

# “INTEGRATED WAYS” TRANSNATIONAL INTEGRATION MANUAL

## Introduction

„Integrated ways“ is the title of a transnational cooperation of 3 development partnerships (DPs) that run projects within the EU community initiative „EQUAL“. The 3 DPs are „EDI – Education for Integration“ (Poland), „FluEQUAL – Integration of Asylum Seekers in Salzburg“ (Austria) and „COOPERA“ (Italy). One of the different transnational activities of „integrated ways“ was the production of this transnational CD-ROM on the integration of asylum seekers in Poland; Austria and Italy.

This CD-ROM contains three independent contributions on integration of asylum seekers in Poland, Austria and Italy.

The Polish part contains the following chapters:

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The Italian Part contains the following chapters:

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2. The „System of Protection“ for the Refugees - Asylum and it's Petitioners"
3. Good Practice: Public Internet Access in Lecce

**Part 1**  
**POLAND**

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**NOTES**

**1. Following abbreviations were used in the text**

**applicant = applicant for refugee status = asylum seeker**

**Dublin II regulation** – *Council regulation (EC) No 343/2003 of 18 February 2003 establishing the criteria and mechanisms for determining the Member State responsible for examining an asylum application lodged in one of the Member States by a third country national (OJ 50/1, 25.02.2003)*

**EDI – Edukacja dla Integracji** ('Education for Integration', the EQUAL project administered by Jagiellonian University Human Rights Center)

**NFZ** – Narodowy Fundusz Zdrowia (National Health Fund, Polish public health care authority)

**PLN** – Złoty Polski (Polish currency)

**„Tolerated status”** – a subsidiary (to a refugee status) form of international protection granted on Polish territory

**URiC** – Urząd do Spraw Repatriacji i Cudzoziemców (Office for Repatriation and Aliens, I instance Polish asylum authority)

## **2.Currency exchange rate**

1 EUR = 3,9 PLN (approximately, as of March 2007)

## **3. Wages in Poland. Statutory minimum/ country average**

The statutory monthly minimal wage is 936 PLN (equal to approx. 240 EUR). Average gross wage in Poland is ca. 2700 PLN (approx. 682 EUR). It needs to be kept in mind however, that different regions of Poland are very diversified as to the level of their overall development. Eastern provinces of Poland (before January 1<sup>st</sup> 2007) used to be the least prosperous regions of the European Union.

## **4. Overall asylum seekers' characteristics**

Significant majority (around 98%) of recent years' asylum applicants in Poland originated from **Russian North Caucasus region, predominantly Chechnya**. While reading the study, following applicants' characteristics need to be primarily taken into account:

- Vast majority of the applicants communicate in Russian (not as their native language, however)
- Majority of the applicants are of Muslim religion (Sunni), not many of them orthodox
- Chechnya is a rural country, with Groznyy being the biggest city (of ca. 300,000 inhabitants)

According to Polish immigration authorities' official statistics, 6860 asylum applications were lodged in 2005 in Poland, compared to 8079 in 2004 and 6909 in 2003. These figures do not, however, demonstrate the actual number of claimants due to the fact that domestic regulations allow for a person to apply for refugee status as a representative of his or her spouse and accompanying minor children. The rate of applications decided in favor of the applicant (refugee status granted) does not exceed 5 % of cases.

## **1. Accommodation and financial support**

### **1.1. General remarks**

After filing an **asylum application** the applicant can file an additional **claim for receiving support** while in asylum proceedings. In order to receive that support the applicant has to prove being unable to cover the expenses of his/her stay in Poland while in proceedings. Immigration authorities, however, *prima facie* presume the applicants to meet that condition, therefore a direct proof is usually not required. The application for support can cover family members, just as the asylum application itself (in most cases, male applicant's wife and children are included in his asylum claim).

Support can be provided either as accommodation in a **center for asylum seekers** or its **financial equivalent** to cover the expenses of living outside the center. In both cases, the support encompasses the entitlement to medical care. Importantly, the latter form of support can be obtained by the applicant provided that the applicant (or a family member) cannot stay in the center due to either **health or security** reasons. In practice, health reasons include often a member of the applicant's family being allergic or suffering from other prolonged illness, family with small children or toddlers (particularly susceptible to various infections), as well as other health problems related to the exposure to a rather poor level of hygiene prevailing in the centers. Matters concerning centers' residents' security were discussed below.

The above-mentioned situations can constitute a (health- or security-related) basis for obtaining financial support to **live outside the center** while in asylum proceedings. In case such an equivalent is granted, the applicant is expected to provide himself/herself with accommodation and food on his/her own. (S)he can turn to local or municipal authorities for assistance in finding accommodation. (S)he is free to choose the place (city/town) of his/her stay, as long as (s)he reports his/her actual and exact whereabouts to immigration authorities.

It is noteworthy that any forms of support are available to the applicant **only in the course of administrative proceedings** before the two instances of immigration authorities. However there is a possibility of filing an appeal to administrative courts (of also two instances, which might take up to two years' time), the applicant will not then receive any kind of support whatsoever (because of the fact that despite filing the appeal the immigration authorities' final decisions are going to be enforceable).

## 1.2. Centers for asylum seekers

### 1.2.1. Centers' administration

The **majority of applicants** reside in **reception centers for asylum seekers** (no additional requirements need to be met to obtain it). This form of support includes:

- A **room** in a center;
- **Food** (three meals a day);

There are **18 centers** for asylum seekers in Poland, majority of them located in or within 100 kilometers outside Warsaw (Poland's capital), due to the fact that both instances of asylum authorities, as well as courts considering asylum cases are seated in Warsaw. Each center's inhabitation capacity varies from around 100 to 500 persons (the actual number of residents is subject to constant change). There are no precise statistics as to the average length of stay in the centers, it should however be assessed at 1-2 years. Unaccompanied minors stay in a public orphanage in Warsaw, an obligatory legal guardian is being appointed for them for the purpose of asylum proceedings. Subsequent to their arrival, asylum seekers are referred to a given center depending on vacant rooms.



Public authority responsible for **organizing and administering the centers** is the first instance immigration authority, the Office for Repatriation and Aliens (Polish acronym: URiC). According to relevant legal provisions, URiC can transfer this public task by concluding a civil contract with an NGO, a public or private institution or even private persons. In practice, three centers are owned by URiC, while the rest of the buildings serving as centers are leased by the authority, which on its part hires an officer responsible for administering the center (hereafter referred to as the “head officer”), who is acting as head of center’s administrative and maintenance staff, as well as the representative of immigration authority (e.g. delivering official mail). Other center’s personnel are hired either by URiC (that in particular includes medical personnel, see below) or the building’s owner (usually security guards and maintenance). This pattern of organizing and administering the centers is prevalent.

It should be outlined that the responsible authority has taken only a partial advantage of its statutory mandate to entirely appoint the task of administering the centers to private sector. As of today, there are no statutory requirements regarding centers’ employees, which should be changed by legislature. Majority of the centers is understaffed - the average number of head officers is 2 per center (while the average number of inhabitants in a center should be estimated at 150-200 persons), the rest of the staff being medical, security and maintenance personnel.

### **1.2.2. Living conditions**

In most cases, buildings used as centers for asylum seekers are **former low-class hotels** (often referred to as ‘worker hotels’), some of them after renovation or essential adjustments. Centers have different locations, some of them situated in cities or towns, other in country villages. Several centers are located in secluded and scarcely populated areas, which combined with their size (average of 100+ residents) is likely to have a negative impact on integration of asylum seekers.

The **living standard in most of the centers** is low (several centers, however, represent a medium, acceptable standard). They tend to offer common-use showers and other sanitary facilities accessed from the corridors rather than bathrooms in rooms. Relatives are accommodated in the same room or apartment upon their demand and providing that the center has a vacant room of the requested size (otherwise a family might be accommodated separately). Each center has a common-use laundry facility. Most of the centers have separate facilities for children, which usually includes a classroom for those children, who attend

classes in the center (i.e. not in public school, see “Education” section), as well as (less often) a kindergarten. In most cases those facilities are supplied and maintained by NGOs free of charge. Some of the centers have sport facilities (a small gym or an outside football pitch), usually in poor condition.

### **1.2.3. Food**

Every asylum seeker (over the age of 7, see above) accommodated in the center is entitled to **three meals a day**. Centers usually attempt to respect the applicants’ **dietary needs**, regardless of their source (e.g. health condition, religious beliefs or ideology). Although meals with pork are not served, orthodox Muslim applicants face a general difficulty in obtaining meat prepared in compliance with other religious orders, ritual slaughter in particular. The ‘food equivalent’ (see below in ‘Financial support’) is considerably low (9 PLN = 2,2 EUR per person a day), yet many residents prepare their meals on their own despite not receiving the equivalent. Kitchen facilities (refrigerators, ovens, sinks, etc.) of common use are at residents’ disposal in each center, very few centers offer apartments with kitchens.

### **1.2.4. Security**

Non-residents are prohibited from entering the centers unless they notify the center’s head officer. Centers are open for their residents (e.g. those who obtained a work permit can leave for work)<sup>1</sup>. A resident may leave the center without notification for no longer than 3 days, otherwise his/her support is withheld. Some of the centers decided to hire part- or full-time security guards. Cases of disputes between the centers’ inhabitants and members of local community have occurred, including assault attempts and incidents, which took place mostly outside the centers, victims have proven unwilling to file official police reports though. Such incidents of an obviously xenophobic character should not be overestimated and seem to derive from some centers’ location in an impoverished areas combined with the complete lack of information among local communities as to who stays in the centers (according to one survey, local community regarded the Chechens accommodated in one center as “some

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<sup>1</sup> The only exception – the Lesznawola Detention Center for Foreigners – is a closed center for foreigners subjected to temporary detention upon a court’s order (issued for a maximum period of 3 months), predominantly with regard to illegal entry or stay. Although not a penitentiary, it is administered by the police, whereas none of the staff members of the open centers administered by URiC are law enforcement officers. A voluntary act of illegal entry is a misdemeanor (a lesser form of crime) in light of Polish law. Majority of Lesznawola’s residents are not asylum seekers. There is a special government decree addressing the living conditions in detention centers for foreigners.

Russians”). Several cases of domestic violence within the centers have been reported (none of them officially though) and have allegedly been resolved by centers’ elderly and head officer.

Importantly, and as noted above, any **threat for applicant’s security** may constitute a basis for either transferring him to another center or providing him with the financial support to live outside the center (see ‘General remarks’ and ‘Financial support’).

#### **1.2.5. Other centers’ specifications**

A uniform set of **centers’ internal regulations** (including a set of rules of conduct) has been established by a government decree. Failing to comply with those rules may result in withholding of the support and expulsion from the center. A center’s resident has a statutory **right to file a complaint** with the immigration authorities as to the living conditions or other problems concerning administering the centers, a measure that has been often exercised by asylum seekers. Numerous centers’ residents have also applied for a **transfer to another center**, such applications usually being considered in favor of the applicant.

Each center has a **doctor’s and nurse’s office** (see: ‘Health’ section).

Many centers have separate rooms for Muslim prayer. Centers’ personnel seem to comply with their obligation of no interference with asylum seekers’ **cultural identity**<sup>2</sup>, although none of them undergo any training related to intercultural issues. Practicing religion together with holding celebrations on various occasions (e.g. commemorating national traditions or historical events, birth of a child) remain to be the main manifestation of residents’ cultural identity.

In spite of relevant legal provisions stipulating that **the center “may” organize free Polish language lessons** for asylum seekers, as well as provide them with basic materials necessary to participate in them, Polish language courses in most centers are **organized by NGOs** as their own initiative (i.e. without any financial support from the authorities, except a classroom usually set up by the center).

Applicants’ **access to information** in the reception centers is rather limited. The majority of centers offer access to a fax machine and a public payphone (vast majority of the applicants have their own pre-paid mobile phones), regrettably almost never the Internet, most of the centers are lacking libraries and enough TV sets and radios. Information boards are commonly used for public notices as well as (supposedly) providing information about NGOs

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<sup>2</sup> Unless its manifestation constitutes a crime in light of Polish law. Some incidents concerned illegal animal slaughter, which is a crime punishable by fine or up to one year of imprisonment.

offering various types of assistance to asylum seekers. Official (i.e. proceedings-related) mail is usually delivered by camps' head officers, the applicants send out their mail on their own from public post offices (though mail directed to immigration authority may be handed over to the head officer).

Several asylum seekers interested in receiving legal aid provided in EDI project admitted that they had been living in the center for several months and had no information whatsoever about NGOs working in the field of legal aid. It should be concluded that effecting the applicants' right to information has not been properly secured by the authorities, which raises doubts as to authorities' compliance with its statutory obligation to effect the applicant's will to contact UNHCR and other NGOs providing assistance to asylum seekers. Lack of information may lead to applicants' elementary confusion, let alone negatively influence the outcome of asylum proceedings.

### **1.3. Financial support**

Asylum seekers accommodated in the centers receive **financial support** expected to cover their basic needs not satisfied by the center. Financial support includes:

- monthly **spending money** for purchasing items of personal hygiene, as well as to cover other personal expenses
- money for **textbooks and other materials for children** that attend Polish public schools
- reimbursement for public transport **tickets** purchased by the applicants for travels related to asylum proceedings or medical appointments
- a single payment for the purchase of **clothing and footwear** adequate to the season (i.e. summer/ winter)
- financial **equivalent instead of** (the center-provided) **food** if additional conditions are fulfilled

The "food equivalent" may be granted to the asylum seeker only if (s)he has been diagnosed with medical condition requiring special dietary regime that cannot be provided by the center. Furthermore, the equivalent is received by parents of all children under the age of 7 (instead of meals for those children).

An **additional form** of financial support may be provided for an asylum seeker that contributes to center's functioning by performing minor works such as maintenance, cleaning

or translation (between center’s personnel and residents). Since asylum seekers do not have the right to work, it has to be concluded that such activities should not (by law) be regarded as labor (an asylum seeker needs a proper permission to perform labor, see “Labor” section), neither are they considered community work or community service.

All above-mentioned forms of financial support are (or may be) supplied to the asylum seeker in case (s)he is a **center’s resident**. Asylum seekers may be granted a financial equivalent instead of an apartment in a center (see above). In that case they however do not receive any additional financial support, i.e. only one monthly payment expected to cover all expenses. Some asylum seekers (that have previously been granted subsidiary protection and then filed an application for refugee status) are eligible for receiving social benefits on terms similar to Polish citizens.

All financial benefits are delivered to the applicant *en masse* once a month. They come in cash, except of (sometimes) the money for clothes and footwear, which may be substituted by coupons of designated stores. **Amounts** of different forms of financial support provided to asylum seekers have been established by a government decree and are as follows (amounts per person)<sup>3</sup>:

<b>Title</b>	<b>Amount (PLN)</b>	<b>Amount (EUR)</b>	<b>per (time)</b>
Items of personal hygiene	20	5,10	month
Other personal expenses	50	12,80	month
Shoes and clothes	140	35,90	a single payment
the “Food equivalent”	9	2,30	day
Financial support for living outside the center	25/ 20/ 15/ 12,50 <sup>4</sup>	6,40/ 5,10/ 3,80/ 3,20 respectively	day
Work/ translations at the center	50	12,80	month

<sup>3</sup> For a clear comparison, the statutory monthly minimal wage is 936 PLN (equal to approx. 240 EUR). Average wage in Poland is ca. 2700 PLN (approx. 6 EUR).

<sup>4</sup> Depending on whether there is a family and of how many members. The range is: a single person (25 PLN) to a family of four or more members (12,50 PLN per person). That gives 750 PLN per month for a single person per month and 2250 PLN for a family of six (where family refers to parents with minor children).

Educational materials for children are supplied directly; any forms of financial support for purchasing them depend on local (i.e. municipal) legislation. Asylum seekers' children may also be granted scholarships by schools' headmasters (see also: "Education" section).

#### **1.4. Centers' impact on integration**

It should be concluded that impact of Polish centers for asylum seekers on applicants' integration with the receiving society is negative. Centers' residents are homogeneous communities of at least 100 members each, which due to both psychological and technical reasons often becomes a major obstacle to commencing applicants' integration process already in the course of administrative proceedings.

As of January 2007, **two new centers** for asylum seekers are under construction in central Poland. According to the official information, each of them is developed to serve as both open and closed (detention) center. That clearly cannot contribute to the integration of their inhabitants with the receiving society (the closed center in Lesznowola is often publicly referred to and viewed as "prison", which quite inevitably leads to associating its residents as "criminals"), as well as will most likely create a strong psychological impact on the non-detained asylum seekers, regardless of whether any of their relatives will have been detained in the closed part of the center. Moreover, it should be regarded as immigration authorities' final step towards leaving the centers under strictly public (i.e. non-NGO) supervision.

## **2. Healthcare**

### **2.1. Medical care**

All asylum seekers benefiting from public support while in asylum proceedings (see “Accommodation and financial support” section) are **entitled to medical care of a range equivalent to the basic insurance option** available for Polish citizens at Narodowy Fundusz Zdrowia (National Health Fund, authority responsible for public health insurance<sup>5</sup>). That means that, however asylum seekers are not formally insured, immigration authority concludes contracts with particular health care providers (individual, i.e. doctors, dentists, nurses, as well as institutional, like hospitals or clinics) that secure the same health services to the applicants as if they were insured. This encompasses essential services, including access to doctors of particular specialization (medical specialists).

Basic health problems are dealt with in the reception centers. Each center has a **doctor’s and nurse’s office** that is open on working days ; the doctors however are usually available only two or three days a week, whereas the nurses everyday. There service is limited to standard working hours. In case of an emergency an ambulance is called by the center’s persone

Although not all **doctors** providing services in the centers are general practitioners (family physicians), the range of services provided there normally does not extend beyond primary care (including some diagnoses related to asylum proceedings – e.g. a proper diagnosis is required for the “food equivalent” or the “accommodation equivalent” to be granted. See: “Accommodation and financial support” section). A patient in need of a more **advanced diagnosis or specialized treatment** is referred to an external health care provider, usually institutional (most of the cases are treated in one of the largest Warsaw hospitals founded and administered by the Ministry of Interior). Dental problems are treated by a dentist’s office that concluded a proper contract with the authority (usually close to the center). Referring to a medical specialist normally requires the applicant to wait for one to eight weeks for an appointment, which is however common also in case of Polish citizens benefiting from basic option of government-financed health insurance.

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<sup>5</sup> Polish system of public health care is currently in transition. Health insurance is offered exclusively by the state and is largely ineffective. Citizens may either use the services provided in frames of that insurance or purchase a particular health service from a health care provider individually (i.e. there is no option of a non-state insurance).

The health care package available to asylum seekers does not encompass **forensic examinations and analyses** with regard to applicants subjected to violence before leaving the country of origin. There is however a possibility of applying for such an analysis in the course of asylum proceedings (as a motion to submit evidence) and immigration authority may decide to cover the cost of the examination.

Medical offices in the centers tend to be **poorly equipped**, most of them have only basic medicines. It seems that gynecological and pediatric care equipment is needed in particular.

**Prescriptions** issued inside and outside the center are usually handed over to the nurses; medicines ordered upon them are delivered on a regular basis. Several centers' nurses reported repeating lack of discipline in taking the prescribed medicines. Many doctors working in the centers allegedly speak elementary Russian.

A separate issue raising concern is the **limited access to psychological care**, indispensable for the applicants in order to:

- **Reduce** the Post-Traumatic Stress Disorder (**PTSD**) related to past experience (concerning some of applicants)
- **Prevent** from the harmful influence of the stay in the center (concerning the majority of the applicants). As pointed out above (see: "Accommodation and financial support" section), a prolonged stay in a center of 150 + inhabitants may prove claustrophobic (the "ghetto effect")
- **Prepare** the applicants for future adjustment to their new surroundings (prepare the basis for their successful integration; concerning the majority of the applicants)

Most of the centers do not have a psychologist at their permanent disposal and psychological care is provided sporadically by NGO psychologists. It has to be kept in mind that psychological discomfort (unlike a physical ailment) does not create an instant reflex of turning for professional assistance, especially if due to the cultural background it might be considered shameful. From procedural standpoint, a professional diagnosis for PTSD or other psychological illness sometimes amounts to evidence in asylum proceedings.

## **2.2. Overall health condition and major health problems**

Health problems frequent among asylum seekers usually result from the considerably low level of hygiene prevailing in the centers as well as shared sanitary facilities (esp. bathrooms and lavatories). Skin ailments and digestive system illnesses being the most

common disorders are normally treated in the course of primary care by doctors and nurses working in the centers. Problems concerning low indoor temperature during winter season have been reported (allegedly, in some centers hot water was available only few hours a day and the heating was not properly adjusted to outdoor temperature), which negatively influenced the health of their residents.

Chechen families that occupy most of the centers have a lot of children (2 to 4 on the average, a situation corresponding with applicants' cultural background), which makes every center home to at least a few dozens, and sometimes over a hundred children, a group most susceptible to and most affected by the above-mentioned health problems. Also, there is a significant number of pregnant women in the centers, who typically require special (close) medical care. However doctors' offices at the centers were not established to treat medical problems requiring specialist care, it would be reasonable to make an exception concerning gynecologist (ideally a woman), pediatrician and psychologist, who should be available at the centers at least several times a month.

Psychological condition of the applicants has already been highlighted. Most often it encompasses sleep disorders (such as insomnia) as well as other disorders that combined might quite easily lead to cases of apathy.

### **2.3. Health and medical care *vis-à-vis* integration perspectives**

A health-related issue related to the context of asylum seekers' **integration** with the receiving society is their **psychological condition**. Psychological care should be provided to the applicants on a regular basis, aimed at not only reducing the trauma caused by negative experience but also at giving them a better chance of a more effective adjustment to their new surroundings. In other words, its direction ought to be more "prospective" and not just "retrospective". This issue however will not be further looked into as the activities undertaken in EDI Project were not directly and methodologically related to the applicants' psychological condition (although some of them could significantly contribute to improving it, see: "Activities and integration" section).

### **3. Education and access to education**

#### **3.1. General description.**

According to Polish law, all children who are between 6 and 15 years old are obliged to take education in kindergarten, primary school and gymnasium. This obligation encompasses aliens residing in Poland, among them asylum seekers.

Education in public schools in Poland is free of charge for both Polish citizens and foreigners. The main prerequisite is sufficient competency in Polish language, proved in an examination. Foreign pupils are assigned to a given grade basing on their prior education (documented by foreign school certificates) or exam assessing their knowledge and skills (in case no school certificates are available).

#### **3.2. System of asylum seekers children education.**

Generally, the system of asylum seekers' education consists of two parts. The first period is called the preparation time, when the children learn Polish in courses conducted in the reception centre. Polish language teachers are coming to reception centers approximately two times a week for 3 hours. The majority of classrooms in the reception centers are not prepared for such activities and usually there is no necessary equipment for teaching, although modernization activities are currently conducted in some of the centers.

The exact time of the preparation period depends on how fast a given child makes progress in Polish necessary to start attending classes in a public school in Poland. The decision is taken by the teacher conducting Polish lessons in the reception center. Parents of a child may apply to the school headmaster to examine the child earlier, if they believe the child is ready to attend school earlier. In this case, a commission of teachers examines the child and indicates the appropriate grade.

##### **3.2.1. Problems of education system.**

The above described system of education of asylum seekers' children has some flaws, which might affect the integration process. The first problem is that during Polish language course children are attending mixed-age classes, where activities can not, even if teacher intends to, be fully adopted to the age and psychical development of all children. Also, because of the lack of other lessons than Polish language course, children have

problems in future attending in public schools where in many cases they have to attend classes with kids younger than them.

### **3.3. Education of adults.**

Virtually no educational activities are provided for adult asylum seekers. The basic problem is lack of obligatory Polish language course for asylum seekers in the Polish legal system. Only recognized refugees have right to free of charge Polish language course for one year since they were granted status.

Bearing in mind that language competency is a crucial integration factor, its lack is a major impediment in the integration process in the society and in the labor market.

Until he attains the age of 18, the asylum seeker can attend classes of primary and secondary school as well as high school free of charge. That does not include university education, where asylum seekers over 18 should pay a regular fee.

## **4. Support structures**

### **4.1. General description of Polish asylum system.**

#### **4.1.1. Polish asylum authorities and procedure.**

The administrative structure of bodies responsible for enforcing Polish migration policy, including examination of refugee status applications, is centralized. The Office for Repatriation and Aliens (Urząd do Spraw Repatriacji i Cudzoziemców – URiC), located in Warsaw, examines in the first instance all applications for refugee status filed in Poland. Polish Administrative Procedure Code allows all adult persons to be asylum seekers' plenipotentiary in the procedure. During the procedure, URiC is obligated to interview the applicant. First instance negative asylum decisions can be appealed against to Board for Refugees (Rada do Spraw Uchodźców), which has the right to grant refugee status in Poland.

Second instance negative asylum decisions can be claimed against to the Regional Administrative Court (Wojewódzki Sąd Administracyjny) in Warsaw. According to Polish Administrative Court Procedure, only licensed lawyers (attorneys) are allowed to represent asylum seeker before the court.

#### **4.1.2. Areas of authorities' responsibility**

Apart from its role in the refugee status determination procedure, as described above, The Office for Repatriation and Aliens, through one of its bureaus, is responsible for providing asylum seekers' with accommodation, basic healthcare and social benefits.

URiC does not provide any regular pre-integration program for asylum seekers, apart from its occasional engagement in projects undertaken by other bodies and organizations. Its statutory obligations do not include direct support of asylum seekers' pre-integration in the Polish society, neither does URiC become budget funding for this kind of activities.

### **4.2. Situation of non-governmental organizations in Poland.**

After 1989 year, social awareness in Poland has noted a considerable rise. At present the so called third sector, which gathers associations, foundations and other non

governmental organizations is strong and plays an important role in appeasing social needs of the society and solving problems, which the state government and local municipalities are not able to tackle.

The third sector has recently achieved an important legal instrument . In 2003 the Parliament adopted legislation on public benefit organizations and voluntarism, which enabled NGOs registered as public benefit organizations to receive 1 % of income taxes (based on an indication in a tax declaration of an individual person) to apply for public donations for completing public tasks. A new body was created – the Board of Public Benefit Activities, where NGOs’ representatives opinion government plans with regard to the third sector.

At present, however, there is a relatively small number of NGOs which specialize in providing help and assistance to asylum seekers in Poland.

### **4.3. Assistance provided to asylum seekers by non-governmental organizations (NGOs)**

#### **4.3.1. Legal assistance.**

Legal assistance in asylum proceedings is provided by legal clinics based at universities<sup>6</sup> as well as several NGOs, seated predominantly in Warsaw.

Vast majority of lawyers providing assistance to asylum seekers are not licensed lawyers<sup>7</sup> (attorneys), but law graduates hired by NGOs. However their knowledge of refugee law and practice should be considered substantial (attorneys tend generally not to have any practice in asylum law), they do not enjoy rights and privileges pertaining to the status of an attorney. Nonetheless, in Polish administrative proceedings (asylum proceedings falling within that category) any adult person of over 18 years of age can perform the duties of a legal representative, thus being able to undertake similar acts as an attorney in civil or criminal procedure, that including presenting evidence or filing appeals. Importantly, the above pattern concerns only the proceedings before immigration agencies (the Office and the Board), therefore in case of an appeal to both instances of administrative courts, the applicant can either hire an attorney (or file for appointing him one by the court if he cannot afford one, which is most often the case) or stand on his own behalf.

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<sup>6</sup> Legal clinics formally do not have an NGO status, as in most cases they are not entities separate from universities. Being a university entity, for the purposes of any relations with third persons a legal clinic is regarded as that university as a whole.

<sup>7</sup> In Poland, as in majority of EU member states, a law graduate in order to practice law as an attorney needs to complete a three and a half year apprenticeship with the state-independent attorneys’ association, which is (exclusively) authorized to issue licenses for attorneys. Membership in the attorney’s association is mandatory for an attorney.

Legal clinics operate at law faculties of Polish universities pursuant to the model that evolved at American law schools (students provide legal assistance that is supervised by law faculty academics specializing in particular area of law). There are 21 legal clinics in Poland (first established in 1997), only three<sup>8</sup> however provide legal assistance to asylum seekers. Detailed characteristic of providing legal assistance by a legal clinic has been described below in chapter 6, based upon the example of Jagiellonian University Legal Clinic.

Legal assistance provided by NGOs and legal clinics concentrates primarily on asylum proceedings. Less frequently it is provided with regard to labor law and social security law, which does not reflect a smaller demand, but rather scarce NGO resources in that respect. In most cases, legal assistance requires asylum seekers' participation by means of activities such as filing an appeal written by a lawyer or physical presence at public offices, which might positively contribute to the integration process.

Most NGOs that provide legal assistance for asylum seekers do not specialize exclusively in asylum law (usually also other human rights law issues), though some have very narrow areas of specialty, e.g. assistance to asylum seekers that have been subjected to detention upon filing the application. It is noteworthy that some substantial funding from the European Refugee Fund has been procured by a consortium of Polish NGOs for the purposes of providing legal assistance to asylum seekers. No state-provided (or state-funded) legal assistance is available to asylum seekers. An attorney appointed for an asylum seeker by an administrative court in an appeal case is available to him inasmuch as to any other indigent appellant in any other administrative case. Such an attorney usually does not have any practice in asylum litigation.

Despite NGOs' and legal clinics' activity in the field it should be assessed that the area of providing legal assistance to asylum seekers is grossly underdeveloped, mostly due to the lack of proper (including state) funding. Adequate legal assistance ought to be regarded as a prerequisite to asylum seekers' successful integration, especially in the labor market.

#### **4.3.2. Medical and psychological assistance**

Several non-governmental organizations in Poland provide psychological care to asylum seekers, but rarely on a regular basis with adequate frequency due to lack of proper resources. Psychological assistance for particularly traumatized applicants is of primary

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<sup>8</sup> Legal Clinics of: Jagiellonian University in Cracow, Warsaw University and Catholic University of Lublin. All three of them participate in the EDI Project.

necessity. Psychological diagnoses of post-traumatic stress disorder (PTSD) are sometimes presented as evidence in the asylum proceedings. It needs to be outlined that poor psychological condition is prevailing among asylum seekers and professional care provided to that respect on a regular basis should be organized in most of the centers for asylum seekers, the more so because psychological condition might become an effective obstacle to the process of integration.

Medical care is entirely state-provided.

#### **4.3.3. Other activities.**

Many asylum seekers receive material support from NGOs that provide care for indigent persons and families (in general). The support might include food, clothes, over-the-counter (i.e. non-prescription) medicines, as well as educational materials or stationery for children attending school. Volunteers of several NGOs try to manage asylum seekers' children spare time.

Notably, many Polish municipalities are becoming involved in assisting asylum seekers, due to confined local budgets that help being however most often limited. Nonetheless, municipalities make a significant attempt to assume action in the field of social integration of asylum seekers, as well as organizing activities for children and youth. It should be estimated that only well-planned cooperation of local authorities, local NGOs and other institution such as Catholic Church may the develop the prospect of social adjustment and integration of asylum seekers. To support that idea, EDI Project's engaged as its domestic partner Cracow's Municipal Center for Social Care, which is responsible for preparing the part of Project's Product (see chapter 6) that pertains to social security system in Poland in light of asylum seekers' needs, as well as social benefits that are available to asylum seekers from the municipalities' funds.

#### **4.3. Social security available to asylum seekers.**

According to relevant legal provisions asylum seekers (who were not granted refugee status or subsidiary protection) are not allowed to receive social benefits of any kind. Asylum seekers receive support given by the Office for Repatriation and Aliens. According to the Aliens Protection Act, asylum seekers who do not possess other means of subsistence can receive social support such as:

- accommodation in one of the centers for asylum seekers;

- monthly financial support;
- health care.

For detailed information concerning centers for asylum seekers, food, possibility of living outside the centers while in proceedings, as well as actual amounts of financial support, see chapter I.

## **5. Asylum seekers' situation in the labor market**

### **5.1. General description of asylum seekers' situation in the Polish labor market.**

According to Polish law, asylum seekers are generally not allowed to take a legal job. This circumstance is one of the most important factors of asylum seekers' behaviour in the labor market, which can be called as existing in the 'gray zone' –that is, in the area of illegal employment. This area of labor market is not being controlled and analyzed, by respective authorities and non governmental organizations, neither as to its scale and number nor in any other way.

It has to be stressed that asylum seeker who has been in the asylum procedure for longer than one year (in the first instance) and there has been no decision taken, whereas such delay was not caused by the applicant, the person is allowed to apply to the Office of Repatriation and Aliens to get a special certificate, which entitles the asylum seeker to seek legal employment in Poland. Practical experience shows, that in cases where asylum seekers attempted to get the above described permission, asylum authorities issue the asylum decision very fast, apparently not to let the applicants try to get a legal job in Poland.

Present legal solutions contributes vastly to the fact that asylum seekers in Poland are often entering the black market. Asylum seekers in Poland are mainly low-qualified. No statistics are available on the level of education of adult asylum seekers in Poland. According to the information gathered within the EDI project (based on an anonymous questionnaire survey) Chechen female asylum seekers are generally low-qualified and in many situations they have only primary education. . They have mostly only primary school education and have no competency in Polish language. . They are, however, to take a range of occupations e.g. as physical workers, even though they have no right to take employment of any kind.

The presented factual situation is a factor, which induces a lot of asylum seekers to start illegal work, which might lead to cooperation with criminals and committing misdemeanors. Such situation in consequence brings sanctions on asylum seekers, including criminal responsibility and imprisonment.

### **5.2. Situation of female asylum seekers in the labor market.**

### **5.2.1. General description**

The above described general situation of asylum seekers in labor market has to be accompanied with a specified description of the situation of female asylum seekers, who are applying for asylum on their own or are covered by the application filed by their husband. Female asylum seekers in Poland are mostly Chechen and Muslim. Their religion and nationality is of crucial importance, as their ethnicity and cultural rules have a great impact on the role they play in the Chechen society and in consequence on their present situation in Poland and in the labor market.

Some of the younger women and girls do not speak Russian, which makes communication with them much harder and also decreases their chances on the labor market.

It is important to stress that most of very young girls (17-18 year old) are married and have at least one child. Also because of the Muslim tradition and patriarchal structure of the Chechen society the tradition role of women is to bear and bring up children and to take care of the family home. This situation causes that female asylum seekers have no chance to get a job and often – they themselves do not see reasons to seek for a job. They see their role as mothers, who are responsible for bring up their children – which is understandable in a situation of having 4-5 children and no relatives who could take care of them.

### **5.2.2. Situation of women applying for refugee status separately**

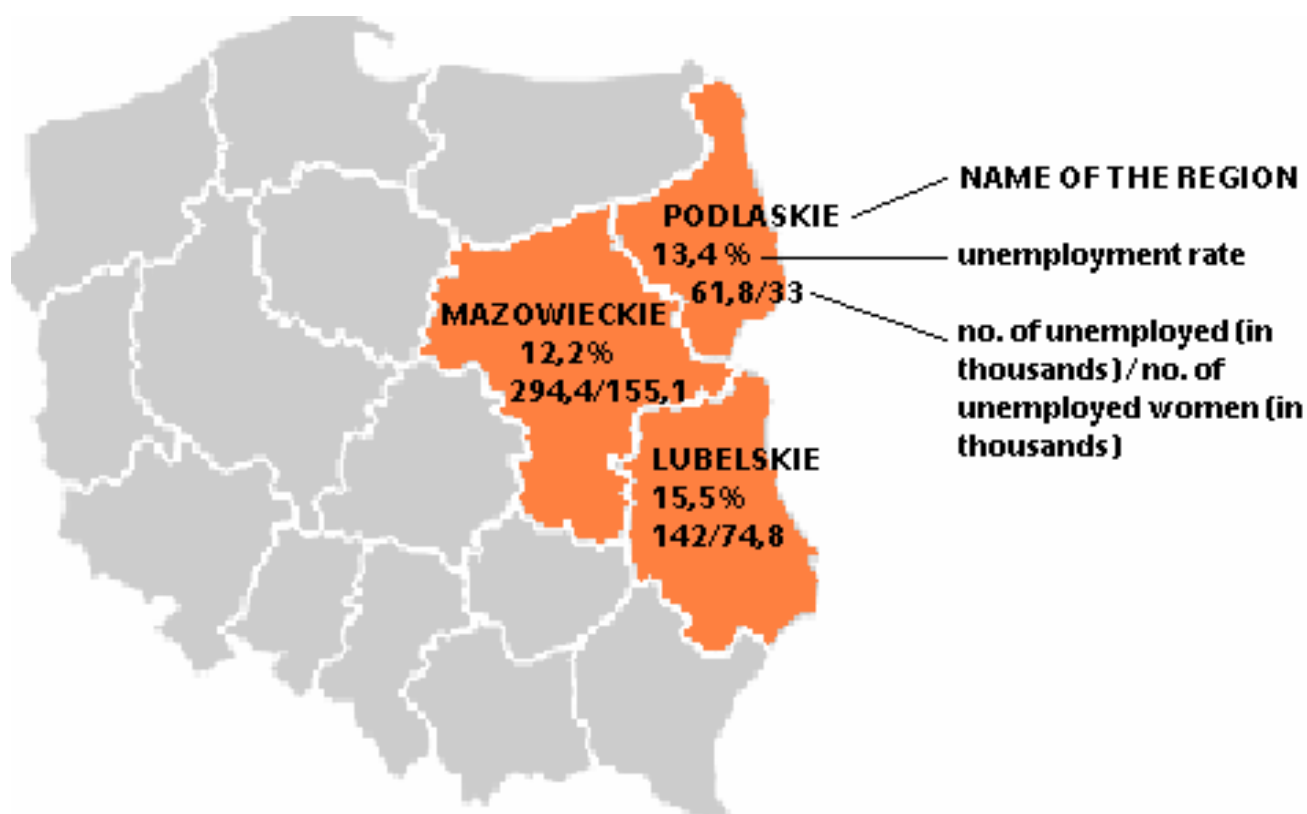
Different situation is that of women, who arrived to Poland on their own without any adult male members of their family. In this situation, they are aware of the responsibility resting on them with regard to their small children. Because of that, many of them are trying to get a job – however because of the impossibility of taking on a legal job while in the procedure and the high rate of unemployment in the areas of Poland, where they are living, their chances in the labor market are at least much lower than those of male asylum seekers.

### **5.2.3. Polish labor market and situation of asylum seekers – statistics**

While analyzing the factors that influence the situation of asylum seekers in Poland, it should be pointed out that some of the reception centers where asylum seekers are accommodated are situated in some distance from big cities, in areas where the rate of unemployment is relatively high. Reception centers are situated in central and eastern-northern Poland, as illustrated in the map below.

Province	Unemployment rate in % (as of IX 2006, registered unemployment)
<b>Poland</b>	<b>15,2</b>
Dolnośląskie	17,3
Kujawsko-Pomorskie	19,4
Lubelskie	15,5
Lubuskie	20,0
Łódzkie	15,3
Małopolskie	11,3
Mazowieckie	12,2
Opolskie	16,6
Podkarpackie	16,4
Podlaskie	13,4
Pomorskie	16,0
Śląskie	13,5
Świętokrzyskie	18,0
Warmińsko-Mazurskie	23,6
Wielkopolskie	12,1
Zachodniopomorskie	21,5

[www.state.gov.pl](http://www.state.gov.pl)



The statistics below present the scale of problem of unemployment among women in Poland

<i>Province</i>	<b>Amount of unemployed in general (in thousands, as of September 2006)</b>	<b>Amount of unemployed women (in thousands, as of September 2006)</b>
<b>POLAND</b>	<b>2363,6</b>	<b>1350,8</b>
Dolnośląskie	192,8	110,1
Kujawsko-pomorskie	161,0	96,1
Lubelskie	142,0	74,8
Lubuskie	76,1	42,8
Łódzkie	167,3	88,9
Małopolskie	148,5	89,5
Mazowieckie	294,4	155,1
Opolskie	61,5	36,6
Podkarpackie	144,3	82,4
Podlaskie	61,8	33,0
Pomorskie	130,2	79,4
Śląskie	244,3	146,8
Świętokrzyskie	101,2	55,2
Warmińsko-mazurskie	127,1	72,7
Wielkopolskie	174,3	110,1
Zachodniopomorskie	136,9	77,3









































































































































