

## **GIVE KIDS A CHANCE PROGRAMME: RESULTS AND CHALLENGES<sup>1</sup>**

### **Abstract**

According to a long-term national strategy, children's chances complex programmes are implemented in 23 underdeveloped subregions of Hungary. Our paper aims to present the spirit and structure of the programme, analyze its achieved results, and address some future challenges. Data sources of our study are: national and subregional statistical data, project documentation, online monitoring system, and interviews with those working in the field. In the first phase we have created four program element sub-clusters on the basis of what needs they intend to focus on: biological and health; educational and cognitive; social and emotional; recreational needs. The second research phase deals with how the individual programme elements accomplished their intended goals of fulfilling unmet needs. According to our results, children's chance is a well-targeted project since it reached a wide range of children and disadvantaged children are overrepresented among them. Involvement in different programme elements reflecting on first three development needs is quite balanced. However, the complex programme still faces a number of challenges such as (1) deficiencies in child-oriented strategic planning, (2) not handling the shortage of specialists perfectly, (3) quality of existing services improved only partially, and (4) unsustainable results due to the scarcity of local resources and weakness of civil society.

**Keywords:** child poverty, spatial inequality, inequality of access, poverty eradication, programme evaluation

### **Introduction**

Child poverty is a multi-dimensional phenomenon that comprises not only poverty of income, but also includes a deprivation of material goods, poor housing conditions, unequal access to high-quality education as well as to social, health care and other services. The situation of children in Hungary has been found unfavorable in many aspects. The poverty rate among child population is 26 %, being one and a half times as high as the country's average. [TÁRKI 2013]. Having children is a serious risk factor of poverty for families. If in addition to income

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poverty other dimensions such as market position of the parents and material deprivation are also taken into account, 52 % of the children are at risk of poverty or social exclusion [TÁRKI 2013]. Child poverty is rather concentrated to the most disadvantaged subregions: not only the number of people living in income poverty is higher, but also the accumulation of disadvantages is more frequent in these regions than in the more prosperous areas of the country. According to a survey conducted by us the number of children living in poverty is twice, while the number of those suffering from poverty or social exclusion is 1.3 as high as the country's average.

After having realized the need of reducing child poverty and promoting equal opportunities for children, the Hungarian parliament unanimously approved the “Making Things Better for our Children!” National Strategy that determined the main areas where intervention was needed to improve children's situation. During the implementation of this strategy, a series of beneficial actions have been taken, notably: Sure Start children's houses have been set up to support development in early childhood, training centres, several mainstreaming programmes as well as scholarships have been founded, moreover, in 23 multiple-deprived subregions complex children's chance programmes have been established to improve chances of disadvantaged children. The purpose of such programmes has been to reduce regional disadvantage by primarily focusing on providing services missing so far as well as enhancing quality and accessibility of the existing services.

In our study we describe and evaluate the experiences obtained in the complex children's chance programmes, highlighting how these programmes have managed to achieve their goals in the improvement of children's situation during their 4 years of existence.

### **A summary of complex children's chance programmes established in subregions**

These tender-based programmes co-funded by the European Union in 23 multiple disadvantaged subregions aim at introducing services that meet local needs and developing and modernizing existing services in order to help improve living conditions for children and evolve their abilities and skills. High-priority concerns of the programme are the services provided for children in their early childhood (0 to 5 years), inter-professional institutional cooperation, and long-term strategic planning. The term of the tender is 2 or 3 years during which implementers should assess local needs, then based on the needs elaborate the strategy of children's chance programmes at the level of each subregion, and finally start

implementing the strategy by launching or developing the necessary services. To fund all these tasks, a budget of 450-600 million HUF (1.5-2 million Euro) is available for each subregion.

Another unique feature of the programme is the related mentoring project which helps activity of subregion implementers by organizing trainings, employing advisers and supporting processes locally. This mentoring project is operated by the consortium of a governmental background institution, a long-standing civil organization and an academic research institute.

Despite subregions participating in the programme being so different in certain aspects (e.g. number of settlements, population, settlement patterns, distance from the capital), they face fairly similar problems. These are lagging regions whose current situation is chiefly determined by the heritage of the times before the political transition. Part of the inhabitants had been employed by large or medium-sized industrial state companies, others by local agricultural cooperatives whose closing down led to a drastic reduction of employment. As a consequence of unemployment persisting ever since, regular income of the families consists primarily of welfare transfers.

Nearly 150 thousand of 0 to 17 year-old children live altogether in the 23 subregions (Hungarian Central Statistical Office, TSTAR database 2012). A great majority of them fails to access high-quality services: smaller settlements lack nurseries, kindergartens, or even schools, health care institutions, moreover, the pediatrician's duties are often accomplished by general practitioners. Settlements in subregions are also afflicted by a serious shortage of specialist staff: almost all settlements lack developmental teachers, special education teachers, physiotherapists, child psychologists, school social workers. Health visitors as well as workers of family support and child welfare services are overloaded, a high number of positions remain vacant, and an excessive number of children are cared by each of the specialists. The towns (each of them being small towns with a few tens of thousands inhabitants) have somewhat higher levels of services, but travelling to these towns proves troublesome and expensive for families living in villages. Differences in the sizes of settlements are mirrored in the levels of services available: for example quality of education in village schools is often far behind that in schools of towns, which is again beyond that in schools of cities. As a result of these conditions, children living in these regions suffer disadvantages that seriously impact their healthy development and their ability to reach their full potential. These are the disadvantages which the complex children's chance programme seeks to alleviate.

## **Main questions and methodology**

The two below posed questions were investigated with a combination of methods.

(1) How the individual programme elements accomplished their intended goals of fulfilling unmet needs?

(2) What challenges of programme implementation can be identified?

To answer the first question (1) document analysis was conducted analyzing the feasibility plans created in the initial, planning stage of the complex programme. After the needs and responses were compiled the reach of the programme was evaluated through data gathered from the programme's online monitoring system available for 15 subregions so far.

Identification of the main challenges (2) was based on document analysis of progress evaluation reports as well as semi-structured interviews conducted with professionals of the programme working in the field.

## **Programme elements in response to needs registered in the subregions**

The spirit of the program acknowledges that child poverty reduction cannot happen without intervention and eradication of poverty among families in impoverished regions, but also highlights the notion that child poverty is unique in the sense that the needs that are unmet at a certain moment of a child's life cannot be fully and without consequences substituted later. Thus the myriad of program elements included in the action plans of specific subregions cater to the needs of both children and adults living in poor families in these highly impoverished parts of Hungary. This aforementioned spirit recognizes that the needs of parents and children are not fully independent, but intertwined in the well-being of the family unit.

Via document analysis we have identified two main resolution categories according to the target audience of the program element: children and adults. After characterizing each element as such, we have created sub-clusters on the basis of what needs and lackings they intend to focus on. These categories were created based on literature about specific child developmental needs, also focusing on the knowledge gained from empirical studies conducted in highly impoverished and severely underdeveloped regions. Some elements of the programme reach the target audience indirectly, through the networks of professionals, where their working together fosters experiences and good-practices which indirectly serve the well-being of families in these subregions.

### *1. Programme elements directly aiming at families*

Our categorization divides developmental needs of children and adults into four main categories as follows:

(a) biological and health needs;(b) educational and cognitive needs;(c) social and emotional needs;(d) recreational needs

#### *(a) Biological and health needs*

Based on the statistics presented in the Subregion monitors those subregions included in the programme are all hindered with the lack of medical services as well as medical professionals, and this problem is often even more appearance when it comes to child healthcare services. Studies have shown [Csite & Németh 2007] that the poor have unequal access to the benefits of the medical system and the prevalence of certain health problems is higher amongst them. The consequences of not detecting illnesses at the appropriate time are especially problematic when it comes to the condition of children [Spencer 2010]. When some developmental malfunctions and problems are detected too late they cannot be treated. These undiagnosed illnesses can impact the well-being of children throughout their entire life course.

For these reasons our program places a strong emphasis on not only curing of illnesses through commissioning medical professionals to practice in the impoverished subregions (usually in the form of traveling from one settlement to the next), but also an early detection of those developmental issues specific to children. Screening for both cognitive and physical problems at an early age makes it possible for these children to be directed to professionals who can further examine them and provide proper care. The program also invests in the correction of these developmental issues through commissioning a number of professionals dealing with physical and cognitive development, such as child psychologists, developmental therapist and speech therapist.

A number of subregions have implemented drug prevention programs in order to tackle the prevalence of drug and alcohol abuse amongst children early on, while these problems tend to affect poverty stricken families greater [Subregional needs assessments 2011-2014].

#### *(b) Educational and cognitive needs*

The results of nationwide competence testing have revealed that impoverished subregions scored lower in both language and mathematics skills. This great problem combined with the fact of high number of adolescents dropping out of school early is at the core of the program's purpose. Data from research is conducted in the 23 impoverished regions show that the grade point average of students is quite low in many students fail at least once to other academic career. [Subregional needs assessments 2011-2014]

Since the number of preschools and admitted children is particularly low in Hungary from other EU countries one of the most influential program elements is to substitute preschool type socialization with Sure Start child houses. In these facilities the children and mothers participate in activity together, benefiting them both. The houses are not only a venue for socialization of children, but also a place for the parents to get assistance from professionals to develop certain parental skills. Another cluster of the services focuses on catching the students up with their peers were not doing so well. The program employs professionals to help students with tutoring them to achieve better marks and have a lower proportion of students who are left behind at the end of the year.

Statistics show that the number of children attending higher education in these regions is quite low [Subregion monitors 2009-2012]. To help children assess their opportunities in education and employment market most subregions have adapted program elements with the focus of career orientation. This type of program elements may take different forms, from simple lectures to visiting those companies in the region that may be a place of future employment.

To complement these elements addressing children, the educational and cognitive needs of adults are also catered to by the program. Subregions offer training in local production, to help parents with the skills necessary to acquire some income. These program elements are especially important to follow through 23 subregions are inflicted with high unemployment rates [Subregion monitors 2009-2012] and job opportunities are quite scarce in numbers. In addition to the high unemployment many families have also accumulated debts, which they often do not know how to repay. To help with these family crises the program offers debt counseling and lifestyle trainings. These latter can be together with the children.

### *c. Social and emotional needs*

Growing up in poverty-stricken environment has severe psychological and social consequences [Kozma 2003]. Children growing up in poor households often live in

environments with few positive stimuli is often quoted during research is conducted in 23 subregions [Subregional needs assessments 2011-2014]. Isolation is one of the negative social consequences and in those regions where children do not have a place to conduct social activities they are more likely to engage in non-constructive and disruptive social activities. This type of isolation can become especially problematic in segregated areas. To face these challenges and catered to the social needs of children and adults the program focuses on the operation of community houses and community spaces in all subregions. These establishments go beyond providing a mere place of recreation, it is a venue for educational and community building activities as well as serving as a place where children can eat together for parents can use the facilities they otherwise lack (such as providing access to a washing machine). To deal with social problems in educational institutions the program has employed a number of preschool and school social workers.

In 21st century the Internet has become a part of everyday life and is as much a social tool as it is an educational one [Darvas & Tausz 2003]. For this reason we have categorized the IT-points as program elements catering to social and emotional needs.

#### *d. Recreation*

According to the literature spending useful recreational time has a positive effect on child identity development [Duerden et al. 2012]. According to the Subregion monitors and interviews there is little to none opportunities for child recreation in these impoverished areas. To compensate this lacking a myriad of program elements have been developed, some serving merely as recreation, while others taking on more complex role towards development such as summer day care. Recreational events include summer camps, sporting events and family days. During these the children not only get to participate in activities they normally do not have access to, but also acquire useful information on certain issues such as health preservation.

#### *2. Programme elements indirectly aiming at families*

There are some particular – and obligatory – program elements indirectly aiming at families and targeting professionals. These are for instance supervisions, trainings, workshops, conferences maintaining development of professional and personal skills and preventing burnout syndrome. Some of these program components are provided by the mentoring project.

Fostering child-oriented and problem-focused inter-professional cooperation is a core element of all subregion projects. This cooperation has both in-region and out-region variants. These cooperative *in-region* networks officially exist in all areas concerned professionals have teamwork and case discussions, all of them documented in written reports. According to our field experience and interviews conducted, regularity, intensity, and consequence of these cooperations can be questioned. In contrast, one aspect of *out-region* cooperation seems to be almost a success story. Local project teams organize mutual field visits between each other. Especially early (first round or second round) project implementer subregions are favored destinations. These visits are excellent opportunities for experience exchange, sharing good practices, administrative/professional problems and their possible solutions.

Embedding subregion projects in the local community (nonprofit organizations, churches) is a declared goal of the programme. In impoverished regions, the density of nonprofit organizations is considerably lower than the national average. Whilst in Hungary 12 nonprofit organizations are registered per one thousand inhabitants; in our 15 and 23 subregions this number is only 7 (Hungarian Central Statistical Office, 2012; Appendix 2). The number of registered child-oriented organizations is much less. According to both Subregion monitors data and interviews conducted, activity of registered civil organizations and churches is also deficient in our subregions. They lack resources and cooperative potential to contribute to sustainability of the programme.

### **Targeting of the complex children's chance programme**

One essential indicator of effectiveness of children's chance program would be the proportion of children reached by it. Special attention is paid to disadvantaged children. In Hungary, disadvantaged children are eligible for both monetary and in-kind benefits. According to Act XXXI of 1997 regular child protection allowance – as a monetary subvention - is entitled to children living under a threshold per capita income<sup>2</sup>. Based on Act XXVII of 2013, disadvantaged children (Hungarian abbreviation: “HH”) are those who are eligible for regular child protection allowance and they are raised by unemployed or low degree parent(s), or they live in a segregated/low comfort environment. Multiple disadvantaged (“HHH”) children are those who meet two of the above criteria.

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<sup>2</sup> The actual per capita income threshold is 140% (39.900 HUF or 128 EUR in 2014) or – in some particular cases - 130% (37.050 HUF or 119 EUR in 2014) of the pension minimum.



In Hungary, 17% of the population belongs to the group of 0-17 years. In our 23 underdeveloped subregions the population is younger: the same proportion is 21% (Table 1). According to data derived from the online monitoring system of the program, in 15 subregions more than one-third (37%) of children was involved in one or more program elements. Altogether this means 34.498 children under 18 years (and 12.792 persons above 18). This result predicts high effectiveness of the program. Majority (53%) of them are 6-13 year-old, quarter of them (27%) belong to the children of 14-17 years, 13% to 3-5 years, and 8% to 0-2 years.

*Table 1 Comparative characteristics of children in 15 Give Kids a Chance subregions*

<b>Children</b>	<b>Number/ Percentage</b>	<b>Hungary</b>	<b>23 subregions</b>	<b>15 subregions with on-line monitoring system</b>
Population of 0-17 years	N	1 755 930	146 412	93 338
	% (compared to permanent population)	17,4	20,7	20,7
Children entitled to regular child protection allowance (including population above 17 years)	N	572 184	104 189	66 258
	% (compared to child population)	32,6	71,2	71,0
Children (0-17 years) INVOLVED in the programme	N	-	-	34 498
	% (compared to child population)	-	-	37
Children (0-17 years) INVOLVED with disadvantaged status (HH or HHH)	N	-	-	22 995
	% (compared to children INVOLVED)	-	-	66,7

Source: Hungarian Central Statistical Office, TSTAR database 2012; Give Kids a Chance program, on-line monitoring system, August 2012-May 2014.

Shifting to children with disadvantaged status, on subregion level, Hungarian data are available only on children receiving regular child protection allowance, and not on children with disadvantaged status. The children's chance on-line monitoring system collects data on disadvantaged status of children. Though these two features are not exactly the same, they are strongly correlated and hence comparable with each other. At country level, one-third

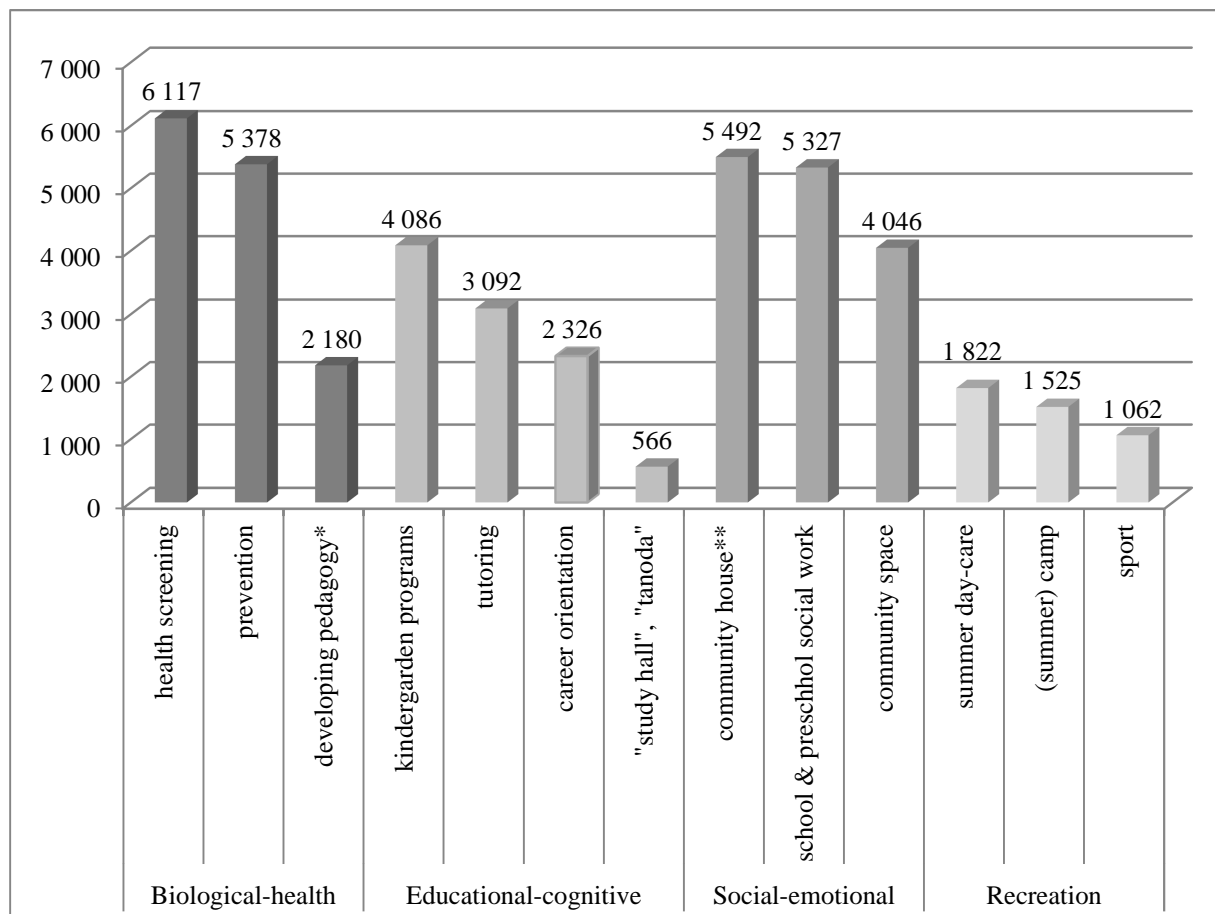
(33%) of Hungarian children are entitled to regular child protection allowance (Table 1). In 23 underdeveloped regions concerned the education level of people is considerably lower and the unemployment rate is significantly higher than the national average. Consequently, many families and children live under the threshold per capita income: 71% of children receive regular child protection allowance. This percentage is at least two times more than the national average.

If all children reached by the programme are taken into account in 15 subregions, two-third (67%) of them has disadvantaged status. Thus, basically we can state that our program fulfilled its mission. Conversely – what is less advantageous: one-third of children does not belong to our main target group.

Data collection on children and their family is sometimes quite time-consuming and problematic both during the professional project implementation and then in the on-line recording system. The most frequent missing label is disadvantaged status of a child. If only children with known disadvantaged status are concerned, access rate is more positive. 84% of children participating in any program elements are disadvantaged (22.995 children). Taking into consideration that 71% of children are eligible for regular child protection allowance in 15 subregions, the above percentage (84%) shows a quite high level effectiveness. In this sense children's chance program can be defined as a well-targeted or well-addressed project. According to interviews conducted, project implementers frequently face the problem that it is pretty problematic to reach, mobilize and involve the most deprived children and their families.

It is important to measure how program structure and program elements react to originally identified development needs. According to the programme's complex spirit, particular program elements have been formulated for *adult* family members. Majority of them participated in parental clubs and/or mummy-baby clubs that are to improve *parental competences* (meeting *social-emotional* needs). As poverty spiral sometimes connote certain lifestyle problems, some trainings on e.g. *local economy* or *lifestyle* have been introduced too (educational-cognitive needs). In some subregions *health screenings* have also been available for them (biological-health needs). These program elements concern more than three thousand (3.099) adult recipients.

Figure 1 Development needs and implemented program elements for children<sup>3</sup>



Source: Hungarian Central Statistical Office, TSTAR database 2012; Give Kids a Chance program, on-line monitoring system, August 2012-May 2014.

The most visited program elements among *children* are those related to development of their *social-emotional* skills (Figure 1). Services on improvement of children's *biological-health* conditions are also popular. At the same time, special attention has been paid to their *educational-cognitive* and *recreational* lags as well. Since both program structure and single program elements are quite complex, development areas affected by them cannot be hermetically separated; these areas are strongly interconnected and interrelated. For instance, developing pedagogy responses educational-cognitive needs in our classification, however it has also resilient effect on biological-health status of a child. Similarly, though summer day-care programs provide opportunity for recreation and useful leisure activity, they contribute to educational realignment of children as well.

<sup>3</sup> The same child might participate in two or more program elements. Sure Start children's houses are monitored by a separate system.

\*Special education, clinical speech, psychology.

\*\*Children and adults data together.

Since regularity of realized program elements is quite diverse within a development need cluster, proportion of reached children should be distinguished by intensity of them. The most intensive – mainly daily-based - program parts would be study halls and tutoring for elementary school students. These two imply 36% of children involved in *educational-cognitive* development activities. Developing pedagogy professionals (special education teachers, clinical speech specialists, psychologists) reached 16% of children within *biological-health* program participants. *Social skills- and community-oriented* program elements are all based on permanent - or at least very regular – presence of professionals (e.g. open-door and multifunctional community houses for all family members).

### **Evaluation of the programme**

The programme as a whole can be considered successful in many aspects, though there has been several factors setting it back. The main experiences regarding the implementation of projects in subregions can be summarized as follows.

An undisputable **success** has been that our services have reached a fairly wide range of children. *High participation rates* can be attributed to ad hoc and massive events (for example health screening programmes) with high attendance, though regular, continuous services (community service centres, Sure Start children's houses, training centres, tutoring and developing services) have reached fairly good access rates as well.

Despite prior concerns *disadvantaged children* have been *overrepresented* among all children enrolled into the projects, and have used the individual services in higher rates than it would have been explained by the proportion of this group in the given subregions. Within this, children facing multiple disadvantages have produced even higher rates of attendance. Inadequate targeting often detected in social mainstreaming programmes, when implementers meet project indicators only by involving the most easily accessible persons hardly applies to this programme.

Another positive achievement to be pointed out is that most of the services introduced *answer local needs and fulfil actual local requirements*. This is partly the result of the mentoring project whose colleagues followed the whole process of tender compilation by reviewing the elaboration of project elements and have been constantly controlling the professional implementation since then.

Regarding the main **challenge** clusters, one of the main objectives of the programme has been to promote *strategic planning* concerning children; however, little has yet been accomplished of this idea. This is partly because poverty is so extended and so deep in these regions that project resources are used up primarily for emergency cases, and are not sufficient for implementation of ideas of wider perspective. In addition, strategic planning is impeded by the fact that tenders of 2 to 3 year-long duration are too short compared to a long-term objective like social catching-up process. Finally, another unfavourable condition is that projects have been implemented in a constantly changing legislative environment. Regional administration system has been reorganized since the launching of the programme, and several essential changes have been introduced in the public education that fundamentally impact implementation of education-related elements of the projects.

*Handling the shortage of specialists* is another point that makes the success of the project ambiguous. On the one hand hard-to-fill vacancies advertised have eventually been occupied; on the other hand specialists already employed in core services have taken positions in the project as their secondary or even primary jobs. Therefore, the number of specialists employed has hardly increased at the level of subregions, whereas existing specialists have been facing an increased overload.

Also, *quality of existing services* could only be improved partially. Quality could successfully be elevated in areas where only extra financial resources were missing, but in places and subjects where other factors (e.g. poor state regulations or inappropriate attitude of service providers) were the causes of ineffectiveness of core services the project could hardly make any progress. In such cases implementers usually have chosen to create parallel services to supplement basic services in order to improve quality in the areas affected (for example in- and out-of-school tutoring or inter-professional collaboration beyond the officially existing cooperation). This solution, however, in addition to creating an obviously wasteful system, have generated conflicts with basic service providers in competency questions.

*Sustainability of results* seems to be one of the main challenges of the programme. Further funding of the projects is not guaranteed either due to the subregions' shortage of own resources and to the delay of new tenders. Beyond the scarcity of both state and local community financial resources, insufficient operation of civil society and low number of active local civil and religious organizations also hinder sustainability of the local projects.

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