

## LABOR MARKET ACCEPTANCE OF DISABLED PEOPLE IN HUNGARY AND SLOVAKIA

Szonja Jenei

Szilvia Módosné Szalai

J. Selye University, Faculty of Economics and Informatics

**Abstract:** The present paper examines changes in the situation of people with disabilities in Hungary and Slovakia. It seeks to explore whether the state safety net and support systems provided so far are sufficient to maintain the livelihoods and living standards of those affected. According to advocacy organizations, during the pandemic, many people with disabilities were dismissed from the open labour market and fled to the sheltered labour market, where their living standards declined. Our research covered a wide range of people with disabilities, including the visually impaired, the hearing impaired, the mobility impaired and the mentally disabled. People with altered working ability can supplement the state aid in two ways, in the sheltered and open labor market. Retaining a job can be successful in both cases, but only when it comes to finding a job do people encounter negative stereotypes. Acceptance in the open labour market and perceptions of positive discrimination among healthy workers were investigated by means of a questionnaire. Our research found that Hungary and Slovakia, with limited financial opportunities, have different preferences for the integration of people with disabilities into the world of work. Slovakia places more emphasis on creating sheltered employment, while Hungary tries to steer people with disabilities towards the open labour market with the help of the people concerned.

**Key words:** People with disabilities, sheltered and open labour market, pandemic, maintaining livelihoods and living standards.

### Introduction

Our research examines the changing labour market situation of people with disabilities during the COVID-19 pandemic. We have analyzed the different measures of the open labour market and sheltered employment, and the acceptance of people with disabilities in the open labour market. Our motto is inspired by the name of Pope Benedict XVI, who carried the highest dignity of the Church from 2005 to 2013 and continues to be highly respected. "The supreme measure of a society's humanity is the way it treats the poor, the elderly, the sick, the infirm" (PPKE 2019). Our research was carried out with the help of blind and partially sighted people, deaf and hard of hearing people, people with reduced mobility, people with intellectual disabilities and their representative organizations. By means of our questionnaire-based survey, we analyzed the acceptance of workers with reduced capabilities among healthy workers in Hungary and Slovakia. In the theoretical part of our publication, we first clarify the concepts related to disability and then describe the advocacy organizations and basic labour market opportunities in the two countries. We conclude with an international perspective. The changes during the COVID-19 epidemic are presented in the practical part of the paper through a content analysis based on in-depth interviews. Since the problems during the COVID-19 epidemic were manifested in the open labour market, we also used a quantitative method to investigate the perceptions of Hungarian and Slovakian workers on the acceptance of workers with disabilities and positive discrimination.

### Literature review

A person as a member of society may be defined by the category of disability or impairment, but when referring to a worker, the terms person with a disability or a person with reduced capabilities are used (Illyés 2000; WHO 2001). According to the Hungarian Employment Act, a person with a disability is defined as a person who is physically or mentally disadvantaged and whose chances of finding and

keeping a job are reduced (Dósa, Hanti 2012). The Act does not address whether the person concerned receives any benefits because of his or her health condition. If the disadvantaged person's health status is still better than 60%, he or she is not entitled to disability benefits. Impairment means a disturbance of biological function that manifests itself as a physiological or anatomical abnormality. Impairment refers to a partial or total, temporary or permanent impairment of various functions such as sensory, motor, mental functions such as walking, vision, speech, communication (Horkai i in. 2013). The notion of disability is linked to the world of work, as it expresses how an impairment, disability or reduced capability affects an individual's chances of finding and keeping a job (Prugberger 2001). Today, there are six classifications of disability in Hungary (Dósa, Hanti 2012; Rehabportal 2022). In Slovakia, there is a category of severely disabled people receiving social care and a category of non-severely disabled people receiving social care. A disability with 41% impairment means a reduction in working capacity, an impairment of more than 50% falls into the severe category and mostly prevents people from working. There are also people with so-called poor health who may also benefit from some of the social services available to people with disabilities (Rehabportal 2022). In Hungary, the number of people with disabilities was 577,000 according to the 2001 census (European Council 2014). Due to the pandemic, more recent data will be available after the census in 2023. Based on some of the available historical data, we look at changes in the number of people with disabilities.

In Hungary, intellectual disability is the most common problem among the population under 14 years of age, followed by autism and mobility disability. Among 15–29-year-olds, intellectual disability is still the most common, followed by mobility disability. In the 30-34 age group, mobility disability overtakes intellectual disability. In the 45-59 age group, mobility disability is predominant, followed by visually impaired people and intellectual disability. In the 60-64 age group, mobility impairment is so prevalent that it accounts for more than half of all disabilities, followed by visually impaired people and then severe internal disabilities. The 75-age group also has a very high prevalence of disability, with the next most deaf seniors, followed by the visually impaired.

It can be observed that the proportion of people with a disability in Slovakia increases significantly with age. While the share in the age group 15-29 years is 7.2%, 45.7% of people aged 50 and over are disabled. The table shows data from 2012 to 2017 and shows that the proportion of people with disabilities is decreasing among younger people but increasing among people aged 40 and over. Younger people are living healthier lives, office workers are exercising and doing less physical work. The health of the over 40s is already failing, reflecting their previous lifestyles, with many problems. Disabled people find their main source of income in the processing sector (Table 4). Because of the high degree of automation, even people with intellectual disabilities can find a job in the sector, and people with hearing impairments are also likely to find jobs. Trade and motor vehicle repair are also a suitable field for many workers with a disability. Vehicle repair can be a suitable activity for people with autism and hearing impairment. Human health and social care require emotional intelligence, and workers with disabilities are more sensitive to the problems of patients who need help. Public administration employs nearly 10% of people with disabilities, and with proper organization, customer services can even employ visually impaired people. It is also worth mentioning education, languages can be taught to blind and partially sighted people, especially if the aim is communication.

The spatial distribution of accredited workplaces for people with disabilities in Hungary in 2013 was characterized by the fact that most of them were located in Budapest and Pest county (69), with a significant number of organizations in Jász-Nagykun-Szolnok county (59), Borsod-Abaúj-Zemplén county (42) and Baranya county. By 2022 the number of sheltered jobs increased to 1425. In 2022 Slovakia had a total of 4307 protected workplaces. Of these, 154 organizations were active in the capital Bratislava. In the regional centres, 13 in Banská Bystrica, 12 in Košice, 190 in Trenčín and 313 in Prešov. A significant proportion of people with a disability active in the labour market need assistance. In most cases this assistance is special work organization measures, followed in roughly equal measure by personal assistance and special equipment or workplace adaptations. The survey was carried out by

the Hungarian Central Statistical Office in 2012 and shows that it would be possible to increase the number of people in the open labour market by management and organizational measures alone, without investment (Hungarian Central Statistical Office 2012).

### **Aim of research and methodology**

We conducted quantitative research to explore the difficulties of people with disabilities in finding employment and self-employment. In particular, we have looked at the changes brought about by COVID-19, whereby we use the assumption that people with disabilities may have felt safe in the sheltered labour market. Based on an empirical questionnaire survey (380 respondents), we analyzed the acceptance of people with disabilities by members of mainstream society. In order to measure acceptance in the open labour market, a questionnaire has been developed, the main parts of which are demographics, an assessment of positive discrimination by type of disability, and an analysis of the most supportive living situations. Two hypotheses were formulated.

H1: In the two countries under study, the acceptance of people with intellectual disabilities in the open labour market is low even when integration is achieved either without special measures or with the help of mentors, technical assistance, or organizational measures.

H2: In both countries, the life stages considered to deserve support the most are retirement, the period of home creation, entry into the open labour market and the amount of money that states should allocate to families with children with disabilities.

### **Results**

We conducted quantitative research to explore the difficulties of people with disabilities in finding employment and self-employment. In particular, we have looked at the changes brought about by COVID-19, whereby we use the assumption that people with disabilities may have felt safe in the sheltered labour market. Based on an empirical questionnaire survey (380 respondents), we analyzed the acceptance of people with disabilities by members of mainstream society. In order to measure acceptance in the open labour market, a questionnaire has been developed, the main parts of which are demographics, an assessment of positive discrimination by type of disability, and an analysis of the most supportive living situations. Two hypotheses were formulated.

Our survey was conducted among employees in Hungary and Slovakia between July and October 2022. Respondents were contacted via social media and asked to forward the questionnaire. The high number of responses was due to the active role of our invited contacts in forwarding the questionnaire, who felt that our information was short but to the point. An important criterion for the selection of the respondents was that they should be active in the labour market and be able to share their experiences and opinions about the acceptance of people with disabilities. It is important to note that our sample was not representative, the demographic distribution of 216 respondents from Hungary and 164 respondents from Slovakia is shown in Table 1. We were able to collect a diverse sample in terms of age, income, place of residence and job. This sample reflects the situation in Hungary and Slovakia in terms of open labour market acceptance. In Hungary, there have been several successful and unsuccessful attempts to integrate people with disabilities into the open labour market, which caused many failures, dismissals and job losses for the people concerned.

This sample reflects the situation in Hungary and Slovakia in terms of labour market acceptance and perceptions of positive discrimination. This was discussed in more detail in the first part of this article. However, attempts at integration have led to greater acceptance. To confirm our first hypothesis, considering the following findings, the open labour market acceptance of people with intellectual disabilities in both countries under study is consistently below the level of integration of visually impaired, hearing impaired and mobility impaired people at all four different levels of support.

*Table 1. Demographic distribution of the samples*

	Hungary	Slovakia		Hungary	Slovakia
Gender (%)			Residence (%)		
Male	52.8%	40.2%	village	22.7%	32.9%
Female	45.8%	58.5%	town	39.4%	32.3%
Other	1.4%	1.2%	city	30.1%	23.2%
Revenue (%)			capital	7.9%	11.6%
Well below average	0.9%	1.8%	Occupation (%)		
Below average	15.7%	10.4%	blue-collar	12.5%	14.6%
Average	44.4%	70.7%	white-collar	47.2%	56.1%
Above average	33.3%	15.2%	manager	22.2%	17.7%
Well above average	5.6%	1.8%	entrepreneur	16.7%	6.1%
Age (%)			n/a	1.4%	5.5%
20-29	6.5%	23.8%	Number of respondents (persons)		
30-39	38.4%	29.9%	Per country	Hungary	Slovakia
40-49	25.0%	40.2%		216	164
50-59	20.8%	0.6%			
60-69	9.3%	5.5%			

Source: authors' own research

In their case, the hospitality units described in the previous section offer a way out of this rejection. According to the second hypothesis, there are four possible life situations that require more support. However, the items we have listed only partially correspond to the opinions (Table 2).

Support to enter the open labour market is ranked first by respondents in Hungary, but not in the top four by respondents in Slovakia. They believe that by developing a sheltered labour market they can provide a more secure life for their disabled fellow citizens. In both countries, they would like the state to increase support for families with disabled children (Hungary 2nd, Slovakia 1st).

Financial support for retirement came third in both countries. The creation of a home, as we assume, is ranked fourth in Slovakia. In Slovak public life, there have been debates for some years on how to address housing for people with disabilities. In Hungary, respondents rate the secure foundations, i.e., primary education, as important. This means that our second hypothesis is only partially fulfilled.

**Table 2. Acceptance of people with disabilities in the open labour market according to respondents**

		Possible	1	2	3	4	5	6	7	Mean	
visually impaired	Without help	Hungary	204			2.9%	2.0%	3.9%	18.6%	72.5%	6.56
		Slovakia	164			4.9%	11.6%	6.1%	12.2%	65.2%	6.21
	Organizational measure	Hungary	216				6.0%	33.3%	29.6%	31.0%	5.86
		Slovakia	164				17.1%	24.4%	23.8%	34.8%	5.76
	Mentoring	Hungary	216			0.0%	1.4%	32.9%	26.9%	38.9%	6.03
		Slovakia	164			4.9%	12.8%	23.8%	5.5%	53.0%	5.89
	Technical aid	Hungary	216			0.0%	6.0%	16.7%	18.5%	58.8%	6.30
		Slovakia	164			4.9%	6.7%	17.7%	24.4%	46.3%	6.01
hearing impaired	Without help	Hungary	204		0.0%	3.4%	0.0%	16.2%	21.1%	59.3%	6.33
		Slovakia	164		6.1%	4.9%	5.5%	6.1%	19.5%	57.9%	6.02
	Organizational measure	Hungary	204		0.0%		12.7%	34.3%	30.4%	22.5%	5.63
		Slovakia	155		6.5%		12.9%	18.7%	23.9%	38.1%	5.68
	Mentoring	Hungary	216		0.0%	0.0%	6.5%	44.0%	27.3%	22.2%	5.65
		Slovakia	164		6.1%	4.9%	18.3%	17.1%	0.6%	53.0%	5.60
	Technical aid	Hungary	204		0.0%	0.0%	5.9%	12.7%	25.0%	56.4%	6.32
		Slovakia	164		6.1%	5.5%	6.1%	12.2%	17.1%	53.0%	5.88
disabled	Without help	Hungary	216				2.8%	7.4%	16.2%	73.6%	6.61
		Slovakia	154				4.5%	5.8%	14.3%	75.3%	6.60
	Organizational measure	Hungary	216				0.0%	29.2%	26.4%	44.4%	6.15
		Slovakia	154				7.1%	23.4%	19.5%	50.0%	6.12
	Mentoring	Hungary	216				0.5%	27.8%	33.8%	38.0%	6.09
		Slovakia	154				13.0%	23.4%	13.0%	50.6%	6.01
	Technical aid	Hungary	216				11.1%	0.0%	27.8%	61.1%	6.39
		Slovakia	154				7.1%	24.0%	12.3%	56.5%	6.18
mentally handicapped	Without help	Hungary	204	0.0%	5.9%	5.4%	16.7%	6.4%	16.7%	49.0%	5.70
		Slovakia	154	17.5%	0.0%	5.2%	13.0%	7.1%	13.6%	43.5%	5.07
	Organizational measure	Hungary	204	0.0%		23.0%	0.5%	25.0%	32.4%	19.1%	5.24
		Slovakia	154	18.2%		1.3%	16.2%	13.6%	18.8%	31.8%	4.91
	Mentoring	Hungary	204	0.0%	0.0%	5.9%	2.9%	46.6%	27.5%	17.2%	5.47
		Slovakia	154	5.8%	5.8%	12.3%	12.3%	19.5%	12.3%	31.8%	4.98
	Technical aid	Hungary	204	0.0%	5.9%	0.5%	5.9%	19.6%	33.3%	34.8%	5.78
		Slovakia	154	11.7%	0.0%	0.0%	14.9%	29.9%	11.7%	31.8%	5.14

Source: authors' own research



## Summary

Our study examines the labour market opportunities and COVID-19 involvement and acceptance of people with disabilities in Slovakia and Hungary. It is known from other research that this vulnerable group is more vulnerable to social and other crises than the healthy (European Commission, 2021, Gabrielli & Irtelli, 2021). Today, states and non-profit organizations are taking action to protect those affected. The lessons from the in-depth interviews show that disabled people dismissed from the open labour market still had the option of returning to the sheltered labour market. The study interviewed successful people with disabilities from both countries who have made and are making enormous efforts, but who do not complain about this and continue to fight. It seems appropriate that people with a disability should be employed in the tourism and hospitality sector, which is facing labour shortages. Although this sector was badly affected by the pandemic, it represents a new opportunity for people with disabilities. Slovakia is training the right professionals and jobs for people with intellectual disabilities may be in the hotel industry. In Hungary, they can employ waiters and assistant cooks in the framework of a business. This is particularly important for people with intellectual disabilities with minimal open labour market acceptance. IT, gardening and social work provide gainful employment for many people with disabilities in both countries.

The state should strive to direct those people with disabilities who are able to do so, by all possible means, towards the open labour market, where they can eventually achieve the level of income necessary for independent living. However, the safety net of sheltered employment must be maintained. Another solution is to ensure that the sheltered labour market provides an income that allows people to lead healthy and meaningful lives. Kama's (2004) study concludes that it is very important for the more successful people with disabilities to show how much work there is in their success, and that their media coverage can change public perceptions. The opinion shaping described by the author is still taking place today and supports our belief that physical, social and cultural barriers can be overcome, but they do exist. Madriaga et al. (2010) found that students entering higher education face difficulties in accessing the curriculum. There are successful models for their labour market integration. Baranauskiene and Dobrovolskyte (2017) present such a model, which aims not only to improve labour market indicators but also to increase the socialization and well-being of those involved. Slovakia and Hungary have limited financial resources. Both countries invest in the creation and maintenance of sheltered employment and in the integration of people with disabilities into the open labour market, but the rates differ. In Hungary, various organizations and associations place great emphasis on enabling people with disabilities to work together with members of the majority society. The result is greater acceptance of people with disabilities, but the disadvantage is that they experience a lot of failure. When people with a disability talk about state support, neither in Slovakia nor in Hungary do they think about financial support from the state. Rather, they seek to obtain funding for NGOs that want to ensure a dignified way of life. Although they cannot be wasteful, the disabled workers in the open and sheltered labour market are able to pay their bills, have a varied diet and save a little. They are in much greater need of events where they can discuss their joys, worries and problems in finding a job. People with disabilities do not need benefits, they need real help to get on in the labour market. It is harder to find a job in the open labour market, but people with disabilities are seeking challenges with the stubborn determination they need in their lives and trying to do their best in the jobs they have already got. There are some initiatives that do not yet have government support but are badly needed. It is important that we approach our fellow human beings with disabilities with empathy and understanding. Remember: "Every human being, whether disabled or not, strives to the best of his or her ability, and if he or she seeks happiness, will find it". The quote is a reflection of Naoki Higashida, a Japanese writer with autism, born in 1992.

## Acknowledgement

Hereby we would like to thank you for all scholars who participated in HR Covid scientific team (KoronaHR). The Authors gratefully acknowledge the contribution of the Scientific Grant Agency of the Slovak Republic under the VEGA grant 1/0688/21.

## Literature

1. Baranauskienė I., Dobrovolskytė I. (2017), *Preconditions for the successful integration of disabled persons into the labour market. Society. Integration. Education*. Proceedings of the International Scientific Conference, 2, pp. 378-387. <https://doi.org/10.17770/sie2017vol2.2358>
2. Dósa Á., Hanti P. (2012), *Cares related to health impairment*. Complex Press Legal and Business Content Services Ltd., Budapest.
3. European Commission. (2021), *How vulnerable groups were left behind in pandemic response*. Europe Commission-Horizon. In electronic access <https://ec.europa.eu/research-and-innovation/en/horizon-magazine/how-vulnerable-groups-were-left-behind-pandemic-response> (access: 21.03.2023)
4. European Council. (2014), *Annual Report on Human Rights and Democracy in the World*. In electronic access <https://www.consilium.europa.eu/hu/press/press-releases/2015/06/22/fac-human-rights-report/> (access: 12.02.2023)
5. Gabrielli F., Irtelli F. 2021. *Anxiety, Uncertainty, and Resilience During the Pandemic Period*. Intexchopen. In electronic access <https://www.intexchopen.com/books/10814> (access: 15.03.2023)
6. Horkai A., Nagy É., Pálvölgyi M., Vingender I. (2013), *Health and society*. Semmelweis University, Faculty of Health Sciences, Budapest.
7. Hungarian Central Statistical Office. (2012), *Disabled people in the labour market*. Budapest.
8. Illyés S. (2000), *Basic knowledge of special needs education*. ELTE BGGYFK, Budapest.
9. Kama A. (2004), *Supercrises versus the pitiful handicapped: Reception of disabling images by disabled audience members*. 29, 4, pp. 447-466. <https://doi.org/10.1515/comm.2004.29.4.447>
10. Madriaga M., Hanson K., Heaton C., Kay Helen, Newitt S., Walker A. (2010), *Confronting similar challenges? Disabled and non-disabled students' learning and assessment experiences*, *Studies in Higher Education*, 35, 6, pp. 647-658, DOI: 10.1080/03075070903222633
11. PPKE. (2019), *Immigration through Christian eyes. Bishop János Székely's lecture at the University*. In electronic access <https://btk.ppke.hu/aktualis/rolunk-irtak/bevanderlas-kereszteny-szemmel> (access: 12.03.2023)
12. Rehabilitation Portal. (2022), *Disability*. In electronic access <https://rehabportal.hu/tudastar/megvaltozott-munkakepesseg/relevantn%C3%BDch-organiz%C3%A1ci%C3%AD.xlsx> (access: 18.02.2023)
13. WHO. (2001), *International Classification of Functioning, Disability and Health (ICF)*. In electronic access <https://apps.who.int/iris/bitstream/handle/10665/42407/9632428382-hun-LR.pdf?sequence=124&isAllowed=y> (access: 14.03.2023)



Ministry of Education and Science  
Republic of Poland



**Doskonała  
Nauka**



Czestochowa  
University  
of Technology



Faculty  
of Management



Department of Applied Sociology  
and Human Resource Management