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### STRENGTHENING FAMILIES. ENDING INSTITUTIONAL CARE.



### **COUNTRY FACT SHEET**

For the last 30 years deinstitutionalisation has been part of the Hungarian child welfare and protection policy. During this time there have been significant developments in family and community based care. However, children in Hungary are still entering too often to care due to poverty<sup>1</sup> and lack of community based prevention and early intervention services. According to the latest statistical data 608,000 children are threatened by poverty, 130,000 children (44.2%) under the age of 7 live in material deprivation<sup>2</sup> and 50,000-60,000 children regularly go hungry. Despite the developments in family and community based care, kinship care is not supported properly, foster parents are not supervised and both foster carers and small group homes are frequently located in isolated communities. Staff are still following the old institutional culture, and there is no adequate access to schools or services in accordance to children's diverse needs. In Hungary, DI is important in terms of declarations and receiving EU funding. However, there is lack of public awareness raising, lack of interest at local level and children are not heard.

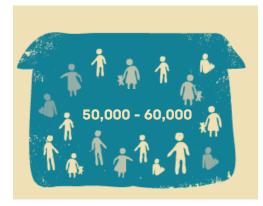
The Act XXXI of 1997 on the Protection of Children and Guardianship clearly defines the need for family strengthening programmes and prevention services, ensuring children grow up in their biological families and where this is not possible, prioritising family-based or family like care. However, the range of community based services available are severely under-resourced and often non-existent especially in rural, remote and poor areas where most needed. Local authorities also prefer not to invest from their budget in community based services but they select to refer children directly to alternative care which is funded through national budget. In 2015 there were 8,098 children growing up in 67 institutions. According to the Act XXXI of 1997<sup>3</sup> all children under the age of 6 should had been deinstitutionalised by 2014. However, by the end of 2015 there were still 3 institutions for children aged 0-6 years housing 289 children. Sometimes very young children are also placed into institutions for older children.



3 According to the same Act children under 12 should not be institutionalized, however this is not the case. Number may be higher

<sup>11/3</sup> of children's population

<sup>2014</sup> June 2014 J



50,000-60,000 CHILDREN IN HUNGARY REGULARLY GO HUNGRY As part of the DI reforms in Hungary, 41 SGHs were developed in 2015, 200 in total in 2015<sup>1</sup>. It is of concern however that the majority of SGHs are located in smaller settlements as it costs much less to buy the property. There is no proper transportation available in these settlements nor the guarantee to be able to access to even basic services, adequate educational and out of school facilities. In many cases the staff are not adequately qualified, trained or supervised, staff members fluctuate and the burn out rate is very high. Children's complex needs cannot be met leading them to having problems in school and everyday life. Runaway of children, violence and substance abuse are widespread.

Although foster care is a priority for children without parental care compared to institutional placement, there is a shortage of foster parents and suitable placements for children with complex needs, disability, teenagers, as well as for children under the age of 3. Also, the allowance is limited with no provisions for extra costs, discouraging people from fostering. This is reflected in the number of foster care applications coming from the poorest regions of the country where often the motivation to foster is mainly for financial gain. As a result half of the foster parents live in isolated small rural communities, unsupervised. There is a lack of services or access to adequate school and health care. Many children lose contact with their biological families due to distance and reluctance of foster cares or professionals to support children's reintegration. Even though foster care pre-service training is well designed, the implementation, supervision, vocational training and support provided is inadequate.

1 Act on the Protection of Children and the Administration of Guardianship (1/2014), children deprived of parental under the age of 12 should

be placed in family-based care, unless the child has a long-term illness, is severely disabled or, if siblings cannot be placed together.

## FAST FACTS & LATEST DEVELOPMENTS

- 50,000-60,000 CHILDREN IN HUNGARY REGULARLY GO HUNGRY OUT OF THE 1.800,000 CHILDREN UNDER THE AGE OF 18.
- 14,486 CHILDREN WERE IN FOSTER CARE IN 2014, IN 5460 FOSTER FAMILIES
- 2,873 CHILDREN IN CARE WERE OVER 18 YEARS OF AGE EITHER DUE TO THEIR DISABILITY OR IN AFTER CARE.
- THE NUMBER OF HOMES FOR YOUNG PEOPLE HAS INCREASED, DESPITE THE CONTINUOUSLY DECLINING BIRTH RATE.
- YOUNG ADULTS ONLY RECEIVE AFTERCARE SUPPORT UNTIL THE AGE OF 21 IF THEY DO NOT ATTEND EDUCATION, COMPARED TO THE EARLIER 24 YEARS OF AGE.
- NEW TYPE<sup>1</sup> OF INSTITUTIONS FOR CHILDREN WITH MULTIPLE AND COMPLEX NEEDS ALSO ACCOMMODATE CHILDREN WITH DISABILITIES OR THOSE HAVING SEVERE ILLNESS.
- 3 DETENTION CENTERS FOR CHILDREN IN PRE-TRIAL DETENTION OR SENTENCED FOR CORRECTION, ACCOMMODATING ABOUT 200 CHILDREN, 1 MORE UNDER CONSTRUCTION.
- SECRETARY OF STATE MR KAROLY CZIBERE ANNOUNCED THE CLOSURE OF ALL LARGE CHILDREN'S HOMES BY 2020<sup>2</sup> PLACING CHILDREN TO FAMILY AND COMMUNITY BASED SETTINGS. INCREASE FAMILY SUPPORT AND PREVENTION SERVICES ARE ALSO PLANNED.

1 At the moment 3 of them – 1 for girls , 2 for boys 2 http://www.origo.hu/itthon/20161030-a-gyongyosi-esetnel-hibazott-a-gyerekorvos.html

 Család, Gyermek, Ifjúság
 Kiemelkedően Közhasznú Egyesület
 Family Child Youth Association

#### **OPENING DOORS NATIONAL COORDINATOR IN HUNGARY**

The Association since its foundation in1993 has been supporting the rights, welfare, and protection of children and family strengthening, helping professionals, raising awareness, conducting research and publishing materials accordingly. Participating in several EU and domestic projects, providing training, adapting good practices, translating and publishing materials in different related areas. To find out more visit www.csagyi.hu

#### NATIONAL PARTNERS

In Hungary the campaign is supported by: Ágota Foundation, Children's Media Association, Diótörés Foundation, Hand in Hand Foundation, Methodological National Association of Child Welfare Services, Office of the Commissioner for Fundamental Rights, SOS Children's Villages Hungary, UNICEF Hungary, Union of the Social Professional Organisations

The Opening Doors for Europe's Children campaign supports national efforts to develop child protection systems that strengthen families and ensure high-quality family and community-based alternative care for children, by leveraging EU funding and policy and building capacity in civil society.

It is a partnership between 5 international organisations and civil society across 15 European countries. For more information go to www.openingdoors.eu