

PAST, PRESENT AND FUTURE VISION OF THE SOCIAL ASSISTANCE SYSTEM IN SZEKLERLAND

Theses of the PhD dissertation

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TABLE OF CONTENTS

1. HISTORY OF WORK, PURSUED OBJECTIVES	4
2. MATERIALS AND METHODS	6
3. RESULT	9
3.1. Effects of demographic processes on social assistance Szeklerland	•
3.2. Influences of Szeklerland's economic situation on social assista	-
3.3. Analysis of the first hypothesis	14
3.4. Analysis of the second hypothesis	16
3.5. Analysis of the third hypothesis	17
3.6 New and novel scientific findings	19
4. CONCLUSIONS, SUGGESTIONS	21
5. LIST OF PUBLICATIONS RELATED TO THE DISSERTA	ATION .27

1. HISTORY OF WORK, PURSUED OBJECTIVES

The functioning of social assistance systems is a perennially relevant subject that is pushed into the background in European, Romanian and Hungarian public debates. While the situation of the infrastructure, health or education systems directly affects the majority of citizens, including the decision makers, the social assistance system does not seem to be present in the active years of our lives. Despite this, if we look more carefully at the whole range of social benefits and services, the role of these becomes obvious in the life of every individual. Starting from universal social benefits, through child welfare to services for the elderly, every one of us are clients of the social assistance system several times in our lives. Or if as a miracle we do not meet the social assistance system as beneficiaries, we are still interested because directly through donations, or indirectly through our taxes, we finance the functioning of this. A deeply stratified, divided society often results in social dissatisfaction which can lead to crime at an individual level or rebellion, revolution and anarchy in society as a whole. While traditional communities have the necessary social control to maintain public order, in case of urbanized people who have broken their relations with traditional communities, other kinds of tools have to be found to ensure a decent social atmosphere. From this point of view the social assistance system offers a set of tools to individuals to lead a more liveable life, and for wider society to decrease inequalities and build bridges over the gaps. It is clear that the system does not offer a universal solution for all kinds of social problems. Even in the most developed and highly financed societies we can meet homeless people for example, because ultimately accepting or rejecting a social service is a matter of fundamental right. But a well-functioning system at least offers a chance to everyone to have a decent life.

If we count the sums spent on social protection both in Hungary and Romania we observe that around 15-20% of GDP went in this direction, which is much more than the amount spent on either education or health. In these conditions, an analysis of the efficiency, rationality and territorial coverage of the system is a real need. Even if the science of Social Policy seems to be the most appropriate for answering these questions, it is clear as in many other fields that without help from other disciplines like economics, regional sciences, sociology or even history it will be almost impossible.

I have tried to approach the themes of functioning, strengths and weaknesses, and development directions of Szeklerland's social assistance system from the

viewpoint of several disciplines in my dissertation, using data and tools from the social policy studies, regional sciences, history, demographics and economics in European, Romanian and Hungarian contexts. I hope that the results of my work will contribute to improve the life of the communities and people from this region, and that my suggestions will help the creation of a more efficient social services system with better territorial coverage. I strongly believe that this topic is relevant to the whole future of the community, because the willingness to remain in a community is influenced by how good and how secure its members and their families feel.

The territorial focus of my research is the Szeklerland region which seems to be a peripheral region from an infrastructural and economic point of view even if it is in the center of Romania; it is a historically determined periphery because it also had the same problems as a part of the Austro-Hungarian monarchy. The subject looks more interesting because even with these conditions of historical and economic disadvantage, the social services system built up in the region over the last 30 years has overcome these handicaps and offers an example and direction to the rest of the Romanian social services system.

In the first part of my research I present a comprehensive overview but also attempt to reach a deeper understanding of the situation, development, deficits, sustainability and future vision of the social assistance system in the region. A Szeklerland regional level approach is in addition to the usual Romanian social policy approaches at local and county level. This offers a new, regional perspective for analysing the social assistance system, contributing to the building of a more efficient and coordinated system. Another important direction of my research is to prove that the development of the Romanian (and implicitly Szeklerland's) social assistance system has not been driven by social policy decisions based on strategy and scientific assessment, but more by subjective factors not directly linked to this subject. I also assume as a hypothesis that the social services system of the Szeklerland region is more developed than the Romanian average. This offers a second new direction for my research, in that the dissertation shows how the establishment and functioning of official, government funded institutional systems can be influenced by subjective factors, unconnected with the system itself. This approach can contribute to the analysis and understanding of the situation, development and functioning of other social systems too.

Starting from these considerations I have formulated the followed hypotheses:

- I. The development of the Romanian (and implicitly Szeklerland's) social assistance system has not been based on an integrated strategy.
- II. The actors and functioning mechanisms of Szeklerland's social services system have particular characteristics.
- III. It is a basic problem of the social services system that the proportion of community services to specialized services is not commensurate with declared social policy principles, in that the specialized services are more prevalent than community services.

2. MATERIALS AND METHODS

The complexity of the research topic, the exploration of the complicated relationships between social, economic and demographical spheres in the evolution of the social assistance system, has necessitated the use of a large variety of information types and research methods in my work. I have constructed my research using both primary and secondary data: existing research and publications, database analyses, and individual collection of information.

From another perspective I have worked both with quantitative and qualitative data collection methods. The quantitative tools have helped me to elaborate an empirical, objective statistical description of the situation, while using qualitative methods I have been able to explore the hidden relations between the data, and have found deeper information through the subjective evaluations of my respondents. Using both kinds of methods seems to be a necessity in the case of my hypotheses; to test these by means of quantitative data, and to detail and explain the processes and situations through qualitative or mixed methods.

I have gathered my quantitative data from social services databases and also from demographical and economic databases because I describe in my dissertation the social situation of Szeklerland in the past and present, trying to infer from these the social services needs over the next decades. On the another hand I make a comprehensive analysis of the present social services system measuring the density of territorial coverage, and looking for the strengths and weaknesses in this. The permanently actualized databases of Romanian social service providers and social services are accessible on the site of the Ministry of Labour and Social Protection and these offer a complete image of the officially approved existing social services and service providers.

I use in my analyses these kind of data as primary source material, but having a much deeper knowledge of Szeklerland social services I have been able to introduce other methods too in the research. Based on my almost 25 years of direct experience in the researched field (both at management and executive level, in both the NGO and governmental sectors), it has been straightforward for me to use the methods of participatory observation and content analysis. The official databases of service providers and services do not cover all the details of the social services network, because there are several functioning social services agencies (even functioning with governmental funds) and providers in Romania which do not have official accreditation because one or more licence is missing (from the fire department, for example).

For methodological reasons the geographical area of my research is not 100% coterminous with the historical Szeklerland region but the three modern counties (Hargita, Mures and Covasna) that comprise the principal territories of Szekler habitation. I have been forced to accept this compromise because the all the territorial databases organise their data according to the actual Romanian administrative county structure. In my comparative analyses, data processing, and conclusions I have used the historical regional boundaries but also the NUTS 2 European regions, and county boundaries. I have also processed data from the Hungarian government's social services database, in order to have a larger perspective and to give another reference point to my analysis of the density and development of the Romanian and Szeklerland's social services networks. Also, to better compare social services coverage across different territories I have averaged my indicators to a population of 100.000 inhabitants because there are big differences between the populations of different regions and counties. Beside the average values I have also calculated median values and dispersions to have more certitude about the correctness of my conclusions. For my description of the situation in Szeklerland I make a deeper introspection, using as well as the official databases also data from organizations' websites, and other communications made by them, and as I mentioned before my more than two decades of personal experience and my professional network have also helped me to do this.

In my qualitative research I selected and interviewed 21 professionals and decision makers involved in social assistance, using an interview guide I designed. I had to bear in mind a number of specific criteria in the structure of the guide but also in the selection of respondents. The most important aim was of course to get information which contributed to the explanation and

validation of my hypotheses and offered more nuanced imagery in the elaboration of these. I formulated questions regarding to:

- the strengths and weaknesses of Szeklerland's social services system
- a comparison of the Romanian and Hungarian systems territorial disparities in social services;
- development opportunities and things to do;
- why they chose the activity field on which they activate;
- past and present sponsors, financial supporters;
- transfer of know-how from abroad;
- the importance of personal relationships (between organization leaders and public administration leaders);
- the role of the leaders and role of the respondents;
- the circumstances of their organization's establishment, and the role assumed by the organization;
- the numbers of employees, volunteers and beneficiaries;
- their situation with regard to accreditation, and their attitudes towards this process;
- relationships between the public and the NGO sector;
- the social benefits sector;
- development perspectives and vision of the organization, institution;

In my selection of respondents I have aimed for diversity and a wide range of viewpoints, but finding ideas they held in common was also an important aim. I discussed primarily with actors directly involved in social services, but it was also important to have the perspectives of controlling authorities, and institutions responsible for social benefits. All my respondents have more than 10 years of experience in the area but the majority of them have even 20 years of activity in social assistance. Beside 11 leaders and employees of public institutions I also selected 10 respondents from NGOs. In the case of respondents from the public sector I selected them from different levels, starting from the local administration, through the county level to government institutions and also social workers from non-social service provider organizations which have strong connections with the social assistance system and employ social workers in their structures, such as the hospital and prison. At local level I chose two respondents from town municipalities and two from village local authorities. In terms of the selection of NGO respondents I tried to have persons from big organizations with a wide range of services and hundreds of employees but also from smaller, locally acting organizations. I chose my respondents from leadership, middle management and executive levels. Three Mayors, two institution directors, eight presidents or directors of NGOs, four middle managers, and four executives were among my respondents.

3. RESULTS

3.1. Effects of demographic processes on the social assistance system in Szeklerland

Looking to the evolution of demographic indicators of the last 100 years in Hargita, Covasna and Mures counties we can see that even if there are some differences in comparison with the demographic evolution of Romania as a whole, the trends are really similar. Hungary and Romania but also Szeklerland had young populations with a good reproduction rate at the moment of the Trianon treaty, and the following social and historical evolution affected them in a similar way.

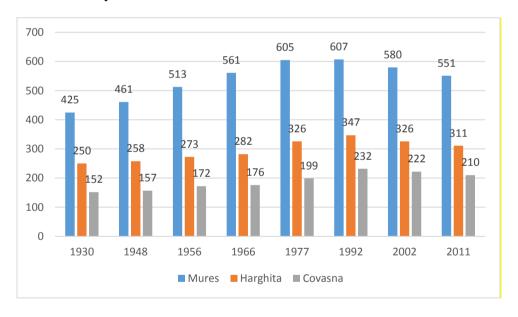


Chart no. 1: Evolution of population in Szeklerland's counties (thousands)

Source: Census data INSSE

Analysing the 1930-2002 period we can see a continued increase in population until the moment of political change in 1989. This trend has a major turnaround between 1992 and 2002 and the population number started to decrease, a trend that continues today. The year of 1967, when the communist state banned

abortion, is considered an important date in Romanian demographic history. This brutal intervention of the state in demographic evolution caused for the following 10 years an increase in the birth rate and problems for this generation in the capacities of the education system and labour market. These generations, still active today, will in a decade start to increase the numbers of pensioners and will put pressure on the pension system and social services for the elderly and will increase the ratio of pensioners per working population. After 1968 year on year people found the tools to adapt themselves to the new situation and the number of births started to decrease. By 1989 the birth rate had reduced by half. The statistics also show a continual slight growth in the birth rate from the mid-sixties to 1996, when this trend reversed. Another important year in Romanian demographic history seems to be 1992, when the curve of deaths crosses the curve of births and Romania entered the cycle of continual depopulation. The aging process of the population in Romania is similar to wider European trends according to Eurostat's data. In the last 10 years the population as a whole has decreased, and the ratio of children to the total population also decreased, whilst the percentage of aged population (over 65 years) has increased. Eurostat estimates further population decrease; over the next 50 years Romania will lose a quarter of its population and will be left with only 15 million inhabitants. My accounts based on the Romanian Statistical Office's data show the same trends. In 2003 19,38% of the total population were aged 60 years and over, but in 16 years (in 2019) this proportion grew to 25,48%. In the same period the rate of population under 20 decreased from 25,12% to 21%.

In my researched territory (the three counties from Szeklerland) I could observe the same trends even though, due to the lack of statistical data, I had to make my calculations for a shorter period. So only in the last 7 years (2012-2019) the proportion of the population over 60 years of age in the three counties has grown from 21,79% to 24,8%. The age tree of the Romanian population (below) makes visible the gravity of the problem, and the pressure which will be brought to bear on the pensions and social services systems. This diagram clearly shows the population growth caused by the abortion ban, and also the rapid decline in the birth rate starting from 1990. It is expected that the current generation aged 40-55 years s will became a major burden for the less populous younger generations over the next 20-30 years. Looking to the age tree of Szeklerland region we see a similar critical situation in which the least numerous generations are the 20-29 and 0-9 years, and the largest ones are in the 40-49 and 60-69 age brackets.

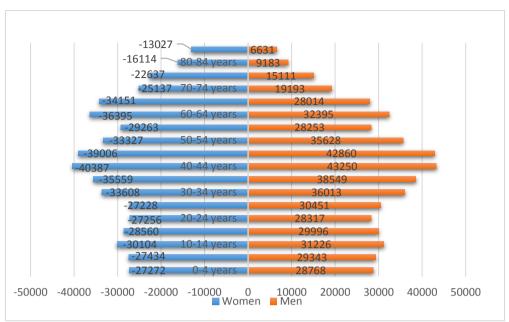


Chart no. 2: Age tree of resident population in Szeklerland (thousands)

Source: Constructed by the author based on INSSE data

There is very little research and a lack of political debate on the subject of changes in the ratio of the Roma population in Szeklerland region, even if this is more radical than the more debated Hungarian-Romanian population changes.

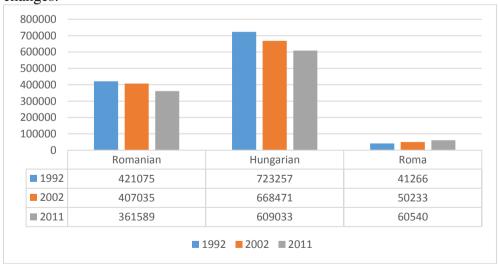


Chart no. 3: Evolution of population in Szeklerland region by ethnicity (thousands) Source: Constructed by the author based on Census data

It is possible to see a more accelerated change in the ethnic structure of Szeklerland's population if we consider that there are significant differences between the respective age trees of the Roma and the Romanian and Hungarian populations. While the age tree of the Hungarian population is similar to the general population, having a smaller base and larger generations in the years after 1968, the Roma population's tree model resembles a pine tree, with its larger branches at the base.

The changing structure of ethnic populations is also an important subject for my research because these processes generate social problems which are already visible and urgent for local communities and authorities to address, although they do not want to see the future impact of these. Even if as a result of European open borders and open labour markets the financial situation of many Roma families has improved considerably, there are still large communities living in severe deprivation, with social benefits (children's' benefits, minimal social income) as their only stable income. In these communities there are very few persons with official jobs, early school leaving is commonplace, general health conditions and access to health services are poor, malnutrition, begging and criminal activities are present. The prejudice and hate of the Hungarian and Romanian communities toward the Roma are fed by criminal incidents that have been committed by those of Roma ethnicity in public spaces in recent years. The interethnic political debate in Szeklerland, and also in Bucharest, is still focused on the Hungarian - Romanian relationship but the Roma minority question has the potential to become much more important for this region in the coming decades. A deterioration in social security and a lack of qualified work force could have negative effects on the image of the region in economic and investment circles, bringing worse perspectives for local authorities' budget incomes.

Romania, with a 53,71% proportion of urban population is among the least urbanized countries in the EU; but the average for the three researched counties is even below this national average. Every second person living in rural areas in Romania is at risk of experiencing poverty, Romania having the second worst situation from this perspective in the EU after Bulgaria. The most rural county of Szeklerland is Hargita where only 42% of the population live in cities, Covasna having 47%, and Mures 50% urban population. In case of rural families living from subsistence agriculture, without formal work contracts or health and pension assurance, the deterioration in health of the breadwinner for example puts the family in a very exposed situation in which they become clients of the social assistance system. In such cases this deterioration will inevitably occur, the only question being whether there are family members who can take care them or if they have to be assisted by social services. The

aging rural population in Szeklerland makes these questions more and more prevalent, even if the majority of the population does have social security insurance. The growing ratio of the elderly to the active population will also bring new problems for the social security system. The increasing need for social services like elderly houses, home care services, day care centers and soup kitchens will create new and serious problems in human resources and the financing of these services. The migration balance of the region also looks bad; if in the past emigration was compensated for by a growing population and limited natural resources, in the new era the better paid European or big city jobs attract the youth. In the past natural population growth mitigated this flow but nowadays the emigration of a young, qualified, foreign languagespeaking work force is an important loss for the region not only in the midterm but in the long-term too. Looking at the birth-rate in terms of ethnicity we can see that the fertility rate of the population in the region is raised by the higher fertility rate of the Roma population, which can entail new social service needs in the foreseeable future.

3.2. Influences of Szeklerland's economic situation on the social assistance system

The development of Szeklerland has not been a priority for the Romanian government in the last one hundred years of common history, so there have been no important infrastructure and economic investments in the region. As a result of forced industrialization there also appeared factories with a large demand for workforce, which was assured by colonization form other region of Romania and commuting of the rural population from the region. After the political changes in 1989 the industrial production of the region fell and capacities were ruined. Presently only Targu Mures could be considered as a kind of economic hub which has succeeded in attracting some important investments during the last 30 years. The GDP at Purchasing Power Parity (PPP) per capita of Romania stood at 59% of the EU average in 2017 with a 17.200 Euro/year value. The Central development region which includes our three counties has a 55% of the EU average as the third most developed region in Romania after Bucharest and the West region, but this relatively good figure is due to the presence of Brasov, Sibiu and Alba counties in the region. In 2017 Mures County realized only 47% of the EU average, and Covasna and Harghita only 40%. These numbers show that the majority of Szeklerland's territory has limited economic development, with the living standard of population being lower than the Romanian average. The significance of the Harghita and Covasna counties' economies in the national economy is small and this has further declined in the last decade (2008-2018). Due to the data published by analizeeconomice.ro, a site that specializes in economic analyses, Covasna County had a 0,8% contribution to the Romanian GDP in 2008 and only 0,7%

in 2018. In the case of Harghita County the 1,2% contribution from 2008 dropped to 1% in 2018. Similar to national trends the economic indicators of Szeklerland's counties had a positive evolution after the 2008 economic crisis. The number of employees in Harghita County rose to 70.915 in January 2019 from 64.580 in January 2014; in Covasna the number grew from 45.691 to 51.460 in the same period. This almost 10% growth of the indicator is a real improvement in this field. In the case of Mures the improvement is even bigger - 12%; here the number of employees rose from 125.239 to 140.137. Net incomes also doubled in Hargita and Covasna counties in this period and almost doubled in Mures County. In this way Mures and Covasna Counties rose to the middle level of the counties' rankings while Hargita is still among the counties with the lowest net incomes nationally. In terms of exports, Mures is a middle ranked county while Hargita and Covasna are in the last third of counties. GDP growth in the last 20 years has been spectacular for everybody in Romania. The Romanian GDP grew 10,6 times, while Covasna "only" had 7,27% growth, Harghita 8,28% and Mures 8,45%. It is evident that even in the context of the general economic development, the Harghita and Covasna counties' economies lost ground and the gap between them and other counties grew. The economy of Mures County, thanks to the presence of energy and multinational pharmaceutical companies, has produced higher value than the economies of Hargita and Covasna. Under such conditions the above average development and coverage of the social services in the region is even more remarkable, and the social sector could be considered a key sector for the region's economy, but at the same time there are real chances that the slower growing economy will bring serious financing problems for this sector.

3.3. Analysis of the first hypothesis: The development of the Romanian (and implicitly Szeklerland's) social assistance system has not been based on an integrated strategy.

I have made my analyses of the social assistance system from two perspectives using implicitly two kinds of methodology: statistical analyses and conducted interviews, using at the same time the methods of participatory observation and content analysis. According to the database of the Labour and Social Protection Ministry there were 2596 accredited institutions/organizations providing social services on October 5th, 2018 in Romania. The majority of these providers (59%) were NGO's -1539. The presence of the NGO's in the social services market is a kind of indicator of social services development level in the region because the state-owned institutional network has produced with some variations the same system from one region to another. Against this backdrop NGO's often create and run gap-filling services which are not present in the state-owned network, but following Western European models and knowledge

offer new references for Romanian authorities' social policy at national or at local level

My regional analyses showed that:

- In the three development regions of Transylvania (Central, North-West and West) there are 17 (16,93) service providers for every 100.000 inhabitants, while in the southern regions (former Muntenia) the average is only 9,31.
- In the Transylvanian regions there are twice the number of accredited NGOs as service providers than in Muntenia and Moldova. (11,63 4,97).
- If 10 counties from Transylvania (including Mures and Harghita) have more than 10 social service provider NGOs per 100.000 inhabitants, the last 12 counties (all in Muntenia and Moldova) have less than 4.
- There are huge differences among the numbers of accredited churches and local authorities as social service providers from county to county, and these differences can be explained by an imitation behaviour of these.

In case of the 3675 licensed social services:

- In the Central Development Region (containing Szeklerland) there are twice the number of social services per 100.000 inhabitants than the South Region, and 60% more than the national average. (18,71).
- Calculating at county level per 100.000 inhabitants we can see that in the first 10 counties with higher number of services, 9 are from Transylvania and only one (in the 9th place) is from Moldova. From the weakest 10 counties from this point of view, 8 are from Muntenia and two from Moldova.
- In the first six counties there are 3,5 times more social services agencies per 100.000 inhabitants than in the last six. (35,76-10,18).
- All the three counties from Szeklerland are in the first 6 group Hargita and Covasna in the 3rd and 4th places. Mures County is the 6th.

This quantitative analysis shows a quite unequal, and insufficient coverage with social services organisations in Romania. It offers clear evidence that there are important differences in this coverage between Romanian historical regions but also at the level of development of regions and counties. These inequalities can be explained by the presence of NGOs and the external relationships of these and the different levels of social responsibility and cohesion in different communities, but also by imitation behaviour in some cases. The information obtained through the qualitative research confirms

these explanations, and also points out other important aspects like the role of individual charisma, personal relationships, and the role of communities in the development of social services.

3.4. Analysis of the second hypothesis: The actors and functioning mechanisms of Szeklerland's social services system have particular characteristics.

As we can see from the analysed data the three counties from Szeklerland are in the first 6 counties regarding the density of social services per 100.000 inhabitants. But even so we cannot speak about an optimal distribution of social services in Szeklerland. More than half of these services are in the cities and the majority of localities have not even a single service. The best situation from this point of view is in Harghita County; the worst is in Mures. The most prevalent services are child protection ones (mostly specialized services), services for elderly persons (home care), and services for persons with disabilities. The state owned services are mostly represented in specialized services areas while NGOs are more active in communitarian services. The majority of social services in Szeklerland are operated by NGOs (54%) while at national level this ratio is only 39%. The national average of services administrated by local authorities (cities or villages) runs at 14%. In Szeklerland this ratio is only 8%. The data shows a relatively even distribution of services in the historical 'seats' (Csík, Gyergyó, Udvarhely) of Harghita county, but important inequalities in the case of Covasna county's 'seats'. In Harghita county most services are in Udvarhelyszék 45, followed by Csíkszék 41 and Gyergyószék with 29 services. In the area of Toplita where the Romanian orthodox population is in the majority there are no local initiated services provided by NGOs. In Covasna County the best social services coverage is in Kézdiszék where the existing 18 services operate in 7 different administrative areas. Sepsiszéket is clearly dominated by the city of Sfantu Gheorghe; 28 social services from a total of 34 are here and only 6 are in 4 other localities. In Bardóc-Miklósvárszék and Orbaiszék 2 localities have social services - Baraolt and Covasna. The former Marosszék which constitutes less than half of the present-day Mures County, has relatively good coverage comparative to the whole of Mures County. The Marosszék territory comprises 2500 km² from the total 6714 km² of Mures County but here are concentrated 91 from the total of 145 services of the county. The distribution is influenced strongly by the city of Targu Mures, where there are 54 services of these 91, but we can see a relatively good territorial distribution of the rest of the services in rural areas too. Looking to the number of social services related to the

number of population, Hargita County is the best provided country from these three.

In conclusion, the social services network of Szeklerland has several particularities, which makes possible an above average performance in territorial coverage, diversity, and quality in relation to the Romanian system as a whole. The most important actors in this development have been the western relationships of NGO's linked to historical churches, the NGOs' relations with partners from Hungary, the community consciousness in Szeklerland localities, and the charismatic qualities and relationships of NGO leaders from the region.

I. 4.5. Analysis of the third hypothesis: It is a basic problem of the social services system that the proportion of community services to specialized services is not commensurate with declared social policy principles, in that the specialized services are more prevalent than community services.

In a well-organized community one or more day care centers for children, the elderly, disabled persons, soup kitchens, home care services, and counselling centers are basic necessities. If we look at the 3282 Romanian administrative units, then over 16.000 communitarian social services should exist in these at a minimal level. Despite this, according to my analysis only 1537 day care centers, counselling centers, and home care centers existed nationally in 2018. A much better coverage existed in the field of specialized services; 2138 of these were in operation at the time of the analysis.

The underdevelopment of the Romanian social services system is visible if we make a comparative analysis with the Hungarian system. Romania with a territory of 240.000km² and 20 million inhabitants has 2596 social service providers/institutions/organizations. Hungary with a territory of 93.000km² and 9,7 million inhabitants has 5720 service providers according to the government database. In contrast with the 3675 licensed social service agencies in Romania there are 14779 in Hungary. The most evident differences are in the attitudes of local authorities toward their social service provider role, in the coverage of communitarian social services and in the ratio of communitarian services to specialized services. While in Hungary 8588 social services are operated by the local authorities, in Romania it is just 528, despite the fact that according to both countries' legislation local authorities are named as those primarily responsible for creating these services. In Hungary among the "non-profit non state owned" (863) and "others non state owned" (1841) categories we can find foundations, associations, non-profit and public utility

firms, but also for-profit firms and individuals. There are 1774 services operated by the central administration which corresponds to the 1505 social services in Romania operated by County Child Protection and Social Assistance Directorates. The two systems were relatively similar until the Hungarian reforms when the county councils lost the majority of their functions in the Hungarian administration. Even if here the differences seem to be small we have to consider that Hungary has a territory and population that approximate to half of the Romanian equivalents. For a total 1713 church-owned social services in Hungary, in Romania this number is only 72. The number of communitarian social services is 11144 in Hungary which produce an almost 4 service per administrative unit average in Hungary, while Romania can count only a half communitarian service per unit. The communitarian services are three quarter of the total services in Hungary and only one third in Romania.



Chart nr. 4: The ratio of communitarian social services to specialized services in Romania and Hungary

Source: Constructed by the author based on databases of social services

The huge difference between the number of social services operated by local authorities can be explained by differences existing in social legislation but even more important in the financing systems. In Romania even if the necessity to create communitarian services is present and is a duty of local authorities, there are no measures or sanctions if they do not comply with these. Hungary seems to present a better model in that local authorities really see the creation of basic social services as one of their duties. In the case of small administrative

units in Hungary, a number of local authorities often combine together to run and commonly finance one social service or another; in Romania this practice is missing even if the legislation makes it possible. The main difference in the financing system of social services is that in Hungary the central government assures constant and sure finance for local authorities based on standard costs / beneficiaries, while in Romania this system functions only partially, in the case of specialized services. The financing of communitarian services is left to the budgets of local authorities so in these conditions small and impoverished administrations have no motivation to create these.

It can be seen both from my quantitative analysis and from my interviews that the biggest problem of the Romanian (including Szeklerland's) social services network is the deficit of community level services. The comparative analysis with specialized social services in Romania and with the Hungarian services provided evidence for this. I also found that in Szeklerland, local authorities' activity in this field is even weaker than at national level; the strong presence of NGOs seems to be comfortable for them, and the NGOs find it harder and harder to attract resources to maintain their services. The most important obstacles to the development of communitarian social services remain, as well as the negative attitudes of local authorities, the total lack of financing for these services from the national budget, and the lack of mandatory regulation in this field applicable to local authorities.

4.6. New and novel scientific findings

- In my doctoral research I have described and analysed an area of Szeklerland's society about which comprehensive studies have not been undertaken in the last decades. The social assistance system, even if it is present in our lives and is an important item of the national budget, gets relatively little attention, and there is little scientific research about it. The importance of this research focused on the Szeklerland region is also proven through my results. The region is a clearly identifiable cultural and ethical unit, which itis absolutely necessary to have appropriate knowledge about in order to inform policy development.
- I consider it an important value of my research that I have made my analyses on the social assistance system in the larger context of social and social policy history, in order to have a deeper understanding of the current system's particularities. The church and communities' traditional social

solidarity actions and forms are described in a few studies from which I have also collected information, but in the research I proceed to see how these forms continue and are valued in the present-day formal and non-formal social assistance system.

- The functioning of the social assistance system is frequently presented in the mass-media as a negative drag on economic and demographic processes, but there are very few realistic analyses about the interaction between these systems. I analyse in my research relations between demographic and economic processes and the social security and social assistance systems showing the bidirectional effects of these relations. I show through my research results that the appropriate functioning of the social assistance system has short-term and long-term positive effects on the communitarian, economic and demographic processes, and also decreases pressure on the social security system.
- The tools, research areas, and approaches of regional sciences also offer a new perspective for social policy studies and other social sciences too. I discovered this new perspective when I started my doctoral studies and I try to use this also in my doctoral research. I have not found any published Romanian specialist research which has a comparative territorial approach to analysing social benefits distribution or social services coverage. The results of this research has reinforced my conviction that this approach is a useful one, and could become an important tool in system analyses, service projection practice, and social policy decision-making.
- Through my quantitative research I have highlighted important territorial inequalities between different level NUTS regions of Romania, in distribution of social benefits but more evidently in the territorial coverage of social services. The latter is influenced in the first instance by the presence or absence of social service provider NGOs, as my analysis has shown. A clear and sharp border is also visible between the historical regions of Romania from this point of view. The Transylvanian counties' coverage is several times better in terms of social services provided by NGOs than counties from Moldova and Muntenia.
- Besides quantitative research I have obtained important information also from qualitative research which proves that development of social services and territorial coverage has been less influenced by national or local strategies

and social policy decisions and more by events, processes and actors who are not directly concerned with the social assistance field. I have listed several examples when the creation or functioning of social services were instigated by foreign policy or church policy decisions, personal relationships and individual charisma, or social imitation. This result raises a new question: Are there similar "irrational" influences in the case of other social systems too or this situation only typical for the social assistance system?

- Analysing the case of Szeklerland's counties compared with counties in other regions we can see that despite the relatively bad economic conditions, the territorial coverage of social services is better than the national average or other counties with much better economic potential. As I found through my qualitative research this performance has been helped by the NGO's created alongside churches with strong Western-European relationships, by dense networks with Hungarian partners, by personal charisma and relationships, but also by the community cohesion. At the level of micro-regions I have shown that micro-regions in Szeklerland where an orthodox Romanian majority live evidence the same deficits as can be observed historically in those regions.
- Based on comparative analyses of licensed social services made on Romanian and Hungarian governmental databases, I have shown that the Romanian and in part Szeklerland's social services systems have an unhealthy inversed pyramid form in which the specialized social services has more weight than communitarian services. This harmful and obviously more expensive and less efficient system is a result of missing strategies, development concepts and knowledge and finally external political pressure. As I found in my qualitative research the passive and negative attitude of the local authorities in Szeklerland is a factor that impedes the reconstruction of a new normality in this field.

4. CONCLUSIONS, SUGGESTIONS

As I have mentioned above, the demographic and economic perspectives of Szeklerland are strongly influenced by the life quality of people living here, so there are important interconnections between economic, social assistance and other social systems. Presenting the demographic processes I showed that the

population from this region historically has a high reproduction rate, and emigration tendencies due to the overpopulation of the region, but I analysed present demographic phenomena too. As we can see from the data the demographic transition in Szeklerland is already in the fourth phase in which both birth and mortality rates are at a low level, but since 1992 the number of deaths is significantly higher than number of births, whilst the willingness to emigrate remains at a high level no longer as a consequence of overpopulation but because of better economic conditions in destination countries. I presented also that the age tree of the Hungarian population from Szeklerland has a narrow base and large middle age generation (which predicts accelerated aging of population and sustainability problems for social protection systems in the future), in contrast with the age tree of the Roma population. The effects of these processes are already present; the need for elderly people's social services exceeds capacity, there are no important job creation investments in the region because there are insufficient numbers of young qualified workers. With the exception of Targu Mures, Szeklerland can be considered a rural region which, despite the political debate about autonomy and the general economic development, has not succeeded in becoming a strong economic nexus, and has remained a peripheral region in the centre of Romania just as it was in the past, on the historical Eastern border of Hungary.

For a better understanding of the particularities of Szeklerland I presented the helping habits of traditional communities and Christian churches in the region, also including material based on oral history sources. The force of communitarian togetherness and the role of this in the creation of the present social services network is visible in the responses to my qualitative interviews. I describe the Romanian social assistance system as an insider, analysing the legislation and statistical data to in order to better understand the framework in which the social services network of Szeklerland has to act. Access to Hungarian statistical data and reviewing the last 20 years of Hungarian and European social policy has given me new opportunities to make comparative analyses of the situation. From these analyses it became obvious that the construction and reform of the Romanian social services system has stopped half way. Specialized services have been modernized and have a relatively good territorial coverage, whilst communitarian services have remained at an incipient stage. These inequalities are present in the urban-rural dichotomy too; a disabled child born in a rural area will have significantly less chances to get the appropriate therapies and rehabilitation than a child born in a big city in Romania. I have also analysed the relationships between social benefits and social services systems, because they strongly influence each other, using also research tools of regional sciences. I have undertaken my doctoral research using quantitative tools to give an objective, touchable reality but also through a qualitative deep introspection to understand the real driving forces of the development processes because in many cases these are not evident from published official sources. In my quantitative research I focused my attention mainly on the databases of service providers and social services in Romania and Szeklerland but as I have mentioned I also worked with demographic and economic statistical data too. I focused my analyses on regional and county levels, and in particular on the three counties from Szeklerland, where I also went to the level of historical 'seats'. For a better understanding and a clearer image of the situation in the region, as well as the officially public data I used my knowledge about the area to collect other data from organizations' websites, their own communications and also the interview data from my qualitative research. It became evident from the data that the three counties of Szeklerland, despite their relative economic lag, are among the best-covered counties with respect to social services, mainly because of the services development made by church-related NGOs. On a micro-regional level it can be seen that in orthodox majority population micro regions the presence of NGOs in social services is considerable smaller. In the qualitative interviews I involved 21 institution or organization leaders, elected persons and social workers, all of them having significantly important experience in the creation and functioning of the social services network of the region. The data, attitudes and information collected helped me to confirm my hypotheses. The answers given in interviews confirmed that the human factor has had a more important role in social services network development than official strategic and legislation frameworks. Several services or service providers only exist due to the work of so-called 'personalities' who have dedicated their lives to their causes. Unfortunately the contrary situation is also the case; my subjects condemned the unconcerned or hostile attitude of some decision makers which block the further development of services. Financial unpredictability is also seen as a major problem by the majority of service provider NGOs. These two problems offer an explanation for the underdevelopment of the communitarian services network too.

H.1. The development of the Romanian (and implicitly Szeklerland's) social assistance system has not been based on an integrated strategy. (Confirmed)

My territorial comparative analyses made at the level of historical regions, development regions and counties, based on the databases of social services and service providers shows that the Romanian social services map is formed more by factors that do not directly relate to the social assistance system, and less by national strategies and policies; and that this situation has produced significant territorial inequalities. There are no mandatory requirements on local authorities to oblige them to maintain even a minimal social service network, but even the development of NGO's services are not based on strategies or empirical based decisions. Factors without direct relevance to social assistance which have influenced the development of the Romanian social services network are: political decisions of European Union, church policies, personal relationships and charisma, or social imitation. Territorial inequalities are present between the different NUTS levels of Romania both in the distribution of social benefits, and social services coverage too. My analyses show that the differences in territorial coverage are due mainly to the presence or absence of service provider NGOs, and this presence is influenced, as I found in my qualitative research, by the above-mentioned factors. In terms of hypotheses confirmation, this research has shown that there is a clear border between Romania's historical regions. The Transylvanian regions have several times more social services created by NGOs than the Muntenian and Moldavian regions have.

H.2 Actors and functioning mechanisms of Szeklerland's social services system have particular characteristics. (Confirmed)

The quantitative and qualitative comparative research made on the level of Szeklerland and the three counties in the Romanian context shows that the social services network of the region has not just a better coverage, it is more colourful and particular than the national network. The conclusion of the studies about this subject which showed an above-average development presented in my report are confirmed by my own research results. My qualitative research conclusions show the multifaceted uniqueness of Szeklerland's social services. The cohesive force of local communities has been seen as the most important factor in the better development of social services in the region. In many cases the creation and functioning of social services in Szeklerland have been facilitated by personal relationships and charismatic individuals. In my qualitative research I found several examples in support of this statement. Charismatic organization leaders have an important role in the creation of service networks, using also their personal relationships

with decision makers, even if in the interviews they were reluctant to recognize this. The Catholic and Protestant churches' relationships with Western European partners has played a very important role in Szeklerland's social services development of, but so also have the close relationships of social service providers with Hungarian partners. All these relationships bring financial but also know-how support to the development of services. The NGO presence in the social services network is stronger in Szeklerland than in the rest of Romania, and this presence is thanks to the activity of Catholic and Protestant church-related organizations (Caritas, Diakonia, Szent Ferenc Foundation). These organizations already have three decades of relationships during which they have received important financial and know-how support from western organizations. As a result of this the churches have created new kinds of services, new input for the Romanian social services market. The learning process has become a bi-directional one nowadays, with the help of Erasmus programs, conferences and worker exchanges.

H.3. It is a basic problem of the social services system that the proportion of community services to specialized services is not commensurate with declared social policy principles, in that the specialized services are more prevalent than community services.

Based on the analyses of the Romanian social services database but also on the comparison with the Hungarian database I proved that the Romanian and to a lesser extent Szeklerland's communitarian social services network is underdeveloped in relation to real service needs but also in comparison with the specialised services network. Less than 5% of localities have communitarian social services. Day care centres for children, elderly and disabled persons, soup kitchens, and homeless shelters are missing, home care network is only developed in the big cities and mostly in Szeklerland. In the research made to confirm my first hypotheses it became obvious that the reforms made at the level of specialized social services is a result of political pressure from European level, and the softening of this stopped the process at this stage. In Romania there just wasn't enough political will to develop and finance a communitarian social services network. So the current social services network is a wobbly construction with limited support, which tries to resolve social problems through specialized services and thereby puts serious pressure on these. Whilst in Romania there are more specialized services than communitarian ones (2138 - 1537) in Hungary this ratio is more acceptable, having a ratio of 4 communitarian services to every 1 specialized. The most severe consequence of this situation is the total lack of services in the majority of rural areas, and a heavy inequality of life-opportunity affecting people who live there.

Suggestions

- **S.1.** Creation of a national, predictable financing system for social services is a clear necessity, learning for example from the Hungarian model. In my research I identified this need not only from the NGOs but state providers require this also. A properly built and functioning financing policy has to be the base for my next suggestions too.
- **S.2.The mandatory provisions of a minimally obligatory social services network has to be adopted by Romania.** In this way all citizens from any part of the country would have access to a minimal package of social services as per the health services model of. To achieve this a social assistance contribution could be introduced.
- **S.3**. Based on the principle of sector neutrality the **services provided by NGOs should have access to the same financial resources, in the same volume as state owned services for services** provided under the minimally obligatory service package.
- **S.4**. Knowing the strengths and weakness of the social services system of Szeklerland **it is necessary to elaborate a social services development strategy for the region**, using the potential of the church related NGOs and Hungarian financial assistance. Based on this strategy the local authorities and NGOs could together build a comprehensive social services network with full territorial coverage.
- S.5. This new strategy could also be a basis for a more rational and transparent Hungarian governmental financing system for Szeklerland's social services
- **S.6.** It is necessary to create a social assistance communication strategy for Szeklerland system which can directly reach the main decision makers, but also indirectly, through improving the public image of social services in order to convince the decision-makers to take action in this field. There are a countless positive examples in the actual social services network that could feature in this communication.

5. LIST OF PUBLICATIONS RELATED TO THE DISSERTATION

Book, chapter, article

In Hungarian:

- 1. **Elekes Zoltán (2016): Szociálpolitikák Romániában** (University notes) Stúdium sorozat 1. szám T3 Sfantu Georghe ISSN: 2286-0363, 125 pages (Password: 1984)
- Elekes Zoltán (1997): Időskor, elszegényedés és szociális gondozás

 published in "Így élünk elszegényedési folyamatok a
 Székelyföldön" volume, KAM Regionális Antropológiai Kutatások
 Központja Pro Print 1997 133-146 pp. ISBN 973-9311-04-0
- 3. Elekes Zoltán (2016): A vidéki térségek szociális szolgáltatásokkal való ellátottságának dilemmái Hargita megyében. –Falu 2016. winter Budapest, 49-55 pp. ISSN 0237-4323
- 4. Elekes Zoltán Nagyné Molnár Melinda: Fenntarthatósági dilemmák az idősellátásban Romániában, Hargita megyei példákkal. In: Comitatus: önkormányzati szemle, ISSN 1215-315X, 2017. (27. évf.), 223. sz., 78-85. p.

In foreign language:

- 5. Elekes Zoltán Mirela Frunza (2004): Studiu privind imaginea persoanelor cu handicap in ochii elevilor de liceu (Image of disabled persons among the Romanian students in Romanian "Studii si Cercetari din domeniul stiintelor socio-umane" Performantica Iasi 2004 42-59 pp. ISBN 973-730-028-9,
- 6. Elekes Zoltán (2017): Trends and results in Romanian social policy The case of child protection system –Selye János University e-studies 2/2017, ISSN 1338-1598; 71.-82. p
- 7. Elekes Zoltán (2018): Human resources in Romanian child protection social services A regional analyse –Social Analysis 8/2018, ISSN 2248 0854; 91.-106. p.

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- 8. Elekes Zoltan (2012): A Hargita megyei szociális ellátási rendszer regionális megközelítés XIII. RODOSZ international conference 2012; 30. pp. 2013.
- 9. Elekes Zoltán (2014): A Hargita megyei gyermekvédelmi rendszerben élő gyermekek médihasználati szokásai Kihívások és megoldások A média hatása a gyermekekre és fiatalokra Konferencia, 2014 május 12-13 Csíkszereda, Státus 2015, 116-119 pp. ISBN 978-606-661-033-9
- 10. Elekes Zoltán (2014): A Hargita megyei szociális szolgáltatási rendszer területi diszparitásai 11th Annual International Conference on Economic and Business Global challanges local answers 16-17th May 2014, Publishing house: Risoprint, Cluj- Napoca, 2014, 1032-1055 pp. ISBN 978-973-53-1287-9, CNCSIS: B

In foreign languages:

11. Elekes Zoltán (2015):Economic and social challanges of employment of persons with disabililities — 12th Annual International Conference on Economic and Business — Challanges in Carpathian Basin 5-6th June 2015, Publishing house: Risoprint, Cluj-Napoca, 2015, 141-149 pp. ISBN: 978-973-53-1566-5 CNCSIS: B