



*How Refugees and Asylum-seekers  
Experience Life in Central Europe*

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## Foreword

*In Central Europe, the word “refugee” often evokes images of people in large numbers fleeing through war-torn African landscape, or arriving in boats across the Mediterranean. We see these familiar images on TV every night, but paradoxically enough, we know very little about the asylum-seekers and refugees living in our own neighbourhood.*

We see refugees on TV every night, but little do we know how they live in our own countries.

*In European countries, refugees usually blend in. We are getting used to seeing foreigners in the streets, but they are anonymous. We cannot tell the tourists and travellers apart from the refugees.*

*So, how do refugees really live here? What are their problems? How do they cope with living in a foreign country and a foreign culture? Do men and women experience exile differently? What does it mean to be a refugee child? What is it like to live in a refugee centre?*

*People who work with refugees are often confronted with such questions. This report is intended to answer some of them and to illustrate the concerns and problems of asylum-seekers and refugees in Hungary, Poland, Slovakia and Slovenia. The findings are based on a series of interviews that were conducted in late 2006 with several hundred refugees, asylum-seekers and, in some cases, detained asylum-seekers.*

*The interviews were done as part of UNHCR’s Age, Gender and Diversity Mainstreaming (AGDM), a participatory assessment methodology introduced by UNCHR worldwide in 2005 to ensure that needs and problems of refugees and asylum-seekers of all ages and backgrounds are regularly heard and attended to. The information gained from these interviews is intended to promote gender equality and the rights of refugees and asylum-seekers. It is a vital basis for the assistance and protection work of governments, refugee organisations and UNHCR alike.*

*This brochure summarises the results of interviews led in 2006 and the improvements that were made in the meantime. As this document is published, the 2007 round of interviews are already well under way.*

*Lloyd Dakin  
UNHCR Regional Representative*

*Budapest, 20 June 2007 — World Refugee Day*

## A Methodology of Listening

It is UNHCR's policy to promote a rights-based approach in refugee protection. Asylum systems should not only work *for* refugees but *with* refugees. The needs and wishes of asylum-seekers and refugees should be at the centre of all decision-making processes in refugee operations.

In all four countries covered by the Regional Representation in Budapest, Hungary, Poland, Slovakia and Slovenia, UNHCR has formed Multi-Functional Teams (MFTs) composed of Government officials, NGO representatives and UNHCR staff to conduct interviews. In the autumn of 2006 these teams visited refugee and detention facilities in all four countries and also met with recognised refugees.

The AGDM methodology is based on semi-structured discussions conducted with groups and individuals. At the beginning of each interview, participants are informed about the process and its purpose and the confidentiality of the information provided. They are then encouraged to tell the Multi-Functional Teams about their lives, their concerns and the difficulties they face. They are also asked which solutions they think would be the most appropriate for the problems they raise.

Regular AGDM interviews have been introduced in 2005 and have already resulted in a number of major improvements for asylum-seekers and refugees.

If central issues such as education, health, legal protection, security, living conditions are not brought up by the refugees/asylum-seekers themselves, the Multi-Functional Teams ask targeted questions to steer them in this direction.

In the focus groups, asylum-seekers are grouped by gender and age (children 10-13 years, adolescents 14-17 years, adults 18-40 years, older adults 40+ years) wherever possible.

All statements are recorded in writing. After finishing the interviews, the Multi-Functional teams compare their notes and agree on findings and recommendations. They share the final reports with all key players for information and follow-up actions.

The AGDM exercise has been in use in Central Europe since 2005 and has already led to a number of substantial improvements in the lives of asylum-seekers and refugees.

## Hungary

*Asylum seekers in all of the three reception centres in Hungary, Debrecen, Bicske and Békecsaba, experience their several month long stay as a difficult and unusual period in their lives. They constantly crave for normality for themselves and their children, for improved living conditions and a more sympathetic social environment.*

In all reception centres residents complained about a lack of daytime activities. They claim that the lack of things to do make them passive and that they develop psychological problems as a result.

A very common complaint among reception centre residents involves meals. Residents do not cook for themselves but are served meals which they usually do not like. According to the asylum-seekers, the food is monotonous and does not take into account their cultural and traditional needs.



*Refugees would prefer to cook for themselves according to their own tradition  
Photo: UNHCR/B. Szandelszky*

Many of the worries brought forward by asylum-seekers concern their children. Nursing mothers complained that the food for themselves and their babies is insufficient and inadequate. They receive milk only once a week. Also, the amount of diapers and baby-food does not meet their needs. The same problem had already been raised in 2005 and the Multi-Functional Teams took note of the fact that there was no improvement since.

Asylum-seekers feel that life is dull in reception centres due to lack of work and daytime activities.

Some parents reported that their children could not benefit from public education. Many elementary schools are unwilling to enrol asylum-seeker and refugee children because of their limited Hungarian language abilities.

Communication between the reception centre staff and asylum-seekers seems to be problematic in some cases. This is why MFTs have strongly advised the

management of reception centres to establish mediating mechanisms that can help resolve problems and disputes between staff and residents.

The lack of interpretation services also gives rise to problems and tensions. Virtually all groups that were heard during the assessment pointed out that medical care was not always readily available due to severe language difficulties. In Bicske, the situation is aggravated by the fact that residents perceive the medical staff as unsympathetic and unhelpful.

Lack of interpretation services leads to communication problems and tensions.

The circumstances even required an immediate intervention by the MFT in one particular case. In Debrecen residents criticised the short opening hours of the medical centre.

Asylum procedures are intricate legal processes and it is crucial for refugee protection that applicants have a clear understanding of their rights and obligations. Yet, asylum-seekers in all centres appeared to be generally uninformed about these issues and pointed out that protection-related information was not readily available.

### *Vulnerable cases need better protection*

In principle, each reception centre should have a protected section for cases with special needs. However, in Debrecen and Békéscsaba, the MFT found a major deterioration with respect to protection since 2005. Previously, a social worker had been placed within the protected accommodation area to safeguard the interests of vulnerable cases. Unfortunately, this arrangement has been discontinued since then. Now, even though a guard is posted in the protected area, his large number of duties require him to leave the post frequently. Moreover, all guards are male, which is not appropriate for this kind of function. Additionally, the limited capacity of the special accommodation area does not allow traumatised individuals to be placed in a safe environment.

In Békéscsaba, the MFT heard many complaints about the quality of the facility. Residents are accommodated in a part of the premises where the number of toilets and showers is insufficient. Overcrowding leads to improper hygienic conditions and lack of privacy. Families are accommodated on the same corridor as single males, and the environment sometimes gets so noisy that children cannot prepare for school or sleep peacefully.

Asylum-seekers appear to be generally uninformed about the legal implications of asylum procedures.

Personal security is an issue for asylum-seekers in Debrecen where a number of residents regularly abuse drugs and alcohol and threaten the physical safety of other residents, especially children and women. Women also complained that some bathroom doors could not be locked.

### *Running for life and landing in detention*

The MFT visited the Border Guards' detention centres in Nyírbátor and Győr, where individuals are being held for illegal entry until their status is clarified or in preparation for expulsion. Generally the detention regime is too strict and inflexible. Given the fact that the detainees have only committed a minor legal offence, length and conditions of detention are inappropriate. They are being

held under harsher conditions than criminals in Hungary. There are not even exact legal provisions determining the length and reasons for detention of asylum-seekers.

All groups and individuals in detention that the MRT spoke to complained about the lack of protection information. They did not understand the rules applicable to detention or to asylum procedures or why some detainees were being released earlier than others.

Members of the MFT identified a need for psycho-social services for detainees who were traumatised by torture or violence in their home country. If no steps are taken, they may experience relapses of trauma during detention.

Victims of torture may get re-traumatised during detention.

One or two hours of walking in open air is insufficient for the detainees' well-being in this prison-like institution. The MFT noticed that those detained do not have access to books, newspapers, the Internet or any other recreational activities.

The MFT visit took place during the month of Ramadan. Detainees complained not only about the quality of food but also about the inflexibility of the management. Those detainees who obeyed fasting rules did not receive any warm meals during this period as no provision had been made for them.

### *"One year is not enough..."*

Recognised refugees in Hungary reported that the most difficult period in their lives was the transition from camp life to normality. Upon recognition, refugees are allowed to stay in refugee reception centres for a maximum of six to twelve months. After that they are expected to join the community, live normal lives, speak Hungarian and have accommodation and jobs. "But one year is not enough; we cannot manage," a refugee woman told members of the MFT.

Refugees complained that they did not have enough information on their new rights and obligations or on employment possibilities and schooling of their children. They do not know where to turn to find accommodation that they can afford.

Refugees with special needs (eg. older or sick persons) are in an even more disadvantaged situation than others.

Transition from camp life to integration in society is the most challenging period for refugees and their families.

In discussions with the Multi-Functional Teams most refugees asked for information sessions about "real life after moving out of the refugee centre". Men and women alike asked for brochures and leaflets about the assistance available to refugees. After many months of social isolation in refugee centres they feel unsure and wary about their prospects for successful integration in Hungarian society.

Most recognized refugees expressed the need for more and better Hungarian language classes and for vocational training to be able to find jobs.

Xenophobia and discrimination is another obstacle to integration, refugees said. Also, the misconduct of individual asylum-seekers or refugees who steal or make trouble reflects negatively on refugees as a whole.

Unlike other countries of the region, refugees did not complain about access to health-care. One family even expressed their gratitude on the good treatment the father had received when he suffered from a heart condition.

The MFTs therefore came to the conclusion that more should be done for orientation, language and vocational training of newly recognized refugees. They should be provided with more information both in training sessions and in writing. Integration assistance should be increased and systematised.

### *Improvements inspired by AGDM*

- Meals offered in refugee reception centres now respond better to special needs.
- Drug problems are being addressed through counselling and rehabilitation programmes.
- Round tables were organised with local school directors and municipalities to address the problems related to schooling of children.
- A project for creating protection information leaflets is being launched by UNHCR.
- The Office of Immigration in Nationality applied for funds to improve services offered in protected environments of refugee reception centres. They will include refurbishments and the re-introduction of 24-hour social service.



## Poland

*Adults in several Polish reception centres raised similar complaints, regardless of their age or gender. One major protection concern was the lack of information about the asylum procedure among men and even more so among women. The Multi-Functional Team (MFT) also heard numerous complaints about restricted access to specialised health services, about living conditions in the centres and employment prospects in Poland*



*Access to advanced health services is restricted for asylum-seekers  
Photo: UNHCR/B. Szandelszky*

Asylum-seekers in general seem to have limited knowledge about the asylum procedure as such and their own rights in the procedure. With reception centres located in remote areas, NGOs do not have the financial means to visit them as frequently as necessary or provide local counselling and assistance to asylum-seekers during their procedure. Similarly, asylum-seekers do not have the means to travel to NGO offices when they need help.

During the discussions, it turned out that women have an even poorer knowledge of the asylum procedure and its legal implications than men. They rarely take part in the procedure at all because of cultural reasons. They rarely come to the migration office themselves, as it is perceived as the man's role to represent the whole family.

Women know little about the asylum procedure. They leave legal issues to their husbands or fathers.

Many asylum-seekers of all age groups complained about difficulties to access treatment for expensive medical cases including those of disabled persons. The availability of health services is impeded by language problems, especially in difficult cases. Also, it is difficult to get from remote reception centres to medical specialists, as distances are long.

The MFTs also learned that many victims of trauma and violence, among them many women, go unassisted, as there is no system in place to identify them.

Staff is not trained to spot such cases, and, in spite of regular visits by specialists from MSF (Médecins Sans Frontières), residents of the centres feel that psychological services offered are insufficient.

The MFTs received reports that mentally impaired individuals are sometimes placed together with other asylum-seekers and can cause security problems.

Living conditions in some of the centres are difficult. This can cause a number of secondary problems as a consequence. In one centre it is not uncommon that single men are accommodated in one room together with families with small children. It has also occurred that men used bathrooms and toilets that were reserved for female residents. Such situations are particularly embarrassing for teenage girls and women.

In one of the centres, female residents told the MFTs about alcohol problems and drug abuse, but there seems to be a general unwillingness among asylum-seekers to report such problems to security personnel.

There are cases where single men are placed in one room with families.

Some girls and women also reported cases of harassment and molestation which is the cause of a general feeling of discomfort and insecurity among the girls and women.

Cohabitation of asylum-seekers from different nationalities and cultural backgrounds turned out to be a problem in Poland. Some asylum-seekers demanded that only people of one nationality be placed together in reception centres. However, this does not conform to UNHCR standards.

Many adults, men and women alike, criticised the lack of kindergartens at the centres, they argued that the constant presence of the children limited their activities. With the MFTs they discussed the possibility of organising child care between themselves.

On the markets, women sometimes sell the food they receive in the reception centers to buy other products for their families.

Asylum-seekers also complained about the food in reception centres, which seems too monotonous and inadequate. Women sometimes try to satisfy the specific needs of their families by selling received food on the market so they can buy other products. Another specific female concern is the shortage of washing and cleaning items which makes it hard for the women to

keep up hygienic standards and the cleanness of the accommodation.

### *Adults want jobs, children want Polish lessons*

While security is an issue mostly raised by females, men frequently expressed fears about their future and about the lack of job perspectives in Poland. The problem is multi-faceted: refugees and individuals with tolerated stay have serious difficulties finding jobs, mainly because their original professional skills do not meet labour market needs. Also, most asylum-seekers' poor grasp of the Polish language and their high expectations regarding salaries are obstacles for employment. Asylum-seekers also said that they needed help with filling in all the documents necessary for legal employment.

Despite the fact that refugees and individuals granted the status of tolerated stay have the same social rights as Polish citizens, they report that they sometimes encounter practical problems in exercising them. In general, there is very limited social housing in Poland, so they find it difficult to find affordable

accommodation. Also, social support in general is limited in the country which affects needy Polish citizens and foreigners

Among the complaints voiced by asylum-seekers was an unease caused by the xenophobic attitudes of some Polish people. Asylum-seekers sometimes encounter aggressive behaviour and a rejection of cultural and social differences.

The MFTs met separately with girls and boys of different age groups and listened to their problems. Many children complained that Polish lessons provided in the centres were not enough to help them keep up with Polish pupils at schools. Some children also complained that they lacked the necessary books or learning materials. However, the MFTs also learned that there were instances when parents sold the children's textbooks to make some extra money and that attendance of Polish classes was not always satisfactory.

Children and teenagers were interviewed separately. They were concerned about education and their conflicts with some Polish children at school.

Children and teenagers are bored in the Reception Centres and would like to have more leisure activities outside and playgrounds within the facilities.

The children reported they had occasional conflicts at school with some Polish children who have a negative attitude towards foreigners.

### *Asylum-seekers wish to invite Polish neighbours*

Some of the main suggestions for resolving problems and improving the situation of asylum-seekers are listed below. They were formulated by the MFT or, partly, suggested by the asylum-seekers themselves:

Free legal counselling programmes should be provided by the government. Asylum-seekers would like to have information about the asylum procedure in writing (leaflets in Russian language) and, if possible, by audio-visual media.

More frequent visits of social workers could help detect and resolve conflicts and improve the general atmosphere in reception centres. Mediation programmes for conflict resolution should be introduced.

Regular Open Days in reception centres could help establish contacts with the local population.

Improved access to health-care and programmes to identify and assist assisted victims of trauma and violence should be established.

Security guards must be trained and instructed to react to security incidents; the safety of female residents should be ensured in all parts of the centres.

Asylum-seekers suggested that regular Open Days in reception centres could help to establish contacts with the Polish people from the neighbourhood.

For school children, additional funding for Polish language classes and textbooks is required. The asylum-seeker community should be sensitised to the benefits of schooling and education for their children. In schools attended by refugee children, awareness-raising programmes and mediation systems to prevent conflicts should be arranged.

In the centres it is necessary to organise additional language classes and provide more textbooks – second-hand if necessary. Recreational activities for children of asylum-seekers and joint activities between them and Polish children should be organised.

### *Improvements inspired by AGDM*

- School attendance rate of children of asylum seekers increased substantially from 53% in September 2005 to 83% in September 2006. The government now also pays for snacks during school hours.
- Two EQUAL projects (MUR and @lterCamp) in reception centres helped increase career choices and improve the social situation of the residents.
- Computer rooms were introduced in centres
- Playgrounds were built with ERF funds and, in many centres, children are offered more leisure time activities and excursions.
- A kindergarten was established in one centre.
- A project of Polish volunteer workers has been introduced in the reception centres and is appreciated by asylum seekers in general.
- The Office of Repatriation and Aliens has signed a contract with the hospital of the Ministry of Interior and Administration to provide psychological services to residents of all reception centres.

# Slovakia

*The situation of asylum-seekers in Slovakia is best summarised by a grave lack of confidence in the asylum procedure. Asylum-seekers expressed serious doubts that their cases would be processed in a professional and fair manner. As proof they mention extremely low recognition rates in Slovakia and lengthy waiting periods before the interview and before decisions are made. The MFT also noted complaints related to the quality of interpretation during the asylum procedures.*



*Residents complain about living conditions in Gabčíkovo Reception Centre  
Photo: UNHCR/B. Szandelszky*

Asylum-seekers claim that interviews were usually carried out in a hurried manner. Transcripts are not accurate, they are translated poorly and therefore often lead to disagreement. They feel that the status determination procedure is prejudiced against them and is inherently unfair.

Within reception centres, communication between staff and residents is problematic in many cases. Among residents themselves there seems to be a lack of understanding of their own rights and obligations and of house rules. Paired with tangible frustration about the asylum procedure, this leads to antisocial behaviour and deteriorates the overall climate in asylum centres.

Asylum-seekers in Slovakia expressed a massive lack of confidence in the fairness and quality of asylum procedures.

Forced inactivity, boredom and a general sense of disempowerment increases tensions among residents. The MFT learned of antisocial behaviour between asylum-seekers such as minor physical assaults, intimidation, threats against other residents and harassment, including the extortion of cigarettes and other minor goods. There are serious cases of alcohol and drug abuse which do not always receive special attention or treatment.

The MFT also observed that staff, including security guards and cafeteria workers often find interaction with asylum-seekers challenging as they are not trained to understand their cultural and religious sensitivities. They occasionally cause offence to asylum-seekers through a perceived lack of appreciation for their way of life.

When asylum-seekers leave the Slovak Republic and proceed to other EU countries they are often returned under the provisions of the Dublin II Regulations. By way of penalisation, these individuals are subject to a deterioration of reception conditions. They do not receive pocket money as other asylum-seekers do which leaves them without any means to complement the material assistance provided, in order to meet personal needs.

Staff in reception centers often find interaction with asylum-seekers challenging as they are not trained to understand cultural and social sensitivities.

Asylum-seekers also complained about a one-year legal prohibition on access to employment. With the possibility to work, they claim they would at least have something to do, would earn some money and restore a feeling of self-confidence and dignity.

Female residents are especially concerned about the lack of cleanliness and the dysfunctional condition of kitchen facilities. They also complained that lunchtime was only 30 minutes long which is far too short for women with small children that need to be fed and causes unnecessary stress.

Guards in Gabčíkovo were reported to have exceeded their authority by conducting intrusive roll calls in the rooms at 6 a.m. There were also allegations of physical assaults.

Asylum-seekers returned from third EU countries under Dublin II Regulations should be admitted on the same conditions as everybody else and not be punished.

Following these findings, the MFT unanimously made the following main recommendations to improve the situation:

The Migration Office should make a plan of action to address shortcomings of the Status determination procedure and thus restore the asylum-seekers' confidence in the system.

All asylum centre staff should be trained and sensitised to issues of multiculturalism and inter-personal communication whereas residents should be better informed about their rights and obligations and about the house rules.

Opportunities for daytime activities, Internet access, psychosocial counselling as well as mediation and conflict resolution mechanisms should be introduced in the centres.

Returned asylum-seekers should be admitted on the same condition as everybody else and not be punished.

Mental health problems and drug abuse in the centre should be appropriately addressed by health care and mental health care in the centre.

### *More rights for persons with tolerated stay*

In 2006, 342 persons were granted tolerated stay status in the Slovak Republic. The MFT expressed serious concerns with regard to their situation. These

individuals are unable to exercise their basic social, economic or cultural rights and experience extreme material deprivation. Their legal status enables them to stay legally on the territory of the Slovak Republic, but does not provide for their right to participate in the health-care system and the system of social security, nor does it provide them with right to seek employment.

The new asylum law in Slovakia introduces a subsidiary protection status which ensures that persons with tolerated stay can participate the national health insurance scheme and have the right to enter the labour market without restrictions.

The MFT was of the opinion that a significant number of those individuals who were given tolerated stay under the old legislation would qualify for the newly introduced status of subsidiary protection. They should therefore be encouraged to re-submit applications for international protection in order to improve the dire humanitarian situation they face.

### *Refugees need marketable vocational skills*

Receiving asylum resolves one set of problems for refugees, but it brings about new challenges. In discussions with recognised refugees in Slovakia, the MFT learned that refugees were not familiar with government integration programmes and did not know which kind of assistance they were entitled to get.

Also, after having been compelled to inactivity and idleness during the asylum procedure, as recognised refugees they want to play a more active role in designing their individual integration plans.

Refugees have a very clear concept of the skills they need to acquire for the labour market. They want access to vocational training and university education, advanced Slovak language courses, computer training, driving courses and coaching for job searching.

Having been compelled to inactivity during the asylum procedure, recognised refugees want to play an active role in designing their individual integration plans.

Low cost accommodation is hardly available for refugees, but with badly paid jobs and prolonged phases of unemployment they cannot afford rents at market rates.

The Multi-Functional Team therefore recommended that the government produce a brochure that will serve as a roadmap to integration and suggest that additional financial sources be allocated for skills training for refugees.

Furthermore, refugees should be eligible for social housing programmes. The MFT also recommended a job placement programme for refugees that would include cooperation with potential employers.

## *Improvements inspired by AGDM*

- UNHCR in cooperation with the authorities is currently preparing a DVD on protection information for asylum seekers and information pamphlets for recognised refugees with information on integration and naturalisation.
- Kitchens in asylum facilities have been renovated and equipped.
- ERF projects in asylum centres provide for additional language, educational and vocational courses.
- Some asylum seekers who are entitled to work are assisted by social workers while searching jobs.
- In Gabčíkovo centre, the first floor is being renovated with ERF funds to be suitable for the accommodation of vulnerable groups.
- Slovak officials will conduct study visits to Hungarian asylum centres to exchange experience with their counterparts and to look into Internet access for asylum seekers.



# Slovenia

*In Slovenia, interviews with asylum-seekers were carried out in the Ljubljana Asylum Home. Both group discussions and individual interviews were conducted. It turned out that differences in country/region of origin were less of a decisive factor in the general perception of their situation than gender. What men see as a problem differs in many cases from the women's perception.*

The most serious problem encountered was a security problem faced by male asylum-seekers originating from the Balkans. In group discussions and in one-on-one contacts, the Multi-Functional Team learned of three Kosovo Albanian residents who beat and threatened them and extorted money. Children and teenagers raised the same complaints and the MFT heard that guards were reluctant to intervene.

Women and vulnerable cases feel safe in the Asylum Home. It is men from the Balkan region who experience security threats from a problematic group of residents.

Non-Balkan asylum-seekers did not raise any security concerns nor did women who all stated that they felt safe in the Asylum Home. Persons with special needs are placed in a specially guarded wing of the building and they also confirmed that they felt no security threats.

Male asylum-seekers, regardless of origin, mentioned that both the quantity and quality of food was unsatisfactory while women said that there was enough food but not what they were used to culturally. They regretted that they could not cook for their families.

A group of asylum-seekers from Kazakhstan faced a very particular nutrition problem. They are not permitted to eat meat of any land animals that they have not slaughtered and cut themselves. Such cultural practice is obviously against sanitary rules in Slovenia. In the Asylum Home, Kazakhs therefore abstain from meat. They receive a vegetarian diet where protein is substituted from sources that are culturally acceptable to them such as fish, eggs and milk products.

A group of Kazakhs is culturally only permitted to eat meat from animals which they have slaughtered themselves. Obviously such practice is against sanitary rules in any European country.

Muslim asylum-seekers appreciated that they were able to keep to the Ramadan fast as breakfast was served before sunrise and evening rations of food were increased.

Many asylum-seekers, especially women, are eager to have language lessons for themselves and their children. They claim that the literacy and language lessons offered at the Asylum home were insufficient in quality and quantity.

The younger interviewees were happy with primary school and security in the Asylum Home, but would like more possibilities to play (toys, playgrounds, locked room to put bicycles, etc.).

Many mothers with small children requested access to local kindergartens.

There were no complaints about Asylum Home staff in general and several positive comments on social workers were made. This was one of the most remarkable improvements since the Participatory Assessment in 2005 when there was massive dissatisfaction with the conduct of many staff members.

Access to health services does not seem to be a problem. No one raised complaints, even when asked. Two asylum-seekers who had major health problems praised the health system.

Interpretation for smaller language groups such as Roma and Goranski should be provided so all asylum-seekers can communicate in their mother tongue.

Practically all participants described the Asylum Home premises as clean and functional.

Two men from Kosovo complained that they did not have interpretation in their own mother tongue. They have to resort to Serbian-Croatian-Bosnian which they also speak. The two languages for which interpretation was requested

were Roma and Goranski, a language spoken by the ethnic minority of Gorans. A Turkish family felt disadvantaged as no staff member or NGO worker spoke their language. However, interpretation during asylum procedures and information sessions is provided.



*Children would like more playgrounds and leisure time activities*

*Photo: UNHCR/B. Szandelszky*

Following the discussions with the residents of the Asylum Home in Ljubljana, the MFTs recommended to introduce a reporting system and conflict resolution mechanism.

Additional services of interpreters for Roma and Goranski languages also need to be contracted.

For better leisure time activities the MFTs recommended to purchase more fitness equipment for asylum-seekers, to offer Internet access and to assign a locked room for storing bicycles

### *All refugees know their integration counsellors*

Given that the refugee population had not changed considerably since last year, the MFT only interviewed only a handful of individuals who had an especially interesting background: a recently recognised man from Kosovo with a family of three, an African adult and two refugees who came to Slovenia as minors.

In spite of the very small number of interview partners, the members of the Multi-Functional Teams agreed that the problems they raised were of general significance and typical for a large part of the refugee population in Slovenia.

All interview partners receive social assistance which they claim is not much but it is possible to subsist. The two young refugees are attending secondary and tertiary education and have scholarships.

All refugees know their personal integration counsellor by name and some maintain regular contacts, while one particular case seems to be too demotivated to take any more steps toward integration.

Motivation seems to be a problem for learning Slovenian. The refugees complain that Slovenian is a hard language in spite of 300 to 400 hours of language training provided.

Refugees report that landlords were reluctant to rent flats to refugees for reasons of tax evasion, ignorance of refugee status and racism.

The MFTs learned that refugees face persisting difficulties in accessing health care because medical staff is not familiar with the A4 insurance letter that is issued to refugees whereas Slovenian citizens have a electronic insurance card.

The more "different" the refugees look, the more frequently they are confronted with racism and a feeling of rejection. However, no concrete incidents or attacks were reported.

Based on the findings from the interviews, the MFTs concluded that the A4 health insurance letters for refugees should be replaced by a health card in a credit card format. Integration programmes for language learning and job searching should also include elements that boost the self-confidence and motivation of refugees

### *Improvements inspired by AGDM*

- An introduction course to the Slovenian language and culture started in November 2006.
- Signs in Turkish for legal counselling were mounted. Contracts with Turkish interpreters now include psychosocial services.
- A kindergarten in the Slovenian language is now open during morning hours.
- An integration house is already functional in Ljubljana and preparations are under way for another one in Maribor. The integration project encompasses free housing accompanied by intensive integration assistance for a maximum of twelve months.
- The government now offers additional language courses and vocational training for refugees.
- The Employment Agency now has a number of officers specialising on refugees. With their assistance, more recognised refugees were able to find jobs since October 2006.
- By the end of 2008, all recognised refugees should obtain an electronic insurance card as foreseen by the new asylum law that is currently under preparation.

# Appendix: Regional Refugee Statistics

## Regional Asylum Trends 2004-2006

Status	2004	2005	2006		2005 Asylum-seekers by Country of Origin (Top 5)	2006 Asylum-seekers by Country of Origin (Top 5)
<b>Hungary</b>						
Asylum applications	1,600	1,609	<b>2,117</b> (+32%)		1. Vietnam 20%	1. Vietnam 19%
Recognized	149	97	<b>99</b> (+3%)		2. Serbia-Montenegro 15%	2. Serbia-Montenegro 18%
Humanitarian	754	95	<b>99</b> (+4%)		3. China 10%	3. China 13%
Rejected	177	758	<b>1,118</b> (+47%)		4. Georgia 7%	4. Georgia 8%
					5. Bangladesh 6%	5. Nigeria 5%
<b>Poland</b>						
Asylum applications	7,933	6,860	<b>4,430</b> (-35%)		1. Russia 91%	1. Russia 90%
Recognized	305	312	<b>422</b> (+35%)		2. Ukraine 1%	2. Belarus 1%
Humanitarian	826	1,832	<b>2,047</b> (+12%)		3. Belarus 1%	3. Pakistan 1%
Rejected	2,002	2,283	<b>1,138</b> (-50%)		4. Pakistan 1%	4. Ukraine 1%
					5. Georgia 1%	5. Georgia 1%
<b>Slovakia</b>						
Asylum applications	11,391	3,549	<b>2,871</b> (-19%)		1. Russia 29%	1. India 25%
Recognized	15	25	<b>8</b> (-68%)		2. India 16%	2. Russia 16%
Humanitarian	111	0	<b>0</b> (0%)		3. Moldova 9%	3. Moldova 13%
Rejected	1,531	812	<b>878</b> (+8%)		4. China 8%	4. Georgia 7%
					5. Bangladesh 8%	5. Iraq 7%
<b>Slovenia</b>						
Asylum applications	1,174	1,596	<b>518</b> (-68%)		1. Serbia-Montenegro 33%	1. Serbia-Montenegro 47%
Recognized	19	14	<b>1</b> (-93%)		2. Turkey 14%	2. Turkey 12%
Humanitarian	20	12	<b>8</b> (-33%)		3. Bosnia-Herzegovina 14%	3. Bosnia-Herzegovina 8%
Rejected	602	702	<b>553</b> (-21%)		4. Bangladesh 10%	4. Albania 6%
					5. Albania 9%	5. Macedonia 5%