



# OPPORTUNITIES IN COMMUNITY-BASED CHILD SAFEGUARDING

RESEARCH REPORT

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# **OPPORTUNITIES IN COMMUNITY-BASED CHILD SAFEGUARDING**

**RESEARCH REPORT**

## EXECUTIVE SUMMARY

Although protection of children against violence is a returning topic in public discourse, it is only given more attention when tragedy strikes. When this happens, we tend to focus on responsibility, mistakes and failures. However, we must recognize that protecting children is a shared responsibility of our society. Children's safety depends on the environment in which they live, on the resilience of the communities to which they belong. The recent pandemic has shown the value of informal relations, and highlighted the importance of communities being prepared to prevent and respond to violence. **We believe that it is very important to develop child safeguarding policies that can be adapted to a local community and that can be implemented to enable these communities to protect children from violence.** In order to support them as effectively as possible, we have undertaken a comprehensive research to understand children's and adults' knowledge and views on violence.

We wanted to know what information children and adults have about abuse. What do they think about violence? Where do they get their information? Do they know where to turn to if they experience abuse? Who do they think is responsible for handling these cases? Which communities do they feel more responsible for and which would take stronger actions against violence?

**In order to get as detailed information as possible, the research was composed of three parts: an online questionnaire for adults, a focus group survey of a local community and a three-part online questionnaire for children.** This research report will present the main findings. We will use these findings to develop guidelines to support child protection in local communities. Each of the sections can be considered as independent research, but they also reinforce each other.

## **ONE SLAP IS NOT THE END OF THE WORLD?**

### **QUESTIONNAIRE FOR ADULTS ON VIOLENCE AGAINST CHILDREN**

The online questionnaire was open to adults over the age of 18, regardless of whether or not they have children. Our approach in this part of the research was that all members of the society have a responsibility to prevent violence against children. The aim of the online questionnaire was to find out how people in Hungary feel about violence against children, how much they know about it and where they get their information. We also wanted to know who they think is responsible for preventing and dealing with violence against children, are there groups that are more committed to the issue?

## **RESPONSIBILITY FOR CHILD PROTECTION IN COMMUNITIES**

### **FOCUS GROUP RESEARCH IN A LOCAL COMMUNITY**

Understanding how smaller communities can protect children against violence was essential in identifying child protection opportunities at the community level. Since, we belong to several communities throughout our lives (e.g. residence, work, religion, etc.), we had to narrow the focus: due to the pandemic restrictions, we studied a local residential community, that are definitely in contact in their daily routine life. We were curious how well the members of a residential community are connected to each other and what they think about the protection of children in their community. Who is responsible for child safety at the local level? What problems do they face in their community that threaten the safety of children? What solutions do they have? What do they think about their personal responsibility? Our research was carried out in a small town near the capital, where we conducted focus group interviews with local parents and child protection experts.

## **HOW DO YOU SEE IT?**

### **QUESTIONNAIRE FOR CHILDREN ON ABUSE**

Understanding children's views is essential in developing a child protection programme. That is why we wanted to find out how they behave in situations of abuse. Do they dare to act? How do they know what to do? Where do they turn to for help? With whom do they share what has happened? In general, what do they think about how supportive adults in their environment are? The online survey sought answers to these questions among children aged 13-17. We prepared 3 shorter questionnaires that could also be answered separately. The first two questionnaires contained imaginary situations describing everyday incidents of abuse. In the first questionnaires we asked whether they did anything in that situation or did not act (Do you speak up?). In the second, we asked whether they told anyone about it (Would you tell others?).

In the third questionnaire the Multidimensional Perceived Support Scale (MSPSS, Zimet et al, 1988) was used to assess who children could count on in their environment. Volunteer high-school students, the child rights ambassadors of the Hintalovon Foundation, contributed to the research.

**One of the key findings of the research**, which is essential when designing a community-based child safeguarding programme, **is the significant contrast between the intense interest and sensitivity to the issue of violence against children and the passivity.** While the number of responses (10,887) to the online questionnaires was record high, the focus group part (which required more commitment, as it took more time) was less interesting, and it was difficult to recruit participants. The contrast was also reflected in the finding showing there was a demand from the public for more information on the topic, but focus group participants sometimes experienced lack of interest in the informative programmes available. The lack of knowledge is a barrier to identifying abuse and to act against it.

**Based on the findings of the research, there is full agreement that sexual abuse, serious physical abuse and neglect causing serious health problems are unacceptable forms of violence against children. However, less serious physical abuse (e.g. slapping), or verbal abuse were found to be more tolerated.** Around a quarter of respondents either fully or partially agreed that physical punishment of children is not good but sometimes inevitable. 15% believe that parents have the right to hit their child if it is important that the child does not repeat a certain behaviour. According to the respondents, in Hungary, 6 out of 10 parents use physical punishment and 70% think that people do not show interest when they see a parent slap their child. Verbal abuse **(e.g. shouting, shaming) was considered the least violent.** Furthermore, it was also perceived to be a common occurrence in society, with 7 out of 10 parents using verbal abuse as a form of discipline. A greater acceptance of verbal abuse was also reflected in the responses of the child survey - **in these cases children did nothing, or did not talk about it because they did not think it was a significant problem.**

Child rights ambassadors also confirmed that their generation has a high level of threshold for stimulus and recognises abuse in fewer situations than it happens. Children are mainly exposed to information about serious violence (e.g sexual abuse), and this leads to acceptance or lack of awareness of less serious violence. In conversations with adults or other information channels, they receive less information about what to do in more ordinary situations.

9 answers out of 10 respondents agree that all members of a community have the responsibility to protect children and that parents should not discipline their child solely as they see fit. However, in their opinion on average only 2 out of 10 adults would intervene or call the authorities if they witnessed violence against a child. It is important to underline that **the main obstacles to reporting** - notifying the authorities or a competent expert- **or intervening are people's passivity (60%) and their own protection (53% are worried what will happen to them if they speak up).** Avoiding making a mistake or getting the child in trouble was only identified as a possible obstacle. This

was also confirmed by the findings of the focus group, with participating parents also agreeing that people do not want to get in trouble because of this. Firstly, they fear negative consequences if they “intervene”, secondly, if the reaction is inappropriate, they would cause a worse situation in the family concerned. According to child protection professionals, in most cases people do not have enough information about being protected by confidentiality obligations in case of a report. However, if they do know, they fear being identified in a close-knit community and being judged for their intervention. These fears were reported to be felt not only by people in general but also by other professionals working with children, such as teachers. **According to parents, people only dare to intervene in communities where relationships are strong and members know each other well.** In cities, this does not necessarily coincide with neighbourhoods. In this respect, parent communities organised around children, such as friendships between parents of children attending the same kindergarten or school, seem to be more effective. This type of community can develop on the playground, where parents spend long hours with their children.

Empowering communities is also important **because most children will come forward against an offender their own age. They feel powerless in the face of adults and assume less conflict**, as confirmed by the child rights ambassadors. They only engage in conflict with adults if they have sufficient information about what they can do in these cases. The research shows that they tell other adults, mainly their parents, about abuse by an adult, and their friends about abuse by another child. They seek help from professionals (e.g. psychologist, psychological support) when it is very difficult to share the stories with others.

**The results show well that there is a significant lack of information on child protection among the adult population.** It is noteworthy that only half of the respondents assumed that the law requires everyone to report violence against children, and 10% were not aware that such a law exists. However, the majority of respondents knew that children can report cases of abuse, 30% had no idea what options children have in such cases.

However, the transfer of child protection information proves to be difficult. **The results of the focus groups show that traditional ways of disseminating information (e.g. leaflets, awareness-raising presentations?) often fail to achieve the intended purpose.** According to parents and professionals, **improving the relationship between professionals and the public would support the development of community-based child safeguarding, e.g. by way of regular informal programmes where professionals and parents could meet.** On the one hand, it is important that these programmes are held on a regular basis, and on the other hand, it is important that they do not create a burden for parents, as this may prevent them from coming back to subsequent meetings. Providing other services could be useful to motivate them to attend, e.g. it may be important to organize babysitting for the younger children. Local governments would be primarily responsible for organising such events: they would finance the programmes and take care of the main organisational tasks. In addition to local governments, parental communities could also play

an important role, for example in promoting these events to the other parents and in building active relationships between professionals and parents. They have specific information on child protection that they can share with other parents.

**Treating children as partners is key to implementing community-based child safeguarding.**

Experts participating in the focus group stressed the importance of building a well-organised peer network, as the findings of the child survey show that children tend to share their problems with friends rather than family.





# ONE SLAP IS NOT THE END OF THE WORLD?

ADULT SURVEY ON CHILD ABUSE

# INTRODUCTION

Protection from abuse is a fundamental right for all children, yet in 2020, more than 100,000 children were at risk of abuse or neglect. (Hintalovon Childrights Foundation 2020) Moreover, these cases are only the tip of the iceberg, as many more remain hidden for a variety of reasons. Tragic cases that end up in the media usually reveal that those around the child did not recognise the signs or did not intervene in time for fear of negative consequences, or did not know what to do, or ignored the warning signs, saying it was not their business. And in the face of minor violence, there is still a social acceptance of it, in the form of toxic misconceptions such as „a slap in the face is not the end of the world” or even „there are children who only understand from a beating”. Yet in Hungary, zero tolerance of violence against children has been in place since 2005, and numerous studies have shown that all forms of violence have harmful consequences for children’s physical and mental development. (Krug et al 2002, Cuartas et al 2021)

Ensuring a violence-free childhood is a social responsibility that also depends on the ability of the communities around children to recognise the problem and to be prepared to address it or prevent incidents of violence. To support them most effectively, we need to assess what people think violence against children means. To what extent do they find violent elements in parenting acceptable? What information do they have about how to deal with violence? What do they think about their own and society’s responsibility?

In order to get comprehensive answers to these questions, we launched an open online survey asking the Hungarian adult population for their responses.

# METHODOLOGY

## DATA COLLECTION

The online questionnaire was open to all adults aged 18 and over, regardless of whether or not they have children. Our approach in this part of the research was that all members of society should be involved in preventing violence against children. The questionnaire was promoted through social media, mainly in the form of paid advertisements, to ensure that it was as widely available as possible. The data was collected anonymously and the questionnaire did not contain any direct questions that could be used to identify the respondent.

## QUESTIONNAIRE

To achieve our research objective, the measurement tools tested by UNICEF (UNICEF 2017) and NAPCAN Australia (NAPCAN 2010) were the most suitable, so we used them as a model for the research questionnaire. The experience of completing the questionnaire was discussed in a focus group and the final questionnaire was developed taking into account the respondents' feedback.

The questionnaire consisted of 4 main parts - 1) knowledge, 2) attitudes, 3) beliefs and 4) responsibility - and a demographic block, thus it not only measured the prevalence and opinions of child abuse, but also collected data on the attitudes towards responsibility in case of violence and what information people have about what to do if violence against children occur.

## SAMPLE

During the data collection period between 10 March and 15 May 2021, **the questionnaire received a record number of responses, with a total of 10 877 valid responses.** While the online open call method does not allow for a representative sample, it does help to give a clearer picture of which groups of the adult population are most affected by child abuse.

76.8% of respondents were women and 23.2% were men, a similar trend to other online open call surveys. More than half of the respondents were in the 25-44 age group (25-34: 31.4%, 35-44: 27.6%), 17.2% were in the 45-54 age group and 11.5% were in the 18-24 age group. The smallest proportion of people were aged 55 and over, with 7.2% of those aged 55-64 and 5.1% of those aged 65 and over.<sup>1</sup>

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1

The limitation of the open call online data collection is that those without internet access or inactive users cannot be reached in this way. For example, older age groups have lower internet usage rates compared to younger age groups.

56.6% of respondents lived in a big city or its suburbs, 28.8% in smaller towns and 14.6% in a village or farm. In terms of educational attainment, the proportion of graduates (59.1%) and post-graduates (6.8%) was very high, i.e. two-thirds of respondents had tertiary education, which was significantly over-represented compared to the distribution of educational attainment of the Hungarian population. In terms of labor market activity, 71.8% of respondents were active, 11.9% inactive<sup>2</sup>, 9.9% were still studying and 6.4% were retired. Almost half (48.8%) lived in a household of 3-4 people and 39.6% in a household of 1-2 people. Only 12% lived in households with more than 5 people. Just over half of respondents (52%) had a minor child. 27.7% had 1 child, 16.8% had 2 children and 5.7% had 3 children. Only 1.8% of respondents had 4 or more children.

Around one third (34.3%) of respondents were professionals working with children, with the largest proportion (33.8%) of teachers completing the questionnaire. The proportion of respondents from other professions<sup>3</sup> working with children was ranging from 5 to 10%.

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2 unemployed, unable to work, on maternity leave

3 child protection professional, kindergarten teacher, health worker, psychologist, police officer



# RESULTS

## KNOWLEDGE

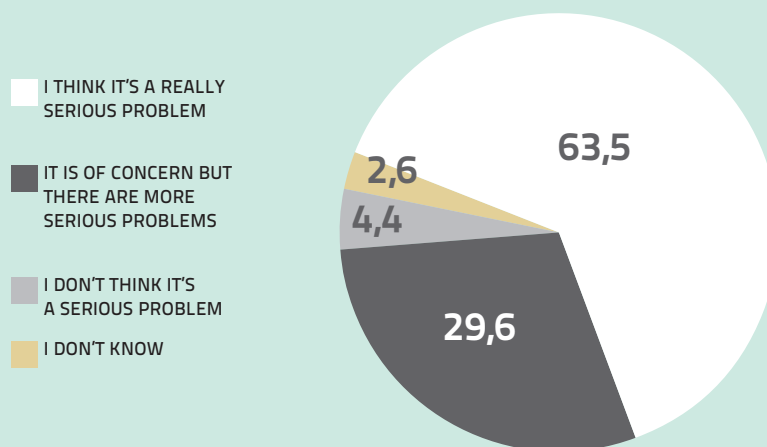
### PERCEPTION OF VIOLENCE AGAINST CHILDREN

**People associate the concept of violence against children primarily with its possible manifestations, in particular some form of physical abuse.** The three most frequently mentioned words were „beating“, „slapping“ and „abuse“. The responses also included a number of references to the accompanying phenomena and negative consequences of violence, such as „pain“, „fear“, „vulnerability“ and „humiliation“.

**Almost two-thirds of respondents (63.5%) think that child abuse is a very serious problem in Hungary** and slightly less than a third (29.6%) believe that, although it is a cause for concern, there are more serious problems. Only 4.4% of respondents think it is not a serious problem (Figure 1). There is a significant gender gap in perceptions of child abuse, with 69.8% of women saying it is a serious problem compared to 42.5% of men, and around the same proportion (41.8%) of men saying there are more serious problems. Men are also much more likely to say that child abuse is not a serious problem (12.5%), compared with a low proportion of women (1.9%).

FIGURE 1

TO WHAT EXTENT DO YOU THINK THAT CHILD ABUSE AND NEGLECT IS A SERIOUS PROBLEM IN YOUR COUNTRY?(%)



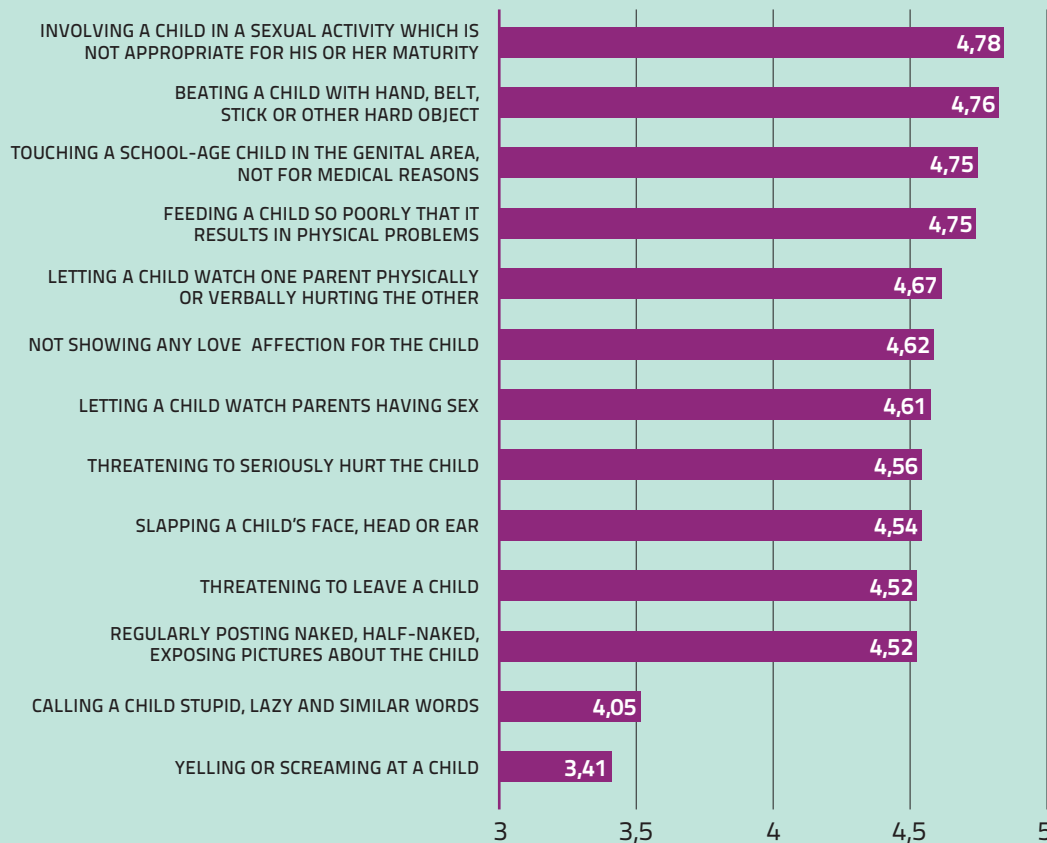
### PERCEPTIONS OF FORMS OF VIOLENCE AGAINST CHILDREN

In almost all the cases listed, respondents tended to agree that it was a form of violence against children (Figure 2). **While there was full agreement that sexual abuse, serious physical abuse and neglect causing health symptoms are forms of violence against children**, but also in the other cases listed, respondents tended to agree that this was a form of violence against children. There is also high agreement in cases where children witness domestic abuse or suffer emotional neglect. Respondents are also more likely to agree that threats of

abuse and abandonment, minor physical abuse and sharing intimate photos of the child are also forms of violence. **Verbal aggression is considered the least violent.** Although shaming (calling a child stupid, lazy, etc.) is on average more likely to be considered violence, many do not consider shouting at a child to be violence.

**FIGURE 2<sup>4</sup>**

TO WHAT EXTEND DO YOU AGREE THAT THE GIVEN SITUATIONS ARE FORMS OF VIOLENCE AGAINST CHILDREN?  
(AVERAGE)



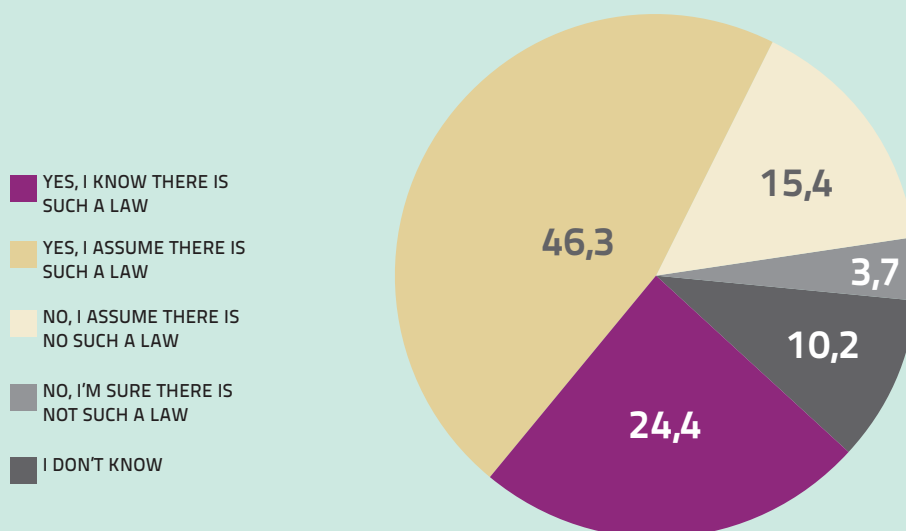
<sup>4</sup> Respondents were asked to rate on a scale of 1 to 5 whether the situation constituted violence against children, with a score of 1 indicating strongly disagree and a score of 5 indicating strongly agree. For this question, due to corrections to address the error in the data collection tool, the values shown are estimates.

## KNOWLEDGE ABOUT THE SIGNALLING SYSTEM

**Almost half of the respondents (46.3%) only assume that the law in Hungary requires everyone to report violence against children,** and only a quarter of the respondents (24.4%) are sure about this, while 10.2% do not know if such law exists at all. (Figure 3)

**FIGURE 3**

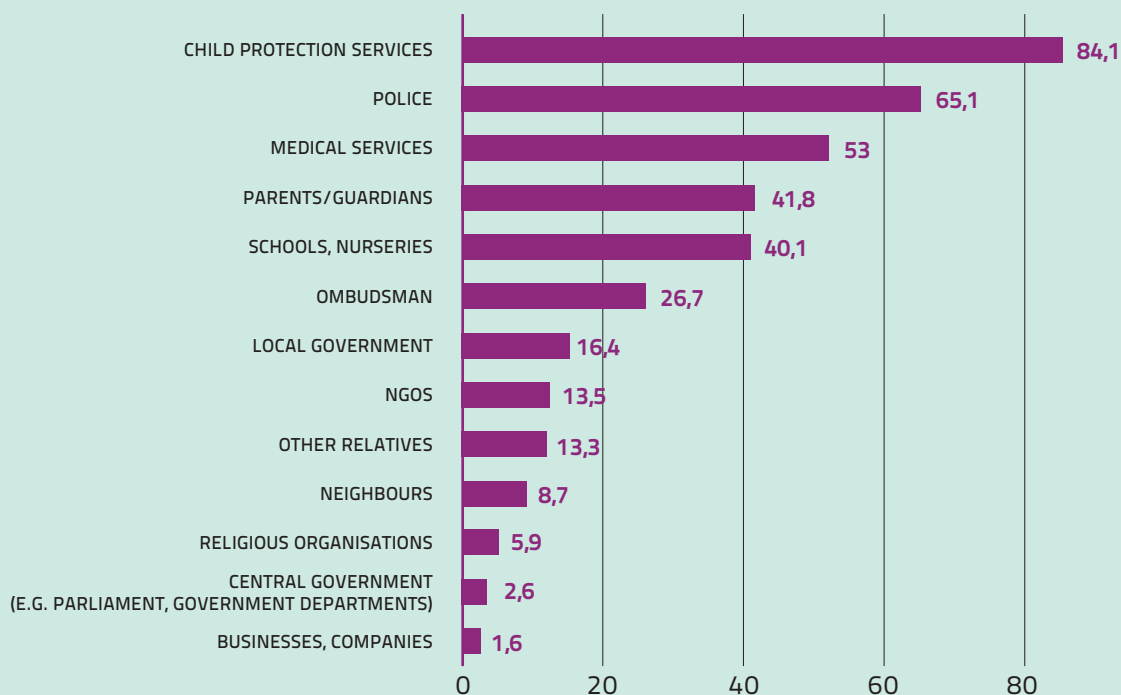
BASED ON YOUR KNOWLEDGE, DOES YOUR COUNTRY HAVE A LAW  
THAT OBLIGES PEOPLE TO REPORT A CASE OF VIOLENCE AGAINST CHILDREN?(%)



84.1% of respondents said that they should report to the child protection services if they encounter violence against children, 65.1% said they should report to the police and 53% said they should report to the medical services as well. 41.8% said they have a duty to report to a parent or guardian, while 40.1% said they should report to the school or kindergarten. The role of local government, NGOs, religious organisations and other relatives and neighbours was less mentioned. (Figure 4)

**FIGURE 4**

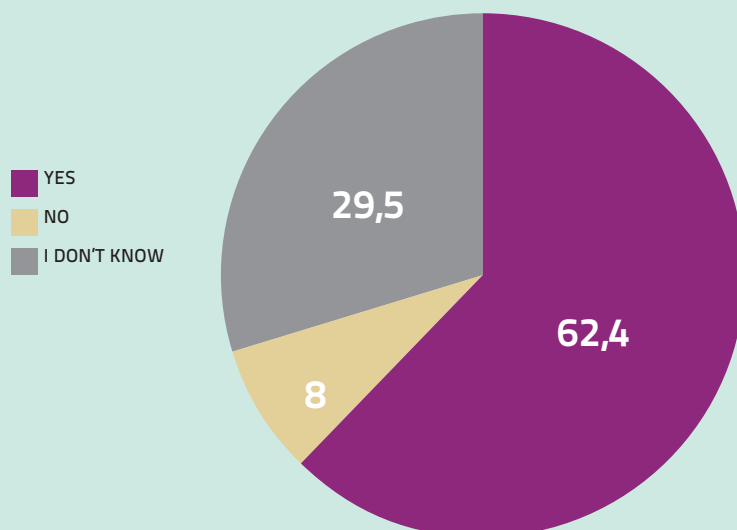
BASED ON YOUR KNOWLEDGE, TO WHICH PERSON(S)/ INSTITUTION(S) FROM YOUR COUNTRY SHOULD THE CASES OF VIOLENCE AGAINST CHILDREN BE REPORTED TO?(%)



62.4% of the respondents knew that a child could report a case of violence, but there was also a high percentage (29.5%) of respondents who did not know what options children have in such cases. (Figure 5)

**FIGURE 5**

BASED ON YOUR KNOWLEDGE, CAN A CHILD IN YOUR COUNTRY REPORT A CASE OF VIOLENCE? (%)





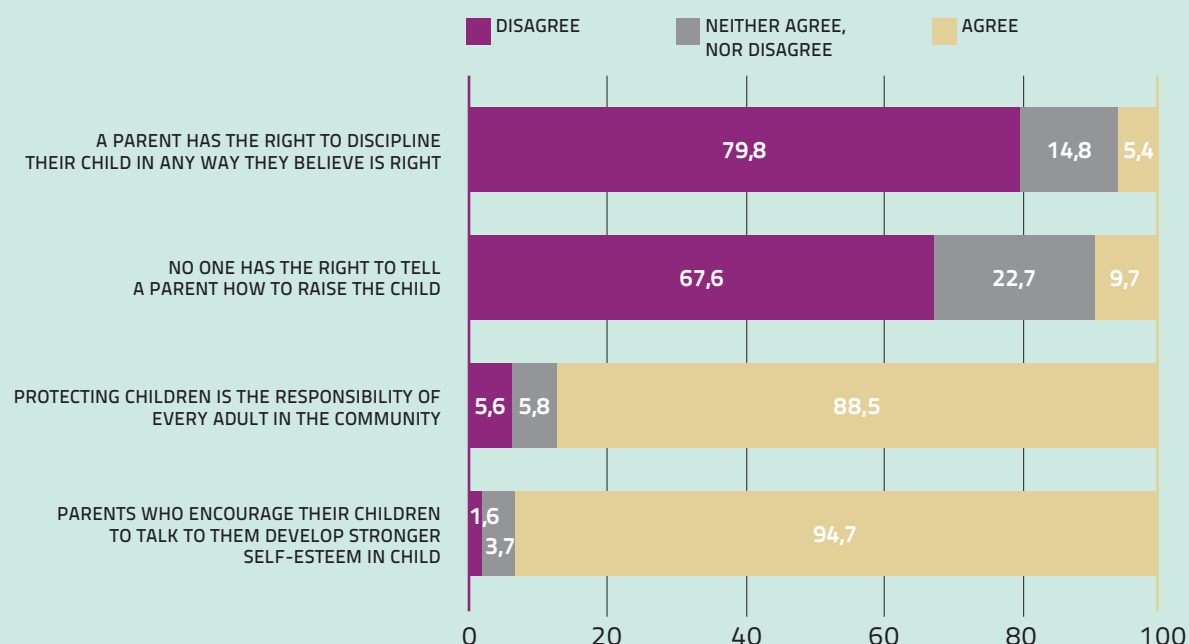
## ATTITUDES

### PERCEPTIONS OF FACTORS INFLUENCING CHILD-REARING AND DISCIPLINE<sup>5</sup>

**9 out of 10 respondents agree with the statement that it is the responsibility of all members of the community to protect children,** and in line with this, disagree that a parent has the right to discipline their child in any way they believe right, i.e. community and institutional norms should oversee parents' parenting practices to protect children. Nevertheless, 9.7% still think that no one has the right to tell a parent how to raise their child and 22.7% partly agree. Positive parenting methods that empower children are supported by 94.7% of respondents. (Figure 6)

FIGURE 6

HOW MUCH DO YOU AGREE WITH THE FOLLOWING STATEMENTS?(%)



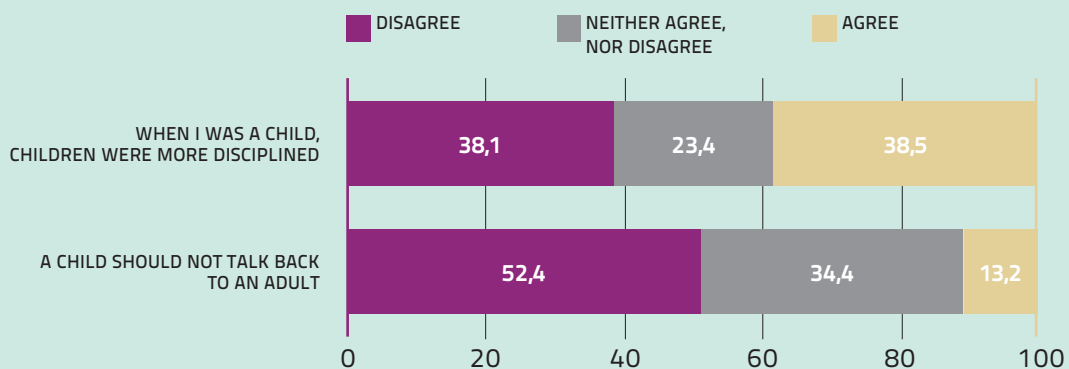
For tradition-oriented attitudes, half of the respondents disagreed that a child should not talk back to an adult (52.4%). And almost as many respondents agreed (38.1%) as disagreed (38.5%) with the statement „When I was a child, children were more disciplined“. (Figure 7) There was an interesting significant difference in terms of place of residence and gender, with men and those living in smaller towns and villages agreeing with these statements to a much greater extent than women and those living in large cities. 10.2% of those living in a large city agreed

5 For each of the questions presented in this chapter, respondents rated their level of agreement with each statement on a 5-point scale. A score of 1 indicated 'strongly disagree', while a score of 5 indicated 'strongly agree'. The results were processed by combining the scale into a 3-point scale (1) Agree = Strongly Agree + Rather Agree; (2) Agree and Disagree; (3) Disagree = Strongly Disagree + Rather Disagree)

that a child should not talk back to an adult, compared to 15.5% of those living in smaller towns and 17.7% of those living in a village. This was supported by 12% of women and 17.2% of men. 33.7% of those living in a big city agreed that children were more disciplined when they were children, compared to 44.4% of those living in smaller towns and 46.2% of those living in villages. This was the case for 36.6% of women and 44.9% of men.

FIGURE 7

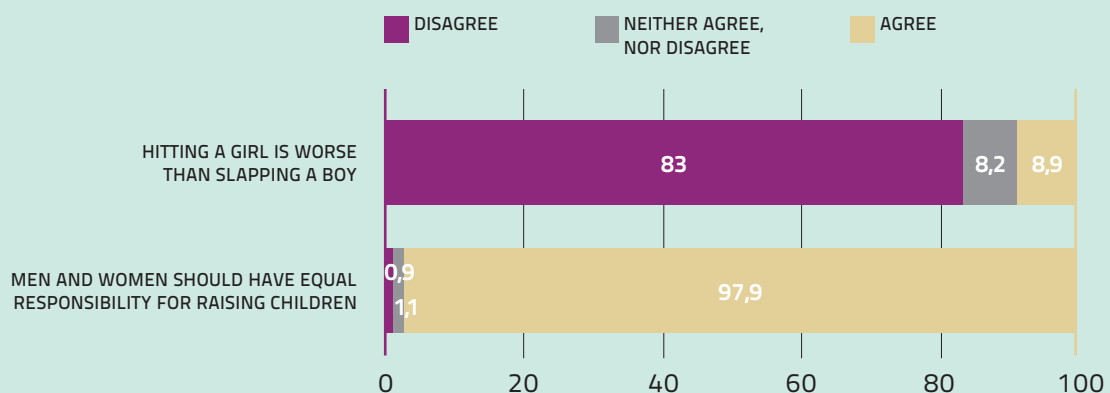
HOW MUCH DO YOU AGREE WITH THE FOLLOWING STATEMENTS?(%)



**Almost all respondents (97.9%) agreed that men and women have equal responsibility for raising children.** And 83.3% said it was just as bad to hit a boy as a girl. (Figure 8) However, there is a significant difference between men's and women's opinions on the latter issue. **21.8% of men agree that it is worse to hit a girl than a boy, while only 5% of women think the same.**

FIGURE 8

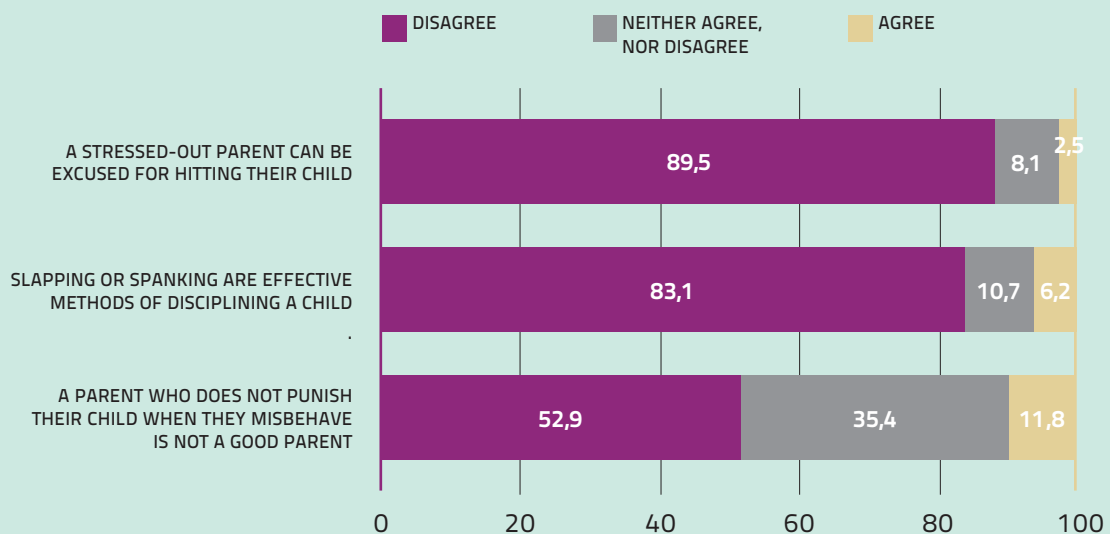
HOW MUCH DO YOU AGREE WITH THE FOLLOWING STATEMENTS?(%)



Regarding the statements on disciplining children, the majority of respondents do not consider physical punishment of children acceptable. **9 out of 10 respondents believe that a parent who uses physical violence cannot be excused even if he or she is very upset.** 83.1% of respondents do not believe that slapping or spanking is an effective method of discipline. In general, however, views on the use of punishment are mixed: although almost half of the respondents (52.9%) disagree that a parent who does not punish their child when they misbehave is a bad parent, there is a significant proportion (35.4%) who partly agree and partly disagree with this statement. (Figure 9) For the latter statement, there is also a significant difference by gender: 22.8% of men agree that parents who do not punish their children are not good parents, while only 8% of women think so.

**FIGURE 9**

HOW MUCH DO YOU AGREE WITH THE FOLLOWING STATEMENTS?(%)



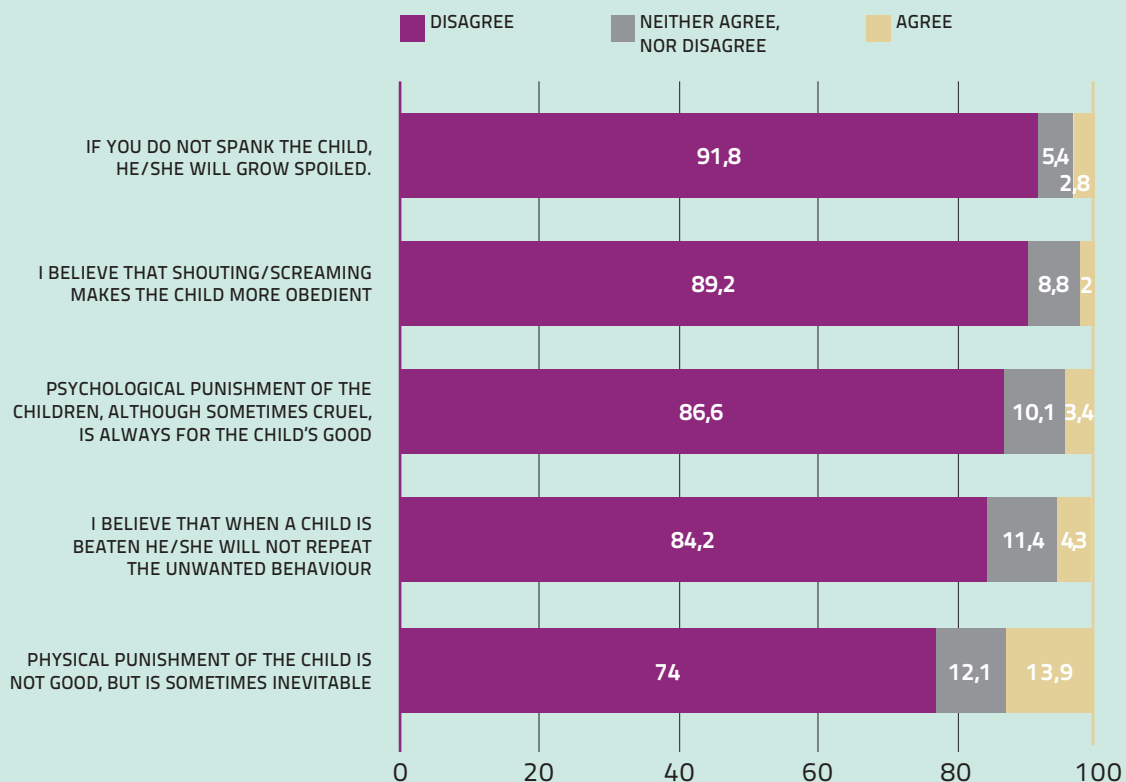
## BELIEFS

### HOW TO DISCIPLINE CHILDREN

**Overall, respondents to the questionnaire condemned the violent methods used to discipline children.** Around 90% disagreed that the lack of spanking makes children spoiled or that shouting and screaming make children more obedient. The majority of respondents also disagreed that psychological punishment would benefit children, or that children would not repeat the behavior for which they were punished after physical punishment. **However, about a quarter of respondents (26%) agreed or partly agreed (agree 13.9%, uncertain 12.1%) that physical punishment of children is not good but sometimes unavoidable** (Figure 10). The proportion among men was 41.8% (agree 26.7% uncertain 15.1%), while among women it was 22.2% (agree 10%, uncertain 11.2%).

FIGURE 10

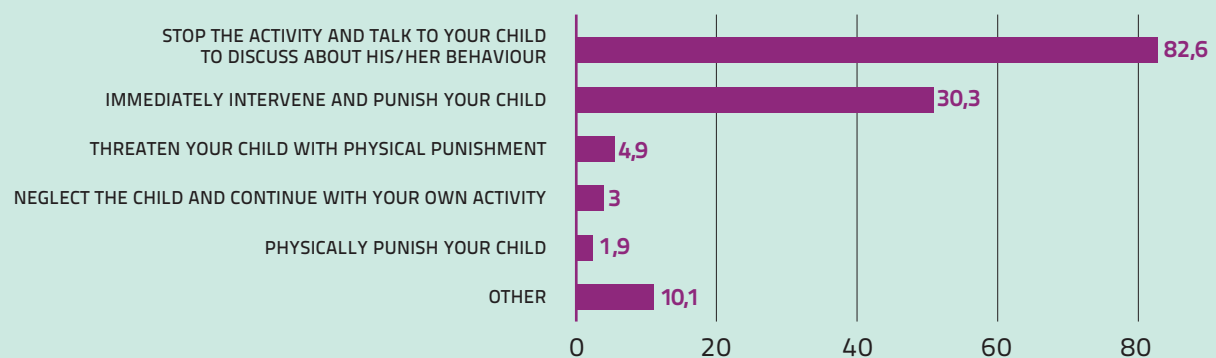
HOW MUCH DO YOU AGREE WITH THE FOLLOWING STATEMENTS?(%)



**Respondents who raise children also confirmed a preference for positive parenting methods in terms of their own parenting style and the expectations of their environment.** 82.6% reported that when their child misbehaves, they stop what they are doing and discuss the behavior with the child. 30.3% immediately apply punishment. Physical punishment or threats of punishment and ignoring the child are not common among them. (Figure 11)

**FIGURE 11**

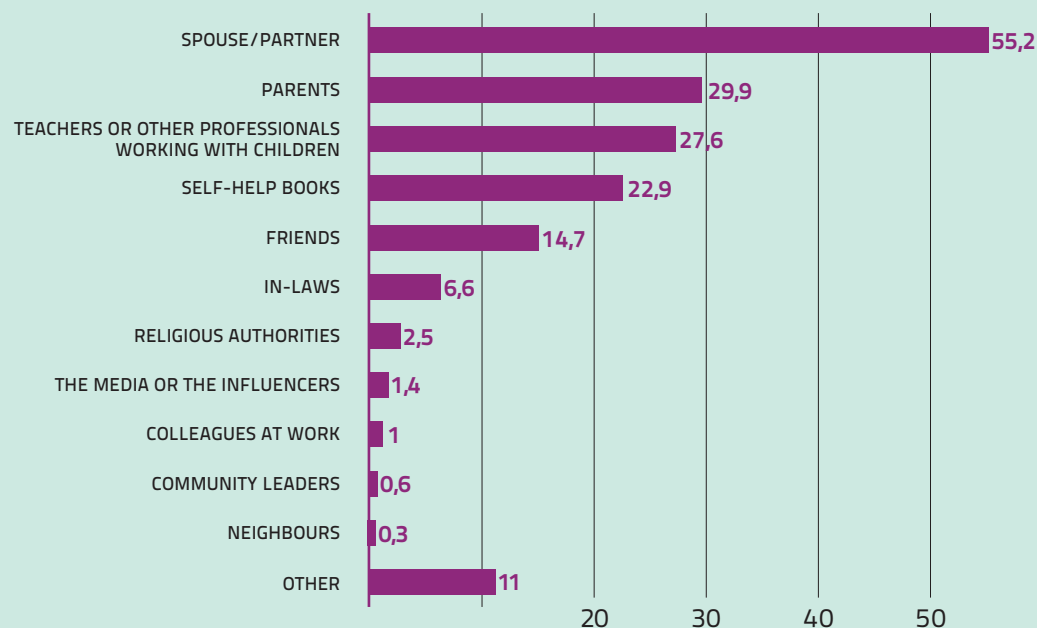
OTHER PARENTS/PEOPLE IN YOUR COMMUNITY, WHEN YOUR CHILD MISBEHAVES, EXPECT YOU TO: (%)



**The spouse or partner has the greatest influence on the choice of discipline methods used with children (55.2%),** followed by methods learned from parents (29.9%) and then the influence of teachers or other professionals working with children (27.6%). It is noteworthy that among respondents, reading self-help books is much more likely to influence their discipline methods than their immediate or wider community, e.g. partner's parents (6.6%) friends (14%), colleagues at work (1%) or neighbours (0.3%). (Figure 12)

**FIGURE 12**

WHEN IT COMES TO THE PRACTICES OF DISCIPLINING YOUR CHILD, WHO INFLUENCES YOU THE MOST? (%)

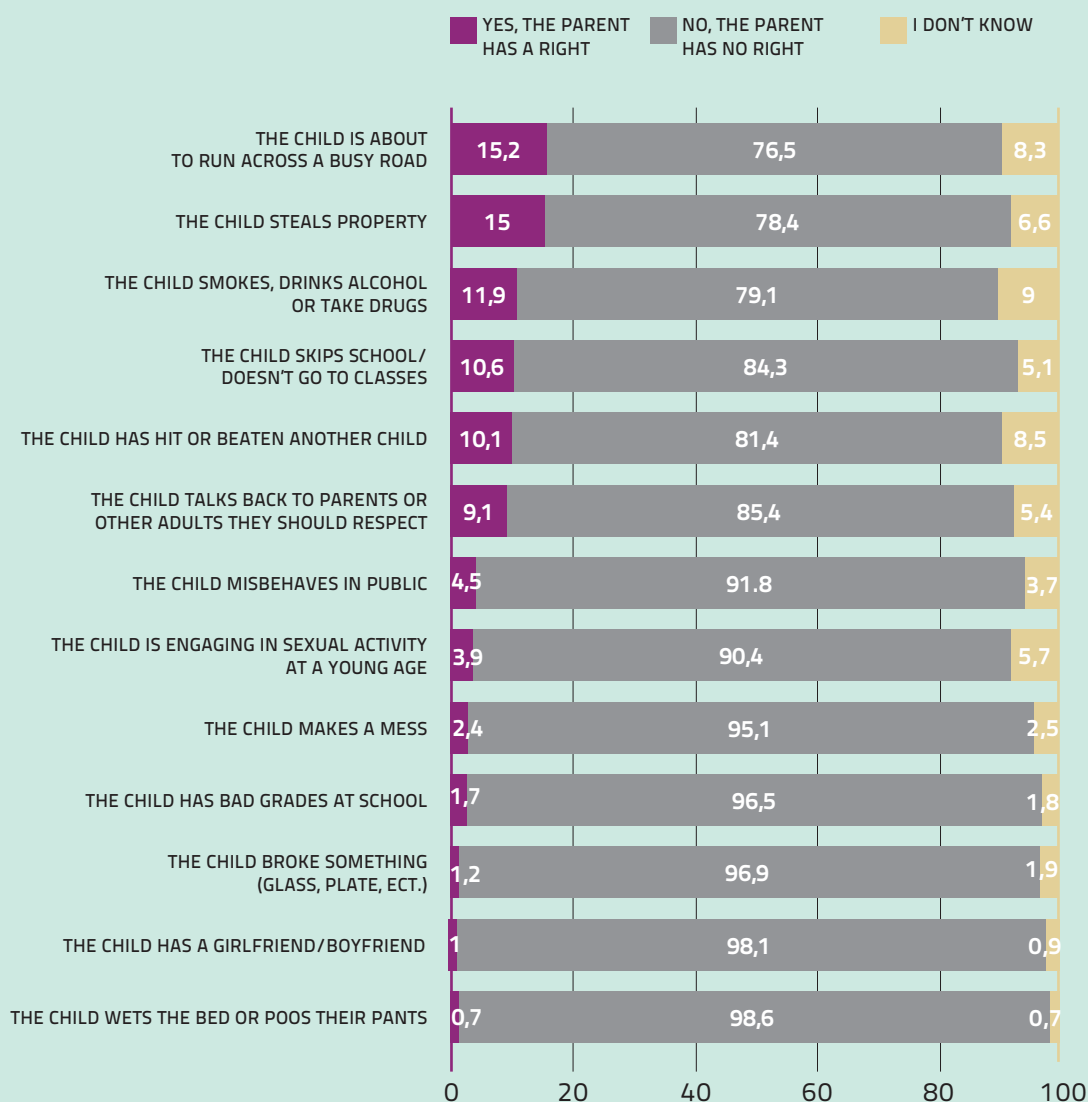


## USE OF PHYSICAL PUNISHMENT

In each of the situations listed, the majority said that parents do not have the right to hit their child. (Figure 13) However, they see physical punishment the most acceptable in situations where they do not want the child to repeat the behavior, for example because it endangers the child: 15.2% of respondents said it is legitimate to use physical punishment if the child runs across a busy road or commits a serious offence, e.g. steals something. Around 10% of respondents believe that physical punishment is also justified for certain deviant acts, such as smoking, drinking alcohol or taking drugs, skipping school or hitting another child.

**FIGURE 13**

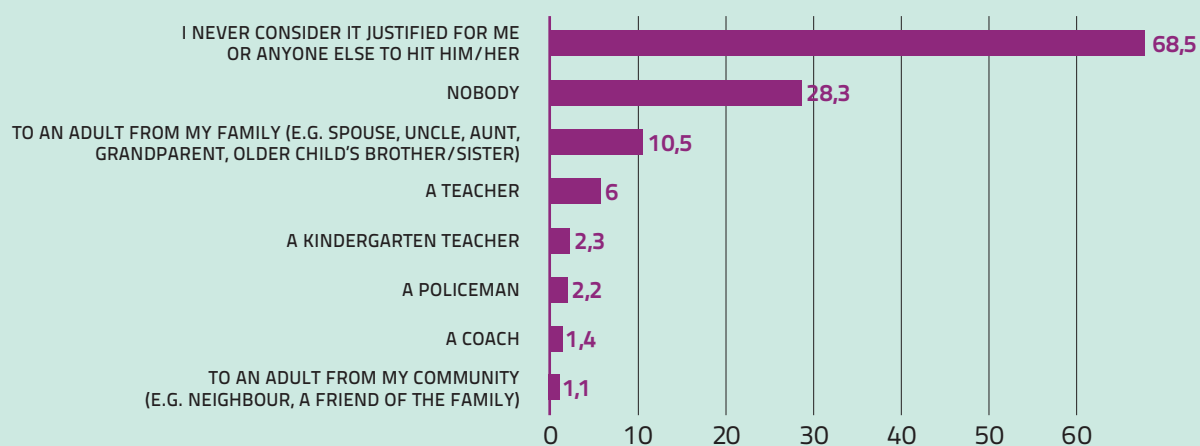
IN YOUR OPINION, IS A PARENT HAS THE RIGHT TO HIT HIS/HER CHILD IN THE FOLLOWING SITUATIONS(%)



**The vast majority of respondents do not consider it acceptable that they or someone else would hit their child:** 68.5% say it is not justified for them or anyone else to hit them in any situation, and 28.3% would not allow anyone to do so, even if they themselves used physical punishment. **Those who would give permission to others to do so would primarily allow adult family members (10.5%).** Among non-relatives, most (6%) would give permission to teachers to use physical punishment. (Figure 14)

**FIGURE 14**

IN SITUATIONS WHERE YOU THINK IT IS JUSTIFIED TO HIT YOUR CHILD,  
WOULD YOU ALLOW SOMEONE ELSE TO DO IT? IF SO, WHO? (%)

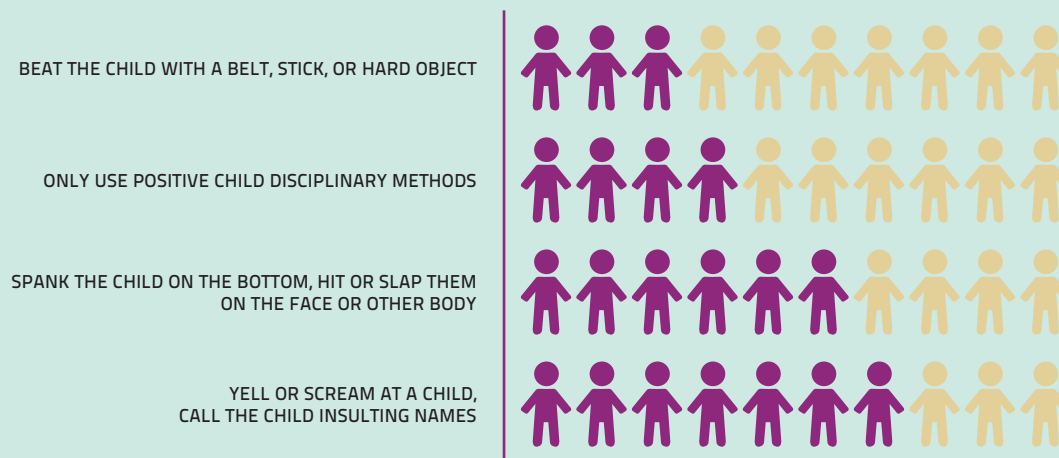


## JUDGING DISCIPLINARY PRACTICES

Based on the results so far, it was clear that the majority of respondents who filled in the questionnaire disapproved of violent disciplinary practices and reported that they mostly used positive child discipline practices. However, they believe that in Hungary, only an average of 4 out of 10 parents use this method as well. The use of severe physical violence is considered to be less common (3 out of 10 parents use it). **In contrast, spanking or slapping is thought to be more common, with 6 out of 10 parents using it, according to the respondents. Shouting and screaming at children is considered the most common, with 7 in 10 parents thought to discipline their child in this way.** (Figure 15)

FIGURE 15

HOW MANY OUT OF 10 PARENT WOULD YOU SAY USE THE FOLLOWING PRACTICES IN DISCIPLINING THEIR CHILDREN?

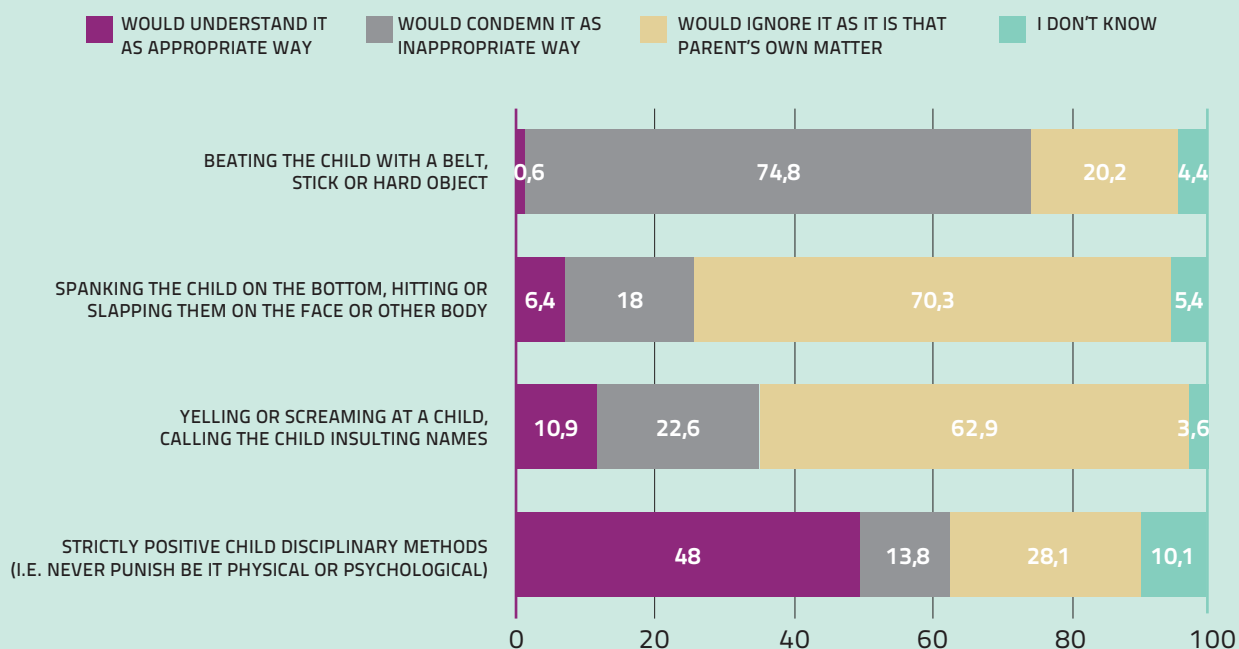




According to respondents, the majority of Hungarians would react with disapproval if they saw a parent using severe physical violence against their child (74.8%). However, **they believe that the use of minor violence or verbal aggression would be ignored by the majority, saying that it is the parent's own business (70.3% and 62.9%)**. Around half of the respondents (48%) think that people would respond favorably to the use of positive discipline methods. (Figure 16)

FIGURE 16

IN YOUR OPINION, WHAT WOULD BE THE ATTITUDE OF THE MAJORITY OF PEOPLE  
IN THE COUNTRY IF THEY SEE A PARENT...(%)



## RESPONSIBILITY

### REPORTING VIOLENCE

We measured respondents' sense of responsibility through three specific situations, and asked them to choose the three most likely things they would do in each situation. The first situation was the detection of physical abuse:

- 1) *„Your neighbor's 7-year-old child is often seen with bruises; you often hear yelling and screaming from the house and see that the child has a black eye.“*

The second case described severe neglect:

- 2) *„Passing by one of the neighboring houses, you would often see three children in the yard. They are skinny and always dirty. One of them, a child of about 10 years old, regularly asks you for money for food.“*

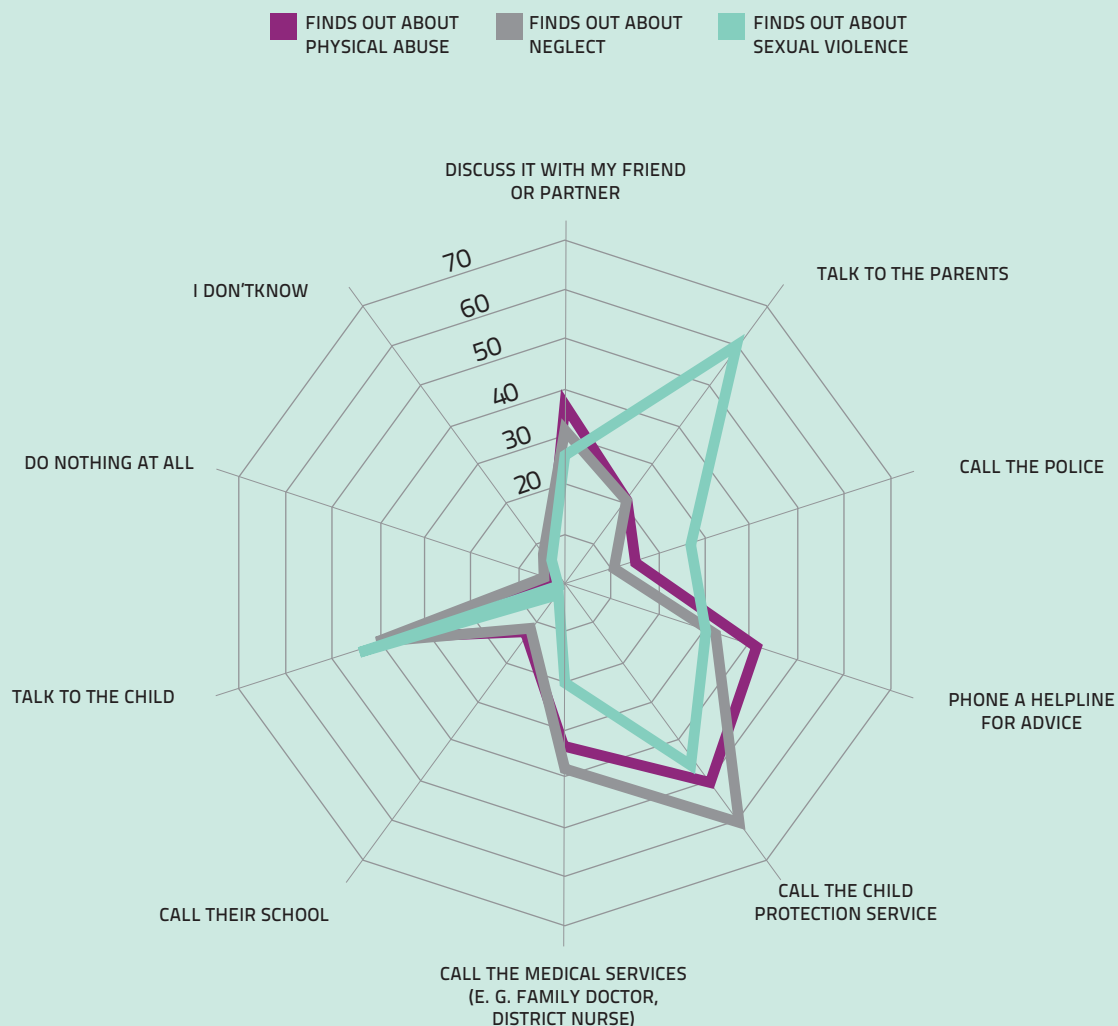
The third was a report of a sexual assault:

- 3) *„A 12-year-old child who is part of your extended family would tell you about being touched on the genitals by an adult relative.“*

In the case of a report of physical violence or neglect, respondents would primarily report it to the body responsible for child protection (50.6% and 61.1% respectively). In the case of physical abuse, there is a higher level of helplessness, as the second and third most likely options were to call the helpline for advice (41.2%) and to talk to a partner or a friend (37%). Just over a third (36.3%) thought they would talk to the child and a third (33.6%) would go to their family doctor or district nurse. Only 21.6% of respondents would try to talk to the parents and 15.7% would call the police. In the case of neglect, 39.4% would talk to the child first and 38.1% would contact the family doctor or district nurse. Around a third of respondents would contact a helpline (33%) or someone close to them (31.2%) for advice. In the case when they become aware of sexual violence, the reaction is thought to vary considerably, with a high degree of importance being attached to the fact that the disclosure is coming from a child familiar to them and that the parents are completely excluded as perpetrators of the violence. In this case, therefore, the respondents would primarily talk to the child's parents (61.2%), while 44.7% would inform child welfare services. In all cases, the proportion of respondents who thought they would do nothing or did not know what they would do in such a case was very low. (Figure 17)

**FIGURE 17**

WHAT WOULD YOU DO IN THE FOLLOWING CASE?



### ASSESSING WILLINGNESS TO REPORT

The willingness to report or intervene is considered to be very low in Hungary. According to respondents, 2 in 10 adults would intervene if they saw a parent using physical violence against their child. Also 2 adults would inform the authorities if they witnessed physical violence against a child in their neighborhood. (Figure 18)

**FIGURE 18**

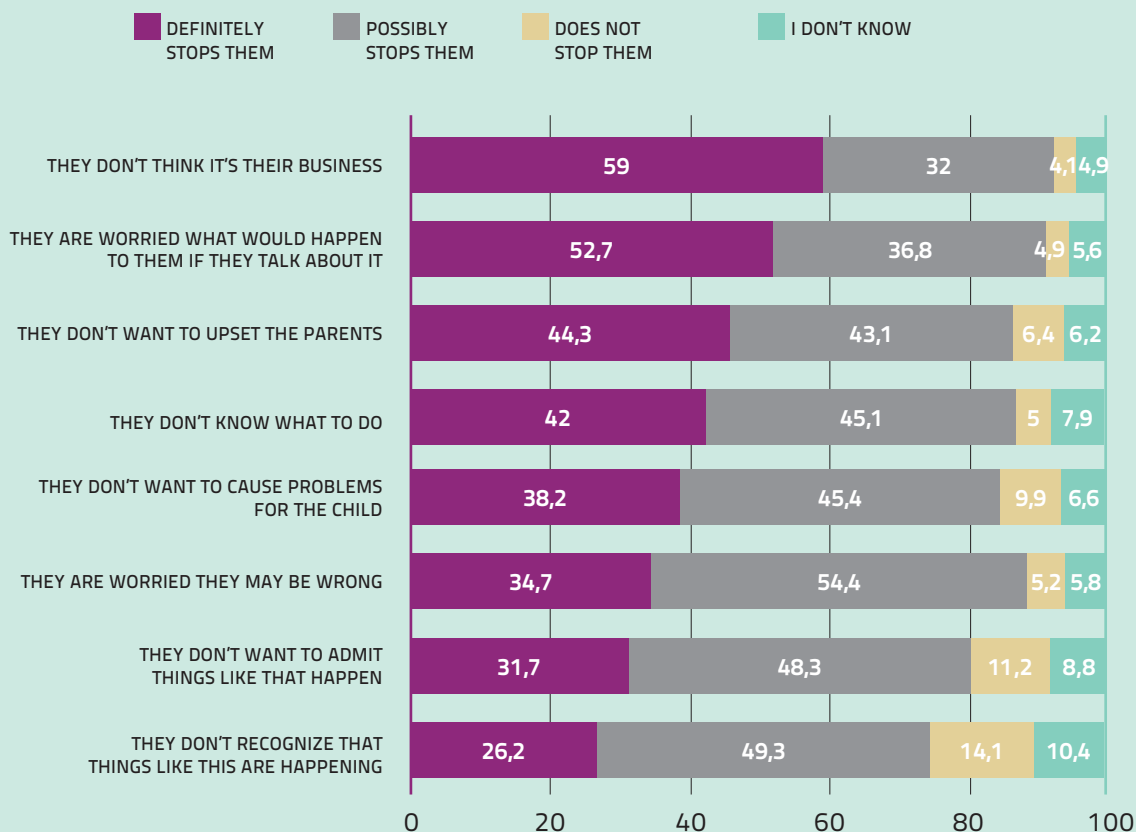
HOW MANY OUT OF 10 ADULTS WOULD YOU SAY DO THE FOLLOWING?



Respondents see people's lack of interest as the biggest obstacle to reporting: 59% think that the fact that people consider it is not their job is a definite barrier to taking action. They also see a definite barrier as people being worried about what will happen to them if they talk about it (52.7%) and not wanting to upset the parents of the children (44.3%). Not knowing what to do is also mentioned as a potential obstacle, as well as not wanting to get the child in trouble or fearing they might be wrong. (Figure 19)

**FIGURE 19**

WHAT STOPS PEOPLE FROM DOING SOMETHING WHEN THEY EXPERIENCE CHILD ABUSE OR NEGLECT? (%)



## SUMMARY

This part of the research looked at the extent of child abuse, how it is perceived, the information available to people, and the personal and social responsibility, all of which are needed to develop an effective community-based child safeguarding programme.

The open call for online data collection did not allow for a representative survey of the Hungarian society, but keeping in mind the objective limitations of the research (share of active Internet users in population), it provides good feedback on which groups are more sensitive to the issue of child abuse. Women, people living in big cities and people with higher education were over-represented among the respondents. The increased sensitivity of these groups must be taken into consideration when interpreting the survey results.

### WHAT IS CONSIDERED ABUSE?

The research shows that there is a general consensus that sexual abuse, severe physical abuse, and neglect resulting in health symptoms are unacceptable forms of child abuse. They believe that severe physical punishment (beating a child with a belt, cane or other hard object) is a narrowly used method of discipline, and 3 out of 4 people disapprove of it.

Respondents think that even minor physical abuse (e.g. a slap) is unacceptable. 9 out of 10 respondents say that parents who use physical discipline cannot be excused, even if they are upset. At the same time, around 25% of the respondents partly or completely agree with the statement that physical punishment is not good but it is sometimes unavoidable. Even though the majority condemn physical punishment and consider it an ineffective disciplinary method, around 15% of respondents find it acceptable, especially in cases when the parent hits a child because it is important that they do not repeat an act, e.g. when a smaller kid runs through a busy road or an older one steals something from the store. What is more, even though the majority of respondents claim to use positive disciplinary methods, on average they think that 6 out of 10 parents in Hungary use physical punishment, and 70% think that the majority of people show ignorance when they witness a parent slapping their child, on the grounds that it is the parent's business. The results clearly show that people can tolerate minor physical punishment, and even if they themselves do not use it or do not agree with it, they are less likely to intervene.

According to the respondents, verbal aggression is the least violent form of abuse, and although the majority do not approve of it, it is still considered to be a common disciplinary method for parents.

### **WHAT INFORMATION DO THEY HAVE ON ABUSE?**

Nearly two-thirds of the respondents think that child abuse is a serious problem in Hungary, but only 43% of male respondents are on this opinion, and a similar number think there are more serious problems. It is noteworthy that nearly half of the respondents only assume that there is a law requiring everyone to report child abuse, and 10% did not even know such law exists. Although the majority of respondents knew that children can report cases of abuse as well, 30% did not know what options children have in such cases. The results clearly show that there is a significant lack of information about child protection among the adult population.

### **INDIVIDUAL AND SOCIAL RESPONSIBILITY**

9 out of 10 respondents agree that each member of a community is responsible for child protection, and the majority agree that parents should not discipline their child in a way that they find right. At the same time, the majority think that most people would ignore minor physical punishment and verbal aggression, arguing that it is the parent's business. According to them, on average 2 out of 10 adults would intervene or contact the authorities if they witnessed child abuse. It is important to underline that the main obstacles to reporting or intervening are people's passivity (60%) and their own protection (53% are worried what would happen if they speak up). Avoiding making a mistake or getting the child into trouble are identified only as potential obstacles. The respondents think that if they were aware of any form of abuse, they would definitely do something about it, depending on the situation. When suspecting physical abuse or neglect, they would mainly report to the child welfare services. There is more uncertainty in the case of physical abuse, as the second and third most likely reactions would be to seek advice on a helpline or from a close friend. In the event of neglect, they would talk to the child first, or contact the general practitioner or district nurse. Regarding sexual abuse, if the parents are excluded from the suspicion of having committed the abuse, they would most likely talk to the parents. There is only a small probability that they would not do anything or would not know what to do.

# COMMUNITY LEVEL RESPONSIBILITY FOR CHILD PROTECTION

FOCUS GROUP RESEARCH IN A LOCAL COMMUNITY

# INTRODUCTION

A violence-free childhood is every child's fundamental right and must be ensured by society as a whole and the smaller communities that surround children. However, community can be defined in several ways. Throughout our lives we may belong to several communities: we may connect with people where we live, with our colleagues, or with communities formed through religion or any other common interest. But there are about as many definitions in literature as there are types of communities. The research design was based on a 'sense of community' approach. According to this definition, a community is defined by its members feeling a sense of belonging, caring for each other and the group, and believing that their needs are met through their engagement (McMillan 1986). The 'sense of community' can be examined in selected communities, broken down into dimensions.

A starting point of this research was the COVID-19 pandemic that broke out in March 2020. As a consequence, personal interaction had to be reduced to a minimum amid protection against the pandemic, and the distance between people and the formal institutions and communities around them increased, making the role of informal relationships even more important. For this reason, and because of the methodological framework of the 'sense of community' approach, in this part of the research, community is used to refer to local communities of residents whose members are definitely in contact with each other during their daily routine activities. We wanted to know how close the members of these residential communities are to each other, and what they think about the protection of children who belong to their community. Who do they think is responsible for the safety of children? What are the problems in their community that threaten children's safety? What options are available to address these problems? What do they think about their personal responsibility?

To answer these questions, we studied the local community of a small town near the capital by using the focus group method.



# METHODOLOGY

## THE SELECTED COMMUNITY

The chosen community is a small town close to the capital where the population was between 25,000 and 30,000 in the last few years. In certain parts of the town, there are several kindergartens, primary schools and high schools.

## HOW FOCUS GROUPS WERE ORGANISED

We wanted to get as many perspectives as possible on the selected local community, so we conducted separate focus group interviews with local parents of children under 18, and professionals working with local children. In the second half of the research, we organised mixed groups to discuss the issues with parents and professionals.

The professionals were recruited with the help of the local municipality. Reaching them in this way proved easy, with all but one of them agreeing to participate in the research.

The participants in the focus group with professionals represented most areas of the child protection reporting system. The focus group participants came from the following specialist areas:

1 police officer, 1 school nurse, 1 school psychologist, 1 kindergarten psychologist, 1 family support worker from the child welfare service, 1 municipal child protection coordinator.

Parents were recruited through the Facebook groups of the local community and through personal contacts. Reaching parents proved to be very difficult, as even after several weeks of recruitment, only 2 participants were found. This is probably due to the high commitment required to participate in the research (2x2 hours). In addition, conducting the research was further complicated by the fact that the focus group interviews were done online due to the restrictions imposed by the coronavirus pandemic. It is important to emphasize that the difficulty of involving parents is in itself significant in terms of community-based child safeguarding. In the first part of the research, separate focus group discussions were organised with parents (1 session) and professionals (1 session). The second part was a joint discussion. To maintain an ideal number of participants, we divided the participants into two small mixed groups. The mixed groups were randomly selected, the only criterion being that professionals and parents should always talk together. Each of the resulting groups consisted of 3 professionals and 1 parent.

The focus group discussions took place between 17 May 2021 and 8 June 2021. Each session lasted approximately 2 hours.

# RESULTS

## FOCUS GROUP OF PARENTS

### EXPERIENCING THE 'SENSE OF COMMUNITY'

When developing the research design, we wanted to focus our study on the local housing estate. However, as it proved very difficult to reach parents, we invited applications from all over the town. Of the two participants, one parent lived with their family in the housing estate and the other in the suburban part of the town. The sense of belonging to a residential community was very different in the two neighbourhoods. **The parent living in the suburban area was much less connected to their neighbours, only exchanging greetings with them, while the parent living in the housing estate reported a stronger sense of community.**

*"I now exchange greetings with the entire house and have conversed with half of them. In fact, there are people, from about ten houses, whom if I bump into on the way to work, I often don't make it on time." (Parent 1)*

The parent in the suburban area reported the presence of smaller, more closed communities. Both parents agreed that communities that are organised around children are closer than their neighbourhood ties, e.g. parents of children attending the same kindergarten class can often develop friendships that last for a long time, as it is common for children to attend the same school after kindergarten.

*"I think that anyone who has a child already knows a lot of people through them. They keep in touch with their friends from kindergarten and a lot of them start school at the same place." (Parent 1)*

*"I think the kids are the glue; if it weren't for the kids, these parents might not even meet or talk to each other." (Parent 2)*

The playground too plays a key role in community relations around children, as it is a place that children often visit and spend longer periods of time in. While the children are playing, parents often talk to each other.

*"The playground is a striking case in point, in that it is where mums often approach each other. (...) and then you can talk to them very openly." (Parent 1)*

### WILLINGNESS TO REPORT IN THE COMMUNITY

We were also interested in the local manifestation of individual responsibility in cases of violence against children. We asked parents to imagine that they regularly see a child in their



neighbourhood with visible physical injuries and that shouting is often heard from their house.<sup>6</sup> We asked them what they would do in such a situation. Their answers were that the first step would be to try to contact the parents to find out what was going on and to seek advice from a professional, in this case the district nurse. **It is important to underline that throughout the focus group discussion, it was the district nurse who was identified by parents as the primary person with a vast knowledge on child protection and as a confidential source of help and information.**

*"If I knew them by sight, I would try to talk to the mom and ask how things are going. But then I consider myself a person who has a finger in every pie, so I might talk to the local district nurse, because if the child is seven years old, the family is still in touch with her. I would bring it to her attention, because she is a credible source; she can investigate and then she can contact the relevant child protection services."* (Parent 2)

We have also talked to parents about the possible reasons for the lack of reports. **In their opinion, people primarily want to protect themselves in such situations** because they are afraid that if they 'get tangled into it', they will suffer some sort of disadvantage or get into conflict with the parents concerned. **The other main obstacle was that people fear that if they get involved in such situations and adequate help is not provided in the end, the situation in the family concerned will deteriorate further thus putting the child in an even worse situation.**

*"The people I spoke to said they didn't want to get into trouble."* (Parent 1)

*"I think we are afraid that it will create a worse situation if we bring it up."* (Parent 2)

*"To use the example of the parent shouting at their child, I wouldn't dare to say anything, because*

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6

In the focus group, we used the same situation as the one in the questionnaire.

*what if the father slaps me or things get worse for the child. So I immediately thought of a worse situation. That leaves me with making a frown or with a questioning look.” (Parent 2)*

**In addition to people’s fears, the other obstacle identified was the failure of the reporting system.** One parent described a case in which someone had made a report to the district nurse, but it was not dealt with and remained unanswered. This was felt to have a very negative impact on people’s willingness to help, because if they find that a report they have made is not addressed, they will not do it the next time because they do not believe it will be of any help.

*“The person who spoke up also felt disappointed, because they felt that they had spoken up in vain and nothing had happened.” (Parent 1)*

### **RESPONSIBILITY FOR THE SAFETY OF CHILDREN IN THE COMMUNITY**

In terms of who takes initiative in cases of violence involving children, it was felt that in cases where familiarity is superficial, it is not very common for people to take initiative, mainly because of the previously mentioned obstacles. They thought that intervention is mainly made by people who know the case closely, and these are the close communities who better look out for each other.

*“I think most of the time only the people who are close to them dare to do something, people who are their acquaintances.” (Parent 1)*

Regarding responsibility, the importance of information, i.e. making the reporting system visible to parents was mentioned. In one parent’s school, the PTA (parent-teacher association) had sent information on the functioning of the reporting system, which was considered very useful, but it was stressed that more detailed information would also be helpful. However, they also raised the difficulty of passing on the information, as many parents appear to be very passive on these issues.

*“A letter like this would have been good in our school as well, so that we know what to look out for and who to contact in each case. I think we also need to know the hierarchy of where things can go or where the story can continue. We need to talk about these things. In our school, before the pandemic, there were some initiatives, for example lectures, but people were lazy to attend these informative lectures targeting parents. So, we are left with one-way communication.” (Parent 2)*

In the experience of participants, passivity towards official information can be overcome by personal involvement. One of the parents in the focus group had been involved in a case in a kindergarten, where they had been confronted with the problem and had taken action to resolve the situation. They found that because their case became known to the public, several parents

contacted them afterwards, facing their own problems. Parents felt that it would be useful for PTAs to have a parent who can act as a link between professionals and other parents and to whom they could turn to with their problems; PTAs can provide a good framework for this.

*"What I discovered is that because I was involved in so many situations and have talked to others about my own problems, many of my relationships developed in a way that because I talked about these problems, people came to me and told me their own stories. (...) It can also help a lot if there is a parent in every community who is more informed and knows how to proceed in these situations. In my case, the fact that they know me means a lot. I was also remembered by many people from kindergarten because I dared to speak up, talked about my problems and wanted to make a change. In fact, I find that it is easier for people to turn to those who are known for having some problem" (Parent 1)*

#### WHAT MAKES A COMMUNITY SAFE FOR A CHILD?

The parents have a clear view on what makes children feel safe within a community: having some adults who are constantly there and whom they can turn to with confidence. They stressed that frequent changes in people create insecurity in children, which negatively affects their sense of security.

*"So that they can trust others and have someone to turn to. So that they know which parents they can go to at any time and ask questions, ask for help. Even if it's just along the lines of asking for a tissue" (Parent 2)*

### FOCUS GROUP OF PROFESSIONALS

#### CHILD PROTECTION WORK IN THE COMMUNITY

First, we discussed with the professionals the strengths, weaknesses and challenges of child protection work in the community we studied. Among the strengths, they mentioned that due to the proximity of the capital the municipality is rather prosperous, there is a lot of extra support available to local families. **Cooperation between different professions was mentioned as potential strength, but it was also highlighted that there are many obstacles in this area,** which immediately led us to the difficulties of child protection work. They stressed that the high turnover of staff, which is also the case nationally, is also present in their work. **Frequent staff changes in child welfare services also make it difficult to work with families and other professionals.**

*"But I think there's also a lot of turnover, as I have met a lot of people over the years, people left and new joined, which I'm sure does not make it any easier to work together, to create a better collaboration." (Kindergarten psychologist)*



*"The biggest problem within the service is the turnover. People are changing so quickly that it is very difficult to allocate cases. If we receive a new case, a family comes and the family worker builds a relationship of trust with them, then they leave after six months and are replaced by another who also plans to stay for a short time. It is much more difficult to build trust when the worker is always someone different. Unfortunately, this is a common problem across the country." (Family support worker)*

Another difficulty was raising awareness among professionals who do not have a child protection profile but who work with children, such as teachers. **It is seen as a common problem that teachers rarely make any report**, and there may be several reasons for this: they may not have noticed the problem, or they may prefer not to report it to avoid conflict. There are also examples of failure to report because of institutional pressure to maintain the school's 'reputation'. **However, at the same time, professionals also stressed the importance of the heavy workload and pressure on teachers.**

*"In our school, it is not part of the teachers' routine to know who to report to and in what situations it is no longer acceptable to wait." (School nurse)*

In the context of child protection work in schools, the role of child protection workers and school social workers was also raised. Professionals felt that in these positions, the most important thing is being present regularly. The new system of school social workers works well where a social worker can be present in the school at least weekly. However, there is a capacity shortage in this area as well, as there are only 3 people for this role in the entire district.

*"If a reporting task is given to a person or a system that is operating short-handed or not at all, I think it will lead to a much worse situation than what we have now." (School nurse)*

Among the difficulties mentioned in child protection work was the functioning of a signalling system. **The professionals felt that it is difficult to effectively establish confidentiality in a community where people know each other. In their opinion, identifying the person who makes the report is a problem in a small community, even if the report is handled according to professional standards and with confidentiality.** This reduces the willingness to report even for professionals who work with children (e.g. school and kindergarten teachers).

*"That's why I mentioned this uncertainty or cluelessness, that neither teachers nor parents are aware of, say, the possible confidentiality obligations for when a report goes out." (School nurse)*

The other challenge is the inaccessibility of the very wealthy in the municipality. Even if neglect

or even abuse does occur in these families, cases presumably remain unreported. That is why it is highly important that professionals working with children are adequately prepared to deal with such situations.

*"Somehow there are these wrong associations that only those who live in poor conditions are sent to the child welfare services, and not those who are neglected. I think a lot of teachers think that these children have no big issues because they live well" (Family support worker)*

## NETWORK OF PROFESSIONALS

In the case of inter-professional relations, all the professionals stressed that personal contacts would be very important for effective cooperation. It was therefore suggested to organise an informal event at least every six months for members of the reporting system to get to know each other in person.

**In the context of inter-professional cooperation, it was highlighted that cooperation is difficult with teachers and schools.** It was again stressed that teachers are very overworked and this could be the reason why it is very difficult to earn their commitment to child protection.

*"The burn-out of the current teacher population is a great concern" (School nurse)*

*"I think that this is what it's about, teachers are frustrated and there's a mentality that they're just going to ride it out until retirement." (School psychologist)*

## RELATIONS BETWEEN PROFESSIONALS AND THE PUBLIC

**In their experience, reports from the public are very rare.** This is presumably because the public is not very familiar with the activities of child welfare services and does not have accurate information.

*"Some people come in on their own to ask for help with their own family, but typically these people have had some previous contact with the child welfare system." (Family support worker)*

**However, finding the means to provide information is very difficult.** It is mainly the institutions where the child welfare service can advertise its activities. **Traditional forms of information, such as leaflets on the school notice board or in the doctor's waiting room are unlikely to reach the target audience.** Other ways of informing the public would be to appear in some local media. The child welfare service has recently had the opportunity to be featured on local TV, which was found to be very useful.

Another potential way to promote child protection is to organise forums or presentations, but so far the experience has been mixed. **The passivity of parents at such events can also be a problem.** There have been cases where events were organised but there was not enough.

However, some argue that the project already failed during the promotion phase. It was also an important experience that **the focus group of professionals also identified the PTAs as a tool that could create a link between parents and professionals.**

*"I think that a very good channel for promotion is the PTAs, (...) let's say, the municipality sends it to the headmaster and asks the PTA members to send it through the PTA, and then all parents receive it. Again, we already know who's sensitive and going to be responsive, but that's how I think we can reach larger crowds, and really so we can reach civil people, and they are not the specialist team anymore." (School nurse)*

The role of children was also raised in the context of establishing a link between the public and professionals. According to professionals, a well-functioning peer support network would be very important for the protection of children.

*"So, if we already inform society, the immediate population, I think that peers, for example, could make a good network, if they were aware" (School nurse)*

## MIXED FOCUS GROUPS

### WHAT PROBLEMS AFFECT CHILDREN IN THE COMMUNITY THE MOST?

In the first phase of the focus group discussion, we asked participants to identify individually the threats and problems that affect children in their daily lives. Then they were asked to collectively draw up a list including three items of the most important and pressing difficulties affecting children.

One set of these problems identified by participants is rooted in adult-child relationships and communication. Conflicts within the family, abuse, or the lack of information and consideration of children's views on issues that affect them, have a profound impact on children's well-being, emotional world, and behaviour. **The way children feel in their family affects the way they behave in school or in other communities.**

*"And if children don't have a sense of security at home, they will increase their sense of security at school, by starting to, say, act aggressively or do ugly things to other kids." (Police officer)*

Among the issues that arise in parent-child relationships, it is important to highlight the extent to which adults are aware of their children's online activity, how well they can keep up with the accelerated pace of everyday life, technological developments, and the fact that the adult generation is considered 'digital immigrants', while today's children are 'digital natives':

*"(...) I don't let go of the child on the bus for fear of what will happen to them, but they sit in*





*front of the computer for four hours without anyone checking on them, and these are the dangers parents really don't take seriously." (School nurse)*

*"But equally, what I see is that parents are becoming more and more powerless, losing more and more of their competence, and that's the media affecting them too, making them feel they don't know what to do with their children at home." (Kindergarten psychologist)*

**Another group of risks affecting children is linked to peer relationships. In the experience of parents and professionals, abuse, ostracism and bullying within peer groups, whether offline or online, is a growing problem.**

*"My experience with bullying is that I am going further and further down in class. I've been working as a school psychologist for four years, and in the beginning I was approached in the sixth or seventh grade, and now it's getting earlier and earlier, already in the third grade. This should not start when there is already a problem; there should be an awareness campaign already from the beginning. But very often even the teachers are clueless as to how to respond to it, so it's really difficult." (School psychologist)*

The negative peer impact was not only mentioned in relation to bullying. It was also highlighted that members of groups of friends or 'gangs' often influence each other in a negative way, which is a process that professionals often feel powerless about.

*"The negative influence of peers, which is partly related to the fact that certain parents completely forbid children from certain things and activities, and they try to make up for it with their peers. (...) Unfortunately, we have more and more children with psychological and psychiatric problems, and they always find each other. And when three suicidal children get together and attempt suicide together, it's not certain that if they didn't find each other, they would still get to the point of actually trying to commit suicide." (Family support worker)*

**Regarding the 'gangs', it is important to stress that within the study area, there are clearly identifiable hotspots for the encounters and the members spending time together.**

These meeting points are mainly located near large hypermarkets, where children have easy access to alcohol, which they can often buy themselves or ask an adult stranger to buy it for them.

*"Because when a sixteen-year-old walks into a small convenience store, they're not going to give him alcohol and cigarettes, but I think that they can get alcohol out from the shopping centre. Everybody comes here, there's a crowd, there are strangers, young people walk in, ask five or six people, and one of them says they will buy them vodka, and the fourteen-year-olds end up drinking vodka." (School psychologist)*

Regarding the hotspots, it is important to stress that there are no alternatives in the area, neither in terms of physical space and meeting opportunities, nor in terms of available programme opportunities.

*"There are no centralised points where they could, say, come together, where they could, say, do semi-organised programmes. I'm thinking of free programmes, even if not every day; I am sure there is no demand for that, but such things could be done on a regular basis." (School nurse)*

*"What you said, by the way, that some kind of youth police officer could do more patrolling on the hotspots, or if we had a street social worker, that would be very good, but I know that there are perhaps two in the district. Their task would really be to try to get children in housing estates involved in more useful activities (sports, boardgames), but there is absolutely no capacity for this." (Family support worker)*

**In addition to alcohol, participants also highlighted the presence of drugs,** which are also easily accessible to children living in the area.

*"The problem is that it's a very real problem, and you also hear about drugs, but it's obviously much harder to go after because they're more closed off; with alcohol, it's much easier for kids to open up and tell you how they get it, where they get it, what they drink, how they socialise." (School psychologist)*

**The last group of problems affecting children concerns the community of professionals.** If there is inadequate communication and contact between the professionals, if the safety net around children is not tight enough, there is a risk that children at risk will not receive the support they need:

*"Also, what I think is a systemic problem, and not just for [the town], is that I really don't like*

*the fact that there is no follow-up. Basically, the child goes from kindergarten to school, and from there we don't know anything about them. I think they might go from that school to another one or to high school, and we lose them from there."* (Kindergarten psychologist)

After the identification of risks affecting children, we asked participants to draw up a joint list of maximum three elements, based on what they had heard and said, of the most important, most serious and „burning“ problems affecting children. The following lists emerged from each focus group discussion:

First group:

- alcohol and substance abuse
- peer abuse and bullying
- neglect of children

Second group:

- the overwork and related fatigue of professionals, especially teachers
- negative peer influence

## **WHAT PROGRAMMES COULD HELP THE COMMUNITY TO EFFECTIVELY INCREASE CHILDREN'S SAFETY?**

In the second part of the focus group discussions, we asked participants to design a programme or series of programmes that would be effective in reducing the risks children are exposed to and would also provide an opportunity to strengthen the relationship between professionals, and between professionals and parents. Generally speaking, all participants would find such an initiative useful.

**Both groups agreed that the local municipality should be responsible for the coordination and financing of such a programme, and that the members of the child protection reporting system should play a role in its implementation,** especially the workers of the child welfare service, as well as the professionals and social workers providing support in kindergartens and schools. The second group highlighted the possibility of involving the **PTAs**, who, in addition to **organising the programme may also play a key role in disseminating it to other parents.** Participants in both focus groups stressed **the importance of involving children, as their experience shows that it is primarily through children that parents can be reached.** The main aim of the programme (series) outlined by the two groups would be to contribute in some interactive way to increasing parents' competence: to make them aware of the risks children are exposed to, to help them recognise those risks, and to offer some advice and suggestions for solutions.

The first group focused on the difficulties that would arise in implementing such a programme.

In their opinion, the main **problem is that it is difficult to get the message across to parents, and even if this were done, the parents who would most benefit from such an event would not attend.**

They believe that some online format could be helpful in overcoming these problems, as it allows participants to remain anonymous (a parent may not attend a lecture for fear of revealing their involvement in the topic):

*"(...) online lectures, but with a kind of impersonality and anonymity, you don't have to turn on the camera, and it might be easier for parents to attend such lectures." (School psychologist)*

However, the participants in the first group highlighted that there is no benefit in terms of interactivity in giving online lectures. In response to the difficulty of reaching parents, they suggested that information be transmitted to parents through children, so that children could act as a bridge between professionals and parents:

*"I think it's good to be able to give children meaningful information and a lecture that is not actually a lecture, but a conversation that they can share at home, so the parent can learn from it. But parents will not come in only because (...) some 'madam' says so, that's for sure. So I think it's much easier to get the information through the children, because there's no point in printing out a thousand pieces of paper and sending them out so they're thrown away without anyone reading them." (Police officer)*

The first group agreed to implement a programme that would target children and through them, would also address parents, providing them with information and knowledge. The programme would be implemented in a kindergarten or school, so the programme would be 'delivered' directly to the children. The presentation would be interactive, possibly with theatre elements.

The second group would implement a series of programmes that would give parents and professionals the opportunity to meet and talk. It was stressed that it would be important to ensure regularity, without imposing too many activities or burden on the participants. **In addition to providing an opportunity for an ever wider and deeper dialogue, regularity would also send a reassuring message to parents that the professional network around their children is functioning well, in close cooperation with each other and with them.**

*"But I feel that if we have these 'off-topic' discussions on a regular basis, and other experts also attend, then this could start a very nice system. There were always more and more people, so the experience was that at the beginning there were eight people, and at the next one, organised after two months, more people came, and they had more questions as well. And everybody knew they were joining a group, so we did not really take it very personal with*

*specific problems, but rather received general questions.” (Kindergarten psychologist)*

*“But I think we could develop something like this, if not on a monthly basis, and if not always in the same school, kindergarten, or someplace else; we could give it a name, and it would also be very reassuring for parents if they saw that we of similar profession are moving and thinking a bit together, and I think it can give them a sense of security that we are not working back-to-back or against each other, but trying to do it together.” (Kindergarten psychologist)*

Participants in the second focus group discussion also highlighted the importance of involving children, as in their experience, the most effective way to reach parents is through children. They would like to implement a series of programmes which, in addition to meeting and talking to professionals and learning about them and their work, would also provide an opportunity for parents and children to spend time together. Participants would mostly target the mothers of children, as they believe they are more likely to be involved in such a programme than fathers. They would organise afternoon-tea type of programmes, where, in addition to talking, there would be activities that parents and children could participate in together, such as crafts. It was stressed that childcare should also be provided so that there is more room for dialogue between adults.

## SUMMARY

In this part of the research, we aimed at looking at one local community to assess how child protection is implemented in some communities.

### **WHICH COMMUNITIES ARE THE MOST IMPORTANT IN TERMS OF CHILD PROTECTION?**

The experience of the research shows that individual neighbourhoods determine the development of neighbourhood relations. The research has shown that it is not necessarily the neighbourhood that is the most important for child protection, but the local communities that form around children, such as the relationships between the parents of children in the same kindergarten group or school class. We should also highlight the community-building power of playgrounds, where parents are happy to meet and talk to each other while their children play.

### **HOW IS THE COMMUNITY'S RESPONSIBILITY REFLECTED IN CHILD PROTECTION?**

The focus group discussions also revealed that one of the biggest deterrents for people is the fear that their intervention will have some negative consequences. In most cases, they do not have enough information about the confidentiality obligations of professionals related to reporting, but even if they are aware of this, they fear being identified in a close-knit community and being reprimanded for their intervention. Professionals reported that these fears are strong not only among the general public, but also among other professionals working with children, such as teachers.

The research shows that there is a lack of both information and interest among the population. Both parents and professionals have experienced that involving parents proves difficult in most cases, which is also confirmed by the difficulties in organising a parents' group.

### **WHAT COULD HELP TO PROMOTE CHILD PROTECTION?**

Providing the general public with information on child protection is a major challenge, as traditional forms of dissemination such as leaflets or awareness-raising materials often fail to reach their target. Still, making these available would be important, as when a problem arises, people are often at a loss as to where to turn.

PTAs could be mobilised to liaise between professionals and parents. In the past, it was often the case that professionals were unable to reach parents, so the programmes they organised often failed to attract enough people. However, parents who are linked to a community of children (e.g. a class) often establish closer ties with each other, so a member of the PTA could address them more easily. This parent would give the other parents the information they need and thus could become a person who is approached in confidence and would also foster active

relations with some child protection professionals. In the experience of the focus group, the parents identified the district nurse as the professional responsible for child protection and to whom they would turn to in the first place.

Regular programmes where parents and professionals can have an informal discussion would also help to promote child protection in the community. Regularity is an important aspect of such a programme, but one should also keep in mind that participation should not become a burden for parents as it may discourage participation; for example, childcare should be provided for younger children during the programme.

It is also important to highlight the role of children. A well-organised peer support network increases children's sense of security and may also play a role in involving parents.

# HOW DO YOU SEE IT?

CHILDREN AND THEIR SOCIAL SUPPORT  
IN ABUSIVE SITUATIONS

*"I'm sick of all kinds of abuse  
because it's not human."*



# INTRODUCTION

Most often we talk about child abuse in the context of family or school, but children can easily find themselves in abusive or violent situations elsewhere – for example on the sports field, in the mall, on the stairway, on the bus, in the public restroom, at the doctor’s office or in the park.

What influences what children do in these situations? When do they leave it to be and when do they get involved? Do they tell others about it? Whom can they rely on?

Creating a safe environment for children requires empowerment and taking their views into account. As part of the research, we therefore launched an online survey for children aged 13–17 to find out what they think about abusive and violent situations and to assess the level of social support they receive. The survey was called „How do you see it?“, it had the same name as the Hintalovon Foundation’s previous child opinion survey.

# METHODOLOGY

The „How do you see it?“ survey sought answers to the following questions:

1. What influences whether children act against violence experienced against children in public places and in their wider communities, or leave the case to be (get involved or let it go)?
2. With whom and why do children talk about situations of child abuse and violence in public places and in their wider communities?
3. Who are the people around the children and how do the children see their social support?

The aim of the research was to identify the issues and situations where children most need information and guidance. We wanted to assess who or what (children, adults, online forums) should be helped and empowered, and how much children can rely on their family, friends, and others.

The research was based on 3 online questionnaires, which could be completed between 15 May 2021 and 7 July 2021 by children aged 13-17. Completion was anonymous and no personal data was collected. The survey complied with the Hintalovon Children’s Rights Foundation’s Child Protection and Privacy Policy.

The questionnaires focused on a single research question each. Questionnaires 1 and 2 consisted of a specially designed set of questions listing 15 incidents of abuse or violence that

children might encounter in public places and in wider communities (e.g. in parks, stairwells, on the tram, or at the gym). The two questionnaires contained identical situations but different questions. The questions aimed at the children's reactions: what would they do, whether they would do something about the violence in the situation (questionnaire 1) and whether they would tell someone about the incident afterwards (questionnaire 2). In each case, the bivariate, to-be-decided question was followed by a follow-up question assessing the role of information and the environment. The items included a mix of situations where the child is a victim or witness of violence, where the child is alone or in the presence of acquaintances or strangers, where the perpetrator is known or unknown, child or adult, and where physical, psychological or sexual abuse occurs.<sup>7</sup> Questionnaire 3 used the 10-item Hungarian version of the Multidimensional Perceived Support Scale (MSPSS, Zimet et al 1988; Papp-Zipernovszky et al 2017), which has been validated in several languages. The measurement tool examines social support in relation to family, friends, and significant others in the child's life.

Questionnaire 1: How do you see it? Would you get involved?

Questionnaire 2: How do you see it? Would you tell?

Questionnaire 3: How do you see it? Who can you count on?

The questionnaires were advertised on Instagram, Facebook and Google Ads platforms, targeting young people aged 13-17 in Hungary, and they were shared on the Hintalovon Foundation's own platforms and with its partners. Thus, in principle, any child of any age group could participate in the cross-sectional study.

When designing the survey, it was particularly important that the questionnaire was child-friendly. This was facilitated by an online, visually strong interface, case-based questioning, bivariate questions, differentiation between the 3 questionnaires, and an explanatory video to help with informed consent and a child-friendly privacy statement.

The methodology was developed by the Hintalovon Foundation's Child Participation Program in collaboration with 3 high school volunteers.<sup>8</sup> As part of the interdisciplinary research team, the child rights ambassadors participated in 9 meetings in the preparatory phase alone, where they worked on the survey format, case design and the research briefing. The questionnaire was also reviewed by colleagues from partner organizations and external children before finalization. The ambassadors also helped to analyse the results, which were processed in 2 meetings.<sup>9</sup>

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7 The cases have been developed using a bottom-up approach, based on typical everyday situations raised by contemporary researchers, taking care to include these aspects in proportion. The classification of cases is given in Annex 1.

8 For more information on working with ambassadors and their involvement in research, see <https://hintalovon.hu/en/child-rights-ambassadors/>

9 The ambassadors' thoughts and interpretations are presented in a separate chapter.

The questionnaires could be completed separately; completion of one did not imply completion of the other. Therefore, when interpreting the results, it should be noted that the sample is not identical - although the fact that 57-67% of respondents clicked through to the next questionnaire after completing it indicates an overlap between respondents.

## SAMPLE

Questionnaire 1 was completed by 403 children, questionnaire 2 by 587 children, and questionnaire 3 by 420 children, with age and gender breakdown as shown in Figure 1. The age distribution of the respondents was balanced but was characterized by strong girl predominance, consistent with the general trend of open, online surveys. (Figure 2)

FIGURE 1  
AGE DISTRIBUTION OF RESPONDENTS (%)

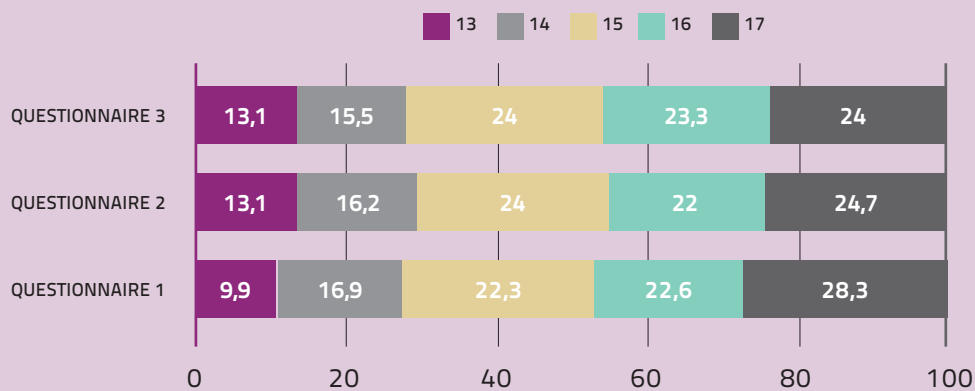
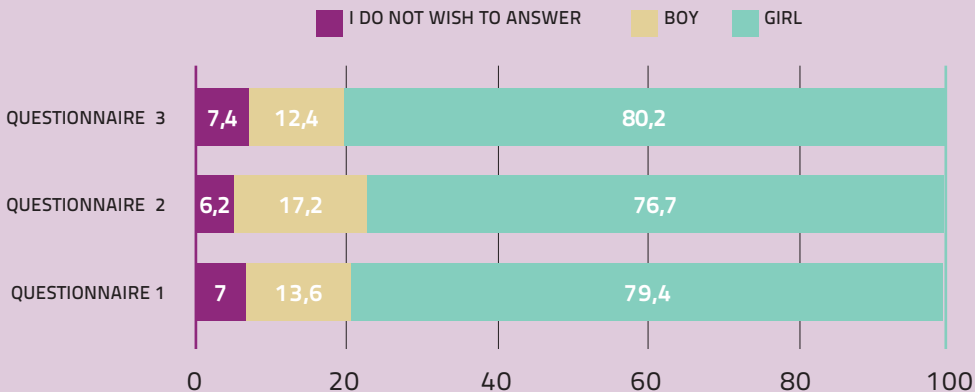


FIGURE 2  
GENDER DISTRIBUTION OF COMPLETERS (%)



# RESULTS

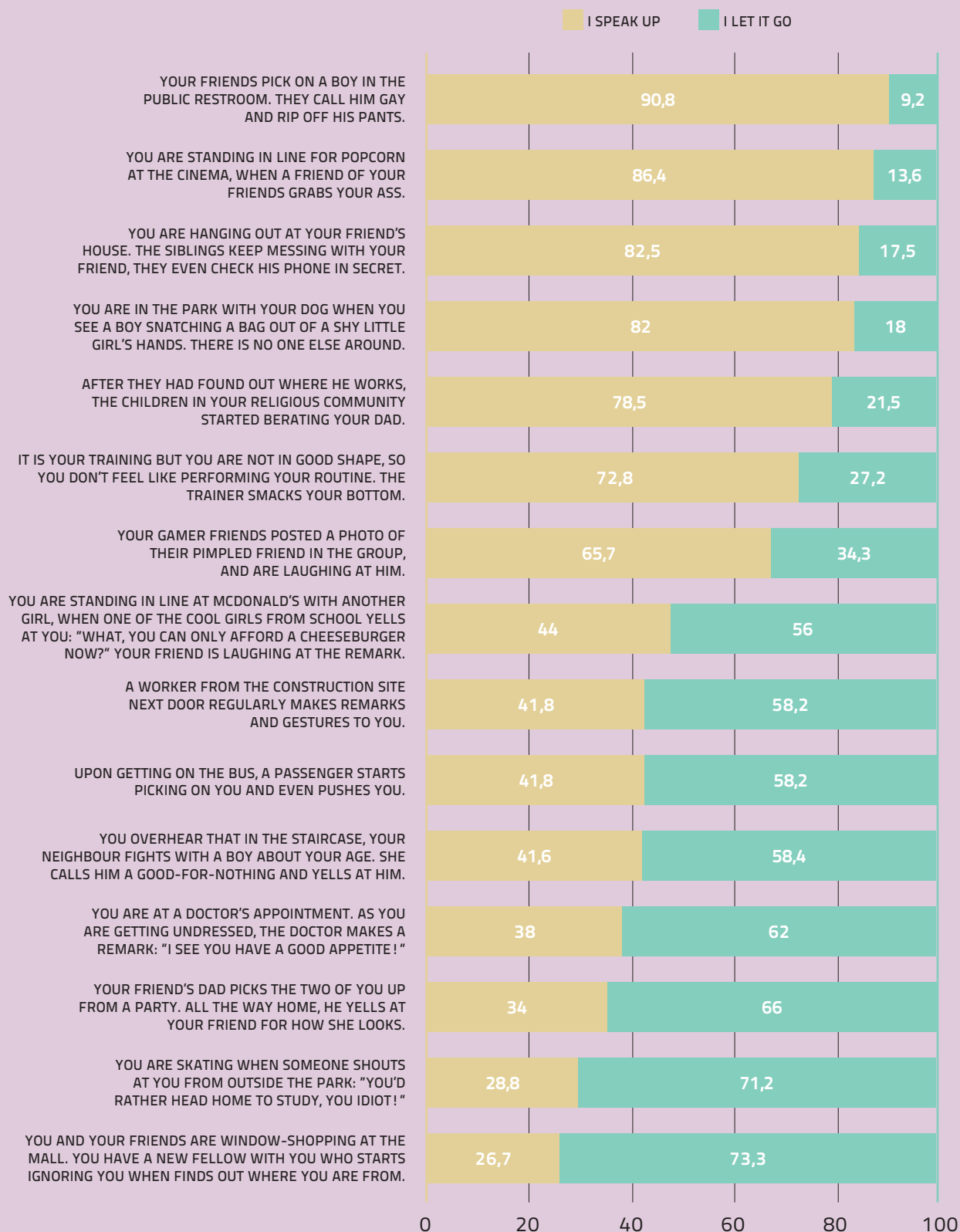
## HOW DO CHILDREN REACT IN VIOLENT, ABUSIVE SITUATIONS?

*"If we already feel tense or mentally hurt, we can't leave it at that. (...) But the fact is that we shouldn't take every little thing personally. It's just not worth it. The world is often stubborn and arrogant, people are just like that. (...) Sometimes it is enough to look at things from a different perspective; in which case you can „brush it off“. But sometimes we have to stand up for others and ourselves, maybe even ask for help."*

In 7 of the situations listed, more than half of the children said they would get involved in the situation. In 4 cases, more than half of the children said they would rather let it go, and there were also 4 cases where almost half of them said they would let go and almost half said they would get involved. (Even in these cases, slightly more people chose to let go).

**FIGURE 3**

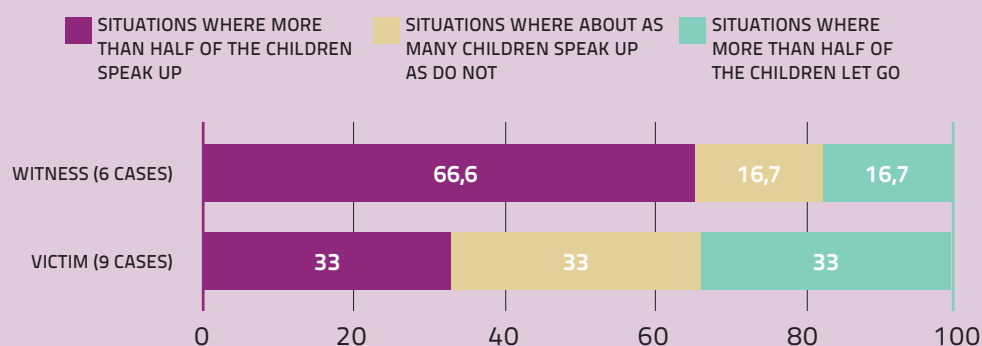
HOW DO YOU REACT IN THE FOLLOWING SITUATIONS? (%)



To better understand why children get involved or let it go in a situation, it is also worth looking at their responses in terms of whether they were the victims or just witnesses in the situation described. It could be important, whether the perpetrator was an adult or a child, whether the perpetrator was familiar or unfamiliar to the child, or whether someone was present when the incident occurred. Since the distribution of roles and circumstances in the 15 situations was not entirely equal, the cases are examined along the lines of the given circumstances.

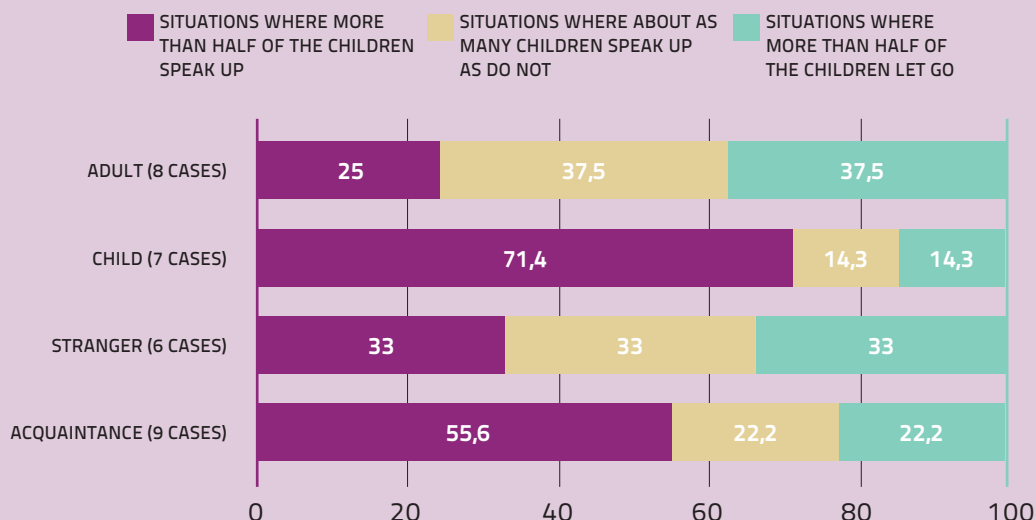
**There is no difference in the willingness to get involved in the victim role.** In 9 of the listed situations, they had to identify with the role of victim, and in 3 of them they were more likely to get involved, in 3 cases they were more likely to let it go, and in 3 cases the distribution of responses was almost half-half. However, when they appeared in the role of witness, in 4 out of 6 cases, they replied that they would choose to get involved in the situation. (Figure 4)

**FIGURE 4**  
DISTRIBUTION OF SITUATIONS BY THE ROLE OF THE CHILDREN (%)



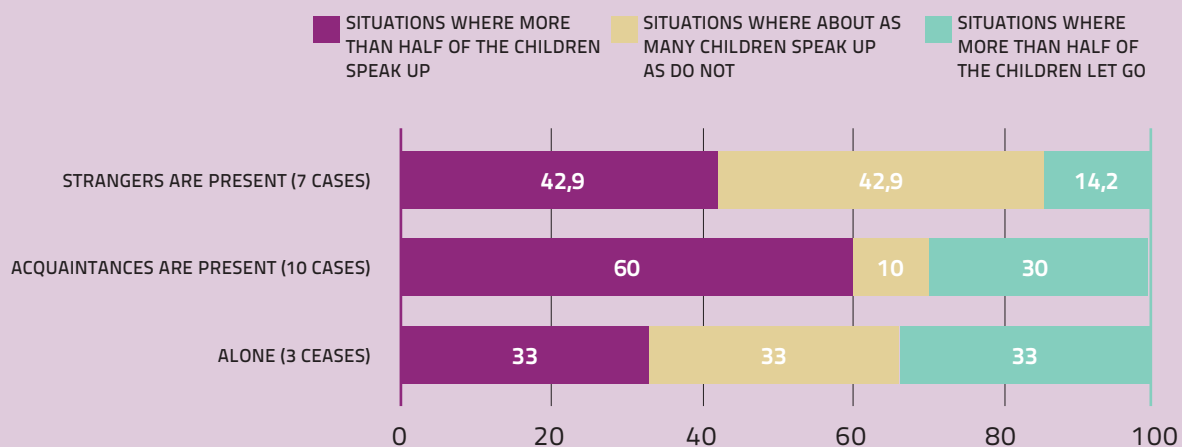
Regarding the perpetrator, they encountered 9 cases where the perpetrator of the abuse was familiar, of which in 5 they responded that they would get involved in the situation. In 2 cases they tended to let the situation go, and in 2 about the same proportion would have gotten involved in the situation as would not. An unknown perpetrator was encountered in 6 cases, but in such cases other circumstances were decisive, as the division of situations was 2-2-2, depending on whether they preferred to get involved or not. They found themselves confronted with a child offender in 7 cases, and in 5 of these cases, they preferred to get involved in the given situation, in 1 case they were more likely to let go, and in 1 case both options were chosen in the same amount. In the 8 cases where an adult committed the abuse, in only 2 cases were they more likely to agree to the confrontation, while in 3 cases about the same proportion thought they would opt for a confrontation as did not, and in 3 cases, a higher proportion chose to let the situation go. (Figure 5)

**FIGURE 5**  
DISTRIBUTION OF SITUATIONS BY THE PERPETRATOR (%)



In terms of company present, there were several situations (5 such situations) where both acquaintances and strangers were present, but in situations where acquaintances were also present (10 such situations), children were more likely to speak up in 6 cases. Of the 7 situations where a familiar person was present, only in 3 cases was it more likely that children choose to get involved. (Figure 6)

**FIGURE 6**  
DISTRIBUTION OF SITUATIONS ACCORDING TO THOSE PRESENT (%)



**Based on the above, it appears that children are much more likely to engage in conflict if they are not the subject of the abuse or are confronted with their peers, as well as if they know the perpetrator. It also matters if other acquaintances are present.** However, these results do not show that when they prefer not to get involved in a situation, if it is only because they do not attach importance to it, or they do not dare to get involved, or they do not know what to do.

#### **WHAT INFORMATION HELPS TO TAKE ACTION OR INTERVENE AGAINST VIOLENCE?**

When children decided to intervene in a situation, they were asked what would help them to do so, and they were given a choice of several options. **Of the options listed, "I just feel like it" was chosen in the largest proportion, suggesting that whenever they commit to a conflict for something, their sense of justice works very strongly.** In most of the situations listed, no other assistance was reported to a larger extent. Their responses show that they have previously talked about sexual harassment with other children.

Of the children who would get into such situations, 48.2% said they had already talked to an adult about what to do if they were harassed by a teacher, 33.9% also had information about what to do if a peer was harassing them. The answers also show that less information is available about more ordinary situations, that probably happens more often (e.g. bullying a friend, breaking into his mobile, shaming him with father's job). This was less known by both children and adults. (Table 1)



TABLE 1

		WHY? WHAT HELPS YOU IN THIS?				WHY NOT?		
		WE HAVE TALKED ABOUT IT WITH MY PARENTS AND ADULTS, WHAT SHOULD YOU DO IN THESE SITUATIONS	WE HAVE TALKED ABOUT IT WITH MY FRIENDS AND PEERS, WHAT SHOULD YOU DO IN THESE SITUATIONS	I READ OR HEARD ABOUT IT	I JUST FEEL IT	I DON'T REALLY CARE / IT'S NOT A PROBLEM	I DON'T KNOW WHAT TO DO	I DON'T DARE TO SPEAK UP
THEY WOULD RATHER SPEAK UP	YOUR FRIENDS PICK ON A BOY IN THE PUBLIC RESTROOM. THEY CALL HIM PINKY AND RIP OFF HIS PANTS.	22,0	24,5	21,7	80,8	33,3	36,1	30,6
	YOU ARE STANDING IN LINE FOR POP-CORN AT THE CINEMA, WHEN A FRIEND OF YOUR FRIENDS GRABS YOUR ASS.	33,9	30,7	21,8	69,0	50,9	24,5	24,5
	YOU ARE HANGING OUT AT YOUR FRIEND'S HOUSE. THE SIBLINGS KEEP MESSING WITH YOUR FRIEND, THEY EVEN CHECK HIS PHONE IN SECRET.	16,8	23,9	8,6	78,9	32,8	37,3	29,9
	YOU ARE IN THE PARK WITH YOUR DOG WHEN YOU SEE A BOY SNATCHING A BAG OUT OF A SHY LITTLE GIRL'S HANDS. THERE IS NO ONE ELSE AROUND.	28,6	17,5	26,5	67,4	7,4	30,9	61,8
	AFTER THEY HAD FOUND OUT WHERE HE WORKS, THE CHILDREN IN YOUR RELIGIOUS COMMUNITY STARTED BERATING YOUR DAD.	22,3	13,5	9,4	76,8	58,0	27,2	14,8
	IT IS YOUR TRAINING BUT YOU ARE NOT IN GOOD SHAPE, SO YOU DON'T FEEL LIKE PERFORMING YOUR ROUTINE. THE TRAINER SMACKS YOUR BOTTOM.	48,2	33,1	31,0	51,8	17,9	38,7	43,4
	YOUR GAMER FRIENDS POSTED A PHOTO OF THEIR PIMPLED FRIEND IN THE GROUP, AND ARE LAUGHING AT HIM.	20,3	24,2	16,0	78,1	52,2	36,6	11,2
ALMOST AS MANY CHILDREN SPEAK UP AS DO NOT	YOU ARE STANDING IN LINE AT MCDONALD'S WITH ANOTHER GIRL, WHEN ONE OF THE COOL GIRLS FROM SCHOOL YELLS AT YOU: "WHAT, YOU CAN ONLY AFFORD A CHEESEBURGER NOW?" YOUR FRIEND IS LAUGHING AT THE REMARK.	16,5	26,1	8,0	77,8	84,0	11,0	5,0
	UPON GETTING ON THE BUS, A PASSENGER STARTS PICKING ON YOU AND EVEN PUSHES YOU.	33,3	24,4	16,1	64,9	47,6	15,2	37,2
	A WORKER FROM THE CONSTRUCTION SITE NEXT DOOR REGULARLY MAKES REMARKS AND GESTURES TO YOU.	39,2	24,7	21,7	60,2	46,4	20,2	33,5
	YOU OVERHEAR THAT IN THE STAIRCASE, YOUR NEIGHBOUR FIGHTS WITH A BOY ABOUT YOUR AGE. SHE CALLS HIM A GOOD-FOR-NOTHING AND YELLS AT HIM.	20,5	18,1	9,6	74,1	27,9	50,2	21,9
THEY WOULD RATHER LET IT GO	YOU ARE AT A DOCTOR'S APPOINTMENT. AS YOU ARE GETTING UNDRESSED, THE DOCTOR MAKES A REMARK: "I SEE YOU HAVE A GOOD APPETITE!"	19,7	15,1	8,6	84,9	43,9	34,1	22,0
	YOUR FRIEND'S DAD PICKS THE TWO OF YOU UP FROM A PARTY. ALL THE WAY HOME, HE YELLS AT YOUR FRIEND FOR HOW SHE LOOKS.	13,5	25,6	14,3	75,2	14,2	46,5	39,2
	YOU ARE SKATING WHEN SOMEONE SHOUTS AT YOU FROM OUTSIDE THE PARK: "YOU'D RATHER HEAD HOME TO STUDY, YOU IDIOT!"	15,8	26,3	13,2	76,3	72,7	11,3	16,0
	YOU ARE SHOPPING AT THE MALL. YOU HAVE A NEW FELLOW WITH YOU WHO STARTS IGNORING YOU WHEN FINDS OUT WHERE YOU ARE FROM.	17,0	21,7	9,4	79,2	78,0	17,9	4,1

## WHY DO THEY LET CERTAIN SITUATIONS GO?

*"Often I want to do something, but I don't know what would be the right thing to do or what would make it worse."*

*"At that moment, I can't react. I get confused or I freeze."*

*"A lot of people my age don't react to these kinds of insults, negative and offensive things because they don't know how to deal with them or they are afraid."*

*"There are situations where I would intervene because I want to solve the problem, I just don't know what to do."*

*"I think it's important to stand up for people who are in trouble or in a bad situation, but when it comes to standing up for myself, I'm pretty clueless and afraid."*

*"I always protect others.... but I don't dare to do it for myself... I'm afraid."*

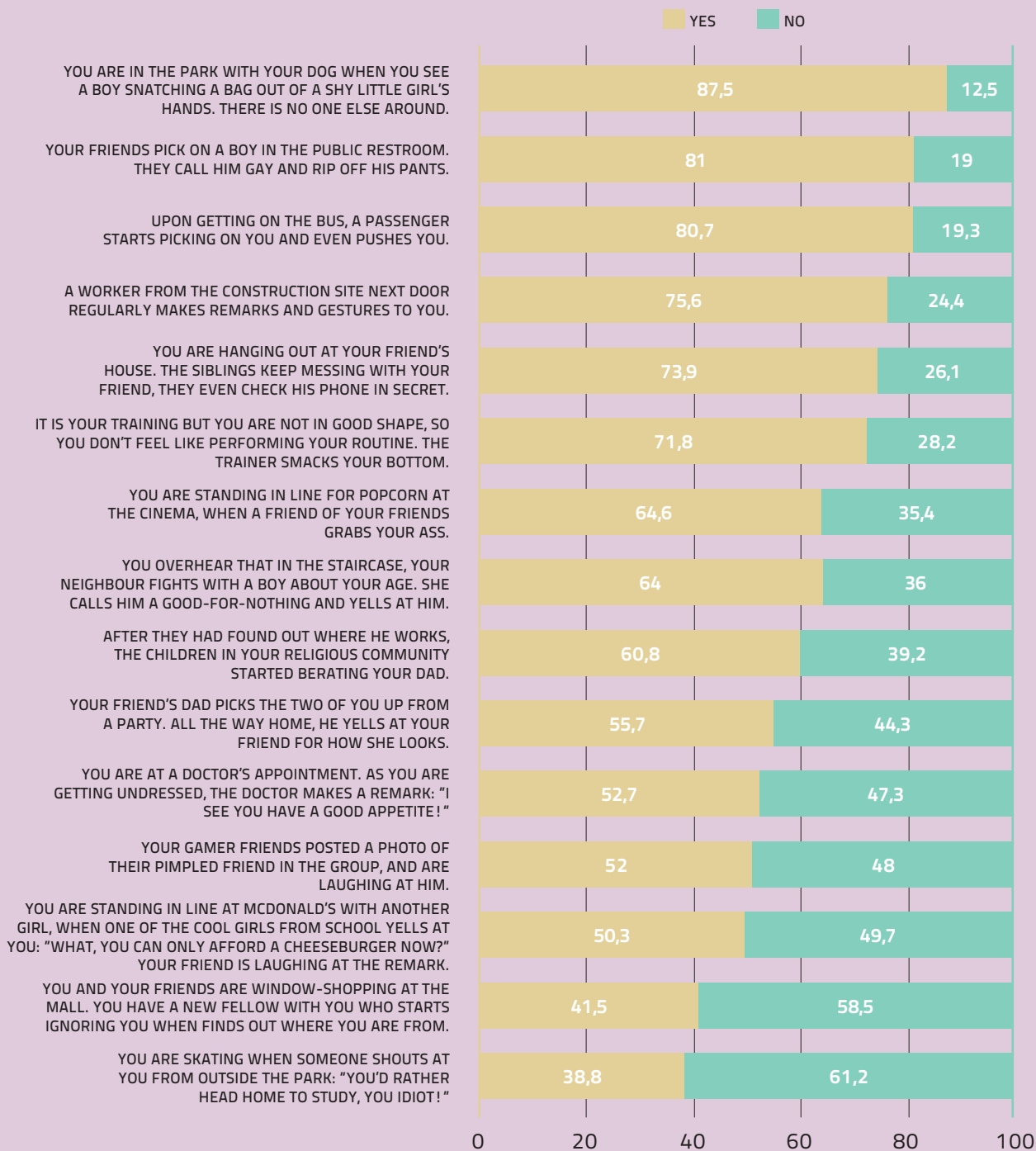
**In the situations where the majority or about half of the children said they would let a situation go, the most common reason was that they did not think it was a big deal and did not want to deal with it.** One exception was a situation where a friend's father was aggressive with their friend. In this situation, 46.5% of the non-confrontational children did not know what to do and 39.2% did not dare to take up the conflict. Another exception was when they heard a neighbor arguing with a boy in the stairwell, in which case half of the children also did not know what to do. In terms of the reason for letting go, it is also worth looking at situations where children would otherwise have been more involved in the situation. Of the situations listed, bullying by a coach stands out, as 43.4% of the children who let go of the situation (about a quarter of all respondents) would not dare to get involved and 38.7% did not know what to do in such cases. Respectively, children who would not confront if they witnessed someone being robbed would choose to do so mainly because they would not dare to intervene (61.8%).

## WOULD THEY SPEAK ABOUT THE INCIDENT LATER?

Of the situations listed, there are only two in which a higher proportion of children would not recount the incident later. About the same number would talk about 4 situations as would not. In most cases (9) they would share the story with someone. (Figure 7)

FIGURE 7

WOULD YOU TELL SOMEONE (%)?



### WHO WOULD THEY TALK TO?

**Children would tell their parents about most of the situations afterwards.** They would also share many situations with their friends. Table 2 clearly shows that **the situations they would talk about primarily with their friends are all peer-related**, with the exception of the bus incident. The robbery and the abuse in the public toilet would most likely be told to an adult who could do something, in case of the robbery this would presumably be an officer of the law. Talking with a psychologist or anonymous counseling is not common among children, but it is clear that sexual abuse - abuse in the public toilet, harassment by a coach, harassment by a peer - is something they feel they would seek professional help for.

TABLE 2

		TO WHOM?				WHY NOT?		
		TO MY FRIENDS OR OTHER KIDS	TO MY PARENTS	TO OTHER ADULTS WHO CAN DO SOMETHING ABOUT IT	TO PSYCHOLOGISTS OR ON HELPLINE WHERE THEY LISTEN TO ME	BECAUSE THERE IS NO ONE I COULD TALK TO	BECAUSE IT DOESN'T MATTER	„BECAUSE IT IS DIFFICULT
THEY WOULD TELL SOMEBODY	YOU ARE IN THE PARK WITH YOUR DOG WHEN YOU SEE A BOY SNATCHING A BAG OUT OF A SHY LITTLE GIRL'S HANDS. THERE IS NO ONE ELSE AROUND.	43,5	57,7	66,3	5,8	30,9	27,9	41,2
	YOUR FRIENDS PICK ON A BOY IN THE PUBLIC RESTROOM. THEY CALL HIM GAY AND RIP OFF HIS PANTS.	46,7	38,1	68,1	10,3	25,7	28,4	45,9
	UPON GETTING ON THE BUS, A PASSENGER STARTS PICKING ON YOU AND EVEN PUSHES YOU.	79,0	64,6	11,4	7,6	10,7	80,4	8,9
	A WORKER FROM THE CONSTRUCTION SITE NEXT DOOR REGULARLY MAKES REMARKS AND GESTURES TO YOU.	53,9	74,5	23,2	6,6	12,7	55,6	31,7
	YOU ARE HANGING OUT AT YOUR FRIEND'S HOUSE. THE SIBLINGS KEEP MESSING WITH YOUR FRIEND, THEY EVEN CHECK HIS PHONE IN SECRET.	73,9	28,9	28,2	2,3	20,1	56,4	23,5
	IT IS YOUR TRAINING BUT YOU ARE NOT IN GOOD SHAPE, SO YOU DON'T FEEL LIKE PERFORMING YOUR ROUTINE. THE TRAINER SMACKS YOUR BOTTOM.	56,0	69,6	44,9	17,1	9,8	29,4	60,7
	YOU ARE STANDING IN LINE FOR POPCORN AT THE CINEMA, WHEN A FRIEND OF YOUR FRIENDS GRABS YOUR ASS.	70,5	47,4	24,7	10,3	8,5	36,3	55,2
	YOU OVERHEAR THAT IN THE STAIRCASE, YOUR NEIGHBOUR FIGHTS WITH A BOY ABOUT YOUR AGE. SHE CALLS HIM A GOOD-FOR-NOTHING AND YELLS AT HIM.	43,8	62,2	41,1	4,6	24,6	61,8	13,5
ALMOST AS MANY CHILDREN TELL SOMEBODY AS DO NOT	AFTER THEY HAD FOUND OUT WHERE HE WORKS, THE CHILDREN IN YOUR RELIGIOUS COMMUNITY STARTED BERATING YOUR DAD.	27,9	74,7	29,6	8,9	16,3	39,4	44,3
	YOUR FRIEND'S DAD PICKS THE TWO OF YOU UP FROM A PARTY. ALL THE WAY HOME, HE YELLS AT YOUR FRIEND FOR HOW SHE LOOKS.	39,7	70,5	26,5	8,3	20,6	53,0	26,5
	YOU ARE AT A DOCTOR'S APPOINTMENT. AS YOU ARE GETTING UNDRESSED, THE DOCTOR MAKES A REMARK: "I SEE YOU HAVE A GOOD APPETITE!"	44,6	80,2	21,5	16,5	6,3	42,1	51,7
	YOUR GAMER FRIENDS POSTED A PHOTO OF THEIR PIMPLED FRIEND IN THE GROUP, AND ARE LAUGHING AT HIM.	64,0	36,3	29,3	6,7	23,4	62,4	14,2
THEY WOULD NOT TELL ANYBODY	YOU ARE STANDING IN LINE AT MCDONALD'S WITH ANOTHER GIRL, WHEN ONE OF THE COOL GIRLS FROM SCHOOL YELLS AT YOU: "WHAT, YOU CAN ONLY AFFORD A CHEESEBURGER NOW?" YOUR FRIEND IS LAUGHING AT THE REMARK.	77,6	42,7	12,6	8,4	6,2	75,9	17,9
	YOU AND YOUR FRIENDS ARE WINDOW-SHOPPING AT THE MALL. YOU HAVE A NEW FELLOW WITH YOU WHO STARTS IGNORING YOU WHEN FINDS OUT WHERE YOU ARE FROM.	74,1	41,0	7,1	7,5	5,7	76,5	17,9
	YOU ARE SKATING WHEN SOMEONE SHOUTS AT YOU FROM OUTSIDE THE PARK: "YOU'D RATHER HEAD HOME TO STUDY, YOU IDIOT!"	68,0	53,2	9,5	7,7	7,1	74,1	18,8

## WHY DON'T THEY TALK ABOUT IT?

*„I wouldn't tell many things to other people because I feel that no one would care or that they would think that we only want them to feel sorry for us.”*

*„Often we don't tell others not because we're afraid, but because we think that others won't care.”*

*„Sometimes we don't tell someone not just because it's hard or because we don't have anyone to tell, but because they can't do anything about it.”*

*„I would not find anybody who listens and who can actually do something about the problem.*

*„I don't dare talk about it if I'm being hurt.”*

*„I am afraid of what others might think of me.”*

*„I often find it easier to talk about what happens to others than when I get hurt.”*

The two cases where children would more often not report than they would are not reported mainly because the children do not consider them important. Both cases involve an unknown perpetrator, cases that are seemingly less taken seriously by children. Among the situations where about the same number of children would talk about the incident as would not, the situation is also similar. The exception to this is the medical examination, where children find it difficult to tell anyone. This shows how much damage such a shaming sentence can cause. If we also look at the under-reporting of cases that most would normally talk about afterwards, it is clear that in the case of sexual abuse, children do not tell mainly because it is difficult to talk about. On the positive side, the proportion of children who do not tell a case because there is no person in their environment with whom to share what happened is low.

## WHO CAN THE CHILDREN COUNT ON?

We used the Multidimensional Perceived Support Scale to examine who children can count on. The 10-items instrument<sup>10</sup> measures the extent to which children can share their joys, sorrows and problems with family members, friends, and significant others around them through ten statements. They had to choose on a scale of 1 to 5 how much they agreed with each of the statements. Of the used 10 statements 4 were about family, 3 about friends and 3 about significant others<sup>11</sup>. Responses were scored item by item in 3 categories (Figure 8), and also examined by factors according to the assessment process of the measuring tool.<sup>12</sup>

About three-quarters of the children agreed with statements that they had at least one important person around them who cared about their feelings, with whom they could share their joy and who they could count on if they needed help. Although the measure identifies these statements as a group of 'significant others', in this study children were not given explanations

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10 We have applied the Hungarian validated items of Multidimensional Perceived Support Scale. (Papp-Zipernovszky et al 2017)

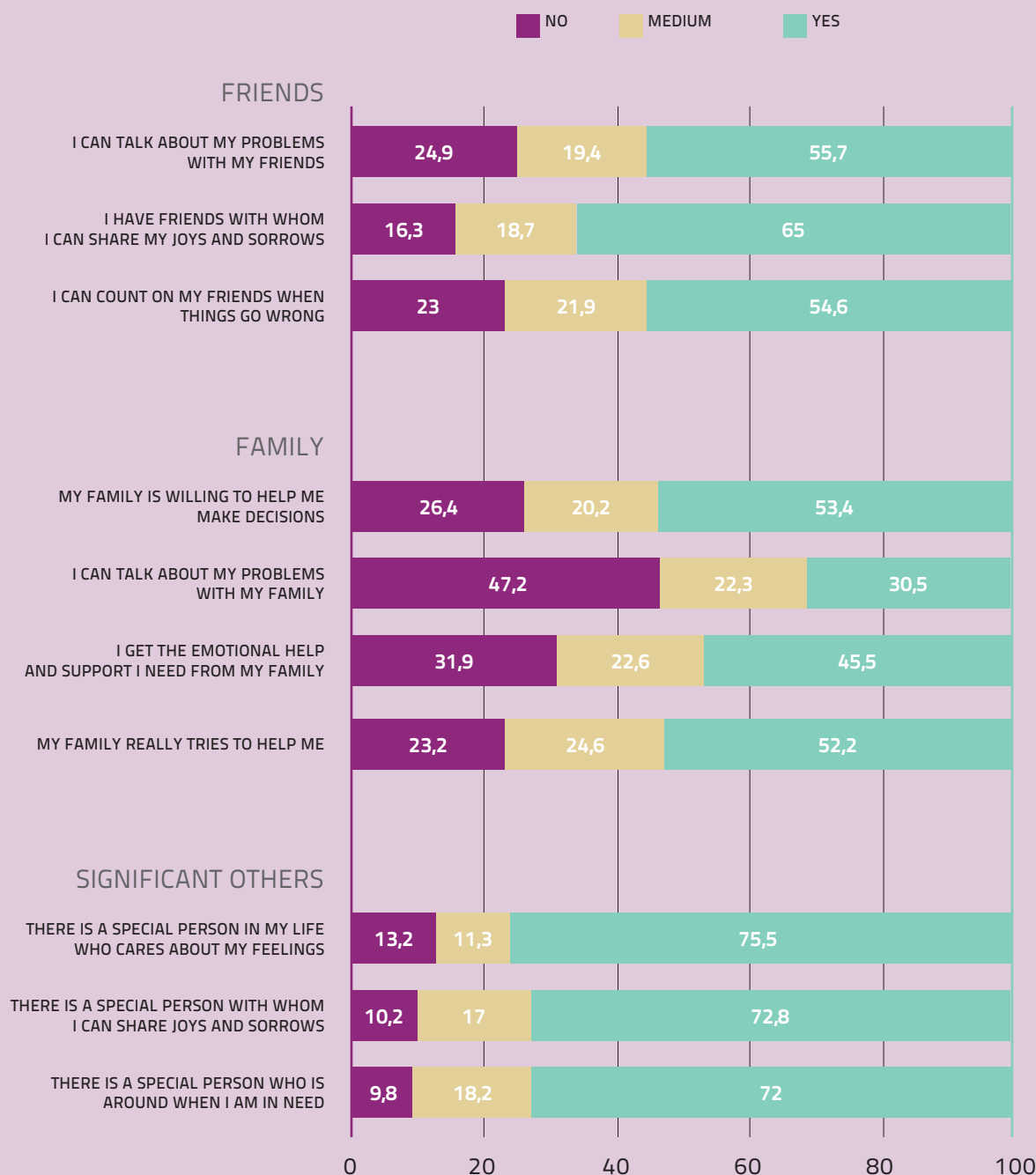
11 For the statements identified as 'significant others', children were not given an explanation, so in these cases they could just as easily think of family members or friends. This bias should be taken into account when comparing groups.

12 Factors were established by calculating average by the values of the individual items of the factors. The internal consistency of the factors was good according to the reliability tests: Significant others Cronbach alpha: 0,82; Friends Cronbach alpha: 0,89; Cronbach alpha: 0,89.

for the statements, so in these cases, they may have thought of their family members or friends in the same way, and this bias should be taken into account when comparing the groups. About half of the children also agreed with the statements about family and friends. The only statement nearly half of the children (47.2%) disagreed with was "I can talk to my family about my problems". Thus, children have many problems that they find difficult to talk about with their parents, despite the fact that they tend to tell them about many different situations, as seen in the case of violence. (Figure 8)

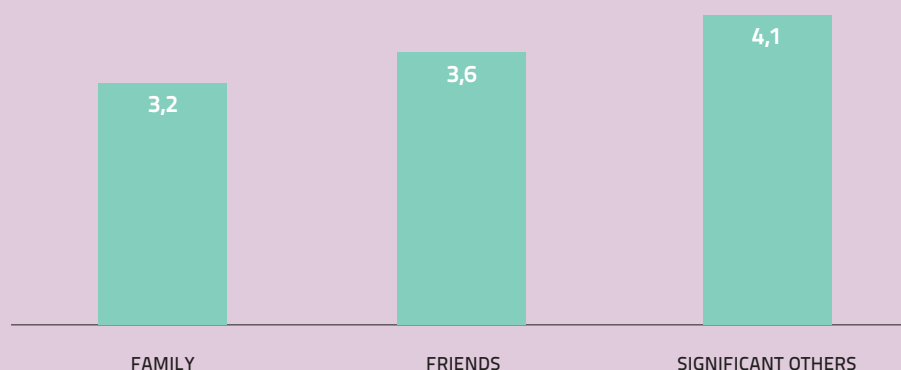
**FIGURE 8**

WHO CAN THE CHILDREN COUNT ON? (%)



If we look at individual dimensions together, it is clear that there is someone in the children's environment whom they can rely on in most cases, because the perceived social support is the highest in the group of significant others. It is also remarkable that at the same time the children's perceived social support is lower in the family dimension than in the friends dimension. In the background there are probably teenage age specifications (Figure 9).

**FIGURE 9**  
SOCIAL SUPPORT OF THE CHILDREN (AVERAGE)



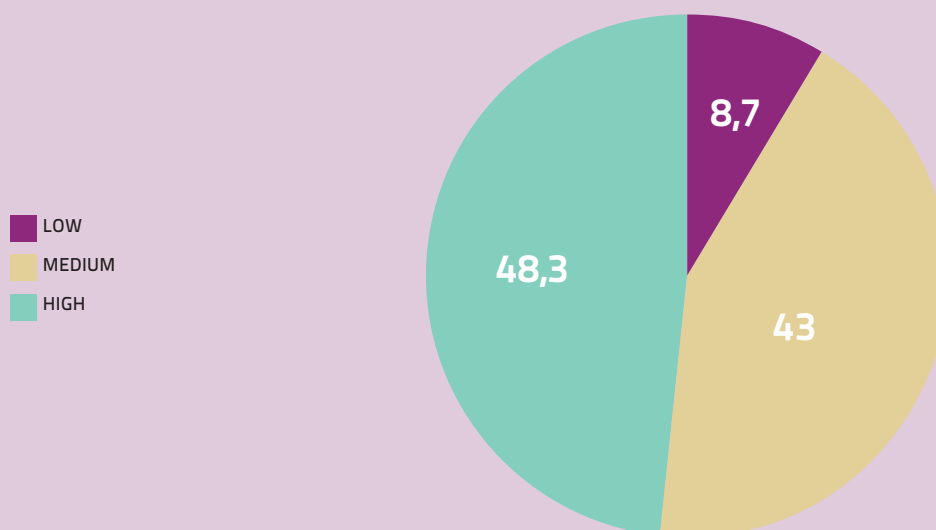
The Multidimensional Perceived Support Scale can also be evaluated according to a total score<sup>13</sup>. This gives an average score of 3.6 for children's perceived overall peer support. To make the perception of overall support more meaningful, the scores were used to classify children into 3 groups: low perceived support, medium perceived support, high perceived support<sup>14</sup>. Almost half of the children (48.3%) perceive high support from family, friends and significant others around them, while 43% perceive medium support around them. However, it is also very important to note that 10% of the responding children perceive low levels of support around them, which highlights the importance of access to support services. (Figure 10)

13 The value of the Cronbach alpha is 0,88 measuring the inner consistency of the full scale. Total score was obtained by calculating average of all items of the scale.

14 The selection of the groups was by a 1 minimum, 5 maximum, 4 staging scale, dividing close to 3 equal parts: children achieving 1-2,3 points have low perceived social support, children with 2,4-3,7 have medium and children with 3,8-5 point have high perceived social support.



FIGURE 10  
SOCIAL SUPPORT OF THE CHILDREN (%)



## WHAT DO THE CHILD RIGHTS AMBASSADORS WHO TOOK PART IN THE RESEARCH THINK?

Three high school student volunteers, their mentors and the lead researcher evaluated the results in 2x90 minutes. The meeting was online, where the lead researcher presented the diagrams, and discussed the results. During the sessions the ambassadors examined the characteristics of the situations (e.g. perpetrator, victim, etc.).

**Above all, we were interested in what they thought about the responses from their peers and what motivation they assumed was behind the results.**

**The ambassadors agreed that the intervention in an abusive situation depends to a large extent on whether the child is a victim or witness, and whether s/he knows the people involved in the situation or is just an outsider.** The case of the aggressive father and friend became a cardinal situation: the way how another parent raises his child is tabu, according to both the respondents and the ambassadors, an outsider child has no right to intervene. Furthermore, **it is much more difficult to "get into a conflict" with an adult.** Among respondents the situation that caused the 3rd biggest (82,5%) reaction is when a sibling and his/her friends look into the mobile of a buddy. According to the children, the mobile phone is part of the private sphere, and it is very important to protect a friend's privacy.

**In situations where the majority of respondents would not intervene, the ambassadors agreed that children's stimulus threshold is high at their age, with fewer situations considered abusive than they are.** They thought that physical aggression was clearly an abusive situation for their peers.

The results show that children would share their abusive stories mainly with close persons, like friends or parents. The ambassadors noticed that **children would talk about abuse by an adult to other adults, mainly their parents, and about abuse by another child to their friends.** In two situations (witnessing a theft, while dog walking, witnessing someone pulling down their trousers in a public toilet) most respondents would turn to an adult, who could do something in that situation. According to the ambassadors, respondents probably thought of police or other authorities. In their opinion these cases could have been perceived by respondents as criminal offences.

Children would be less likely to talk to their friends when peers criticized their father. This is an exception, because this is the only case when they did not talk to a friend their age about bullying by peers. The ambassadors suspected that in this case they were ashamed, and that is why they did not talk about it to their friends.

**The ambassadors also pointed out that children who did not talk about what happened to them, turned to a psychologist or support line, mostly in cases (abuse by a coach or a doctor), when it was difficult to talk about it.** As a consequence, it is very important that children are informed about the availability of helplines.

Regarding social support, the ambassadors drew attention to the significance of the fact that it was more difficult for respondents to turn to their family than to their friends.



## SUMMARY

It is unimaginable to develop a community-based child safeguarding programme without taking into account the views of the children. That is why we considered it to be of paramount importance to ask them how they cope with such situations and who they can count on. Because the topic is very sensitive, we did not ask for their own cases, but presented them imaginary situations and we asked them what would they do if it happened and would they talk about it to anyone later? We have also assessed what they thought about the support of significant others, family and friends in their environment.

### **WHAT DETERMINES HOW CHILDREN RESPOND TO ABUSIVE SITUATIONS? WHAT HELPS AND WHAT PREVENTS THEM?**

The responses suggest that children's reactions are significantly determined by the circumstances of the abusive situation. Child rights ambassadors who participated in the research also agreed on this. Children are more likely to take actions against abuse if they are only witnesses. As a victim, their actions against abuse depend on whether the abuser is a child or an adult, or known or unknown. It is much more difficult to take actions against an adult abuser, known or not. Most children take actions against an adult abuser if they have sufficient information (e.g. an abusive coach). However, they are more likely to take actions against their peers, even if they only rely on their sense of justice. The responses show that information about serious abuse is more accessible to the children. They are less aware of everyday situations (verbal aggression in the street, peer bullying).

### **WHO DO THEY EXPECT HELP FROM?**

Regardless of the circumstances, there is a consensus that most children would like to talk about abusive situations. Apart from 1-1 exceptional situations, they would talk about it to their friends, if the abuser were a child. And they would talk about it to another adult, mainly to their parents if the abuser were an adult. In situations where they think a criminal offence has been committed, they would talk to an adult who is supposed to do something, who is probably an official person. They are less likely to seek help from a psychologist or a helpline, but in cases of sexual abuse they are more likely to seek help from a professional. The ambassadors also agreed that these are the cases that are the most difficult to talk about to anyone.

Half of the responding children felt that they could get help anytime from family, friends or significant others, and they would share their problems with them. At the same time, one in every ten children thinks that their environment is not helpful enough. This is probably due to age, but ambassadors also agreed that more children would talk to their friends rather than their family about their problems.

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	YOU		WHO IS THERE?			PERPETRATOR				ABUSE		
	victim	witness	none else	sb the child knows	unknown people	known person	unknown person	child	adult	physical	emotional	sexual
UPON GETTING ON THE BUS, A PASSENGER STARTS PICKING ON YOU AND EVEN PUSHES YOU.	+				+		+		+	+		
YOU ARE HANGING OUT AT YOUR FRIEND'S HOUSE. THE SIBLINGS KEEP MESSING WITH YOUR FRIEND, THEY EVEN CHECK HIS PHONE IN SECRET.		+		+		+		+			+	
A WORKER FROM THE CONSTRUCTION SITE NEXT DOOR REGULARLY MAKES REMARKS AND GESTURES TO YOU.	+				+		+		+		+	+
AFTER THEY HAD FOUND OUT WHERE HE WORKS, THE CHILDREN IN YOUR RELIGIOUS COMMUNITY STARTED BERATING YOUR DAD.	+			+	+	+		+			+	
YOU ARE STANDING IN LINE AT MCDONALD'S WITH ANOTHER GIRL, WHEN ONE OF THE COOL GIRLS FROM SCHOOL YELLS AT YOU: "WHAT, YOU CAN ONLY AFFORD A CHEESEBURGER NOW?" YOUR FRIEND IS LAUGHING AT THE REMARK.	+			+	+	+		+			+	
IT IS YOUR TRAINING BUT YOU ARE NOT IN GOOD SHAPE, SO YOU DON'T FEEL LIKE PERFORMING YOUR ROUTINE. THE TRAINER SMACKS YOUR BOTTOM.	+			+		+			+	+		+
YOU ARE IN THE PARK WITH YOUR DOG WHEN YOU SEE A BOY SNATCHING A BAG OUT OF A SHY LITTLE GIRL'S HANDS. THERE IS NO ONE ELSE AROUND.		+	+				+		+	+		
YOU ARE SKATING WHEN SOMEONE SHOUTS AT YOU FROM OUTSIDE THE PARK: "YOU'D RATHER HEAD HOME TO STUDY, YOU IDIOT!"	+		+				+		+		+	
YOU AND YOUR FRIENDS ARE WINDOW-SHOPPING AT THE MALL. YOU HAVE A NEW FELLOW WITH YOU WHO STARTS IGNORING YOU WHEN FINDS OUT WHERE YOU ARE FROM.	+			+	+		+	+			+	
YOUR FRIEND'S DAD PICKS THE TWO OF YOU UP FROM A PARTY. ALL THE WAY HOME, HE YELLS AT YOUR FRIEND FOR HOW SHE LOOKS.		+		+		+			+		+	
YOU OVERHEAR THAT IN THE STAIRCASE, YOUR NEIGHBOUR FIGHTS WITH A BOY ABOUT YOUR AGE. SHE CALLS HIM A GOOD-FOR-NOTHING AND YELLS AT HIM.		+	+			+			+		+	
YOUR FRIENDS PICK ON A BOY IN THE PUBLIC RESTROOM. THEY CALL HIM GAY AND RIP OFF HIS PANTS.		+		+		+		+		+		
YOU ARE AT A DOCTOR'S APPOINTMENT. AS YOU ARE GETTING UNDRESSED, THE DOCTOR MAKES A REMARK: "I SEE YOU HAVE A GOOD APPETITE!"	+			+		+			+		+	
YOU ARE STANDING IN LINE FOR POPCORN AT THE CINEMA, WHEN A FRIEND OF YOUR FRIENDS GRABS YOUR ASS.	+			+	+		+	+				+
YOUR GAMER FRIENDS POSTED A PHOTO OF THEIR PIMPLED FRIEND IN THE GROUP, AND ARE LAUGHING AT HIM.		+		+	+	+		+			+	

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