

RESEARCH ARTICLE OPEN ACCESS

Convergence of Low-Fertility Policies Beyond Policy Transfer: A Comparative Analysis of Korea and Hungary

Kilkon Ko¹  | M. Jin Lee²  | Tamás Pesuth³ 

¹Graduate School of Public Administration, Seoul National University, Seoul, South Korea | ²Global Development Institute for Public Affairs, Seoul National University, Seoul, South Korea | ³Institute of Finance, Corvinus University of Budapest, Budapest, Hungary

Correspondence: M. Jin Lee (mjinlee@snu.ac.kr; mjinlee@outlook.com)

Received: 16 October 2025 | **Revised:** 7 April 2026 | **Accepted:** 4 August 2026

Keywords: fertility policy | institutional divergence | policy convergence | policy effectiveness

ABSTRACT

This study compares policy responses to persistent low fertility in Korea and Hungary, two countries facing similar demographic pressures but embedded in distinct institutional settings. It asks whether the diffusion of pronatalist policies has produced convergence in the design, implementation, and effects of fertility policy in these cases. Drawing on comparative institutional analysis and recent policy and demographic data, the study shows that although both countries have adopted similar instruments—including cash transfers, housing support, and parental leave—their policy frameworks differ substantially in governance, targeting, and political justification. Korea's approach is fragmented, technocratic, and broadly inclusive, whereas Hungary's is centralized, ideologically framed, and more selective in its targeting. The findings suggest that similar policy instruments do not necessarily generate similar demographic or social outcomes: Korea has remained at ultra-low fertility with limited evidence of behavioral response, while Hungary experienced a modest and temporary increase in fertility alongside heightened political salience. These findings challenge the assumption that benchmarking similar policy instruments ensures substantive convergence in outcomes. This study refines policy convergence theory by distinguishing instrumental similarity from deeper divergence in institutional logic, governance, and implementation intensity.

1 | Introduction

Low fertility has emerged as a pressing demographic and policy issue in advanced and emerging economies, posing significant challenges to the long-term sustainability of welfare states, labor market dynamics, and intergenerational fiscal arrangements (R. Lee and Mason 2013; Gauthier 2007). Persistently low birth rates threaten to erode the economic base that supports social protection systems and intensify generational imbalances in public finance (Bloom et al. 2003). In response, governments across the globe have designed a variety of pronatalist policies ranging from direct financial incentives to broader institutional reforms in childcare, housing, and gender equality. This growing policy attention has naturally led comparative policy scholars to

explore not only the effectiveness of such interventions but also how policy ideas and instruments travel across borders (McDonald 2006; Frejka and Sobotka 2008).

Literature on policy transfer and diffusion suggests that countries often benchmark international peers to address shared challenges. According to Dolowitz and Marsh (2000), Policy transfer involves drawing on the expertise about policies, administrative arrangements, or institutions from established systems to shape the development of policies in a different time or place. Rose (1991) similarly conceptualizes policy learning as a form of lesson-drawing from abroad. These frameworks imply that observed similarities in policy designs often result from active

This is an open access article under the terms of the [Creative Commons Attribution-NonCommercial-NoDerivs](https://creativecommons.org/licenses/by-nc-nd/4.0/) License, which permits use and distribution in any medium, provided the original work is properly cited, the use is non-commercial and no modifications or adaptations are made.

© 2026 The Author(s). *Public Administration and Development* published by John Wiley & Sons Ltd.

learning, imitation, or emulation, especially under globalization and institutional isomorphism (Bennett 1991; Knill 2005; DiMaggio and Powell 1983).

However, while current debates on policy diffusion center on instrumental mimicry, they often bypass underlying mechanics and actual resource distribution. To fill this research gap, this study focuses on two primary objectives: documenting the presence of policy convergence without direct transfer and assessing the substantive alignment in actual policies. The inquiry begins by addressing the policy convergence between two countries that differs significantly in terms of historical background, economic frameworks, and sociocultural systems—Korea and Hungary—have responded to the common problem of low fertility despite limited policy exchange or institutional ties. Although the two countries have recently increased their economic cooperation, they have seldom engaged with each other in public administration or social policy. Thus, this study aims to identify empirical evidence of policy convergence that has emerged independently of intentional transfer or active engagement among policymakers.

To explore this phenomenon, this study conducts a comparative case analysis of Korea and Hungary, two nations with distinct historical legacies, economic trajectories, and sociocultural norms. This paper investigates which policy goals and instruments each government has pursued to address low fertility and whether there is evidence of convergence in terms of policy design or framing. Theoretically, this study debates on the nature of policy convergence, particularly whether convergence can emerge through indirect mechanisms such as problem similarity, functional pressures, or parallel endogenous learning (Bennett 1991; Holzinger and Knill 2005; Common 1998). It also draws on the theory of soft convergence, which suggests that similarities in policy outputs may arise even without formal coordination, due to shared structural constraints or global cognitive frames (Heichel et al. 2005).

This foundation then allows for a deeper examination of the resulting substantive alignment. While many governments adopt common tools to address low fertility—such as tax benefits, childbirth allowances, or subsidized childcare services—such formal similarities often conceal substantial differences in implementation, intensity, and political commitment (Frejka and Sobotka 2008; McDonald 2006). In other words, formally equivalent policies may diverge in function, scale, or institutional integration, resulting in neither convergent nor comparable outcomes in practical terms.

This examination is especially relevant in the context of demographic policymaking, where policy instruments are frequently adapted or reinterpreted to fit domestic administrative systems, fiscal constraints, or cultural expectations. As such, the presence of a shared policy “program” does not necessarily imply substantive policy alignment or institutional isomorphism. Policy diffusion may result in surface-level convergence without deeper harmonization of goals, norms, or implementation logics (Bennett 1991; Heichel et al. 2005; Common 1998).

Therefore, this study investigates whether Korea and Hungary—despite potentially adopting formally similar instruments in their low-fertility strategies—actually implement these

policies with comparable intensity and follow similar trajectories of change over time. This involves analyzing how much fiscal investment each country allocates to key family and fertility-related policies, how these budgetary commitments have evolved, and whether the policy focus has shifted across different program areas. By tracking these developments longitudinally, the study seeks to determine whether surface-level similarities translate into meaningful convergence, or whether they mask divergent policy dynamics rooted in each country’s unique political, institutional, and socio-economic context.

By doing so, this research not only tests the validity of claims about functional convergence in fertility policy but also contributes to the refinement of policy convergence theory by highlighting the need to distinguish between instrumental mimicry and substantive alignment. This line of inquiry resonates with growing interest in domestic adaptation, path dependence, and policy drift in shaping the trajectories of seemingly similar reforms (Mahoney and Thelen 2010; Béland 2005).

2 | Literature Review

2.1 | Policy Transfer, Diffusion, Convergence, and Isomorphism

Much of the literature on policy transfer, diffusion, and convergence operates under an implicit assumption: that similarities in policy choices across countries are primarily the result of intentional, purposive actions such as lesson-drawing, emulation, or direct transfer. For example, Dolowitz and Marsh (2000, 5) define policy transfer as a process through which “knowledge about policies, administrative arrangements, institutions and ideas in one political system...is used in the development of policies...in another political system”. Similarly, Rose (1991) emphasizes that policymakers facing domestic challenges often draw lessons from other countries’ experiences, suggesting a highly cognitive and deliberate model of learning. These frameworks underscore conscious efforts by policymakers to adopt or adapt foreign policy instruments.

However, this perspective risks overstating the role of intentionality in cross-national policy similarity. As Bennett (1991) and Knill (2005) have argued, policy convergence can occur without explicit transfer, particularly when countries face similar structural challenges and independently generate comparable responses. This notion of independent adaptation challenges the presumption that convergence is necessarily driven by informational flows or active emulation.

From a sociological institutionalist viewpoint, DiMaggio and Powell’s (1983) concept of institutional isomorphism provides an important corrective. They argue that under conditions of uncertainty and shared external pressures, organizations—and by extension, states—tend to converge toward similar structures or practices even without direct contact. These processes of coercive, mimetic, or normative isomorphism suggest that policy similarity can be the unintended outcome of parallel environmental constraints, rather than the result of direct policy learning or transfer.

This study builds on these insights by critically engaging with strands of the policy transfer literature that emphasize

intentional learning and borrowing. At the same time, the broader comparative policy literature highlights multiple mechanisms of convergence, including independent adaptation, functional pressures, and institutional isomorphism. This study therefore positions itself within this broader framework by examining convergence without direct policy transfer. In the case of Hungary and Korea, both countries have adopted similar pronatalist policy instruments (e.g., childbirth allowances, tax incentives, childcare subsidies). Yet, there is little evidence of bilateral policy learning or structured transfer mechanisms. The Hungarian government has not systematically studied Korean family policy. In Korea, Hungary's measures have been mentioned mostly in superficial terms in media or political rhetoric rather than in rigorous policy exchange or research. Thus, the observed policy resemblance likely reflects isomorphic pressures or global policy scripts, rather than intentional policy borrowing.

2.2 | Policy Convergence Without Direct Transfer

Countries facing parallel pressures—such as population aging and plunging birth rates—may devise comparable solutions on their own, not because they copied one another, but because the logic of the problem presses toward a similar range of responses. In the Korea–Hungary context, direct transfer (e.g., officials formally consulting one another's policy and importing it) appears to have been minimal to date. There is no evidence of structured inter-governmental policy learning exchanges between the two on family policy. And yet, both have pursued similar pronatalist measures. This suggests convergence may be occurring through broader diffusion and isomorphic pressures.

For instance, both countries operate under the watch of international bodies like the OECD and UN that have highlighted low fertility as a crisis and shared examples of policy responses across nations. The spread of ideas need not be bilateral; Korean policymakers can read about Hungary's family policy successes in media or reports, and vice versa, without any official transfer program. Such indirect diffusion is evident: Korea's media and policy circles have periodically highlighted Hungary's recent pronatalist measures as a reference point. For example, Hungarian programs like the interest-free Baby Loan for young couples were introduced to Korean audiences through news reports and political debates, rather than via formal policy export. Conversely, Hungarian discussions on demographic issues have noted Korea's record-low fertility rates as a cautionary extreme, though without deep engagement with Korean policy *per se*. These superficial exchanges indicate that each country is aware of the other, but not necessarily learning directly—they are responding to the shared global problem of low fertility with tools circulating in the international zeitgeist.

From a theoretical standpoint, this aligns with the concept of mimetic isomorphism. Under uncertainty about how to raise birth rates, policymakers may imitate policies that appear to have worked elsewhere, even if the learning is indirect. The adoption of similar family policy instruments across very different countries suggests that certain solutions (like baby bonuses or tax breaks for parents) have attained a kind of global script status for addressing fertility decline. Policy diffusion research also shows that governments often benchmark against peers and borrow

ideas through transnational networks or media, resulting in clusters of similar policies even absent any one-to-one transfer channel. Ultimately, the theory predicts—and the empirical hints from Korea and Hungary confirm—that convergence might manifest even in the absence of direct contact.

In theoretical terms, we can distinguish convergence in policy form from convergence in policy performance or settings. Knill (2005) and others emphasize that we must specify which aspect of policy is converging: objectives, instruments, or settings. It is possible to converge on the choice of policy instruments (e.g., both countries provide baby bonuses and tax incentives for families) yet diverge in the settings or calibration of those instruments (e.g., Hungary offers a much larger bonus or a longer tax exemption than Korea). In the language of Peter Hall's framework (1993), countries might agree on second-order changes (the instruments) but not on third-order changes (the underlying goals or levels of spending). Moreover, domestic institutional differences can cause implementation gaps. Dolowitz and Marsh (2000) warn that transferred policies may be adopted nominally or formally, but implemented incompletely if local conditions differ. This is relevant when comparing the trajectories of Korean and Hungarian fertility policies.

2.3 | Comparative Context and Research Gap: Fertility Policy in Korea and Hungary

It is necessary to first align the disparate contexts of the two countries before comparison. In what ways have unique historical legacies, economic trajectories, and sociocultural norms shaped the emergence and development of current fertility policies in Korea and Hungary?

The Context of Korea: The policy context of Korea has changed dramatically throughout history. Korea underwent substantial demographic losses during the Japanese colonial period (1910–1945), World War II (1939–1945), and the Korean War (1950–1953). In the aftermath of these disruptions, the Korean government adopted pronatalist policies throughout the 1950s, promoting population growth through public campaigns. However, as the postwar baby boom generation grew, Korea began facing critical shortages in educational infrastructure and food supplies. These demographic pressures led to a policy shift in 1961. The Korea Family Planning Association was established, and initiated the formal inception of a nationwide birth control. The Korean government continued anti-natalist policies by the mid of 1990s.

To control births, public health centers and family planning clinics provided free contraceptive services and disseminated family planning messages through educational programs and widespread media, including bus advertisements, lottery tickets, and postage stamps. While emphasizing education and voluntary compliance, the policy framework included some coercive measures, such as restricting health insurance coverage for third and subsequent children (Korean Archives, KTV). This effort was primarily driven by Malthusian concerns over food and resource shortages (H.-T. Lee 1985; K.-S. Lee and Kim 1988). Birth control was also framed as an economic development strategy emphasizing “well-educated, smaller families” (S. Y. Lee 2021). Furthermore, to counter gender-driven fertility—rooted in the tradition

of having children until a son was born—the government advocated for a two-child limit regardless of gender. The government initially aimed to reduce the TFR to 2.1, which is remaining the current population level, by 1986. However, this target was achieved earlier than expected, with the TFR declining to 2.1 by 1983, and continued to decline beyond this point. In 1995, concerns emerged regarding the socio-economic consequences of low fertility, including labor force contraction and the potential strain on national pension systems. In response, the Population Policy Development Committee recommended abolishing the population control policy. The government officially terminated the “Family Planning” policy in 1996.

Since the 2000s, Korea has shifted toward pronatalist policies. In 2005, the Framework Act on Low Fertility and an Aging Society was enacted, consolidating previous task forces. This led to the Presidential Committee on Aging Society and Population Policy (hereinafter the Presidential Committee), a presidential advisory body responsible for formulating the “Basic Plan for Low Fertility and Aging Society” through successive five-year master plans. Korea’s Basic Plans for Low Fertility have evolved in 2006 from an initial focus on institutional infrastructure and direct family support toward a broader, structural approach centered on quality of life and social reform. The first (2006–2010) and second (2011–2015) plans emphasized expanding childcare, parental leave, and work–family balance policies to restore fertility rates toward the OECD average, while the third plan (2016–2020) gradually shifted toward a life-cycle framework addressing youth employment, housing, gender equality, and demographic change more comprehensively. The fourth plan (2021–2025) represents a paradigmatic transition away from explicitly fertility-centered targets toward structural reforms prioritizing individual choice, social innovation, and the integration of population policy into a wider social policy agenda.

Since the Korean War (1950–1953), which significantly shaped the contemporary state structure, the Korean government has continuously addressed population issues through various policy measures. Over time, the policy approach has shifted from indirect guidance to direct economic and social support, reflecting a substantial evolution in governmental strategy. Likewise, the government’s perception of population issues has dramatically changed from early preventive measures aimed at managing rapid population growth, to urgently addressing the contemporary challenges posed by significant population decline.

The Korean government approaches demographic issues from economic, social, and cultural perspectives. Economically, key areas of concern include the compressed economic development, the reduction of the working-age population, shifts in labor-force structure, national debt sustainability, strains on educational infrastructure, and the balance between pension contributors and beneficiaries. Socially, major considerations involve developmental welfare, population aging, healthcare sustainability, retirement policies, and regional demographic imbalances. Culturally, policy discussions emphasize gender inequality, discrimination and women’s rights (J.-W. Park and Yeo 2021; Roh and Yang 2019; National Assembly Budget Office 2024; Ministry of Health and Welfare (MOHW) 2022). Korea exhibits one of the widest gender pay gaps and the lowest

levels of male participation in unpaid household labor among OECD countries, highlighting a persistent structural imbalance in both the labor market and domestic spheres (OECD 2024a, 2024c).

The Context of Hungary: Hungary represents a compelling case for studying low-fertility policy. Following the collapse of state socialism in 1989–1990, the country transitioned to a liberal democratic market economy, reshaping welfare institutions and family policy frameworks. Over time, Hungary experienced a substantial decline in births, from over 200,000 annually in the 1950s to approximately 77,500 in 2024, with a particularly sharp drop in the early 1990s.

Since 2010, Hungary has been governed continuously by the right-wing Fidesz party under the leadership of Prime Minister Viktor Orbán. This period of political stability and centralized policymaking has enabled the government to implement a coherent and ideologically consistent set of family policies over a prolonged timeframe. As a result, Hungary offers a rare opportunity to examine the cumulative effects of sustained policy intervention in the realm of family support and demographic policy. This continuity allows scholars to go beyond short-term program evaluations and instead assess the broader trajectory, internal logic, and evolving priorities of Hungary’s low-fertility strategy in a longitudinal perspective.

The country’s commitment to family policy is not just political—it is constitutional (Orbán 2025). According to the Fundamental Law of Hungary: “Hungary shall protect the institution of marriage as the union of a man and a woman established by voluntary decision, and the family as the basis for the survival of the nation. The protection of families and the encouragement of having children shall be the responsibility of the State.”

Unlike most European countries, Hungary did not experience a post-war baby boom; between 1948 and 1952, births remained below pre-war levels and failed to meet socialist demographic targets. Following Soviet policy patterns, Decree No. 1004/1953 introduced both incentives and coercive measures, including extended maternity leave, increased family allowances, a bachelor tax, and restrictions on abortion. The near-total abortion ban lasted about 3 years and resulted in approximately 80,000 additional births (Pongrácz 2013).

On March 14, 2025, the Prime Minister of Hungary, Viktor Orbán articulated the Hungarian government’s approach to shaping fiscal policy around family structures. He emphasized that considerable efforts had been made to position marital status and family life as central pillars of the tax system. As a culmination of these efforts, he announced the introduction of lifelong tax exemption for mothers with 2 children, describing it as the most significant and final step in this policy direction. Orbán highlighted that this measure represents the establishment of a unique, family-centered economic system in Hungary, distinguishing it from fiscal models implemented elsewhere in the world (Orbán 2025).

Hungary’s post-socialist demographic baseline, combined with a centralized and state-driven welfare architecture, provides a

context in which fertility policy is closely aligned with broader economic and political objectives. This is further reinforced by normative family models that emphasize marriage and traditional gender roles, as well as by policy instruments—particularly in housing and taxation—that are tightly integrated with long-term life-cycle decisions.

The comparative context (Rationale for selecting Korea and Hungary): Methodologically, this study adopts a most-different systems design, comparing two countries that share a similar demographic challenge but differ significantly in their regional positions, historical origins, economic, and sociocultural contexts. This design is particularly suitable for identifying how similar policy instruments interact with differing institutional environments and produce divergent outcomes. This approach enables us to disentangle the role of contextual factors in shaping policy outcomes despite convergence in policy instruments.

A review of the substantive policy context in Korea and Hungary reinforces both the parallels in their approaches and the relative isolation of their policy debates to date. Both countries face urgent demographic crises characterized by very low birth rates and rapid population aging, and both have placed fertility policy high on the national agenda. Direct comparative academic research on Korean and Hungarian fertility policies remains limited, reflecting the different regional and institutional contexts of the two cases. The two countries are rarely analyzed side-by-side in scholarly work, likely because they belong to different regions and policy communities (East Asia and Central Europe, respectively).

This gap in the literature underscores the originality and importance of the present research. By explicitly comparing Korea and Hungary, we address a blind spot where two otherwise unrelated cases might illuminate each other. The lack of cross-references in existing research means there has been little questioning of whether similar policies have comparable effects in different settings, or whether differences in cultural, economic, and political context modulate those policies' impact. Our study will contribute by examining the convergence (or lack thereof) in policy design between the two countries and by critically analyzing how each implements those policies over time. In doing so, we also respond to the call in convergence literature to look beyond surface similarities and probe deeper into implementation and outcomes.

In summary, theoretical frameworks on policy convergence, transfer, diffusion, and isomorphism provide a lens to understand how Korea and Hungary might end up with similar low-fertility policy portfolios (comprising framing, targets, fiscal intensity, and delivery mechanisms) despite no direct transfer process. These frameworks predict that common pressures and global idea flows can yield convergence, but also caution that convergent policies may diverge in practice due to local circumstances. The empirical context of Korean and Hungarian fertility policies shows many analogous instruments in play, yet also hints at divergent intensities and results—exactly the dynamic of convergence-without-transfer and variation in implementation that our research questions posit. Given the dearth of prior comparative scholarship linking these two cases,

our literature-informed exploration stands to offer fresh insights into how policy ideas travel (or emerge independently) and how similar policies function across different national contexts. This review thus sets the stage for investigating our core questions: can we observe policy convergence in Korean and Hungarian fertility strategies absent direct transfer, and do their ostensibly similar pronatalist policies follow distinct trajectories in practice? The theoretical and contextual evidence surveyed here suggests affirmative hypotheses for both, which the subsequent analysis will examine in detail, backed by scholarly and comparative scrutiny. This design is particularly suitable for identifying how similar policy instruments interact with differing institutional environments.

3 | Convergence of Policy Tools

Although Korea and Hungary differ in ideological orientation and governance structures, their policy responses to low fertility exhibit significant similarities in the types of instruments employed. Both governments have adopted multidimensional strategies that combine direct financial incentives with structural support to reduce the economic and social burdens of childrearing.

3.1 | Direct Cash Incentives for Childbirth

Both Korea and Hungary have implemented financial transfers to encourage childbirth. In Korea, lump-sum birth grants are distributed upon the birth of children, typically varying by local government. Korea's direct cash incentives for childbirth has evolved from local initiatives to centralized nationwide schemes. This trajectory reflects an incremental shift in addressing persistently low fertility. The policy originated in 2002, when Hampyeong County in South Jeolla Province introduced the first locally financed childbirth grant. This decentralized approach was soon adopted by other municipalities, resulting in varying incentive structures across jurisdictions. A major shift occurred in 2006 under the first Basic Plan for Low Fertility and Aging Society (2006–2010). The central government formalized direct cash transfers at the national level, providing tiered grants for the first, second, and subsequent children (Ministry of Health and Welfare (MOHW) 2022). This marked the transition to a uniform, state-administered incentive system.

Subsequently, a hybrid model emerged as the central government allowed municipalities to supplement national transfers with local funds, positioning childbirth grants as symbolic measures to reinforce national attention. Incentive structures further diversified into lump-sum payments and installments. Empirical evidence suggests that installments have a greater positive influence on fertility decisions, as they are perceived as ongoing support rather than one-time rewards (W. Kim and Lee 2018). Despite these variations, the continued decline in the national fertility rate indicates the limited standalone impact of direct financial transfers.

In contrast, Hungary has pursued a more comprehensive and long-term family policy by introducing income tax exemptions for mothers with four or more children in 2020. The scheme was expanded to cover mothers of three children in 2025, and those

with two in 2026. While the Korean approach is largely one-off in nature, Hungary's model provides sustained economic incentives that align childbearing with long-term financial benefits. This reflects a broader policy logic in Hungary, where financial incentives are designed not only to support families but also to shape long-term demographic behavior through sustained and conditional benefits, embedded in a centralized policy framework.

In 2022, the Hungarian government implemented a one-off personal income tax refund for parents, affecting about 1.1 million families (1.5 million earners). The benefit applied broadly to parents eligible for family allowance, making it widely accessible across income groups.

Hungarian family benefits can be grouped into fixed-amount and income-dependent categories. While spending on fixed benefits stagnated or declined, expenditures on income-linked benefits increased, reflecting policy priorities since 2010 that emphasize labor market participation and rising minimum wages. The core family benefit system, including eligibility and administrative rules, is regulated primarily by Act LXXXIV of 1998 on Family Support, while additional policy instruments are governed by separate legislation.

3.2 | Housing Support Linked to Family Formation

The fertility policies in both countries prominently feature housing support tied to childbearing. Both countries recognize housing as a significant factor influencing marriage and childbirth, often making marriage a prerequisite for housing support. Korea provides public housing and subsidized housing loans, while Hungary offers generous housing allowances and family-targeted housing loan programs (OECD 2024b, 2025).

Korean housing support for newlyweds (J.-y. Kim and Jang 2025) primarily involves prioritized allocations and subsidized financing. The Ministry of Land, Infrastructure and Transport (MOLIT) and the Korea Land and Housing Corporation (LH) reserve a significant portion of public rental units for young adults and newlyweds at rates substantially below market prices. These units are typically supplied through publicly-funded but privately-managed schemes. A notable example is “Haengbok Juteak” (Happy Housing), which provides long-term, small-scale rental housing for students and young couples.

Beyond direct supply, the Korea Housing and Urban Fund (KHUF) and the Korea Housing Finance Corporation (HF) provide low-interest loans tailored to newlyweds and first-time homebuyers. Eligibility is generally based on marriage duration, income thresholds, and net asset limits. These financial programs offer tiered loan ceilings and interest rate discounts, particularly for families with multiple children or other vulnerable groups, to ease the financial burden of home acquisition and residential stability (Korea Housing and Urban Fund 2025; Korea Housing Finance Corporation, n.d.).

Eurostat (2024) reports that 69% of the EU population resided in owner-occupied dwellings in 2023. Hungary demonstrated a

remarkably high homeownership rate of 91%—surpassed only by Romania and Slovakia—reflecting a strong cultural preference for ownership. Consequently, Hungarian demographic objectives are integrated with housing policy. Since 2010, state-subsidized schemes like the Family Housing Allowance (CSOK) and the “baby-expecting loan” (babaváró hitel) have become central to family support, addressing both demographic decline and affordability (Kramarics 2025).

Between 2010 and 2024, EU house prices rose by 55.4% and rents by 26.7%; however, Hungary saw the highest increases, with house prices tripling (+234%) and rents doubling (+114%) (Eurostat 2025). Despite this, Hungary records low household mortgage debt, reflecting credit market underdevelopment. While mortgage lending is concentrated in the top income quintile, the “baby-expecting loan” is more evenly distributed (Palkó 2024).

Hungary's CSOK program provides grants and subsidized loans linked to the number of children, including debt forgiveness after the second and third child. Government Decree 518/2020 introduced a 50% home renovation subsidy (up to 3 million HUF). In 2025, the “Otthon Start” program launched, offering 3% fixed-rate mortgages for 25 years. Unlike earlier pro-natalist tools, this program includes young and single individuals, marking a shift toward inclusivity.

3.3 | Public Childcare and Family Care Services

Both countries have invested in expanding childcare infrastructure to support working parents. Korea has focused on expanding public childcare centers and providing state-funded caregiver vouchers. Hungary complements institutional childcare with financial support for home-based caregiving, allowing parents greater flexibility in choosing between formal and informal arrangements. In both cases, the goal is to reduce the opportunity costs of child-rearing and facilitate women's participation in the labor market.

Both Korea and Hungary legally ensure continuous parental leave surrounding childbirth, mandating a certain period of paid leave. In Korea, maternity leave lasts 90 days (120 days for multiple births), with the first 60 days guaranteed as paid leave (Choi 2024). Hungary provides a total of 24 weeks of maternity leave, during which benefits are paid through the Infant Care Allowance (CSED), contingent upon the individual's social insurance status. Recently, both countries have actively pursued policy reforms to increase paternal involvement in childcare, extend paid paternity leave periods, or provide economic incentives to encourage fathers' participation.

Additionally, both countries operate parental leave systems designed to legally safeguard employment rights for workers caring for young children. Korea allows parental leave for workers with children aged 8 years or younger or enrolled in the second grade of elementary school or below, guaranteeing partial income replacement (80% of the regular wage, within prescribed upper and lower limits) through the employment insurance system (Ministry of Employment and Labor 2023). Hungary permits both parents to take parental leave until their child reaches the age of three. Although parental leave benefits

in Hungary are comparatively limited, strong employment protection measures are enforced, including the prohibition of dismissal during the leave period. Moreover, both nations implement complementary policies, such as flexible working arrangements and reduced working hours during childcare periods, further supporting workers in balancing employment and caregiving responsibilities.

3.4 | Child and Family Allowance

Both governments provide ongoing monetary support to families with children. Korea offers a universal child allowance of KRW 100,000 per month for children up to age eight, while Hungary offers a more differentiated family allowance system, including subsidies for large families, tax deductions, and free or discounted public services (e.g., transportation, education). These programs aim to mitigate the cumulative financial costs of raising multiple children and to promote a family-friendly environment.

Since the early 1990s, Hungary's family support policy has evolved in an erratic manner. While family allowance remained a core element, its eligibility and value changed repeatedly: universal between 1990 and 1995, means-tested from 1995 to 1998, and universal again after 1998 with only modest increases. In 2005, the Gyurcsány government's "100 Steps" program introduced a unified family allowance, replacing several existing benefits and differentiating support based on household structure (Benedek and Scharle 2006).

Family tax benefits also fluctuated significantly. They were abolished under the 1995 Bokros package, reintroduced after 2002, and partially removed again in 2005, with limited deductions retained mainly for larger families. In 2011, the Orbán government reintroduced income tax benefits for families with children, reinforcing Hungary's integrated family policy approach (Ferge and Juhász 2004; Benedek and Scharle 2006).

3.5 | Assisted Reproduction

Both Korea and Hungary provide support for assisted reproductive technologies. In both countries, such support is primarily targeted at married couples. In Korea, Assisted Reproduction Technologies became the subject of formal public support through the launch of government-funded infertility treatment subsidies in 2006 (S. H. Kim 2023). The public support system for infertility treatment has since expanded. The Korean government currently subsidizes the costs of intrauterine insemination (IUI) and in vitro fertilization (IVF) for couples below a certain income threshold through national health insurance and public funding. To be eligible, both partners must be enrolled in the national health insurance system, be either legally married or recognized as common-law partners for at least 1 year, and at least one partner must hold Korean citizenship. Age restrictions (previously capped at 44 years) have been abolished, and the number of covered treatment cycles has been gradually increased (e.g., fresh embryo transfers from four to seven cycles, frozen embryo transfers from three to five cycles, and IUI from three to five cycles).

Since July 1, 2022, assisted reproductive procedures in Hungary may only be carried out in state-run fertility centers. Infertile couples have free access to both treatment and associated medications within these public institutions. The Hungarian state subsidizes two main types of procedures: IUI and IVF, which includes various methods of extracorporeal fertilization and embryo transfer. The National Health Insurance Fund (NEAK) covers up to six IUI and five IVF cycles per couple. Should these state-funded attempts prove unsuccessful, patients must bear the cost of further treatments even at public clinics, although at significantly reduced rates compared to the private sector.

4 | Divergent Trajectories of Converged Policy Tools

While both Korea and Hungary have adopted similar policy instruments as above—direct cash transfers, housing support, child care, family allowance, and assisted reproduction—with broadly comparable aims of encouraging childbearing and supporting families, the underlying dynamics surrounding the design, targeting, and governance of these policies reveal significant divergence. Despite parallel policy toolkits, the context-specific orientations, institutional frameworks, and normative priorities embedded within each country's approach have resulted in distinct patterns of implementation and outcomes. As discussed below and summarized in Table 1, these differences manifest in policy targeting, fiscal commitment, institutional coordination, and the role of policy actors, shaping not only the effectiveness but also the societal meaning and reach of pronatalist interventions in each setting (OECD 2024b, 2025; K. Lee and Zaidi 2020).

Policy Orientation: Korea's approach to fertility policy is fundamentally grounded in a work–life balance paradigm, focusing on facilitating child-rearing while allowing parents, especially mothers, to participate in the workforce. Korean policy orientation has been largely reactive, responding technocratically to fertility rates over time. Korea's fertility policy evolved from postwar pronatalist measures (1950s) to birth-control policies during the baby-boom era (1961–1996). Generally, Korea's first baby boom is placed at approximately 1958 and the second at approximately 1972 and then shifted back toward a pronatalist orientation beginning in 2005.

In 2005, Korea enacted the *Framework Act on Low Fertility and an Aging Society* and established the Presidential Committee. Chaired by the President, this committee has been responsible for formulating and implementing a series of five-year master plans titled the Basic Plan for Low Fertility and Aging Society. The policy legacy is thus characterized by centralized national plans seeking to increase the birth rate through technocratic solutions, rather than a deep paradigm shift or integrated socio-cultural vision (M. Kim 2017; K. Lee and Zaidi 2020; Korean Population Association 2020).

Hungary, by contrast, has adopted an explicitly pronatalist policy orientation since 2010, articulated within a broader ideological and constitutional vision that positions family protection and fertility as central to the nation's survival (Orbán 2025; OECD 2025). The government's agenda is not

TABLE 1 | Policy dynamics of Korea and Hungary.

Dimension	Korea	Hungary
Policy orientation	Childrearing support within work–life balance paradigm Legacy: Reactive to falling fertility since 2005; technocratic and incremental	Explicitly pronatalist; natalist family protection agenda Legacy: Part of a broader ideological and constitutional family vision since 2010
Policy framing	– Fertility as a demographic and socioeconomic challenge – Primarily economic approach	– Fertility as a national and moral imperative – Primarily cultural approach
Policy target	All families regardless of marital status Eligibility: Universal and means-tested mix; often neutral toward marital/family form Gender equality: Moderate; some emphasis on dual-earner households and fathers' leave	Primarily married heterosexual couples with multiple children Eligibility: Conditional on marital status, number of children, often excluding non-traditional families Gender equality: Minimal; promotes traditional gender roles (e.g., mothers as caregivers)
Fiscal commitment	High absolute spending but fragmented; low effectiveness	High and coherent investment; bundled under “family protection action plan”
Institutional coordination	Managed across multiple ministries; overlapping responsibilities	Centralized under ministry of culture and innovation and the prime minister's office
Policy actor	Planner/coordinator: Ministry of Health and Welfare (MOHW); Presidential Committee on Low Fertility and Aging Society Implementer: Multiple government departments and agencies related to welfare, family, labor, and education, etc. Local governments Evaluator: Korea Institute for Health and Social Affairs (KIHASA) for research and monitoring, MOHW; fragmented indicators and inconsistent follow-up	Planner/coordinator: Ministry of culture and innovation Coordinator: KINCS (Hungarian Institute for Family Policy) for policy support Implementer: Hungarian State Treasury; Central Government Agencies; Evaluator: Family policy impact reports coordinated by KINCS and ministry of culture and innovation

Note: Compiled by the authors.

simply reactive but is embedded in a political narrative that casts reproduction as a national and moral imperative. This is enshrined in Hungary's Fundamental Law, which obliges the state to protect families and encourage childbearing as a constitutional duty.

Policy Framing: In terms of policy framing, fertility is primarily constructed as a demographic and socioeconomic challenge, with policy discourse emphasizing the economic and fiscal risks associated with population aging and workforce decline (E. H. Park 2020; Sobotka et al. 2020). Consequently, interventions are justified mainly on economic grounds, and policy narratives rarely address the cultural or normative dimensions of fertility decline. The dominant approach remains technocratic, focusing on the mitigation of labor force shrinkage and economic stagnation, rather than a reimagining of family, gender, or societal norms (M. Kim 2017; K. Lee and Zaidi 2020). Although paternity leave has been legally available, entrenched workplace norms long inhibited men's uptake of this entitlement.

In policy framing, Hungary defines fertility decline as a crisis of national identity and morality. The policy discourse foregrounds cultural and demographic renewal as vital to national survival, and family policy is situated within a conservative framework that prioritizes traditional gender roles and familial structures (Vida 2019; OECD 2022). While policy packages have grown more generous and multi-faceted, the framing remains primarily

cultural and normative, reflecting a vision of demographic policy as an extension of national and moral priorities.

Policy Target: Korean family policy is characterized by an inclusive targeting approach, aiming to support all families regardless of marital status or structure. Both universal and means-tested programs coexist, with eligibility criteria designed to be neutral toward different family forms and an explicit, though moderate, emphasis on promoting gender equality through dual-earner models and paternity leave policies. Nevertheless, the actual utilization of fathers' leave remains limited, and gendered caregiving norms persist (Yang et al. 2024; K. Lee and Zaidi 2020).

Hungarian family policy is sharply targeted toward married, heterosexual couples with multiple children, with eligibility for core benefits explicitly conditioned on marital status and family size, often to the exclusion of non-traditional families. The policy framework prioritizes traditional gender roles, with women—especially mothers—cast as primary caregivers and minimal attention to gender equality in the labor market or family life (OECD 2025; Vida 2019).

Fiscal Commitment: In Korea, fiscal commitment is substantial in absolute terms, with large-scale investments in various family policy measures over the past 2 decades. As depicted in Figure 1, the central government allocated KRW 1027.4 billion to low-fertility policies in 2006, a sum that rose progressively to KRW

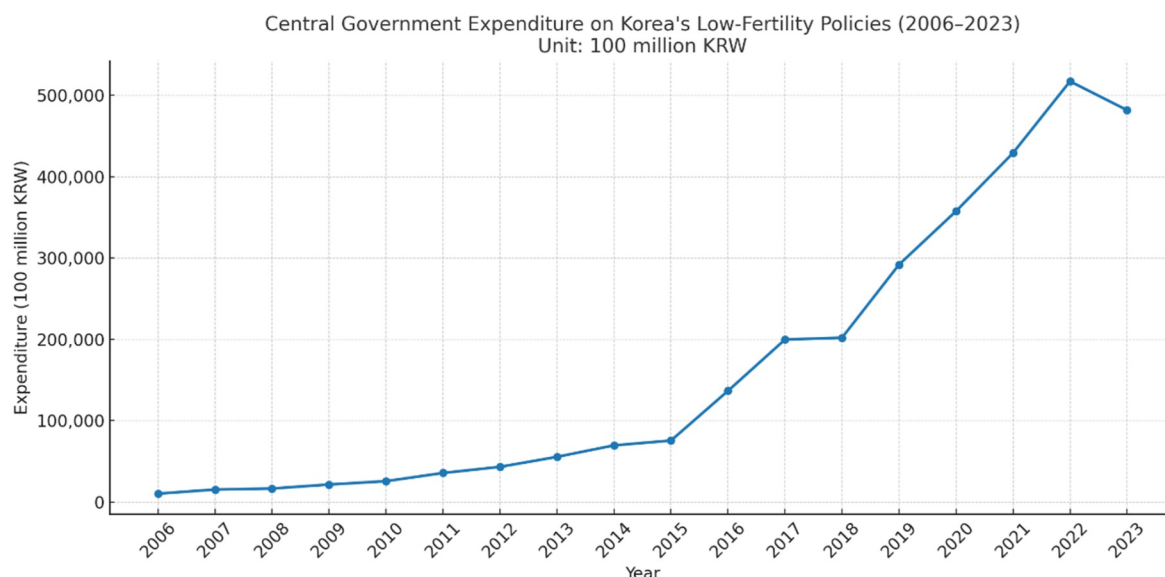


FIGURE 1 | Central government expenditure on Korea's low-fertility policies. *Source:* National Assembly Budget Office, Republic of Korea.

48,167.7 billion in 2023 (National Assembly Budget Office 2023). However, this spending is distributed across fragmented and often overlapping programs operated by multiple ministries and additionally local governments, resulting in limited policy effectiveness relative to investment levels (M. Kim 2017; Yang et al. 2024).

In Hungary, fiscal commitment is both high and coherent, as illustrated in Figure 2, with major family policy initiatives—including extensive tax exemptions, cash transfers, and housing support—integrated under the “Family Protection Action Plan” and coordinated as a unified strategy (OECD 2025; Vida 2019). Based on the expenditure trends of the six family benefits measured by the Hungarian Central Statistical Office, two main categories can be distinguished: fixed-amount benefits and income-dependent benefits. In the case of fixed-amount benefits, stagnation or even a decline in expenditure is observed, whereas spending on income-dependent benefits has increased over time. Since 2010, government policy has prioritized benefits closely tied to labor market participation. This strategic focus, combined with increases in the national minimum wage, has led to a rise in state expenditures on income-linked family support.

Institutional Coordination: Institutional coordination in Korea reflects this fragmentation, as multiple ministries—including Health and Welfare, Labor, Education, and local governments—share responsibilities for policy planning and delivery. Policy leadership is vested in the MOHW and the Presidential Committee, but implementation is carried out by a range of agencies and departments. Policy evaluation is led by KIHASA, yet monitoring and impact assessment remain fragmented due to inconsistent indicators and follow-up procedures (M. Kim 2017; K. Lee and Zaidi 2020).

Institutional coordination in Hungary is centralized within the Ministry of Culture and Innovation and the Prime Minister's Office, ensuring tight policy integration and agenda control.

Policy design and technical support are provided by the Maria Kopp Institute for Demography and Families (KINCS), while implementation is primarily carried out by the Hungarian State Treasury and central government agencies. Policy evaluation and reporting are coordinated centrally by KINCS, with periodic impact reports assessing the effectiveness of family policy measures (OECD 2025; Vida 2019).

Policy Actors: In Korea, the policy actor landscape for family policy is characterized by a complex, multi-level structure. MOHW and the Presidential Committee function as central planners and coordinators, steering the overall direction of policy design and inter-ministerial coordination (M. Kim 2017; K. Lee and Zaidi 2020). Implementation is dispersed across a wide range of government departments and agencies, responsible for welfare, family, labor, and education, along with substantial roles for local governments in adapting and delivering specific programs (Yang et al. 2024). Evaluation and monitoring activities are primarily conducted by KIHASA, with additional oversight from MOHW. However, the evaluation framework remains fragmented, with inconsistent indicators and limited follow-up procedures undermining comprehensive policy learning and feedback (M. Kim 2017; K. Lee and Zaidi 2020).

In Hungary, policy actors in the family policy domain are organized under a highly centralized and coherent structure. Policy planning and coordination are led by the Ministry of Culture and Innovation, the Prime Minister's Office ensuring tight political oversight and integration of policy objectives (OECD 2025; Vida 2019). The Hungarian Institute for Family Policy (KINCS) plays a key role in technical support and policy coordination, conducting research and providing expertise to guide policy development. Implementation is chiefly managed by the Hungarian State Treasury and other central government agencies, reflecting the centralized nature of service delivery. Evaluation and impact assessment are coordinated by KINCS and the Prime Minister's Office, with systematic reporting on policy outcomes and effectiveness (OECD 2025; Vida 2019).

5 | Observed Policy Impacts

The trends in total fertility rates (TFR) in Korea and Hungary from 1960 to 2023 are presented in Figure 3. As illustrated in Figure 3, the total fertility rate in Korea shows a steep decline from the 1960s, falling below the replacement level in the 1980s and reaching one of the lowest levels globally after 2000. In contrast, Hungary experienced a gradual decline followed by a modest recovery in fertility rates during the 2010s.

In terms of observed policy impact, Korea's sustained policy efforts have not translated into a meaningful reversal of demographic trends. Korea and Hungary experienced a prolonged

decline in fertility rates through the early 2000s. In response, both countries implemented policy measures aimed at alleviating the demographic crisis. By the mid-2010s, these interventions had modestly stabilized fertility levels. However, beginning in 2016, the two countries diverged sharply: while Hungary's fertility rate began to recover, Korea's resumed its downward trajectory.

Korea continues to experience very low fertility, with the total fertility rate falling to 0.78 in 2022, and evidence points to only minimal behavioral change among the population (OECD 2024b; J. Kim and Luke 2020). Despite high levels of public investment and a comprehensive policy portfolio, barriers rooted in labor

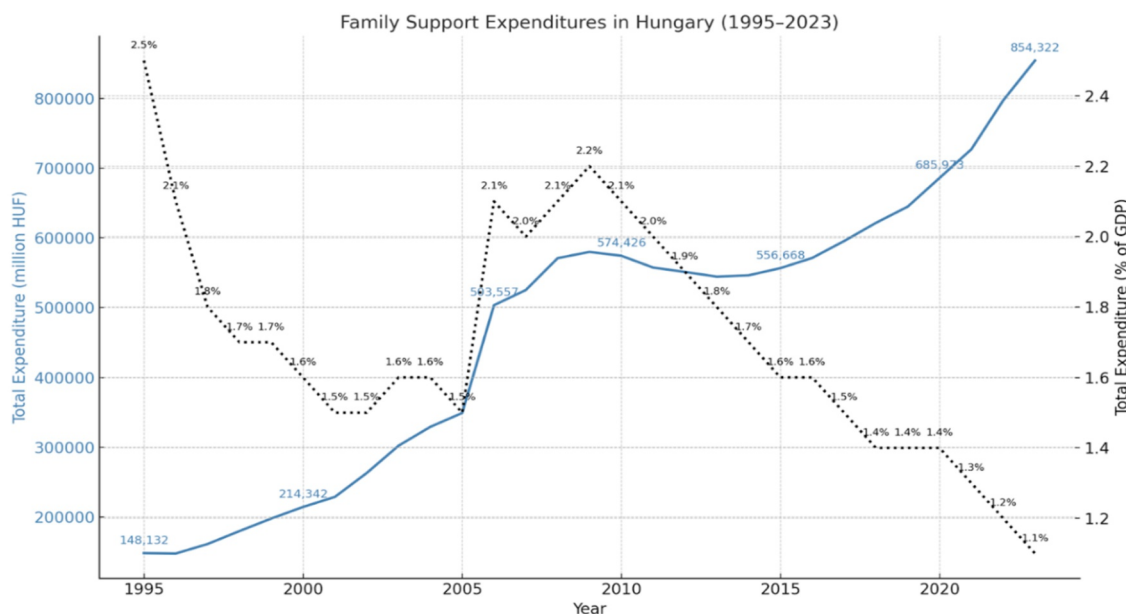


FIGURE 2 | Family support expenditures in Hungary (1995–2023). Source: KSH [Hungarian Central Statistical Office] (2025).

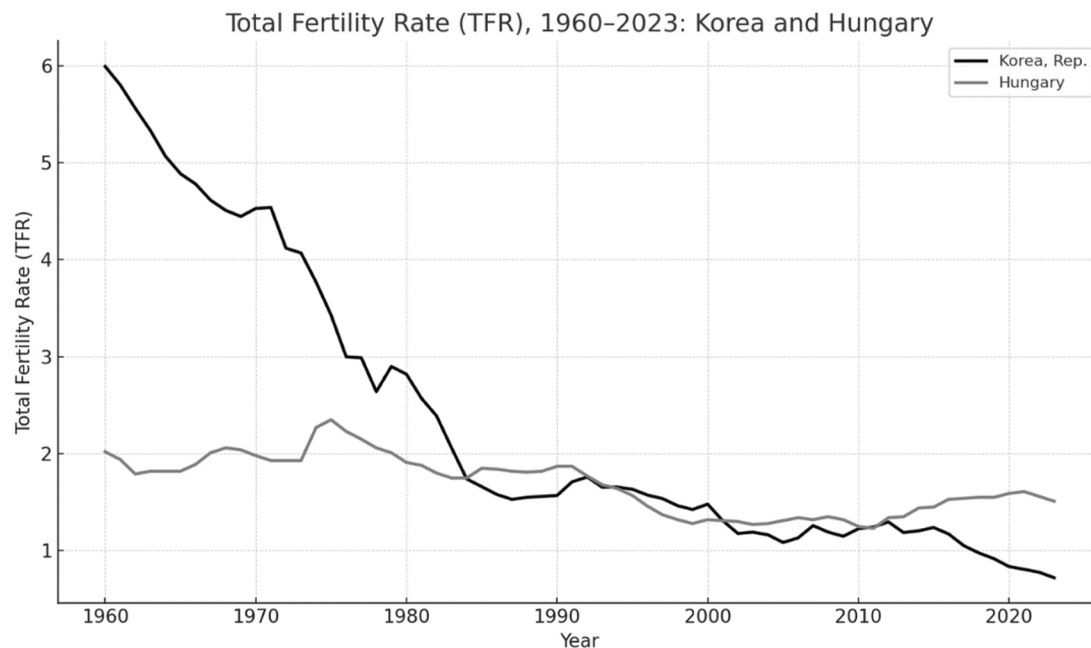


FIGURE 3 | Total fertility rate trends of Korea and Hungary. Source: World Bank (<https://data.worldbank.org/indicator/SP.DYN.TFRT.IN>).

market dualism, gender norms, and social expectations have largely limited the effectiveness of government interventions. In contrast, Hungary has recorded a temporary increase in fertility following the introduction of its coherent and highly visible family policy agenda, with the TFR rising to approximately 1.5 in recent years (OECD 2025). While the demographic effect remains modest relative to replacement levels, these outcomes have achieved considerable political salience, reinforcing the government's pronatalist narrative and its legitimacy among key constituencies (Vida 2019). However, the sustainability and long-term demographic impact of these gains remain subject to debate.

According to the OECD, public spending on family benefits refers to government expenditure that provides direct financial support exclusively to families with children. This spending generally falls into three categories: (1) child-related cash transfers to households, (2) in-kind benefits through publicly funded services for families, and (3) financial assistance delivered via the tax system, such as tax allowances or credits. It is important to note that this definition excludes expenditures categorized under other policy domains—such as healthcare or housing—that may also indirectly support families (OECD 2025).

As illustrated in Figure 4, the OECD average for public spending on family benefits remained relatively stable throughout the period, with a modest increase observed after 2020. Hungary's expenditure decreased from 3.4% of GDP in 2010 to 2.3% in 2022, converging with the OECD average in recent years. In contrast, Korea demonstrated a steady upward trajectory, more than doubling its spending to reach 1.6% by 2022. Korea's spending is below the OECD average. It is important to note, however, that Hungary's family policy strategy has primarily emphasized financial support through the tax system—such as tax allowances and credits—as well as complementary measures in other policy domains, particularly housing, which provide indirect support to families.

6 | Discussions and Conclusion

Hungary's and Korea's approaches over the past decade illustrate convergence in the “type” of measures but divergence in magnitude and trajectory. Since 2010, Hungary has deployed an aggressive pronatalist strategy such as housing grants, subsidized loans, and tax exemptions under the *Family Protection Action Plan*. This high-intensity approach contributed to a significant TFR rise from 1.2 to 1.6 over a decade. Conversely, while Korea has steadily expanded childcare and parental leave since 2006, its incremental trajectory struggled to counteract deep-seated structural barriers like high education costs, a grueling work culture, and persistent gender inequality. Consequently, despite policy expansion, Korea's fertility continued to decline, reaching a record low TFR of 0.78 in 2022.

This indirect convergence in policy instruments can be attributed to shared demographic threats and transnational policy learning from the OECD and UN. However, as these cases demonstrate, adopting a similar policy menu does not guarantee uniform results. The divergence in outcomes stems from differences in implementation intensity, sequencing, and the presence of complementary institutions capable of mitigating socioeconomic disincentives.

Several factors help explain this divergence, particularly differences in policy paradigms and social context. Hungary's pronatalist strategy is embedded in a broader ideological framework emphasizing traditional family structures and national population growth. In contrast, Korea's policies operate within a paradigm that also prioritizes work productivity and individual choice, where workplace norms and career concerns weaken policy effects.

These differences are reflected in key contextual dimensions. First, Hungary's integrated welfare system enables coherent bundling of financial incentives, housing support, and tax

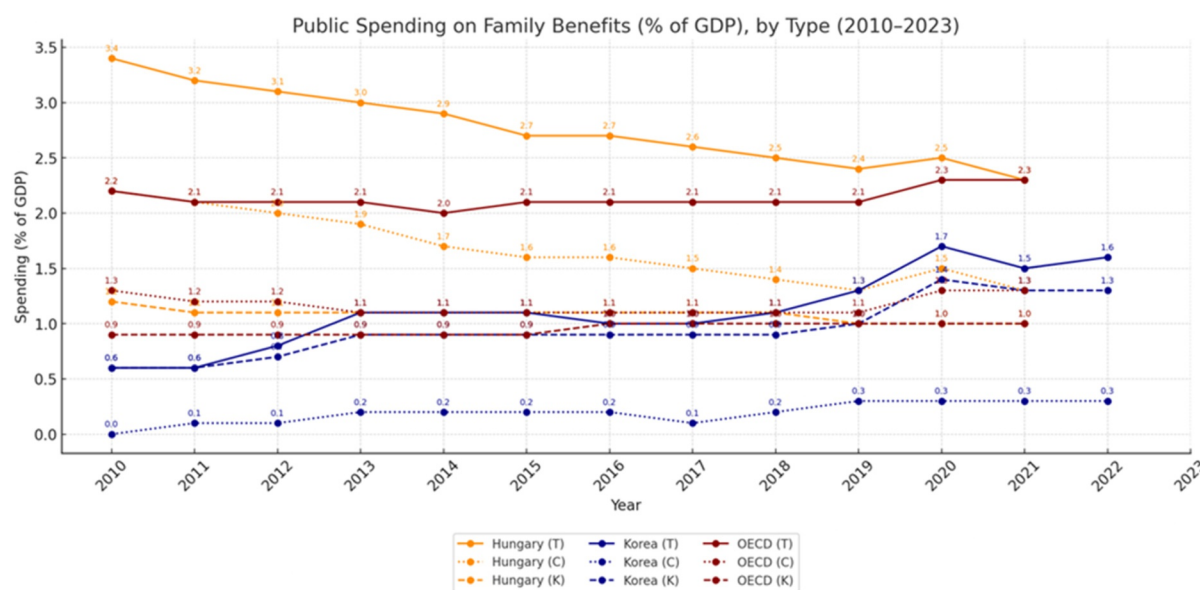


FIGURE 4 | Public spending on family benefits as a percentage of GDP (2010–2023). Source: OECD Family benefits database (T) = total, (C) = cash, (K) = in-kind.

policies, whereas Korea's fragmented, multi-ministerial system weakens policy coherence. Second, gender norms differ: Hungarian policies align with traditional family roles, while persistent labor market inequality in Korea creates structural disincentives for women. Third, family structures mediate outcomes, with Hungary targeting married couples and larger families, while Korea adopts a broader but less focused approach.

Economic conditions further shape outcomes. In Korea, high housing costs, labor market competition, and education expenses increase the opportunity cost of childbearing. In Hungary, subsidized housing and tax incentives are more directly integrated into life-cycle planning. Path dependency also matters: Hungary's partial recovery occurred from a higher historical fertility baseline, while Korea's ultra-low fertility reflects deeper structural challenges from the legacy of anti-natalist policies and the limited success of pronatalist policies.

The literature and country evidence caution that monetary transfers often yield limited long-term increases in completed fertility unless paired with labor-market reforms, broad child-care coverage, credible and stable policy commitments, and changes in gendered domestic norms. For Korea, persistent work-family constraints and education-related child costs blunt the effect of expanded leave and childcare unless deeper institutional change occurs; for Hungary, cash and housing supports may relieve immediate constraints for some groups but are unlikely to reshape fertility trajectories of highly educated parents without service-and-labor complements. Policymakers seeking durable change should therefore prioritize coherent policy bundles and seek to strengthen the institutional complements that enable couples to realize their fertility intentions.

In sum, the comparative analysis of Korea and Hungary demonstrates that similar policy instruments can yield divergent demographic and societal outcomes, depending on the broader institutional, cultural, and political contexts in which they are embedded. Korea's experience illustrates that significant fiscal commitment and the expansion of family policy portfolios alone are insufficient to reverse persistent low fertility in the absence of deeper structural and normative change, particularly regarding gender equality, labor market reform, and societal attitudes toward family diversity (OECD 2024b; K. Lee and Zaidi 2020). Meanwhile, Hungary's highly centralized, ideologically driven approach has produced a temporary increase in fertility and considerable political visibility, but questions remain about the long-term demographic sustainability and the social inclusiveness of policies that privilege traditional family forms and reinforce gendered caregiving norms (OECD 2025; Vida 2019).

Both countries face ongoing challenges that underscore the limitations of technocratic or narrowly targeted pronatalist interventions. For Korea, future progress will likely require greater policy coherence and sustained investment and fundamental shifts in work-family reconciliation, gender norms, and support for diverse family structures (J. Kim and Luke 2020; Yang et al. 2024). For Hungary, sustaining recent gains will depend on whether policy frameworks can adapt to evolving social realities without excluding non-traditional families or

perpetuating gender inequities. Ultimately, the experience of both countries suggests that comprehensive, adaptable, and inclusive strategies rather than solely financial incentives will be necessary to address the complex drivers of low fertility in contemporary societies. More broadly, the findings suggest that policy convergence should not be evaluated at the level of instruments alone, but in relation to the institutional and normative contexts that shape their meaning and effectiveness.¹

Acknowledgments

This research was supported by the Global Development Institute for Public Affairs.

Funding

The authors have nothing to report.

Ethics Statement

This study does not require ethical approval, as no human participants were directly involved and it relies exclusively on publicly available and anonymized national data.

Conflicts of Interest

The authors declare no conflicts of interest.

Data Availability Statement

This study utilized publicly available datasets from the World Bank, the OECD, the National Assembly Budget Office of Korea, and the Hungarian Central Statistical Office. All data used in the analysis are cited in the text and included in the references section.

Policy Impact Statement

Successful policy transfer requires more than superficial benchmarking. By contrasting the divergent outcomes of family policies in Korea and Hungary, this study provides critical insights into the limitations of policy convergence. It informs public administrators that instrumental similarity is often undermined by differences in governance and political justification. To address shared challenges like low fertility, policymakers must ensure that policy instruments are backed by robust governance and fiscal intensity, rather than relying on the symbolic diffusion of global trends.

Endnotes

¹ Regarding the recent political developments in Hungary: Following the parliamentary election of April 12, 2026, Hungary entered a new political period under the leadership of Prime Minister Péter Magyar. The analysis presented in this study reflects the institutional and policy framework that shaped Hungarian family policy through the period under investigation (up to 2025). As the new government has announced reforms across several major policy areas, including governance, economic policy, and social policy, the future direction of Hungary's fertility policy and its institutional framework remains to be examined in future research.

References

Béland, D. 2005. "Ideas and Social Policy: An Institutionalist Perspective." *Social Policy and Administration* 39, no. 1: 1–18. <https://doi.org/10.1111/j.1467-9515.2005.00421.x>.

- Benedek, D., and Á. Scharle. 2006. "A „100 lépés” családtámogatást érintő elemeinek hatása a gyermekes családok jövedelmére [The Impact of the Family Support Elements of the "100 Steps" on the Income of Families With Children]." In *Társadalmi riport* [Social report] 2006, edited by T. Kolosi, I. G. Tóth, and Gy. Vukovich, 250–266. TÁRKI.
- Bennett, C. J. 1991. "What Is Policy Convergence and What Causes it?" *British Journal of Political Science* 21, no. 2: 215–233. <https://doi.org/10.1017/s0007123400006116>.
- Bloom, D. E., D. Canning, and J. Sevilla. 2003. *The Demographic Dividend: A New Perspective on the Economic Consequences of Population Change*. RAND Corporation.
- Choi, H. I. 2024. *Evaluation of Early Childhood Education and Care Support Program to Overcome Low Fertility*. National Assembly Budget Office.
- Common, R. K. 1998. "Convergence and Transfer: A Review of the Globalisation of New Public Management." *International Journal of Public Sector Management* 11, no. 6: 440–450. <https://doi.org/10.1108/09513559810244356>.
- DiMaggio, P. J., and W. W. Powell. 1983. "The Iron Cage Revisited: Institutional Isomorphism and Collective Rationality in Organizational Fields." *American Sociological Review* 48, no. 2: 147–160. <https://doi.org/10.2307/2095101>.
- Dolowitz, D., and D. Marsh. 2000. "Learning From Abroad: The Role of Policy Transfer in Contemporary Policy-Making." *Governance* 13, no. 1: 5–23. <https://doi.org/10.1111/0952-1895.00121>.
- Eurostat. 2024. *Housing in Europe-2024 Edition*. European Commission. <https://ec.europa.eu/eurostat/web/interactive-publications/housing-2024>.
- Eurostat. 2025. *House Prices and Rents Went up in Q4 2024*. European Commission. Eurostat, 8 April 2025. <https://ec.europa.eu/eurostat/web/products-eurostat-news/w/ddn-20250408-1>.
- Ferge, Z., and G. Juhász. 2004. "Accession and Social Policy: The Case of Hungary." *Journal of European Social Policy* 14, no. 3: 233–251. <https://doi.org/10.1177/0958928704044621>.
- Frejka, T., and T. Sobotka. 2008. "Fertility in Europe: Diverse, Delayed and Below Replacement." *Demographic Research* 19, no. 3: 15–46. <https://doi.org/10.4054/DemRes.2008.19.3>.
- Gauthier, A. H. 2007. "The Impact of Family Policies on Fertility in Industrialized Countries: A Review of the Literature." *Population Research and Policy Review* 26, no. 3: 323–346. <https://doi.org/10.1007/s1113-007-9033-x>.
- Hall, P. A. 1993. "Policy Paradigms, Social Learning, and the State: The Case of Economic Policymaking in Britain." *Comparative Politics* 25, no. 3: 275–296. <https://doi.org/10.2307/422246>.
- Heichel, S., J. Pape, and T. Sommerer. 2005. "Is There Convergence in Convergence Research?" *Journal of European Public Policy* 12, no. 5: 817–840. <https://doi.org/10.1080/13501760500161431>.
- Holzinger, K., and C. Knill. 2005. "Causes and Conditions of Cross-National Policy Convergence." *Journal of European Public Policy* 12, no. 5: 775–796. <https://doi.org/10.1080/13501760500161357>.
- Kim, J., and N. Luke. 2020. "Lowest-Low Fertility in South Korea: Policy and Domestic Labor Supports and the Transition to Second Birth." *Social Forces* 99, no. 2: 700–731. <https://doi.org/10.1093/sf/soz159>.
- Kim, J.-y., and M. Jang. 2025. "Evaluating Housing Policy Effects on Childbirth Intentions in South Korea: Preferences, Benefits, and Policy Implications." *Population, Space and Place* 31, no. 4: e70036. <https://doi.org/10.1002/psp.70036>.
- Kim, M. 2017. "The Paradigm Shift in Korea's Low Birthrate Policy? Exploring the Third Basic Plan for Low Fertility and Aging Society." *Asia-Pacific Journal of Multimedia Services Convergent With Art Humanities, and Sociology* 7, no. 10: 589–597. <https://doi.org/10.14257/ajmahs.2017.10.67>.
- Kim, S. H. 2023. "In/Eligible Infertility: The Routinization of Assisted Reproductive Technology and the Stratified Reproduction in South Korea." *Korean Journal of Science and Technology Studies* 23, no. 2: 78–111. <https://doi.org/10.22989/jsts.2023.23.2.3>.
- Kim, W., and J. Lee. 2018. "The Effects of Baby Bonus on Birth Rates: The Case of Chungcheong Provinces." *Labor Policy Research* 18, no. 2: 61–98. <https://doi.org/10.22914/jlp.2018.18.2.003>.
- Knill, C. 2005. "Introduction: Cross-National Policy Convergence: Concepts, Approaches and Explanatory Factors." *Journal of European Public Policy* 12, no. 5: 764–774. <https://doi.org/10.1080/13501760500161332>.
- Korea Housing and Urban Fund. 2025. *Operational Guidelines for the Home Purchase Stepping Loan Program*. Korea Housing and Urban Fund.
- Korea Housing Finance Corporation (HF). n.d. "디딤돌대출상품소개." [Rental guide for stepping loan]. https://hf.go.kr/ko/sub01/sub01_02_01.do#.
- Korean Population Association. 2020. *Causes of Low Fertility in Korea and Future Directions of Population Policy*. Korean Population Association.
- Kramarics, S. 2025. "The Marketization of Family Planning: The Role of Banks as Policy Actors in Hungarian Reproductive Policies." *Intersections East European Journal of Society and Politics*, 11, no. 2: 26–45. <https://doi.org/10.17356/ieejsp.v11i2.1368>.
- KSH [Hungarian Central Statistical Office]. 2025. A családtámogatások kiadásai [Expenditure on family benefits]. https://www.ksh.hu/stadat_files/szo/hu/szo0005.html.
- Lee, H.-T. 1985. "Malthus and His Population Theory: A Re-Appraisal." *Journal of The Population Association of Korea* 8, no. 2: 30–45. <https://scholar.kyobobook.co.kr/article/detail/4040010567610>.
- Lee, K.-S., and T.-il Kim. 1988. "Review of Population Policy in Korea." *Journal of The Population of Korea* 11, no. 1: 32–49. <https://scholar.kyobobook.co.kr/article/detail/4040010814090>.
- Lee, K., and A. Zaidi. 2020. "How Policy Configurations Matter: A Critical Look Into Pro-Natal Policy in South Korea Based on a Gender and Family Framework." *International Journal of Sociology & Social Policy* 40, no. 7/8: 589–606. <https://doi.org/10.1108/IJSSP-12-2019-0260>.
- Lee, R., and A. Mason. 2013. *Population Aging and the Generational Economy: A Global Perspective*. Edward Elgar Publishing.
- Lee, S. Y. 2021. "A Consideration of Population Paradigms and Policies: Based on the Approach of Postmodernism." *Journal of Population Studies* 44, no. 1: 47–82. <https://doi.org/10.31693/kjps.2021.03.44.1.47>.
- Mahoney, J., and K. Thelen. 2010. "A Theory of Gradual Institutional Change." In *Explaining Institutional Change: Ambiguity, Agency, and Power*, edited by J. Mahoney and K. Thelen, 1–10. Cambridge University Press.
- McDonald, P. 2006. "Low Fertility and the State: The Efficacy of Policy." *Population and Development Review* 32, no. 3: 485–510. <https://doi.org/10.1111/j.1728-4457.2006.00134.x>.
- Ministry of Employment and Labor. 2023. *Guidebook for Work-Family Balance Policies for Employers and HR Personnel*. Ministry of Employment and Labor.
- Ministry of Health and Welfare (MOHW). 2022. *The Fourth Basic Plan for Low Fertility and Aging Society (2021–2025)*. Ministry of Health and Welfare.
- National Assembly Budget Office. 2023. *Medium and Longer Term Fiscal Issue Analysis: Population Crisis Responses*. National Assembly Budget Office.

National Assembly Budget Office. 2024. *Fiscal Sustainability Report on Population Aging in Korea*. National Assembly Budget Office.

OECD. 2022. *Reducing the Gender Employment Gap in Hungary, Gender Equality at Work*. OECD Publishing. <https://doi.org/10.1787/fe5bc945-en>.

OECD. 2024a. "Gender Wage Gap." [Dataset]. OECD Data Explorer. <https://www.oecd.org/en/data/indicators/gender-wage-gap.html>.

OECD. 2024b. "Korea's Unborn Future: Lessons From OECD Experience." Working Paper No. 1824. <https://doi.org/10.1787/75aa749c-en>.

OECD. 2024c. "Time Spent in Paid and Unpaid Work." [Dataset]. OECD Data Explorer. https://stats.oecd.org/viewhtml.aspx?datasetcode=TIME_USE&lang=en.

OECD. 2025. Family Benefits in Hungary. OECD Family Database.

Orbán, V. 2025. Prime Minister's Address on Family Policy. [Government statement].

Palkó, I. 2024. A gazdagok kiváltsága lett a lakáshitel?-Egész Európában párját ritkítja, ahogy a magyarok viselkednek. <https://www.portfolio.hu/bank/20240613/a-gazdagok-kivaltsaga-lett-a-lakashitel-egesz-europaban-parjat-ritkítja-ahogy-a-magyarok-viselkednek-692049>.

Park, E. H. 2020. "Ultra-Low Fertility and Policy Response in South Korea: Lessons From the Case of Japan." *Ageing International* 45, no. 2: 191–205. <https://doi.org/10.1007/s12126-020-09365-y>.

Park, J.-W., and C.-K. Yeo. 2021. "A Study on the Economic Impact and Countermeasures to the Demographic Cliff Due to the Low Birthrate and Aging Population: Focusing on Foreign Case Studies." *Journal of Corporation and Innovation* 44, no. 4: 261–280. <https://doi.org/10.22778/jci.2021.44.4.261>.

Pongrácz, T. 2013. "A Ratkó-korszak [The Ratkó era]." *KorFa* 13. KSH Népeségstudományi Kutatóintézet [KSH Demographic Research Institute]. <https://demografia.hu/kiadvanyokonline/index.php/korfa/article/view/727/191>.

Roh, B. R., and K. E. Yang. 2019. "Text Mining Analysis of South Korea's Birth-Rate Decline Issue in Newspaper Articles - Transition Patterns over 18 Years." *Korean Journal of Social Welfare* 71, no. 4: 154–176. <https://doi.org/10.20970/kasw.2019.71.4.006>.

Rose, R. 1991. "What is lesson-drawing?" *Journal of Public Policy* 11, no. 1: 3–30. <https://doi.org/10.1017/s0143814x00004918>.

Sobotka, T., A. Matysiak, and Z. Brzozowska. 2020. "Policy Responses to Low Fertility: How Effective Are They?" UNFPA Working Paper No. 1.

Vida, B. 2019. "New Waves of Anti-Sexual and Reproductive Health and Rights Strategies in the European Union: The Anti-Gender Discourse in Hungary." *Sexual and reproductive health matters* 27, no. 2: 13–16. <https://doi.org/10.1080/26410397.2019.1610281>.

Yang, Y., H. Hwang, and J. Pareliussen. 2024. "Korea's Unborn Future: Lessons From OECD Experience." OECD Economics Department Working Paper No. 1824. <https://doi.org/10.1787/75aa749c-en>