.

The overall cost of MED-HIMS Phase 1 for the international community is around US$ 5.0 million (EUR 3.6 million). The funds already spent or committed by the European Commission (through the MEDSTAT III and other programmes), The World Bank, UNHCR, UNFPA, ILO and WHO for activities to be implemented at international level, in Egypt or Jordan are in the order of about 50% of total.

The project officially started at the occasion of the ‘Fifth Regional Workshop on the MED-HIMS Methodology and Tools’ held in Amman on 4-8 March 2012. This meeting was attended by twenty national experts belonging to all interested MENA/ENPI South countries, except Syria, and the representatives of all MED-HIMS partner institutions in addition to UNESCWA, ILO and IOM.

Organisation and implementation of the MED-HIMS Phase 1 at the international level

The overall organizational responsibility for planning and executing MED-HIMS rests so far with a consortium consisting of the EC (EuropeAid and EUROSTAT), MEDSTAT III Programme, The World Bank, UNHCR, UNFPA and LAS, working in partnership with the NSOs in participating countries, and in collaboration with other international institutions supporting the programme at national level. The MED-HIMS consortium is mainly responsible for facilitating the provision and use of international funding, supporting the planning and coordination between national surveys, developing further model tools and providing technical assistance to participating countries.

The major components of the MED-HIMS organization will include the Programme Steering Committee (PSC), which will replace the TCC, and the Project Implementation Unit (PIU). The PSC will be entrusted with the overall substantive guidance and review of all activities undertaken under the programme. Given the progressive confirmation of countries implementing the survey, the evolving partnership with international agencies funding national surveys and/or the centralised activities as well as, in the medium term, the organisation of MED-HIMS Phase 2 Project, the PSC will be open to new members.

The PIU has mainly the tasks of coordinating the implementation of national MED-HIMS, ensuring uniformity and comparability among individual surveys, and making technical expertise available for participating countries through continuous backstopping and experts’ missions. In addition, the PIU implements activities useful at regional level, including the organisation of meetings and events, the preparation of model computer packages, and the comparative analysis of national results.

The PIU consists of the Project Manager, the Chief Technical Advisor (CTA), other project staff and few international experts and consultants for individual assignments on medium and short term basis. For the time being the Migration Key Expert and other staff of MEDSTAT III are undertaking management and organisational activities and supporting
the CTA. The work and missions of the CTA, Sampling Expert and System Analyst are jointly funded by MEDSTAT III, UNHCR, UNFPA and The World Bank.

Since January 2012 the PIU members mainly worked on the following:

- The organisation of the regional workshop held in Amman
- The finalisation of the model questionnaires and manuals
- The adaptation and translation to Arabic of model questionnaires and manuals for the two priority countries
- The technical assistance through missions to Egypt, Jordan, Lebanon and Morocco
- The development of the Model Data Entry System
- The promotion and communication, also including the programme’s newsletter

Among the recent outcomes at regional level, besides the new review of model data collection tools, the workshop held in Amman agreed to the following:

- After discussing the nature of the sampling frames available in the participating countries, to apply sampling procedures at national level according to common general principles adapted to national circumstances.
- To select the respondents for the MQ-5 on forced migration through the general sampling procedure as well as a targeted sample established by using the UNHCR’s registration database proGres;
- To mainly adapt the MQ-5 to the needs of each participating country;
- To use the MQ-7 on the characteristics of the local communities in rural areas in participating countries and according to specific country needs;
- To review and disseminate the MQs and other model manuals for data collection after the implementation of first survey pre-tests;
- To emphasise the importance of checking the collected questionnaires for completeness, consistency, legibility, etc. during the fieldwork.

Concerning the model manuals, the reference versions of data collection Manuals 1 to 3 were developed in English while Manual 4 is available in Arabic. In addition, the Directorate of Statistics of the High Planning Commission (HCP/DS) of Morocco provided a preliminary translation of MQs into French. The Manual 5 on sampling guidelines will be written at a later stage in order to take into consideration the methods and tests implemented in the two priority countries. The first of two parts of Manual 6 covering the data entry specifications have already been developed and used in Egypt in the development of the data entry system. Manual 7 on tabulation and data analysis will be developed during the first half of 2013.

Following consultation with the NSOs participating in the Phase 1 Project, the Model Data Entry System is being developed in CSPro by the specialists of the Central Agency for Public Mobilisation and Statistics (CAPMAS) under the supervision of an international System Analyst and the CTA. This system will be offered to all participating countries, together with training on using it.

At the international level, the PSC members have actively raised awareness of the project and tried to secure the funds necessary for the PIU as well as the survey operations in Egypt and Jordan. Great efforts are being spent in making the committed international funds effectively available to the NSOs, including the reformulation of the project document and budget of the two national surveys to the different templates required by the committed donor agencies. With only around half of the necessary provision currently available, the invitation is extended to potential donors to provide in the short term the required funding for both the survey operations in the second group of participating countries and the PIU and the remaining model manuals.
Organisation and implementation of the national surveys

In each participating country, the planning, preparation and implementation of national survey are completely owned and managed by the NSO as a part of the country’s ‘National Strategy for Development of Statistics’. The country survey organization will consist of the following three levels:

- **Level 1**: National Project Steering Committee (NPSC), which will be chaired by the Director of NSO, with membership of senior executives from the line ministries and representatives of relevant NGOs, and the donor agencies such as the EU Delegation and local offices of UNFPA, UNHCR and ILO, depending on country. The NPSC will constitute the main policy making body that will direct the project at the national level, keeping in mind the project objectives.

- **Level 2**: National Project Implementation Unit (NPIU)

- **Level 3**: Field and Office Staff

The implementation of the MED-HIMS at the national level includes the following main activities:

- Preparation of the project document and establishment of the national survey organization
- Adaptation of model questionnaires and manuals to national circumstances
- Sample design and selection
- Conducting the survey pre-test
- Printing of questionnaires and manuals for the main survey
- Selection and training of field staff
- Publicity
- Field work (listing and data collection)
- Data management and tabulation
- Data analysis and report writing
- Publication and dissemination of results

The MED-HIMS/PIU would provide to each participating country:

- standardized survey modules;
- technical support on survey implementation;
- assistance and capacity building to analyze the results;
- and a forum for discussion on implications for policy.

Following the end of the project, the survey micro-data will be made available to users through the official websites of the NSOs and other international platforms.

Egypt and Jordan

Activities at national level in Egypt and Jordan are going ahead more or less in parallel. Following the revision of their national project documents already prepared in 2008, at end of 2011 both CAPMAS-Egypt and the Department of Statistics (DoS) of Jordan started, assisted by the international partners, submitting the project documents to the international community of donors and convening awareness meetings with them and other national partner agencies and stakeholders.
As a result of extensive consultation process, the EU Delegation to Jordan has provided in full the amount requested by DoS for implementing the Jordan-HIMS. On the other hand, the funds made available by ILO, the EU Delegation to Egypt, UNFPA, UNHCR and WHO will ensure the full funding of the Egypt-HIMS; in addition, ILO will make a supplementary contribution linked to the increase of sample and the disaggregation of survey results by gender in the six governorates of Red Sea, Minya, Port Said, Aswan, Menoufia and Qalyoubia.

On the technical aspects, till now both CAPMAS and DoS mainly discussed in working group meetings the possible adaptation of MQs and manuals to respect national circumstances and needs and undertook preliminary preparatory work useful to sort out the respective survey samples. The latter mainly consisted of ad hoc extractions and evaluations of results available from last census (e.g., sex ratio of adult population), the inclusion of specific questions in regular household surveys (the ‘Labour Market Panel Survey’ in Egypt and the ‘Job Creation Survey’ in Jordan), the results of which would facilitate the sampling design at a later stage, and the analysis of UNHCR databases to be used as additional sources for sampling the forced migrants.

Both Egypt and Jordan decided to adopt the MQs 1, 2, 3, 4 and 6 without any significant modifications to the questions (no questions were deleted or added) but with some adaptation to the response categories of a number of questions. For MQ-3 for Return Migrants both countries choose to investigate on Option A: Short Migration History (instead of Option B: Migration History since First Move Abroad). As for MQ-5 for Forced Migrants, a number of questions were added in each country upon the suggestion of UNHCR in Egypt and UNHCR and UNFPA in Jordan. Finally, with regard to MQ-7 on characteristics of local communities, Egypt decided to use an adapted and shorter version for rural areas, whereas Jordan decided against its use mainly because of its limited relevance or the difficulty to gather some of the proposed data and the fact that rural areas in Jordan represent only 18% of the total population.

Lebanon and Morocco

At beginning of 2012 the Central Administration for Statistics (CAS) of Lebanon discussed internally and with the national partners the feasibility of the Lebanon-HIMS. This process ended in March 2012 with the mission of the CTA and drafting of Project Document. The final version of this document is currently being prepared in view of dissemination to the international donors.

Somehow similarly to Lebanon, in Morocco the HCP/DS held internal consultations and, in July 2012, hosted an experts’ mission for further discussing the feasibility and funding prospects and for drafting the Project Document (for a fourth MED-HIMS survey within the Phase 1 project). At the moment of writing this report, further consultations are taking place to define the institutional organisation within the HCP for implementing the survey, despite the workload for the upcoming census and other field operations.