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THE SITUATION OF THE CHILD WELFARE SYSTEM IN HUNGARY

Abstract

The aim of the child protection system as stipulated by the law is to contribute to the prevailing of the rights and interests of children, and to the fulfilment of parental responsibilities, to prevent and put an end to risks threatening children, through services and interventions, by applying a gradual approach. The present study is an overview of the situation of child welfare services and of the child protection system, from the perspective of the theoretical framework grounded on the concept of child protection as a service. The study is based on the analysis of data collected in 2017 within the KSH OSAP (the National Data Collection Programme of the Hungarian Central Statistical Office).

Keywords: Hungarian child welfare system, OSAP statistical data of 2017

JEL Codes: J13

1. Introduction

The Act on the protection of children and guardianship (in what follows referred to as the Child Protection Act) was adopted by the Parliament of Hungary on April 22nd 1997. The act promotes children's interests and rights, therefore priority is given to supporting the upbringing of children within the family. The most important tool for this is the operation of the system of basic child welfare services, which refers to day-care services, various forms of provisional care and the system of family and child welfare services.

Thus, through the provided services and care, the child protection system aims at allowing children to be raised within their family; should this not be possible, it ensures substitute protection until the cared children reach adult age.

Children taken away from their families are cared either in children's home, or in foster care. There are 5 types of children's home: *Traditional institutions* provide care for quite a big number of children in smaller living quarters for 12-48 children. *Apartment-homes* provide care for a maximum of 12 children in an apartment or family house. *Special children's homes* provide for those special needs children, who have psychological problems or suffer from behavioral or learning difficulties. In such a home there are maximum 40 places. There are also a few separate *homes for mentally retarded children* for those children who are disabled, or have special needs because of their age (under 3 years) with maximum 40 places. The *after-care homes* provide care for those young adults who are entitled to leave care (age 18) but cannot lead an independent life and decide to stay in the child protection system. In 2014, the system of foster care became unified, previously there were traditional and professional foster parents as well. Now being foster parent is a job and preferred form of placing children under the age of 12.

In order to facilitate successful social integration, the child protection system operates the support system destined to adults, who were formerly cared children. After care provision is available for those

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who are under 21 and they are working or looking for a job, but their income is not enough to live independently. Those who have special needs can stay in the system until the age of 22, while those who participate in secondary education can stay until they are 24 years old. If a person is attending higher education – 5% of the all young adults –, they can have the after care provision until they are 25 years old. Upon individual request, this type of provision can be applied for until the age of 30, since several cared people could not finish their studies during the period of care.

Additionally, after care service is available until the age of 30, it is a counselling service including employment, personal relationships and solving housing based on the methodology of social workers' case management.

The primary focus of our study is the importance of supporting parenthood and motivation to participate in partner cooperation in general, of the mobilization of resources relying in the social work with families with children. In the next part, on the basis of the analysis of statistical data we give an overview of the current Hungarian situation with regard to the specificities of the child protection target group, the territorial targeting, and systemic satisfaction of needs.

2. The specificities of complex and efficient child protection interventions

In child protection we are usually confronted with complex situations, intricate issues, which implicitly means that efficient child protection programs, though implemented locally, are intricate in various terms. Ágnes Darvas (2018: 58-60) deducts this equivocal complexity from the need to evaluate childhood situations and the set of problems detectable around children in a multidimensional environment. The features of this environment are: 1) The diversity of the areas of action, which can imply educational, health, social support, or even employment and income policy measures. 2) The complexity of the actively involved sectors, where state, religious and civic organisations alike might assume responsibilities. 3) The multitude of acting individuals, which involves the issue of participation, as a right from the part of the participant's (cared individual) side as well, respectively the issue of the quality of cooperation between the professionals, clients and members of the community. 4) The multitude of the institutions and professions having a share in the program, namely the way how the package of support/services is built up around the children, who are the persons who cooperate in order to achieve the child protection goals, and what is the vision of these professionals regarding the future of the child and their family. In all cases, the professional support embedded in the framework of complex services, and counselling need to adapt to the development needs of the child, to parental skills, and to the relational or social reality deducted from the family and environmental factors that may be mobilized, or which, on the contrary, might conceal certain risks, thus can be harmful. The services built on supportive, complex approach and methodology (set of tools), have to be provided by relying on the family's strengths and by respecting cultural diversity (DePanfilis 2006; Kendall et al. 2010).

In order to achieve efficient child protection interventions, it is important to take into account the following main aspects:

- Ecological approach: multilevel approach (individual, family, broader social system).
- Community based support: the promotion, rebuilding of the social relationships and bounds of the families.
- Creating a partnership with the family: within this framework, the family's communication skills can develop, which facilitates the maintenance of community relationships as well.
- Stressing upon the strengths of the family: cooperation built on family competences.

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• Development of cultural competences: it may vary from culture to culture what are considered risks and protection factors; the professionals should be able to accept and respect cultural differences. (DePanfilis 2006: 56-57).

When determining the service package, besides assessing the needs, the professionals evaluate the parenting skills as well in a complex manner. This has 3 main features: 1) The skills and deficiencies of the parent and the relationship of the parent and child. 2) Everyday behaviour and parenting regarding the satisfaction of the child's needs. 3) Minimal parental norms for the sake of satisfying the child's basic safety and emotional needs. The evaluation of parental skills is important also because it reveals the parent's own patterns applied in parenting, it identifies the possible causes of a problematic attitude, and it designates for the parent and for the professionals alike the direction of change, it identifies the positive and negative factors and impacts exercised by the family and the environment, it depicts the functionality and needs of the child and those risks, which ensue from the inadequacies, or possible negative attitude of the parent (Budd 2005).

In case of families struggling with complex problems, it is of outmost importance that the family members are able to identify the professionals, and understand which of them was assigned to which problems specific to a certain field. Many of them might have negative experiences when helpers did not fully respect their rights, private sphere and interests, or when the release of eventual grievances was not possible.

The integrated care of families with complex needs implies that one professional coordinates the work of several professionals working with the family, having different competences. This allows for the assuming of responsibility on institutional level when evaluating outputs (the consideration of which is in itself a dimension of the child protection principle and of the issue of efficiency). Obviously, integrated support can be efficient, if the partner organisations, the cooperating services and the involved professionals follow identical goals and principles (the "common goal, diverse set of tools" concept), and if an infrastructure available to all is set up, through which the available services and provisions are visible, and through which professional actions done for the sake of the child's wellbeing and safety can be followed. (DePanfilis 2006)

3. The situation of child protection system in the light of statistical data

3.1. The target audience of child protection in Hungary

Hungarian child protection system is determined by Act XXXI of 1997 on the Protection of Children and the Administration of Guardianship and it is aimed at facilitating that children shall be raised in families, at preventing and terminating their vulnerability and at ensuring the substitute protection of the child without parental care or care provided by other relatives. Which child protection measures are needed, is based on the scale of children needs.

The regular child protection benefit is an allowance in cash or in kind for children in need, and it is aimed at better their circumstances. The entitlement depends on the financial situation of the family and is considered by the notary. On the 31st of December in 2017 there were 314 366 minors receiving regular child protection benefit, which is a decrease of 12 percent compared to the previous year. The number of children receiving regular child protection benefit per thousand inhabitants of corresponding age was 183, 29.

The terms of status of disadvantage or compound disadvantage is defined by the Act about child protection by enumerating different socio-cultural disadvantages, such as the parent or the adoptive

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guardian has a low level of education or a low level of employment or the child has inadequate living environment or housing circumstances. A status of disadvantage applies to a child, who is entitled to regular child protection benefits, and one of the above circumstances is true. A status of compound disadvantage applies to a child, who is entitled to regular child protection benefits, and at least two of the above circumstances are true, or to a child in foster care, or to a young adult receiving after-care and in a legal status of a student. At the same time as judging eligibility for regular child protection benefits the guardianship authority, upon request - in a separate ruling, for a period of time equal to eligibility for regular child protection benefits - determines if a child has a status of disadvantage or compound disadvantage. On the 31st of December in 2017, 100 308 children had the status of disadvantage and 106 599 children had the status of compound disadvantage⁴. In most cases these statuses were due to the parents' or the adoptive guardians' low level of education: which was for the two-thirds of disadvantaged children and for the 88 per cent of compound disadvantaged children obtained as one of the reasons. For the 6 percent of compound disadvantaged children all the three reasons were present.

Defining vulnerability is a very hard challenge. The situations which evoke the intervention of child protection might be seen as vulnerability. (Szöllősi, 2000.) According to the 5 § of Act XXXI vulnerability shall mean any status caused by the conduct, neglect or circumstance of the child or any other person that obstructs or hinders the physical, mental, emotional or moral development of the child. The judgement of individual situation depends a lot on subjective evaluation and the interaction of social circumstances on the micro and macro level. Data on vulnerability provide limited objective information about the operation of the child protection system. From the middle of the years of 2000's until 2012 their number changed between 190 000 to 200 000. From 2013 135 000 - 140 000 children were registered as vulnerable⁵.

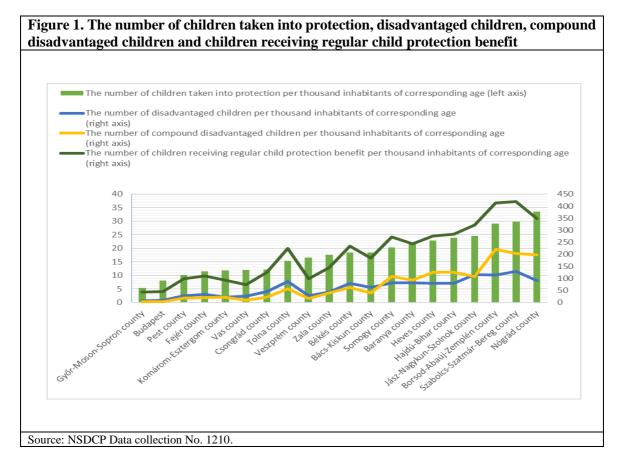
Taking a child into protection⁶ is the softest authority measure. On account of the magisterial nature it can be a more exact indicator of the operation of the child protection system. In 2017 more than 28 000 children were taken into protection, the number of children per thousand inhabitants of corresponding age was 16, 5. Compared to 2016 their number increased by 3 000 persons. More than one third of the children were taken into protection because their parents had behavioural problems, but for the missing of more than 50 lessons in school was also a significant reason.

The state of economic development is diverse in different parts of Hungary: the North-East region and the Southern Transdanubian region are in significant disadvantage compared to the North-Western region and the Central Hungary region. Data on child protection also shows this difference: in the county Borsod-Abaúj-Zemplén (in the North-Eastern region) and in the county Tolna (in Southern Transdanubia) there were three times as much registered disadvantaged or compound disadvantaged children than in the county Győr-Moson-Sopron (in the North-Western region). In the North-Eastern region there were almost ten times as much children who received regular child protection benefit and almost five times as much children taken into protection than in the county Győr-Moson-Sopron.

⁴ Data without number of children in foster care and without the number young adults receiving after- care

⁵ From the year 2016 child welfare service and family assistance were integrated and the connected institutions became two-levels. The tasks have been supplied by family and child welfare services and centres. The latter operate in district centres. The integration is a time-consuming process and it causes much challenge for the professionals, and because of that the supply of data was cumbersome, so reliable data have not been available about vulnerability.

⁶ If a parent or other legal representative is unable, or unwilling, to terminate the vulnerability of the child by making voluntary use of basic provisions, but it may be thoroughly supposed that with help, the development of the child could nevertheless be ensured in the family environment, the guardianship authority takes the child into protection. In addition the guardianship authority takes a child into protection if the child committed crime or infringement. Guardianship authority may order behavioural rules for the child or the parents too or may obligate to receive social or psychical services.



3.2. The child welfare service and centre

The child welfare service works as a very important part of prevention in child protection because it is responsible for the operation of early warning system, so it gains all the information about the children's vulnerability. The child welfare service can make connection with children by warnings. In 2017 114 000 warnings arrived at child welfare services and it was about almost 84 000 children. 70 000 warnings arrived at child welfare centres and it was about 41 000 children. The most warnings came from schools, health visitors and guardianship authorities⁷.

⁷ The integration process has faced to a number of challenges, and it has caused problems also in supplying of data. The integration's aim was to end parallel services, so thanks to the changes, the data on family and child welfare services are not comparable to previous years. Furthermore, we cannot filter the parallelisms of data.

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Sender of warning	Number of warnings received by family and child welfare service	Number of warning received by family and child welfare centre
health care provider	15 424	5 773
of which: health visitor	11 871	4 219
social care services	10 668	12 904
of which: family and child welfare service	4 108	9 632
of which: family and child welfare centre	5 491	2 099
daytime care institution	2 478	1 150
temporary care institution	1 811	1 197
receiving centres for refugees and temporary accommodation for refugees	168	389
public education institutions	54 110	18 955
the police	6 955	4 132
the public prosecutor's office, the court	410	525
the service of probation officers	742	864
associations, foundations and ecclesiastical legal entities	483	108
organisations performing victim support and the duties of mitigation of damages	88	17
any citizen or civic organisation representing children's interests	4 820	1 541
the local government and the notary	3 337	1 152
the guardianship authorities	12 206	20 979
the labour authority	10	9
the disaster management authority	3	3
utility suppliers	31	7
child rights representative, patient representative	18	18
professional guardianship	19	17
reformatory institution	13	34
other	239	154
Total	114 033	69 928

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children.

At family and child welfare services 103 477 minors received care by cooperation agreement during 2017. 60 per cent of them received services by the reason of neglect, the parent's behavioural problems, child rearing problems or family conflict. 16 percent of them received assistance because of behavioural disorder, integration difficulties in daytime-care, nursery or school and 10 percent of them because of financial problems (which can be cost-of-living or housing problems). In 2017, 44 913 minors connected with family and child welfare services as a new recipient, 60 percent of them were vulnerable

In 2017 almost 66 000 minors received case management services and 40 000 minors got so-called special services⁸ at family and child welfare centres.

If we examine the institutional coverage, we see that there were 698 institutions around Hungary. In a view of settlement population we can see, that every third service operated in a settlement with 2000-4999 inhabitants and only 42 services operated in a settlement with lower than 1000 inhabitants.

3.3. Provision in children's homes and at foster parents

In the year 2017 20 948 children were under professional child care provision, which means an increase of 400 children to the previous year. 12 percent of the children taken into professional child protection were under the age of 3 years. About the half of the children were between 11 and 17 years old, making them the largest group of children under provision. Besides them, 2 417 young adults (between the age of 18 and 25) were placed in after-care provision.

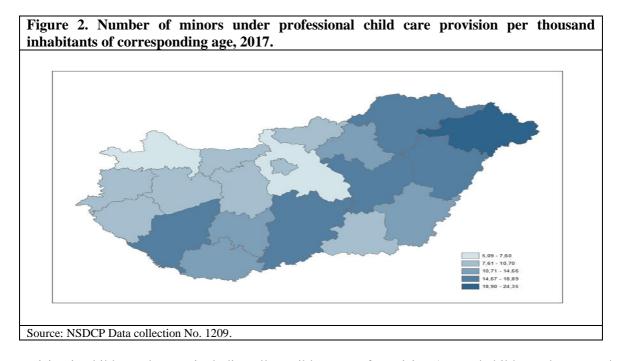
84 percent of the young adults taken in 2017 into after-care provision required it because of ongoing studies. 67 percent of the children under professional child care provision were placed at foster parents, while the other children were placed in children's homes or in long-term social institution providing nursing, care or/and rehabilitation. The data also show that the probability of being placed at foster parents decreases with the age of the child under provision.

Analysing the regional dimensions of professional child care provision, it can be shown that the number of children under professional child care provision per thousand inhabitants of corresponding age is in the county Szabolcs-Szatmár-Bereg in the north-eastern region of Hungary the highest: 24 children under provision per thousand minor inhabitants. That is quintuplicate of the data of the county Győr-Moson-Sopron, which is an economically well-developed county at the Austrian border.

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⁸ However so-called special services (e.g. conflict management, mediation, hospital social work etc.) are available at family and child welfare centres, these do not connect only to case management service. Of course the two groups may show overlap.

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Provision in children's homes, including all possible types of provision (general children's homes and group homes, children's homes and group homes for children with special and particular needs, aftercare homes, exterior places, children's homes for unaccompanied minors), is provided by 512 premises in Hungary, every fourth institution can be found in Budapest or the county Pest around the capital. The data of the counties in the north-eastern region are outstanding as well, another quarter of the premises are located there. This kind of regional distribution can be explained by the number of children under professional child care provision in this region. A similar distribution can be observed on the number of foster parents, but the latter region shows even higher rate, 37 percent of the foster parents can be found there. In 2017 5 611 foster parents were registered, 1055 of them were particular foster parents and there were 15 special foster parents in Hungary. By 23 percent of the foster parents were 2 children, while by 29 percent of them were 4 or more children, and by 9 percent of them were temporarily no children placed.

3.4. Employees of professional child care institutions

Besides the availability of the institutions, the number and qualification of professional employees are also determining the efficient maintenance of the systems of the child welfare and professional child protection.

Around 5000 full-time and 455 part-time jobs were in the child welfare service registered with professional scope of activities. In the first year after the integration the number of employees working for the child welfare services increased by around 100 persons. The minimum of the employees with professional scope of activities is defined in the Act, related to the number of inhabitants.

Analysing the data broken down by geographical units, one can observe, that the ratio of professional employees per recipient is outstanding in Budapest and in the county Győr-Moson-Sopron, while the economically disadvantageous counties, with high numbers of social problems and clients of the services, show a much lower ratio.

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One can observe on the ratio of employees suit the professional requirements prescribed by the Act, that around 80-90 percent of the professionals at both the services and the centres have a higher educational social degree. It is also remarkable that there is a lack of professional employees in case of several scopes of activities in the children's homes. The low status of the foster parent can be shown with the ratio of around 65 percent working without high-school graduation.

Conclusions

The study aiming to map the functional environment of the current Hungarian child welfare and child protection system argues that child protection work always implies complex situations and intricate problems, therefore we need to take into account that efficient child protection programs and interventions have to be complex from several aspects as well. When analyzing the Hungarian child protection system, we can conclude that both regarding the accessibility and extent of services, and the basic and special services, there are significant regional and internal structural inequalities with regard to the possibilities to respond to needs.

High numbers of cared people are rather typical for regions where deep and complex social problems prevail. Besides complying more or less with qualification requirements, there are vacant jobs in many fields, which fact is an obvious impediment to the balanced performance of tasks; this is further hindered by the high staff turnover in this field.

In efficient child protection work it is a basic requirement that the professional in social work understands the problems of the parents, and is empathetic with their situation; they should also be aware of the consequences of parental difficulties and reduced parental abilities, consequently with the burdens carried by children and the impacts on them regarding their healthy development. The professional is responsible first of all for the child, yet intervention is more efficient if a child-centred, family-focused practice is applied, when the professionals are able to win over the parents as well and to cooperate with them in order to satisfy the family's needs (Bromfield et al. 2012; Rácz 2016; 2017).

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