

„Housing is more important than eating” – the ‘adventures’ of a homeless service provider in a housing program for refugees and people under subsidiary protection

A study

By Babett Tatár

The Budapest Methodological Centre for Social Policy and Its Institutions (BMSZKI), the homeless service provider of the City of Budapest, has been working for offering targeted and, if possible, personalized services for a wide range of people living in housing poverty since its foundation. As the biggest service provider in Central Europe we saw it our responsibility and also our possibility to help people usually not considered homeless service users, but who still turned to our services for help, as their problem – a wider definition of homelessness – is also very much our cause. This is how we have opened our emergency shelter for women and their children, temporary accommodation for families, and how we still receive people struggling with psychiatric problems, drug addicts, people who are elderly or unwell on a daily basis – it is not difficult to see that these people have such severe and complex needs that by far exceed the framework of support originally developed and financed to work with people who merely have housing needs. My colleagues, though, have always asked themselves: if we do not offer these people support, if we are not willing to help, what will then happen? This is not just a moral question, it is also an economic one: if we do not offer timely support to someone in a crisis situation, then by all likelihood their problems will increase as time passes, compared to if we have reacted when it was needed (and of course society should have reacted much earlier, as homelessness is the problem of the lack of prevention, which not only would be cheaper, but also a more cost-effective and human solution in most cases – homeless services do not have the means to prevent people from coming to ask for help).

This was also our vision when we decided to open our doors to people fleeing their homes, and try to offer them services adapted to their special needs. We tried to offer solutions to the crisis of migration peaking in Europe, and thus in Hungary, in 2015, based on our own skills and experience: we provided emergency services to the masses of people arriving to Keleti train station, and, relying on our more than ten years of experience in similar projects with homeless people, started a supported housing project with the aim of long-term integration, using outside funding.¹

In this book we want to sum up our experiences, our “adventure” as a homeless service provider in the field of supporting refugees (which was deemed painfully too short by the withdrawal of the financing of similar future projects during the election campaign in 2018), the effects this project had on our organization, our personal impressions, and, above all, the stories of the refugees we have worked with. In most of the interviews, children tell about their experiences in Hungary, their plans, their dreams – and, not last, about their everyday lives,

which on the one hand are like those of any other child: football, teenage-love, games, friendship, school, but on the other hand there is always the shadow of uncertainty, a rootlessness caused by the lack of a home, a country, and the desire to grow fresh roots in a new land. We have chosen to ask them to talk as we were all awed by their flexibility, persistence, will to struggle, desire to live and desire to live well – these were features of all the children we have met, despite of the traumas and catastrophes they had been through.

We cannot emphasize enough that behind the official figures of the refugee crisis, all that is published in the media, through government campaigns, national consultations, strategies, indicators, etc., there are real, flesh and blood people: men, women and children fleeing something, social workers supporting them, civic volunteers, officers handling their files, police, border patrol and civic guards, Hungarian citizens empathizing with them or being terrified by their arrival, press workers and politicians – none of these people can afford to forget about the responsibility entailed when talking about refugees.

The effects of the refugee crisis on our services in 2015

The crisis of migration and the peculiar situation of Hungary within has been summarized in many studies before, thus we do not wish to offer a detailed description. We only discuss the processes that led us to turn our responsibility as a social service to active participation.

„By looking at data, the migration crisis resulted in one major change in Hungary: in the number of submitted applications for asylum. Hungary had not seen such a wave of refugees since the change of its regime, and in 2015, more than 177 thousand people submitted applications for asylum. In 2015, more asylum seekers arrived in Hungary than in the 23 preceding years altogether. ... The number of asylum seekers in Hungary peaked in the third quarter of 2015, exceeding a hundred thousand. According to police records, the peak in arrests made for illegal border crossing was September 23rd 2015, when 10046 refugees were captured by authorities. In a European comparison, considering the numbers of submitted requests for asylum per 100 000 inhabitants, Hungary was the first in Europe by 1797 requests. The number of requests exceeded 1000 in Sweden (1667 people) and in Austria (1028). At the same time, most people only submitted their request in Hungary as a formality, and immediately left the country to travel on to Western Europe, primarily wanting to go to Germany. During the Balkan wars in 1990 more asylum seekers actually stayed in Hungary permanently (several tens of thousand) than in 2015, when out of the almost 180 000 people registered only a few thousand stayed on in Hungary for a longer period... The significant increase in the number of requests of asylum, thus, does not mean that a large number of asylum seekers wanted to settle down in Hungary, not did many more people receive asylum than in previous years. On the contrary, due to aggravations in the policy on asylum by 2016 it had become virtually impossible to be granted asylum.

- 1) BMSZKI submitted a project application to a call „Developing and Implementing Programs to Facilitate the Independence of People under International Protection through the Access to Housing” by the Asylum, Migration and Integration Fund of the Ministry of Interior Affairs on 08.08.2015. The Ministry of Interior Affairs informed us of their decision to support the project on 02.03.2016. The project was to take place between 01.01.2016-30.06.2018, but as the Grant Agreement was only signed on 10.06.2018, the project was greatly delayed. It was finally launched in August 2016 and finished, as planned, on 30.06. 2018.

Between January 1st 2015 and May 31st 2016, 194 831 decisions were made by the Immigration and Asylum Office. 97% of these resulted in an annulment of the procedure, mainly because the applicant left the country after submitting their request and had not left his new address behind. Out of the 5178 real decisions only 736 were positive, which means that 86% of the requests for asylum had been rejected. (BÁH 2016a).”²

„There had been significant changes in the countries of origin of those requesting asylum during the crisis. In the first two months the biggest group of requests were from people from Kosovo, but starting from the spring the number of people arriving from Syria, Iraq, Afghanistan and Pakistan rose dramatically. ... This is important, as in the first half of 2015 government representatives claimed that the majority of those arriving to Hungary were not fleeing a warzone but were “economic migrants”. By the summer this claim was no longer plausible, and the government stopped arguing about the countries of origin and started to claim that asylum seekers had passed several safe countries on their way to Hungary and thus could not be regarded as fleeing from war. After the terrorist attack in Paris, debates of this angle ceased, and terrorism and the wave of refugees became intermingled. But the facts show that more than half of the asylum seekers arriving in Hungary came from two countries, Syria and Afghanistan, so from war zones.”³

As our services are based in Budapest, we had observed all this from first hand. The masses arriving at Nyugati, and later Keleti train stations, and large groups of asylum seekers later in various parts of the city posed a great (and unprecedented) challenge to those homeless service providers who are sending outreach teams on the streets.⁴

2) Juhász, Attila–Molnár, Csaba: Magyarország sajátos helyzete az európai menekültválságban [The unique situation of Hungary in the European refugee crisis] pp. 264-266., In: Társadalmi Riport 2016, <http://www.tarki.hu/tarsadalmi-riport>,

3) Juhász–Molnár: ibid. p. 267.

4) One can see an interesting parallel when thinking about events significantly shaping what is today the service provision for homeless people in the capital: the protests taking place in the winter of 1989-1990 at Blaha Lujza square and Déli train station. „The first protests started in the winter of 1989, after the Hungarian Railway Company announced that all train stations in the city would be closed for the night.

Menhely Foundation writes the following about these events in its Annual Report 2015: “Our Emergency Phone Line, responsible for coordinating the work of outreach teams in Budapest, noted at the end of June that there were masses of refugees sleeping rough in Budapest. We had encountered smaller groups throughout the spring, but these left the streets after one or two days. By the end of June, the situation had become critical – there were large numbers of refugees sleeping rough constantly, including families with children. It was obvious that we had to do something about it, as we cannot only keep on serving homeless people and ignore refugees.

By the beginning of July, we asked outreach teams to be vigilant in the areas they cover, and signal it to us if they meet refugees, so we can ask NGOs organized to offer them support (for example Migration Aid, Segítsük Együtt a Menekülteket [Let’s Help Refugees Together] etc.) to pay them a visit. After voluntary support centres had been organized at train stations and on II. János Pál pápa square, we tried to guide smaller groups of refugees encountered in various parts of the city to these centres with the help of outreach teams. ... From the beginning, we had valued cooperation with those voluntary civic initiatives which played a significant role in offering services to refugees. We tried to follow their community sites to gain information and hear about problems: when there was a need, we provided blankets, paper cups when they had run out. They were the first ones to ask for help with accommodation: on the evening of July 7th we received a call to find shelter for two women and four children.

As several hundreds of homeless people were sleeping in the train stations at night, it was obvious that this new policy also aimed to keep them away. Several social movements and newly formed political parties protested and asked the Railway Company to revise its decision. As a reaction to being threatened, homeless people gathered at Blaha Lujza square on November 28th, 1989, and started a spontaneous sitting protest. Several people demanded that the empty apartments of the Hungarian Socialist Workers’ Party be transformed into social housing... According to eyewitnesses, this was practically a completely spontaneous demonstration. Not only were there no outside organizers, there was also no one homeless person who took the lead – it was a spontaneous, collective action, without any outside influence or even troublemaker(s). These people were very self-confident.

Protestors found that the general public was supportive: people brought them blankets and food, and NGOs wrote to the prime minister and the ministry demanding a satisfactory solution...

The police reacted to the protests in a quite ambivalent way. Although earlier they had harassed people sleeping at train stations, they were reluctant to use force against people protesting at Blaha Lujza square. Finally, on December 1st the chief police openly declared that homelessness was not something for the police to deal with..., and so the police did not intervene in the protests. ...

The protests received wide interest from both local and national politics. After four decades of denial, on November 15th, 1989, the City Council of Budapest discussed a document entitled “Suggestion for a temporary solution for the problems of homelessness” and on November 29th homelessness was on the official agenda of the Council of Ministers. Through a few supporters, protestors started negotiating with the City Council. ... In a few days the City Council offered temporary solutions to homeless people. First, approximately 200 homeless people were moved to the gym of a high school in the 21st district of Budapest. Then in December a building was opened in the city centre, at Vajdahunyad street, also offering temporary accommodation. Homeless people first operated the building by themselves, almost completely without outside intervention. ...

The second wave of protests started on January 11th, 1990. Despite two temporary units opening in December, many people still had no place to sleep at. There were still approximately 200 people living at Déli train station, who decided to go on strike and demand housing. ... protesters and sympathizers negotiated with authorities about acceptable accommodation for days. ... Due to the growing pressure, authorities first opened a youth camp in Csillebérc [the hilly part of Buda] for homeless protesters, then a military compound that could accommodate 400 people by Budaörs [suburbs of Budapest].” In: Udvarhelyi, Éva Tessa: Mi is emberek vagyunk - Haj- léktalan-aktivizmus a rendszerváltás környékén [We are also humans – Homeless activism around the change of regime], http://dinamo.blog.hu/2014/09/11/mi_is_emberek_vagyunk_hajlektalan-aktivizmus_a_rendszervaltas_kornyeken

We placed them in the emergency room of our accommodation service at Vajdahunyad street. Altogether 116 people received shelter in this tiny room with only two beds until the middle of September – once a couple even stayed with six children.

Several homeless service providers joined our initiative by opening their winter emergency shelters closed during the summer. Menedékház Foundation provided shelter for families with children, the Baptist Charity Service for men, while Oltalom Association opened its theatre for people in need. We contacted other NGOs also accommodating refugees. From the beginning of August, we used a common database containing all units of accommodation available. Thanks to this joint effort, the Emergency Phone Line managed to find accommodation for 77 women, 132 men and 165 children between July 1st and mid-September.”

BMSZKI offered the following relief services to people in need in its temporary accommodation service at Alföldi street, which is close to the Keleti train station:

- possibility to take a shower,
- basic health care, like bandages, spraying for flees and lice, fever- and pain relief,
- possibility to wash clothes,
- clothing and shoes,
- some food,
- internet access.

Between 06.07.2015 and 14.09.2015 we served between 40–350 people on a daily basis, several thousands in total during the whole period. This was a huge burden on both our colleagues and the infrastructure as well.

This is what the Alföldi street hostel said about this in their Annual Report:

„We needed to arrange everything from one minute to the other:

- *volunteers: because our staff can barely handle their everyday duties, and helping refugees required additional tasks,*
- *donations: because we needed to provide shower gel, soap, towels, as well as clothing, health supplies, food,*
- *build a network with other organizations who were offering help for refugees ...*

All of our staff had taken their fair share of this, and more than what could have been expected – some even sacrificed their free time or holidays. We received help from 19 volunteers – staff from other BMSZKI services, their children, colleagues from other homeless service providers, students, retired people and sometimes completely laic helpers. We created separate timesheets, role and task descriptions for them, trying to pass on the basic information needed to offer help efficiently. Language and cultural barriers still posed what seemed like unbridgeable gaps, not to mention differences between gender and religion.

Those two and a half months required gigantic levels of energy from our staff. For many of us it was also a lifetime experience to offer this type of support. (...) Apart from our energies, the building also felt the huge pressure of serving so many people. Our community areas

and bathrooms could have used more focused attention...”⁵

We had to open separate resting areas for men and women with children. Naturally, we did not have access to interpreters or intercultural mediators, etc. Our colleagues and volunteers did the best they could as they saw fit, out of human kindness, solidarity. Just like most other citizens of Budapest did during this period, showing an unusual high level of solidarity. At the same time we also had to make sure that the temporary accommodation hosting 250 people could function normally as well. We were worried whether there would be tensions between the growing numbers of newcomers and our tenants, most of whom struggle with their physical and mental health, as this situation also meant that they had to adapt. Fortunately there were only a few minor frictions, but no serious fights or arguments had taken place. Whoever could, provided help.

This challenge as well as the personal stories of these huge numbers of vulnerable people had affected our colleagues, volunteers and tenants for months to come.

Rarely, we had already encountered foreigners, even refugees or people with a subsidiary protected status in our homelessness services. But these remained isolated occasions. According to the 1993:III. Act on Social Administration and Social Services, foreign citizens can access the following services in homeless institutions:

- people who are recognized as refugees, are under subsidiary protection, immigrants, have a resident status or are stateless⁶ are entitled to the same services as Hungarian citizens, thus all homeless services as well.
- The citizens of countries that have ratified the European Social Charter if residing in Hungary legally, are entitled to local social benefits, food services and accommodation in case they cannot provide these for themselves, and this would endanger their lives or physical safety. The local authority where the person resides is responsible to offer these types of support.

5) Annual Report, Alföldi Temporary Hostel: https://www.bmszki.hu/sites/default/files/fajlok/node-277/21._alfoldi_atmeneti_szallo.pdf

6) „REFUGEE: Refugee status may be granted to a person whose life and liberty are threatened in his/her country of origin on account of race, religion, nationality, membership of a particular social group or political opinion, or whose fear of being subject to persecution is well founded, and who currently resides in the territory of Hungary and submits an application for asylum. In order to maintain the unity of the family, unless there is a reason for exclusion, upon request, the refugee’s family members (spouse, if the family relationship has been established prior to entering Hungary, minor child, or the minor child’s parent where applicable) and the refugee’s children born in Hungary may also be recognized in as refugee. Refugee status remains in force until the refugee receives Hungarian citizenship, or until the refugee status is withdrawn. The refugee authority is ex officio required to review each refugee status every three years. PERSON ADMITTED FOR SUBSIDIARY PROTECTION: A person may be admitted for subsidiary protection if he/she does not qualify as a refugee but in respect of whom there is reason to believe that the person concerned, if returned to his/her country of origin would face a real risk of suffering serious harm, and in unable, or owing to such risk, unwilling to avail himself or herself of the protection of that country. In order to maintain family unity, unless there is a reason for exclusion, upon request, the family member of the person admitted for subsidiary protection will be granted subsidiary protection as well, if they have jointly applied for protection or if the family member has submitted an application for subsidiary protection upon the consent of the person admitted for subsidiary protection, before the resolution for granting subsidiary protection status is adopted. Furthermore, if a foreign national who has been granted subsidiary protection status has a child born in the territory of Hungary, the child shall also be granted subsidiary protection status upon request. The refugee authority is ex officio required to review each subsidiary protection status every three years.

- People who are no longer under detention and can move around freely, or whose temporary accommodation assigned by the Immigration Authority is no longer available, are entitled to use night shelters for homeless people.
- According to the Act on Free Movement and Travel people entitled to move around freely can use any social service if they ask for assistance in Hungary within three months of their arrival, and they have a legal address according to the Act on Personal Data and Address Registration (for homeless people the address can be a homeless shelter as well).

Although according to Hungarian law refugees and people under subsidiary protection are entitled to all services just like Hungarian citizens, and they are obviously needy, certain factors still prevent them from accessing our services in great numbers.

The strongest factor is that our temporary hostels are almost completely full and can only be accessed after a shorter or longer period of waiting (which can take anywhere from three weeks to 8 months). While waiting, people can use emergency shelters, but most of these are not of the highest quality (they can accommodate 15-20 people in large and crowded bedrooms) and are also full.

http://www.bmbah.hu/index.php?option=com_k2&view=item&layout=item&id=521&Itemid=728&lang=en
Both statuses are recognized through an asylum procedure by the Immigration and Asylum Office, upon an application from the asylum seeker.

STATELESS STATUS: „An application for stateless status may be submitted by a third-country national residing in the territory of Hungary who is presumed not to have citizenship in any state.... In the absence of the requirements for a residence permit specified in Act II of 2007 on the Admission and Right to Residence of Third-Country Nationals, a residence permit shall be granted on humanitarian grounds to a person recognised by Hungary as a stateless person. The validity of a residence permit granted on humanitarian grounds shall be three years and it may be extended by up to one additional year at a time.”

Source: Immigration and Asylum Office

http://www.bmbah.hu/index.php?option=com_k2&view=item&layout=item&id=466&Itemid=1235&lang=en

Terms related to residence are also defined on the website of the Immigration and Asylum Office.

These mass services can be very frightening to someone unfamiliar with the system, often with traumatic experiences behind them, thus refugees do not tend to stay in these services for long. Of course these emergency shelters are not ideal solutions for Hungarian homeless people, either. The biggest difference between the two groups, however, is that while Hungarian homeless people usually end up here after a long process of impoverishment and sliding downwards (though some people do come to our services right when they lose their housing, and we try to move them on as swiftly as possible), and have often become indifferent and hopeless, refugees are full of motivation and a hope for a better, safer life, and thus for them these services are not acceptable.

Families can also not accept that we cannot accommodate them together. Homeless services cannot offer housing for children (children are taken care of in child welfare services), and the number of places where couples can stay together are scarce both in hostels and in emergency accommodation. Families would need to separate if they are to sleep at social services: children could go to the child welfare services, women to women's shelters, men to male shelters... It is completely understandable that people feel frightened by this option in a strange and new country.

One could reasonably wonder why refugees do not have a priority in accommodation services. Homeless services do not only struggle with the quality of service they can provide, but also have to cater for various priority groups already: young people under 24, pregnant women, people sleeping rough, people with chronic health problems, physical disabilities, psychiatric problems, people released from prison or state care, who have just become homeless... It is a tough choice which of these people should have priority and be placed on top of the 200-300 people long waiting list, who the most vulnerable is, who is in the most difficult situation. Our colleagues at the Intake Team have to make that tough choice every day. Of course, it is always possible to add new groups to those entitled to priority – but the system is already unsustainable.

It is undeniable that without the knowledge of the right language and other special information our colleagues are usually scared to offer support to a non-Hungarian citizen. We do not have access to interpreters (nor do we know of any other service provider or even authority, for that matter, who does), not even for taking care of official paperwork, thus social work and psychological counselling become very time consuming, if at all possible... Linguistic skills are only one of the obvious skills and knowledge needed to work with foreigners.

Despite all this, based on our experience during the summer of 2015, we decided to look into our supported housing programs for homeless people, and based on our findings, develop and implement a supported housing program for refugees and people under subsidiary protection. This is the story of this program.

A short introduction of the program

In August 2016 we started our “*Housing support for people under international protection*” program, with the aim of facilitating independent housing or supporting housing already acquired. Vulnerable families and single people, recognized as refugees or under subsidiary protection by the Hungarian authorities, could apply to take part in the program, if they wanted to permanently settle in Hungary, and at the time of application, their income per capita within the family did not exceed 150% of the net minimal salary per month.

Within our program we offered housing support for 60 people, together with personalized social work and other services facilitating social integration.

As the project draws to its end, we have supported 74 adults and their family members (altogether more than a 100 people) financially – some are still being supported at the time of writing this report. In average, we have provided about 650 000 HUF of housing support (40-80 000 HUF/month) to people during 8-12 months to cover some of the costs related to housing. When considering family members who did not directly receive financial support but lived in the households of those supported, on average a person has received 460 000 HUF. This was exclusively support to cover housing related costs.

Supported housing most often meant a rented apartment, in three cases a room in a workers’ hostel and in one case we supported the bills of someone in their own (very derelict) house.

Apart from financial support, we offered each of our clients counselling related to housing and case work. Our four social workers (two of them volunteers) supported people in finding appropriate and safe independent housing, contacting landlords, preparing the rental contract, etc. Social workers supported people in sustaining their housing by helping with administrative issues, accompanying them to official appointments, finding appropriate health care, the education of children, etc.

To ensure efficient communication between staff and clients, we could rely on interpreters when needed – our colleagues speak several languages, and one of our volunteer social workers is also a refugee, speaking Farsi and Dari. Of course several of our clients already spoke Hungarian well enough not to need an interpreter for everything. We regularly used consecutive⁷ interpretation in Dari, Pastu, Farsi, Oromo, Somali and Arabic languages to be able to communicate with our clients.

7) A technique of interpretation where the interpreter translates live speech in small, meaningful segments, but not verbatim.

1. chart: *A short overview of the support offered within the program*

mapping of individual needs

- application form
- first interview
- care plan
- regular contact during the supported and the aftercare periods

supported housing program

- housing support (8–15 months)
- help in seeking rented accommodation, signing the contract, keeping in touch with the landlord/owner
- help in administrative tasks related to housing (pl.: registering the new address, payment of bills, etc)
- if needed, help in moving, providing donated furniture

personalized social work with clients and their families

- help in finding and sustaining employment
- help in acquiring various benefits (for example regular child protection allowance, child allowance, etc)
- help in acquitting official documents, permits
- help in studies, language learning
- help in the education of children – nursery, kindergarten, schools
- supportive talks
- permanent presence, availability

services related to health problems

- facilitating the registration with children’s or adults’ GPs and nurses
- access to specialized medical care
- registration in the National Health Care system
- financial support to cover health-related costs

programs and services facilitating integration

- access to interpreters
- personal and group therapy led by a psychologist
- free time integration activities (women’s club, sports, cultural events)
- group sessions on independent living (for ex. about taxation, starting an independent business, savings and loans)
- Hungarian language classes (led by volunteers)

representation

- legal support
- involvement of the ombudsman
- asking for official clarification in several cases that were relevant to a wider circle of clients

Some important figures about the program

Between September 2016 and May 2018, the writing of this report,

- We have received more than 120 applications to the supported housing program,
- 74 clients received housing support – together with their family members this means supporting more than 100 people, **a quarter of them minors. We have exceeded our expectations by 20%.** 65 people (instead of the 60 planned) received housing support and the accompanying integration services for the originally planned time span (8-15 months), and another 9 people received emergency housing support for 1-3 months. Naturally, they could not benefit from the accompanying services as much as those involved at an earlier phase.
- during the program, our clients rented/still rent more than 40 units of housing, three people lived in a workers' hostel, the rest in privately rented accommodation,
- we had terminated the housing support of 6 clients due to their unannounced departure – this is far less than we had anticipated.
- The total budget of the project is 82 501 550 HUF, until the writing of the report **more than 75% were directly spent on the target group:** about 13% of this included specialized services (interpreter, psychologist, mental health and free time group activities, social workers, etc), **57% were directly paid as financial or in-kind support** (for example housing support or public transport tickets) **to refugees and people under subsidiary protection.** (This latter will increase slightly before the project is closed, we have already asked for permission to regroup our budget.) The rest covered the management and sustainment costs of the two-year project, publicity, etc.

Statistical data on clients

The following data have been gathered about our clients in the long-term housing support program (65 clients + 27 family members, altogether 92 people). With them we have worked for a long enough period to assess their needs and map their possibilities.

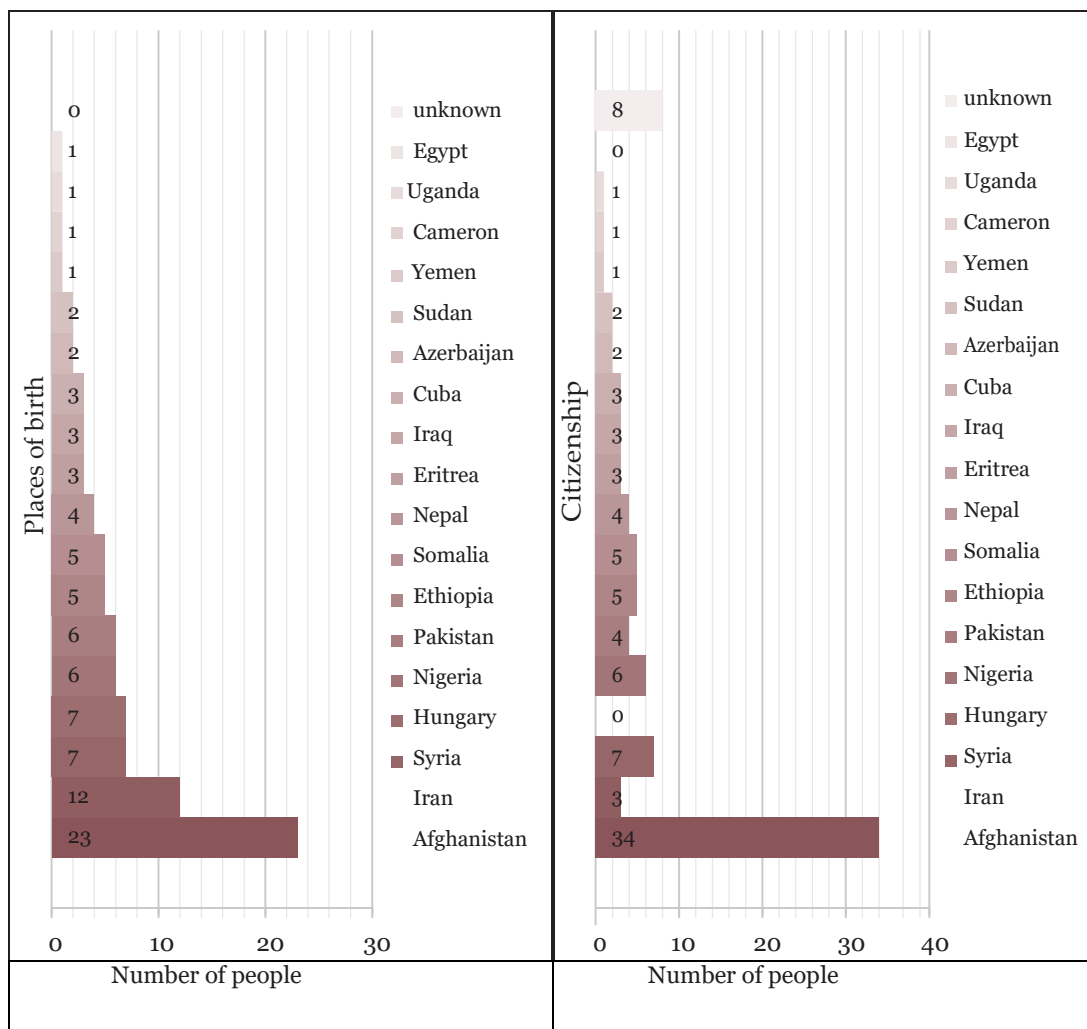
Place of birth and citizenship

The biggest group of clients regarding their places of birth and citizenship are Afghans (*see diagrams 1 and 2.*), but many of our clients born in Iran have an Afghan citizenship. They are most likely second or third generation refugees, who were born in Iran but could not receive citizenship there. This also reflects how a significant part of the people arriving to Hungary have been struggling with long decades of refugee experiences.

(You can read more about the vulnerable situation of Afghan refugees residing in Iraq in the interview by Stefánia Fábián.)

1. sz diagram: Places of birth of our clients

2. sz. diagram: Citizenship of our clients



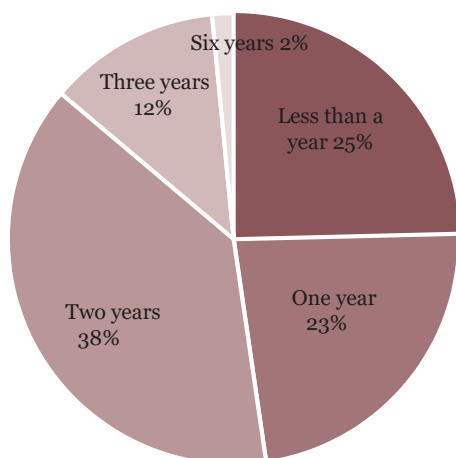
Unknown citizenship in almost all of the cases means children born in Hungary, as they do not automatically receive Hungarian citizenship. The child of a non-Hungarian citizen can receive Hungarian citizenship on a claim of descent, dated back to their birth, if the other parent is Hungarian, officially recognizes his parenthood or a court establishes the paternity. One can receive Hungarian citizenship on a territorial claim if their parents are unknown or stateless (the citizens of no state), but only if they have a registered address in Hungary.

Naturalization – which means acquiring Hungarian citizenship – can be applied for after eight years of continuous residence in Hungary (if all other conditions apply). Through simplified naturalization a person recognized as refugee by the Hungarian state can apply for citizenship if they have officially resided (had a registered address) continuously in Hungary for three years. Children can be exempt for the requirements of continuous residence when applying together with their parents, or if their parents have already acquired Hungarian citizenship.

For how long have they been in Hungary?

Almost half of our clients (31 people) have received their status as refugees or are under subsidiary protection, a quarter of them had only spent a few months in the country when we started working with them. Several of them had stayed in a reception centre earlier and could move into independent housing with our support. Another 38% (25 people) had arrived within two years, eight people no longer than three years, and we only had one client who had been in the country for more than five years.

3. sz. diagram: *Time spent between acquiring the status and becoming involved in the program*



Many of the families with children had lived in the temporary hostel for families of the Baptist Charity Service after having stayed there for the maximum allowed duration of one-one and a half years.

Age

The majority of our clients were relatively young – their average age was only 31 (not counting children). Our oldest client was 60 years old, and our youngest adult clients were 18. About one fourth of the people supported were children. During the program five babies were born to the families. The average age of children was 7.

Gender

32% of our clients are female, 68% male (including family members as well). We have had a woman who was a single mother with children as well as two sisters. As we have worked with a relatively high number of women, and some of them were more isolated (they were at home with small children), we decided to focus more on their social integration and organized several women-only programs for them. We shall discuss these later.

Education

We have not been able to gather reliable data on the level of education of all of our clients. Even those with a lower level of education had picked up some vocational skills, but in their countries of origin these might have been vocations that do not require any formal training. The data on the levels of education can be seen in Table 1.

1. sz. Table: *The level of education of our clients*

Level of education	People
No data	20
None (illiterate)	2
Less than 8 grades	6
About the equivalent of 8 grades	13
Secondary	15
Higher level	9
TOTAL	65

We succeeded in translating the school records, diplomas, certificates, driving licenses, etc with the support of the Refugee Program of the SOS Gyermekfalu Magyarországi Alapítvány [the Foundation of the SOS Children’s Villages].

The above data also reflects how the 8 basic grades of elementary education are needed for our clients, as without that it is impossible to find a job or obtain a driving license. There is only one school in Budapest, the Than Karoly Eco-School, Secondary, Vocational and Technical School of the Technical Vocational Center of Budapest, which organizes elementary education tutorial classes within its adult training program for refugees and people under subsidiary protection. They only offer a very limited number of places and have to reject a high number of applications.

When refugees start school, they face further difficulties because of their lack of the knowledge of Hungarian. Adults often do not speak Hungarian well when starting their studies, as the number of places available in language schools is also very limited. There is no centrally organized public language training in Hungary. Some language schools received outside funding to organize Hungarian language courses, but only for beginners. We have met several families where the child in elementary school escorted the parent to school on the weekends and tried to help them understand, interpreted, explained what was being said. This posed a great burden for the children.

Employment

34% of the adults (22 people) did not have a job when becoming involved in the program (see Table 2.), and a further 23% only had illegal, mostly casual work. By the end of the project we only had three unemployed clients, and almost everyone has succeeded in getting a legal job, even if only part time, and several people have taken on additional jobs as well.

Almost all of those who already had a job when starting in our program have found a

better paying one during our time together. Most of our clients still do not have well-paying jobs, they are typically employed in catering as kitchen help, sewing, health care, launderette, etc. Four clients have worked in positions that required a higher level of training: social work, intercultural mediation, nursing and one person has become self-employed. During the project, through help from the Refugee Program of the SOS Children's Villages, we have contacted a company building stages which employed several of our clients in well-paying jobs. We could rely on the job search program of the Maltese Charity Service and the staff of Menedék Association.

2.sz. Table: *Employment status of our clients in the beginning and at the end of the project*

	<i>Beginning (people)</i>	<i>End (people)</i>
no employment	22	3
had a job – casual or part-time, but illegally (no social insurance)	13	1
had a job – regular or full time, but illegally (no social insurance)	2	2
had a job– casual or part-time, legally	6	6
had a job – regular or full time, legally (only playing part time social insurance)	8	11
had a job – regular or full time, legally	8	24
had his own business	0	1
no data	5	16
TOTAL	64	64

Our colleagues did not only help our clients in seeking employment, but in contacting and keeping in touch with employers. They accompanied people to job interviews, helped in signing the contract, informed employers about the legal requirements about refugees and people under subsidiary protection, were present when an issue needed to be solved or a conflict resolved, and helped clients check on their social insurance status to see if they were indeed working legally.

Improving the low level of employment of our women clients posed a huge challenge, as renting and sustaining an apartment requires two salaries. Without two salaries families with a low income cannot sustain independent housing outside social services.

About half of the women (10 people) did not work when starting in our program, and by the end, only three women have found no employment – while in most families there were very small children. We only met a few families where there was a cultural barrier towards the woman working. These families felt that the women were to raise children and keep the family unity, while the husband had to be the breadwinner. In one case, cultural differences have caused a conflict with the family, as the wife would have wanted to study and to work.

Unfortunately, even though the employment status and salaries of our clients have significantly improved during the project, their income is often still too low compared with the private rental prices in Budapest, and they cannot sustain their rentals without the support of social services in the long term. For example, one of the families with two children where both parents are employed rent a two room apartment in the 8th district of Budapest for 120 000 HUF/month + bills (this is considered a fair price in the Budapest market). Their net minimal salary including child tax credits is about 220 000 HUF and they also receive 26 600 HUF of child allowance, so their monthly income is 246 600 HUF. They spend at least 61% of their income on housing (calculating with an average of 30 000 HUF for utilities), and do not have 100 000 HUF each month for the four of them to live: to buy public transport passes to go to school and work, buy food, toiletries, cleaning supplies, clothing, pay for school expenses etc. Obviously they cannot put money aside for unforeseen events or a deposit of 2-3 months worth of rent. If either of them becomes ill just for a few days, their livelihood is in danger, including their housing. This is unfortunately also the case with Hungarian citizens. There are many people in Hungary today for whom housing has become an unaffordable luxury.

Health

We have found that the majority of our clients (34 people) have serious health problems. This was one of the largest difficulty to solve. We have hardly had any clients who did not struggle with a health issue at least once during the two-year project. Almost a third of them had some sort of health-related, psychological problems (often depression) when they joined us, and we have found out about the struggles of many more on the way. Some could only “afford the luxury of becoming sick” once in secure housing – they had held themselves together more or less, as they could not do anything else, but once their lives were a bit more stable, they could no longer keep going.

Uncertainty, a series of traumatic experiences and their circumstances (too much – often physically difficult – work, too little free time, bad quality and not enough food, destitution and continuous stress) have left their marks on their physical and mental wellbeing.

We have accompanied some people through serious surgeries. Several people suffered from spinal ailments, arthritis, high blood pressure, heart disease, problems of the thyroid gland, cancer...

Several women had gynaecological problems. For many, it was unacceptable to be treated by a male doctor, and it was not easy to find a female gynaecologist. As time passed and people started to trust their social workers more, they started to speak up about their problems, some of which they might have struggled with for months, not daring or knowing to ask for help.

Accessing health care for refugees in the Hungarian health care system itself struggling with not enough resources often seemed like an impossible mission. We generally found that GPs, paediatricians and nurses were helpful and understanding. We have hit several walls when it came to specialized medical care. Once a patient was refused a check-up that had been scheduled months earlier, because the doctor was on holiday and the one replacing them was not willing to see our client – so he had to wait for another two months (even though his social worker had accompanied him). Despite all, we have managed to get everyone to the necessary treatment. Of course we have also met wonderful health care professionals in the specialized medical services as well.

Our social workers did not only look for the right doctors and make appointments but also accompanied our clients to these (especially in the case of specialized health care, as that is where we have countered the biggest resistance), helped understand the results, find the right rooms. Whenever it was necessary, we provided interpreters. This was a very expensive service, as in most cases our clients did not receive an exact appointment, and even when they did, there were always serious delays, so we also had to pay the interpreter for the hours spent waiting. (By the end of the project we have shifted resources to pay for private health care, which proved to be more cost-effective.)

Our project was greatly supported by the Refugee Program of the SOS Children's Villages. Their integration team has supported our clients as well – helped adults enrol in educational programs, distributed in-kind donations (clothing, formula for babies, diapers), translated school certificates, bought school supplies for children, etc. Their most significant help, however, was health care consultations. A paediatrician received our clients once a week on a voluntary basis, and helped explain the results of various examinations, discussed the next steps needed with clients and social workers. There is an article in this report about her work and the difficulties refugees faced in accessing health care. We want to thank her for her work and her caring, accepting, calming personality that our clients have also greatly appreciated. Some people that we had not been able to get close to opened up to her.

We have offered various services in reaction to mental health problems. A psychologist received patients on an individual basis, and could refer our clients to the psychiatrist of BMSZKI's homelessness services, if needed. Unfortunately, the individual counselling sessions did not work too well, most clients were not ready to commit to long-term therapy and did not return after a few sessions.

Maybe we have failed to explain to them why it would be useful for them in the long-term to “just” talk about their problems. Several people told us that these sessions upset them in a great way and they could not afford either the time or the energy to focus on their souls, because they needed to focus all their energies on sustaining the fragile livelihood they have acquired. We had two female psychologists – it would have been better to have a male one for the men. By the time we recognized the problem it was too late to hire someone else and still have enough time for meaningful therapy.

At the same time the women-only therapy group led by the same female psychologist was a great success. We had advertised it as a women’s group and started working through crafts, discussing about the change of season and holidays, and discussions about the problems they face opened up naturally. The involvement of crafts allowed for alternative ways of expressing feelings, pain, anxiety. The group sessions also offered a safe space, the luxury of time spent on their own pleasure for the women and mothers who participated.

We would have benefitted from help of a child psychologist, but on the one hand, we recognized the need too late, and on the other, we did not know how to make this service attractive for families. We have experimented with animal assisted therapy, but it was not too successful. People were enthusiastic at first when we talked about the possibility of group sessions with dogs, but when the meetings started, people stopped coming (partly due to another organization starting a language course at the same time), so we have given up trying.

To enhance psychological support, in future projects we might experiment with the assertive community treatment model adapted by the housing first services developed by Sam Tsemberis. In this model support is provided on a community base and not through case management. The support is offered by a multidisciplinary team where various professionals – for example a psychologist, a substance abuse specialist, a therapist, teacher, etc – play equally significant roles. Every client meets all the helpers, there is no one person responsible for anyone. This allows for clients to spontaneously meet all helpers, even those that they would never seek out by themselves. The roles and qualifications of staff are not highlighted (although also not lied about), clients know that they are there to offer support. Team members start the week by meeting and discussing the tasks and problems of all the clients, so that all staff members are aware of what is going on with each person. Obviously this approach does not allow for deep personal therapeutic work, but those people who find therapy scary can also be reached.

Housing after the end of the support

26 people could sustain their independent housing even after the project was finished. 12 of them have lived in the same apartment for 4-9 months, and paid their bills on their own. 9 people have moved to better housing and can pay a higher rent on their own, while 5 moved to a cheaper rental and can manage to keep paying bills there.

24 of our clients were transferred to the supported housing programs of other organisations after our project was over. They stayed on in the housing they had rented during our project, but could not have sustained paying for without outside support. 9 of them had managed to pay for theirs independently for 2-6 months before being transferred to another program. In these new programs, clients generally receive a smaller amount of housing support than what we had paid. While on average we had provided 70-80 000 HUF per month as housing support, these programs usually pay 25-40 000 HUF. This means that people have to spend much more of their income on housing. Unfortunately there are also those who will not be able to sustain their housing without outside financial support after June 30th 2018, and will rely on residential social services – homeless shelters or temporary hostels for homeless families with children.

One person is sofa surfing with friends, 3 people are still receiving the support at the time of writing, and we have no information on 11 people – 9 of them have most likely left the country.

Difficulties of implementation – things we would do differently

One of the biggest difficulties in our program was finding housing, as there are not many landlords who want to rent their apartments to refugees or people under subsidiary protection. Often having us as a stable background, guaranteeing that they get the rent, was not reassuring enough. For this reason we quickly rented any apartment that was available, which meant that it did not always fit the family well – it was obvious that it was too expensive for them to keep renting once the project was over or it was smaller than what they would have needed. Still, we think we did well: we had managed to find rented independent accommodation for most people and had to use workers' hostels only in a few cases.

By the time the project was coming to its final phase, we had met a rental company who was happy to find us rentals. If we had a future housing project, we could possibly use them as allies.

In the case of several younger, single people who we thought were more likely to leave the country during the project, and endanger our administrative success, we asked them to find a rental and thus prove their motivation. This turned out an efficient way of getting people involved: many of them succeeded in finding apartments on their own. Having said that, we have not turned anyone away because they could not find housing for themselves on their own.

It was also a difficulty that some people leaving reception centres and temporary hostels for families did not have an apartment to move into right when they had to leave the services, so even though we had decided to support people, they had nowhere to sleep. The short term (emergency) housing support program of the Integration Service of the Lutheran Diaconia came to their rescue, helping people rent accommodation in a workers' hostel for a few days or weeks, until they found rented accommodation. In a future program we would budget for short-term emergency housing support as without that we would have lost many clients.

The other difficulty was the high case load of staff and the intensity of the case work required. At first we employed two full time social workers, whose tasks included case work, finding apartments available for rent, keeping in touch with landlords, registering and assessing applicants, monitoring and facilitating the payment of housing support, and administration of all of these. After we had admitted all our clients, the workload eased somewhat, as we no longer had to register new applications, meet new people or have to find housing. We received support from two social workers, employed by the Refugee Program of the SOS Children's Villages (and who thus knew how to work with refugees), who worked for us as volunteers. Thanks for their involvement, we could start group activities (around mental health and life skills), as well as organize free time and community outings.

There had been a change in the tasks carried out within case work through the project's span. While in the beginning of the project, social workers focused more on acquiring official documents, school certificates, driving licenses, etc., getting children enrolled in kindergartens and schools, requesting child allowances and benefits, towards the end they started to work on applying for residence in Hungary, unification of families and securing accommodation in the long term. The six months of floating support originally planned had become shorter in certain cases – either because our client moved to an unknown place during or at the end of the project, or because they had been transferred to the housing support program of another organization. In other cases, we are still in contact with our former clients after the end of the six months of floating support, though to a much lesser extent.

Now we are aware of the intensity of social support our clients need. We have encountered highly motivated people, who strive to create better living conditions for themselves and their children, and who kept asking our colleagues for various things. On the other hand, we also had clients who had developed such severe mental or physical illnesses due to the awful trauma or long-lasting insecurity endured that they were almost incapable of living independently, and thus required very intense support. After the first wave of clients had been admitted, we grew concerned whether our colleagues had the capacity to support even more of the most vulnerable and needy people, if we could offer them the services they needed, and if so, would not this pose such a huge burden on our staff that they would quit at the middle of the project, not being able to carry on. Luckily, this did not happen. We have worked with highly committed and able colleagues, who were continuously supported by reflective team work, led by an outsider.

It was great to experience professional support from outsiders. We would like to single out and thank Kriszta Hoffman for sharing her knowledge and experience about PTSD, and offering us her selfless help, when we were considering involving a family struggling with multiple severe issues.

Sometimes we struggled with getting lost in the labyrinth of Hungarian bureaucracy. In one case, our client and their social worker kept bouncing back and forth between various consular services. They would have needed to acquire a visa to travel to a country that has no consulate in Hungary, but without a visa they could not travel to any other country with a consulate where they could have deposited their request for a visa. Finally they had decided to take a risk and leave without a visa – and they were lucky and returned safely.

We were forced to engage in a long process of letters with the Immigration Office (that lasted several months) to ask for their official opinion about integrational support⁸ that still existed at the beginning of the project. We were not sure if the housing support received in our program would decrease the integrational support that some of our clients were still receiving from the Office. After several months of exchanging letters it turned out that despite the earlier information received orally, the Office indeed considered housing support as a form of income and deducted it from the integrational support. According to their official viewpoint, housing support only would have not been considered a form of income had BMSZKI rented the apartments from landlords, like some other organizations did. In our case, though, as clients directly rented their own apartments, housing support was to be considered as a form of income – even though it was paid from the same fund, and served the same purpose, and in most cases, our clients did not even touch the money as it was paid directly to their landlord. Even though we did not agree with this viewpoint, and the legal expert we involved also felt that this had been contrary to international law, none of our clients were ready to file a legal complaint. Thus we had no choice but to accept the decision of the Office, especially as by then hardly any people were still receiving integrational support.

Most refugees and people under subsidiary protection are in contact with a lot of services and organizations. Most of these are NGOs or churches, getting outside funding to provide services and various activities. In order to support our clients efficiently, and to make sure that our goals were similar, we needed to continuously share what we do with these organizations. In the contest to keep our clients and fulfil our obligations in the project, sometimes these organizations have conflicting interests – and sometimes interests conflicting even with our clients – which does not facilitate smooth cooperation.

8) *„This form of support was available for refugees and people under subsidiary protections between January 1st 2014 and May 31st 2016. With the changes in law, integrational support can no longer be applied for as of June 1st 2016, but the support already allocated shall keep being paid until the determined period.”* Integrational support was 90 000 HUF/person for a single person during the first six months of support, which was gradually reduced every half year. In the last (fourth) half year it amounted to 22 500 HUF/person/month. Support for families could not exceed 215 000 HUF in total. forrás: <http://www.bmbah.hu>

Still, we see that the cooperation required by the project commissioners has had more benefits than disadvantages. Our clients, especially families have received a lot of support from volunteers and laic supporters. They are a vast resource so we have also encouraged their involvement – for example by recruiting volunteers to teach our clients Hungarian. At the same time laic help, even if good-hearted, can be harmful, especially if volunteers do not have specific tasks integrated within the project – they can start processes that are contradictory to the goals of social work. (In the project, one of our clients asked for help in getting their child enrolled in high school from the social worker. They started looking at schools and have chosen the one that seemed most ideal for the child. A volunteer also got involved, and though lacking the full picture, talked the family out of that school, and almost made the enrolment of the child in any school impossible! They finally managed to turn the process back and enrol the child, but it was a struggle.) In a future program we would definitely organize some training for volunteers as well as supervision, and continuous reflective groups to facilitate a more coordinated approach when working with our clients.

Summary

To sum up we can conclude that our clients, just like in other parts of the world, need integration programs that offer diminishing financial and professional support for 3-4 years. This is the least amount of time needed for our clients to acquire sufficient financial and emotional security, build relationships, settle down in this land they have chosen to be their new home, or that was chosen for them by fate.

We felt our project was successful and see this reflected in our data as well: we have hardly lost anyone, more than half of our clients could sustain their independent housing for a shorter or longer period, more than a half of them without further need for assistance. Almost everyone has found a job or a better paying one, their health problems have been treated or the treatment has started, all children have been enrolled in a school, and thanks to our free time activities, integration programs as well as the mentor program of the SOS Children's Villages, their social network has increased, they can move with more ease in our society.

We would have liked to continue the work started, we felt that based on our experience we could design a more effective, efficient program which would respond to people's need in a more sensitive way. Unfortunately, we will not have this possibility.

We have had very positive feedback from our clients. Let us finish by sharing some of their comments here, from the evaluation questionnaires asked at the end of the project⁹:

9) We translated the questionnaires into several languages so that everybody could respond in their mother tongue. Some of the quotes were written in Hungarian, others are translations.

„The help that I received and everything else. I have found friends, now I will learn Hungarian in a school, and the social worker was very efficient.”

„I have learnt some things about how to find housing, and can now help my friend looking for housing through BMSZKI, and struggling with the same problem.”

„I was very happy with the kind heart (of the social worker) and because they always tried to help us with all our problems, not only with housing, but other things as well.”

„Anytime when we had any type of question or request, they helped us.”

„They were on my side, this program, this office, supported me.”

„My social worker was always available for me, when I needed to talk to them.”

„The social worker was a real pro. She is kind and worries about my problems, and helped my family a lot. I cannot say anything bad about her.”

„The social worker was the best, who was always there when I needed them, he was kind and helped in everything that he could.”

„Housing is more important than eating. There should always be housing or a possibility to enhance the situation of housing. It would be good if it was for longer.”

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