

National analysis on violence against LGBTI+ children

HUNGARY



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Introduction –Research Design and Sample

The aim of this report is to introduce the current situation in Hungary at the 5 areas of intervention (school, health, family, public spaces and media) of the Diversity and Childhood project. For the desk research we collected data from already existing studies and research reports including those published by Háttér Society. To explore these areas from the view of stakeholders we conducted personal interviews and collected information through an online survey.

The online survey included 24 questions in 4 sections: *Beliefs and attitudes regarding gender and gender diversity; Perceptions and opinions regarding the existence of social services for LGBTI+ children and youth; Public policy and public services; and Demographic data*. The goal was to assess the general views, knowledge and needs of stakeholders regarding LGBTI+ and gender non-conforming children in their respective fields.

The chosen platform for conducting the survey was Limesurvey, which fulfilled the technical and security requirements needed for the research. The questionnaire was anonymous and voluntary. The recruitment for the questionnaire was done by contacting schools, family centers, child protection agencies, healthcare facilities and other relevant institutions directly via email, and publishing it in the monthly newsletters of the Diversity Education Working Group and the mailing list of the Network of Human Rights Educators. We also promoted the survey through our organizational Facebook page, and posted it to relevant professional groups via social media.

In total 124 respondents had started the survey from which only 42 had finished the fourth section with the demographic data. We decided to include those participants in our statistics who answered the questions from the other three sections but did not provide demographic information. 46 persons didn't finish the first section and 21 more persons stopped right after finishing, 8 stopped after the second section, and 7 of the responders stopped after the third part. These numbers show that for future research activities we need to engage our respondents more to get more fully submitted questionnaires, as in this case a very high number of potential respondents stopped filling the questionnaire during or right after Section 1.

Most of the respondents were from the field of education (69%), followed by family care professionals (20%). The areas of health and public spaces got a lower representation: 3% and 8%; and there were no responses from stakeholders from the field of media.



Most (69%) of the professionals work at the public sphere, that is, for public institutions. As for their age, 31% of the respondents were between 20 and 30, 24% between 30 and 40, 26% between 40 and 50, 7% between 50 and 60, and 5% over 60. (7% of the respondents did not wish to disclose their age.) More than four fifth of the respondents (81%) identified as woman, 15% as man, 2,5% as non-binary and 2,5% did not disclose their gender.

Besides the survey, twelve interviews were conducted as the second part of the research. We recruited participants through professional networks and by suggestions of representatives from each field. We paid special attention to including stakeholders from all five areas the Diversity and Childhood project focuses on.

We interviewed 3-3 participants from both the field of education and the field of health, 2 participants from public spaces, 3 from family care and 1 participant from the field of media. There were some overlaps, for example a participant representing the health field but having professional experience working for child protection services as well. We interviewed professionals who we thought would have a good insight and experience regarding children in their own field, therefore we chose teachers, a district school psychologist coordinator, a school nurse, psychologists from two different children and youth hospitals, a social worker from a family support center, a psychologist with experience from child protection services and foster care, a parent, a journalist, a child developmental professional and a professional from the field of sports. Four of the interviewees identified as male and the rest as female. Women are usually overrepresented in these samples, which is visible from our research data as well. A primary cause of this is that women are vastly overrepresented in the social and educational sphere in Hungary, on the one hand, and they are also more likely to think and act about issues related to inequalities on the other hand.

The interviews were semi structured using the interview guide constructed by the consortium, but relevant topics brought up by the interviewees were discussed in more detail if we saw it fit. Interviews were approximately an hour long, and were conducted in a two-person situation in person or via telephone. All interviews were voice recorded. The participation was voluntary and the information collected was anonymized. All participants were motivated to take part in our research, and gave informed consent after the researcher gave them information about the project and the interview.



1. Legal and political context regarding LGBTI+ rights

1.1. History of LGBTI+ rights in Hungary

Hungary's existing laws and policies position it towards the middle of the Rainbow Europe country ranking¹ – but that only reveals part of the experience for LGBT people living in the country. The rhetoric around human rights and LGBT equality as well as the number of LGBT people coming out must be examined alongside what exists in the legislation. In 2018, the right-wing FIDESZ-KDNP government was re-elected for a third term continuing the same line of politics that it had pursued between 2010-2018, and which had been strongly criticized by international institutions for the disregard for the rule of law, democratic principles and basic human rights. Many of these legal and policy developments disproportionately affected the most vulnerable groups of society, among them LGBTI+ people.

Viewing from a socio-cultural aspect, Hungarian society has viewed same sex relationships either as a **moral or a medical issue (sin or sickness)**. The medicalizing view is still notably present even though WHO removed homosexuality from the ICD in 1990 and several professional organisation have been working on removing this thought pattern.

Same sex relationships were **decriminalized** in 1961 in Hungary based on the above-mentioned medicalizing view. However, the **age of consent** was soon raised to 20 in the case of same sex relationships, while it was 14 years for heterosexual relationships. The age of consent was lowered from 20 to 18 in 1978, but difference in the age of consent regarding hetero- and homosexual relationships was part of Hungarian legislation until 2002.

Anti-discriminatory and equal treatment legislation appeared in Hungarian legislation with the regime change, when in 1989 the prohibition of discrimination was included in the Constitution.² Besides the Constitution there were anti-discrimination regulations in the Labor Code from 1992³,

¹ <https://rainbow-europe.org/country-ranking>

² <https://www.alkotmanybirosag.hu/alkotmany-1989> Art. 70/A

³ Act XXII of 1992 On the Labour Code Art. 5 <https://www2.ohchr.org/english/bodies/cescr/docs/E.C.12.HUN.3-Annex4.pdf>



in the Act on Public Education from 1993⁴, but sexual orientation only appeared explicitly in 1997 in the Act on Health⁵. In Act CXXV of 2003 on equal treatment and the promotion of equal opportunities⁶ both sexual orientation and gender identity are explicitly listed.

The gay civil movement in Hungary started briefly before the fall of the communist regime with the first Hungarian gay organisation called the Hungarian Homosexuals' "Homer Lambda" National Association, which was officially registered in 1988.⁷ Several other organizations were formed in the 1990s. Háttér Society was founded in 1995, which makes it the oldest still actively operating LGBTI organisation in the country. The first Pride March took place in 1997. 2007 was the first year when violent counter-protestors appeared at the March, and ever since there have been constant efforts made by right wing extremist groups and parties to ban the event.

The question of **marriage equality and the definition of family** are neuralgic issues in the polarized Hungarian society, where these are strong call-to-action phrases for conservatives and right wing extremists. In 1996 a change in the Civil Code made it possible for same sex couples to have a legally recognised partnership; in this Act the words "man and woman" were replaced by "two persons." The 2009 Act on registered partnership was preceded by intense political and legal debate. The act was attacked by conservative parties, but the Constitutional Court rejected all of their submissions. However, in 2011, the new Fundamental Law passed by the Fidesz - Christian Democratic majority defined marriage as a union between a man and a woman⁸ therefore precluding same sex couples from the institution of marriage. This same act states that "Family ties shall be based on marriage and/or the relationship between parents and children," thus partners (and not only same sex couples) are excluded of the definition of family.

⁴Act LXXIX of 1993 on Public Education Art. 7

http://www.okm.gov.hu/letolt/english/ftv_angol.pdf

⁵ Act CLIV of 1997 on Health Art. 7.

https://www.ecoi.net/en/file/local/1056916/227_tmpphpooqypA.pdf

⁶ Art. 8 (m)-(n)

https://www.egyenlobanasmod.hu/sites/default/files/content/torveny/J2003T0125P_20190415_FIN%20%281%29.pdf

⁷ <https://hatter.hu/sites/default/files/dokumentum/konyvlap/magyarorszagi-lmbt-tortenelem-2013.pdf>

⁸The Fundamental Law of Hungary Art. L

<https://www.kormany.hu/download/e/02/00000/The%20New%20Fundamental%20Law%20of%20Hungary.pdf>



Parenting by same-sex couples is still a taboo in Hungary. The Registered Partnership Act specifically excludes same-sex couples from joint adoption, second parent adoption and assisted reproduction. Such legislation and frequent homophobic comments from politicians on LGBT+ families send a threatening message to same-sex couples raising children, and makes their discrimination legitimate among the wider public. A report of the Commissioner for Fundamental Rights found that the authorities implement adoption legislation in an arbitrary manner, that might (and in at least one case did) result in discrimination against same-sex couples. In recent years several leading government officials (including the House Speaker, a Deputy Prime Minister and the Prime Minister) commented negatively on same-sex parenting.

As for **legislation on hate crime and hate speech**, Hungarian law does not refer to “hate crimes” or “hate speech” *per se*. The Criminal Code,⁹ however, defines and punishes (directly or indirectly) bias-motivated criminal acts. Certain instances of hate speech are also sanctioned by the Criminal Code; and hate-inciting speech may also have consequences defined by civil law and media law. In the Criminal Code, there are two groups of relevant acts: *sui generis* acts, where the description of a criminal act explicitly refers to sexual orientation and gender identity bias when defining the motive and the aim of the criminal act; and other criminal acts that do not contain an explicit reference to bias motive, but qualifying circumstances¹⁰ refer to malicious motive (“aljas indok”), which - according to the case law - includes bias motive based on someone’s belonging to a social group. Thus the following criminal acts defined by the Criminal Code can be regarded as LGBTQI relevant hate crimes: as *sui generis* acts that explicitly refer to sexual orientation and gender identity: violence against a member of a community (CC, Article 216); and incitement against a community (CC, Article 332); indirectly, listing malicious motive as a qualifying circumstance: homicide (CC, Article 160), assault (CC, Article 164), illegal restraint (CC, Article 194), defamation (CC, Article 226), unlawful detention (CC, Article 304), offending a subordinate (CC, Article 449, a military criminal act). Besides the above mentioned acts, the motive and the aim of other criminal acts may also be taken into consideration when imposing sanctions without the law specifying these as qualifying circumstances, e.g. in cases of coercion or causing damage. The underreporting of anti-LGBTI hate crimes remains a serious concern in Hungary; research finds that only 10-23 percent of incidents are reported to the authorities.

⁹ Act C of 2012 on Criminal Law, hereafter also referred to as CC.

¹⁰ A *qualifying circumstance* is a feature of a criminal act specifically included in the definition of the crime in the Criminal Code that imposes a higher sanction for the act. An *aggravating circumstance*, on the other hand, is a feature of a criminal act that is not specifically listed in the CC, but should be taken into consideration when the judge decides on the sanction.



Research also shows that trans people are especially affected by both hate crimes and discrimination, but anti-trans state action has reached a new low in Spring 2020. Almost two years after the suspension of gender and name change requests, Parliament has passed a bill that prohibits the legal gender recognition of transgender people. Although the European Parliament, the UN High Commissioner for Human Rights and other international players opposed the bill, the Government did not refrain from introducing the law violating a constitutional fundamental right, and at the end of May 2020, the Parliament passed the bill that renders legal gender recognition in Hungary impossible. (Opposition parties submitted several amendments, which were voted down by the Fidesz-KDNP majority.) The new law amends the Registry Act and replaces the word “nem,” which in Hungarian can mean both “sex” and “gender”, with the word “születésinem” (“birth sex”), defining it as “biological sex based on primary sex characteristics and chromosomes.” According to the bill, the birth sex, once recorded, cannot be amended.

1.2. Timeline of LGBTI+ rights in Hungary

1961: Decriminalization of homosexuality (but the age of consent for homosexual relationships was raised to 20 years)

1996: Cohabitation legislation (two people living in a shared household) equally applied to heterosexual and same sex couples

1997: Prohibition of discrimination based on sexual orientation in the area of health

1997: First Pride March in Budapest

2002: Equalization of ages of consent

2003: Act No. CXXV on equal treatment and the promotion of equal opportunities: prohibition of discrimination based on sexual orientation or gender identity in the field of employment, health, education, service provision

2005: Assisted reproduction procedures extended to single women

2009: Act XXIX on registered partnership (for same-sex couples)



2020: Ban on MSM donating blood is lifted

2020: Legislation banning legal gender recognition (registration of sex at birth, which cannot be changed in documents)

1.3. Attitudes to LGBTI+ people in Hungary

According to the Eurobarometer¹¹ survey in 2019 only 48% of Hungarians think that LGBT people should have the same rights as heterosexuals, and 33% agree that same sex marriage should be allowed.

A representative survey commissioned by the Hungarian LGBT Alliance and carried out by Medián Polling Agency in September 2019 found that Hungarians are rather divided on LGBT+¹² issues. Most people (78%) have never heard the term 'LGBT' that is most often used by civil society organizations, the scientific community, and some parts of the media. More than half of the people do not know a word to describe transgender people.

Most people think homosexuality is a sickness (36%), a private matter (27%) or a deviation from social norms and rules (18%). Only 12% think choosing a same-sex partner is a fundamental human right. Only 24% of Hungarians know an LGBT person personally.

29% of Hungarians support same sex marriage, 35% support second parent adoption. A majority of people (57%) think a registered same sex couple raising children should be considered a family.

58% of Hungarians agree that the topic of homosexuality should be covered in the school curricula, 54% would be fine with a lesbian, gay or bisexual teacher teaching their children. (However, 25% would move their child to a different class and 11% would initiate firing the teacher).

¹¹ https://ec.europa.eu/info/sites/info/files/ebs_493_data_fact_lgbti_eu_en-1.pdf

¹² The research used the term 'LGBT' to refer to sexual and gender minorities. When directly quoting research results, this report will use that term. When making broader statements, the report will use the term 'LGBT+' to indicate that the group includes others whose identities are not named in the acronym.



Most Hungarians (57%) would react positively or neutrally if their colleague at work came out to them as lesbian, gay or bisexual: 14% would even welcome this act, since they would take it as a sign of trust, 43% said their relationship with the person would not change. Only 16% would welcome positive steps for LGBT inclusion at their workplace; 39% would not welcome it, but would not be bothered either.

87% of Hungarians agree that transgender people should be allowed to change their name and gender in their documents, although they are divided on what criteria should be applied.

34% of Hungarians think that only medically necessary surgeries should be performed on intersex babies, all other interventions should be delayed until the persons themselves can consent to them. A quarter of respondents think that doctors (27%) and every 68th person (13%) that parents should make a decision.

Only very few Hungarians can name an LGBT organization (8%), and most of them (87%) would not support such an organization financially. A majority of Hungarians (92%) do not support the Pride March, but only a third of them (34%) would ban it.

The electorate of political parties have significantly different views on LGBT+ issues: voters of left-of-center opposition parties tend to be more accepting, governing right wing parties and extreme right wing parties in opposition are less supportive.

The 2019 FRA survey shows that a very low percentage (13%) of LGBTI people report hate-motivated crimes and only 7% report hate-motivated harassment, even though 35% experienced harassment for being LGBTI in the past 12 months. The underreporting of anti-LGBTI+ hate crimes is well documented by research in Hungary. A large-scale survey in 2010, by the Institute of Sociology of the Hungarian Academy of Sciences and Háttér Society (1674 respondents) found that only 15 percent of those respondents who had been victims of violence due to their sexual orientation had made an official report.¹³

When looking at the experiences of 15-17 year old LGBTI youth from the past 12 months it's visible that while only a relatively small percent of them (9%) had experienced physical or sexual attacks,

¹³Dombos, Takács, P. Tóth, Mocsonaki 2011



almost half of them (43%) had experienced harassment for being LGBTI. 13% of 15-17 year olds experienced cyber harassment, 22% of them non verbal in person harassment and 33% verbal in person harassment.

The LGBTI survey (2019) of the Fundamental Rights Agency shows that in Hungary 61% percent are or were hiding their LGBTI identity at school with only 2% being open. At the same time only 13% of LGBTI people considered changing or leaving school because of their SOGIE. Most participants say that their school (75%) hadn't addressed LGBTI topics in education and 11% says they did but in a negative way. On IGLYO's LGBTQI inclusive education index Hungary got 8.5 points from 100.

Háttér Society conducted the National School Climate Survey¹⁴ in cooperation with GLSEN following the 2016-2017 academic year with 919 LGBTQI student respondents aged 13 to 21. The majority (82%) reported being verbally harassed at some point in the past year based on their personal characteristics. LGBTQI students most commonly reported experiencing verbal harassment at school because of their sexual orientation (64%) or how they expressed their gender (56%) and 13-22% of them reported physical harassment or physical assault. Underreporting defines the experience of students, too: 66% of them had never reported such incidents. This was mostly because of fear of being outed or thinking that school staff would not do anything.

2.DaC Areas of Intervention: schools, health, family, public spaces and media

2.1. Education

2.1.1. Needs of LGBTI+ and gender non-conforming children

The main issues LGBTI+ and gender non-conforming children face according to the survey are the fear of rejection (100%), lack of self-acceptance (96%), vulnerability to mental health issues (83%)

¹⁴<https://en.hatter.hu/publications/supportive-friends-unprepared-institutions>



and fear for their own safety (74%). These topics emerged in the interviews as well. A psychologist mentioned that harassment from both peers and teachers are present in the school for LGBTI+ youth: *“One of the students came out to his class and the teacher was constantly making homophobic remarks.”*

Research also shows that schools are not safe spaces for many LGBTI+ students. In Háttér’s earlier research, 919 participants (LGBTQI students aged between 13 and 21) completed an online survey about their experiences in school during the 2016-2017 school year, including hearing biased remarks, feeling safe, being harassed, and feeling comfortable at school.¹⁵ They were also asked about their academic experiences, attitudes about school, and the availability of supportive school resources helping the formation of an inclusive school environment that ensures equal access to education for all students

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22% of LGBTQI students reported physical harassment (e.g. being shoved or pushed) because of their sexual orientation. Almost one in five LGBTQI students (18 and 19%, respectively) experienced physical harassment because of their gender identity or gender expression.

13% of LGBTQI students were physically assaulted (punched, kicked or injured with an object) at school because of their sexual orientation, and 10% because of their gender identity or expression.

Other forms of harassment were also present at schools: such as being deliberately excluded or being the target of rumors, sexual harassment, and cyberbullying. Most LGBTQI students had experienced the two most common forms of relational aggression: intentional exclusion by peers and being the target of mean lies and rumors. 80% reported that they had had mean rumors or lies told about them at school; 78% had felt deliberately excluded or “left out” by other students; 28% experienced electronic harassment or cyberbullying (harassment through text messages, e-

¹⁵ Supportive Friends, Unprepared Institutions: The Experience of LGBTQI Students in Hungarian Schools Based on the National School Climate Survey. Háttér Society, 2019
<https://en.hatter.hu/sites/default/files/dokumentum/kiadvany/school-environment-report-en.pdf>



mails and social media sites). Four in ten LGBTQI students (40%) had been sexually harassed at school (e.g. experienced unwanted touching or sexual remarks directed at them). Nearly one third (30%) of LGBTQI students reported that their property had been stolen or purposefully damaged by other students at school in the past year.

Students do not always report school-based incidents of abuse and assault. Two thirds (66%) of LGBTQI students had never reported such incidents. 52% of those who did not report did not want to be “outed” as being LGBTQI to staff or family members by reporting such incidents, and half of them (50%) did not think school staff would have done anything about it.

Indeed, the most frequent reaction from school staff (52%) was that teachers told victims of harassment or assault to ignore the incident. 44% of students indicated that school staff had talked to the perpetrator and told them to stop. However, one in three (32%) reported that the teacher or other school staff had not taken any action.

Children need positive models and valid information about LGBTI+ issues, which are scarcely available in the Hungarian public school system. Our interviewees also talked about how political propaganda prevents many schools and teachers from freely talking about LGBTI+ topics, and the general unaccepting climate is more and more characteristic of schools as well.

2.1.2. Good practices

There are civil society organizations that offer programs for schools and professionals working with children in educational settings. The *Diversity Education Working Group*¹⁶ is a working group formed by organizations running educational programs to organize a campaign called the School Diversity Week (inclusive of LGBTI+ themes) each spring. For this event each participant is provided a package with campaign materials. The package includes a collection of lesson plans for teachers, educational videos and a booklet for students and other promotional materials such as stickers, posters and leaflets. The aim of the campaign is to tackle bias based bullying and harassment among students. They also provide resources on their website.

¹⁶<https://sokszinusegoktatas.hu/>



The “Getting to Know LGBT People”¹⁷ program has been running since 2000, and offers their programs for schools (both teachers and students). In their workshops they introduce concepts related to being LGBTI+ through personal stories and by the use of interactive activities. Because of the current political climate their invitations are decreasing because school boards are afraid of backlash.

Hintalovon Foundation’s Yelon program¹⁸ offers an LGBTI+ inclusive sexual education program, and the Foundation¹⁹ operates a legal program for schools to optimize children's rights in their institutions.

2.1.3. Training needs

The need for reforming the system of teacher education did arise in the survey and the interviews as well. There is currently no mandatory training for teachers, school psychologist, school social workers on LGBTI+ awareness. EötvösLoránd University offers two courses on diversity for teaching students in which LGBTI+ topics are mentioned, and Háltér was once invited to present a class for future school psychologists (based on its training activity for in-practice school psychologists in 2019). Teachers need practical information, tools they can use and information on where to turn for help. The professionals usually do not know the relevant terminology, and talk about lack of information.

2.1.4. SWOT analysis of Education in Hungary

Strengths

- Discrimination based on sexual orientation and gender identity in school settings is forbidden by legislation
- There’s a growing number of school staff (teachers, school psychologists and social workers) who know LGBTI+ students and are interested in discussion and training

¹⁷<http://melegsegesmegismeres.hu/english/>

¹⁸<https://yelon.hu/>

¹⁹<https://hintalovon.hu/en>



- School psychologists attend regular meetings in their district to get support

Weaknesses

- School psychologists are practically not available (there is one part time psychologist for 500 children)
- Politicians promote very restrictive and heterosexist “family values”
- The educational system is very centralised, school directors cannot make their own decisions
- There are no effective anti-bullying protocols at most schools

Opportunities

- Children can learn about diversity and minority groups in school settings
- There are NGOs that offer free programs and training
- University teacher and psychologist training seems to be more interested in teaching about diversity and LGBTI+ topics so the new generation of teachers and school psychologists may be more sensitized

Threats

- Current political atmosphere, extremist attacks
- The educational sector is seriously underfunded, it is difficult to motivate school staff

2.1.5. Quotes

“ I was worried because of his peers, but no one hurt him, none of his classmates. Whatever harm was done, it came from a teacher, or from the education authorities, the church”.(Parent).



“An alternative and inclusive school is not a guarantee either... These things are so rooted. Teachers talk about girlish coloring pages and boyish coloring pages. I went into a discussion on that. I asked them how are these things decided? They said: edgy or softer, there are boyish colors and girlish colors. They didn’t have a clue that these things are defined by culture, they didn’t even think about that. There’s total lack of knowledge...”. (Teacher).

“Gender expression is quite accepted here. We have two trans students now and we used to have more. One of them is a crossdresser, he uses a male name, but wears women’s clothes and makeup. There are conservative colleagues who would smile or shake their heads...The other is a trans boy, he asked everyone to use his chosen name at the beginning. The parents had not talked to all of the teachers, so the PE teacher, a man in his fifties, who had never seen anything like this, was surprised when he stood with the boys. But he talked to the parents and and they discussed it”. (Teacher).

2.2. Health

2.2.1. Needs of LGBTI+ and gender non-conforming children

The Hungarian healthcare system still has a very strong medicalizing/pathologizing view on LGBTI+ people. The main issue that LGBTI+ children face in healthcare settings is the lack of inclusive services and safe spaces. The attitudes of the individual professionals vary, some of them have the appropriate knowledge and others are accepting but without the proper terminology their use of language might still be non-inclusive. There are also homo- and transphobic health professionals.

Public healthcare is free, but waiting lists are long even for children. (For example the waiting list for ADHD diagnostics can be more than a year long.) Most Hungarian citizens cannot afford private healthcare even though plenty of private services are available.

Trans children face the most difficulties in healthcare settings.

2.2.2. Good practices

There are no global campaigns on LGBTI+ health in Hungary, most of the awareness raising is done in the field of mental health. In the field of youth mental health the work of *Kék-Vonal Child Crisis Foundation* is very important. They operate a hotline that takes 30.000 calls yearly, out of which



approximately 400 are directly about gender identity and sexual orientation. *Yelon*, mentioned above, operates a chat for children and parents on questions about sexuality, relationships, body, soul and other topics. *Háttér Society* also operates an information and counselling hotline but callers are mainly adults, around 4% of their calls are made by youth under the age of 20.

The Hungarian Psychological Association has an LGBTQI section since 2013, they translated and published the APA Guidelines on psychological work with LGBTI clients and they publicly stand against conversion therapy.

Apart from the mental health field *Háttér Society* has a promising collaboration with the Association of Hungarian Public Nurses. In this framework one accredited training for nurses on LGBTI+ topics has been held.

Háttér Society coordinates a European Commission funded project for creating a more inclusive healthcare. The *Open Doors* project will provide trainings and guides for healthcare professionals.

The *Hungarian Medical Students' International Relations Committee's* regional groups have regular events and inner training on LGBTI+ topics and they offer LGBTI+ inclusive sexual education to schools.

2.2.3. Training needs

"We didn't get any education on this. I feel a big gap there." This is the general impression of healthcare professionals. The core curriculum includes some LGBTI topics but those are mostly related to HIV/AIDS or STIs. At the medical university communication courses and human rights courses are offered, but they cannot cover all aspects.

"I started self educating, I went to a sensitizing workshop. I thought if I can educate heterosexual children I could do it for children with other sexual orientations as well". (School nurse).

According to our interviewees professionals working with children should be educated on LGBTI+ topics and attend sensitizing workshops. *"Adults are accepting as well, but their information and professional knowledge are not up to date."*



2.2.4. SWOT analysis of Health in Hungary

Strengths

- Public healthcare is free
- Specialised children's hospitals
- School psychologists and public nurses working in schools

Weaknesses

- Healthcare curriculum does not include LGBTI topics
- Professionals do not have specialised knowledge
- Centralized, some services are not available in every region
- Long waiting lists
- School psychologists overburdened

Opportunities

- Professionals have compulsory trainings, if accredited they would attend LGBTI related courses
- Nurse system allows nurses to follow the development of the children from pregnancy, they could provide information on LGBTI topics for new parents to enhance family acceptance as well

Threats

- Health sector is underfinanced



- Infrastructural issues
- Young professionals choose to work abroad

2.2.5. Quotes

“We always focus on the given issues, but it’s hard, because if a girl comes in who looks like a girl, one unconsciously identifies girls with girl problems and boys with boy problems. But it’s not black and white”. (School nurse).

“Our job is to help them. I talk to them about topics that are in my competence: genitals, the body etc. My task is to support them to an extent I am able to”.(School nurse).

“I have colleagues who ask questions, but they do not always accept what I say. Recently the question of being trans emerged. I said that whoever identifies as one, this should be accepted. Someone else said that gender dysphoria is a must, and someone is only trans if they get an operation”. (Child Psychologist)

2.3. Family

2.3.1. Needs of LGBTI+ and gender non-conforming children

Family acceptance is still an issue for LGBTI+ and gender non-conforming children. Rejection experienced by their closest relatives can be a risk factor for many mental health issues i.e. depression, anxiety, self harm, suicidal behaviour. When asked about the areas that lack services for LGBTI+ children, most respondents to our survey named housing (30%) parents’ support (23%) and social support for children (18%).

“...my son talks about friends rejected by their families. He even brought them home and they told me that they were afraid of talking about this at home or they were rejected. In the parents group I saw that there is acceptance as well. I see a half-half ratio”. (Parent).

According to one of the interviewees anxiety of the parents can prevent them from dealing with these situations appropriately. Children have to educate their parents. But children themselves



also often lack information, especially those living in state care. Family care facilities should have posters and infographics to show children and parents that these topics are not taboo.

2.3.2. Good practices

A self-organised group for parents of LGBTI+ children started on social media in 2016. Now their private Facebook group called Parents and Supporters of LGBTQ persons has 650 members, including family members, LGBTI+ persons and allies. With the cooperation of *Háttér Society* since 2018 supporting parents have monthly support groups to help other parents and their children. *Háttér* published a booklet for parents with useful information and advice (*Parents under the rainbow*). Together with Budapest Pride an award winning short film was also produced with parents' personal stories.

Since 2018 *Háttér Society* annually organises two Family Days with community programs for LGBTI+ youth and their families to enhance family acceptance, raise awareness and provide information.

Budapest Pride runs a campaign for coming out called “*This is me*”, they provide supportive materials for coming out (e.g. a handbook and videos).

Háttér Society translated and published a guide for parents of intersex children: “*Supporting your intersex child*” originally edited by IGLYO, OII Europe and EPA.

2.3.3. Training needs

There is a general lack of information both on the families' side and on the side of professionals. Professionals not only need information but means for applying them as well.

LGBTI+ youth and their problems are usually invisible, professionals need methods to help them open up and articulate their feelings. Youth groups could be a method for engaging young people.

Professionals who have knowledge on LGBTI+ topics lack support in practice. Some talked about the need for thematic supervision.



Professionals at child protection services and at children's homes need proper education and sensitising on LGBTI+ issues. This bears great importance as they provide the social environment and opportunities for socialization that a family would in other cases.

2.3.4. SWOT analysis of Family in Hungary

Strengths

- Family care centers with complex teams to help families
- Families with LGBTI+ children are getting more visible

Weaknesses

- Public services are harder to access in rural areas
- Lack of professionals
- Rejection is present in a high number of families

Opportunities

- Professionals working in the family care sector are eager to learn
- NGOs provide resources to support families (booklets on coming out, information for parents) and also for professionals working with families (trainings, handbooks)

Threats

- Political communication about families excludes LGBTI persons
- Public family care services are underfinanced
- Child protection services are not efficient



- Child abuse is underreported, we do not know the real numbers

2.3.5. Quotes

“He had to stay at a dormitory, but he started dating a girl. And as he also had to live at the girls’ quarters, they forbade this. They said they had to treat this as a lesbian relationship and that was forbidden. A parent said that they would take their kid from this student dormitory because this is contagious... At last we got him out of there”. (Parent).

“It would be good to train professionals, but the parents should get training as well. Books and leaflets would be needed.” (Professional working in child protection)

“On the level of society the problem is the lack of education that these are real things and children are not responsible for them. Children dealing with these also have a difficulty with expressing what is happening to them”. (Parent)

2.4. Public spaces

2.4.1. Needs of LGBTI+ and gender non-conforming children

LGBTI+ and gender non-conforming youth do not have many places for safe socialization and for developing personal connections. They are usually afraid to take part in public events and special opportunities uniquely for them are rarely available.

One interviewee from the field of sport mentions that sport culture, especially football is still very closed and therefore gives opportunity for sexual and other types of harassment.

Professionals think it is important to talk about gender and gender identity at an early age so children can familiarize themselves with the topic and have their own ideas on it. After school programs and spaces might even be better places for this than schools.



2.4.2. Good practices

One of the interviewees who provides after school activities for children has a session on gender in her curriculum to talk about stereotypes. It is important to show children that their preconceptions are not general truths. Her point of departure is that every group has children who do not fit into boxes, and it is important to address these subjects.

2.4.3. Training needs

Besides general knowledge on terminology and basic communication skills, professionals need practical knowledge on how to help and when to help. They need education to know their competences and to realize which aspects they should work with.

Adults should be prepared to deal with discrimination, harassment and bullying among children. Professionals should be able to teach kids that diversity and acceptance are important values.

2.4.4. SWOT analysis of public spaces in Hungary

Strengths

- There are youth community places offered by family care centers
- Many after school activities like sports etc. are accessible for children

Weaknesses

- There is no focus on LGBTI+ youth
- No thematic programs
- Sport is still sexist in Hungary
- Rural areas have less opportunities
- LGBTI+ youth are invisible



- No protocols

Opportunities

- Professionals working at public spaces are eager to learn
- After school activities can engage youth more

Threats

- LGBTI topic are taboo at most public places
- The need for LGBTI+ specific programs has not emerged yet, and the general atmosphere will probably prevent it from doing so

2.4.5. Quotes

“Clothes, music, everything that belongs to finding one’s identity is “punished” if it differs from the mainstream”. (Sports professional)

“Boys with long hair get picked on. What is this girly hairstyle etc.” (Sports psychologist)

“At the study group I do a sensitizing art therapy session about gender stereotypes. At the ages 6-7 there are interesting things: in the end we didn’t find anything that was only girly or boyish, they told a counter-example for everything”. (Psychologist).

2.5. Media

2.5.1. Needs of LGBTI+ and gender non-conforming children

Media has an important role in presenting diversity and communicating acceptance.

Many people do not have personal experiences with LGBTI+ people, and children do not see LGBTI+ adults so that they can imagine what their lives would be like as adults.



2.5.2. Good practices

The *Hungarian LGBT Alliance* published a booklet for representatives of the media on inclusive language use which can be downloaded from their website.

Many NGOs have media campaigns, for example *Budapest Pride* published videos about coming out, and *Háttér Society* had a media campaign on rainbow families (public posters, video, newspaper advertisements) in December 2019.

The *KékVonal Child Crisis Foundation* and *UNICEF Hungary* have been running an anti-cyberbullying campaign called “*You are not alone*”, involving influencers and celebrities to engage young people on social media.

2.5.3. Training needs

Media professionals need to be up to date with inclusive language, terminology and information.

2.5.4. SWOT analysis of Media in Hungary

Strengths

- Many individual media platforms
- Informational sites on LGBTI+ topics available

Weaknesses

- Social media can be a platform for cyberbullying
- Children are not taught to check the validity of information they see in the media

Opportunities

- With the use of social media and other internet platforms children and young adults are easier to reach



- Articles could give visibility to LGBTI+ topics
- Media campaigns can be used for awareness raising

Threats

- Most mainstream media is run by the government and spreads anti-LGBTI+ stances

2.5.5. Quotes

“In the media a lot more celebrities are coming out, this is important because of the visibility. More TV series etc. include and show LGBTI+ people. But there are negative aspects of publicity as well: media outlets that focus only on leather thongs when they show the Pride will not bring the community closer to uncle John, and he should see all the average people there as well”. (Nurse).

“They should be better represented in the media, gain visibility. People like things that they know better, if they saw more of this, they would be more accepting.” (Nurse)

3. Overall evaluations

According to the LGBTI Survey (FRA, 2019) Hungarians have their first thoughts of being LGBTI at the age between 10-18. 26% of trans people realize that their gender identity does not match their gender assigned at birth between the ages 10-14 and 15% between the ages 15-17. More than one third (37%) of LGB people had their first realisations of being LGB between the ages 10-14 and 27% between the ages 15-17% and 36% of them came out first in the above mentioned age range (10-17). 29% of trans people have not come out to anybody yet, but 26% came out first as trans between the ages of 10-17. From these data we can see that coming out can happen at an age range when children are very sensitive to the reaction and opinions of others, especially important others.

At this age schools and families are the main areas of socialisation, and the impressions and experiences children get from these institutions are essential in the development of healthy self-esteem, self acceptance and coping mechanisms. Negative effects are further strengthened by experiencing the general attitude of society towards them.



In Hungary the general attitude towards LGBTI+ people (strengthened by politicians and state-owned media) is growingly hostile. However all of our participants in the interviews told that the situation has become better in the last 10 years, mostly because of more people (and youth) coming out and having an impact on their communities. According to the Eurobarometer²⁰ (2019) only 48% of Hungarians think that gay, lesbian and bisexual people should have the same rights as heterosexual people. This percentage is lower than the one recorded in 2015.

“I’ve been working for 4 years. Acceptance by peers has definitely increased. Other aspects haven’t changed much. It is good that more people are out. They usually say that nowadays there are more LGBTI+ youth. I always remark that there aren’t more, they are just braver and come out”. (Psychologist, healthcare).

“In the last ten years the situation got much better: the students are more expressive, they come out. At the same time there is a big setback at official communication. Sensitizing is of primary importance. This should be done at schools because the parents will not do it.” (Teacher)

The LGBTI+ community is under constant attack from the right wing conservative government. Many politicians and their supporters in media outlets are openly homo-, bi- or transphobic. They also use the “pro-family” and “anti-gender” rhetoric to position LGBTI+ people as those who “attack family values” and “traditional sexes”. In May 2020, the Hungarian Parliament passed legislation banning legal gender assignment.

This general anti-LGBTI+ attitude has its effect in all five areas mentioned above. Older professionals are still stuck with the pathologizing view of LGBTI+ persons. Because these topics are underrepresented in the training of professionals they often do not have the knowledge and information to appropriately support LGBTI+ children. This is reflected in the information gained from our interviewees and the survey results, too. 78% of survey respondents had not have LGBTI+ topics included in their training. 50% had attended some kind of training provided by mostly NGOs. 37% of them think that professionals not getting appropriate training on LGBTI+ issues makes access to educational, health and social services more difficult for LGBTI+ youth. Professionals need training on basic terminology (e.g. the difference between sexual orientation

²⁰ https://ec.europa.eu/info/sites/info/files/ebs_493_data_fact_lgbti_eu_en-1.pdf



and gender identity) and inclusive communication, too. 75% of our responders would take part in sensitisation and anti-bias training if it was available.

Against all odds, many NGOs address these issues making resources and even trainings, workshops available for professionals and their institutions. However there are still only a number of professionals and institutions who actually use these opportunities. This might be because of the lack of knowledge on available training or because of fear from backlash.

About half of the respondents had knowledge on services that are available for LGBTI+ children. 27% and 18% of the programs mentioned were about mental health services or school programs respectively. Even though there are good initiatives for mental health support for children, most of these do not focus exclusively on LGBTI+ children. Education is the field that has the most programs focusing on LGBTI+ themes. Schools are where LGBTI+ children spend most of their days, and education institutions play an important role in their wellbeing and quality of everyday life. Through education and schools a vast amount of children could be reached, and successful programs could have high impact on the general acceptance of LGBTI+ and gender non-conforming children.

“The key to change are teachers. Children meet them the most. These topics should be integrated into high school curricula, or even 7th-8th grade. My son knew who was gay or lesbian, the teachers did not. So he was the only different one, just because a trans person is visible.” (Parent)

95% of the respondents think that gender diversity should be addressed at schools. 80% think it should be part of cultural education while 65% think it should be included in the curriculum, 75% think celebrating diversity weeks and days is a good method to bring up the topic.

From data gained through the surveys and from the interviewees we could map the main needs of LGBTI+ children. The fear of rejection (100%), lack of self-acceptance (96%), vulnerability to mental health issues (83%) and fear for their own safety (74%) were the main issues stakeholders highlighted. Feeling unsafe contributes to the underreporting of LGBTI+ youth issues therefore their problems and often themselves are invisible. The survey showed that professionals think that there is not just a lack of knowledge from the providers' side on gay-affirmative practices (37%) but also a lack of awareness (43,6%) on LGBTI+ issues.



According to the National School Climate Survey (Háttér Society, 2019) 66% of LGBTI children did not report harassments at all, most of them (56%) because they were afraid of coming out to their parents and/or teachers. Children in rural areas are more isolated with fewer opportunities to talk openly about their sexual orientation or gender identity. Access to inclusive healthcare or family support services is also scarce in rural areas. Family acceptance is still an issue for LGBTI+ and gender non-conforming children, however these cases are also invisible and are not officially reported to child protection services.

It is visible that in Hungary the level of general acceptance, legislation and the present political atmosphere are rather problematic for LGBTI+ people, and children are especially vulnerable. Public education, healthcare and family support services face financial and infrastructural difficulties, partly caused by overcentralization and an overwhelming governmental influence (often pressure). Even though there are supportive individuals, most institutions do not have the tools and resources to appropriately address LGBTI+ issues.





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