

Social care and integration of asylum-seekers and beneficiaries of international protection in Hungary

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Summary

Due to its geographical location Hungary acted as a gate-keeper along the southern Schengen border of the European Union (EU) during the extraordinary migratory pressure that has affected Europe since 2015. Since the beginning of the crisis, a series of legal amendments have been taken into effect, and as a result, during the past few years the concept and content of 'social integration' of immigrants, thus the tasks and responsible actors of social work with refugees has changed significantly in Hungary. This paper discusses the milestones in trends, policies, actors, as well as the tools and methods of social integration and social work with asylum-seekers and beneficiaries of international protection in Hungary during the past decade.

Keywords: irregular migration; Schengen-border; migratory pressure; integration contract; transit zone

1. General situation regarding immigration in Hungary

Hungary has been open to international migration since the political changes of 1989 and the subsequent transformation of Eastern Europe. By the mid 1990s, the country had become a transit country to the West, and also a destination country for immigrants. The legal framework for regulating migration has developed gradually [1]. During the 1990s, most immigrants arrived from neighbouring countries such as Romania, the former Republic of Yugoslavia and Ukraine and were of Hungarian ethnicity [2], and a smaller but important proportion arrived from Asian countries (mainly from China and Vietnam). During the Yugoslav war some 70,000 immigrants arrived from the former Republic of Yugoslavia, mostly ethnic Hungarians (but also Croats, Muslim Bosnians etc.) but they returned after the war [3].

Recent migration flows are characterised by the migration of ethnic Hungarians coming from the neighbouring countries, as well as by the exercise of the right to free movement resulting from Hungary's accession to the EU (2004) [4]. Still, Hungary is not among the most attractive destination countries within the EU, and the number of immigrants is not high. This can be explained partly by the language barriers that the migrants are facing, but also by the fact that other states of the Schengen area, have higher employment potential and represent stronger economic power.

An important feature of international immigration in Hungary is that due to simplified naturalisation procedures for ethnic Hungarians in neighbouring countries, migration data by citizenship and by country of birth strongly differ [5]. Ethnic Hungarians in neighbouring countries who obtain Hungarian citizenship are automatically considered as Hungarian citizens. Therefore the most of the foreigners living in Hungary are ethnic Hungarians arriving from neighbouring countries. This is due to the fact that the changes of the country's borders after World War I resulted in a numerous diaspora of ethnic Hungarians in the neighbouring countries. As a result, while the number of **foreign citizens** residing in Hungary was approximately 150,000 in 2016 (1.4% of the total population, which was 9.82 million on the 1st Jan, 2016), **the foreign-born population** was appr. 380,000 (4%)[5].

Immigration to Hungary from countries in Central and Eastern Europe, and from Asia is primarily **labour migration**, often based on seasonal or temporary employment or business, while immigration to Hungary from poverty stricken or war torn developing countries is mainly transit migration as in most cases, the migrants who have reached Hungary have also access to other states of the Schengen area (see Chapter 2.) [4]. In October 2013 the Hungarian Government, with its Resolution No 1698/2013, adopted the Migration Strategy and the seven-year strategic document related to the Asylum and Migration Fund of the European Union for the period 2014-2020 (henceforward 'Migration Strategy') [4,6]. This document emphasizes that - while it is still important to ensure the protection of national labour force - based on the needs of the country's economy and labour market, receiving additional migrant labour is a necessary. Attracting knowledge-based migration should also be set as a goal by providing increased chances of entry and stay for those arriving with the purpose of study and research, as well as by establishment and operation of effective recruitment/selection processes. In 2017, 42% of foreigners who resided in Hungary came for

the purpose of work, making labour the most popular entitlement of residence. Meanwhile, as labour emigration of Hungarian citizens has also increased: according to the Hungarian Central Statistical Office, 350,000 Hungarians have moved abroad since 1989. As a result, Hungary is gradually becoming a country in serious demand for foreign workers in certain economic sectors, especially in the field of information technology, health care and manual labour workers. In 2016 and 2017, the Government of Hungary has repeatedly stated the country's need for skilled labour, targeting Ukraine as a particular country of origin [7].

2. Situation regarding refugees in the past 10 years

Until 1997 Hungary accepted refugees only from European countries. Immediately after lifting this limitation, nearly half of the asylum applications were submitted by non-European citizens, mostly from Afghanistan, Bangladesh, and Iraq [1].

2.1. Hungary's accession to the Schengen Area

In the year immediately following the inclusion of Hungary in the Schengen Area (2007), according to the data of the Schengen Information System (SIS), the number of migrants trying to enter the country illegally significantly increased, with 41% of the cases along the Ukrainian border, 67% of which involved migrants from Pakistan [8]. This trend arises from Hungary's geographical situation, as the country lies in the crossroad of East-Western and South-Eastern migration routes. Hungary, with its long eastern and south-eastern land border of the Schengen Area is particularly attractive for migrants who would like to enter this Area unofficially (bypassing all official procedures, such as passport control), as once they have successfully crossed the so-called 'green border' of Hungary, migrants can travel to any of the European Union's (EU) Schengen countries without any further border control. Destination countries for the majority of migrants are mostly in Western Europe [8].

2.2. The European Migration Crisis and Hungary

As international migration has become more critical an issue in Europe over the last few years, an extraordinary migratory pressure could be observed in relation to Hungary, particularly between 2013 and 2015. Both in 2015 and 2016, over 1.2 million first-time asylum seekers applied for international protection in the Member States of the European Union (EU), a number more than double that of the previous years. In 2017, another 705 thousand asylum seekers applied for protection, while recent data from 2018 show a moderate

decrease in numbers: 131.000 new application were registered in the first quarter of this year [9,10].

This trend was clearly reflected in the significant increase in the number of asylum applications to the Hungarian Immigration and Asylum Office (IAO), too. Prior to 2013 the average number of asylum seekers has ranged between 2,000 and 3,000 annually, but has increased in to 18900 in 2013: to 42777 in 2014 with a peak of 177315 in 2015. The increase of daily arrivals in Hungary was the most critical during the September and October in 2015, when the average daily arrivals recorded were higher than 7,000 people. However, there have been remarkable changes in the main countries of origin of applicants, too: Vietnam, China, then Serbia and Kosovo, and then Afghanistan, Pakistan, and in 2015 in addition Syria and Iraq as well [7,11].

2.3. Recent changes in asylum policies and refugee statistics in Hungary (2015-2018)

In 2015, to reduce the unprecedented irregular migration through Hungary, the Hungarian Government enacted a series of legal amendments in addition to the construction of border fences along two Southern borders with Serbia and Croatia (completed by mid-October, 2015) [7,11].

In Aug and Sept, 2015 Hungary designated Serbia as a safe third country and implemented a system of 'transit zones' which remain the only places where migrants can legally enter the country, in Röszke and Tompa. The Hungarian asylum authority limited the number of asylum-seekers allowed to access the transit zones to 10-10 persons in November 2016 and since 23 January 2017, to 5-5 persons per zone per day. Since mid-January 2018 only 1 person/day is allowed to enter Hungary in each transit zone. Migrants often remain in pre-transit zones in Serbia, where 'community leaders' establish lists of those who want to enter Hungary. Since 28 March 2017 asylum applications can only be submitted in the transit zones at the border. Asylum-seekers are to be held in the transit zones for the entire asylum procedure or they may leave the country towards Serbia [7].

As of 5 July 2016: irregular migrants (regardless of whether or not they claim asylum) who are arrested within 8 km of either the Serbian-Hungarian or the Croatian-Hungarian border are "escorted" by the police to the external side of the border fence without registration [12].

As a result of these amendments, together with the construction of the border fences which put Hungary outside the Western Balkan migratory route, as well as the EU-Turkey Statement Agreement (18th March 2016), the migratory pressure on Hungary decreased considerably and the number of asylum applications declined significantly [7].

The total number of applications dropped to 29,432 in 2016, and even further in 2017: only 3397 people applied for asylum in Hungary. The number of accepted claims in 2016 and 2017 were 432 and 1291, respectively. In 2017 the majority of asylum seekers came from Afghanistan (1,432), Iraq (812), Syria (577), Pakistan (163) and Iran (109). In the first four months of 2018, 342 applications were submitted to IAO, and 40,6 % of asylum-seekers came from Afghanistan, 37,1 % from Iraq, and 7,6% from Syria [7,11].

3. Social policy: integration policies for refugees

In Hungary the **Ministry of Interior** has the overall responsibility in the field of migration and integration and there is no specialized institutional system to coordinate integration.

The **Immigration and Asylum Office** is responsible for integration measures targeting the beneficiaries of international protection, as well as for preparing the decision of the cases of naturalisation of non-Hungarian citizens [4].

3.1. Integration policies prior to 2014

Foreigners account for less than 2% of the entire population of Hungary, and nearly two-third of them are ethnic Hungarians from surrounding countries who do not encounter any significant obstacles in integrating into society. In October 2013 the Hungarian Government, with its Resolution No 1698/2013, adopted the '**Migration Strategy**'. This document emphasizes that „support for integration is primarily needed for migrants arriving from third countries who do not speak Hungarian, for beneficiaries of international protection (refugees and beneficiaries of subsidiary protection), as well as for stateless persons” and also envisaged the adoption of an independent '**Integration Strategy**' [6].

However, there was no complex integration programme applying to all foreign nationals and being covered by the support system, still, foreign nationals living in Hungary (beneficiaries of international protection, EU citizens, third-country nationals) were entitled to a wide range of services. Provisions were laid down in sectoral legal instruments regarding public and

higher education, the recognition of foreign certifications and degrees, social benefits, job assistance and unemployment benefits, etc.

Provisions for asylum seekers and beneficiaries of international protection included:

- accomodation at a refugee reception centre for 6 months free of charge (could also be prolonged)
- three meals a day, clothing, and sanitary devices
- travel discount, reimbursement of travel costs, and free-spending pocket-money
- reimbursement of education-related costs (compulsory education)
- school-enrolment support once per academic year
- housing allowance, interest-free loan,
- translation and nationalization of documentation
- free Hungarian language course
- free medical services* for 2 years following recognition [13].

The 61. § of the 301/2007 (XI.9.) Government Decree (based on Act LXXX of 2007 on Asylum) disposed of „*Facilitating the social integration of refugees and beneficiaries of subsidiary protection*” [13]. This decree defined the goals of the integration program as follows: „to acquire language skills, basic social, cultural, life-management and labour right knowledge necessary for integration into the Hungarian society as well as other information enhancing employment on the labour market”. The refugee authority was responsible to designate a reception centre serving as an integration centre, which task was to make preparations for and implement the integration program, and to cooperate with the participating state/municipal bodies and NGOs.

3.2. New integration system: 'integration contracts' (2014-2016)

The legislation amended in 2013 resulted in a more uniform treatment of aid and has created a new integration system for beneficiaries of international protection (was in effect between 1st Jan, 2014 and 1st June, 2016) based on individual responsibility and on the quickest possible

* If the asylum applicant, refugee or person admitted for subsidiary protection is not covered by the social insurance system, they shall be entitled to primary healthcare under specific other legislation, including screenings and examinations, age-specific compulsory vaccination, medical treatment provided under general medicine and to specialised care in cases of emergency [11,13].

transition to an independent lifestyle. After obtaining legal status, integration support was granted on the basis of individual '**integration contracts**', which contained a tailor-made 'integration package' with all rights, obligations and support for beneficiaries of international protection [4,6]. Along with the introduction of integration contracts, an amount of aid was calculated on the basis of the individual's social situation and needs, and could be used by the beneficiaries in accordance with the conditions of the contract. Upon the contract, the beneficiaries received services provided by the Family Assistance Services (FAS) and financial assistance was provided by the refugee authority. The services included language training, facilitating access to labour market, housing etc. After obtaining legal status, beneficiaries were permitted to remain in the reception centre for two months. The duration of the integration agreement was maximum two years from the date of qualification [4,6].

3.3. New era in asylum policy in Hungary

By the end of 2015, the asylum authority closed the Debrecen Reception Centre (which had the largest capacity), and in 2016, another open reception centre, in Bicske, was also closed. Asylum-seekers should stay in one of the two transit zones along the Serbian-Hungarian border meanwhile their application is assessed (maximum 60 days). However, the applicants have the right to leave the transit zone anytime towards Serbia.

At the transit zones, asylum applicants are entitled to housing, and three meals a day (for minors under age of 14 five meals per day) for the duration of the procedure, as well as eating utensils and hygienic supplies, clothing and free healthcare. Further services provided in transit zones include: access to mass media and telecommunication equipments, community space for spending leisure time, childcare, playground, small library, sport and recreation opportunities, and (ecumenical) place for religion. If the applicant is a unaccompanied minor under the age of 14 years, he/she will be placed into a child protection institution instead of the transit zone. The authority appoints a child welfare officer so as to provide legal representation [11].

Recognized refugees or beneficiaries of subsidiary protection may remain in **open reception centre** and take advantage of its services free of charge for not more than 30 days after the qualification resolution is delivered, provided that he/she has no other means of accommodation. In the reception facilities asylum-seekers receive accommodation, three meals a day (or an equivalent amount of money as meal allowance), eating utensils and

hygienic supplies (or an equivalent amount of money as hygienic contribution) and, if necessary, clothing and travel allowances. Additionally, the refugee authority reimburses the costs of children's participation in the public education until their age of 21 years [11,12].

The eligibility period for basic health care services following the recognition of refugee status or subsidiary protection is 6 months from 1 June 2016.

In accordance with the amendments with effect from 1 June 2016 this particular type of support ie. 'integration contract' was abolished, while any support that was lawfully awarded previously is to be continued under an effective integration agreement, if the requirements for eligibility remain to be satisfied. This means the termination of the integration support scheme for recognised refugees and beneficiaries of subsidiary protection without replacing it with any alternative measure. After leaving the reception centre (30 days), refugees and persons admitted for subsidiary protection are entitled to all social aid and support provided for by law and local regulations under the same terms as to Hungarian citizens [11].

4. Social work tools and methods for working with refugees

Facilitating the social integration of refugees and beneficiaries of subsidiary protection in Hungary is disposed by the 61. § of Governmental Decree 301/2007 (XI.9.) on Asylum Act (LXXX of 2007) [13]. However, the content of 'social integration', therefore the tasks and responsible actors for social work for beneficiaries of international protection has greatly varied during the past decade.

4.1. Prior to 2014

Asylum seekers, such as recognized refugees and beneficiaries of subsidiary protection could remain in open refugee reception centres for at least 6 months after the qualification resolution is delivered. In these open reception centres there were no minimum standards regarding services to be provided by social workers legally defined or determined in any guidelines (opposed to detention facilities where 24/7 presence of social workers was enacted by law) [14]. The social workers acted as in-house points of contact for clients for any daily business. However, there were defined qualification requirements for social workers (namely appropriate higher education and language skills).

The social workers in reception centres generally registered and accommodated new arrivals, performed administrative tasks, managed donations, assisted with school enrolment, assisted with voluntary return through the International Organization for Migration (IOM), and supported with integration of recognised refugees (finding housing, employment, etc.) [14]. All centres had daily routines and programmes, including language classes, social and cultural activities, sports and pre-school and after-school activities for children. Social workers in the reception centres were partly employed by the Hungarian government (IAO) and some social workers and the activities organised by them were partly financed via European Refugee Fund projects, and other social workers were employees of different NGOs (ie. Menedék, Cordelia, etc.).

4.2. Between 1 Jan 2014 and 1 June 2016

As previously indicated, in order to further favour the social integration of beneficiaries into Hungarian society, following 1 January 2014, an integration programme has been introduced in Hungary allowing beneficiaries who meet the respective criteria to benefit from extra money.

During this period, after signing the integration contract, the client was forwarded to the social workers at national 'Family Assistance Service' which was responsible to provide the supportive background for social integration, e.g. to maintain contact on a regular basis, to provide daily advice on practical matter (such as how to apply for a job, how to use the money or the health insurance system), etc. [15]. Following a first interview with the clients an individual, tailored 'care plan' was designed by the social workers aiming to facilitate the integration process. By the integration contract the clients were obliged to cooperate with Labour Office in order to find a job as well as to secure accommodation. In some schools, free Hungarian language courses were organised for school-age children, and there were some family centres in local municipalities (as well as NGOs) that organised free language lessons for adults as well.

4.3. After 1 June 2016

As previously discussed, in accordance with the amendments with effect from 1 June 2016 the specific support based on a so-called 'integration contract' was terminated. Since then, basically employees and volunteers of the civil society and religious charity organisations provide

services aimed at helping the integration process, such as assistance in housing, finding employment, learning the Hungarian language or family reunification.

4.4. Forms, tools and methods of social work for asylum-seekers and beneficiaries of international protection

There are three common forms of social work including **individual case-management**, **group-work** and **community development**. During individual case-management social worker focuses on the situation, personality, problems and questions of the individual client, while during group-work the focus is on common problems, interests and goals of a certain group. The aim community development is primarily the promotion of community life through organizing activities and programs [16].

Tools and methods of social work may include

- communication tools, such as expressing understanding and solidarity
- promoting efficient and confluent communication between staff and clients
- mediation: bridge-role (ie. between clients and authorities)
- representation of the clients (only in case they are not able to represent themselves)
- motivation, providing positive feed-back for clients
- to raise clients' awareness of rules and strengthen their adaptation skills to local circumstances, supporting daily-routine of the reception centre
- to represent reality: promoting clients' understanding of the information from the authorities (clarifying), providing feed-back of clients' conceptions
- providing official and valid information that is understandable to the client (ie. about their status, their possibilities, rights and obligations, return procedures, etc.)
- individual case management, aiding in problem-solving
- counseling in order to make appropriate decision (without influencing)
- aiding in improving the conditions of accommodation of clients (if possible, involving the clients themselves)
- stress reduction, prevention and management of conflicts
- to promote mental and physical activity of clients, taking into account their needs and interests, ie. organizing sport programs or other useful leisure activities
- organizing language, culture courses, or other programmes aiming at integration

- conveying values, such as health, environmental hygiene, respect of other cultures and religions, equality, tolerance, etc.
- aiding in clients' effective time-management during their stay in reception centre
- community development, promoting cohabitation in community, supporting grass-root initiatives and 'internal volunteers' from the community (ie. in organizing culture or religion-specific programmes, celebrations, etc.)
- providing mental hygiene support and developing clients' coping strategies
- providing assistance in identifying and accessing social resources and reintegration options,
- aiding in contacting national and international humanitarian organizations, embassies, as well as clients' separated relatives, friends
- identifying vulnerable persons and facilitating their early access to the necessary care

5. Professional engaged in refugee work

A wide range of different professionals are included in the work with refugees, as state-financed employees starting from the Hungarian Police, the Immigration and Asylum Office and their institutions and other facilities, such as offices, transit zones, reception and detention centres, complemented by public health and social care service providers (ie. Family Assistance Service), as well as by national research and public educational institutions (ie. Migration Research Institute; University of Pécs, Medical School, Migrant Health Programs acting also as WHO Collaborating Centre for Migration Health Training and Research). A significant proportion of professional are employees and volunteers of different NGOs, or religious and other charity organisations.

In general, either public institutions or civil organisations may employ professionals among others: legal experts (ie. lawyers), managers and other program coordinators, interpreters, intercultural mediators, administrative officers, police staff, social workers and social assistants, healthcare workers (MDs, nurses, family visitor nurses), psychologists and other mental hygiene therapists, pedagogists and pedagogical assistants, researchers and lecturers at research institutions and universities (ie. politicians, economists, sociologists, public health experts, etc.), as well as humanitarian aid workers and other manual or public workers without specific qualifications (ie. drivers, cooking and cleaning staff, etc.)

6. Current challenges of social work with refugees

Following the extraordinary migratory pressure which affected Hungary dramatically in 2015, (as Hungary was the second country in the EU28 for the number of arrivals with nearly 178000 registered asylum applications), the Hungarian Government's anti-immigration policy has become clear and resulted in legal amendments and consecutive restrictions concerning the social, healthcare and integration support for immigrants [17]. Only a small proportion of submitted asylum applications have been accepted by the immigration authority, and for those, who are under protection still, there has been no complex refugee integration programme to promote their successful integration. However, the 'Migration Strategy' in 2013 envisaged the adoption of 'Integration Strategy' [6], after 1 June 2016 even the previously provided monthly cash allowance (based on individual integration contracts) has been terminated. Now, at the time of leaving the reception centre (after 30 days), only very few beneficiaries have secured employment, thus paying for rent presents a serious challenge for them and this contributes to further social insecurity.

Today, by law, the beneficiaries of international protection shall enjoy the same rights as Hungarian citizens, thus they are entitled to the aid, services and healthcare provided under the social welfare system, still, they have no real access to services both due to language problems and lack of information about these opportunities. It is still challenging, that there is no specialized institutional system to coordinate integration, and recently mostly civil society and religious charity organisations provide support for refugees during the integration process. Further challenges include the fragmented support system available to beneficiaries of international protection, the highly discretionary nature of accessing these benefits and the underfunding of the whole system, compounded by the lack of cooperation among relevant actors in the field [18].

Finally, while the number of foreign citizens living in Hungary has fallen in recent years, public opinion has remained negative towards immigrants. The most recent Eurobarometer Survey indicates that 81% of Hungarians felt negatively towards immigration from outside the EU, and 94% would like additional measures for irregular migration [19].

7. Examples from practice (NGOs)

7.1. Menedék - Hungarian Association for Migrants

Menedék - Hungarian Association for Migrants has been assisting the social integration of foreigners in Hungary since 1995. With the help of their comprehensive service system, they help thousands of refugees and other foreigners to find their new home in Hungary. In addition to directly assisting foreigners, it is important for them that the host society has an open and accepting attitude towards foreigner since this is the key to a successful co-existence [20].

Social Work provided by 'Menedék' for those under international protection and other third-country nationals

- social services aiming to contribute to social inclusion provided on individual, group and community level
- guidance on health, social, employment, educational and housing subsidies and benefits
- help for active job-seekers to write their CVs and simulate job interview situations, often with the involvement of employers, aiding in labor-market integration
- Hungarian language lessons, school mentorship, preparatory sessions for the citizenship exam
- legal and psychological counseling
- community programs to provide clients with useful information on everyday life and customs in Hungary
- organizing regular events and group meetings (e.g. cooking, city walk, Hungarian lessons, female yoga, Introduction to Constitution)
- community integration programs that provide opportunity for clients to mingle with members of the majority society (e.g. community gardening, family picnic, sports day, drama group, radio and blogs)
- provision of intercultural mediation in communications between refugees and authorities, employers, flat owners and utility companies to prevent or manage intercultural or language conflicts
- their social workers, intercultural mediators and community workers visit the reception facility in Vámosszabadi on a weekly basis where they provide individual social counselling and organize group activities for both children and adults

- provision of services at multiple locations in Hungary: in addition to their central office in Budapest, they are present at the reception center of Vámosszabadi, at the children's home of Fót, and at the shelters of Nyírbátor, Győr, Kiskunhalas and Liszt Ferenc Airport [20].

7.2. Cordelia Foundation

Cordelia Foundation was established in 1996 as with the aim to assist torture survivor and severely traumatized asylum seekers, refugees and their family members arriving in Hungary through psychiatric, psychotherapeutic, psychological treatment, psycho-social counseling [21].

The treatment of the psycho-social and somatic problems of this unique target group is a basic-service public-benefit task, and at present Cordelia is the only civil organization in Hungary which serves this role. The services of the Foundation thus supplement the national health care services through a comprehensive treatment-system. They finance their activities through grants and funds, their main donors are the EU and UNCHR (Office of the United Nations High Commissioner for Human Rights) [21].

Their professional team, consisting of therapists (psychiatrists, psychologists, non-verbal therapists) with multicultural experiences and training, generally treats the refugee clients at the reception centres. Their work is assisted by a social assistant and trained interpreters. Using their internationally acknowledged methods they treat annually 600-800 clients. They regularly provide training and supervision for professionals working with refugees [21].

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