



Alternatives to detention from theory to practice

Evaluation of three engagement-based
alternative to immigration detention pilot
projects in Bulgaria, Cyprus and Poland

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This external evaluation has been commissioned by the European Programme for Integration and Migration (EPIM), a collaborative initiative of the Network of European Foundations (NEF). Its contents are the sole responsibility of the authors and may not necessarily reflect the positions of NEF, EPIM, or the partner foundations.

Summary findings

97% of individual migrants who entered the pilots remained engaged with immigration procedures through engagement-based ATD in the community.

This report shares findings of the interim evaluation of the engagement-based alternative to detention (ATD) pilots in the community in Bulgaria, Cyprus and Poland which have been supported by the European Programme for Integration and Migration (EPIM). The pilots started in January, March and June 2017, to continue for the duration of two years.

The purpose of the evaluation is to investigate the effectiveness of case management within the engagement-based ATD pilots in increasing individual migrants' ability to work towards case resolution, by helping them to stabilise in the community and supporting them to explore all options available for case resolution. The pilots also aim to generate material and evidence that advance ongoing discussions about the benefits of such ATD: that they are more affordable than detention, are more humane and are highly effective¹. The further evaluation of the pilots will be conducted at a later stage.

In addition to collating quantitative data, for the purpose of analysing qualitative impact of case management, the pilot implementers carried out in-depth monitoring and assessment of data of between 10 and 11 individual cases from each pilot.

The key interim findings include the following:

- ▶ A relatively small amount of financial resources from private foundations can enable the establishment of engagement-based alternative to detention (ATD) pilots in the community based on an individualised case management approach which generate rich advocacy, learning and evidence building opportunities.
- ▶ Significant amounts of time, preparation and reflection are required to set up and operationalise engagement-based ATD programmes from scratch in the community, including developing protocols and guidance for case managers and informing and gaining buy-in from stakeholders who are unfamiliar with engagement-based alternatives to detention or case management. They also need adjustments after they start and as more experience is gained.

- ▶ The vast majority (97%) of individual migrants who entered the pilots remained engaged with immigration procedures through engagement-based ATD in the community: only 3% disengaged or absconded². Amongst people at risk of disengagement, absconding or detention, these ATD pilots have been able to successfully identify individuals who are able to work towards the resolution of their cases in the community.
- ▶ Quality case management can increase individuals' ability to work towards case resolution. Even with various levels of vulnerability and wide diversity of people's circumstances, qualitative evaluation suggests that holistic and individualised case management can have a positive impact on individuals' ability to engage with immigration procedures including cases of great complexity and previous experience of detention, when certain conditions are met.
- ▶ Case management alone, especially when applied only at the end of the immigration process, cannot rectify structural and long-term problems in the migration system that sometimes undermine case resolution. Nor can it compensate for gaps in provision of minimum standards by states. It is particularly challenging to address individuals' lack of trust in the system. While it appears that a certain period of case management is necessary to stabilise the person, we cannot draw the conclusion that longer case management would automatically lead to case resolution when other barriers to case resolution remain unaddressed.
- ▶ Case management is a complex skill that is fundamentally different from legal case work or general psychological or practical support skills: it is more holistic, reflective and continuous, yet has a clear focus on working towards case resolution in a structured way.

¹ The International Detention Coalition (IDC) (2015), *There Are Alternatives: A Handbook for Preventing Unnecessary Immigration Detention (Revised)*

² Note that several individuals received case management support while in detention, particularly when the pilots were negotiating their release from detention or their exceptionally severe vulnerabilities were deemed to require extra support on a humanitarian ground.

Introduction and background

The purpose of this report is to share the interim findings and learning from the engagement-based alternative to detention pilot projects in Bulgaria, Cyprus and Poland.

This external evaluation report has been commissioned by the European Programme for Integration and Migration (EPIM) to evaluate the work of the engagement-based alternative to detention pilot projects in three EU Member States, as part of an alternatives to detention network, funded under EPIM's Thematic Fund on Immigration Detention. The report assesses the following projects which work in a complementary manner:

- ▶ Protecting migrants with precarious status: decreasing the use of detention and applying community-based alternatives, implemented by the Center for Legal Aid – Voice in Bulgaria and the Bulgarian Lawyers for Human Rights (Bulgaria)
- ▶ Pilot project on the implementation of alternative measures: the Revised Community Assessment and Placement model in Cyprus, implemented by the Cyprus Refugee Council (CyRC) (Cyprus)
- ▶ No Detention Necessary, implemented by Stowarzyszenie Interwencji Prawnej (SIP) (Poland)
- ▶ From theory to practice: A Network of Alternative to Detention (ATD) Implementers in Europe, led by the International Detention Coalition (IDC), Detention Action and The Platform for International Cooperation for Undocumented Migrants (PICUM)

They will be respectively referred to as the Bulgarian pilot, the Cypriot pilot, the Polish pilot and the Network hereafter. The pilots started, respectively, in January, March and June 2017 and the Network officially started in March 2017.

The purpose of this report is to share the interim evaluation findings and learning from the engagement-based alternative to detention (ATD) pilot projects for migrants in Bulgaria, Cyprus and Poland. The evaluation is designed to investigate whether the engagement-based ATD pilots' case management approach increases individual migrant's ability to work towards case resolution by helping them to stabilise in the community and supporting them to explore all options for case resolution. The pilots aim to generate material and evidence that advance discussion and debates about the benefits of engagement-based ATD in the community: that they are more affordable than detention, are more humane and are highly effective.

These engagement-based ATD pilots in the community were not designed to replace parts of the existing immigration detention systems in these countries. Rather, as pilots, their practice, evidence and learning should con-

tribute towards the national and regional level discussions and actions that will reduce and end immigration detention through the use of engagement-based ATD in the community. To reflect this unique approach, the report also tries to capture practical learning and findings specifically from the process of developing and implementing the pilots.

The European Alternatives to Detention Network³ was formed to support the NGOs implementing the engagement-based ATD pilots in the community, aid exchange among them and link them with regional and global organisations where relevant. The Network conducts and facilitates advocacy, learning and evidence gathering among the Network members. The Network's ultimate goal is to reduce detention and end detention of vulnerable people by building greater momentum for engagement-based ATD in the community. Their work is informed by their unique approach of '*(a)dvocacy, learning and evidence building through doing*'.

About the EPIM Thematic Fund on Immigration Detention

In recent years, detention has become an increasingly prominent EU tool to "manage migration flows". Whilst often portrayed as a necessary step to prevent absconding and enforce returns, the negative impact of detention on migrant wellbeing, rights-protection and the costs of detention raise clear concerns. Under this Fund, EPIM supports civil society organisations who work to ensure that, in policy and practice, the use of detention is reduced to when it is legitimate, proportionate and necessary and, based on individual assessment, as an exceptional measure of last resort

Among other work, this Fund addresses the lack of alternative measures to detention and the marginalisation of undocumented migrants or migrants without protection status. In spite of the growing reliance on detention of migrants, alternatives based on quality one-to-one case management can provide a viable route to "managing migration flows" without relying on confinement. Whilst alternative models to detention have the potential to stabilise individuals in the community and to support them in exploring all options for case resolution (including regularisation), a key barrier to their implementation is that governments lack sufficient practical examples applicable to their own context.

³ For more information about the Network, see www.atdnetwork.org

This report is intended for governments, policy makers, civil society organisations and other institutions who wish to understand how, practically, engagement-based alternative to detention projects in the community could be established and to learn about the achievements as well as the challenges observed so far in the pilots.

This interim evaluation exercise also served as a useful opportunity to test the monitoring and evaluation system that the Network members developed together with the external evaluator. Its results will feed into the further evaluation of the pilots.

“A relatively small amount of financial resources can enable the establishment of such pilots in the community.”

Working with the pilots:

The European Alternatives to Detention Network

For the Network, which sees engagement-based alternatives to detention as a strategy for detention reduction, working directly with the pilot implementers provides an important opportunity for sharing practical experience and knowledge among the different pilot projects, as well as building evidence for advocacy and momentum around engagement-based ATD in the community at the national and regional levels. For the Network, this simultaneously addresses the two key barriers in traditional ATD and detention reduction advocacy.

The first barrier has been a lack of practical examples of engagement-based ATD in the community in any specific national context. The pilots are designed to provide demonstrable examples and both quantitative and qualitative evidence that good quality engagement-based ATD in the community with case management can meet the needs of both the government and individuals. They are designed to fill the gap between ATD discourse and ATD practice. These pilots and evidence from them should encourage more dialogue with governments on solution-based approaches that reduce the use of detention. They also signal a shift in advocacy style, from “telling the governments what to do” to “showing the governments what they can potentially do”.

The second barrier has been a lack of alignment between the national-level evidence-gathering and advocacy, and EU-level advocacy. The project brings in national-level implementers, regional actors and an evaluator from the very beginning of the process in order to achieve effective synergy, production of evidence and effective messaging rooted in practical examples.

Involving a number of national and regional actors with different expertise and strengths, this innovative and exciting project also presents many challenges.

For example, previous experiences of civil society-led engagement-based ATD in the community suggest that successful implementation of ATD requires a constant learning process. There is no ‘one-size-fits-all’ solution to ATD or case management, and the implementers need to be able to come up with their own practices and solutions. In terms of evidence-gathering, there is no consensus on how the effectiveness of case management should be monitored, so this needs to be developed and tested over time with a particular focus on qualitative data. Another major challenge has been effective communication and coherent messaging of the pilots, taking into account the highly politicised nature of migration governance and a lack of consensus among the governments, civil society organisations and other stakeholders about what ATD means and can do.

More information about the Network is available at www.atdnetwork.org

Methodology

The evaluator supported the pilot implementers in developing and implementing a monitoring system from March 2017 onwards. The ATD pilots were continuously assisted in understanding and utilising the agreed monitoring system in regular Network meetings and other meetings.

The following methods, material and data were used for interim evaluation and compiling this report:

- ▶ Reviewing grant applications and monitoring reports submitted by the implementers and the Network
- ▶ Analysing information obtained as a participant observer at Network meetings (March 2017, June 2017, December 2017 and June 2018) and other face-to-face and on-line meetings with Network members
- ▶ Developing a client summary sheet (see [Annex 1](#)) to capture qualitative data on the impact of case management through a series of consultations with Network members, including one trial run
- ▶ Compiling and analysing data collected through the client summary sheets, which were completed by the implementers
- ▶ During the process of finalising this report, the evaluator presented some of the data to the pilot implementers (project managers and case managers) and the other Network partners to receive their feedback.

Several limitations in data collection and data analysis have been identified below. Other limitations will be highlighted throughout the report:

- ▶ An optimal evaluation methodology would have involved, for example, direct examination of the case files and interviews with the individuals on the pilots by an evaluator. For reasons of limited time and resources, this was not possible. This report should serve as an initial study of the impact of case management which will be built on further.
- ▶ Data, including client summary sheets, submitted by the implementers was accepted as given. No triangulation was conducted to verify accuracy of the submitted data.
- ▶ There was a discussion of whether the sample size of qualitative data (31 out of 93 active cases) was too small to produce specific observations about the nature of the impact of case management. The external evaluator took the view that the sample size in itself does not prevent us from concluding whether there was an overall positive or negative qualitative impact⁴.

A further evaluation exercise is planned to build on this interim evaluation.

⁴ A total of 31 client summary sheets were completed for the purpose of the interim evaluation exercise. This number represents 33% of the total number of active cases (93) at the time of data collection. At that time, the Bulgarian pilot had 50 cases, the Cypriot pilot had 20 cases and the Polish pilot had 23 cases. The following method was used to choose representative samples from each pilot. The Bulgarian pilot was providing case management to migrants from ten countries and the implementer decided to randomly select one client summary sheet from each of these ten nationalities. The Cypriot pilot randomly chose ten cases. The Polish pilot had been running only for eight months when the interim evaluation took place and some of the cases were still very new. Therefore they chose 11 cases which had been in the pilot longer than the others to ensure that the client summary sheets can capture (relatively) long-term impact of case management.

Engagement-based alternative to detention pilot projects: from theory to practice

The key observations and learning from the process of setting up the engagement-based ATD pilots in the community in Bulgaria, Cyprus and Poland were the following:

- ▶ **A relatively small amount of financial resources from private foundations can enable the establishment of engagement-based alternative to detention (ATD) pilots in the community based on an individualised case management approach which generate rich advocacy, learning and evidence building opportunities.**
- ▶ In designing and setting up the pilots, the implementers used the **International Detention Coalition (IDC)'s Community Assessment and Placement Model (CAP)** as a conceptual framework. Its non-prescriptive approach seems to have been helpful: the model outlines a structure and a process that can be adapted to each national context, while reminding the implementers how necessary elements of ATD should come together to achieve optimal results. It also encourages each pilot to creatively use resources that are available in each national context.
- ▶ **Even with such a Model being available, significant amounts of time, preparation and reflection were required to set up and operationalise engagement-based ATD programmes in the community from scratch. The preparatory tasks included, for example, developing protocols and guidance for case managers and informing and gaining buy-in from stakeholders who were unfamiliar with engagement-based alternatives to detention or case management. The pilots also needed adjustments after they had started.** All the implementers reported that this initial process of setting up the pilots **required more time than anticipated** (3-6 months). The pilots continued to modify and adjust their structure and practice as they gained more knowledge and experience⁵. The Network provided vital space for the implementers to work on such teething problems together. None of the ATD pilots operates as a formal part of the existing migration system and a certain degree of improvisation was necessary. Awareness of ATD from other stakeholders was also relatively low in each country. However, the fact of implementing the pilots appears to have given implementers not only confidence but

authority and legitimacy when engaging with other stakeholders⁶.

- ▶ **Building competency in case management was a challenge for all.** While all the implementing organisations already had core competency in conducting case work (they all provide legal advice as organisations), this holistic social work approach of case management in the context of ATD was difficult to learn and apply in practice. **An ongoing series of peer-to-peer reflection sessions to learn from their own and others' experience** organised by the Network was noted by all as helpful. Ongoing learning appears necessary: case managers appear to be torn between assisting individuals to achieve case resolution in an open-minded manner and wishing to see a certain outcome. There may also possibly be some confusion around what case management does or does not include or how case management is distinct from straightforward legal advice.⁷

Process of setting up the pilots

The NGOs the Center for Legal Aid – Voice in Bulgaria and the Bulgarian Lawyers for Human Rights (Bulgaria), the Cyprus Refugee Council (Cyprus) and Stowarzyszenie Interwencji Prawnej (SIP) (Poland) received funding from EPIM to develop and implement engagement-based ATD pilots in the community. All implementers decided to use IDC's Community Assessment and Placement (CAP) Model for reference.

The process of setting up the pilots was a challenge because of a lack of positive examples to learn from. Europe does have several programmes which could be potentially considered as alternatives to detention in the community, such as the Returns Houses in Belgium or Family Returns Process in the UK. However, in some crucial aspects, they do not appear to satisfy IDC's 'Foundations of effective case management' framework⁸. Firstly,

⁵ These involved internal reviews within each pilot as well as utilising space offered by the Network for joint learning, reflection and discussions. The pilot implementers were also required by EPIM to provide regular monitoring information.

⁶ The Cypriot pilot notes, for example, that the way that the organisation has consistently raised the issue of ATD for some time and is now demonstrating how ATD could work in their national context has given them a leadership role in ATD advocacy in Cyprus

⁷ Sometimes in the way that case managers describe their work there was an impression that case management was equated with provision of legal advice.

⁸ IDC's 'Foundations of effective case management' includes elements such as early intervention, face-to-face, one-one-one contact, regular assessment and review, confidentiality and information management, consulting key stakeholders, trust, building rapport, consistent relationships and information provision, explore all available options to

they are almost exclusively focused on returns instead of exploring all options to achieve case resolution. Secondly, these programmes do not deploy *independent* case managers to provide intensive case management support. In any case, the implementers were aware of the importance of developing a pilot that responds to each respective national context.

To overcome this absence of positive examples to follow, the implementers invested heavily into process of developing their own programmes. Aside from studying the CAP model in detail, some of the practical steps taken included:

- ▶ Analysing the national context to identify how the pilots can progress ATD advocacy⁹ aimed at systematically reducing detention
- ▶ Reviewing relevant literature on good practices and recent development on ATD such as the UNHCR/IDC Vulnerability Screening Tool
- ▶ Identifying individuals and groups that pilots seek to engage
- ▶ Developing procedure, protocol, methodological guidelines to be followed by the pilots¹⁰, including screening and assessment process, risk assessment etc.

- ▶ Creating or adapting tools and forms necessary for the pilot administration and monitoring, staff recruitment and (ongoing) training¹¹
- ▶ Conducting stakeholder engagement, particularly service providers to whom referrals might be made¹² or are taken from and the authorities who need to be aware of the pilots
- ▶ Setting up monitoring and evaluation framework¹³

The pilot implementers were clear from the beginning that involving the authorities wherever possible was a vital part of their work: they were conscious that the pilots are not merely service delivery projects but rather part of a larger advocacy plan, the ultimate aim of which is to persuade the authorities to minimise the use of detention. We have not yet assessed to what extent the authorities in these three countries have been sensitised about engagement-based alternatives to detention in the community or understand the benefits of case-management in migration governance. However, when the pilots and the authorities are dealing with the same individuals, the implementers were occasionally able to demonstrate to the authorities the potential benefits of their holistic approach.

empower individuals to make decisions, clear roles and expectations, resources and options for individuals as needed. IDC (2015), *There Are Alternatives* p.50.

⁹ Note both the Bulgarian and Cypriot pilots benefited from previous grants from EPIM which provided them with an opportunity to begin consideration of alternatives to detention in their respective national context. The Bulgarian implementer was involved as one of the stakeholders of an ATD working group in Bulgaria facilitated by another NGO in 2016. The Cypriot implementer produced a research paper on the possibility of developing and implementing ATD in Cyprus in 2016.

¹⁰ The Network meetings in Sofia in June 2017 was largely devoted to sharing such information (including forms they are using to record their case management work) amongst the implementers to encourage peer-to-peer questioning and reflection.

¹¹ While the Polish and Cypriot pilots were delivered by their organisations' existing staff members, the Bulgarian implementer initially trained and recruited new staff members (trainees) to join their case management team. The trainee posts were later deleted.

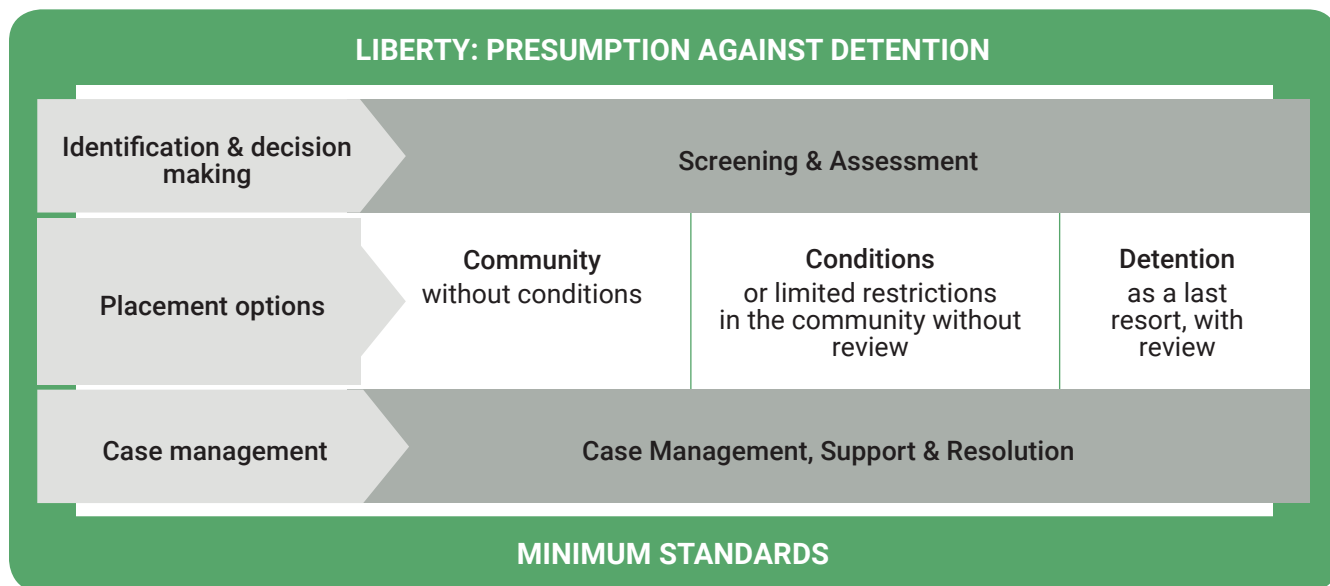
¹² The Cypriot pilot hosted a well-attended ATD workshop for civil society organisations together with International Detention Coalition and Detention Action in December 2017.

¹³ Developing a monitoring and evaluation framework for case management started with a great deal of uncertainty and perhaps scepticism as to whether it was at all possible to measure qualitative impact of case management delivered by different case managers in different countries across the board. Initially, there was no consistent understanding of what case management is, its purpose, its success indicators or what it should look like. Gradually, a firmer consensus on and shared understanding of case management has emerged although variations in the case managers' approach to case management remain.

International Detention Coalition's Community Assessment and Placement model (CAP)¹⁴

The Community, Assessment and Placement (CAP) model was developed based on global research on alternatives to detention by the International Detention Coalition. The model is a tool designed to enable 'governments, civil society organisations and others to review current migration governance systems and identify how they can be improved to reduce the use of detention' (Detention Action (2016), p.17). The model is underpinned by two principles, liberty (presumption against detention) and minimum standards.

Its interlinked components are identification and decision-making (screening and assessment), placement options and case management. 'The unique advantage of the CAP model is that it draws attention to elements other than detention laws, practice and conditions and facilitates a more holistic approach to detention reform' (Detention Action (2016), p.19) Further information about the CAP model is available from The International Detention Coalition (IDC) (2015), *There Are Alternatives: A Handbook for Preventing Unnecessary Immigration Detention* (Revised).



¹⁴ IDC (2015), *There Are Alternatives*. A brief description of the CAP model is also available in Detention Action (2016), *Without Detention* p.17-19.

Pilot project profiles – similarities and differences

All the implementers are relatively small specialist NGOs with technical capacity to provide legal and other support, such as psychological or integration support, primarily to asylum seekers and also other migrants. Prior to the ATD pilots, however, none of the implementers had specifically provided case management support to individuals.

While it is not suggested that future ATD implementers ought to share the same organisational characteristics as these pilots, there might be possible advantages in terms of their ability to deliver the pilots. For example:

- ▶ The organisations have existing knowledge and expertise in asylum, migration and detention issues as well as in conducting direct face-to-face client work with the target populations. They can tap into this when designing and delivering pilots;
- ▶ Due to their longstanding work on the ground, the organisations have favourable reputations, including

as an independent body from the authorities, among refugee and other migrant communities, NGOs and stakeholders. This makes it easier for the individuals and other institutions to trust the organisations¹⁵ and work collaboratively with them, for example, when establishing formal referral mechanisms.

- ▶ The organisations provide legal advice and have core infrastructure to support recording of case progression data in an advice setting. While case management is distinct from legal advice, which is considered to be part of minimum standards in the CAP model, the organisational competency to provide structured advice such as legal advice (as opposed to informal emotional support) guarantees a certain level of professionalism and ability to conduct monitoring of data.

¹⁵ In fact, 42% of clients whose case management data was analysed for this report were the implementers' existing or former clients.

Case study

'Recommendation letters' in the Cypriot ATD pilot project

After meeting Mr X in detention and conducting face-to-face screening and assessment, the case manager sent, with his permission, a 'recommendation letter' to the migration department and the ombudsman's office. The letter explained that, having considered Mr X's needs, strengths, immigration history and other circumstances, the pilot concluded that the most appropriate placement for Mr X is in the community and that he had agreed to participate in the project. Although no formal response was received, Mr X was released from detention and is now working with the case manager on his case.

This practice of preparing 'recommendation letters' appears to be an effective way to increase stakeholders' understanding of the CAP/ATD model in this particular national context, especially as they demonstrate practically how individualised screening and assessment should inform placement decision making. The ombudsman's office commended the clarity and usefulness of the letters, pledging to support the pilot further. On another occasion, an immigration liaison officer at one of the detention centres commented how case management could lead to higher levels of collaboration between individuals and the authorities and suggested to the pilot that they prepare a 'recommendation letter' for a specific individual to be released into the community. In a separate development, when the case manager shared with the detention centre director some of the examples of the 'recommendation letters', the director welcomed the initiative, having clarified however that he himself does not have detention decision-making power.

The teams of case managers involved are small, containing between two and four people. This allows for relative ease of quality control and establishing a coherent approach to case management as a team, which is essential during the period of training and learning.

There are also critical differences between the pilots. Some of these differences were down to the types of individuals the pilots were primarily seeking to engage. However, most significant were differences between migration systems, rules and practices and availability of civil society and other infrastructure in each of the three countries. These structural differences have a tangible impact on irregular migrants' life chances and the ways that the pilots had to design their working methodologies. Such differences introduce challenges and raise a number of complex questions when we try to interpret the aggregated case management data during monitoring and evaluation. It is also a stark reminder that there cannot be an one-size-fits-all approach to community-based ATD programmes because each programme will inevitably need to be developed carefully in a way that is tailored to the national context. These issues will be explored further in the next evaluation report.

What types of migrants are supported by the pilots?



Bulgaria: migrants who are in an irregular situation or about to lose the legal right to be on the territory, placing them at risk of detention



Cyprus: people in detention and at risk of being detained, including asylum seekers, refused asylum seekers, irregular third country nationals and people considered to be unremovable.



Poland: migrants in return procedures, including refused asylum seekers, who are unsuitable for detention due to their vulnerability. Some are already placed on reporting conditions. The pilot tries to engage them while they are in detention or are being considered for detention.

Key components of the pilots and case management process

This section provides brief explanations of some of the key concepts and components that make up these three engagement-based alternative to detention pilots. The brief descriptions below are not intended as replacements for full explanations which are available in the International Detention Coalition (IDC)'s report, *There Are Alternatives: A Handbook for Preventing Unnecessary Immigration Detention* (Revised), 2015.

Case management

These engagement-based ATD pilots were specifically built around case management, a crucial principle that underpins effective ATD.

“Case management is a social work approach which is ‘designed to ensure support for, and a coordinated response to, the health and wellbeing of people with complex needs’. Many countries use this approach in their alternatives to detention programmes, including Sweden and Australia. In terms of overall approach, alternatives can broadly be divided into those that rely on reduced degrees of coercion and those that focus on engagement with migrants to promote cooperation with immigration systems. Case management models involve a case manager, who is not a decision-maker, providing a link between the individual, the authorities and the community. The case manager ensures that the individual has access to information about the immigration process and can engage fully, and that the government has up-to-date and relevant information about the person.”¹⁶

Case management does not include legal advice, accommodation or other basic services, but aims to connect individuals with these necessary services and support. They are considered to be minimum standards within the CAP model which states must respect and uphold for all individuals regardless of their immigration status. Minimum standards also include respect for fundamental rights, basic needs, formal status and documentation, interpretation, fair and timely case resolution and regular review of placement options.

¹⁶ Detention Action (2016), *Without Detention*, p.26

Case resolution

Case managers' role is to assist individuals on the pilots to work towards case resolution.

“Case resolution is not the same as case management although they often overlap. Case resolution is focused on finding a permanent or temporary migration outcome. While this responsibility ultimately sits with immigration authorities, case managers can contribute to timely case resolution by identifying legal, practical and personal barriers to likely outcomes and working on shared solutions. Case resolution can draw from a range of solutions including various visa and departure options.”¹⁷

Screening and assessment¹⁸

Individuals could be accepted onto the pilots when they meet certain criteria, after screening and assessment¹⁹. A screening and assessment process was developed by each pilot through which relevant personal data, information about the person's immigration history, vulnerabilities and community ties can be obtained and considered. The criteria for suitability for the pilot projects include, for instance:

- ▶ Individuals have independent access to means of survival, in terms of accommodation and subsistence;
- ▶ Individuals have shown some interest and willingness to engage with the pilots and work towards their case resolution.

The pilots' overall capacity is limited by the number of case managers working for each. Aside from understanding individuals' situation, screening and assessment also ensures that the specific needs of individuals can be adequately met by the pilots.

Case management process

¹⁷ IDC (2015), *There Are Alternatives* p.52

¹⁸ According to the IDC, screening and assessment are ‘different yet complementary processes’. Screening ‘is the process to obtain basic information and individual attributes, such as bio-data. Information collected during screening includes, *inter alia*, an individual's identity, nationality, legal status, health status, security indicators, vulnerability indicators and compliance history. This information can be used to determine the individual's migration status and to make initial referral, management and placement decisions’. On the other hand, assessment ‘involves a more in-depth evaluation of an individual's circumstances, vulnerabilities and/or risk factors. An assessment may be conducted to evaluate needs identified during screening (e.g. trafficking survivors or stateless) or it may involve an in-depth examination of the appropriate course of action to take for a particular person. An assessment may occur at the same time and by the same person conducting the screening, or it may happen at a later date and on a repeat basis by caseworkers, immigration officials and/or members of the judiciary. Assessments are used to make or adjust management and placement decisions.’ For further information, see IDC (2015), *There Are Alternatives*, p.35-36.

¹⁹ Also see UNHCR/IDC's Vulnerability Screening Tool which further expands and builds on the original IDC formulation on screening and assessment.

Each ATD pilot has an established case management process that is based on the CAP model²⁰. At the moment, all pilots provide case management with no maximum time limit²¹.

²⁰ The table is a modified version of the graph showing the case management process which appears in IDC (2015), *There Are Alternatives* p.49 and includes information that is specific to the pilots.

²¹ This raises a question of whether case managers should be working to build individuals' own coping mechanisms over time so that they can eventually engage with immigration procedures on their own without case management. Another question that is raised here is whether a lack of any time limit places undue pressure on pilot capacity, if the expectation is to continue to provide case management indefinitely until case resolution is achieved.

The case management process stage	Explanation	Example
Referral*	Efforts are made to encourage civil society organisations and other institutions to make referrals of suitable individuals to the pilots. In all countries, the authorities, sometimes including detention centre managers, were informed about the ATD pilots and their case management work. In some cases, individuals were routed into the pilots while they were in detention and were released into the community afterwards.	Bulgaria Community outreach sessions were conducted at various spaces which are used by migrants in irregular situation to encourage self-referrals to the pilot.
Screening and assessment	Individuals' circumstances, needs, vulnerability and most suitable placement options are identified during screening and assessment. This is also a stage where individuals' suitability to the pilots is assessed and they and case managers agree to work together. One of the case managers said that screening and assessment gives him a much better understanding of the individual than the authorities currently do, giving him an advantage in supporting the client to take steps towards case resolution.	Cyprus The team developed a screening and assessment process based on the UNHCR/IDC's Vulnerability Screening Tool.
Case planning	Based on the screening and assessment information, support needs and potential barriers to case resolutions are identified. Individuals and case managers agree how to address them as part of case planning.	Poland The case manager and the individual agreed that addressing his addiction problem would help him to focus on case resolution better.**
Intervention	Case management itself does not include, for example, legal advice, medical care or community activities. However, it can connect individuals with these necessary services and support. Sometimes, intervention simply involves giving individuals productive space to think through their options or focuses on stabilising individuals who are highly anxious and stressed. Sometimes, it involves a preventive measure to address potential disengagement. Note that case planning and intervention are regularly reviewed and repeated.	Poland By liaising with medical practitioners, the case manager ensured that an urgently needed medication was obtained for an individual. Interruption in medical treatment might have de-stabilised the person and caused disengagement from the immigration procedure.
Case closure	This takes place when case resolution has been achieved. As explained above, case resolution involves finding a permanent or temporary migration outcome, from various visa and departure options.	Bulgaria Through case management, a person who was in an irregular situation considered all options available and decided to opt for voluntary departure, in order to re-enter the country on a family visa.**

* Referral is not recognised as one of the stages of case management by the CAP model. However, we included it because it is an important component of these ATD pilots, which are non-statutory and not part of the formal government process, thus requiring a route through which individuals are accepted onto the pilots.

** These case studies are also shared in the latter part of the report.

Measuring the impact of case management

Key challenges in monitoring and evaluating case management and sharing its results²²

Through the Network, the pilot implementers and the evaluator co-designed a common monitoring and evaluation framework to measure the qualitative impact of case management in influencing individual's levels of engagement with immigration procedures and ability to work towards case resolution. In doing so, we tried to address the tension between the quantitative evidence that stakeholders such as governments tend to seek and the primarily qualitative changes and data that are sought by the pilots by bringing them together in the report. Examples of the types of data and information being sought are shown on the right hand side.

In an attempt to collect qualitative data of individual cases, there was a danger that we would end up simply with anecdotes. Therefore, in order to collect qualitative data about the impact of case management in a structured manner across the ATD pilots, a client summary sheet was developed through the Network²³. The client summary sheet asks the case managers to answer a set of questions regarding case management and to record levels of impact their case management has had on individuals from a number of different angles while reflecting holistically on each case and identifying barriers to case management.

²² Although efforts are being made to answer the question of how to assess alternatives to detention in general, there is still a shortage of discussion about how to measure the impact of case management within engagement-based alternatives to detention in the community. This is understandable: ATD discussions have generally focused on typologies (reporting, passport surrender, designated residence etc) with scant attention to how individuals are responding to such ATD and why that might be. Traditional ATD discussions often do not consider the role played by case management. For example, UNHCR has recently issued a document – *UNHCR BEYOND DETENTION TOOLKIT Guiding Questions for the assessment of Alternatives to Detention*. While the document lists, as one of the potential assessment questions, 'Does this ATD contribute to better cooperation between the asylum-seeker or refugee and the authorities/the asylum process (take into consideration here the absconding/ appearance rate, whether the level of obligations and constraints are not overly onerous)?', it does not explain how this can be done. IDC's draft paper, *Evaluating Alternatives to Detention* (on file with the evaluator) does note 'While authorities are interested in rates of absconding, an evaluation is also an important opportunity to try and understand the reasons why people either remain engaged or abscond. Relevant factors include stage of migration process, anticipated length of time until case resolution, intended destination, local family or community ties, compliance to date, and levels of trust in the process. This qualitative data can be elicited by case managers during intake and assessment interviews, with data recorded on case notes.' However, again, exactly how such data should be recorded, gathered and analysed remains unexplored. We hope our present evaluation exercise will contribute to this ongoing discussion.

²³ Further information about client summary sheet is available in [Annex 1](#).

The pilot implementers and the evaluator co-designed a common monitoring and evaluation framework to measure the qualitative impact of case management in influencing individual's levels of engagement with immigration procedures and ability to work towards case resolution.

Questions which are often asked about ATD

How many people are processed by the ATD?

How many people return to their country of origin?

How many people regularise their status?

How many people abscond?

How many times does the case manager have to meet with individuals?

Data and information that the pilots are seeking to obtain

How do people respond to engagement-based ATD?

How does case management help people to engage with immigration procedures and take steps towards case resolution?

How can case management be provided?

What can undermine the impact of case management and how?

Developing client summary sheets

As mentioned in an earlier section, an optimal evaluation methodology for analysing the impact of case management would have involved examination of the case files and interviews with the individuals on the pilots by an evaluator. For reasons of limited time and resources allocated for the evaluation, this was not possible. Therefore, we had to choose another method that allows much of the initial data collection to be completed by the implementers by themselves. Given that the implementers' time is also limited, we were conscious that the framework would have to be relatively simple for them to use while allowing for deep, individualised, qualitative data – particularly changes in individuals over time – to be collected.

The client summary sheet which was used for this interim evaluation went through a series of stages before the final version was agreed.

-
- ▶ Two dedicated sessions took place during two Network meetings where the evaluator and the implementers discussed monitoring and evaluation process. The topics of discussion included:
 - Potential indicators of effective case management by revisiting IDC’s *There Are Alternatives* and other material.
 - What case management data the pilots should capture through their day-to-day monitoring work to prepare for a future evaluation process.
 - Types of questions which should be asked to establish effectiveness²⁴ of ATD and individuals’ ability to work toward case resolution.
 - Anticipated challenges in collecting comparable data across the pilots and how to overcome such challenges.
 - The format of the future evaluation report.
 - ▶ Through the discussions above, it was agreed that a client summary sheet should be developed.
 - ▶ The evaluator prepared the draft client summary sheet and the implementers tested it to identify areas of improvement.
 - ▶ The amended client summary sheet was used for the purpose of collecting data for this interim evaluation report. A separate guide for using the client summary sheet was also produced to increase the case managers’ understanding of the questions as well as coherency of answers given.
 - ▶ After the draft version of this report was prepared, the evaluator and the implementers reviewed the client summary sheet again and agreed to strengthen some of the questions in the sheet and to discuss how qualitative data can be better captured for the evaluation exercise, including appropriate format of case studies.

The task of co-designing our common monitoring and evaluation framework in general and the client summary sheet in particular was time-consuming but valuable. As discussions and practices on engagement-based alternatives to detention evolve in the future, we expect more refined evaluation frameworks that capture the qualitative impact of case management will emerge among the practitioners.

“As discussions and practices on engagement-based alternatives to detention evolve in the future, we expect more refined evaluation frameworks that capture the qualitative impact of case management will emerge among the practitioners.”

²⁴ When considering the meaning of “effectiveness” of ATD, we examined IDC’s *There Are Alternatives* but also looked at documents such as the Return Handbook of the European Commission.

Interim results of the pilots

While the numbers are useful indicators of the scale of the pilots, they alone tell little about how case management stabilises individuals, helps them explore all options available or supports case resolution in the community.

This section shares the interim quantitative and qualitative evaluation results of the engagement-based ATD pilots in Bulgaria, Cyprus and Poland²⁵.

Key findings

- **The vast majority (97%) of individuals remained engaged with immigration procedures through engagement-based ATD in the community:** only 3% disengaged or absconded²⁶. Amongst people at risk of disengagement, absconding or detention, these ATD pilots have successfully identified individuals who are able to work towards resolution of their cases in the community.
- **Quality case management can increase individuals' ability to work towards case resolution.** Even with various levels of vulnerability and wide diversity of people's circumstances, qualitative evaluation suggests that holistic and individualised case management can have a positive impact on individuals' ability to engage with immigration procedures, including cases of great complexity and with previous experience of detention, when certain conditions are met.
- **Case management alone, especially when applied only at the end of the immigration process, cannot rectify structural and long-term problems in the migration system that sometimes undermine case resolution.** Nor can it compensate for gaps in provision of minimum standards by states. While it appears that a certain period of case management is necessary to stabilise the person, we cannot draw the conclusion that longer case management would automatically lead to case resolution when other barriers to case resolution remain unaddressed.

Quantitative outputs

The Network participants were unsure that quantitative outputs alone satisfactorily convey the value of their case management work on individuals. On one hand, some stakeholders such as the governments and some NGOs are exclusively interested in whether ATD pilots deliver high numbers of voluntary departures or show frequent instances of absconding. On the other hand,

the engagement-based ATD pilots in the community focus more on how case management interacts with individuals and deal with the question of how the quality of the overall migration system can be improved through case management to ensure fair and timely case resolution for individuals without resorting to detention.

The information on pilots' quantitative outputs on the next page, therefore, should be seen in that context of tension, where quantitative and qualitative data must be understood in a complementary manner. While the numbers are useful indicators of the *scale* of the pilots, they alone tell little about *how* case management stabilises individuals, helps them explore all options available or supports case resolution in the community. In addition, when looking at these data, we need to recognise that human behaviour is unpredictable: it is never possible to know in advance precisely how individuals on the pilots respond to and interact with case management.

With these caveats in mind, the interim quantitative data shows that the pilots provided case management support to a total of 93 individuals roughly in the first 12 months. Of those, we conducted qualitative analysis of

²⁵ There was a concern that the small scale of each pilot might undermine the credibility of our findings. This was raised by the authorities, other NGOs and EPIM. The Network's view is that the purpose of this present exercise is to investigate whether the engaged-based ATD pilots' case management increases individuals' ability to work towards case resolution better than detention or not, and it is not necessary to conduct a large scale qualitative analysis. The numbers alone are not necessarily an indication of quality of ATD as they do not explain how people engage or disengage with immigration procedures and how case management can intervene to influence the level of engagement. This section therefore pays closer attention to profiles of individuals and qualitative impact of case management on them by zooming into the more in-depth data of randomly selected 31 cases out of 93 cases.

²⁶ Note that several individuals received case management support while in detention, particularly while the pilots were in the process of negotiating their release from detention or their exceptionally severe vulnerabilities required extra support on a humanitarian ground.

31 cases, around 10 randomly chosen sample cases from each pilot. **The vast majority (97% or 90 individuals) remained engaged with case-management based ATD in the community or achieved case resolution: only 3% (3 individuals) disengaged or absconded.**

It is important to recall that each pilot conducts its own **screening and assessment** before accepting an individual onto the pilot. This ensures that the support offered by the pilot sufficiently meets the needs the person to enable him or her to begin to work towards case resolution. Those who do not meet the criteria are not accepted onto the pilot²⁷. The high rate of engagement with the pi-

²⁷ For example, the Cypriot pilot conducts assessment prior to proceeding in case management. The criteria include a) Willingness of the person to collaborate, b) Type and severity of criminal convictions, c) Vulnerabilities that do not permit collaboration, d) Possibility for basic needs to be covered in case the person is released from detention (however this has been bypassed in cases where it was considered more important to advocate towards the release from detention due to history of prolonged detention and impact of detention on the person's mental state), e) If return or release is imminent. They explain 'We have found this to be time saving especially for cases where it is obvious that there is no willingness to collaborate or where the options in what can be done for the case are limited or where it is obvious that the state is hostile towards the case (i.e. in cases of persons with serious criminal convictions). Many cases did not proceed as by the time we











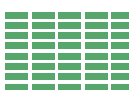


lots and immigration procedures suggests that **amongst individuals who might be at risk of disengagement, absconding or detention, these engagement-based ATD pilots have successfully identified individuals who are able to work towards case resolution in the community.** It is also worth noting that case management itself does not include, for example, provision of accommodation or subsistence, legal advice, medical care and other basic services: its function is to co-ordinate support and services that are already available in the community. It is possible, therefore more individuals could have benefited from the pilots if more support and services were already available in the community.

At the screening stage, the case managers assess the **level of risk**²⁸. Here, we define the risk as '(perceived)

screened them they were either deported or released and/or were not interested to collaborate.' You can also see in the table below that 24 people who were screened by the Cypriot pilot ultimately did not receive case management support.

²⁸ The Network discussed at length how to approach this concept of risk and agreed to use the above definition when conducting monitoring and evaluation. It was agreed that awareness of risk can help the pilots to consider how to provide structured support to individuals to manage it, what interventions to deploy as well as to understand and assess each individuals' situations.

A summary of pilot outputs obtained from the monitoring reports submitted by the implementers

	Bulgaria	Cyprus	Poland
Figures as of:	January 2018	March 2018	April 2018
Length of the pilot	12 months	12 months	11 months
Total number of individuals screened	Not known	 44	 33
Total number of individuals who have received/who are receiving case management support	 50	 20	 23*
Number of individuals who have reached case resolution, of whom:			
▶ Individuals who secured status	 2	 1	0
▶ Individuals who returned to their country of origin	 4	0	0
Number of individuals absconded or disengaged**	 2	0	 1
Number of individuals who have continued to engage to date	 42	 20	 22

* Many of the 23 adults are part of family units and have a total of 21 children between them.

** The numbers of individuals who did not abscond or disengage are therefore 48 (Bulgaria), 20 (Cyprus) and 22 (Poland), a total of 90 individuals.

risk of the person disengaging from the pilot and/or immigration procedures, including whether the person might abscond and disengage from the immigration procedures altogether, over time as a result of case management²⁹. The pilots examined particular experiences of the individual such as release from detention, past breach of conditions or long term irregularity as potential risk markers while also explored potential mitigating factors or what could be offered through case management to mitigate risks before arriving at the final risk assessment. The purpose behind this risk assessment is not to eliminate all risks or take on only individuals assessed to pose low risk but for the case managers to develop general awareness of potential barriers and challenges to case management and consider whether realistic tools are available to manage and overcome such challenges. The table and the case studies on this page show that there are considerable differences in terms of the (perceived) risk levels of individuals each pilot has taken on. They also show how past incidents which could be considered as indicators of high risk did not necessarily become the reason for the pilots not to work with the individuals.

Breakdown of risk assessment of 31 sampled individuals

	Low risk	Medium risk	High risk
Bulgaria	1	3	6
Cyprus	10	0	0
Poland	9	2	0
Total	20 (65%)	5 (16%)	6 (19%)

Case study (A6³⁰)

The case manager assessed the person to be medium risk, although he had been returned to country X under Dublin procedures and could be considered at 'flight risk' by others. The case manager made this assessment based on his current approach to his situation. In fact, after being returned to country X, he became more willing to comply with the asylum procedure and is now actively involved in pursuing his legal case with his legal advisors. He is also being supported by friends in the community and understanding employers. Although he suffered from depression and hopelessness, progress in his asylum case is giving him a sense of optimism. Although 'risk' might always be present, case management and legal advice appears to help him to continue to engage with the immigration procedures, even after the initial refusal of his asylum claim.

Case study (B1)

The pilot assessed the person to be low risk, although he did not comply with the previous condition of release from detention. Since then, he had been in irregular status for a number of years. The case manager decided to work with him because of his willingness to contact the authorities. The person knows that the chances of him being regularised are very slim and this causes a great deal of anxiety for him. Yet, case management is providing safe space for him to consider consequences of his actions. He is more stabilised now and is able to take steps to progress his case.

²⁹ This is the definition of risk provided in the guide to completing the client summary sheets for the case managers.

³⁰ These are reference numbers given to each client summary sheet.

Profile of individuals who received case management

The implementers completed the agreed client summary sheets for approximately 10 randomly chosen sample cases from each pilot. This has given rise to material on 31 cases, which was used for qualitative analysis. Of the 31 cases, for two there was case resolution and the rest remained engaged with the pilots.

General observations:

- ▶ The profile of sampled individuals is highly varied. This is to be expected as each pilot operated with a distinct set of criteria. For example, Cyprus focused on people in detention and at risk of detention: this could range from newly arrived asylum seekers to long-term undocumented individuals in the community.

- ▶ The sampled cases showed various, and in some cases relatively high, levels of vulnerability (65%).
- ▶ 77% of the sampled cases have experience of detention, but their earlier detention did not lead to their cases being resolved.
- ▶ Most of the individuals who entered the pilots have been in the country longer than one year. Many are long-term residents with strong community ties. This might be due to the pilot design: in Bulgaria, for example, pilot participants need to have access to accommodation and subsistence (as the pilots cannot cover these costs), so this naturally led to a situation where many of the participants who are accepted onto the pilot have established community ties.

Gender Gender breakdown was 71% male and 29% female, with little variation between pilots.

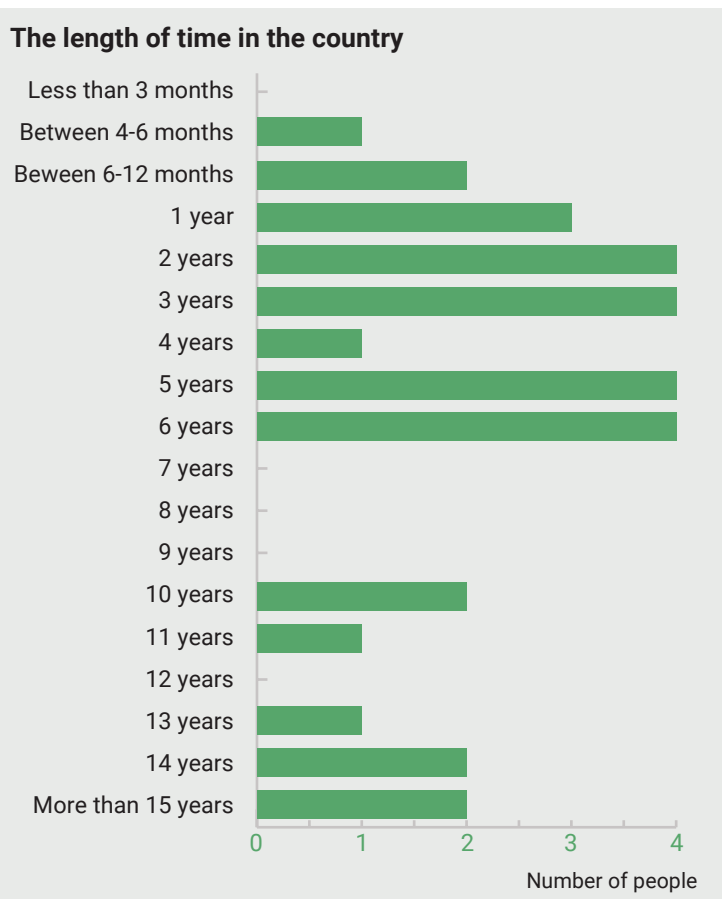
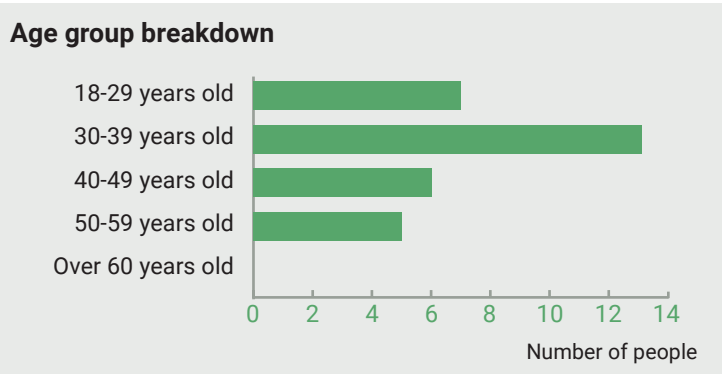
Nationalities The sampled cases included nationals of Iran, Cameroon, Russia, Georgia, Chechnya, Ukraine, Tajikistan, Ethiopia, Bangladesh, Vietnam, Cote d'Ivoire, Guinea, Eritrea, Iraq, Afghanistan and one stateless person.

Age group breakdown 77% of those in the sample were over the age of 30 and 35% were over the age of 40.

The length of the time in the country 90% had been in the country more than one year, 68% had been in the country more than three years and 26% had been in the country for more than 10 years at the time of entering the pilots. The sample, therefore did not contain many new arrivals. It was clear from some of the accounts provided that many, in particular those who had remained in an irregular status for a long time, had complicated immigration histories. In some cases, the person had been irregularly in more than one country.

Community ties 94% had close ties to communities (e.g. family, work, nationality group).

Vulnerability 65% were identified as being in a situation of vulnerability (i.e. fitting in one of the domains recognised in the Vulnerability Screening Tool³¹).



³¹ UNHCR/IDC (2016), Vulnerability Screening Tool, Identifying and addressing vulnerability: a tool for asylum and migration systems www.unhcr.org/uk/protection/detention/57fe30b14/unhcr-idc-vulnerability-screening-tool-identifying-addressing-vulnerability.html

Experience of detention 77% had experience of detention, for a total of approximately 24 years.

Length of time in pilots Every sampled individual has been in the pilot at least for one month and the longest period was 12 months.

Individuals' routes into the pilots 42% are the implementers' own service users, 26% are from detention, 10% are referrals from other organisations.

► **Bulgaria**

- Former clients: 5,
- Referrals from other clients: 3
- From detention: 1
- 1 referral from IOM

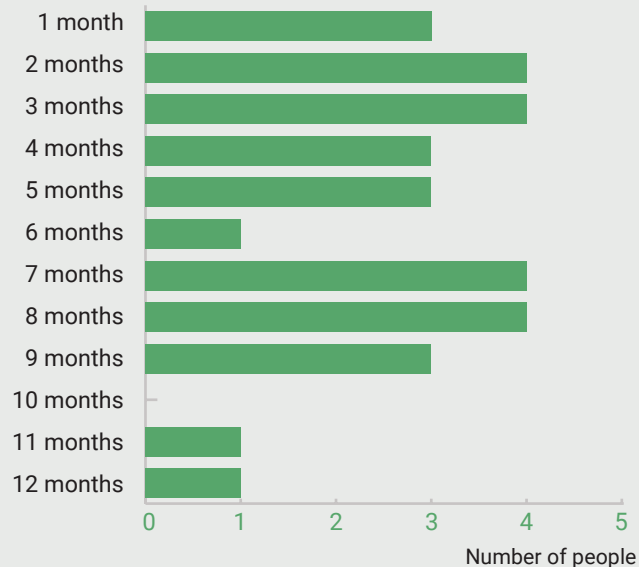
► **Cyprus**

- From detention outreach: 5
- referrals from other NGOs: 2
- Existing clients: 2
- 1 self-referral from detention

► **Poland**

- Existing clients: 7
- Referrals from own lawyer at detention: 2
- 1 referral from existing client
- 1 from community

Length of time in pilots



Qualitative impact of case management

In order to capture the impact of case management in the ATD pilots, the case managers were asked to reflect on and measure how case and to what degree case management influenced different aspects of individuals' behaviour, approach and outlook over time, comparing the individuals' initial situation at the time of entering the pilot (base line information) with their present situation whilst in receipt of case management support. To create as full a picture as possible of how the relational approach³² of case management with individuals in complex situations works, the case managers were also encouraged to outline how barriers have been removed as a result of case management. (See 'Measuring the impact of case management' section above).

Using the agreed client summary sheet, case managers were asked to answer **six questions** to establish qualitative changes triggered by case management over time and choose one of the **six levels of impact** to describe their assessment of impact accordingly. While some questions overlap with each other, they are intended to guide case managers to adopt different perspectives to assess the impact of case management on the same individual holistically, rather than fixate on a single positive or negative aspect.

The questions on the client summary sheet were also developed by grouping into six areas the potential indicators of effective case management in the community³³.

The six questions used in the client summary sheets were as follows:

1. In your view, has your case management support had any positive impact on the person's ability to engage with the immigration procedures over time?
2. In your view, has your case management support had any positive impact on the person's level of risk over time?
3. In your view, has your case management support had any positive impact on the person's level of trust in the system?
4. Has case management improved the individual's ability to participate in informed decision making process in immigration procedures over time?
5. Has case management contributed towards timely and fair case resolution for the individual over time?
6. Is case management improving coping and well-being of individuals (that allows them to better engage with immigration procedures) over time?

³² In discussing case management, the pilots often discussed the importance of trust in the relationship between case managers and individuals.

³³ The evaluator and the implementers developed the questions, with reference to International Detention Coalition's *There Are Alternatives* and EU Handbook on Return.

The level of impact was divided into six categories: negative impact, no impact, limited impact, some impact, huge impact, don't know/can't tell. The case manager was asked to choose one category in answer to each of the six questions.

The last three questions were elaborated and expanded by further prompt questions. The answers to these prompt questions could be given in a less ambiguous manner: Yes, No or Don't know. They allowed the evaluator to pose more specific and concrete questions which relate to different aspect of case management. More questions can also be added for future evaluation if deemed necessary.

“The positive impact of case management was particularly noted in ‘ability to participate in informed decision making’ (94%) and ‘coping and well-being of individuals’ (93%).”

What impact did case management have on individuals?

As the following graphs and charts show, in all six aspects, the pilots’ case management appears to have had broadly positive impact. In the vast majority of cases, case management had ‘some impact’ or ‘huge impact’, ranging from a total of 77% to 94% between questions. The positive impact of case management was particularly noted in two aspects: ‘ability to participate in informed decision making’ (94%) and ‘coping and well-being of individuals’ (93%).

In no cases did case management appear to have a negative impact on individual’s ability to comply with the system. On three aspects (‘level of trust in the system’, ‘ability to participate in informed decision making’ and ‘timely and fair case resolution’), in a minority of cases, case management was said to have had ‘no impact’ (3-6%).

Taken together, the data supports our hypothesis that quality case management can improve people’s ability to go through their immigration procedures outside detention and work towards case resolution.

Case managers’ assessment of level of impact of case management on 31 cases:³⁴

	Negative impact	No impact	Limited impact	Some impact	Huge impact	Don't know/can't tell
Ability to engage with the immigration procedures	0%	0%	10%	42%	48%	0%
Level of risk	0%	0%	6%	48%	39%	6%
Level of trust in the system	0%	6%	16%	45%	32%	0%
Ability to participate in informed decision making process	0%	3%	3%	52%	42%	0%
Contributed towards timely and fair case resolution	0%	6%	10%	35%	42%	6%
Coping and well-being of individuals	0%	0%	6%	48%	45%	0%

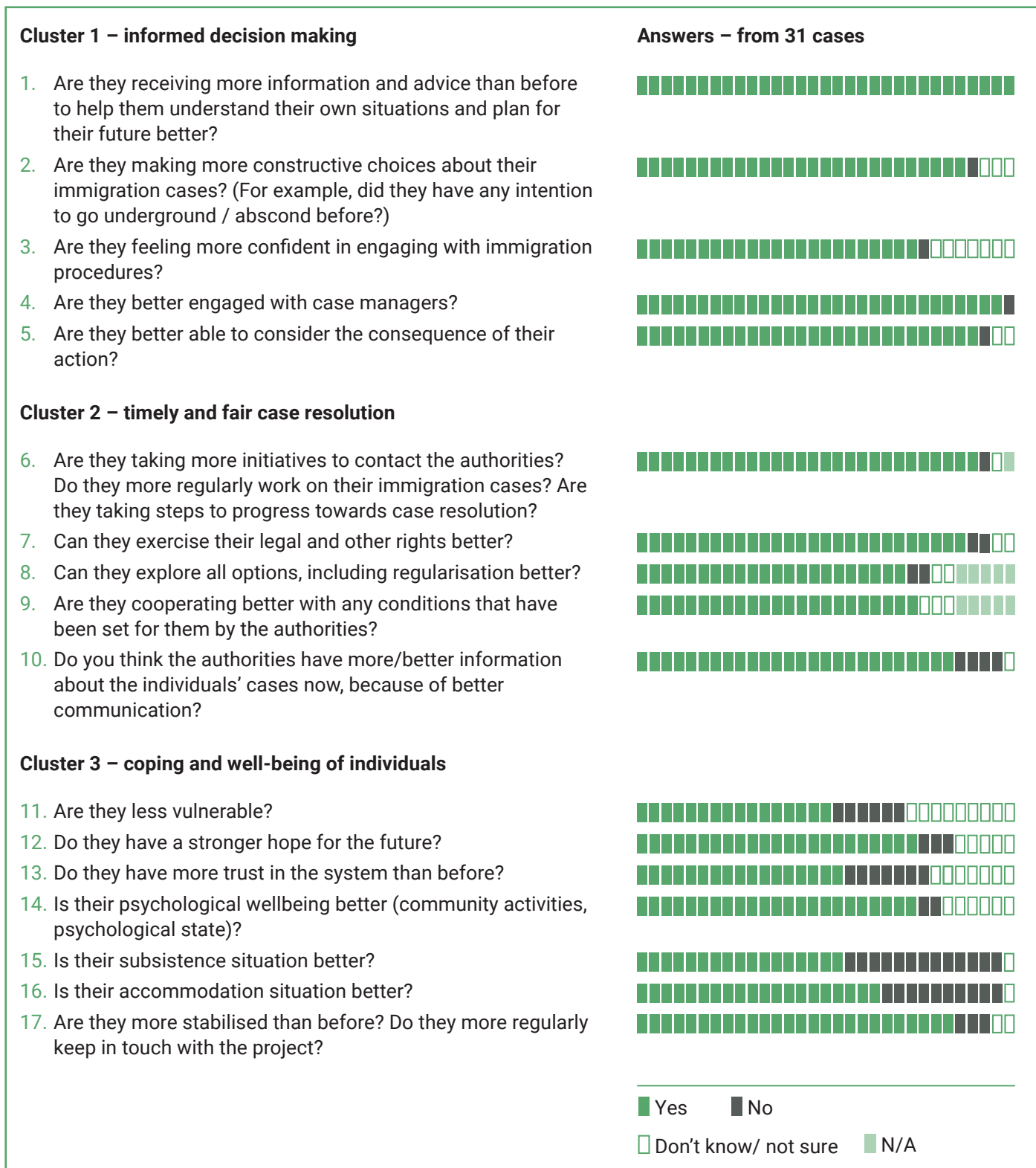
³⁴ For example, in answering the question, ‘In your view, has your case management support had any positive impact on the person’s ability to engage with the immigration procedures over time?’, the case managers assessed that it had negative/no impact in 0% of the cases, it had limited impact in 10% of the cases and some impact in 42% of the cases and so on. Also note that the percentage figures have been rounded down to zero decimal place, therefore they do not add up to 100% all the time.

Answers to prompt questions

The prompt questions are clustered under the three broad questions, which are based on the IDC analysis of importance of case management. They are also formulated from the discussions among the implementers that took place in Network meetings, on questions such as 'What does informed decision making mean?' and 'What does it look like?' They were intended to prompt case managers to think what impact could mean and what potential evidence they should be looking out for to establish whether there was any positive impact.

It was also hoped that they provide a clearer understanding of where the pilots' case management had particularly strong impact on individuals, as well as areas where further efforts need to be made.

The case managers choose answers to the following questions from three options: Yes, No or Don't know.



Below are some of the observations:

The case managers strongly indicated that case management had positive impact on the following: in 87% - 100% of the cases, the case managers' answer was 'Yes'. (The percentage provided in brackets below indicate the proportion of cases for which the answer was 'Yes'). It appears that while provision of legal advice is not part of case management, case management is particularly effective in helping individuals to become more informed of their own situation and also to take practical steps towards case resolution.

Are they receiving more information and advice than before to help them understand their own situation and plan for their future better?	100%
Are they better engaged with case managers?	97%
Are they taking more initiatives to contact the authorities? Do they more regularly work on their immigration cases? Are they taking steps to progress their case resolution?	90%
Are they better able to consider the consequence of their action?	90%
Are they making more constructive choices about their immigration cases? (For example, did they have any intention to go underground / abscond before?)	87%
Can they exercise their legal and other rights better?	87%

Comment from Bulgaria³⁵

'There is evidence that these migrants (on the ATD pilot) are better able to make informed decisions and to participate in their case resolution. Of the 8 case resolutions in the case management component so far, 4 were decisions to return to the country of origin, where these decisions were made in a fully informed and truly voluntary manner, with the migrants having a clear idea and plan for their lives ahead (two of the 4 have since returned to Bulgaria with a permit for regular stay). Many of the rest display increased levels of confidence in the dealing with institutions and functioning in Bulgarian society more generally.'

Other questions to which high proportion of 'Yes' answers were given were as follows:

Do you think the authorities have more/better information about the individuals' cases now, because of better communication?	84%
Are they more stabilised than before? Do they more regularly keep in touch with the project?	84%
Are they less vulnerable?	52%
Do they have more trust in the system than before?	52%

These are particularly subjective questions: we hope that in the future evaluation exercise, interviews with individuals can provide more information on these aspects.

Some prompt questions were ambiguous, inviting very different interpretations or requiring answers outside the available options of 'Yes', 'No' or 'Don't know'. Looking at some of the comments made by the case managers, there is an impression that these questions have been poorly phrased. The questions below will need to be articulated more clearly for the future evaluation:

Can they explore all options, including regularisation better?
Are they cooperating better with any conditions that have been set for them by the authorities?
Is their subsistence situation better?
Is their accommodation situation better?

³⁵ This information was taken from one of their monitoring reports to EPIM.

Discussion

In each case, how case management is received by and impacts on individuals seems to vary, depending on multiple internal and external factors.

This section further examines the findings from the ATD pilots and their potential contribution to ongoing discussions on engagement-based alternatives to detention in the community.

Case management in practice

The 31 cases studied for this interim evaluation offer some practical examples of what case management in practice can look like.

Where a narrative account of case management³⁶ was submitted on the client summary sheets, it generally shows that case management is not a simple, transactional mechanism where an intervention by the case manager (or the individual) automatically and easily results in action by the individual or change or outcome in his or her situation. Neither, is it a series of tick box exercises which are applied uniformly to all individuals. Instead, it is a complex relational mechanism whereby individuals make decisions and act in a highly individualised way in response to case management that takes place in a space of trust with case managers. Case management is therefore responsive to the changing circumstance of the person. The data captured on the client summary sheets also shows that its frequency and intensity fluctuates at different points in time, according to the needs of the individual. In each case, how case management is received by and impacts on individuals seems to vary, depending on multiple internal and external factors.

In some cases, we can see how case management contributed positively to individuals' potential to resolve their cases in the community. In other cases however, there were limitations to what case management could achieve or its ability to address barriers to case resolution as its impact was undermined by structural or other factors beyond the control of the pilots or case management.

Case studies

These case studies briefly illustrate how case managers supported individuals through case management.

Case study – A9

A woman in her late 30s had been seeking to regularise her status over five years, but had exhausted all legal avenues to remain in the country. When she entered the pilot, she had been in a relationship with a citizen for some time and was desperate to stay. Her previous experience of detention had eroded her trust in the migration authorities, and although she could try to return as a spouse, she was fearful to engage with the authorities again. Intensive case management helped her to review her situation, re-consider all options available, and with support, she gained enough courage to initiate voluntary return procedures, knowing all the risks this could entail to try returning to the country legally. She has now been able to re-enter the country as a family member. The pilot supported her for 11 months to complete this process and helped her to take steps towards case resolution.

Case study – A10

An asylum seeking man had been receiving case management for months when he was detained. Through the case management and legal advice, the person had already been well informed of all the possible outcomes of his asylum case and knew that his chances of obtaining asylum were slim. After he was detained, he remained fully engaged the pilot, was not unduly stressed by the detention experience and was able to discuss what further options might be available. As a result, he made a timely and swift decision to return voluntarily to his country of origin from detention, with a hope of coming back legally later.

³⁶ For example, this includes information about how case management identified and addressed barriers to case resolution and individuals' specific responses to case management over time.

Case study – B5

Having entered the country, a woman was arrested for being in possession of a false ID when she was trying to leave for another country to seek asylum. She was sentenced for three months of imprisonment and tried to claim asylum there, but was told that she could not. On completion of her prison sentence, she was transferred to a detention centre where her asylum claim was confirmed. Screening indicated that she was a victim of serious gender based violence and trafficking. She was unaware that she was HIV+ and was transferred to a hospital from detention. While the case manager worked with the woman to arrange discharge from the hospital, having secured support of a local NGO and social service, she was re-detained. This and the fact that the woman was not informed of reasons of her detention by the authorities throughout increased her mistrust of the system and anxiety. Following the case manager's intervention, the woman was released from detention which contributed to major improvement in her wellbeing. She is now stable in the community and proactively engages with the pilot to work towards case resolution.

Case study – B7

A man who is a potential survivor of torture had been in an irregular situation for almost a decade. His original asylum claim was not examined for years. When it was finally examined upon the request of his lawyer, it was refused. Recently, he was arrested by the police and detained, during which time he disclosed his torture experience. The case manager met the individual in detention and provided case management after his release. Case management support is positively influencing the person's outlook as it gives him a safe space to ask questions and receive necessary information about his case that fills gaps in his understanding: after avoiding the authorities for years, he has taken his own initiative to obtain a medical card. He remains engaged with the process and has been in the pilot for five months.

Case study – A3

A young man with health problems was imprisoned for illegal crossing of the border. The case manager intensified support by providing weekly meetings with him at the time of his release from prison to stabilise his situation, as the risk of absconding and disengaging was deemed high, given that he had previous experience of immigration detention which traumatised him. The case manager also liaised with his friend and an intermediary from his community to create a stable environment for him and help him to take positive steps to resolve his case, by exploring all legal options. Case management has had a positive impact on his ability to engage with immigration procedures and reduced his risk of absconding. He remains engaged with the pilot for nine months now.

Other examples of effective case management interventions

B3 – Based on a holistic understanding of the individual's situation, the case manager successfully made a recommendation to the authorities requesting the release from detention of the individual in a situation of long-term irregularity. After he was released, the case manager tried to negotiate conditions of release to ensure that they were not too onerous and were realistically achievable.

B4 – After nearly a decade of non-contact with the authorities, the individual was very fearful of drawing attention to himself but was also desperate to find a solution to his immigration situation. Through holistic case management over months to explore all options, the individual was eventually able to make initial contact with the authorities.

B6 – Face to face screening by the case manager identified the individual's vulnerability, which was not registered by the authorities. This ensured that she had access to appropriate support and services to be able to work on case resolution.

C8 – The case manager was able to coordinate multi-stakeholder cooperation to address the individual's multi-faceted needs.

C9 – The case manager was able to work with the individual so that he understands the need to seek help for his addiction problem, which can help him focus on resolution of his case.

A5 – The client never received any legal advice for his case or any support. He now feels much more positive and engaged after case management started, because this enabled him to access legal advice for the first time.

A8 – Due to his long-term disappointment with the authorities, the individual lived under the radar for many years. The case manager and the individual re-visited all the risks and benefits of re-engaging with the authorities. The individual decided to make an application to regularise his status.

Limitations of case management and possible barriers to case resolution

Case management appears to ease some of the difficulties individuals experience in making steps towards case resolution. However, its effectiveness in stabilizing the individual or helping the individual to explore all available options can be hindered by a number of barriers. Some of these barriers are very specific to individual circumstances but there are also structural issues relating to the migration system itself such as minimum standards not being met or a lack of trust in the system based on individuals' past negative experiences with the authorities. Some of the examples of case management indicate that addressing these issues and improving the migration system as a whole can probably encourage more case resolution in the community.

B1 – The authorities failed to provide a registration number to the individual and refused his repeated requests for up to date information about his immigration case. Although case management had some impact in other areas, it made no difference to the person's level of trust in the system which he believed to be unresponsive and unfair.

B3 – When the individual was released from detention, the authorities did not provide any documentation about his status or information regarding his terms of release: this undermined and delayed the individual's efforts to work towards case resolution.

B3 – The individual was receiving inaccurate information from exploitative private immigration lawyers and advisers. This caused great confusion and he did not know whom to believe in order to regularise his status. According to the CAP model, access to (competent) legal advice is part of minimum standards.

B4 – While the individual is overall better engaged with his own immigration case thanks to case management, his severe depression caused by financial worries (inability to pay rent and bills) frequently features in his conversation with the case manager. When minimum standards are not met, it can be difficult for individuals to focus on immigration procedures.

B8 – The detained individual³⁷ had serious psychiatric vulnerability for which he was not able to access treatment because of his irregular immigration status. Although the individual was willing to engage with the case manager, his mental state made it challenging

³⁷ While case management on these ATD pilots is provided in the community and not in detention, the case manager made an exception for this particularly vulnerable case on a humanitarian ground.

even to establish chronology and facts of his complex immigration history and to engage in informed decision making or work towards case resolution. The case manager was also not able to identify a place where the individual could be safely released to and supported in the community.

B9 – The individual's past experience of prolonged detention and mishandling of his case heightened his sense of frustration and mistrust of the system. Case management allowed the individual to let off his anger and helped him to access necessary services. This increased his sense of self-esteem and coping ability.

Many of the client summary sheets noted how a limited range of available legal avenues to regularise status or poor prospects of the person securing protection status when return was not considered to be an option had a negative impact on case management and created challenges in working towards case resolution.

Do the pilots deliver the three benefits of ATD?

Most existing global research and studies share the view that there are broadly three areas of benefits to case management-based ATD in the community. They are:

- ▶ Compliance and case resolution
- ▶ Cost benefits
- ▶ Protecting health and wellbeing

IDC's *There Are Alternatives* explains that successful alternatives to detention that deliver benefits in terms of cost, compliance and wellbeing outcomes usually contain seven elements³⁸. The seven elements are:

- ▶ Using screening and assessment to tailor management and placement decisions
- ▶ Providing holistic case management focused on case resolution
- ▶ Focusing on early engagement
- ▶ Ensuring individuals are well-informed and trust they have been through a fair and timely process
- ▶ Ensuring fundamental rights are respected and basic needs are met
- ▶ Exploring all options to remain in the country legally and all avenues for voluntary or independent departure
- ▶ Ensuring any conditions imposed are not overly onerous

As we saw in the preceding sections, the ATD pilots in their wider national contexts currently fall short of guaranteeing all these elements. For example, while the pilots might conduct in-depth screening and assessment

of individuals, this is not necessarily part of the migration authorities' practice. Many individuals come into contact with the pilots not when they start their immigration process, but only after spending substantial amount of time in an irregular situation. Where the authorities do not cater for individuals' basic needs and minimum standards are not met, the pilots have no means to fill such gaps.

Bearing in mind such gaps might exist in the pilots, we will consider whether the pilots' work to date delivers these three types of benefits – compliance and case resolution, cost benefits and protecting health and well-being. We also consider what other data is necessary for and complement such analysis so that this discussion can be advanced in the future evaluation exercise. Some of the discussions will revisit answers given on the client summary sheets³⁹ that have been shared in earlier sections of this report.

Compliance and case resolution?

Compliance can mean different things to different stakeholders⁴⁰. The pilot implementers broadly understand this as engaging with the immigration procedures.

As has been noted already, the quantitative interim results of the pilots show the vast majority (97%) of individuals remained engaged with immigration procedures through case-management-based ATD in the community: only 3% disengaged or absconded⁴¹.

The Bulgarian pilot reported in February 2018 that 'The evidence collected so far is suggestive that the rates of absconding of migrants who are supported through case management are much lower than the general rates (for Bulgaria, around 75% absconding rate for 2015). These preliminary results have been used for advocacy before the authority nationally and at EU level.'⁴²

³⁹ Questions asked on the client summary sheets were:

- *In your view, has your case management support had any positive impact on the person's **ability to engage with the immigration procedures** over time?*
- *In your view, has your case management support had any positive impact on the person's **level of risk*** over time?*
- *In your view, has your case management support had any positive impact on the person's **level of trust in the system**?*
- *Has case management improved the individual's **ability to participate in informed decision making process** in immigration procedures over time?*
- *Has case management **contributed towards timely and fair case resolution** for the individual over time?*
- *Is case management improving **coping and well-being of individuals** (that allows them to better engage with immigration procedures) over time?*

⁴⁰ For example, compliance is often understood by the authorities as individuals complying with orders to return to their country of origin.

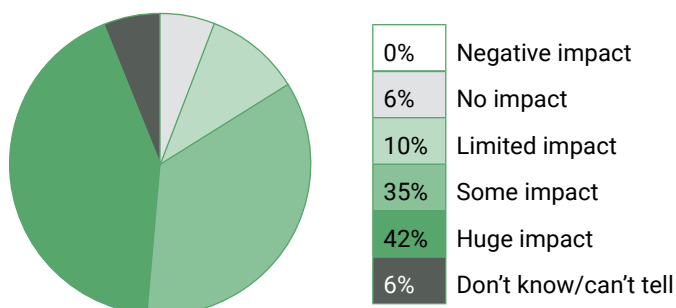
⁴¹ Note that several individuals received case management support while in detention, particularly when the pilots are negotiating their release from detention or their exceptionally severe vulnerabilities were deemed to require extra support on a humanitarian ground.

⁴² In addition, according to another EPIM funded report, very few deportation orders are actually carried out in Bulgaria. '24,684 foreigners

³⁸ IDC (2015), *There Are Alternatives* p.13.

When we look at the qualitative impact of case management, it shows that in most cases it has positively influenced progress towards timely and fair case resolution.

The level of impact of case management on timely and fair case resolution



Further, answers to prompt questions show that in a vast majority of cases case management had a positive impact on individuals to:

- ▶ Receive more information and advice that help them understand their own situations and better plan for their future
- ▶ Engage with case managers
- ▶ Take more initiative to contact the authorities and work on their immigration cases
- ▶ Consider the consequences of their action
- ▶ Make more constructive choices about their immigration cases

All of these factors appear to help them to take steps towards case resolution.

While the pilot experiences so far corroborate IDC's analysis that case management can stabilise the individual in the community and contribute to working towards case resolution, the number of case resolution actually achieved within the pilots is low: the quantitative data shows that out of 93 individuals who entered the pilots, there were only seven cases of case resolution (three secured status and four returned to their countries of origin).

“Case resolution is not the same as case management although they often overlap. Case resolution is focused on finding a permanent or temporary migration outcome. While this responsibility ultimately sits with immigration authorities, case managers can contribute to timely case resolution by identifying legal, practical and personal barriers to likely outcomes and working on shared solutions. Case resolution can draw from a range of solutions including various visa and departure options.”⁴³

had deportation orders issued in conformity with the national legislation in Bulgaria in 2015. Out of them only 736 (3%) measures in respect of illegally residing persons have been carried out.’ Bulgarian Helsinki Committee (2016), Detention Mapping Report

⁴³ IDC (2015), *There Are Alternatives* p.52.

As the earlier section ‘case management in practice’ shows, the ATD pilots and impact of case management can be limited within flawed migration systems, which frequently do not meet the minimum standards necessary for a functioning migration system that can effectively avoid the use of detention and implement ATDs. These structural issues appear to undermine some cases from reaching case resolution. The further evaluation will make recommendations to the states in which pilots were implemented what adjustments are necessary for a functioning migration system and ATDs, based on the data and observation generated by the pilots.

Cost benefits?

Where costs of detention and costs of ATD are available, global research and studies show that ATD are more cost effective than detention. There is an ongoing discussion about how cost effectiveness of ATD should be assessed⁴⁴. For this particular evaluation process, comparison will be conducted in the future report between the running costs per person per day of ATD and the cost of detention per person per day in each national context, although the complexity of doing so was noted in the Network meeting in June 2018.

At this point in time, we are not able to establish the *entire* costs of ATD pilots in Bulgaria, Cyprus and Poland. Any costs of case-management based ATD in these countries would need to include the costs of meeting the minimum standards⁴⁵. However, we are able to calculate an approximate cost of case management.⁴⁶

⁴⁴ IDC's draft paper ('Evaluating alternatives to immigration detention May 2018') (on file with the evaluator) on this subject also includes other approaches such as comparing capital expenditure, rate of review of negative decisions, costing independent departures versus deportation, avoiding litigation and compensation payouts and burden on the healthcare system (of individuals after release).

⁴⁵ According to the IDC's CAP model, these minimum standards include: respect of fundamental right, basic needs, formal status and documentation, legal advice and interpretation, fair and timely case resolution and regular review of placement decisions. (IDC (2015), *There Are Alternatives*, p.27.) Of those, we can potentially calculate approximate costs of providing basic needs which include, for example, accommodation, subsistence, health and social care costs and other basic services and legal advice and interpretation in each country (however, it might be difficult to deduce a per person costs of statutory basic services where individuals' levels of need vary considerably). On the other hand, it is likely to be much harder to calculate administrative costs for conducting fair and timely status determination and case resolution, processing and producing documents or regularly reviewing placement decisions. At the Network meeting in Warsaw in June 2018, the implementers agreed to develop a common set of cost items which can be added to the cost of case management in order to produce more reliable figures for the costs of ATDs in their national contexts.

⁴⁶ See [Annex 2](#) for how these figures were obtained.

The cost of case management per person per day on the pilot

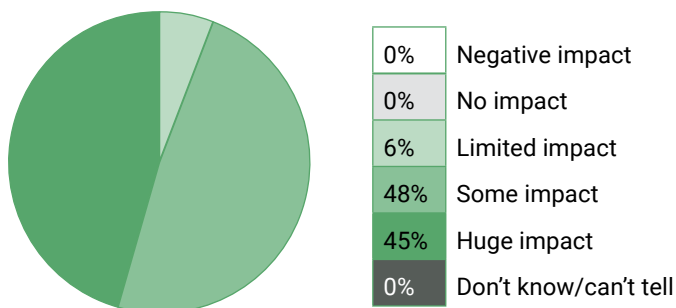
Bulgaria (as of Jan 2018)	EUR 4–9
Cyprus (as of March 2018)	EUR 19–38
Poland (as of Feb 2018)	EUR 22–44

The unit cost of case management per person is expected to decrease, particularly for Cyprus and Poland, as the pilots engage more individuals, bringing down the unit cost further. There is a substantial setting-up cost at the beginning of the pilot and ongoing management costs, which are spread across the number of individuals who come into contact with the pilots. See [Annex 2](#) for a note on how these figures have been derived.

Protecting health and wellbeing?

In all cases, case management provided by the ATD pilots had a positive impact on individuals’ coping ability and wellbeing. This is a crucial element that enables individuals to focus on their case resolution. Where only limited impact of case management was seen among the sampled cases, it was because either the person had a high level of well-being from the very beginning or the person was suffering from a serious untreated mental health issue.

The level of impact of case management on the person’s coping and wellbeing



Interviews with individuals for the future evaluation will enable us to triangulate this data.

Challenges relating to gathering and analysing qualitative data

One of the central pieces of work for the Network and pilot implementers was to establish a monitoring and evaluation framework that captures the qualitative impact of case management. It was imperative that the framework goes beyond the conventional number-based model, which exclusively focuses on counting the number of individuals and case outcomes without examining individual circumstances that might have influenced their outcomes.

As described earlier, the client summary sheet was developed over time after a series of discussions, including one trial run, as a tool for capturing qualitative data about the impact of case management within the available evaluation time and resource. The contentious issue of subjectivity in data collection and analysis remains; however, we believe our framework allows the case managers to measure, through reflection, changes in individuals who are receiving case management support based on their unique understanding of that individual. This section lists some of the issues identified during this interim evaluation exercise which merit further attention.

How do we rate the impact of case management on individuals and should it be more standardised?

The way each pilot rated the qualitative impact of their cases management was variable. As the next page shows, Bulgaria’s “spread” is narrower, finding ‘huge impact’ of case management in a vast majority of cases, compared to Cyprus or Poland.

How each ATD pilot assessed the impact of their case management

Bulgaria

	Ability to engage with immigration procedures	Level of risk	Level of trust in the system	Informed decision making	Timely and fair case resolution	Coping and well being of individuals
Negative impact	0	0	0	0	0	0
No impact	0	0	0	0	0	0
Limited impact	0	0	0	0	0	0
Some impact	0	0	0	1	0	1
Huge impact	10	10	10	9	10	9
Don't know/can't tell	0	0	0	0	0	0

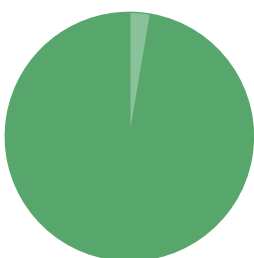
Cyprus

	Ability to engage with immigration procedures	Level of risk	Level of trust in the system	Informed decision making	Timely and fair case resolution	Coping and well being of individuals
Negative impact	0	0	0	0	0	0
No impact	0	0	1	1	0	0
Limited impact	2	1	3	0	2	1
Some impact	7	6	6	8	4	7
Huge impact	1	1	0	1	1	2
Don't know/can't tell	0	2	0	0	2	0

Poland

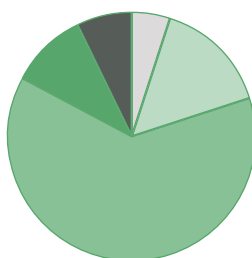
	Ability to engage with immigration procedures	Level of risk	Level of trust in the system	Informed decision making	Timely and fair case resolution	Coping and well being of individuals
Negative impact	0	0	0	0	0	0
No impact	0	0	1	0	1	0
Limited impact	1	1	2	1	1	1
Some impact	6	9	8	7	7	7
Huge impact	4	1	0	3	2	3
Don't know/can't tell	0	0	0	0	0	0

Bulgaria totals



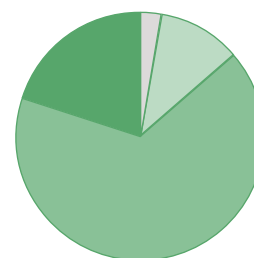
0	0%	Negative impact
0	0%	No impact
0	0%	Limited impact
2	3%	Some impact
58	97%	Huge impact
0	0%	Don't know/can't tell

Cyprus totals



0	0%	Negative impact
3	5%	No impact
9	15%	Limited impact
38	63%	Some impact
6	10%	Huge impact
4	7%	Don't know/can't tell

Poland totals



0	0%	Negative impact
2	3%	No impact
7	11%	Limited impact
44	67%	Some impact
13	20%	Huge impact
0	0%	Don't know/can't tell

With these questions on the client summary sheet, we are attempting to capture impact *over time*, the level of change being the difference between the base line (i.e. when case management started) and where the individual has reached when the client summary sheet was completed. The fact that the client summary sheets are completed by the case managers themselves means there is always going to be an element of subjectivity in their assessment of change⁴⁷. This is inevitable as practical resource limitations do not permit other more resource-intensive ways of capturing this information, such as a review of all the case files and interviews with individuals by the evaluator.

The Bulgarian pilot considered if the high proportion the cases they had assessed their case management to have had 'high impact' was due to their bias. Their view is that the base line for each case was very low to start with, hence the huge impact was achieved as a result of their case management.

The Cypriot pilot shared that in compiling the client summary sheets, they assessed each case as a team of two case managers and a project manager via discussions. In their view, this way of collective case review was particularly useful in encouraging vigorous reflection and checking each other's bias: case managers were more prone to downplay the level of impact their case management work has created (because from their point of view, their work is always a challenge) while those who were not directly involved in the case were able to observe and point out individuals' change over time.

Following the interim evaluation exercise, the Network meeting in June 2018 discussed further how a more standardised assessment of impact could be conducted for the future evaluation.

What level of information should be given in the client summary sheets?

Under each cluster question of the client summary sheet, space was provided for the case managers to explain what barriers to case management existed and how they tried to overcome them⁴⁸.

This space was added to the client summary sheet because the case managers were anxious to have an opportunity to demonstrate their efforts, and it was felt important to record these efforts even when they did not

lead to tangible results such as case resolution. We were also conscious that case management and case resolution can be undermined by factors outside the pilots' control and such information needed to be captured to assist our understanding and analysis of the limitations of case management. On a very practical level, this was the only way to identify barriers to case management without the evaluator having to read the entire case files of each individual.

Significant difference in the type and depth of information collected exists between the pilots. For example, while the Cypriot pilot reported that they identified particular barriers in case management in 93% of their responses to the questions about the impact of case management, this figure dropped down to 9% in the Polish pilot. In addition, some pilots provided far richer data on the nature of these barriers and how they were overcome than the rest.

The amount of explanation given on the client summary sheets determines the extent to which we can confidently detect and verify the depth of case management work. This is also where case management's potential and limitations can be further explored. We agreed to provide clearer instructions to the case managers on the types of information being sought in this section of the client summary sheet to gather better quality data next time. It was also agreed that a short 'case study' should be provided for each client summary sheet.

Looking at commonalities and differences between the pilots' data was useful in highlighting challenges that are inherent to subjective data gathering methods. It also brought into focus the need for each country's data to be understood in the specificity of national-level migration patterns and systems and the operation of each pilot. This will require some new research and we hope to look at each pilot separately in more details in the further evaluation report.

⁴⁷ Additionally, the base line for each individual could also be structurally determined by each country's national migration system: the degree to which individuals going through the immigration system are already engaged with it can depend on how engaging the system is. If the system was already very alienating, a small amount of case management can yield huge positive impact. On the other hand, if the system was already sufficiently user-friendly, case management might not have made much difference to the individual outcome. This is certainly a very interesting aspect to explore but is beyond the scope of this interim evaluation exercise.

⁴⁸ See [Annex 1](#) for the client summary sheet.

Positive effects of monitoring and evaluation exercise

During the process of reviewing the collated data and discussing challenges of monitoring and evaluation, the pilot implementers and the Network noted positive effects of completing the client summary sheets and conducting this interim evaluation.

“Although it does take some time to complete the client summary sheets, it helps us to see clearly the impact of our case management work. This makes us feel more confident going forward.”

“This will help us think about how we will do our own evaluation.”

“It gives us an opportunity to interpret these cases and explain them differently to ourselves.”

“A great opportunity to review and reflect how the case is going.”

“This allows the Network to exercise quality control of case management ATD programmes. Especially if new organisations want to join the Network as an implementer, we can show them how we are benchmarking case management work.”

“We would like to think about incorporating case management approach to our organisation’s other work in general.”

Conclusion

It is possible to establish small-scale engagement-based alternative to detention pilots in the community with a relatively small amount of financial resources.

The data from the EPIM grantees in Bulgaria, Cyprus and Poland that this report has examined shows that it is possible to establish small-scale engagement-based alternative to detention pilots in the community with a relatively small amount of financial resources.

The interim results of the ATD pilots show:

- ▶ The vast majority (97%) of individuals remained engaged with immigration procedures through case-management-based ATD in the community: only 3% disengaged or absconded.⁴⁹
- ▶ Quality case management can increase individuals' ability to work towards case resolution. Even with varied levels of vulnerability and wide diversity of circumstances, qualitative evaluation suggests that holistic and individualised case management can have a positive impact on individuals' ability to engage with case resolution, including cases of great complexity and with previous experience of detention, when certain conditions are met.

The process of setting up the ATD pilots shows:

- ▶ IDC's Community Assessment and Placement model (CAP) acted as a useful conceptual framework. Its non-prescriptive approach allowed each implementer to design a pilot in a way that fitted with its specific national context.
- ▶ The initial process of setting up the pilots required more time than anticipated and the pilots needed ongoing adjustments. While none of the ATD pilots operates as a formal part of the existing migration system, it was essential that they work with other stakeholders to coordinate multi-agency support for the individuals.
- ▶ Building competency in case management was a challenge for all. Case management is a complex skill that is fundamentally different from legal case work or general psychological or practical support skills: it is more holistic, reflective and continuous, yet has a clear focus on working towards case resolution.

⁴⁹ Note that several individuals received case management support while in detention, particularly when the pilots are negotiating their release from detention or where exceptionally severe vulnerabilities required extra support.

Analysis of case management shows:

- ▶ Case management alone, especially when applied only at the end of the immigration process, cannot rectify structural and long-term problems in the migration system that sometimes undermine case resolution. Nor can it compensate for gaps in the provision of minimum standards by states. It is challenging to address individuals' lack of trust in the system.

Relevance of the pilots for ATD discussions in Europe

In the context of growing interest in turning the theory of alternatives to detention into practice in Europe⁵⁰, the data and learning from the ATD pilots in Bulgaria, Cyprus and Poland offer a timely and practical intervention.

For example, 'The European Commission has recognised that "early intervention and holistic case management focused on case resolution" has been proven to be successful as an alternative to detention.'⁵¹ The revised EU Return Handbook now contains an expanded section on ATD with a particular focus on 'coaching' towards case resolution⁵². Member States of the Council of Europe have recently adopted the guidance note, *Analysis of the legal and practical aspects of effective alternatives to detention in the context of migration*⁵³, of its Steering Committee on Human Rights.

⁵⁰ The European Commission (2017), *Commission Recommendation (EU) 2017/2338 of 16 November 2017, establishing a common 'Return Handbook' to be used by Member States' competent authorities when carrying out return-related tasks*. Under the section 'Benefits and Risks', it states 'Member States should develop and use a wide range of alternatives to address the situation of different categories of third-country nationals. Tailored individual coaching, which empowers the returnee to take in hand his/her own return, early engagement and holistic case management focused on case resolution has proven to be successful. A systematic horizontal coaching of all potential returnees, covering advice on possibilities for legal stay/asylum as well as on voluntary/enforced return from an early stage (and not only once forced removal decisions are taken) should be aimed at.'

⁵¹ European Alternatives to Detention Network. 2018. Alternatives to detention. [ONLINE] Available at: <https://www.atdnetwork.org/alternatives-to-detention/>. [Accessed 16 July 2018].

⁵² The European Commission (2017), *ANNEX to the COMMISSION RECOMMENDATION establishing a common "Return Handbook" to be used by Member States' competent authorities when carrying out return related tasks*. It states that there should be 'A systematic horizontal coaching of all potential returnees, covering advice on possibilities for legal stay/asylum as well as on voluntary/enforced return from an early stage (and not only once forced removal decisions are taken)' (p68).

⁵³ Council of Europe, Steering Committee for Human Rights (CDDH) (2018), *Analysis of the legal and practical aspects of effective alternatives to detention in the context of migration*

Yet there have been few attempts to implement engagement-based alternatives to detention in Europe until now. The ongoing ATD pilots can fill the knowledge gap by providing relevant evidence of effectiveness of case management and learning from operationalising ATD. The pilots should enrich ATD policy discussions and encourage a new approach to migration governance that moves away from the use of detention.

Next steps

The next evaluation exercise intends to address the following issues.

1) Improving qualitative data collection and analysis methodology

This opportunity to test the agreed monitoring and evaluation framework helped us to identify its shortcomings:

- ▶ Some of the questions used in the client summary sheet need to be clarified to eliminate ambiguity, in order to generate more reliable data.
- ▶ There should be a standard format for collecting case studies which captures key information about individual's progress and setbacks while on the ATD pilots. This will help us understand better existing barriers, both structural and personal, faced by individuals when they are working towards case resolution and how individuals respond to case management.
- ▶ We need to establish a standardised way of assessing levels of impact of case management on individuals across the different pilots. This will increase our confidence when comparing and aggregating data sets of different pilots.

2) Advancing the analysis of whether the pilots deliver the three benefits of ATD

This report started our preliminary investigation into whether these pilots deliver the three benefits of ATD, i.e. compliance / case resolution, cost savings and protection of health and wellbeing, identified by existing studies. We will need further data to advance our analysis.

In looking at compliance and case resolution, the future evaluation can analyse larger data sets as the pilots will have assisted more individuals over a longer period. This should allow us to see whether a larger proportion of cases will have achieved progress towards case resolution and why. More in-depth case studies should also provide further understanding of barriers to case resolution, generating country-specific learning and recommendations.

This evaluation exercise gave us a chance to begin our discussion on what needs to be included when calculating the overall cost of ATD programmes. It is important to remember that the EPIM grants are mainly limited to the costs of case management. In the next evaluation exercise, we can collate other costs to produce estimates

for the overall costs of ATD pilots in these countries, which can be compared to the cost of detention.

Our analysis of benefits to health and wellbeing benefit can be enriched by information about individuals' subjective experience of the pilots and their impact.

3) Understanding migrants' own experience and perception of the pilots

In this monitoring and evaluation exercise so far, migrants' own experience and perceptions are absent.

We are planning to conduct interviews with individuals to understand better their experiences of case management and in what way it has influenced their ability to engage with the immigration procedures and work towards case resolution. We need to know what they see as strengths of this approach as well as what they see as problematic or missing. It is vital to place their voices, experiences and opinions at the centre of evaluation of the pilots and future policy discussions about effective engagement-based ATD to ensure transparency and accountability.

In conclusion, the ATD pilots in Bulgaria, Cyprus and Poland generate practical evidence and learning that can advance discussions about engagement-based alternatives to detention. They broadly suggest that more people at risk of detention can potentially benefit from case management in the community, thus avoiding detention. Further data analysis and research will help us better understand the ATD pilots' benefits. This should involve specific attention to each national context and migrants' own experiences of case management.

Migrants, civil society and governments share an interest in fair, humane and effective immigration systems in which immigration detention is only used as an exceptional measure. It was evident during the evaluation process that the implementers' desire for detention reduction and commitment to upholding migrants' rights and dignity shaped many aspects of the pilots. It is hoped that this report will assist the implementers to further improve their ATD pilots and also contribute to the ongoing discussions on alternatives to detention.

Annex 1 Client summary sheet

February 2018

EPIM ATD network client summary sheet (version 2 – REVISED after a call on 2 Feb 2018)

Please complete this form for each case you are reporting for evaluation purposes.

Please also ensure you read client summary sheet 'guide', which is a separate document.

Client number (country code followed by a number) (Pilot projects should keep a separate list that matches client number with the client's name)

Profile information

Question number	Question	Data
1	Gender	
2	Age group (use the age grouping that EU uses)	
3	Nationality (we might delete this later)	
4	Any vulnerabilities (use VST domains)	
5	Any family and community ties in the country	
6	Any conditions the person has been placed under by the authority	
7	The length of the time the person has been in the country (years, months, weeks)	
8	Any experience of detention (length, number of instances of re-detention)	
9	The length of the time in the pilot (months and weeks)	
10	The frequency and duration of your interaction with the person (a brief description, such as if you have had face to face interactions and how long each such session was. Or frequency of telephone or other communications.)	
11	How the person came into the project (from detention, from community, referred by another organisation, self-referral, other)	
12	What was your assessment of risk (of disengaging and/or absconding) at the time of induction? (High risk, medium risk, low risk, don't know)	
13	Is the individual staying in touch with the project, disengaged from the pilot, absconded from the authorities, has moved on as a result of case resolution (regularisation, return, removal), other?	
14	Anything else you want to add about this person's personal resources, vulnerability, protection factors or risk factors?	

Case management information

1. In your view, has your case management support had any positive impact on the person's ability to engage with the immigration procedures over time?

Negative impact	No impact	Limited impact	Some impact	Huge impact	Don't know/ can't tell
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2. In your view, has your case management support had any positive impact on the person's level of risk over time?

Negative impact	No impact	Limited impact	Some impact	Huge impact	Don't know/ can't tell
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3. In your view, has your case management support had any positive impact on the person's level of trust in the system over time?

Negative impact	No impact	Limited impact	Some impact	Huge impact	Don't know/ can't tell
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Cluster 1 – informed decision making

1. Has case management improved the individual's ability to participate in informed decision making process in immigration procedures over time?

Negative impact	No impact	Limited impact	Some impact	Huge impact	Don't know/ can't tell
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2. Were there particular barriers to engaging with immigration procedures with regards to participating in informed decision making (at the beginning of or during case management support)? What were they? Have they been overcome?

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Cluster 1 - Prompt questions:

3. Are they receiving more information and advice than before to help them understand their own situation and plan for their future better?

Yes	No	Don't know
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4. Are they making more constructive choices about their immigration cases? (For example, did they have any intention to go underground / abscond before?)

Yes	No	Don't know
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5. Are they feeling more confident in engaging with immigration procedures?

Yes	No	Don't know
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6. Are they better engaged with case managers?

Yes	No	Don't know
-----	----	------------

7. Are they better able to consider consequence of their actions?

Yes	No	Don't know
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Cluster 2 – timely and fair case resolution

1. Has case management contributed towards timely and fair case resolution for the individual over time?

Negative impact	No impact	Limited impact	Some impact	Huge impact	Don't know/ can't tell
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2. Were there particular barriers to contributing towards timely and fair case resolution (at the beginning of or during case management support)? What were they? Have they been overcome?

Cluster 2 - Prompt questions:

3. Are they taking more initiatives to contact the authorities? Do they more regularly work on their immigration cases? Are they taking steps to progress their case resolution?

Yes	No	Don't know
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4. Can they exercise their legal and other rights better?

Yes	No	Don't know
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5. Can they explore all options, including regularisation better?

Yes	No	Don't know
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6. Are they cooperating better with any conditions that have been set for them by the authorities?

Yes	No	Don't know
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7. Do you think the authorities have more/better information about the individuals' cases now, because of better communication?

Yes	No	Don't know
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Cluster 3 – coping and well-being of individuals

1. Is case management improving coping and wellbeing of individuals (that allows them to better engage with immigration procedures) over time?

Negative impact	No impact	Limited impact	Some impact	Huge impact	Don't know/ can't tell
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2. Were there particular barriers to improving the individual's coping and well-being (at the beginning of or during case management support)? What were they? Have they been overcome?

Cluster 3 - Prompt questions:

3. Are they less vulnerable?

Yes	No	Don't know
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4. Do they have a stronger hope for the future?

Yes	No	Don't know
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5. Do they have more trust in the system than before?

Yes	No	Don't know
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6. Is their psychosocial wellbeing better (community activities, psychological state)?

Yes	No	Don't know
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7. Is their subsistence situation better?

Yes	No	Don't know
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8. Is their accommodation situation better?

Yes	No	Don't know
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9. Are they more stabilised than before? Do they more regularly keep in touch with the project?

Yes	No	Don't know
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Final question

10. Any other observations?

What undermined, blocked or limited potentially positive impact of your case management support for this individual? Or what factors led to a particularly favourable outcome for this person?

Annex 2 ATD pilots cost analysis

April 2018

	Bulgaria	Cyprus	Poland
Total grant	134,512	83,219	120,000
Total grant spent on ATD pilots	80,707* *It is impossible to deduce this figure as the Bulgarian grant covers a far wider range of activities. As a ball-park figure, it is estimated that 60% of the grant to be used on ATD.	83,219	120,000
The number of individuals supported by the pilots. We are using the figures reported in their 12 or 9 month monitoring reports.	50	38 screened and 12 on the pilot.	15 adults with 13 children.
Cost per individual	EUR 1,614	EUR 2,190–6,935 (the first figure includes those who were only screened ie 83,219 divided by 38)	EUR 8,000 (per adult)
Cost per individual per day. We assume each individual receives between 6 months and 12 months of case management support.	EUR 4–9	EUR 19–38 (for this calculation, we used EUR 6,935 figure.)	EUR 22–44

Notes

- ▶ These costs only relate to case management: they do not include services and material covered by minimum standards.
- ▶ The cost per individual / day will go down as the project takes on more individuals to the pilots.
- ▶ The one-off costs of setting up the project as well as advocacy and management are included in the grants.

