## SUMMARY

## KOSICE SELF-GOVERNING REGION

## I. Basic sociodemographic indicators

- The county of Košice, having 794,025 inhabitants, is the second most populated county of Slovakia. 442,846 inhabitants (55.77\%), thus more than the half of the total population of Košice county ( 794,025 people) live in cities.
- According to the statistical data, the population of Košice County rose in the last 5 year period (2008 to 2012) - by 18,516 people. The changes are various in the respective districts of the county.
- Demographic development is slowing down in Košice County - this is due to the balance of the natural increase, as well as the total increase/decrease of the population. Changes in the reproduction behavior lead to the decrease in the total growth of the population.
- In Košice County, the natural growth (or reduction) of the population per 1000 inhabitants shows the following trend in the surveyed ( 5 year) period.

| Košice | 2.63 | $\mathbf{3 . 5 6}$ | $\mathbf{3 . 0 2}$ | $\mathbf{3 . 3 4}$ | $\mathbf{1 . 7 8}$ |
| ---: | :--- | :--- | :--- | :--- | :--- |
| County | 2008 | $\mathbf{2 0 0 9}$ | $\mathbf{2 0 1 0}$ | $\mathbf{2 0 1 1}$ | $\mathbf{2 0 1 2}$ |

The values are different in the respective districts. During this 5 year period, the largest total increase per 1000 inhabitants was found in district Košice III in 2011 (7.56), while it was lowest in the district of Michalovce in 2012 (0.21).

- The overall growth of the inhabitants of the county in the surveyed period is still lower than the overall increase due to migration. (during the 5 year period, the number of people migrating away surpassed the number of those migrating into the area).

| Total increase (decrease) per 1000 <br> inhabitants |
| :--- |
| 2008 |
| 2009 |
| 2010 |
| 1.8 |
| 3.36 |
| 2.41 |
| 2.72 |

Annually, approximately 3000 inhabitants move away from Košice County to other regions of Slovakia and approx. 2500 inhabitants move in. Nine districts have reported a negative migration balance. Only the districts Košice - okolie [Košice rural area] and Košice IV have seen an increase due to people moving in.

## The biological and age structure of the population

- The more significant decrease of the natural population growth, the migration of the productive population affects the biological and age structure of the population, it decreases the rate of the young compared to the total population, while the rate of elderly groups grows. The rate of post-productive people of the total population in the respective districts of Košice County is more than $10 \%$ (except for the district of Košice III, where it is $6.57 \%$ ).
- The largest rate of post-productive people is in the following districts: Košice IV (15.4\%), Sobrance ( $14.70 \%$ ), Košice I ( $14.05 \%$ ).

The average age of the population of Košice County was 37.69 years in 2011 . Of the districts of Košice County, the largest average age of the population was in the district of Košice IV (41.08), while the lowest was in the district of Spišská Nová Ves (35.48).

- According to the statistics, women are more numerous than men - in all districts of the county. In the county of Košice there were 387,129 men and 406,379 women in 2012. The ratio of men and women is different in the various EU age groups. In preproductive age, the number of men is higher, while in productive age, women have slightly more numerous in the last two years. A significant change is present in the post-productive age group, where the number of women is larger.


## ETHNICITY

- Košice County is a region with a population of varying ethnicity and religion. According to the data provided by the Slovak Statistical Office, in 2011 there were 792,991 inhabitants in the county of Košice, 580,604 of these reported to be of Slovak ethnicity, 121,796 being Hungarian, Roma, Czech, Moravian, Silesian, Rusyn, Ukranian, German, Polish or Russian and 90,591 people being of other ethnicity or not specifying any ethnicity.
- $4.67 \%$ of the population claimed to be Roma (2011). However, the real numbers of the Roma are significantly higher. The census data do not reflect the real numbers of the Roma minority, because a vast majority of the Roma do not claim to be Roma in the official census. The largest concentration of the Roma is in the east of Slovakia, housing more than $60 \%$ of their total population. Seen from the aspect of geography, most of them live counties of Košice (having more than $31 \%$ of the total population of the Roma in Slovakia) and Prešov (having 29.3\%).
- In absolute numbers, most Roma live in the district Košice rural area $(22,922)$. Districts Spišská Nová Ves $(19,036)$, Michalovce $(17,726)$, Trebišov $(17,234)$ and Rožňava $(12,978)$ follow.
- The largest part of the population claims to be roman catholic - in 2011 it was 406,601 people ( $51.4 \%$ ) - then Greek catholic: 75,231 believers ( $9.5 \%$ ). 43,748 people $(5.5 \%)$ claimed to be Calvinist and 29,230 people (3.7\%) Lutheran. 13,217 people, $1.7 \%$ claimed to be belonging to the orthodox eastern church. In $2011,89,350$ people ( $11.3 \%$ ) were atheists. 118,538 people did not report any religion, which means $15 \%$ of the population.


## II. Health indicators

- The number of births in the county of Košice shows a slight increase during the last 5 years, except for the district of Sobrance, where the natality is slowly decreasing, starting from 2008. In 2012, 8,864 children were born, while in comparison with 2011 this number is lower by 1,155 . In the surveyed period, the number of births was the lowest in 2012. The highest relative birth rate is in the district of Gelnica (14.29), Spišská Nová Ves (13.78) and Košice rural area (13.47), while the lowest is in Košice I ( 8,76 children per 1000 inhabitants).
- The number of deceased in Košice County was relatively stable in the period between 2008 and 2012, with a slight growth in the last few years. The number of deceased, split into districts, show various trends. Between 2008 and 2012, the number of deceased per 1000 inhabitants was still lower than the average of deceased in the whole country. As far as sexes are concerned, in Slovakia - similarly to most countries (except for some developing countries), we find more men among the deceased.
- Regardless of the reasons for death, a total of 103,806 people died in 2011. Of these, a total of 14,906 people died before their 65th year of age ( $28.7 \%$ ). $70 \%$ of these people deceased prematurely ( 0 to 64 ) were men. On the other hand, among the deaths of the people of 65 and older, women take the lead ( $56 \%$ ).
- The average lifespan in Slovakia shows a growing tendency, even though the growth is slow.We see a trend of the average lifespan of men approaching that of women. The difference between the average lifespan of men and women was 7.18 in 2011 and 6.88 in 2012.
- The most frequent death reasons in Košice County were the diseases of the cardiovascular system - every second death was caused by these.
In $2009,48.5 \%$ of the men and $60.4 \%$ of the women died due to these, with the main reasons being ischemic cardiac problems, and vascular problems in the brain. The second most frequent cause of deaths of both sexes is cancer. 1.5 thousand people die annually due to this disease ( $55.2 \%$ of men, $44.8 \%$ of women).
- In Košice County there are $\mathbf{2 8}$ healthcare institutions, as follows: with 3 being in the district of Michalovce, 2 in the district of Spišská Nová Ves, 5 in the district of Trebišov, 2 in the district of Rožňava, 1 in the district of Gelnica and 12 in the districts Košice I-IV. (one third of the population of the county lives in Košice), 1 in the district Košice rural area and 2 in the district of Sobrance. There are $\mathbf{8 7}$ home care agencies in the county.
- Currently, $\mathbf{1 8}$ providers of first aid medical service are operating in the county of Košice, as follows: 5 in the district of Michalovce, 2 in the district of Spišská Nová Ves, 2 in the district of Trebišov, 1 in the district of Rožňava, 1 in the district of Gelnica, 5 in the districts Košice I-IV., 1 in the district Košice rural area and 1 in the district of Sobrance.
- Within the county, 941 health care areas have been defined - the data of these are being constantly updated in regard of medical doctors in the county, the districts, municipalities and the changing number of streets in the respective areas of territorial administration.
- In accordance with the data of the Slovak Statistical Office, in 2004 there were 6183 hospital beds in Košice County. From 2004 onwards, the hospital capacity decreased by 870 beds until 2013. According to the data, there are 5313 hospital beds, which is by 1145 more than the amount specified by the law.
- Currently, the highest amount beds is missing from the departments of algesiology (20 missing), geriatry ( 75 missing), gerontopsychiatry ( 35 missing) and the hospices ( 75 beds), compared to the amount specified by the law.


## III. The economic state of the county

- The county of Košice shows significant differences in the economic indicators when comparing the parts of the county - this is one of the most significant problems of the county. Mitigating these differences is a significant problem of both economic and regional politics.
- When comparing the trend of the GDP of the respective counties we may see that the position of the county of Košice worsened within Slovakia. The ratio of the county in the total GDP fell. Košice County lost its position no. 2 (behind the county of Bratislava) of 2005 to position no. 3 in 2008 and to position no. 6 in 2010, with only the counties Banská Bystrica and Prešov being behind it.
- In 2008, the county Košice contributed to the GVA by $€ 7,164$ million - $11.8 \%$ (3rd in the national ranking). The county of Košice achieved rank \#5 in the national ranking by the dynamics of GVA growth. These fallback of the county of Košice continues in 2010 , the $€ 6786.480$ million took the county to rank \#4 in the national ranking.
- As far as the economy is concerned, the industry took the lead, but the dynamics of the development have shifted to the service sector; in the county of Košice, information and communication technologies are growing - in this sector, the county is 2nd nationwide.
- The differences in the indicators of the social and economic status in the respective districts of the county of Košice are very significant, not only in comparison with the city of Košice, but also with the other districts with significantly negative trends, at the east and south of the region.
- In comparison to 2008, the number of enterprises grew, but the number of selfemployed people shrunk in Slovakia. These trends have also appeared in the county of Košice, where the increase in the number of companies is lower, while the number of self-employed people is significantly lower.
The largest problem of the economy and society of the county of Košice is the high unemployment rate: in 2012 it was $19.7 \%$, which is the highest rate in Slovakia.
- The official unemployment rate in the county of Košice grew from $13.5 \%$ of 2008 to $19.58 \%$ of 2012, being the highest in Slovakia. The differences have not diminished even within the county; the unemployment rate has increased even in the most developed districts. Of the 11 districts, 6 have an official unemployment rate over $20 \%$, however, there are also microregions having unemployment rates over 60 and $70 \%$. In 2012, the number of unemployed was 70,039 , while the number of vacancies did not surpass 1000 .


## PEOPLE WORKING ABROAD

- The number of these is a stable 15 thousand people, with a slight decrease since 2008. In 2012, the survey data show the following working destinations: 1 . Czech Republic: 5500 people, 2. U.K. and Northern Ireland: 1,900 people, Austria: 4,600 people, Hungary: 100 people, Ireland: 300 people, Germany: 300 people, Holland: 600 people, while 2000 people worked in other countries.. In 2012, there were a total of 15,300 people $-8,700$ men and 6,600 women - working abroad.


## IV. Social services

- The number of registrations of public and private social service providers is the highest in the counties of Bratislava and Kossice, being more than the rate of the population here (Bratislava county: 13,6\% : 11,4\%; Košice County: 17\% : 14,3\%). Of the 465 registrations in the county, 240 entities were public and 225 private service providers.
- 137 institutions provide their services in Košice County. Most of these (38) were in the city of Košice, followed by the district of Michalovce (22), then the district of Trebišov (20) and Spišská Nová Ves (18). Further ranks belong to the districts of Košice rural area (14) and Rožňava (13). The least social institutions were in the district of Sobrance (6) and Gelnica (6). As far as the capacity of the institutions is concerned, the largest capacity was available in Košice $(1,838)$, then in Michalovce $(1,069)$ and then in the district Košice rural area $(690)$.
The expenditures of the Social Insurance Company for social benefits have reached $€$ $6,094,583$ in 2011 in Slovakia. The most of the money was spent in the county of

Bratislava ( $€ 836,432$ ) and Košice ( $€ 829,367$ ), then in the county of Nitra ( $€$ 787,545 ). The lowest amount was spent in the county of Trnava ( $€ 626,916$ ).

- In Košice, there are 600 to 1000 homeless people (estimated number). Potential homeless are mainly the children of children's homes, reaching adulthood and people let out from jail or refugees.
- A separate group of homeless are the people, who lost their homes due to failure to pay their dues. The largest group of homeless are men between 30 to 50 years of age.
- The shelters for homeless cover $22 \%$ of the needs within the county; the best is the situation in the districts of Trebišov (56\%), Sobrance (50\%), Spišská Nová Ves (27\%), Košice (20\%), Košice rural area ( $0 \%$ ), Rožňava (19\%), Michalovce (14\%), Gelnica $(0 \%)$. The requirements of lonely parents with children are fulfilled to an extent of $25 \%$, best in Košice ( $61 \%$ ), in Sobrance (55\%), in Trebišov (34\%), while in the remaining districts there are no such services.
- In the county of Košice there are 14 children's homes with a total capacity of 1000 beds - these are state owned institutions. (children's homes in Dobšiná, Žakarovce, Košická Nová Ves, Nižná Kamenica, children's home "Lienka" [ladybug] in Vel’ké Kapušany, children's home in Košice (Hurbanova street), Sečovce, Mlynky - Biele Vody, Košice, Slovenské Nové Mesto, Štós, Remetské Hámre, Michalovce, Spišské Vlachy)
- A serious problem with the network of children's homes is that in some parts of the county (in some microregions) the capacity does not follow the demands, so if a child is placed in such a home, many times it is placed not only beyond its district, but even beyond the county of Košice.
There are $\mathbf{1 6}$ specialized institutions for 359 people in the county of Košice. In the districts of Spišská Nová Ves and Sobrance there is no such institution. Most service providers are in Košice, in the districts of Trebišov and Košice rural area.
- The specialized institutions in Košice are available for 137 persons, in the district of Trebišov the capacity is 82 people (in the town of Trebišov there are services for 72 people and for 10 in the town of Král'ovský Chlmec), while in the district Košice rural area there are 36 people (Šugov: 5, Medzev: 21, Drienovec: 10).
- In the county of Košice, there are 15 institutions for support of living, offering services to 152 persons. Of the 15 service providers, 12 are private, with a capacity of 123 people. Most places are available in Spišská Nová Ves in three institutions, the districts of Trebišov and Michalovce have two institutions. Service providers for handicapped people provide services in the town of Michalovce to 23 people, the district of Trebišov has a capacity of 29 (the town of Trebišov has 17, the town of Sečovce has 12), in the district of Spišská Nová Ves (in Spišské Vlachy) 22. Supported living facilities are not present in the districts of Košice rural area and Gelnica.
- According to the centralized registry of the Ministry, there are 37 institutions for 1856 senior people ( 8 being beyond the county). The number of institutions providing social services and special institutions, which are primarily used by elderly people (handicapped people), is 34 (in 18 adult social homes and 16 specialized institutions).
- The distribution of the social services provided for the mentally and physically disabled is unequal within the county, there are few types of these services present. The total capacity of these institutions for the mentally and physically disabled is 1242 people. (In the respective districts it is: the city of Košice: 285, Košice rural area: 255, Michalovce: 230, Trebišov: 0, Spišská Nová Ves: 191, Rožňava: 151, Gelnica: 100, Sobrance: 0).
- The numbers of care-taking services for the disabled are varying. According to the last data, this service was provided to 345 people of the county, mostly in the city of Košice. Such a small number of inhabitants using the care-taking services does not reflect the true needs of this part of the population. These services have to extended in future. Protected living, as a modern form of social services is being provided only in three districts of the county (in the city of Košice, in Michalovce and Spišská Nová Ves), only to 55 people.
- The social services are not evenly distributed in the county. The nature of the provided services does not reflect the needs and requirements of the population of the given municipality or microregion.
- By now, the municipalities are being passive in areas, where they are competent to provide such services (care taking, social consulting, daytime services for elderly and disabled).
- The demand of the population for the social services is higher than the offerings.
- There are many non-profit organizations active in the field of social help, while their activities may be enhanced in future. Currently, in some microregions of the county there are so many negative factors issuing from mainly the high unemployment rate and the poverty of the population that the public service providers can not sufficiently react to these specific problems, therefore the civil sector should provide a broader range of activities.


## BORSOD-ABAÚJJ-ZEMPLÉN COUNTY

## I. Socio-demographic situation

- The county is characterised by a tremendous decrease in population. The number of inhabitants was 686266 at the beginning of 2012 which means a $7.8 \%$ decline as compared to the turn of the millennium. It is an extremely steep decline as compared to the national average of $2.5 \%$ population decrease in the same period.
- On examining the tendencies of natural increase and decrease we can conclude that the number of deaths is higher than the number of birth cases in the last twenty years. A dramatic difference can be noticed between the year 2000 and the end of the decade.
- When we consider the real natural increase and decrease between 1970 and 2011 it is notable that between 1970 and 1979 we can talk about an increase and since 1980 about a decrease of population. The rate of decrease is not even: the decline was pronounced between 1980-1989 and 2001-2011.
- The rate of decline is very rapid in the county centre, Miskolc. Especially in the last ten years the tendencies of ageing and migration are very significant. The rate of real decline was $8.9 \%$.
- Migration from the county is very high as compared to the national average.
- On examining the tendency of the change of population in the county in the last 10 years we can see that the population of the $0-14$ years old age group has dramatically decreased, being $10 \%$ above the national average, whilst the rate of population of those over 65 shows an increase, at $4,5 \%$, half as much as the national average.
- The age pyramid of the county shows that the age group between $0-14$ represents $16 \%$, that of the $15-39$ group $33 \%$, the $40-59$ group $28 \%$, whilst those who are 60 or more represent $23 \%$. Where the male-female ratio is concerned, there is a male surplus
among generations below 40, whilst among those above 40 there is a female surplus. $53 \%$ of males are below 40 ; this rate is $46 \%$ among females.
- Considering the marital status of the population above 15 we can conclude that in the last decade there is a decline in the number of people living in a marriage both in the county and the county centre. Parallel with this the rate of increase of unmarried males and females (one third of the population), of widows and widowers ( $12.9 \%$ ) and of the divorced ( $11.2 \%$ ) is growing.
- Owing to an urban life style and the division of age groups of people living in towns the increase of widow(er)s is rather smaller and that of the divorced is a little higher in the county centre than in the county.
- Expressing the fertility rate as the number of children born alive to women of 15 and above it can be stated that since 1980 there has been a continuous decline. Data for 1980 are 188 and for 2011166.
- In recent years the education indicators of the population of the county have improved to a great extent. Every year the rate of people with a secondary and higher education is growing and the rate of those who have not finished the 8 years of elementary school studies is diminishing
- All together we can say that the schooling/educational indicators of females are more favourable than those of males.
- There are important differences depending on the type of settlement. Educational indicators are generally better in towns than in small settlements, and the indicators of the county centre, Miskolc, are shaping favourably: $38 \%$ of the population of 15-years-old and above have a secondary school (final) certificate and $21 \%$ have a university degree.
- $10 \%$ of the population belong to some ethnic minority. At the 2011 census 66182 persons said they belong to a minority. This is $30 \%$ more than it was in $2001.88 \%$ of these belong to the Gypsy nationality.
- $7.9 \%$ of the total population of the county are Roma. These data show that the rate of those regarding themselves as Roma/Gipsy has grown by $25 \%$ as compared to 2001 in the county.
- More than half of the population were confessing Catholics in 2001 and in 2011 $41.2 \%$ people did so. If we consider changes in respect of the rate of those who answered this question we notice a $5 \%$ decrease where this religious denomination is concerned. The rate of Calvinists among the population has decreased roughly by $6 \%$ between 2001 and 2011. In the rate of the responders this is $2.4 \%$. The number of those among the population who do not belong to historic churches but who belong to small churches or denominations has risen by $0.5 \%$. At the 2011 census 5800 people claimed they were atheists, which is $0.8 \%$ of the population.
- Based on the spread of age groups it is notable that religion plays a less and less important role. Whilst $77 \%$ of 60 years olds and over regarded themselves as members of a denomination, hose under 15 were only $55 \%$. In the county centre every third person is a Catholic and roughly every $7^{\text {th }}$ is a Calvinist.
- $96 \%$ of the inhabited flats are in private ownership. As compared to 2001 the number of flats with "full facilities" increased significantly. At the same time $3.2 \%$ of the population live in a flat "without facilities" and $4 \%$ live in a very poor quality or other flat.


## II. Health indicators

- The rate of children with a low births weight and infant deaths higher in the county than the national average. In the northern areas of the county the chance of births of low weight is one and half times higher. These areas are inhabited mostly by the disadvantaged settlements, on average densely populated by Roma.
- Almost half of deaths are caused by cardiovascular diseases, one fourth by cancer, 5 $10 \%$ by diseases of respiratory system and digestive system.
- Examining the two leading causes of death from a gender point of view we can see that the death caused by vascular/circulatory diseases is highest in both sexes. Ischaemic heart diseases are the cause death in more than half of cases and cerebral diseases also appear regardless of gender. Where cancer deaths are concerned there is a difference in gender. Throat and lung cancer incidence is high for both sexes but especially in the cause of males. Breast cancer has a higher rate in women.
- All over the county there are complex programmes for improving health in order to encourage health-consciousness at an early school age, to promote a healthy lifestyle, and to prevent deviant behaviour.
- There are continuous screening tests among the population. There are systematically organized breast tests, especially among the 45-65 age group of the population. Unfortunately it is visited only by $33 \%$ of the population.
- At the 2011 census $5.5 \%$ of the population, 37700 persons, claimed about themselves or about a member in the household to have some kind of disadvantage. This is higher than the national average, which is (4.6\%).
- Age groups over 40 give the majority of disabled people. Within this group the majority, $54 \%$, are physically disabled because of loco motor disorders. On county level they represent $2.97 \%$ of the population, and there are a bit more females than males (and it is connected to the fact that in these age groups there are more females than males). The following group are those with weak and vague eyesight with $088 \%$, and the last group are people who are hard of hearing with $1.76 \%$.
- Regarding health infrastructure the County Hospital in Miskolc is the biggest operating health institution in the county. Health care is also secured by Semmelweis Ignác Healthcare Non-profit Co. Ltd in Miskolc in two branches. In the county there are hospitals in Ózd, Sátoraljaújhely, Kazincbarcika and Szikszó which belongs to the County Hospital.
- Besides general hospitals there are special healthcare institutes in the county, for example a ward treating people suffering from lung diseases in Edelény or a hospital treating people with rheumatic diseases in Mezőkövesd. In Izsófalva a psychiatry and a home for people suffering from psychiatric diseases is operated as a part of the County Hospital. In addition to the hospitals mentioned above, there are outpatient consultations in each town which also provide healthcare supply for the population of the neighbouring settlements.


## III. Economic status of the county

- The county has been struggling with serious economic difficulties since the change of the socialist system.
- Considering the newly registered and closed enterprises we can see that there were 6192 new enterprises registered and 3612 ones had been closed in 2011. The most
dramatic decline was experienced in 2009, obviously as an impact of the economic crisis.
- There is great disproportion depending on regions of the county if we compare the number of enterprises per thousand inhabitants.
- The rate of employment in our county is $8 \%$ lower than the national average and $15 \%$ lower than that of the EU-27.
- Concerning unemployment rate in the county we can conclude that it had a slight decrease at the beginning of 2012 with its $16.5 \%$. This time the national average was $11 \%$.
- We can measure the durability of unemployment by the number of those jobseekers who are registered for more than 180 days. Based on this it can be seen that the county is in the most disadvantaged category with its rate of $7.1-7.3$


## IV. Social and child welfare situation

- In each district of the county basic welfare supply defined in the Social Security Code is available. It includes food supply, home care, day-care for the elderly and villageand farm care depending on the number of inhabitants.
- The number of those given supply has grown since 2000 in each area. According to the Social Security Code family care also belongs to the circle of basic welfare supply. As a consequence we can see that the number of settlements given supply has almost been doubled since 200.
- The number of institutions supplying day care has not changed at a great extent since 2000 but the number of those given supply has grown by $20 \%$. There has been a noticeable increase in the number of places for day care of disabled people. The number of people given supply has also increased roughly by $20 \%$.
- The number of people with regular social security benefit has also been continuously increased since 2000. Between 2000 and 2010 it has quadrupled.
- Based on the percentage of people applying for family care support we can see that the county is among the 'distinguished' together with Szabolcs-Szatmár-Bereg and HajdúBihar counties.
- The number of people given financial supply for home care and housing and bills has also been continuously growing since 2000. In this period home care has doubled and housing support has trebled.
- When we examine day care for the homeless it is noticeable that the number of canteens for the homeless has not changed in the last 10 years and at the same time their capacity and the number of people visiting them has slightly decreased. In the period examined two more day time community centres were opened and by 2010 the capacity is one and a half times as big as it was in 2000 and the average daily number of visitors is $80 \%$ higher.
- Regarding special services more than half of them are supplied by the local governments and besides there are numerous civilian and church-based institutions.
- Care and medical supply for people suffering from psychiatric and addictive diseases is not solved properly considering the fact that in several settlements and districts even the basic supply is missing.
- As far as child care situation in the county is concerned we can conclude that in 2010 65 child welfare supply institutions operated based on Child Welfare Act, three of them were child welfare centres. In the county there are no settlements without this kind of supply.
- The number of children given child welfare supply in the county is high as compared to the national average.
- Based on the rate of young endangered children registered and taken into child care of the Guardianship Authority we can claim that the county takes the national lead concerning both data.
- It can also be concluded that the majority of children are not endangered because of financial reasons but rather because of addiction, insufficient housing conditions or because of negligence.
- On examining data of children requiring childcare supply, it can be claimed that 23642 children had been given childcare supply by childcare services in the region of North Hungary and the majority of them were boys.
- Regarding age groups, in case of boys the majority were represented by $14-17$ years old ones, and in the case of girls the age group between 6 to 13 was the most endangered group.
- There are 6 temporary homes for families and 2 temporary homes for children operating in the county based on data of 2011.
- Data show that in 2010 there were 42 institutions in the county giving special childcare supply.
- In 2010524 children were taken into the system of temporary childcare supply service. The reasons for taking them under this care was playing truant, abuse, strolling, behavioural problems, deviant parental behaviour.
- Within the frame of special childcare 2137 children were supplied in 2010. The majority, $77 \%$ of the children given supply were placed into families of foster parents.


## COMPARATIVE ANALYSIS

The Institutes of Social Research of the Academy of Sciences of Kosice and of Sociology of the University of Miskolc conducted a questionnaire-based survey among inhabitants of the Kosice Self-Government Region and in Borsod-Abaúj-Zemplén County. The Institutes evaluated the questionnaires in order to draft a Regional Social Map in spring 2013. The objective of the survey was to map the socio-economic parameters of the disadvantaged population (gender, date of birth, family status, nationality, religion, household conditions). Furthermore, we examined the living environment, the social and financial situation of the families, how the respondents judge the health status of themselves and their family members, and how satisfied they are with the social institutions of the region. 150 households were questioned in each country, taking all the above mentioned factors into consideration, with the aim of comparison.

In the first group of questions we examined socio-demographic features. From the answers to the question concerning the residence of respondents we can see that in the Slovakian region $23,3 \%$ were inhabitants of Kosice, whilst $42,9 \%$ of the respondents in Borsod-AbaújZemplén county live in the county town of Miskolc. The gender distribution of the respondents living on the two sides of the border can be seen in figure 1.

FIGURE 1. GENDER RATIO OF RESPONDENTS ON BOTH SIDES OF THE BORDER BASED ON A QUESTIONNAIRE (\%)*


Source: Questionnaire among inhabitants - a survey in spring 2013

*Borsod-Abaúj-Zemplén megye - Borsod-Abaúj-Zemplén county. Kassai Önkormányzati Kerület - Kosice SelfGovernment Region. Blue: Women. Red:Men

From the analysis we can see that in the case of disadvantaged families that are represented in the sample, the number of people living in one household is higher in Slovakia (maximum score: 11 persons) while in Hungary the score is 8 and in most households there are just 2 persons (27\%).

On examining the number of children living in a household, we can see a great difference between the two countries. While in Hungary $41,3 \%$ of the families live with children, in Slovakia the rate is $72 \%$. Regarding national data, we can conclude that there are fewer children born in Hungary. We can observe a shocking difference between the number of families bringing up two children, living on the two sides of the border. In Slovakia there are two children in $82,3 \%$ of the families, while on the other side of the border this type of family is only $13,5 \%$ according to the samples under review.

The people participating in the research were asked about their nationality. Regarding the ratio of the Roma, there are similarities. In Borsod-Abaúj-Zemplén county $10 \%$ were Roma and $90 \%$ were non-Roma Hungarians. In the Kosice Self-Government Region the ratio of the Roma was $8 \%$. Slightly more than half of the respondents ( $56,67 \%$ ) claimed they had Slovakian nationality (figure 2.) whilst one third ( $33.33 \%$ ) claimed to be 'Hungarian'.

FIGURE 2. NATIONALITY RATIO OF RESPONDENTS ON BOTH SIDES OF THE BORDER BASED ON A QUESTIONNAIRE (\%)*


Source: Questionnaire among inhabitants - a survey in spring 2013
*Red: B.-A.-Z. county. Blue: Kosice Self-Government Region. Nationalities (from up to down): Slovakian, Hugarian and Roma; Slovakian and Roma; Slovakian and Hungarian; Czech; Roma; Slovak; Hungarian.

Concerning religious denomination, in the Hungarian region there are half as many Catholics $(34,1 \%)$ as in Slovakia where this ratio is $61,3 \%$. It may be important to note that on both sides there are respondents who do not practise their religion, or do not regard themselves as members of any religious denomination. This ratio in Hungary is surprisingly high, at 42,1\%.

Our second group of questions concentrated on the residence and its environment. In neighbouring Slovakia there are twice as many people living in a house $(47,3 \%)$ as in Hungary ( $23 \%$ ). The number of people living in a flat in a residential quarter is similar in both countries ( $33-36 \%$ ). In Borsod-Abaúj-Zemplén county $70 \%$ of the respondents live in a privately-owned flat and $30 \%$ live in a flat owned by somebody else. In the Kosice SelfGovernment Region 78\% of the respondents have a private flat.

A number of questions were asked about basic facilities like electricity, water, and drainage in the flats. In Slovakia there is no drainage system built in each village, so for $26,7 \%$ of the respondents sewage disposal is a problem. On the Hungarian side of the border, $10,3 \%$ of the households are not connected to the drainage system.

We also wanted to know what kinds of assets are owned in the households. The results were similar in both countries. The most frequently used items of household equipment are the mobile phone, the automatic washing machine and the microwave oven. Luxury items (like summer residence, cleaning lady, sauna, business) are owned by few households: the ratio is less than $10 \%$.

To our last question in this connection: 'If you were the mayor, what measures would you take?' we were given similar answers. The inhabitants of both counties find it important to improve infrastructure (roads, parks, pavements) and to create jobs; furthermore, giving aid to social groups in need (young, old, children) would be of primary importance.

Questions concerning financial and social circumstances were designed to find out how families can earn a livelihood. We found the situation was similar in as much as in both countries $70-85 \%$ of the respondents said they can only live with more or less difficulty. In the last two years the financial situation of the majority has declined extremely.

Our question concerning the way people spend leisure time also shows similarities in the Kosice Self-Government Region and in Borsod-Abaúj-Zemplén county. The most frequent activity is helping a relative or a friend; they often invite guests or pay visits and go to church.

The last part of the questionnaire concentrated on the health condition of the respondents. The answers given to this question were different in the two countries. Whilst in Hungary $37 \%$ of the people think they are in good or very good health, in neighbouring Slovakia this ratio goes up to $50 \%$, so people there perceive that they are in better health.

The question whether they had changed their food consumption habits in the last two years is connected with health condition and financial status. From the answers we can see that the majority of respondents are buying less and cheaper food lately.

