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Challenges for Hungarian Geography: Perspectives of 'Disability Studies' in Hungary

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Abstract

In Hungary people with disabilities are one of the most oppressed and marginalized social groups. During the last two decades they have become more and more 'visible' for social sciences too, but unfortunately disability is still neglected in human geography. However, it always appears in media, public discourses and political debates and good examples for disability research from 'Western' geography are known and available. The main aim of this paper is to demonstrate that disability, as a research topic could be well adopted into Hungarian geography. Keeping the eyes on this goal, the paper is divided into three major parts. First, it gives a summary on the 'geographical research' of the mostly examined marginalized social groups in the Hungarian society and on some important research areas and results reached by scholars of various science areas. Second, it reveals some practicable approaches, research topics and methods of 'disability geography', a sub-discipline of Anglo-American geography. Finally, it explores how disability geography could be used in Hungary and gives an example based on own research.

Keywords: *disability, disability geography, marginalized social groups*

Rezumat. Provocări pentru geografia din Ungaria: Perspective ale „Studiilor dizabilităţii" în Ungaria

În Ungaria, persoanele cu dizabilităţi reprezintă unul dintre cele mai oprimate şi marginalizate grupuri sociale. În ultimele două decenii, acestea au devenit din ce în ce mai „vizibile" pentru ştiinţele sociale, dar, din păcate, dizabilitatea nu este încă luată în considerare în geografia umană. Totuşi, problema apare în media, discursuri publice şi dezbateri politice, iar geografia „vestică" oferă chiar şi exemple concrete de astfel de studii. Scopul principal al lucrării prezente este acela de a demonstra că dizabilitatea ca subiect de cercetare poate fi tratat cu succes şi de geografia din Ungaria. Articolul este astfel structurat în trei părţi principale. În primul rând, acesta trece în revistă „cercetările geografice" cu privire la cele mai marginalizate grupuri sociale din societatea maghiară şi cele mai importante arii de cercetare, precum şi rezultatele obţinute de cercetători din diverse domenii ale ştiinţei. În al doilea rând, scoate în evidenţă şi unele abordări practice, subiecte şi metode de cercetare utilizate în „geografia dizabilităţii", o subdisciplină a geografiei anglo-americane. În final, lucrarea se axează pe modul în care geografia dizabilităţii ar putea fi folosită în Ungaria şi totodată oferă exemple bazate pe propriile cercetări.

Cuvinte-cheie: *dizabilitate, geografia dizabilităţii, grupuri sociale marginalizate*

INTRODUCTION

According to the data of the Hungarian Central Statistical Office (KSH), at the last national census the number of people living with disabilities reached 577 006 (KSH 2001). It is more than 5 percent of the total population of the country and a large part of it is excluded from mainstream, everyday life. As sociologists stated: *'nowadays just a few disabled people are able to live without support in Hungary. People with disabilities are separated and discriminated. Their free movement is difficult because of environmental barriers, there is a lack of suitable tools and helping staff and they don't have information how to help themselves'* (Kováts and Tausz, 1997: 9). Unfortunately, in today's Hungarian society disabling circumstances and mechanisms – more or less – still exist. However, spatially differing problems of the disabled, in spite of their economic and political embeddedness, are still neglected by geographers. By 2010, in Hungary this research area has remained one of the 'forgotten arenas', thus 'an area of study and research which has received little or no attention from the discipline' (Imrie, 1996: 402), as Imrie stated to be the case in the 'Western' geography in the mid 1990s. Thus, the recent paper aims at demonstrating that disability could be a new topic in the Hungarian geography in the future.

One possible starting point for the Hungarian disability geography is to take into consideration what kind of studies are there on other marginalized

social groups. Scholars of other disciplines give us valuable questions and methods we could use to examine disability, so the first main part of the paper summarizes the most important steps made and results reached in the 'geographical research' of other marginalized social groups in Hungarian society. These studies can be regarded to be 'geographical research' because, although not all of them are made by geographers, spatiality is a common aspect in these works. Four disadvantaged groups were chosen, namely the roma minority (the Hungarian gypsy population), homeless people, migrants and the unemployed.

Second, the paper focuses on 'disability geography', a sub-discipline in Western European and North American countries which breaks with the traditional biomedical approach towards impairment and chronic illness. We reveal the main approaches, the practical gains and the diversity of 'disability geography' as it appears in research topics and methods. Finally the paper aims to explore how disability geography could be used in Hungarian (or post-socialist) context. For better understanding, examples from own empirical research that was made in a backward Hungarian region, Békés county, will be shown.

GEOGRAPHY OF MARGINALIZED SOCIAL GROUPS IN HUNGARY

Research on marginalized social groups could not be a part of geography or other sciences for a long period as in the decades of state socialism the official ideology denied the existence of social inequalities and created social taboos like 'poverty'. Thus, attempts like urban sociological research by György Konrád and Iván Szelényi, which was close to geography (Timár, 2003), were not tolerated in every case. After the change of regime, growing unemployment, appearance of new type of poverty and unsuccessful integration programs for marginalized people did not result in the appearance of a high number of geographical articles in this topic. However, disadvantaged persons are not completely ignored and scholars of various disciplines started to examine them with a spatial aspect.

Now we will reveal some results that could be used in the 'Hungarian disability geography'. Scholars have pointed out several problem areas, for example, the question of segregation in different regions and at different spatial scales. In previous years, it came to be evident that research on segregation is as much relevant in Hungarian rural areas as in urban centres. On the periphery of the Hungarian settlement system a new kind of settlement has been emerged: the ghetto village (Ladányi, 2007), moreover there are rural ghetto areas. In Hungary the segregation of low-income residents and gypsies is the most conspicuous, while the segregation of the rich is less visible. The level of ethnic-based segregation in a given area depends on the rate of gypsies, while its prevalence is higher in larger settlements (Kopasz, 2004). Of course, the clearest form of ghettoization appears in Budapest where development of inner areas was neglected under state socialism and now there is a high number of poor residents (many gypsies among them). Furthermore the segregation of the rich is getting stronger (districts of Buda or the new gated communities). Social exclusion and poverty are mostly typical in the inner Pest districts, especially in the former industrial territories and old housing estates. However, the level of poverty is increasing in some parts of the outskirts too (Kovács, 1998; Kovács and Szirmai, 2006). Segregation and ghetto villages lead us to another problem area, which is the relationship between the spatial distribution of a particular group and the level of regional development. Disadvantageous areas are often characterized by a high number of ethnic minorities, as shown by the example of Hungarian roma minority.

Spatial distribution of marginalized social groups has been examined in several cases and on different scales, from communities to regional and national levels. For the latter, analyses on foreign immigrants mean good examples. From these works valuable geographical information can be obtained about migrants because they show the main destinations and concentration areas of them (Hárs, 2009; Irimiás, 2009). More interesting are the researches on employment and unemployed people. For community level see for example the case study on the city of Debrecen from Diebel (Diebel, 1996) and for regional level the examination of Balcsók on the micro region of Szerencs (Balcsók, 1998). Social and economic changes of the 1980s and 1990s resulted in great differences in the labour market (Balcsók and Ekéné, 2007) and there are significant spatial inequalities in employment opportunities (west-east or more exactly northwest-southeast slope) (Kovács and Bihari, 2005). The case of the Great Plain is a good example because it has worse indices than national average due to its historical premises and weaker flexibility (Diebel, 1996). Of course, this macro region is not homogenous: activity rate in the Southern Great Plain Region is similar to the average, while in the Northern Great Plain Region it is lower. Although

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in previous years equalization could be seen, settlements of Bács-Kiskun and Jász-Nagykun-Szolnok Counties near the central region – as well as major cities – mark out (Balcsók and Ekéné, 2007). Examination on border areas is important because economic and social conflicts often accumulate in the periphery. Along the eastern border of Hungary the level of cooperation is not high enough and this border is rather a barrier nowadays with unanswered economic, social and ethnic (problems of roma population exacerbate the situation) questions on both sides (Baranyi, 1999; Dancs, 2000; Balcsók and Dancs, 2001; Balcsók et al., 2001). After all, the question arises: are there particular characteristics in the pattern of regional distribution of other groups, for instance people with disabilities? And if there are, what are the causes? Can we point out connections to deeper social, economic (or other kind of) mechanisms? In our view this challenge is up for the geographers in Hungary (or other post-socialist countries).

Some research studies in urban context engage with the social relations of disadvantaged persons (see the above mentioned work of Diebel [1996]) and spatial behaviour. Research of Nagy (2003) is unique as it investigated a special kind of space: a kind of 'internal' (sub-cultural) space. She examined the relationships between homeless people in the city of Szeged (Csongrád County). The relationship network of homeless people is different from what can be experienced at average citizens as it is less extended but in this sub cultural space prestige-hierarchy exists too. There are informal 'territories' in this space with dominant homeless groups and it is not homogenous but fragmented (Nagy, 2003). Research on these 'internal' spaces and social relations is useful to understand the space usage of social groups like the homeless, the attitudes towards them and the exclusive mechanisms working in the background.

Boros (2007) also focused on social exclusion as he examined the daily routes of the homeless and the residents' attitudes towards them in the city of Szeged as well. It was revealed that homeless people's daily routes are quite long which can be explained with the fact that the most important places for them (poor people's kitchen, homeless shelters) are far from each other and homeless people often visit the city centre where they can make the greatest income by begging (Fig. 1.). The residents' sympathy is strong towards the poorest. The majority (72.4%) traces back poverty to exterior reasons and think that homeless people should be supported which is mainly the government's task (Boros, 2007; Boros et al. 2007; Boros and Tóth, 2005). Consequently space usage of a given marginalized group can be specific and with social attitude it could contribute to the exclusion of these people. The situation for the disabled is more difficult because besides their body limitations the various barriers of the environment also make their space usage harder. There is a great shortage in knowledge about spatial behaviour of the disabled.

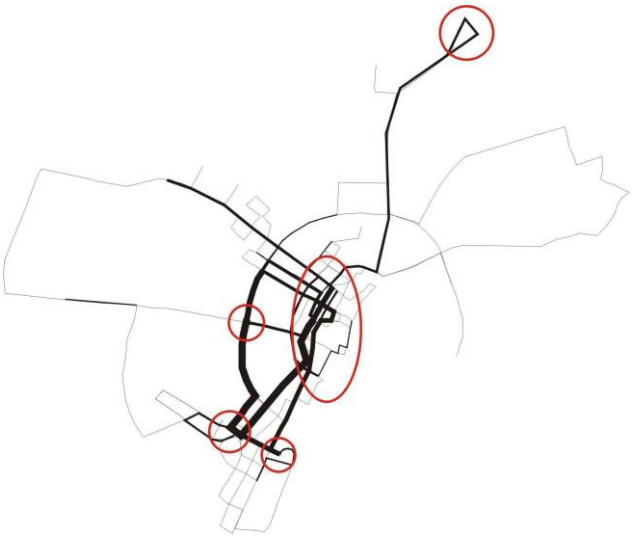

Fig. 1. Daily routes of the visitors of the poor people's kitchen in Szeged. (The width of the lines shows the importance of the routes) *Source: Boros (2007)*

Disability Geography

This part of the paper focuses on a quite new sub-discipline of geography, which is named 'disability geography'. Unfortunately, as it has been mentioned above, due to the lack of attention on disability among Hungarian geographers we have to draw on foreign examples, particularly Anglo-American. Before the 1960s, there was relatively little geographic engagement with disability issues in North America and Western Europe as well, but in the last decades interest on this topic increased significantly (Park et al. 1998; Gleeson, 2001).

Understanding disability: main approaches

Defining the term 'disability' is a key issue in disability studies and nowadays more concepts exist beside each other but the focus of the explanations has shifted. The earliest major perception on disability is a biomedical one and this model regards disability as 'a defect or sickness to be cured by medical research' (Jacobson, 2006: 110). Actually it emphasizes the physiological and biological conditions of human body and its functions. Disability is caused by the impaired body or mind of the individual and as a consequence the functional incapacity and deficiency compared to a

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'normal' standard (Abberley in Gleeson, 1999; Wilton and Evans, 2009), thus disability is often considered as a personal tragedy or 'individual misfortune' (Wendell, 2001).

The greatest turn in the development of research on disability within social sciences was the breaking with medical model and the emergence of the social model. In contrast to the medical, this approach primarily blames the society and its barriers for the exclusion of disabled persons, thus that they are not able to act as fully integrated citizens (Jacobson, 2006). Social attitudes and normative ideas are responsible for the marginalization of disabled people because social and built environments are primarily constructed for the able-bodied ('healthy' or 'normal') so participation for the disabled is impossible or at least very difficult (Jacobson, 2006; Wilton and Evans, 2009).

In 2001 WHO made a review on its main disability categorisation, the ICIDH (International Classification of Impairments, Disabilities and Handicaps) and ICH (International Classification of Functioning, Disability and Health) was created. This categorisation – with the help of the new, biopsychosocial model – synthesizes the medical and social approaches (Barnes and Mercer, 2010) and this way it integrates the biological, individual and social factors of an individual's health (WHO 2002), which are equally important in the daily life of the disabled. The above outlined shift in emphasis meant that analyzing disability issues was no more the 'privilege' of medical and rehabilitation experts, as environmental features are also significant in the 'production' of disability and this is vital for the existence of a new sub-discipline of geography.

Disability geography in 'Western' context

Before the appearance of the so called disability geography, issues like impairment or chronic illness had not been 'invisible' for geographers at all but disability was concerned by other sub-disciplines, like medical geography, geography of health or geography of health-care. As names suggest, these were based on a medical approach (see the above mentioned medical model of disability) and they do not compose the subject of this paper.

Earliest studies were positivistic in approach and used quantitative methods to examine the spatial distribution of disabilities and chronic illnesses (Jacobson, 2006; Wilton and Evans, 2009). These descriptive works shed light on spatial differences but did not deal with deeper social and economic relationships and relied on prevailing medical model of disability (Park et al., 1998). Today, quantitative approaches are less common and as a result, knowledge of locational characteristics of disability is incomplete (Wilton and Evans, 2009). The shortage of statistic-analytical articles in 'Western' geography is a problem and they are also needed in Eastern Europe. The knowledge on demographical, social and economic parameters of this group in a spatial context can be the basis for more complex researches.

With behavioural approach geographers mainly examine the 'internal' processes that persons with impairments use in the course of everyday interactions with their environments (Wilton and Evans, 2009: 207) with particular attention on spatial mobility and cognitive abilities. Most of the literature engages with vision impaired people. For example, Ungar's article (2000) on cognitive mapping explored the ways in which blind people experience and represent place comparing to sighted persons (Ungar, 2000). Research on the disabled is often connected with developing new assistive technologies from tactile maps to GPS/GIS based navigation systems (see for example Golledge and Marston, 1999; Pressl and Wieser, 2006; Völkel and Weber, 2007; Völkel et al., 2008).

Third approach is broadly materialist in orientation and uses the social model. Scholars focus on the spatial dimension of disability oppression caused by capitalist mode of production and modern urbanisation which created exclusionary physical and social environments, for example standardized workplaces ignoring disabled persons' needs (Wilton and Evans, 2009). It is no accident that the significant number of the articles analyze the relation between disablement, urban (built) environment and legislation (see for example Gilderbloom and Rosentraub, 1990; Gleeson, 2001; Imrie and Hall, P. 2001; Kitchin and Law, 2001; Bromley et al., 2007).

PERSPECTIVES FOR DISABILITY STUDIES IN HUNGARIAN GEOGRAPHY

Relevance of the research topic

As mentioned above, Hungarian geographers have not been interested in disability. Reasons will not be discussed here; however, some important facts can help to 'legitimize' disability geography. First, people with disabilities can be considered as a special group in spatial behaviour. This is underpinned by the ways in which they experience the surrounding space and the manners they carry out particular activities (blind peoples' orientation, using a wheelchair). Second, according to the data of Central Statistical Office (KSH) in 2001 more than 5% of the total population lived with disabilities (exactly 577,006). It is quite difficult to

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find out the current number of these people because different organizations use different classifications and the next census will be held in 2011. Even though the exact numbers are not known and they form a large group within the Hungarian society. The third reason to deal with the topic is that there are problems in connection with the disability and the society requires their treatment. Unfortunately examples confirm the suspicion that several people use the 'status of being disabled' in order to gain undeserved social support. Of course such practice is adverse for the disabled population and the whole society as well. Another reason is the regional distribution of people with disabilities as it shows a characteristic pattern. This one will be explained below; here we would only like to state that geography should pay more attention to such phenomena because examining the reasons and mechanisms behind differences can help to understand a new aspect of spatial inequalities. Finally, as Gleeson (1999) and Wilton and Evans (2009) state, the majority of works focus on contemporary Western societies but since disability and chronic illness are global and very complex issues, experiences in non-Western contexts are severely required to get a more precise picture on them. Thus disability studies from a post-socialist country could add something new to this picture.

First attempts, case studies

This chapter aims at demonstrating how the above represented approaches and methods could be adopted into geography in Hungary or possibly in other post-socialist countries. We mainly build on a paper made for the National Conference of Students' Research Societies in 2009 (see Fabula, 2009a). Its main priority was to shed light on the characteristics of people living with mobility related disabilities (especially wheelchair users) and the problems and appearing environmental barriers they have to face during their space usage. The main research area was Békéscsaba, the seat of Békés county, a backward region, which is situated in the south-eastern part of the country and has the highest proportion of the disabled population in Hungary.

The main results of the research could be summarized as it follows. As the topic was absolutely new in Hungary, clarification had to be done on terms like 'disability', 'impairment' or 'handicap', the 'medical and social models of disability' and at last 'disability geography'. There was a great emphasis on built environment and physical barriers. The paper relied on Ungar's work who agreed with the assertion that the exclusion of people with impairments from society is most potently symbolized by the built environment. He explained its inadequate nature and thus indirectly the marginal status of the disabled with three causes: social attitude towards people with impairments; politics and regulation at different scales; nature of professions like urban planning, architecture, transport and experts' viewpoints (Ungar, S.w.y.). In connection with the second cause, the most important national and international laws and documents on accessibility, built environment and equalization were analyzed as well.

A statistical analysis was made on the life conditions of people with disabilities with the help of data collected by the KSH in 1990 and 2001. The structure of the disabled population was examined through several indices: age, sex, marital status, educational attainment, employment, housing conditions of households, number and types of disabilities and spatial distribution. The analysis showed that an average person with disability was older, much less educated and had greater chance to be inactive earner or unemployed than a non-disabled fellow. Hereafter, disabled people's rate of the total population was higher in backward regions, like Northern Hungary, Southern Transdanubia and particularly in Békés county in the south-eastern part of the country (Fig. 2). The first main part of the paper revealed that there is similar correspondence in the case of roma ethnic minority. This suggests two important things: (1) social handicaps are cumulated regarding the disabled persons and (2) regional state of (economic) development and disablement are in connection (Fig. 3). Albeit statistical analysis on spatial distribution is basically important, to understand deeper contiguities we should move beyond analyzing statistical data and apply other methods.
The empirical part of the research aimed at gaining information on the spatial behaviour of the disabled and accessibility issues, directly from these people. As a first attempt, a questionnaire was sent to agents via a civil disability organisation. Unfortunately, the number of the volunteers was very low and it became clear that people with disabilities should be approached in another way and particular attention must be paid on research methods. After that, semi-structured interviews were made with residents of Békéscsaba, concentrating on seven areas of life: dwelling, work, services, education and culture, leisure, transportation (Fig. 4), community life. These interviews showed, inter alia, what were the main accessibility problems of the town, like barriers in public institutions, shortage of low-floor public transportation or inefficient pedestrian pathways (see Fabula, 2009a, 2009b).

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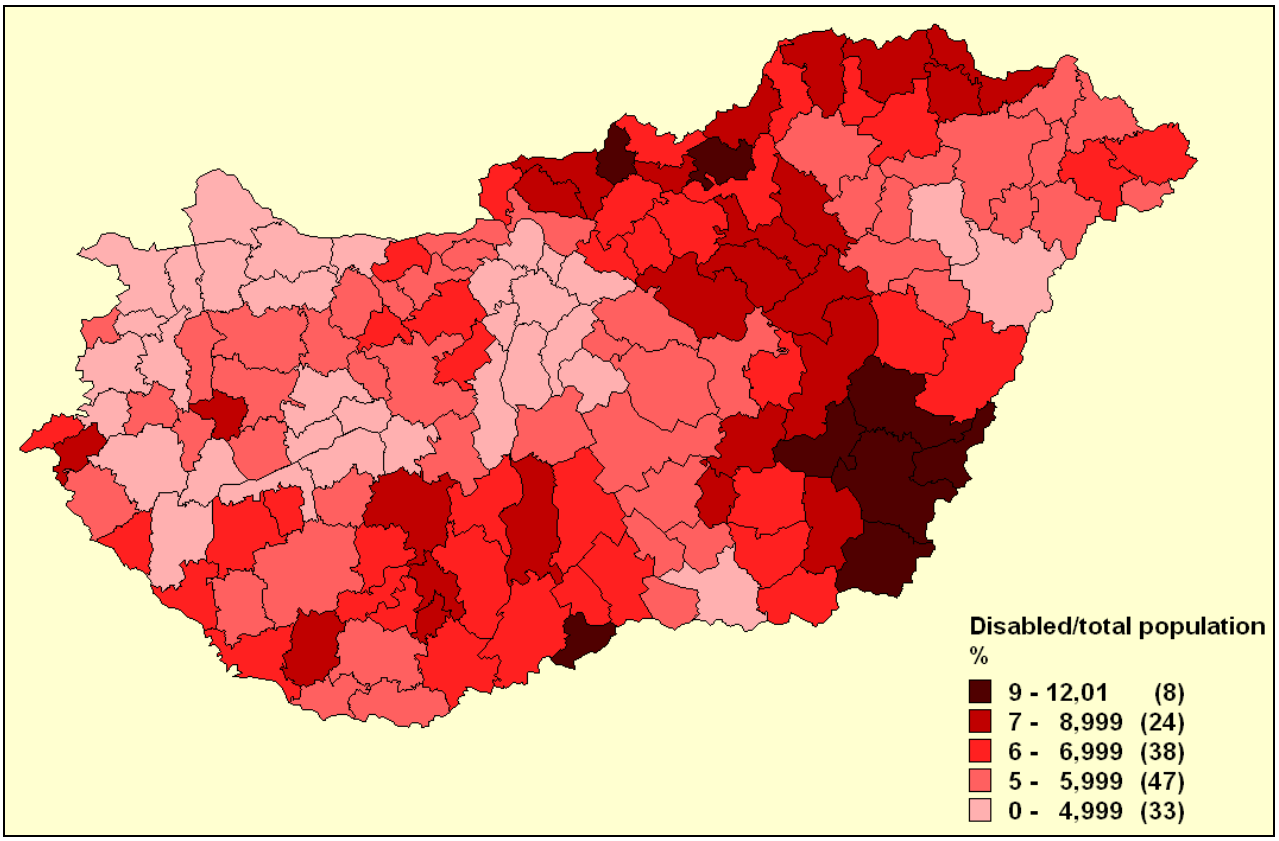

Fig. 2. Rate of people with disabilities in LAU 1 (NUTS 4) regions of Hungary (2001)
Edited: Fabula, Sz. by KSH (2001)

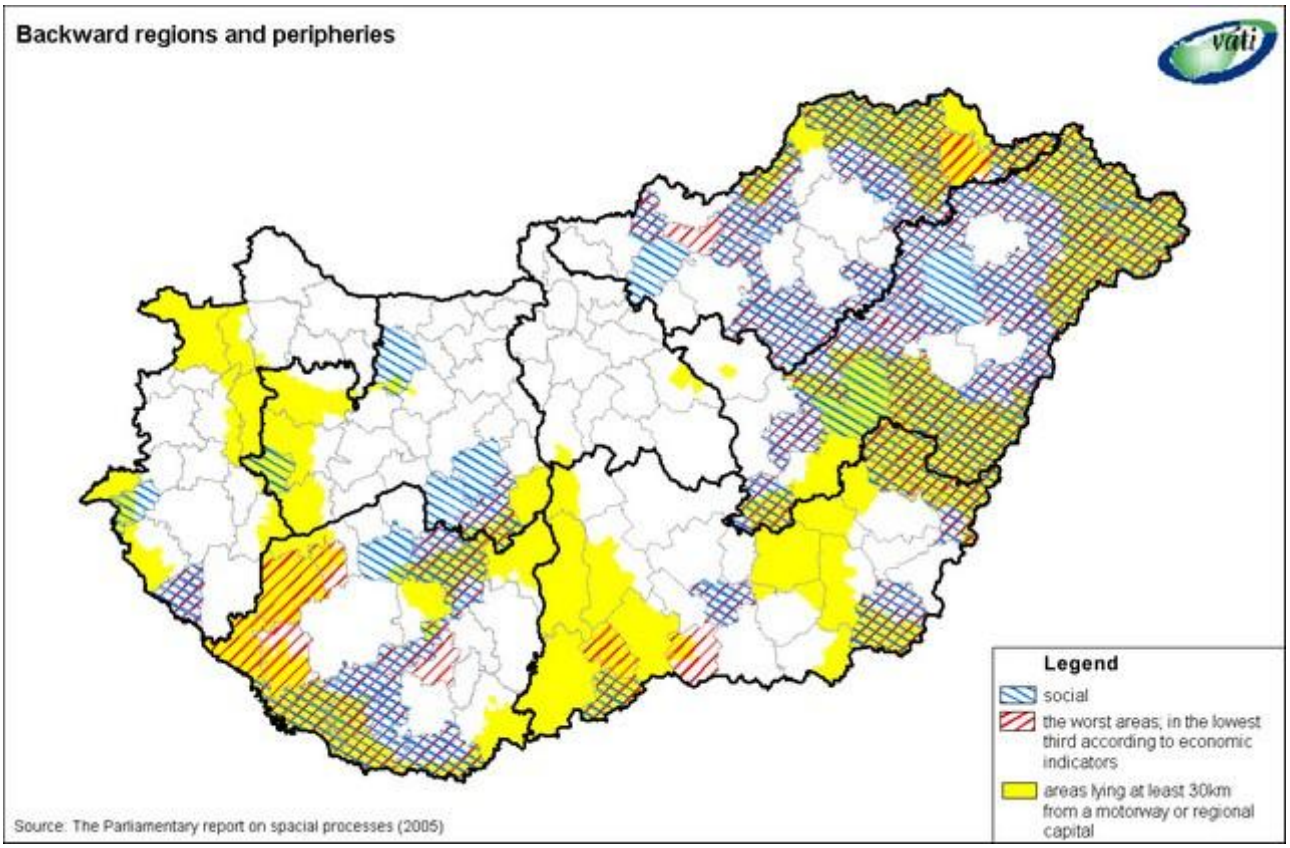

Fig. 3. Backward regions and peripheries of Hungary
Source: National Spatial Development Concept (2005)

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Fig. 4. Accessible parking places and dropped kerbs in the town centre of Békéscsaba
Edited: Fabula, Sz. (2009)

CONCLUSION

At the beginning of this paper we stated that there is a lack of disability studies in the Hungarian geography. However, the examination of researches on other marginalized social groups raised some questions relevant to the disabled as well and in this manner a good starting point was assigned to establish the 'Hungarian (post-socialist) disability geography'. In the second main part of the study the major approaches of disability geography were presented and research topics and methods used by 'Western' scholars were also shown. Finally with own research example we demonstrated that the questions and approaches could be well adopted. Spatial distribution of people with disabilities is similar to that of other disadvantaged groups. Probably there is a relationship between the regional differences and economic development, which underpins the importance of space and place in disability studies. However at this point our knowledge is not enough to make certain statements but we can outline a problem area with intense relevance which can help us to better understand the complexity of spatial inequalities and mechanisms generating them. Another topic is the question of space usage and built environment. Adequacy of the latter is vital for social inclusion of persons with impairments and, as our case study attested geographers can discover problems and assist planners and decision-makers to solve them. Nevertheless we must not forget other things: the importance of cooperation with disabled people and in reference the selection of adequate methods. Initial observations suggest that qualitative ones could be more effective.

It can be concluded that there is no reason why geography in Hungary cannot engage with disability and chronic illness. It is more than a medical question, which is well accepted in Western Europe and North America. In Hungary the relevancy of disability research is incontestable and geography has the 'tools' for examinations. Possible directions are marked out (see above) but of course several others exist and it would be a good start if more case studies had been published, which would evoke a scientific debate on the geographies of disability.

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