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Children and migration

Integration of immigrants and their children in the European Union – the role of social protection organizations

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Summary

While there is a growing influx of immigrants from outside the European Union (EU), the structure of immigration is changing and family reunification an important element. In this context, two distinct categories of immigrants stand out: immigrant families and children of immigrants. The question is whether, apart from providing benefits, European social protection systems really take their situation into account.

This is the question that provided the starting point for this study, which will explore the situation in six EU countries in order to find concrete examples of activities undertaken by social protection organizations for the benefit of immigrants and their children.

The concept of children of immigrants, used as a distinguishing factor, would make it easier to take the specific needs of this group of individuals into account. However, national integration policies avoid the use of this concept and this is reflected in the activities undertaken by social protection organizations.

The absence of activities aimed directly at the children of immigrants is counterbalanced by activities for the integration of immigrant families: the family, the spouse in particular, plays a central role in the integration process. This makes it difficult to implement programmes for children without involving their families.

Observed good practice centres on a certain number of themes: reception, mastery of the language, concern about cultural factors, particularly in the health sector. The aim of the projects examined, was indeed to encourage and facilitate access to public services for children of immigrants. The objectives were clearly defined, and bore the marks of a desire to correct a certain number of inequities affecting access to these services rather than those of positive discrimination. Their existence is proof that social protection organizations are becoming aware of the value of this approach.

Our institutions can no longer restrict their role in the integration of children of immigrants, to providing benefits. The main outlines of integration policies may be conceived at the national level, but their implementation is local or regional, and that is where the social protection organizations can intervene. There is no question of asking the latter to replace other bodies responsible for the integration of immigrant families and their children. It is a question of convincing them of the value of the activities they can undertake while remaining within the boundaries of their competencies and mandates.

Introduction

The proportion of immigrants entering the EU from outside the community is increasing constantly – from 2.3 per cent of the total European population in 1985 to 3.4 per cent in 1999¹ – and the structure of immigration is changing. Since the late seventies, the influx of immigrant labour has gradually been reduced and the majority of entries are now the result of family reunification, closely followed by asylum seekers.²

European social protection organizations, faced with a wide variety of situations, have begun to pay more attention to new migration patterns. The European Regional Meeting of the International Social Security Association (ISSA) held in Oslo in April 2004 on *Migrants and social protection*, for example, drew attention to the particularities of the situation of "senior" migrants,³ and of "illegal migrant workers".⁴ Two additional categories can be included among those already covered by the general concept of immigrants: immigrant families and children of immigrants.

Do social protection systems take into account the situation of children of immigrants and migrant families? This question was raised in a first study carried out on this subject,⁵ dealing primarily with the manner in which national policies for immigrant populations are developed. It concluded that using the concepts of immigrant or children of immigrants to define social rights, might raise issues with respect to the principle of equal treatment. On the other hand, recognition of this category of individuals by social protection systems remained feasible for activities of limited scope, designed to remove inequalities of access to social rights.

This observation provided the starting point for this study, whose aim was to explore the situation in six countries of the enlarged EU – France, Germany, Spain, the United Kingdom, Sweden and Poland – in order to provide concrete examples of activities undertaken by social protection organizations in favour of immigrants and their children.⁶

¹ European Commission. 2003. *The social situation in the European Union*.

² Wihtol de Wenden, C. 2004. "Les flux migratoires en France et en Europe", *Actualité des migrations*, January, p. 20.

³ Attias-Donfut, C. 2004. *Nouveaux profils migratoires et transmigration – les migrations dans la perspective du parcours de vie*, National Old-age Insurance Fund, France.

⁴ Schoukens, P. (consultant). 2004. "Exploratory report on the access to social protection for illegal labour migrants", Council of Europe.

⁵ Crépeau, B. 2003. *L'insertion des immigrés et de leurs enfants au sein de l'Union européenne*, Agricultural Social Mutual Benefit Fund, France.

⁶ Definition of the aim of the study: children, born of two immigrant parents outside the community, or who arrived with their parents, or who were born within EU territory. The concept of child refers in this instance to affiliation: the study includes all children up to the age of majority. We have excluded illegal immigrants, who are not covered by social protection schemes. Methodology: questionnaires and detailed project descriptions which were sent out by post to social protection organizations in the six chosen countries, telephone conversations with those responsible for the projects, literature. Results: 25 completed questionnaires were returned, including 10 with concrete examples of projects.

The study does not claim to be exhaustive. However, it provided an opportunity to analyze the activities carried out and the experience thus acquired, and to consider whether the concept of "children of immigrants" was appropriate for certain concrete activities in particularly valid areas of intervention. This in turn may lead to a response to the underlying question of whether social protection organizations should go beyond their role as providers of social benefits to become involved in the integration of immigrants and their children.

1. The activities of social protection organizations – positive discrimination or correcting unequal opportunities?

1.1. Activities aimed directly at children of immigrants

Application of the specific concept of children of immigrants enables the specific needs of this category to be taken into account more effectively. Children of immigrants constitute a particularly vulnerable group, more exposed to the shocks connected with a move to a new country and a new cultural context. Furthermore, although it is difficult to be sure how long they will stay, the signs indicate that children of immigrants tend to put down roots in the EU, and often remain in the country which took their parents in. Finally, there is a high proportion of young people within communities of immigrants from outside the EU, which forces the host country to take into account the specific needs of this population group.

Nevertheless, national integration policies avoid taking this concept into account. There are few specific activities aimed at children of immigrants among those examined. The number of responses is not enough to draw general conclusions, but the reasons given provide a partial response, in the form of two possible explanations.

In order to consider children of immigrants as a possible special target for activities aimed at integration, a double distinction must be made. Firstly, there is the distinction between children of immigrants and those who are not children of immigrants, which is politically sensitive; secondly, there is the further distinction between children of immigrants and immigrants in general, which raises practical problems for the organization of activities.

The question, therefore, is primarily political. Treating children of immigrants as a special group, even for a small number of limited activities, may be construed as a form of stigmatization which could maintain the immigrant status of the children. Many local actors in France (regional offices of the Agricultural Social Mutual Benefit Fund (*Mutualité sociale agricole* (MSA)) and the National Family Allowances Fund (*Caisse nationale des allocations familiales* (CNAF)) and in Sweden (local offices of the Federation of Social Insurance Offices) indicate that the basic principle underlying their special activities is to target the public as a whole, without distinguishing between immigrants and non-immigrants. Children of

immigrants benefit from the same measures as other children in similar situations – support for holidays, subsidized leisure activities. The distinction, if any, appears at the reception stage; this is the case in Spain, for example, where the Institute of Migration and Social Services (*Instituto de Migraciones y de Servicios Sociales* (IMSERSO)), as part of the social protection network responsible for the reception and integration of immigrants, finances reception centres. A special programme of activities adapted to their level is provided for children, which includes language classes in particular.

Another problem is that of differentiating between children of immigrants and immigrants in general. It is quite possible that an approach targeting only children of immigrants could have adverse effects – if it meant that integration progressed at different rates for parents and their children. Another factor to bear in mind is that certain social protection organizations focus on certain groups of immigrants, depending on their role (sickness fund – health prevention, agricultural fund – activities in rural areas). The effects of this type of activity on the integration of children of immigrants should not be ignored, even if they are difficult to measure. Finally, certain activities of benefit to children are difficult to implement without the cooperation of the family.

1.2. A family approach

The absence of activities directly aimed at children of immigrants is to some extent compensated by activities aimed at the integration of immigrant families. It may, therefore, be relevant to consider these activities in terms of their indirect benefit to children. The importance of the family in the integration of children of immigrants seems to be based on two factors.

Even setting aside the question of integration, the family unit is very important from the cultural point of view among immigrants from outside the EU. The family plays a central role in the integration process, as the point of reference for immigrants in the host country. This underlines the importance of activities aimed at the family as a whole. The MSA of the Tarn (France) is participating in one such local project, in an area with a high concentration of immigrant families working in the agricultural sector, involving activities for children – out-of-school activities, a leisure centre –, for women – sewing, cooking, health prevention, outings – in addition to activities for the general public.⁷ This project has helped to reinforce social and family ties, and has also had a positive effect on the attitudes of young people in the area, providing openings towards the outside world.

Immigration can make families more fragile. Immigrant families are faced with new ways of life and family models in their host country. They are often in material difficulty, in itself a

⁷ See project no. 3.

possible source of tensions within a family unit. In addition, the more problems their parents have, the more children are likely to develop antisocial behaviour. In order to respond to this type of problem, social workers from the MSA in Bordeaux (France) have carried out a survey to deepen their understanding of the specific nature of family problems affecting families from the Maghreb, and to provide better training for social workers to help them find appropriate solutions.⁸

Another observation: their mothers and elder sisters are usually important in the integration of children, which makes it difficult to implement programmes for children without involving the former in one way or another. It is they who transmit cultural traditions within the family and thus influence future generations. However, their involvement brings with it, a whole series of religious and social problems. In this context, there are two types of activity which can be distinguished. Firstly, there are those intended to bring women out of their isolation, through language classes or discussion and self-help groups, such as the "Mediterranean women project" (*Femmes de la Méditerranée*) run by the Family Allowances Fund (*Caisse d'allocations familiales* (CAF)) in Marseille (France).⁹ Secondly, certain projects which target women are also intended to be of indirect benefit to children, particularly in areas where it is difficult to target the latter directly; health prevention is a case in point. One of the projects carried out within the framework of the National Federation of Enterprise Sickness Funds (*Bundesverband der Betriebskrankenkassen* (BKK)), Germany, for example, entitled "Immigrant women and health management in the home" explains the basic principles of healthy nutrition to Turkish women, in order to prevent health problems arising from poor nutrition among their children.¹⁰

Activities directly aimed at the integration of children of immigrants which correspond to specific needs and problems may be effective; however, activities which target the families and wives of immigrants represent another possible means of providing help for these children.

1.3. Possible areas of activity

A thematic approach is another form of analysis which, at one and the same time, enables the definition of possible areas of intervention and of the concrete needs to be met.

In some cases the involvement of social protection organizations in the reception of immigrant populations is part of their mandate – this is notably the case of IMSERSO in Spain, which finances reception centres run by nongovernmental organizations (NGOs) and autonomous communities. In others, it is the result of their own decision to participate in

⁸ See project no. 2.

⁹ See project no. 1.

¹⁰ See project no. 9.

wider-reaching programmes undertaken by the institutions responsible for the reception of immigrants. This is the situation in France, where certain MSA regional funds participate in regional reception programmes for primo arrivals.

Among the problems affecting children of immigrants and their families, good command of the language is particularly important. Social protection organizations respond to this problem in various ways, complementing the fundamental role of the education system. A large number of organizations, aware of their major role in providing immigrants with information on the social protection system, provide parents with translations of brochures concerning the access of immigrants to benefits and the forms they take. This is done at either the local or the national level.

At this point, it is worth noting that the activities of the organizations may go beyond problems of language. The tendency is to take cultural factors into account as well. Two local projects in Sweden, for example, are aimed at making the National Social Insurance Board (*Riksförsäkringsverket*) staff more aware of the problems arising from specific cultural codes, and increasing the number of employees of immigrant origin.¹¹

The importance of this intercultural approach is particularly obvious in the health field. Children of immigrants are in fact exposed to a certain number of factors which may have adverse effects on their health. Difficult living conditions, low parental income, language problems and stress arising from insecurity, may in the long term create a health threat. At the same time, prevention measures often fail to reach the immigrant population.

The project "With immigrants for immigrants", for instance, set up in Germany with BKK funding, is based on the observation that immigrants benefit far less from services for the diagnosis of health problems; preventive measures for maternity risks or children's diseases, in particular, are less effective. This can be explained by difficulties affecting the relationship between doctors and patients, by the low priority immigrants give to health issues compared with all the other problems facing them, and by the fact that immigrants often come from countries where prevention is of minor importance. In an attempt to ensure that immigrants had the same access to prevention information and services as the rest of the population, the German project concentrated on improving the way information was assimilated, by taking into account health concepts in the immigrants' countries of origin and the particularities of their situation. This was done by providing training for immigrants who were already well integrated and entrusting them with the role of intercultural mediators between immigrants in their own community and the health system.¹²

¹¹ See projects nos. 6 and 7.

¹² See project description no. 8.

One of the virtues of this project is to emphasize that its real aim was not to introduce special health prevention measures for immigrants, but to incite, facilitate and encourage their access to public services. The funds which replied to our questionnaire seem to favour that approach. The activities which are undertaken are based on field diagnosis of a situation and the responses are of a specific nature, not designed for widespread application. These activities have clearly defined objectives, and have more to do with solving a certain number of problems connected with unequal access to services, than with positive discrimination.

2. In favour of involvement in the integration of immigrant families and children

The very existence of activities which target immigrants and their children, indicates that certain social protection organizations are aware of the value of their involvement.

2.1. Responsibility and impact

Given the importance of the migration phenomenon in Europe and the challenges of integration, social protection organizations must take a stand on these questions. At the moment, most of the studies being carried out concern the impact of immigration from outside the community on social protection systems in Europe, and are restricted to the study of likely changes. However, they seem to indicate that the role of social protection organizations in the integration of children of immigrants should not be limited to their role as providers of benefits.

In fact, the legitimacy of their involvement in integration activities is based on that very role, which in most countries applies to lawfully resident foreigners in the same way as it does to nationals. They have access to universal benefits – services and benefits in kind, as under the British National Health Service (NHS) – to social rights connected with employment including insurance schemes – unemployment, sickness, accident, old age – as well as social assistance based on income and needs. This is the case even in countries where immigration is a recent phenomenon such as Poland, where the new legislation on social assistance includes immigrants.

Although examples of formal discrimination towards the children of immigrants are rare, it is more difficult to translate equality of access into reality. Of course access to social protection is one of the elements of successful integration, but the fact remains – it is a vicious circle – that without good integration it is difficult for immigrants to take full advantage of their rights. Furthermore, there are cases of immigrant families who are dependent on the benefits

paid to them.¹³ Surely it would be preferable for the social protection systems to assist immigrants and their families to become better integrated, thus fighting against the dependence of parents on benefits, as well as the future dependence of their children? It is, therefore, definitely in the interests of the social protection organizations to become involved in the integration of children of immigrants, and to go beyond their role as suppliers of social benefits.

2.2. The role of social protection organizations in national integration policies

Although the broad outlines of integration policies are usually created at the national level and reflect the government's approach to the phenomenon, they are implemented at the local or regional level, and that is where social protection organizations can intervene with special measures. Although the differences between social protection systems in the EU prevent comparative analysis, they provide a description which covers a wide variety of situations and activities carried out by social protection systems in favour of the integration of immigrant children and families. The stand they take depends not only on the willingness of the organization in question to participate in this process, but also on the means at their disposal and the pertinence of their involvement.

The first model is that of an organization which is part of the social protection system of the country in question, and is explicitly responsible for the integration of immigrants. This is the situation in Spain, where IMSERSO is responsible for the assistance, support and social integration of immigrants, refugees and asylum seekers. Above all, IMSERSO is responsible for the coordination and financing of the projects carried out, whether by associations or autonomous communities.

The second model involves a more voluntarist approach. This is the situation in Germany, in France and to a lesser degree in Sweden. In these countries, social protection organizations undertake specific activities targeting immigrants and their families, always on the basis of a precise diagnosis, and in connection with a concrete problem which has been clearly defined in advance. These activities are often carried out in partnership with NGOs defending the interests of immigrants, as well as with research centres in local communities.

Participation in research on immigration and integration carried out at the national level is also possible. In Germany, for example, the National Federation of Local Sickness Funds (*Bundesverband des Ortskrankenkassen* (AOK)) is participating in a working group on

¹³ For example, according to information provided by the University of Oslo, 40 per cent of the children of immigrants under 7 in Oslo, live in families which depend mainly or entirely on family allowances.

immigration and public health, as part of a programme implemented by the Federal Government Department of Migration and Integration.

Social protection organizations in Poland, where the number of legal immigrants is small, are less involved in their integration. In that country, the central and local administrations are responsible for their reception and also take care of language classes, accommodation and social assistance.

Nevertheless, such involvement is encouraged at the European level. The European Commission in its circular on immigration, integration and employment¹⁴ underlined the need for overall coherence in immigration, integration and employment policies at all levels and in all sectors: it noted that "although this approach must be government-led, policies should have the benefit of cooperation with the social partners, the research community and suppliers of public services, of NGOs and other actors in the public community".

In order to encourage all these actors, the European Commission finances integration activities through programmes such as INTI,¹⁵ or activities such as EQUAL.¹⁶ It constitutes a possible source of finance for projects run by social protection organizations in favour of immigrants and their children.

Conclusions

Immigration from countries outside the EU is a phenomenon of major importance. Within the migrant populations, children of immigrants deserve special attention: the policies which cover the population as a whole are insufficient in themselves to cover all their needs. In the first instance, there seems to be a need for special activities designed for immigrants to facilitate their access to public services, in order to enable them to benefit from them. The examples given illustrate an approach which, based on diagnosis of a problem in a given geographical area and in a well-defined context, can provide a concrete solution to clearly defined needs. The aim of these activities is to facilitate subsequent access of immigrants to general programmes.

However, there is no question of asking social protection organizations to provide a substitute for other authorities responsible for the integration of immigrant families and children.

¹⁴ COM (2003) 336 final.

¹⁵ INTI (Integration of third country nations) is a programme which finances integration projects among member States, for persons originating outside the EU.

¹⁶ EQUAL is a European Social Fund initiative for the period 2000-2008, which finances projects to combat discrimination and inequalities in the areas of work and employment.

Clearly, the need to take the specific needs of children of immigrants into account lies behind two current issues: child poverty and immigration. The activities we have described, are not of benefit to children of immigrants and their families because they are immigrants, but because they suffer as a result of poverty, insecurity and social exclusion, all areas which fall within the purview of social protection organizations.

Research carried out by Monika Barabasz and Jérémie Cazeneuve

Bibliography

- Attias-Donfut, C. 2004. Nouveaux profils migratoires et transmigration – les migrations dans la perspective du parcours de vie. Paris, Caisse nationale d'assurance vieillesse.
- Bailly, F.; Mouhoub, el M.; Oudinet, J. 2003. "Les nouvelles dynamiques migratoires: relance et complexification", in *Chronique internationale de l'IRES*, No. 84, September.
- Barou, Jacques. 2001. L'Europe terre d'immigration: flux migratoires et intégration, Presses universitaires de Grenoble.
- . 2002. "Les avancées de la politique communautaire en matière d'immigration", in *Ecarts d'identité*, n° 99, Spring.
- . 2004. "Quelles politiques sociales pour une intégration à la dimension de l'Europe?", in *Actualité des migrations*, January.
- Cachon, L. 2003. "L'Espagne immigrante: du marché du travail aux défis de la citoyenneté", in *Chronique internationale de l'IRES*, No. 84, September.
- Council of the European Union. 2004. " Council Directive 2003/86/EC of 22 September 2003 on the right to family reunification", in *Official Journal of the European Union*, 3 Octobre 2003, No. L251.
- Crépeau, B. 2003. L'insertion des immigrés et de leurs enfants au sein de l'Union européenne. Paris, Mutualité sociale agricole.
- European Economic and Social Committee. 2002. *Immigration, asylum and social integration*. Luxembourg, Office for Official Publications of the European Communities.
- . 2003. Decision of the European Economic and Social Committee on the "Communication from the Commission to the Council, the European Parliament, the European Economic and Social Committee and the Committee of the Regions on immigration, integration and employment" (SOC/138). Brussels.
- European Commission. 2003. Communication from the Commission to the Council and the European Parliament "Towards more accessible, equitable and managed asylum systems" (COM 315 final). Brussels.
- . 2003. Communication from the Commission to the Council, the European Parliament, the European Economic and Social Committee and the Committee of the Regions on immigration, integration and employment (COM 336 final). Brussels.
- Irish Presidency Conference. 2004. Rconciling mobility and social inclusion : the role of employment and social policy, 1-2 April 2004. Dublin.
- Join-Lambert, O. 2003. "Du Commonwealth à l'Europe: permanences et ruptures de la politique migratoire", in *Chronique internationale de l'IRES*, No. 84, September.

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- OECD. 1999. *Trends in international migration* (Annual Report, Système d'observation permanente des migrations SOPEMI). Organisation for Economic Co-operation and Development, Paris.
- . 2000. *Trends in international migration* (Annual Report, Système d'observation permanente des migrations SOPEMI). Organisation for Economic Co-operation and Development, Paris.
- . 2001.. *Tendances des migrations internationales* (Rapport annuel, Système d'observation permanente des migrations SOPEMI). Organisation de coopération et de développement économiques, Paris.
- Paparella, D. 2004. *Social security coverage for migrants: Critical aspects* (Conference report, ISSA European Regional Meeting *Migrants and social protection*, Oslo, 21-23 Avril.
- Persson, I.; Bourdet, Y. 2003. "Suède: l'intégration en panne?", in *Chronique internationale de l'IRES*, No. 84, September.
- Pflegler, J. 2002. *Immigration and family* (Conference report, Annual seminar of the European Observatory on the Social Situation, Demography and Family, Helsinki).
- Spire, A. 1999. "De l'étranger à l'immigré, la magie sociale d'une catégorie statistique", in *Actes de la recherche en sciences sociales*, No. 129.
- Wihtol de Wenden, C. 2004. "Les flux migratoires en France et en Europe", in *Actualité des migrations*, January.

Appendix 1

Statistics

Table 1. Foreign population in Europe for every host country

	Total population in thousands (2000)	Foreigners in thousands (1995)	Foreigners in thousands (2000)	% of total population (2000)	Extra-communitarian foreigners in thousands (2000) (EU with fifteen member States)
EU (before 1 May 2004)	374,667	–	18,692	5,1	12,892
Germany	82,160	7,173	7,297	8,9	5,485
France (1999)	58,894	–	3,263	5,6	2,068
United Kingdom	58,655	1,948	2,342	4,0	1,439
Italy	57,189	991	1,388	2,4	1,122
Switzerland	7,184	1,331	1,384	19,3	–
Greece	10,601	–	1,000	8,7	116
Spain	39,927	499	896	2,2	489
Belgium	10,251	909	862	8,4	290
Austria	8,110	723	758	9,3	654
Netherlands	15,926	725	668	4,2	456
Sweden	8,872	532	477	5,4	310
Denmark	5,340	223	259	4,8	203
Portugal	10,229	168	208	2,1	138
Czech Republic	10,272	159	201	2,0	–
Norway	4,491	161	184	4,1	–
Luxembourg	439	138	165	37,3	16
Ireland	3,787	96	127	3,3	34
Hungary (1999)	10,211	140	127	1,3	–
Finland	5,176	67	91	1,8	71
Poland (1999)	38,646	–	42	0,1	–
Slovakia	5,401	22	28	0,5	–

Source: OECD, 2004.

Table 2. Migration by main groups of nationality in the EU in 1999

	Immigration	Emigration
Total	2,062.982	1,256.000
Nationals	510,137	403,139
Communitarian foreigners	354,588	244,527
Extracommunitarian foreigners	1,198.257	579,334

Source: EC, La situation sociale dans l'Union européenne, 2003.

Table 3. Foreigners' entries on the EU territory (in thousands) (People leaving their country for at least twelve months)

	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
Germany	1,502	1,277	1,082	1,096	959	840	802	874	—	879
Spain	38	33	34	36	29	57	81	127	362	414
France	116	99	91	77	75	102	139	108	119	—
Poland	—	—	—	—	—	—	—	—	—	—
United Kingdom	216	210	253	245	258	258	332	354	364	372
Sweden	45	61	83	45	39	44	49	49	58	60

Source: Eurostat, 2004.

Table 4. Extracommunitarian foreigners on the EU territory (in thousands) (People leaving their country for at least twelve months)

	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
Germany	—	—	638	—	536	464	469	538	—	564
Spain	—	—	12	13	11	21	35	67	290	343
France	75	—	—	—	—	59	94	52	—	—
Poland	—	—	—	—	—	—	—	—	—	—
United Kingdom	—	—	110	113	108	127	153	178	201	209
Sweden	--	—	67	28	21	26	27	25	31	32

Source: Eurostat, 2004.

Table 5. Asylum applicants on the EU territory (in thousands)

	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
UE	672	515	310	274	234	251	306	390	398	388
Germany	438	322	127	127	116	104	98	95	78	88
Spain	12	13	12	6	5	5	7	8	7	9
France	29	28	26	20	17	21	22	31	38	47
Poland	0,6	0,8	0,6	0,8	3,2	3,5	3,4	3,0	4,4	4,5
United Kingdom	32	28	42	55	37	41	58	91	99	92
Sweden	84	38	18	9	6	9	12	11	16	23

Source: OECD, 2004.

Table 6. Entries through family regrouping

Countries	Number of entries en 1997
Germany	55,000*
Switzerland	22,000
Sweden	22,000
France (2000)	20,459
Spain	13,200*
Netherlands	12,000*
Austria	10,320
Norway	6,500
Belgium	4,000
Denmark	2,025

*It deals with submitted demands, some of them might be refused.

Source: Council of Europe.

Note: Several EU States do not have specific statistics as far as persons admitted thanks to family regrouping process are concerned; therefore the only available data are not updated.

Table 7. Extracommunitarian foreigners by nationality in Germany, Spain, France, Poland, United Kingdom and Sweden

Countries	Country of origin	Number (in thousands)
Germany (2000 figures)	Turkey	1,999
	Ex-Yugoslavia	663
	Croatia	217
	Bosnia-Herzegovina	156
	Russian Federation	115
Spain (2000 figures)	Morocco	200
	Ecuador	30
	China	29
	Peru	28
	Dominican Republic	26
	Colombia	25
	Cuba	19
	Argentina	17
	Algeria	14
France (1999 figures)	Morocco	504
	Algeria	478
	Turkey	209
	Tunisia	154
Poland (2002 figures)	Ex-Yugoslavia	3,5
	Romania	3,3
	Bosnia Herzegovina	3,2
	Bulgaria	1,7
	Vietnam	1,7

Sweden (2000 figures)	Iraq	33
	Bosnia Herzegovina	23
	Turkey	16
	Iran	14
	Somalia	11
	Chile	10
	Croatia	8
	Syria	6
United Kingdom (2001 figures)	India	132
	Pakistan	82
	Bangladesh	70
	South Africa	68
	Jamaica	58
	Turkey	58
	Somalia	56
	Sri Lanka	50

Source: OECD, 2004.

Appendix 2

Project files

Project No. 1 "MEDITERRANEAN WOMEN"

NAME OF ORGANISATION: Calais Family Allowances Fund (CAF).		COUNTRY: France
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: Project initiatives and supervision of the association founded in 2002.		INITIATIVE STARTED: 1992 INITIATIVE ENDS: 2002
BASIS OF THE PROJECT		
A low level of immigrants within the area selected for the project. The discovery that immigrant women suffer feelings of isolation, find integration difficult and have problems in common.		
PROJECT TARGET POPULATION		
Mothers of immigrant families from the Mediterranean basin (of Turkish and Maghreb origin).		
PROJECT		
Aims	To help these women to break out of their isolation and meet other mothers of immigrant families, to pool their experiences, and become part of the neighbourhood, city and country.	
Implementation	Initially, the CAF (Family Welfare Department) social workers met with families on an individual basis. They created a joint initiative, bringing together a group of women, at the initiative of a CAF social economics and family advisor (CESF). The group was active for a number of years, and formed an association in 2002. Through this association, women are now part of a multilateral information exchange network and meet with the local population. Although the group is now an association, it is still monitored by the CAF CESF and keeps in contact with the CAF branch (use of the kitchen, etc.).	
Difficulties	It is sometimes difficult for individuals of different ethnic origins to live together.	
Communication	Posters in the local community centre, articles in the local newspaper, and stands in a variety of demonstrations and action days.	
PARTNERS		RESOURCES
City contract development officer. Local project organizer.		Premises provided by the local council, vehicle loan by the city contract and the local council. City Policy and Resident Participation Funds. CAF involvement in visits, introductions, etc.
PROJECT RESULTS AND OUTLOOK FOR FUTURE		
In total, around sixty families have taken part in this group, which is attended on average by around twenty families. Key benefits are: development of mutual assistance, solidarity and intercultural exchanges, increased self-reliance, and language learning. Improved inclusion of foreign families. Currently the association is a vibrant and central part of the neighbourhood, and attends inter-group caucuses, and local fêtes.		
DETAILS OF PROJECT / INITIATIVE LEADER		
Surname and first name: Gilliot Monique Position: Social economics and family advisor (CESF) E-Mail: brigitte.clerbout@cafcalais.cnafrmail.fr		

Project No. 2 "MAGHREB YOUTH GROUP"

NAME OF ORGANISATION: Gironde Departmental Fund of Social Agricultural Mutual Benefit Societies (MSA).		COUNTRY: France
ROLE OF ORGANISATION WITHIN THIS PROJECT: Project initiative, coordination and financing.		INITIATIVE STARTED: 1999 INITIATIVE ENDS: Still current
BASIS OF THE PROJECT		
Incidences of breakdown within the family unit between parents and adolescents or young adults in the Médoc and Grand Libourne regions. Social workers active in these areas would like an analysis to be carried out with regard to the difficulties raised by adolescents or young adults of Maghreb origin, dysfunction of the family unit, and the limits of professional intervention.		
PROJECT TARGET POPULATION		
Social workers within the relevant sectors and the population of Maghreb origin.		
PROJECT		
Aims	To promote dialogue between social workers and families of Maghreb origin. To gain insight into the unspoken cultural factors that could be the underlying cause of conflict. To adopt consistent working methodologies for dealing with the difficulties encountered.	
Implementation	Identification of the difficulties encountered by social workers with regard to the population in question, and of a shared source of contention, formulation of a possible collective approach to be undertaken and of possible partnerships. The project was launched at the beginning of 1999 at the initiative of the Deputy Social Services Manager, in the light of difficulties reported by social workers related to the social accompaniment of these populations. Analysis of six social worker sectors, i.e. 26 families and 98 children. Provision of training for social workers. Assessment of professional practices on the basis of training results. Creation of a workshop for the application of training results, and analysis of actual case situations.	
Difficulties	Information not provided.	
Communication	Information not provided.	
PARTNERS		RESOURCES
SSAE (Immigration Social Services Assistance). CLAP South-West (Liaison Committee for Literacy and Social advancement).		Human Resources: 12 social workers + 1 manager. Access to institutional premises. Financing of training.
PROJECT RESULTS AND OUTLOOK FOR FUTURE		
As a result of the training, social services professionals were better placed to approach working situations involving divergent culturally-informed attitudes.		
DETAILS OF PROJECT / INITIATIVE LEADER		
Surname and first name: Beutis Dominique Position: Social Services Manager E-Mail: beutis.dominique@msa33.msa.fr		

Project No. 3 "DEVELOPMENT OF LOCAL-LEVEL INCENTIVES"

NAME OF ORGANISATION: Tarn Aveyron Departmental Fund of Social Agricultural Mutual Benefit Societies (MSA).		COUNTRY: France
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: Involvement in a study of requirements, project assessment, provision of technical and financial support and intervention of personnel.		INITIATIVE STARTED: 1989 INITIATIVE ENDS: 2002
BASIS OF THE PROJECT		
A high concentration of individuals of immigrant origin in a public housing area in the city of Gaillac. Population comprising both young and older families with a high percentage of children and adolescents.		
PROJECT TARGET POPULATION		
Population of Maghreb origin aged between 0 and 65.		
PROJECT		
Aims	To implement a local intervention project primarily targeting families, to encourage the involvement of families at the local level as part of a collective strategy, based on neighbourhood solidarity, relations between generations, social and family links and exchanges, and a wide range of joint initiatives.	
Implementation	<p>The project was started in 1989 to enable women in this neighbourhood to meet the teachers at the local primary school, where they would otherwise feel too frightened to enter.</p> <p>A team of social workers of the General Council working in this area approached the social parties involved in the problems encountered by families living in this area. As a result of dialogue with residents and an assessment of needs, a number of different requirements and expectations emerged which need to be taken into account.</p> <p>A range of actions was organized, at the initiative of the project leader responsible for this particular area, with the assistance of the various social partners. Initiatives targeting children and young people, such as extra-curricular activities, a leisure centre, youth leisure projects, trips and introduction to new Information and Communication Technologies. Activities targeting women included needlework, cookery, manual activities, health care prevention and provision of legal information, etc. An association was formed, the management committee of which is made up of young people and adults from an immigrant background. The local council entrusted this association with the running of the "association centre" built within the neighbourhood and the CAF, the MSA (Agricultural Scheme), and the Town Council have also provided project implementation subsidies.</p>	
Difficulties	<p>Insufficient human resources.</p> <p>Insufficient resources for training volunteer project leaders.</p>	
Communication	Little in the way of publicity about the project, apart from a few articles in the local press covering activities and initiatives carried out by young people.	
PARTNERS		RESOURCES
<p>Gaillac Township.</p> <p>Public Housing Department, SSAE¹⁷, CAF.</p> <p>Departmental Council.</p> <p>The <i>Les FRANCAS</i> primary school</p>		<p>Two young volunteer project managers.</p> <p>The community centre which comprises three rooms and a large activities hall, located amidst the buildings (this premises was built and loaned by the Town Council).</p> <p>€18,600 per annum.</p>
PROJECT RESULTS AND OUTLOOK FOR FUTURE		
85% of families living in this neighbourhood take part in organized activities, with varying degrees of regularity. A lot of encouragement is given to young people living in the neighbourhood, with the emphasis on making the surrounding social environment accessible: development of notions of responsibility, training in activities leading and notions of citizenship. The association's young volunteers raise their profile in the community and find it easier to obtain employment. Positive recognition is given for activities carried out and to those who organize		

¹⁷ SSAE: Immigration Social Services Assistance

and participate in them. This is a long-standing project that has been in place since 1989 and which is constantly eager to develop its status.

DETAILS OF PROJECT / INITIATIVE LEADER

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Project No. 4 "LITERACY INITIATIVE FOR MOROCCAN WOMEN"

NAME OF ORGANISATION: Northern Alps Departmental Fund of Social Agricultural Mutual Benefit Societies (MSA).		COUNTRY: France
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: Initiative-proposal, needs analysis, coordination, social partnership implementation and monitoring, evaluation, and joint management of the partnership.		INITIATIVE STARTED: October 2003 INITIATIVE ENDS: January 2005
BASIS OF THE PROJECT		
Analysis by the MSA social worker regarding difficulties faced by women, and consequently by their children, to communicate, and become involved in the social life of the district: only husbands and elder family members were found to be carrying out social and medical procedures, etc.		
PROJECT TARGET POPULATION		
10-12 married women aged between 24 and 52, most of them with three to five children; 50% of the women involved had received no schooling in their country of origin, although the two youngest women had studied to baccalaureate level in Morocco.		
PROJECT		
Aims	To help women to familiarize themselves with reading and writing in the French language, to break out of their isolation, and to empower themselves both within the family and in society; to be made aware of and to be recognized in terms of their status as women and mothers, and to stress the importance and validity of the role of parenting.	
Implementation	After seeking financing and once the MSA had identified and contacted the target families, the first meeting for information dissemination was organized for families in December 2002 and the first partnership meeting was held in February 2003. During the development phase, the MSA acted as joint-manager with the Departmental Council. A training programme was implemented and began in October 2003, comprising two phases: - 1 st phase: October 2003 – June 2004: learning and literacy. - 2 nd phase: September 2004 – January 2005 (focussing on learning).	
Difficulties encountered	Some women were unable to hold a pencil and found it difficult to concentrate. Difficulties were encountered in learning to function as a group, and also in organizing a joint meal. The women revealed a lack of independence.	
Communication	Regular visits from local council members were made to the group undergoing training: meetings held with target individuals; no press coverage as some participants refused.	
PARTNERS		RESOURCES
AIDER Training organization. Savoy Departmental Council. FASILD ¹⁸ . St Pierre d'Albigny Township. MSA, ESF ¹⁹ , CAF. DDTEFP ²⁰ .		A social worker, steering committee partners, TDS ²¹ Social Unity Coordinator. Community Centre, IT equipment and learning aids supplied by the training organization. Financing: 1 st phase: € 14,500 provided by FASILD, MSA, ESF, Department 73 General Council, Parish Council and participants). 2 nd phase: € 22,807 provided FASILD, DDTEFP, Parish Council, MSA, ESF, participants and the REAP ²²).
PROJECT RESULTS AND OUTLOOK FOR FUTURE		
Regular monitoring of the group by the MSA social worker and the Social Unity Coordinator of the Savoy Departmental Council. Each of the nine participants attended regularly. Results: valorization of women, provision of an opening into social life: one child was able to go to a nursery, one young woman entered a professional training course, personal investment outside the training course and the physical well-being of the women		

¹⁸ FASILD: Fund to promote integration and combat discrimination

¹⁹ ESF: European Social Fund

²⁰ DDTEP: Local labour and professional training inspectorate

²¹ TDS: Social Development Areas

²² REAP: Network listening and supporting parents

involved. Residents were able to view the culture of origin from a new perspective. Local Council representatives began to take into account the needs of this population sector. Strengthening of the partnership dynamic.

DETAILS OF PROJECT / INITIATIVE LEADER

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Project No. 5 "MIGRANT WORKERS"

NAME OF ORGANISATION: Haute Garonne Departmental Fund of Social Agricultural Mutual Benefit Societies (MSA).		COUNTRY: France	
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: Initiative-proposal and implementation.		INITIATIVE May 2003	STARTED: May 2003
		INITIATIVE Still current	ENDS:
BASIS OF THE PROJECT			
Almost 50% of the social welfare applications falling within the jurisdiction of the Toulouse Social Services Department are from applicants of Maghreb origin. There are frequent queries made regarding administrative documents received, forms to be completed, and official documentation to be provided, of receipt of benefit by non-eligible applicants and on the contrary of eligible applicants not receiving benefits, which has been the subject of a study.			
PROJECT TARGET POPULATION			
Immigrant workers of Moroccan, Tunisian and Algerian origin attending the unit.			
PROJECT			
Aims	To raise awareness amongst this population with regard to the importance of administrative procedures in France, particularly with regard to their children, and to help them to improve their understanding of documents issued by the Fund, concerning for example quarterly income declaration, annual income statements, changes of address, changes to the family structure or changes in the situations of family members, etc.		
Implementation	Presentation and explanation of the project in the presence of an interpreter to ensure that all aspects are clearly understood by participants (an interpreter ensures political and religious neutrality). Organization of friendly, subject-specific meetings in the community centre within which participants live. Search for individuals that are qualified and have an awareness of the cultural issues involved to speak about the subjects expected by participants, such as SSAE and healthcare officers).		
Difficulties	FASIL joint-financing was not obtained as a result of a change in project financing policy in 2003. It also proved difficult to find an interpreter.		
Communication	Information not provided.		
PARTNERS		RESOURCES	
CCPS (coordination committee). Bagatelle Community Centre. SSAE ²³ (expertise). COFRIMI (expertise).		Participation of social workers and assistants (CMSA 31 (Social Agricultural Scheme for French Department 31), associations, SSAE, etc). Premises made available free of charge by the Community Centre. € 700 provided for 2003, largely for payment of the interpreter.	
PROJECT RESULTS AND OUTLOOK FOR FUTURE			
13 individuals regularly participate (with a participation rate of around 85%). Benefits for the institution: opening up to a specific sector of the population; agricultural employees, better understanding of their way of life and their culture. Creation of a more relaxed relationship with social workers and the institution. Benefits for immigrants: appreciation of the importance of the written word in general and administrative documents in particular, and the relationship between departments or institutions. Sense of satisfaction at having an institution come forward and explain the way it functions. The presence of a non-social services interpreter ensures that information is provided in full and is accessible. This initiative is based on a forum for information and exchange. Assessment of this project has revealed that the language barrier is a factor of significant importance. Without the presence of an interpreter, it would not have been possible to bring about this reciprocal exchange and mutual understanding. The project's results			

²³ SSAE: Immigration Social Services Assistance

have been seen in the form of a change in the nature of applications made to the institution and a higher level of response to administrative mail. The project has been extended to include the creation, on an experimental basis, of a social and administrative unit including the presence of an interpreter.

DETAILS OF PROJECT / INITIATIVE LEADER

Surname and first name: Fabre Martine

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Project No. 6 "INCREASED ETHNIC MULTI-MIX IN PUBLIC ADMINISTRATION OF THE COUNTY OF VÄRMLAND"

NAME OF ORGANISATION: Försäkringskassan Värmland, Regional Office of the General Social Security System (SFA) of the County of Värmland		COUNTRY: Sweden
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: Coordination with other State organizations and teaching.		INITIATIVE STARTED: November 2002 INITIATIVE ENDS: End August 2003
BASIS OF THE PROJECT		
Immigrants were under-represented within the SFA Department and generally, there was a low proportion of immigrants within the Värmland public administration.		
PROJECT TARGET POPULATION		
Long-term unemployed immigrants that had passed secondary school examinations. 17 participants.		
PROJECT		
Aims	To increase the proportion of immigrants among employees of Värmland's five social service departments. To provide employment within these five departments for 50% of the project's participants.	
Implementation	The project was implemented following forums held by social service employees. The aim of the project was to provide training in the field of the Swedish social services for immigrants, who were also given the opportunity to gain an understanding of the functioning of social services administration.	
Difficulties	Information not provided.	
Communication	Media, local radio and newspapers.	
PARTNERS		RESOURCES
Local social services departments.		1 project leader, 10 teachers and 20 instructors. Study materials. €50,000 from subsidies from the European Structural Fund).
PROJECT RESULTS AND OUTLOOK FOR FUTURE		
The project was assessed by the University of Karlstad. The aims of the project were attained. Over 70% of project participants found work in social services departments (12 out of a total of 17 participants). The project also brought immigrants and the social services closer together. However, this was a relatively costly and labour-intensive project considering the small number of participants involved.		
DETAILS OF PROJECT / INITIATIVE LEADER		
Surname and first name: Ljunggren Lars-Eric Position: Project head, senior leader of Försäkringskassan Värmland E-Mail: lars-eric.ljunggren@fk17.sfa.se		

**Project No. 7 "GENERAL EDUCATION OF EMPLOYEES IN SFA ORGANISATION -
"THINK FOR YOURSELF"**

NAME OF ORGANISATION: Försäkringskassan Värmland, Regional Office of the General Social Security System (SFA) of the County of Värmland.		COUNTRY: Sweden
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: Initiative formulated at the local level within the scope of projects implemented at the governmental level.		INITIATIVE STARTED: January 2004 INITIATIVE ENDS: June 2004
BASIS OF THE PROJECT		
Immigrants, which constitute a large population group for the social services department, should have an understanding of the functions and aims of this department. Social services employees, for their part, need to be educated with regard to cultural difference and how to deal with it. Projects of this type were started at the end of the 1990s.		
PROJECT TARGET POPULATION		
Employees of the Regional Office of the General Social Security System (SFA) of the County of Värmland.		
PROJECT		
Aims	To raise awareness with regard to the importance of adopting a specific approach to immigrants.	
Implementation	All 400 employees were provided with a publication to read about immigrants, their culture, and the required attitude to adopt towards immigrants, and a special manual was also published. Discussion groups were then held.	
Difficulties	Information not provided.	
Communication	Included within the yearly work schedule.	
PARTNERS		RESOURCES
The Federation of the Regional Offices of the Swedish National Social Security System (SFA).		400 employees. Manuals.
PROJECT RESULTS AND OUTLOOK FOR FUTURE		
The project helped raise awareness among employees with regard to immigrant-specific cultural factors.		
DETAILS OF PROJECT / INITIATIVE LEADER		
Surname and first name: Ljunggren Lars-Eric Position: Senior leader at Försäkringskassan Värmland E-Mail: lars-eric.ljunggren@fk17.sfa.se		

Project No. 8 "WITH IMMIGRANTS FOR IMMIGRANTS"

(mit Migranten für Migranten)

NAME OF ORGANISATION: Ethno Medizinisches Zentrum E.V. (EMZ) as part of a preventative health programme led by the National Federation of Enterprise Sickness Funds (<i>Bundesverband der Betriebskrankenkassen (BKK)</i>).		COUNTRY: Germany
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: BKK – Development of project entitled "Better health for all"; financing. EMZ – Project implementation, coordination and leadership.		INITIATIVE STARTED: August 2003 INITIATIVE ENDS: Still current
BASIS OF THE PROJECT		
Immigrants and their children were not gaining sufficient access to preventative healthcare schemes. EMZ Hanover suggested development of a healthcare prevention and promotion project focussing on qualified personnel from an immigrant background and training them as "intercultural healthcare mediators".		
PROJECT TARGET POPULATION		
Bilingual immigrants from the former USSR, former Yugoslavia and Turkey, and immigrants living in the following cities: Lower Saxony and North Rhine-Westphalia: Hanover with a population of 505,649 of which 75,975 (15%) are not German nationals; Hildesheim, with a district population of 292,979, of which 36,000 (5.9%) are immigrants –; Bielefeld, with a population of 330,000 of which approximately 39,000 (13%) are Turkish, Greek, Serbian, Croatian, Russian and Polish immigrants and finally Münster, with a population of 269,000 of which 26,664 are foreigners of 69 different nationalities).		
PROJECT		
Aims	To familiarize immigrants with the National Healthcare Service (Öffentlicher Gesundheitsdienst) so that they can make more advantageous use of it. To overcome language barriers by training intercultural mediators. To ensure that immigrants have access to healthcare information through publicity campaigns in their own language, through information provided by mediators, and through the promotion of a healthcare guide (translated from German into several different languages).	
Implementation	Structuring phase (01.08.03 – 30.11.03): project programme and module design, assessment methods development, project brochure preparation, multilingual healthcare guide development, recruitment of immigrants as future healthcare mediators, training preparation. Training phase (15.12.03 – 15.03.04) – training of mediators, examinations, project conference and preparation of the project publicity campaign. Campaign phase (15.02.04 – 31.05.04) – carrying out of awareness campaigns in several languages, taking account of cultural factors. Assessment phase (01.06.04 – 31.07.04) – presentation of the results and a final report.	
Difficulties	The timeframe allocated for carrying out the project was too short, and had to be extended (with the consent of BKK). The budget was insufficient to cover some of the translations– the mediators themselves carried out part of the translation work.	
Communication	Regularly held mediator meetings, local and national project conferences and work sessions and dissemination of information via email.	
PARTNERS		RESOURCES
Münster City Healthcare Department. Bielefeld City Intercultural Bureau. The Healthcare and Social Services Departments of the district of Hildesheim. Hanover University Medical Faculty Münster University of Applied Sciences.		"Ethno – Medizinisches Zentrum" personnel Local-level project coordinators in Bielefeld, Hildesheim and Münster. Brochures in German, transparencies and a healthcare guide written in several different languages. Budget of € 80,000 (BKK).

PROJECT RESULTS AND OUTLOOK FOR FUTURE
73 mediators were trained, and are currently carrying out initial awareness campaigns, the results of which are difficult to ascertain at present. After the “prototype” phase, the project may be implemented nationally.
DETAILS OF PROJECT / INITIATIVE LEADER
Surname and first name: Salman Ramazan Position: EMZ Manager E-Mail: salman@onlinehome.de

Project No. 9 "IMMIGRANT WOMEN AS FAMILY MANAGERS"

NAME OF ORGANISATION: Gesundheit Berlin E.V., within the context of the preventative healthcare programme of the German National Federation of Enterprise Sickness Funds (<i>Bundesverband der Betriebskrankenkassen (BKK)</i>).		COUNTRY: Germany
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: BKK – Development of project entitled "Better health for all"; financing. Gesundheit Berlin – project development and implementation, coordination, and provision of expertise.		INITIATIVE STARTED: October 2003 INITIATIVE ENDS: End March 2004
BASIS OF THE PROJECT		
The project was carried out in Berlin, in disadvantaged neighbourhoods with a high proportion of immigrants, largely of Turkish and Arabic origin. In these neighbourhoods, several community centres currently provide advice to immigrants and serve as meeting points, among them the Gesundheit Berlin E.V. This body felt that women were best placed to provide healthcare information to their families and the neighbourhood.		
PROJECT TARGET POPULATION		
Two groups of women of Turkish origin, their families, the neighbourhood and visitors to the social centres.		
PROJECT		
Aims	To facilitate access by immigrants and their children to information about healthcare and the healthcare system. To encourage access by immigrants to Information Technology and the Internet. To develop activities within the community and at community centres.	
Implementation	<p>This is a two-tier project:</p> <ol style="list-style-type: none"> 1. "Internet-Café for healthcare information". The aim of this part of the project is to create a facility within a healthcare centre for immigrant women and their families where they have access to healthcare information. A group of women of Turkish origin was taught how to use the Internet to access healthcare-related information. After receiving training, they will go on independently to organize meetings at the Community Centre for the target public. 2. "Cookery book for women of Turkish origin". The focus of this module is on nutrition. Studies have revealed that the problem of obesity exists within the Turkish population, particularly among children. By studying recipes and nutritional habits, a group of women attains a basic insight into healthy, balanced nutrition. These women then pass on the information obtained to their families. As part of the project, a cookery book written in Turkish has been issued, providing information on balanced nutrition. 	
Difficulties	Information not provided.	
Communication	A presentation made at a healthcare promotion conference, addressing individuals working in the field of healthcare and immigration, and issue of a newsletter, and publicity via television and radio programmes and the Internet. Communication to the institution financing the project (BKK). Presentation of the project to the public.	
PARTNERS		RESOURCES
Non-Governmental Organizations. Social welfare departments. Healthcare insurance sector.		Two persons responsible for project development and implementation, and two persons in charge of public relations and secretarial duties. Four computers and locations provided in social centres. A budget of € 34,568.
PROJECT RESULTS AND OUTLOOK FOR FUTURE		
Intercultural openness of the healthcare system – a re-focussing process in which immigrants are considered to be an important group. The immigrant groups concerned by the project view themselves as entirely separate partners within the healthcare system.		

DETAILS OF PROJECT / INITIATIVE LEADER

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Position: Executive Director

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Project No. 10 "MIGRATION AND ADDICTION"

NAME OF ORGANISATION: Essen-Duisbourg University, Institute of Applied Social Sciences within the context of the preventive healthcare programme of the German National Federation of Enterprise Sickness Funds (Bundesverband der Betriebskrankenkassen (BKK)).		COUNTRY: Germany
ROLE OF ORGANISATION WITHIN THIS INITIATIVE: Essen-Duisbourg University – project leadership BKK – Initiation and financing of the "Better healthcare for all" programme.		INITIATIVE STARTED: August 2003 INITIATIVE ENDS: End April 2005
BASIS OF THE PROJECT		
A high proportion of students of immigrant origin at Duisbourg University (out of a total city population of 584,150, 76,693 are immigrants) means that it has been possible to carry out both a research and a healthcare project that is directly linked to these students' immigration experiences. The project comprises two components: "migration and healthcare" and "migration and addiction and/or substance abuse".		
PROJECT TARGET POPULATION		
Students of immigrant origin.		
PROJECT		
Aims	To carry out a project combining both research and practice. To encourage the training of prospective social workers who will then go on to work in the field of addiction prevention and use of intercultural skills. To identify and develop innovative addiction prevention methods that take into account immigration and cultural factors.	
Implementation	The project has been included within the study programme of Duisbourg University. As a result, it has been possible to combine theory with practice, to develop reproducible prevention methods and to study the relationship between immigration and addiction. The project is being developed by the Institute of Applied Social Sciences over the course of three semesters (October 2003 – March 2005). The aim of the initiatory module, entitled "Migration and healthcare— healthy integration?" is to disseminate basic information for conducting addiction prevention social work. The two following modules together constitute the project's research component.	
Difficulties	Information not provided.	
Communication	Information not provided.	
PARTNERS		RESOURCES
A number of organizations working on issues associated with immigration and addiction (from a preventive perspective).		3 tutors. Provision of University premises. € 20,010.
PROJECT RESULTS AND OUTLOOK FOR FUTURE		
130 students from a variety of social science fields attended the introductory conference held during the 2003/2004 winter semester. Approximately 50% of these students were either children of immigrants born in Germany, or were themselves immigrants. The project is of value since it provides both theoretical and practical teaching, enabling students to contribute their own immigration experiences. Upon completion of the programme, addiction prevention will be of benefit to new social workers active at the intercultural level.		
DETAILS OF PROJECT / INITIATIVE LEADER		
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