



## **Social Inclusion and Access to Basic Services of Third-Country Nationals (AccessIN)**

### **Project Final Report** *AccessIN Deliverable D1.7 (Work Package 1)*



This publication was funded by the European Union's Asylum, Migration and Integration Fund. The content of this publication represents the views of the author only and is his/her sole responsibility. The European Commission does not accept any responsibility for use that may be made of the information it contains.



## AccessIN Final Report

Drawing on the collaborative work of a consortium including universities, civil society organisations and a public administration, the AccessIN project (2022-2024) has tackled the social vulnerabilities of third-country nationals (TCNs) in four EU Member States: Belgium, Germany, Hungary, and Spain.

The actions implemented during the project aimed to identify and reduce barriers in access to services across five core policy areas: healthcare, housing, education, employment, and social assistance. These actions were distributed across several Work Packages (WPs):

**Work Package 1:** Management and Coordination of the Action

**Work Package 2:** Mapping, Informing, and Improving the Eligibility Conditions for Migrants' Access to Basic Services.

**Work Package 3:** Removing Barriers in Migrants' Access to Basic Services: The Role of Service Providers.

**Work Package 4:** Migrants' Experiences in Accessing Basic Services and Tools for Improving Healthcare Provision.

**Work Package 5:** Strengthening the Role of CSOs in Fostering Migrants' Access to Basic Services.

This report provides an executive summary of the main activities, deliverables and outputs of the Access project.



This publication was funded by the European Union's Asylum, Migration and Integration Fund. The content of this publication represents the views of the author only and is his/her sole responsibility. The European Commission does not accept any responsibility for use that may be made of the information it contains.

## Table of content:

<b>I. SUMMARY OF THE PROJECT</b>	4
<b>Objectives of the project:</b>	4
<i>Specific objectives:</i>	4
<b>Contributors to the project</b>	5
<b>II. WORK PACKAGES AND ACTIVITIES</b>	6
<b>Work Package 1: Management and Coordination of the Action</b>	6
<b>Activities WP1</b>	6
<b>Deliverables WP1:</b>	7
<b>Outputs WP1:</b>	8
<b>Work Package 2: Mapping, Informing, and Improving the Eligibility Conditions for Migrants' Access to Basic Services</b>	9
<b>Activities WP2</b>	9
<b>Deliverables WP2:</b>	11
<b>Outputs WP2:</b>	12
<b>Work Package 3: Removing Barriers in Migrants' Access to Basic Services: The Role of Service Providers</b>	13
<b>Activities WP3</b>	13
<b>Deliverables WP3:</b>	15
<b>Outputs WP3:</b>	17
<b>Work Package 4: Migrants' Experiences in Accessing Basic Services and Tools for Improving Healthcare Provision</b>	17
<b>Activities WP4:</b>	17
<b>Deliverables WP4:</b>	20
<b>Outputs WP4:</b>	21
<b>Work Package 5: Strengthening the Role of CSOs in Fostering Migrants' Access to Basic Services</b>	22
<b>Activities WP5:</b>	22
<b>Deliverables WP5:</b>	23
<b>Outputs WP5:</b>	24

## **I. SUMMARY OF THE PROJECT**

Although the social inclusion of third-country nationals (TCNs) has been a key priority across the EU, persistent gaps in their access to basic services demonstrate that additional actions are needed to support integration. AccessIN contributed to these ongoing efforts to tackle TCNs' social vulnerabilities by focusing on four EU Member States from different parts of Europe: Belgium, Germany, Hungary & Spain. The project consisted in the implementation of a series of activities aiming at identifying and reducing barriers in access to services via a transversal and multi-sectoral approach that covered five core policy areas: healthcare, housing, education, employment & social assistance.

### **Objectives of the project:**

This project aimed to support the EU and its Member States in promoting the social inclusion of third-country nationals by tackling key challenges related to their access to basic services. We implemented different activities based on a comprehensive and integrated approach that encompassed several facets of the integration process: access to healthcare and educational systems, inclusion via employment, and access to housing and social assistance services. Correctly identifying and efficiently addressing barriers and gaps in access to (or use of) social rights requires not only the implementation of locally focused social inclusion actions; but also the active involvement of (and transnational cooperation between) stakeholders and practitioners. It also requires consultation of TCNs, to better understand their lived experiences as service recipients. Our activities hence responded to this multi-stakeholder approach seeking to ensure that TCNs' basic needs are efficiently met. The project aimed at improving knowledge of TCNs regarding the eligibility conditions and specific procedures to follow for accessing basic services.

The AccessIN project also facilitated the dissemination of know-how and best practices among policymakers, while providing them with tailored assistance on how to better address the identified social inclusion gaps. It promoted knowledge transfer and cooperation between civil society organizations active in the field of migrant integration, thus better preparing them to respond to TCNs' complex social needs. Finally, the project pro-actively engaged with practitioners who deal directly with TCNs; and trained them to ensure a more adequate service provision and remove barriers of access to public services.

### *Specific objectives:*

1. Map the legal conditions of access to basic services
2. Consult TCNs about access to and use of basic services
3. Understand service providers' needs and views
4. Increase cooperation between CSOs active in the field of migrant integration
5. Increase TCNs' knowledge about their social rights
6. Pilot training modules for service providers
7. Inform and advise policymakers on how to address TCN's social inclusion
8. Provide capacity building training for CSOs

## **Contributors to the project**

### **University of Liège**

- > Jean-Michel Lafleur
- > Daniela Vintila
- > Angeliki Konstantinidou
- > Carole Wenger

### **Menedék- Hungarian Association for Migrants**

- > Dóra Szabóné Lippényi
- > Bernadette Daragics
- > Vivien Vadasi
- > Márton Bisztrai

### **Solidaridad Sin Fronteras**

- > Guadalupe Murillo
- > Paula Márquez Solano

### **Philipps Universität Marburg**

- > Antje Röder
- > Zach Bastick
- > Antonia Jordan
- > Jutta O. Lechner
- > Sarah E. Kusminder

### **Universidad Autonoma de Madrid**

- > Santiago Pérez-Nievas
- > María Soledad Escobar
- > Sebastián Umpierrez
- > Renata Pérez Pacheco
- > Piotr Zagórski
- > Laura Lamas-Abraira

### **University of Oxford**

- > Marie L. Mallet-Garcia

### **Caritas International ASBL**

- > Pieter Van Royen
- > Saskia Curchod

### **City of Frankfurt**

- > Sarah Alexandra Lang
- > Petra Tiarks-Jungk
- > Lucy Grünberg
- > Ouissam Akian En-Nahas

## II. WORK PACKAGES AND ACTIVITIES

### Work Package 1: Management and Coordination of the Action

#### Activities WP1

##### *1.1. Administration and management*

The Project Management (PM) Team at the University of Liege (i.e. the partner ensuring the coordination of the AccessIN project) focused on ensuring the timely and sound administrative and financial management of the action. This included the legal and contractual aspects of the project, ensuring compliance with the Grant Agreement, and facilitating administrative and financial reporting. The PM team was coordinated by Jean-Michel Lafleur and Daniela Vintila.

To ensure that the project meets the expected standards in terms of quality of outputs and deliverables, a **Consortium Agreement** was designed and signed between all consortium partners. Furthermore, the PM team developed a **Quality Assurance Plan (QAP)** to closely monitor the project's execution and the coordination of the official correspondence with the European Commission; while a **Dissemination and Communication Strategy** was established in the early stages of the project and shared with all consortium partners to ensure consistency in public outreach. The AccessIN team members at the University of Liege also ensured regular communication between the project partners. This also included the organization of several **consortium meetings** involving all partners participating in the action, as well as the organization of regular online meetings with representatives of the different Work Packages (generally every 6-8 weeks).

##### *1.2. Creation of the Advisory Board*

The [AccessIN Advisory Board](#) was created as a consultative body whose members provided guidance on the project activities, while ensuring external oversight and early engagement with key audiences. The Board included eight stakeholders and scholars jointly decided by the consortium partners thanks to their strong expertise in the topic of the project: Agnes Hars (Kopint Tárk Institute of Economic Research, Hungary), Thomas Huddleston (Maastricht University), Peter Hupe (KU Leuven), Francisco Javier Moreno Fuentes (Spanish National Research Council), Daria Ana Pîrvu (representative for ROMBEL- Romanians in Belgium, co-founder of Agora for Life in Gent, partner of EuropaNova school in Brussels), Ana Radulescu (International Federation for Social WorkersEurope), Nora Ratzmann (German Center for Integration and Migration Research), Thorsten Schlee (University Duisburg-Essen). The PM team communicated regularly with the Advisory Board members regarding the progress achieved across the different WPs and asked for specific guidance whenever needed. Advisory Board members were also consulted regarding the design and implementation strategies developed by the different WP leaders for their specific WP activities.

##### *1.3. Dissemination and communication*

A **Dissemination and Communication Committee** was created to oversee the action's dissemination, communication and exploitation. The Committee was chaired by Jean-Michel Lafleur and Daniela Vintila (from the PM at the University of Liege) and included consortium members from the University of Oxford (Marie Mallet), the University of Marburg (Zach Bastich), Menedék Hungary (Bernadette Dargics) and the University of Liege (Angeliki Konstantinidou). This Committee also produced a "**Communication and Dissemination Strategy**", which was a reference document shared internally with the entire consortium. It set up and maintained the digital dissemination tools, including the [project website](#) and social media accounts ([Facebook](#) and [Twitter/X](#)). These platforms were regularly updated by the ULiege team, based on the information provided by the partners regarding the consortium's activities. The Dissemination and Communication Committee also reviewed all documents produced by the project. It also worked together with national partners to organize **Online**

**National Roundtables** (one per country) on TCNs' access to basic services. The [Roundtables](#) took place on Wednesday, 22nd of May 2024 between 13:00 and 17:00 CEST (via Teams) and brought together 44 participants, including academics, policymakers, service providers, civil society organizations and community organizations representing migrants. Finally, the Dissemination and Communication Committee led by the ULiege team also prepared and organized the project's [International Conference in Brussels](#). The event took place towards the end of the action on the 26<sup>th</sup> of November 2024, in a hybrid format (at Residence Palace in Brussels and online via Teams). The event was attended by 33 on-site and 47 online participants (project partners, CSO representatives, community leaders, academics).

### **Deliverables WP1:**

- a. The **AccessIN Consortium Agreement** was initially submitted on 8 April 2022; revised and resubmitted on 21 June 2023 (D1.1):

The Agreement was developed by the Project Management team at ULiege, in coordination with all other consortium partners. The document aimed to ensure that the project met the expected standards in terms of quality of outputs and deliverables, while also specifying the organisation of the work between partners, and their roles and responsibilities in the project implementation.

- b. The **AccessIN Quality Assurance Plan (QAP)** was initially submitted on 29 April 2022; revised and resubmitted on 8 April 2022; revised and resubmitted on 21 June 2023 (D1.2):

This document detailed the guidelines that governed the AccessIN project, drawing on the general terms and conditions established in the Grant Agreement (GA) and its Annexes, as well as in the Consortium Agreement (CA) signed by Consortium partners. It covered different provisions and instructions related to the overall project structures and management, and aimed at guiding Consortium partners on how to plan, manage, organize, submit, and implement the different project activities. The quality assurance and risk management procedures presented in this document applied to all AccessIN activities, with mandatory compliance for all consortium partners.

- c. **Communication and Dissemination Strategy** was initially submitted on 29 April 2022; revised and resubmitted on 21 June 2023 (D1.3):

This document specified the guiding principles and procedures regarding the overall communication and dissemination actions of the AccessIN project. Following the guidelines provided in Annex 1 of the Grant Agreement and in the Consortium Agreement signed between the project partners, this strategy outlined the project's communication and dissemination objectives, its targeted audiences, visual identity and dissemination tools, as well as the AccessIN strategy for public engagement.

- d. The **AccessIN website and social Media** were launched on 29 April 2022 (including the corresponding deliverable; the deliverable was revised and resubmitted on 21 June 2023)(D1.4):

The [project website](#) and social media accounts on [Facebook](#) and [Twitter/X](#) represented the key digital dissemination tools of AccessIN. The website contains detailed information regarding the project's objectives, partners, Work Packages, the news disseminated by the consortium and the events organized during the project. Furthermore, the website also includes all the public deliverables of the AccessIN project. This information was also regularly shared on the project's social media accounts.

- e. **Mid-term Progress Report** submitted on 30 June 2023 (D1.5):

A report outlined the project's activities and achievements over the period of January 2022- June 2023. The report also set the objectives for the project's continuation during the remaining period until 31 December 2024.

- f. **Project Factsheets** submitted on 2 November 2023 (D1.6):

AccessIN factsheets were produced and disseminated via the project website and social media. Each Work packages were summarized in project factsheets written in English. The five factsheets ([WP1](#), [WP2](#), [WP3](#), [WP4](#), [WP5](#)) include easy to read information regarding the aims and activities of the work package.

- g. Project **Final Report** submitted on 31 January 2025 (D1.7):

The current document represents the Final Report of the AccessIN project.

### Outputs WP1:

- a. **Consortium Meetings:** The kick-off meeting of the project took place online on the 24<sup>th</sup> of February 2022 and was attended by all project partners, as well as the EU Project Officer. After this consortium meeting the project teams in the different countries jointly decided to organize regular consortium meetings attended by all project partners every 6 to 8 weeks. Having these regular meetings within the consortium was considered a better practice to ensure exchange of information between the partners regarding the goals, achievements, and plans involving the different country teams and WP teams. A large mid-term consortium meeting (to which Advisory Board members were invited) took place on the 11<sup>th</sup> of May 2023, whereas the final meeting of all consortium partners took place on the 26<sup>th</sup> of November 2024 during the final project conference that took place in Brussels.
- b. **Meetings between PM and WP leaders:** Regular video calls between the PM and the WP representatives were organized with the general monthly frequency to discuss and monitor progress. Additionally, email communication has also been used as a way of exchanging with WP leaders and consortium partners regarding specific tasks and activities.
- c. **Online National Roundtables:** [4 Online National Roundtables](#) (one per country) were organized in collaboration with the consortium partners. The roundtables served as an opportunity for both researchers and practitioners to engage in rich discussions on migrants' access to basic services (employment, education, healthcare, housing, and social assistance) in Belgium, Germany, Hungary and Spain. In addition to scholars, the roundtables also service providers, CSOs and community organizations representing migrants. To foster exchange of information and good practices among participants from different countries, all national roundtables took place online in the same day (Wednesday, 22<sup>nd</sup> of May 2024, between 13:00 and 17:00). Overall, 4 participants attended the event and contributed to rich exchanges regarding currently challenges and ways of addressing them across the four countries covered in the project. The details of the [programme](#) were made available on the project website.
- d. **International Conference:** An International Conference was organized in Brussels. This one-day event involved all project teams, members of the AccessIN Advisory Board and key stakeholders (service providers, CSOs, policymakers, scholars) working on/interested in migrants' social inclusion. The event took place on Tuesday, 26<sup>th</sup> of November 2024 between 09:00 and 13:30. To increase the audience, the event was hybrid (at Residence Palace in Brussels and online via Teams). Details of the programme are accessible [here](#). It was attended by 47 participants online and 33 on-site.



## Work Package 2: Mapping, Informing, and Improving the Eligibility Conditions for Migrants' Access to Basic Services

Co-led by the University of Liège and Caritas International, this Work Package first mapped the legal eligibility conditions under which third-country nationals can access basic services in Belgium, Germany, Hungary and Spain. The analysis then served to develop activities aiming to raise awareness on migrants' social rights and inform policymakers about challenges in migrants' social inclusion.

### Activities WP2

#### *1.4. Preparation of the Policy Survey*

During the preparatory work for the Policy Survey, we identified specific questions to be included for each policy area by deciding on the specific type of rights and services to be analyzed in each case. Both closed and open-ended questions were used to facilitate comparability while also enabling qualitative feedback. Upon exchanges with the consortium partners and Advisory Board members, the questions mainly focused on identifying the legislation applicable in each case, the specific eligibility criteria that conditioned TCNs' access to services, the key public administrations that migrants could contact in each case, and the most relevant CSOs offering assistance in this area. The ULiege team conducted an in-depth literature review on five key policy areas—education, employment, healthcare, housing, and social assistance—across the four target countries to identify relevant legislation and social benefits for third-country nationals (TCNs). This research informed the creation of five separate codebooks, one for each policy area ([Employment](#), [Education](#), [Healthcare](#), [Social Assistance](#), [Housing](#)), to assess the conditions under which TCNs could access basic services. Initially, the codebooks focused on single-permit holders without residence permits, but after internal reflection, the scope was expanded to include other migrant groups, such as seasonal workers and refugees. The final versions of the codebooks were accompanied by a general coding guideline document and a country report template, which were sent to the national experts participating in the survey, ensuring the comparability of findings across the four countries and facilitating a deeper understanding of the challenges TCNs face in accessing basic services. Country experts (one per country) were identified based on a public Call for Applications. To ensure the quality of the data, the survey was conducted with migration scholars who had strong legal expertise in the policies regulating migrants' access to services in each country.

#### *1.5. Conduct of the Policy Survey and creation of the Policy Dataset*

Preliminary discussions were held with national experts to ensure a clear and common understanding of the codebook guidelines. Once the survey was administered, The AccessIN team at ULiege maintained an open communication with all experts in view of clarifying any queries that emerged during the data collection. Quality control of the data received was ensured, with several rounds of consistency checks and data cleaning conducted by the ULiege team of the AccessIN project, before merging all national datasets received into the AccessIN Policy Dataset. The information contained in this dataset informed the rest of the activities in this WP (the preparation of the “Know your Rights” Brochures, the Toolkit for Policymakers, and the Info Kiosk) and was also used as a reference for the project's activities involving consultation with service providers (WP3), migrants (WP4), and CSOs (WP5).

#### *1.5. Production of WP2 country reports*

One report per country ([Belgium](#), [Germany](#), [Hungary](#), [Spain](#)) was produced by the country experts involved in the Policy Survey, based on a template provided by the ULiege team of AccessIN. The reports summarized the key findings on national and sub-national policies in each Member State analyzed. Each report discussed current policy measures for TCNs' access to basic services, recent policy changes, and key challenges that remained to be addressed in each country. All reports were made

available in Open Access on the project website.

### *1.6. Create the “Know your Rights” Q&A Brochures*

Four “Know your Rights” Q&A Brochures (one per country: [Belgium](#), [Germany](#), [Hungary](#), [Spain](#)) were created to communicate and disseminate the key findings of the Policy Dataset in a way that was suitable for and adapted to migrant populations. Following the recommendations of the AccessIN Communication and Dissemination Committee, they were designed in the form of frequently asked questions and answers on core aspects related to mainstream services across the five areas analyzed. They informed migrants about the main eligibility requirements that have to be met to claim basic services in each country. Each brochure also included a list of public administration offices and departments that migrants could contact for further information regarding their social rights, as well as a map of NGOs providing direct guidance to migrants on accessing basic services.

### *1.7. Pilot and evaluate the Migrant Info Kiosk*

The information gathered via the Policy Survey was actively disseminated to TCNs through an [Info Kiosk](#), which served as a centralized unit for welcoming, information, and service provision to migrants. This one-stop-shop acted as a bridge between service users and the various public administrations and service providers. It advised TCNs on the social rights they were legally entitled to and guided them on a case-by-case basis when specific problems in accessing basic services emerged. It facilitated and empowered them to take control of their situation and directed them to expert organizations, public administrations, and service providers where possible.

Following a holistic approach to social inclusion and service provision, the Info Kiosk provided information on a wide array of in-cash benefits and in-kind services that TCNs could access across the five areas analyzed. The Info Kiosk was piloted in Brussels—one of the European cities with the highest demographic concentration of foreign-born residents and significant diversity by national origins. The form and organization of the Info Kiosk were developed considering the specific needs of TCNs (as identified during consultations with migrants in WP4, service providers in WP3, and CSOs in WP5) and the impact of existing social projects in Brussels to ensure broad accessibility. Information about its existence was thoroughly circulated on the project website and through the extensive network of community associations supported by Caritas Belgium (the leading partner in this activity) and ULiege.

Its strong impact on raising migrants’ awareness of social provision was ensured not only by the expertise of Caritas Belgium in providing direct advice to TCNs but also by the high efficiency of this type of tool for information provision to migrants.

The Migrant Info Kiosk was carefully evaluated through a user satisfaction survey and quality monitoring by the collaborators of the Info Kiosk. Based on this survey, the monitoring results, and the overall number of users, its follow-up possibilities beyond AccessIN were assessed during Months 30–32 by examining its efficiency and potential replicability in other European cities. The results of this evaluation were summarized in a [Working Paper](#) highlighting the efficiency of this tool.

### *1.9. Creation and dissemination of the Toolkit for Policymakers*

The rich empirical evidence and fresh knowledge collected in WPs 2-5 were valorized to design and disseminate a valuable [Toolkit](#) aimed at enhancing future policymaking for TCNs’ social inclusion. The Toolkit informed decision-makers about existing gaps in the regulatory framework (based on WP2 findings), practical obstacles that migrants faced when accessing services (informed by interviews conducted in WP4), service providers’ needs in this area (as reported by WP3), and the viewpoints of CSOs active in this field (upon consultation in WP5). By benchmarking best practices to efficiently and effectively respond to TCNs’ social needs at the national and local levels, the Toolkit laid the groundwork for policy measures worthy of emulation.

This evidence-based multilevel assessment informed tailored policy recommendations. These recommendations provided comprehensive guidance to policymakers on addressing social inclusion challenges, including proposals for removing administrative and legal barriers affecting TCNs' access to services, guidance on communication tools to better inform authorities about the needs of migrants and service providers, and suggestions on strengthening interaction with community associations to raise awareness about TCNs' social rights. The Toolkit was shared on the project website, via social media as well as within our network of partner institutions and organizations and to the advisory board. The draft of the toolkit was discussed at the International Conference in Brussels and feedbacks received during the event were incorporated into the final version.

## **Deliverables WP2:**

### **a. AccessIN Policy Survey Dataset and Codebook** submitted on 19 December 2023 (D2.1) :

In the first half of the project, WP2 focused on designing, preparing, and launching the AccessIN Policy Survey (Deliverable D2.1). The ULiege team conducted an in-depth literature review on five key policy areas—education, employment, healthcare, housing, and social assistance—across the four target countries to identify relevant legislation and social benefits for third-country nationals (TCNs). This research informed the creation of five separate codebooks, one for each policy area, to assess the conditions under which TCNs could access basic services. Initially, the codebooks focused on single-permit holders without residence permits, but after internal reflection, the scope was expanded to include other migrant groups, such as seasonal workers and refugees. The codebooks were revised to include open-ended questions, allowing national experts to provide more detailed and context-specific responses. The final versions of the codebooks were accompanied by a general coding guideline document and a country report template, ensuring the comparability of findings across the four countries and facilitating a deeper understanding of the challenges TCNs face in accessing basic services. The policy dataset and codebooks were submitted to the European commission and the codebooks were also posted on the [project website](#) in order to inform future projects that could be interested in launching similar surveys in other countries.

### **b. Country case studies (x4)** on policies regulating migrants' access to basic services submitted on 19 December 2023 (D2.2):

Four country reports were prepared ([Belgium](#), [Germany](#), [Hungary](#), [Spain](#)) by different experts in each country. Experts were asked to contextualise access to public services in each targeted Member State; make an assessment of the current challenges when it comes to the access of different groups of third-country nationals to such services and; suggest recommendations on how the existing gaps could be tackled in the future.

### **c. Interim WP Report** was submitted on 6 November 2023 (D2.3):

The report outlined the main activities and challenges of WP2 during the first half of the AccessIN project (January 2022- June 2023). It also lays the ground for the future planning of WP2 actions for the remainder of the project.

### **d. “Know your Rights” Q&A Brochures (x4)** submitted on 29 February 2024 (D2.4):

WP2 focused on the normative and administrative aspect of migrant's access to basic rights. This included mapping migrants' rights to basic services in Belgium, Spain, Hungary and Germany. Based on this mapping exercise, country reports were drafted and practical “Know Your Rights” brochures were created by country experts ([Belgium](#), [Germany](#), [Hungary](#), [Spain](#)) under coordination of the Université de Liège. The brochures were made available on [the project website](#) in English, the official languages of the targeted countries (French, Dutch, German, Spanish, Hungarian), and translated into

Arabic and Turkish (the official languages of the largest non-EU communities residing in these countries and different from the national languages of these Member States).

- e. **Working Paper** assessing the efficiency of the Migrant Info Kiosk 29 August 2024 (D2.5):

This [Working Paper](#) provided an insight on the design, the development, the activities and results of the Info Kiosk BXL.

- f. **Toolkit for Policymakers** submitted on 20 December 2024 (D2.6)

The [Toolkit](#) provides an executive summary of the project's main findings and recommendations for identifying and reducing barriers in access to services. It is done in a transversal and multi-sectoral approach that covers five core policy areas: healthcare, housing, education, employment and social assistance.

### Outputs WP2:

- a. **Online meetings with consortium partners and the Advisory Board for the preparation of WP2 activities:** Three online meetings were organized with consortium partners to consult them during the preparatory stage of WP2 activities, particularly regarding the Policy Survey, the "Know your Rights" Q&A Brochures, the Toolkit for Policymakers, and the Info Kiosk. Advisory Board members were also consulted in the preparatory stages of WP2 activities, whereas internal meetings and email communication were frequently set up between WP2 partners (ULiege and Caritas Belgium) to ensure progress aligned with the action's objectives.
- b. **Exchanges with country experts:** In preparation for the launch of the AccessIN Policy Survey and the planning of the subsequent country reports, the ULiege team organized separate online meetings with the experts to guide them through the data collection process and ensure a common understanding of the survey questions and of the content and structure of the country reports. The online meetings were complemented by email communications and additional follow-ups whenever needed. Throughout the data collection process, regular communication with each country expert was maintained to monitor the progress of the survey and ensure the high quality of data collection.
- c. **Migrant Info Kiosk:** Caritas Belgium initiated the preparatory work for the [Info Kiosk](#), set to begin in month 18 of the AccessIN project, targeting three communes in Brussels with significant migrant populations: Saint-Josse-ten-Noode, Schaerbeek, and Bruxelles-Ville. The project was planned in three phases: Phase 1 (April-July 2023) involved setting up the strategy, logistics, and communication plan, as well as initiating contact with relevant organizations. Phase 2 (July-December 2023) focused on launching physical and remote consultations, expanding the network of partners, and conducting an internal evaluation. Phase 3 (January-June 2024) aimed at stabilizing the project, adding a second consultation location, and organizing more activities. By June 2023, Caritas had launched the first phase, setting up the physical Kiosk and engaging with 50 relevant organizations. The Kiosk began offering consultations in-person and remotely on a variety of topics, such as employment, housing, healthcare, and education, with services available in multiple languages. A logbook was used to track consultations and improve service delivery.

During the entire duration of the Info Kiosk BXL service, from the beginning of July 2023 to mid-May 2024, 302 people made a request. This is an average of 1.8 people per working day. In total, based on the data registered, people of at least 50 different countries of origin have passed through the Info Kiosk BXL. Unsurprisingly, groups that traditionally find their way to Caritas International Belgium's services (displaced people, beneficiaries of international and temporary protection) were well represented, as were people from important migrant communities in Brussels (Guinea, Morocco, Turkey, etc.).

As part of the Info Kiosk BXL service, useful and easy-to-use tools for beneficiaries and/or professionals were developed. These tools were created according to the needs the team observed. For example, a paper version of the social map of Brussels (see Appendix 6 in deliverable D2.5) was made with the main places that are important to our audience.

Collective activities aiming at bringing people together is an efficient way to share information and lived experience and to stimulate peer to peer learning in a controlled setting were organized through the info Kiosk. A first group activity was organized on December 13, 2023 on the topic of culture shock. Twelve people were registered, but six (five women and one man) attended, all of various origins: Syria, Eritrea, Morocco, Peru, Turkey and Iraq. The feedback was very positive. A second group activity was organized on 21 February 2024 on the best tips for feeling at home in Brussels. Nine people were registered and six (two men and four women) attended. The nationalities were again very varied: Morocco, Turkey, Guinea, Italy, Syria and Peru.

### **Work Package 3: Removing Barriers in Migrants' Access to Basic Services: The Role of Service Providers**

Co-led by the Universidad Autónoma de Madrid (UAM) and Solidaridad Sin Fronteras (SSF), this Work Package examined service providers' viewpoint and role in ensuring migrants' access to public services. It concentrated on organizational capacity, resources and training needed by first-line practitioners, as well as their latent attitudes and cultural beliefs towards migrants.

#### **Activities WP3**

##### *3.1. Interviews preparation and implementation*

Before conducting the interviews, the literature on the views of service providers regarding migrant service provision was reviewed, particularly focusing on the barriers and obstacles identified by these practitioners across the five services (healthcare, housing, employment, education, social assistance). This review also included the compilation of examples of best practices for addressing diversity in their job performance. Regarding obstacles, attention was given to both organizational and legal barriers (infrastructure, personnel, skills, standard regulations, language) and to constellations of cultural beliefs (attitudes, prejudice, and stereotypes) that may have hindered the services provided to TCNs.

Based on this review, 20 interview guides (one per service in each country) were developed, taking into account cross-country differences in terminology and the competencies of service providers within each field. To standardize the information gathered from the interviews, a common codebook was developed for use by interviewers and during the data analysis stage. To reach service providers, the extensive networks of project partners in each country, including universities, NGOs, and local authorities, were utilized. Both the planning of the qualitative fieldwork and the procedure for storing the data were approved by the UAM Ethics Committee and authorized by the UAM Vice-chancellor for Research.

##### *3.2. Design and conduct the Education Service Providers Survey (ESPS)*

This activity consisted of designing an online survey experiment and administering it to education professionals in Spain (teachers, orientation service staff, social educators, and administrative staff) to identify implicit, latent attitudes towards migrants and their integration in schools (primary, secondary, vocational, and adult learning). Using insights from WP2 and the interviews with service providers, and after a careful assessment of existing survey and experimental data on education services, integration, and attitudes towards migrants and upon consultation with the consortium partners, a questionnaire and a conjoint experiment design for the Education Services Providers Survey (ESPS) were elaborated.



Conjoint experiments were designed to assess the ways in which service providers' (latent) attitudes might have affected migrants' access to education. Respondents were provided with different choice tasks, comparing various profiles of migrants and non-migrants (pupils and parents) and different conceptualizations of integration through education. Each profile presented to respondents varied along randomly assigned attributes. The survey was fielded in Spain, and prior to its implementation, a pilot study was conducted to ensure the validity of the questionnaire and its experimental design.

### *3.3. Creation of a Service Providers' Needs Assessment Report*

Based on the WP3 interviews and survey, [one report](#) was produced summarizing the key findings on the barriers faced by service providers in their work with TCNs. The report was divided into four chapters (one per country) and included a comparison across European cities. The chapter on Spain also included a section with the main findings of the survey with experiments within the education field, as well as an analysis of its potential replicability in other countries.

In each context and within each service, those groups that, according to professionals, faced greater hindrances in accessing public services were identified, with special attention given to the specific constraints faced by these practitioners in assisting female TCNs. The report also included a Good Practices Guide that provided a set of recommendations to service providers based on inspiring examples from their peers. This guide also informed policymakers on how to overcome the barriers (organizational and attitudinal) identified in the daily work of service providers in contact with TCNs, thus feeding into the WP2 Toolkit for Policymakers. UAM made the report available in Open Access on the project website and used it to design the contents of the Handbooks, Leaflets, and Online Courses on Diversity Management.

### *3.4. Creation of Diversity Mini-Handbooks and Leaflets*

The information gathered in the Service Providers' Needs Assessment Report, particularly the Good Practice Guide, was also used to create four mini Handbooks (one per country: [Belgium](#), [Germany](#), [Hungary](#), [Spain](#)) and 20 Leaflets (one per service within each country- see project website, [deliverables](#) WP3) aimed at informing professionals about the material resources at their disposal to enhance assistance to TCNs. To bridge the gap between the barriers identified by practitioners, on the one hand, and TCNs, on the other, the information collected in WP4 regarding migrants' experiences in accessing public services was utilized. All materials were published in English and in all national languages.

The Diversity Leaflets included short tips on how to improve the care provided to TCNs in the most challenging areas, with a particular focus on gender issues and those groups of TCNs that faced higher levels of mistrust among professionals. The handbooks and leaflets were uploaded to the [project website](#) in the national languages of the four targeted countries, and a Spanish version of both products was also printed and disseminated to service providers in Spain, using the extensive network of SSF and the contacts established during the interviews. These materials were also distributed during the Online Courses.

### *3.5. Creation and evaluation of the Online Courses on Diversity Management*

This activity aimed at upskilling service providers dealing with TCNs by expanding their knowledge of migration, diversity management, and anti-discrimination practices. The [courses](#) were held by SSF, in collaboration with UAM, and offered targeted learning material for professionals to develop competencies in dealing with cultural, religious, and linguistic diversity in their working contexts. Based on the information gathered from the Service Providers' Needs Assessment Report, the ESPS survey with conjoint experiments, the teaching expertise of SSF, and the consultation held with the other consortium partners, five relevant training courses were developed for service providers within the fields of education, employment, housing, social assistance, and healthcare.

Each course consisted of two 2-hour modules interlinked by real-life scenarios that were of daily relevance to the addressed service providers. The courses included theoretical frameworks/contents, real-life scenarios/case studies, tips, recommendations, and self-evaluation questions. The modules were supported by relevant learning material uploaded to the project website, providing trainees with self-guided online learning tools. In the specific case of education, the Online Training Course included an additional module on anti-discrimination. This module focused on both manifest and latent causes of discrimination and ways to overcome them, based on the information provided by conjoint experiments. All the online modules were conducted virtually using video conferencing platforms, and the training materials were also uploaded to the project website. At the end of the Training Course, participants received a Certificate of Attendance issued by UAM. The course was evaluated based on a user satisfaction survey and the general feedback received from the professionals. This evaluation was documented in a [Working Paper](#) assessing the efficiency of these online courses.

### **Deliverables WP3:**

- a. **Interview guide and fieldwork guidelines** for the qualitative data collection submitted on 30 May 2022 (D3.1):

Based on the literature review, 20 interview guides (one per service in each country) were developed, taking into account cross-country differences in terminology and the competencies of service providers within each field. In each country, interviews were conducted with professionals in close contact with TCNs within each service: 4 with healthcare professionals (clinicians, healthcare social workers, and administrative and support staff); 4 with personnel of the Public Employment Agencies and Orientation and Intermediation Services (including both public and private initiatives); 4 with real estate agents and social housing agents; 4 with social workers and mediators of social services; and 4 with education professionals (teachers, orientation service staff, social educators, and administrative staff).

- b. **Education Service Providers Survey (ESPS) Anonymised Dataset and Codebook** submitted on 30 June 2023 (D3.2):

The questionnaire and the choice modelling were designed by the WP3 team from December 2022 to February 2023. Based on the information gathered from the semi-structured interviews conducted with education providers and a comprehensive review of the related literature, a preliminary version of the survey and the experiment was shared with the rest of the consortium partners to get feedback on wording, question order and length. The online survey was launched with the assistance of Netquest. The UAM contracted the services of this polling service to ensure high-quality data collection, without exceeding the budget ceiling originally allocated for outsourcing. The survey distribution was carried out from March to May 2023 among 1,493 centres from the Community of Madrid. This stage was led by the UAM research team in charge of WP3 in collaboration with its partner organization SSF (*Solidaridad Sin Fronteras*) and Netquest.

For the dissemination phase, the WP3 team developed a labour-intensive and time-consuming strategy, including: (1) massive emails to the generic email addresses of educational centres sampled, 2) personal contacts with teacher acquaintances of some members of the research team as well as educators who were previously interviewed as part of the qualitative fieldwork detailed above; 3) personalised emails to teachers whose professional email addresses were available on the educational centres' websites; and 4) responses collected by Netquest thorough their associated pollster.

As previously mentioned, 670 respondents completed the whole survey and 483 respondents completed all experiment items, along with postal code, age, and gender, but not the entire survey. In short, 1153 cases were included in the dataset. The resulting dataset and codebook were submitted by the WP3 team to the European Commission together with a methodological note on the dissemination strategy developed (deliverable 3.2) by the end of July.

- c. **Interim WP Report** submitted on 29 September 2023 (D3.3):

The interim report summarized the main achievements as well as challenges and limitations faced during the reporting period January 2022 – June 2023. It also presented the future plans for the remaining period of the project.

d. **Service Providers' Needs Assessment Report** submitted on 1 March 2024 (D3.4):

[The report](#) compiled the key findings on the barriers faced by providers in the four countries when assisting TCNs. It outlined the main barriers identified by service providers who assist TCNs in accessing basic services across the 5 key policy areas analyzed in each of the 4 countries covered by the project. It further enlisted a set of initiatives implemented by professionals to mitigate or minimize obstacles to migrants' access to services, illustrating good practices that could be replicated in other EU Member States. Each country report was structured in five sections, corresponding to the 5 services analyzed. Each section contained information on (1) the characteristics of immigrant users (and their families, in the case of education); (2) providers' attitudes and prejudices towards them; (3) the organizational structure of the service and providers' main organizational requests; (4) the assistance provided to migrants during the COVID-19 pandemic; and (5) the set of initiatives implemented by providers to better care for this population. The information provided in this report was based on 97 in-depth semi-structured interviews and one focus group conducted with service providers in the four countries analyzed. The report also included some key findings from an online survey with a conjoint experiment carried out in the Community of Madrid (Spain), targeting exclusively educational providers. Out of the 97 interviews, 31 were conducted in Spain, 24 in Germany, 23 in Belgium, and 20 in Hungary. The focus group was conducted only in Spain.

e. **Diversity mini-Handbooks and Leaflets** submitted on 6 May 2024 (D3.5):

This material summarized the information on best practices included in the Report, with the purpose of informing professionals on the material resources at their disposal to enhance the assistance to TCNs. The mini-handbooks also aimed to inform policymakers and service providers about the key barriers regarding migrants' access to basic services, while sharing good practices and potential solutions on how to overcome such challenges. All deliverables are available on the [project website](#).

f. **Online Courses on Diversity Management** submitted on 30 September 2024 (D3.6):

The [online courses](#) on diversity management aimed to upskill service providers working with TCNs by expanding their knowledge of migration, diversity management, and anti-discrimination practices. These courses, organized by SSF in collaboration with UAM, offered targeted learning materials to help professionals develop competences in managing cultural, religious, and linguistic diversity in their work contexts. Five training courses were developed, plus one transversal course, for service providers in education, employment, housing, social assistance, and healthcare. The learning materials were made available online in a specific platform and linked to the AccessIN website, offering trainees self-guided learning tools. All online modules were delivered during October-November 2024, with supporting materials accessible on the project website. Also, a 2-hour virtual workshop was organized on the 4<sup>th</sup> of November 2024. All trainings and the platform were in Spanish.

The courses were disseminated by email and via social networks, starting on the 7<sup>th</sup> October 2024. SSF used the different contact lists of professional networks and institutions of which it is part or collaborates in different projects. The training platform has received a total of 979 visits up to November 28, which indicates that it has been widely disseminated, although not all of these people took the courses. 88 participants attended some of the activities of the Training Programme, out of which 65 attended the online courses and 23 participated only in the virtual workshop on 4<sup>th</sup> November, without taking the courses afterwards.

g. **Working Paper** assessing the efficiency of the online Courses on Diversity Management was initially submitted on 29 November 2024; revised and resubmitted on submitted on 2 December



2024 (D3.7):

[The paper](#) summarized the objectives of the Online Courses on Diversity Management and its dissemination process. The then outlined the result of the course evaluation. 52 participants answered the User satisfaction survey. 67% of respondents were very satisfied and 33% satisfied with the course content. 96% of respondents also rated the topics covered as extremely relevant.

### **Outputs WP3:**

- a. **Online meetings with consortium partners for the preparation of WP3 activities:** The WP team has discussed the preparatory stages of all WP activities in the regular meetings organized with consortium partners. The questionnaire design, the experimental design, and the modules of the Online Course on Diversity were discussed in several meetings with the consortium and frequent meetings were also held between WP3 partners (UAM and SSF) to ensure progress was made in accordance with the action's objectives.
- b. **Online meetings with interviewers:** One online meeting was organized with those who conducted the interviews in the four countries to establish the sequence to be followed and the code system to homogenize working methods. Regular communication was maintained via email and video calls during the data collection for specific queries that emerged.
- c. **Online meetings for the preparation of the Diversity mini-Handbooks, the Leaflets, and the Online Courses on Diversity Management:** In addition to the regular quarterly meetings between UAM and SSF, a special meeting was scheduled to discuss the design and contents of the handbooks and leaflets. Four such online meetings were specifically organized to jointly define the content of the five online courses.
- d. **Two Workshops with service providers in Spain:** The first workshop was addressed to service providers at large to inform them about the report's findings. The second was addressed to educators with the aim of showing them the biases identified by the conjoint experiments. The workshop for educators was held at the Faculty of Education of the UAM on November 21 2024 and it was attended by 8 educators from different educational levels. The Service Providers' Needs Assessment Report was presented on 4<sup>th</sup> of December 2024 to representatives of CSOs who attended the participatory spaces and groups where Solidaridad Sin Fronteras (SSF) is also a member of and other CSO within its networks. Additionally, SSF organized a session on December 19th at the Vallecas International Protection and Reception Center (CAPI) in Madrid, with some representatives from the aforementioned entities together with CAPI's staff. The profile of attendants included social workers, sociologists, psychologists, intercultural mediators, lawyers, educators, teachers and trainers.

## **Work Package 4: Migrants' Experiences in Accessing Basic Services and Tools for Improving Healthcare Provision**

Co-led by the University of Marburg, the University of Oxford and the City of Frankfurt, this Work Package focused on migrants' awareness regarding social rights and their experiences in accessing basic services. The Work Package also developed an intervention aimed to improve the access of third-country nationals to healthcare services.

### **Activities WP4:**

#### *4.1. Interview preparation and implementation*

To prepare the interviews, the WP team conducted a review of the literature on migrant service provision, focusing on barriers to accessing services (healthcare, housing, employment, education, and social

assistance) and best-practice examples that aimed to overcome these barriers. For digitized services, this included barriers in terms of infrastructure, but also awareness, skills, and attitudes (so-called 'secondary' and 'third-level' digital divides) as they were related to migrant populations in the EU. Based on this review, the team developed two interview guides: a first one to determine the experiences of migrants in accessing the basic services mentioned above and a second one targeted specifically to medical and support staff who interacted with migrant patients and to other stakeholders involved in negotiating access (e.g. social workers). To account for the heterogeneity of migrant populations and differential access to a variety of social services, the team interviewed proportionally more migrants than other service providers in each country. To reach migrant communities, the exploratory ethnography method was used to become immersed in the communities in each site and create multiple points of entry for respondent recruitment. To facilitate this, the team partnered with the local authority and CSOs involved in the consortium. Migrant respondents were compensated for their time with a gift card.

#### *4.2. Code and analyze interviews with migrants*

The interviews were first coded based on respondents' socio-economic characteristics, their migration status, their current living conditions in the host country, and their interactions with services, with particular focus also on experience with and attitudes toward digital service provision. The interviews with other stakeholders followed a first round of coding based on two sections: their socio-professional situation (their profession, the length of time in the same job, etc.) and their role in interacting with migrant patients. This resulted in two datasets that were initially coded in preparation for further analysis. Building on this, the team conducted a second round of coding to determine: 1) knowledge about and challenges in accessing services in general or reasons for avoiding accessing the services mentioned above; 2) migrants' experiences in accessing healthcare in particular; and 3) medical professionals' challenges serving migrant patients. Interviews were then analyzed to identify: a) which social rights migrants used in the host countries; b) how they perceived their access to these rights and services; c) the modalities by which they made use of these services; d) their attitudes, skills, and infrastructure for accessing digitized services; e) how the specific experiences of TCNs with healthcare providers unfolded; f) the perceptions of medical professionals in their experiences with migrant patients; and g) recommendations and challenges flagged by medical professionals. This analysis also considered how linguistic and cultural barriers were perceived and overcome in the process. It also took special consideration gender aspects (as well as religion and other relevant characteristics) and looked in particular at the cases of healthcare for migrant women and victims of gender-based violence. The WP team wrote a report per country summarizing how migrants accessed basic services and how they perceived linguistic and cultural barriers. The reports were made available in Open Access on the project website. This determined the best practices to alleviate barriers.

#### *4.3. Implement two training module pilots for medical and support staff*

This WP implemented two training modules based on cultural adaptations of evidence-based interventions (Fenning 2020). There was growing evidence that services initially designed for patients from majority groups were ill-adapted to fulfill the needs of an increasingly diverse population (Aggarwal et al. 2014), with migrants also being at higher risk of general distress compared to the general population (Priebe et al., 2016). The training modules aimed at improving the cultural competences of healthcare workers and support staff (such as social workers in healthcare settings) and provided tools for accommodating the challenges faced by migrant patients. This addressed the issues raised during the interviews or uncovered in the WP3 quantitative data analysis. The aim of these modules was to: 1) sensitize medical students, healthcare workers, and relevant support staff to the unique challenges faced by these populations in using in-person and telehealth services as well as accessing public health information; 2) provide best practices in alleviating these challenges; and 3) familiarize migrants with social services and provide tools for them to facilitate communication when accessing specific services.

The training modules were developed and implemented in partnership with the city of Frankfurt and the medical faculty at the Philipps University of Marburg. Two main target audiences were identified for

the pilot training modules: (1) Medical students who were enrolled at the Philipps University Marburg at the time of the pilot and (2) health guides (i.e. Gesundheitslotsen) for the Public Health Office of Frankfurt City (Gesundheitsamt Frankfurt). Both modules were deployed in Germany as a pilot and were evaluated in terms of their usefulness within these contexts, as well as their potential applicability in other countries and settings. The workshop for health guides (7 health guides attended) took place on the 8th of June 2024 in Frankfurt, whereas the one with the medical students took place on the 25th of June 2024 in Marburg (11 medical students attended).

The short training module for medical students was offered as an elective workshop of the curriculum at Marburg University. It was designed to complement the main curriculum and was scheduled depending on students' availability to maximize enrolment. It provided an overview of inequalities within healthcare systems, the ways in which these inequalities are normalized in medical practice, the extent to which current medical training covers these, and the limits of this coverage. Based on the literature on social determinants of health and the intersectional vulnerabilities of migrants, each workshop engaged both medical students and health guides to consider the ways in which discrimination occurs systemically (i.e., beyond individual prejudice). Practical examples were then discussed. Drawing on current studies, different forms of bias were highlighted before possible solutions were discussed with participants. The workshops used an engaging format which combined short inputs with interactive discussion and group work.

#### *4.4. Evaluate the pilot and facilitate replication*

Both training workshops were evaluated, via a questionnaire and oral responses, for their perceived impact and participant satisfaction, and to identify recommendations for future cultural competence training initiatives. The questionnaire included both open-ended and closed questions. Data on the satisfaction of participants was collected before and after the workshop. The pre-workshop data asked participants about their expectations of the training events, whereas the post-workshop one was collected through a paper questionnaire. Regarding the latter, the overall satisfaction score amongst medical students ranged from 4.09 to 4.91 (on a scale from 1 to 5), thus indicating high satisfaction. The average satisfaction scores also ranked high among health guides (from 4.33 to 4.83). The open-ended feedback from medical students emphasized the importance of discussions on discrimination and racism, with many expressing that these topics are not sufficiently covered in their formal education. Among health guides, the exchange of personal experiences and practical advice was frequently mentioned as the most valuable aspect.

Participants also suggested increasing the interactive elements of workshops, extending their duration for greater depth, and incorporating these themes more prominently into general medical curricula - an especially relevant consideration given the growing importance of cultural competence in the German society. Given the high workloads in medical settings, integrating training on cultural competences into regular working hours may be a viable approach to improve migrant health outcomes and relationships with institutions, but also foster broader societal benefits.

#### *4.5: Migrant-specific Competence Development for Health Workers*

As a final activity concluding this WP, Menedék developed a comprehensive two-day pilot workshop designed to equip health workers with the necessary skills, knowledge, and intercultural competences to effectively serve migrant populations in Hungary. Based on the project results (especially WP3 and WP4), this action had three key modules: 1. Migration and Healthcare; 2. Enhancing Collaboration between Health Workers and Social Workers; 3. Developing Intercultural Competences. A key focus of the workshop was on helping participants reflect on their professional identity and self-awareness. By exploring their own motivations, weaknesses, and personal development, participants learned how their attitudes and behaviors influenced their interactions with migrant patients. This self-reflection process helped health workers cultivate a helping attitude that was sensitive to cultural differences, ultimately improving the doctor-patient relationship and fostering trust in healthcare environments.

## Deliverables WP4:

- a. Interview guide and fieldwork guidelines** for the qualitative data collection submitted on 8 August 2022 (D4.1):

Two separate interview guides were developed, as planned, for healthcare professionals and migrants. To facilitate use of the migrant interviews by WP3, the WP4 migrant interview guide was modified to include questions on services in addition to healthcare. To ensure consistent data management, WP4 determined a file naming convention, and deployed a collaborative online spreadsheet used for tracking interview progress between the WP teams. This spreadsheet was regularly updated.

In total, 224 interviews were successfully conducted specifically for WP4 or jointly with WP3 (the joint interviews concerned healthcare professionals). This includes a total of 56 interviews with healthcare professionals (17 in Spain, 14 in Germany, 11 in Belgium, 14 in Hungary) and 168 with TCN migrants (48 in Spain, 39 in Germany, 41 in Belgium, and 40 in Hungary). Some interviews included multiple participants. Interviews required substantial community immersion in each site and snowball sampling, establishing trust within migrant communities, and navigating the institutional networks of the four countries.

- b. Four country reports** with preliminary results of qualitative fieldwork assessing barriers to services submitted on 30 November 2023 (D4.2):

The [4 country reports](#) outlined the qualitative findings of the fieldwork conducted both with service providers and migrants. They described the main challenges identified by service providers when serving migrants and by migrants when accessing services. They also provide recommendations both from service providers and migrants.

The results provided in this report were based on semi-structured interviews with migrants and service providers. In Germany, a total of 14 healthcare professionals were interviewed, 11 from the city of Frankfurt, one from Offenbach and two from a smaller city in Hessen. A total of 40 interviews with migrants were completed in Germany. In Spain, a total of 12 interviews were conducted with health care providers and 48 interviews were conducted with migrants. In Hungary, a total of 14 interviews were conducted with healthcare providers, and 40 interviews were conducted with migrants. In Belgium, a total of 12 healthcare professionals and 41 migrants were interviewed.

- c. Interim WP Report** submitted on 30 June 2023 (D4.4):

The report outlined the main activities and challenges of WP4 during the first half of the AccessIN project (January 2022-June 2023). It also included details on future planning of WP4 actions for the remainder of the project.

- d. Dataset** for anonymized interviews, not public submitted on 30 August 2023 (D4.4):

The dataset contains the transcripts of all the interviews conducted in each of the four countries with migrants and healthcare workers.

- e. Working Paper on the role of interactions between medical staff and migrant patients** in determining access to services submitted on 5 August 2024 (D4.5):

This [working paper](#) explored access and provision of healthcare to non-EU migrants through the narratives of medical staff and migrant patients. Access, non-access, and quality of provision can be conceptualized through a border studies framework. Border studies have shifted to recognize that borders are not only formal national boundaries but also internal, enacted through various actors and institutional procedures, especially at the local level. In healthcare, this means access is shaped by multiple, sometimes conflicting, governance levels and actors, with migrants facing both formal regulations and

social barriers imposed by individuals and organizations. To explore this healthcare border, this working paper examined the narratives of healthcare workers and non-EU migrants across cities in Belgium and Germany, two key migrant receiving countries, within which interviews were conducted as part of the AccessIN project. The narratives of migrants and healthcare providers shared by our interviewees reveal a persistent dichotomy between the inclusive principles of healthcare treaties and the practical outcomes of healthcare infrastructure on the ground. Healthcare providers, on the other hand, grapple with the limitations of political will, mainstream training, and resources. This study highlights the need for deeper investigation of the healthcare landscape from the ground-up, so as to ensure equitable and inclusive healthcare access and provision.

**f. Working Paper on the development of the training module for medical staff** submitted on 29 of November (D4.6):

Based on the existing literature on cultural competence and migrant health, as well as findings from the interviews with third-country national and healthcare professionals in Germany, the WP team developed, deployed, and assessed a pilot workshop program aiming to increase the cultural competency of current and future healthcare professionals. The evaluations from the workshop program indicated that participants found significant value in the content and activities of the workshop, and that they felt that the workshops met their needs and expectations. [The working paper](#) explained the development of the pilot program: first, by discussing the context of migrant access to the German healthcare system and the need for cultural competency that this pilot program addressed; second, by presenting the development and evaluation of the pilot program; and, finally, by providing recommendations and conclusions.

**g. Policy Report and Best Practices** including practical measures to facilitate TCNs' awareness and use of services and guidelines for deploying training modules across sectors submitted on 30 January 2025 (D4.7):

Drawing on the results of the qualitative fieldwork and the training modules, this Policy Report presents 8 key policy recommendations for improving healthcare access of TCNs in Germany. These recommendations are related to the reduction of the linguistic barriers that migrants face in accessing healthcare; the promotion of cultural competences of healthcare workers; the development of cultural mediation by integrating such mediators in the healthcare system; the preparation of medical staff for the migrants' healthcare needs by training healthcare on the intersectional challenges that impact migrants; the reduction of discrimination by training the medical staff; the reduction of bureaucratic obstacles; the promotion of migrants' mental health and facilitate their access in such services; the promotion of collaboration and coordination between municipalities, hospitals and clinics, and migrant-supporting organization to facilitate migrants' access to healthcare.

#### **Outputs WP4:**

- a. **Online meetings with consortium partners for preparation of WP4 activities:** Online meetings were organized with consortium partners to consult them in the preparatory stage of WP4 activities. These were complemented by regular meetings organized between WP4 partners to ensure progress in accordance with the action's objectives.
- b. **WP4 internal meetings to prepare the interview guide and the logistics of the intervention:** In addition to the regular WP4 meetings, special meetings were set up to prepare the work to conduct interviews, design the interview guide, and prepare the logistics for the intervention.
- c. **Evaluation meeting:** In addition to the regular WP4 meetings, the WP4 team discussed with the other consortium partners the evaluation of the intervention during the regular meetings of the project teams.



- d. **Migrant-Specific Competence Development for Health Workers:** A two-day pilot workshop was organized to equip health workers with the necessary skills, knowledge, and intercultural competences to effectively serve migrant populations in Hungary. The workshop took place between 22 and 23 of November 2024 in Leányfalu (a riverside village in the Budapest metropolitan area). A location outside Budapest was chosen as such location provided a peaceful environment conducive to reflection, relaxation, and introspection, allowing participants to step away from the demands of their daily work. The workshop was attended by 9 participants and was guided by 2 trainers. Participants delved into key concepts related to migration, its sociological and legal frameworks, and the unique challenges faced by migrants, especially in health contexts.

## **Work Package 5: Strengthening the Role of CSOs in Fostering Migrants' Access to Basic Services**

Led by Menedék, this Work Package focused on the role of civil society organizations (CSOs) in migrants' access to basic services. It developed different tools and activities aiming to foster CSOs' capacity to undertake their tasks more effectively, while also providing a forum for networking and information exchange between CSOs, both nationally and transnationally.

### **Activities WP5:**

#### *5.1. Mapping of CSOs with capacity of facilitating TCNs' access to services*

This WP started with a thorough mapping of the CSOs that were relevant actors in facilitating access of TCNs to basic services in the targeted countries. When identifying relevant CSOs, the following working definitions were used: 1) mainstream service provider or advocacy CSOs that had a relevant section (working division) specialized in TCNs; 2) CSOs with a general (sectoral) mandate that had a significant (50% or more) share of TCNs in their staff and/or membership; 3) CSOs that were explicitly community-based (i.e., it was evident from their name, statutes, and activities that they were immigrant associations or organizations). The mapping exercise was conducted based on different sources, including previous research findings, official registers, and registers (networks) of project partners and other stakeholders working with TCNs. The mapping was discussed with the consortium partners and focused on collecting the main administrative data and a short description of each CSO, which was compiled into a database used solely for the purpose of this project. The list of CSOs identified in each country also fed into the "Know your Rights" Q&A Brochures prepared in WP2, which informed migrants about civil society organisations that could assist them in accessing their social rights in each country.

#### *5.2. Thematic Roundtables with CSOs*

With the aim of involving key stakeholders in the early stages of AccessIN, Menedék organized a series of thematic roundtable discussions with the participation of CSO representatives in Hungary. The aim of these discussions was twofold: 1) to validate the concept and focus of other activities in this WP; 2) to better understand CSOs' engagement in migrant social inclusion and serve as models for future CSO consultations, once the project's results became available and ready to be used. Five discussions were conducted, focusing on the different areas/sectors of basic services to TCNs that were transversally analyzed in the project

#### *5.3. Transnational Networking Workshops*

Given that local practices and experiences are relevant and inspiring for similar organisations active in other European countries, we organised five [transnational networking workshops](#) between CSOs facilitating TCNs' access to basic services. Each meeting was thematic, with the exact topic and focus, and consequently the characteristics of the participant CSOs, determined based on the outcomes of previous project activities—specifically, the local roundtable discussions. The aim of these workshops was to further foster transnational exchange on how CSOs could proactively support TCNs' social

inclusion in different areas, while also enabling a better understanding of common challenges and ways to overcome them through best practices diffusion and peer learning. They were evaluated based on the number of participants and their feedback.

#### *5.4. A CSO Fair*

Besides strengthening the networking capacity of local CSOs both locally and transnationally, it was equally important to enhance their bridging role between the communities they served/represented and the public actors providing basic services. To pilot a potential tool for this, Menedék organised a [CSO Fair in Budapest](#) with the participation of local CSOs, where all the relevant parties could meet and interact with each other. The Fair also involved service providers and the activity was evaluated based on the number of attendees and the feedback they provided.

#### *5.5. Local Capacity-Building Training for CSOs*

Based on the project's results, Menedék developed training modules and held a training session for CSO representatives, whose feedback informed the evaluation of this activity. The training was a pilot, including a comprehensive evaluation element to gather detailed feedback on its relevance and areas for potential development.

#### *5.6. Toolkit for CSOs*

Upon consultation with the consortium partners, Menedék developed an [online Toolkit](#) to serve as a practical aid for CSOs facilitating TCNs' access to basic services. The Toolkit included findings and lessons learned from other WPs. The material from the capacity-building trainings became an integral part of the Toolkit, which was compiled as an online self-learning tool hosted by Menedék. It was actively disseminated within the network of CSOs established in the project and the national networks of the NGO partners. The Toolkit was evaluated based on the number of downloads and feedback received from civil society organisations.

### **Deliverables WP5:**

a. **CSO Mapping Register** submitted on 25 May 2022 (D5.1):

After elaborating a conceptual framework defining the CSOs active in the field of migrants' social inclusion, a mapping register was elaborated. The latter included the main administrative data and a short description of each CSO. For this, Menedék prepared a Google Form where the data could be stored. Besides the organisations that were active on the local and metropolitan level, those at the national level were also included if their activity seemed particularly relevant to the further development (i.e. interviews, transnational networking workshops, etc.) of the AccessIN project.

b. **Minutes of Thematic Roundtable discussions** were initially submitted on 31 January 2023; revised and resubmitted on 13 July 2023 (D5.2)

Detailed minutes of thematic roundtables have been produced after each roundtable which include participants, summaries of the presentations and the exercises undertaken.

c. **Interim WP Report** submitted on 30 June 2023 (D5.3):

The report outlined the main activities and challenges of WP5 during the first half of the AccessIN project (January 2022- June 2023), while also mentioning the future planning of WP5 actions for the remainder of the project.

- d. **Minutes/recordings of Transnational Networking Workshops** submitted on 29 March 2024 (D5.4)

Detailed minutes of each workshop were produced, including a list of participants, summaries of the keynote presentation and a summary of the discussions.

- e. **Capacity Building Training manuals** submitted on 29 August 2024 (D5.5):

[This Manual](#) summarised the training exercises carried out at the Capacity Building Workshop organised by Menedék in June 2024 and provided guidance for other staff of CSOs and grassroots initiatives that support different groups of migrants. For the two-day event, Menedék developed six Modules aiming at strengthening the capacity of participating organisations through organisational development, communication and fundraising strategies to better assist third-country nationals to access services and to communicate effectively on migrants' rights and eligibility criteria for accessing services. The training manual was produced in both English and Hungarian.

- f. **Capacity Building Toolkit for CSOs** submitted on 20 December 2024 (D5.6):

[This document](#) was designed as a practical resource for CSO staff and members of grassroots initiatives working with third-country nationals. It aimed at strengthening the capacity of these organizations by focusing on organizational development, communication, and fundraising strategies. It included findings and lessons learned from other Work Packages, especially WP2 and WP3, and besides the primer audience, it provides aid to volunteers and representatives of migrant communities as well. The Toolkit is an online self-learning resource available on the Menedék website, with content in both Hungarian and English. It is structured into two distinct modules for better organization. Module 1, titled Organizational Objectives and Development Strategies, consists of nine sub-sections. Within this module, users can access practical exercises designed to support the development of CSOs across various areas. These exercises are derived from the two-day pilot capacity-building trainings held in Budapest in June, as well as the Capacity Building Training Manual (D5.5).

## **Outputs WP5:**

- a. **Online meetings with consortium partners for preparation and coordination of WP5 activities:** Several online meetings were organised with different consortium partners to discuss and decide the methodology of the various activities and to follow up on the implementation of WP5.
- b. **Thematic Roundtables Discussions:** Five Thematic Roundtables were organised in Hungary with the participation of CSO representatives.

On the 19<sup>th</sup> of October 2022, Menedék inaugurated the series of roundtables on knowledge-sharing and development, which aimed at sharing practical knowledge between CSOs offering assistance and integration activities to foreigners in Hungary. This [first roundtable](#) focused on the thematic of migrants' access to employment and was attended by 9 participants.

The [second roundtable](#) was held on the 9<sup>th</sup> of November 2022. 7 participants attended the event during which CSOs exchanged on the topic of migrants' healthcare in Hungary.

The [third roundtable](#) was held on the 23<sup>rd</sup> of November 2022 and was attended by 7 participants. The thematic focus was on migrants' access to housing.

The [fourth roundtable](#) was organized on the 7<sup>th</sup> of December 2022 and was attended by 7 participants. It included exchanges on the topic of education and in particular the rights and obligations of migrant students, the developments that have been made in the education system, and what opportunities exist for children fleeing from Ukraine.

The [fifth and last roundtable](#) took place on the 18<sup>th</sup> of January 2023 and was also attended by 7 participants. It provided a space for discussion and exchanges regarding social services and, in particular, the issue of cultural and intercultural differences and relationships that arise when helping



migrants. Also, the roundtable focused on the role of intercultural mediators in supporting the assistant-client relationship.

- c. **Transnational Networking Workshops:** Five [Transnational Networking Workshops](#) were organised with the participation CSOs. Throughout 2023, Menedék organised a series of five Transnational Networking Workshops between CSOs facilitating TCNs' access to basic services, aimed to further foster transnational exchange in how CSOs can pro-actively support TCNs' social inclusion in different areas, while also allowing to better understand common challenges and ways to overcome such challenges based on best practices diffusion and peer learning. The first workshop, took place on May 25 2023 (14:00-16:00 CEST) and focused on the topic of "Preventing labour exploitation of immigrants on a local level". Jan Knockaert, Chair of PICUM and Director of FAIRWORK Belgium were invited as speakers. The workshop gathered 9 CSOs representatives from Hungary, Spain, Germany and Belgium.  
The second workshop was held on September 21 2023 (14:00-16:00 CEST) and focused on "Challenges in mental health care for immigrants and refugees". Purebl György, Psychiatrist was invited to present his work and the workshop gathered 16 CSOs representatives from Hungary, Spain, Germany and Belgium.  
The third workshop took place on October 16 2023 (14:00-16:00 CEST) where Kristýna Andrlova, Human rights lawyer & Head of the Municipal Rental Agency in Prague presented on the topic of "Tackling migrant homelessness: Best practice from Central Europe". The workshop gathered 10 CSOs representatives from Hungary, Spain, Germany and Belgium.  
The fourth workshop took place on November 10 2023 (14:00-16:00 CEST) and was entitiled "Addressing intercultural barriers in the education of refugee and migrant children". To discuss this issue, guest speaker Dorka Brozik, Educator, was invited to share her experience.  
The workshop gathered 10 CSOs representatives from Hungary, Spain, Germany and Belgium. The workshop gathered 8 CSOs representatives from Hungary, Spain, Germany and Belgium.  
The fifth **workshop** was held on February 15 2024, (14:00-16:00 CE) and explored "Essential aspects of local integration and inclusion projects for migrants" with guest speaker Alexander Wolffhardt, Deputy director of the Migration Policy Group. The workshop gathered 9 CSOs representatives from Hungary, Spain, Germany and Belgium.
- d. **CSO Fair in Budapest:** A [CSO Fair](#) was organised in February 2024 in Budapest, where CSOs could communicate their services and activities to public agencies providing basic services as well as migrants. The event aimed at fostering dialogue and collaboration among various groups, organizations, and communities in Budapest representing foreigners living in Hungary. The event drew over 150 attendees. Ten groups, organizations, and communities from Budapest, formally or informally representing foreigners residing in Hungary, participated in the fair. These entities were actively involved in missions centered around cultural value creation and community engagement.
- e. **Capacity Building Training for CSOs:** [A training](#) (2 full days) was organised in Hungary by Menedék. Part of the curriculum was developed based on the general results of the WP activities, and part of it was based on local needs and opportunities identified during the WP implementation. The event was attended by CSO staff members, volunteers, and representatives of migrant communities who provide support to foreigners living in Hungary. During the event, Menedék staff gave engaging presentations on topics such as communication strategies, effective cooperation conditions, the stages of successful project implementation, and migrant-related legislation. Participants took part in interactive exercises, gaining insights into effective fundraising strategies. Beyond the workshop, there were fantastic opportunities for networking and building professional communities.