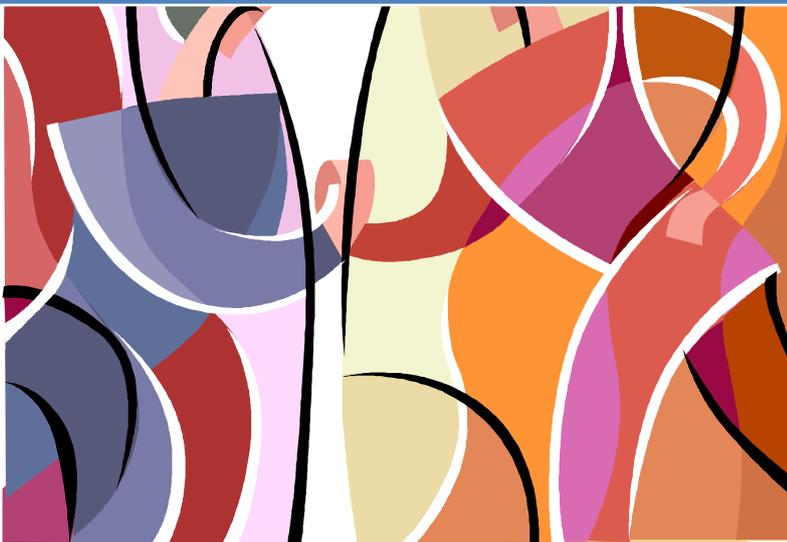


[2013]

The state of Hungarian Women in 2013

Study on the Social Benefits,
Legal Aid and Health Condition Concerning
Vulnerable Groups of Women



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Introduction – General Concerns

According to women's organizations in Hungary, the effective advancement of gender equality and the establishment of its legal, political and institutional framework have been unsuccessful since 1989. Issues of discrimination against women have never been taken sufficiently into consideration up to the present, neither on the level of everyday political practice nor supported by any political agenda.

The CEDAW Committee (Committee on the Elimination of Discrimination against Women) commissioned their current Periodic Report of Hungary in March this year and published its report with more than 60 recommendations.¹ The Committee found several areas of gender issues problematic, where there is no progress observed, what is more alarming there is a regressive approach by the current government, in power since 2010. The government dismantled the national institutional system of gender equality by redistributing responsibility for them between different non-connected ministries. Any statements on family policy issued by the current government makes it clear that they consider women mainly but not exclusively as home makers and potential mothers.²

The Committee suggested to the government, among other things, to help women's employment (especially women with small children), to discontinue such political decisions which affect women's sexual and reproduction rights negatively and to include the issue of gender equality into the education policy. It also recommended that the government should change the insufficient legislation regarding domestic violence, human trafficking and prostitution, to harmonize the legislation with the international norms, and that the government should provide an effective and long term protection and rehabilitation for the victims of domestic violence, human trafficking and prostitution (for example there are not enough shelters available for the victims). It also raised the issue of introducing legislation on women in the different area of the political arena³ The Committee underlined that the Hungarian state still not give due attention to the women of disadvantaged groups, and still there is not any successful program designed specifically for those women who face multiple discrimination, such as Romany women, women living in rural areas, women with disabilities, women living in poverty or migrant women.⁴

The study introduces the following main three areas: The first chapter introduces (1) the system of social benefits (especially child care benefits) provided by the state and local authorities and the

¹ It is highly recommended to consult the reports and recommendations of the Committee, which gives us an overview about discrimination against women in Hungary. Also, included is an alternative report in the "Recommended readings" section made by The Hungarian Women's Lobby and the European Roma Rights Centre.

² <http://nokert.hu/index.php/tudatossagnoeveles/munka-jog/1157--magyarorszag-az-ensz-njogi-bizottsaga-eltt-felids-beszamolasi-koetelezettseg-toebb-mint-60-ajanlas>

³ Only 9% of the MP-s are women in the current Parliament

⁴ <http://nokert.hu/index.php/tudatossagnoeveles/munka-jog/1157--magyarorszag-az-ensz-njogi-bizottsaga-eltt-felids-beszamolasi-koetelezettseg-toebb-mint-60-ajanlas>

system of day care institution for children. (2) The second chapter gives a short overview evaluation on the (mostly insufficient) legislation relating to specific kinds of violence against women. (3) The third chapter deals with the health care system of Hungary with a short part on the health condition of Roma population and the discrimination they face in health care.

I. The System of Social Benefits

The system of the social benefits provided by the Hungarian state is very varied. Families are entitled to many benefits, which they can apply for various reasons.⁵ However, the high number of different benefits has no direct bearing on the financial security offered by the benefits. Number does not equate with value, and many small benefits do not make a decent living. Most of the benefits are automatically available after child birth (childcare benefits), mostly women have to resort to these benefits. An insignificant proportion of the Hungarian men receive any kind of child care benefits, which otherwise would encourage men to stay at home with a child for a longer period.

Besides the childcare benefits, further benefits can be applied too, with the aim of supporting living conditions, such as Housing Subsidies and Energy-supplement Support for low-income households. There are also various Disability Grants to help families with disabled children. In this study the system of family benefits are introduced in detail.

The systems of social benefits are supported with a conservative family policy in the background. A rather conservative view about women and men's role in society, together with the practice of the child care system unambiguously encouraging women to leave the world of paid work for a longer time when they give birth to a child. Where women have one child, she may leave the labor market for 2-3 years, in the case of more children the time spent at home could be longer. For example if a woman has 4 children and the youngest one starts the kindergarten at the age of 3, she is able to stay at home 8-10 years without returning to paid work and is still entitled to certain social benefits.

The roots of the current social system go back to the socialist era, when the workplace was protected for women, so that they could return to their previous workplaces after maternal leave. The employment level of women during the socialist era was one of the highest in the region and a well-developed system of child care existed. However, the household and children remained women's responsibility. According to sociological research there is a small but positive change at the individual level towards gender roles, but still not on the level of society in general and governmental policy.⁶

⁵ For the benefits we used the following: Childrearing and raising a child. Central Statistical Office. 2011. April, <http://www.szmm.gov.hu/main.php?folderID=16414>, http://www.allamkincstar.gov.hu/maganszemelyek/csaladtamogatasi_ellatasok

⁶ In: Judit Takács. If we would not have the washing machine, we would have divorced long ago. Men and Women job sharing in the household. IN: *Esély* 2008/6. 19(6):51-73., accessed: <http://www.policy.hu/takacs/pdf-lib/esely200806-takacs.pdf>,

What we can see in the post socialist countries is a general tendency of a re-familization policy. The family policy of these countries ensure a long, but low rate paid maternal and parental benefits, whilst the system don't encourage women with small children to return to the labor market because of the lack of enough part time or flexible work and, once again, the undeveloped system of child care, especially for children under 2 years old. The conservative family policy supports separate gender roles and a male breadwinner model. In consequence of this family policy the post socialist governments force women to leave the labor market to care for children, especially women with small children. Also, leaving the labor market for a relatively long period weakens women's labor market position. Besides, family policies constitute a major cause in the fertility rate decline also..⁷

State Benefits

On the one hand the system of the social benefits is a socialist heritage, on the other hand there was a reform of the benefits during the first years of the transformation. There are two basic types of *family benefit*:, one is insurance based, the other one is not insurance based. Theoretically most of the benefits are available for fathers as well.

1.1. Universal benefits with automatic entitlement (Family Allowance, Child Home Care Allowance, Child Raising Support, and Birth Grant)

(1) Family Allowance: All the residents with children in Hungary are entitled to get the family allowance, which is paid monthly. The level of benefit is based on the number of children (one, two, three, ..., twins), the type of the family (two parents or single parent) and the health condition of the children. The last time the amount of the allowance was changed was in 2008, since it remains the same. If there is one child in the family the amount of the family allowance is 12 000 HUF⁸, in case of two children it is 13 700 HUF. per child (for further details see the Table below). The family allowance is paid from birth to the age of 18 of the children (usually when a child finishes compulsory education), or till the age of 23 of children in some special cases.

(2) Child Home Care Allowance – GYES: It is a tax financed allowance, which covers all residents of Hungary. It is paid for mothers who care for their children in the household aged under 3 or disabled children aged under 10. It is available for fathers and grandparents as well who care for their children (instead of the mother) aged 1-3. In case of the twins the allowance is paid when the children reach the compulsory school age (6 or 7 year). The parent cannot work (or study) while the child is under 1 year, after a child reaches the 1 year, the parent can work in part time (maximum 30 hours a week), or a full time activity without time restriction if work is undertaken at home (e.g. tele work). The

⁷ In: Saxonberg, S. – Sirovatka, T. (2006): Failing Family Policy in Post-Communist Central Europe. In: Journal of Comparative Policy Analysis, Vol. 8, No. 2, 185 – 202.

⁸ As we can see it is not a too generous amount of money.

amount of this allowance is 28 000 HUF irrespective of the number of children in the family.⁹ After paying tax, the net amount is 25 000 HUF. The amount is always equal to the minimum old-age pension. In case of twins the amount is multiplied. This benefit does not follow inflation, therefore it is worth less and less each year.

(3) Child Raising Support - GYET: this is an allowance for parents who raise three or more children in their own household. It is available after the youngest children reaches the age of 3 and the eldest child is still under 18 years of age. The amount and all the other conditions are the same as for the case of the Child Home Care Allowance.

(4) Birth Grant: this is single payment (is not subjected to taxation) after a woman gives birth. It can be claimed by all Hungarians and residents living in the country if they completed at least four parental medical examinations (in case of premature birth one is enough). The amount of the grant is 225% of the minimum old-age pension (it is higher in case of twins), in 2013 it was: 64 125 HUF (twins: 85 000 HUF).

1.2. Maternity leave benefits, insurance based supports (TGYaS, GYED):

(5) Maternity Benefit – TGYaS: those women are entitled for this benefit, who have been insured for 365 days over a 2 year period before they give birth. The allowance covers the period of the maternity leave, it is available for 24 weeks, the amount of the benefit is the 70% of the women's annual average income, with a ceiling which is always 70 % of double the minimum wage, (which worked out at 137 200 HUF per month in 2013).

(6) Child Care Fee – GYED: When the period of TGYaS is over, parents can apply for the child care fee, the amount and the condition of the application is the same as in the case of TGYaS. When the period of GYED is over, women often apply for GYES, which allows them to remain at home with their children for one more year.

Because the Maternity Benefit and Child Care Fee is insurance based, the amount of these two can increase according to inflation.

⁹ This benefit is equivalent to the "Minimal Elderly Pension", and in the case of twins this sum is multiplied by the number of the twins. Source:

http://www.allamkincstar.gov.hu/maganszemelyek/csaladtamogatasi_ellatasok_osszegei#

Table 1. State supported benefits

Title	Amount per month and period of the benefits
1 Swiss franc = 236.450 HUF ¹⁰	
Family allowance, one child	12 200 HUF, 0-18 years of the child
Family allowance, one child, single parent	13 700 HUF, 0-18 years of the child
Family allowance, two children in the family (per child)	13 000 HUF, 0-18 years of the child
Family allowance, two children in the family, single parent (per child)	14 800 HUF, 0-18 years of the child
Family allowance, three or more children in the family, (per child)	16 000 HUF, 0-18 years of the child
Family allowance, three or more children in the family, single parent (per child)	17 000 HUF, 0-18 years of the child
Family allowance, disabled child in the family	23 300 HUF, 0-18 years of the child 20 300 HUF, 18-23 years of the child
Family allowance, disabled child in the family, single parent	25 900 HUF, 0-18 years of the child 20 300 HUF, 18-23 years of the child
Child Home Care Allowance - GYES	net 25 000 HUF, 0-3 years of the child
Child Raising Support - GYET	net 25 000 HUF, 3-8 years of the youngest child
Birth Grant	64 124 HUF, single payment
Maternity Benefit – TGYaS	70% of the annual average income with a ceiling of 137 200 HUF per month
Child Care Fee – GYED	70% of the annual average income with a ceiling of 137 200 HUF per month
Further details for comparison	
Minimum wage	net 79 870 HUF, two children in the family
Gross wage, full time employment, per month, (first terminal 2013 ¹¹)	226 700 HUF, net 148 500 HUF, without Family allowance

¹⁰ Exchange rate at 2013. June 17 source:

<http://www.xe.com/currencyconverter/convert/?Amount=1&From=CHF&To=HUF>

¹¹ source: <http://www.ksh.hu/docs/hun/xftp/gyor/let/let21304.pdf>

average monthly cost of utilities	55 % of families spend 25-50% of their income to pay the cost of utilities, which is between 420 000 – 600 000 HUF per year, 27 % of families spend less than 420 000 HUF per year. ¹²
The price of 1 kg bread	250-400 HUF
A shopping for one week (including fruit, vegetables and meat), for a family with two parents and two children	approximately minimum 20 000 - 30 000 HUF (of course families living in deep poverty have smaller budget for buying the most essentials food)

Child Protection and its Institutional Background

Most of the social benefits concentrate on child protection, which give support depending on the number of children, the financial and other circumstances of the families. There are several sub levels of the system of child protection in Hungary, which is operated by the state and the local authorities together. The law defines the obligations which settlements have to fulfill in order to maintain available child protection institutions (for example settlements with more than 10 000 inhabitants have the obligation to maintain a day care service for children under the age of 3). The child protection system includes benefits in cash and such services which tend to help children to be able to remain with the family in a crisis situation, in order to reduce and/or eliminate children's vulnerability. In case where a child cannot be raised in his/her own family, the child care system offers one of two possibilities: accommodation in a children's home or at foster parents.

Benefits in cash

The local governments of the settlements offer different benefits in cash to those families in need, where the monthly income per capita is not more than a maximum amount of money, which is 18 500 HUF in 2013. The benefits are paid monthly and are offered for families who live in poverty, or are in a crisis situation temporarily. Thus, these kind of benefits support to maintain a minimum level of life support, to start a school year or to pay for meals in daycare institution. The following benefits¹³ exist: Regular child protection allowance, Additional child protection support, Special child protection support, Kindergarten grant¹⁴ (10 000 HUF twice a year), Support for meals and textbooks.

¹² The data came from the OTP bank "Homemaking saving" special program in 2012

¹³ <http://www.kormany.hu/hu/gyik/rendszeres-gyermekvedelmi-kedvezmeny-kiegészito-gyermekvedelmi-tamogatas>

¹⁴ This is a real case, which happened to a mother of three who was declined of the benefit because the municipality only gives this to mothers who have no education at all. The mother had an MA degree.

The number of children received support from local governments are increasing. The amount of the benefits fall between 5-7 000 HUF.

The Basic Child Care System

All local authorities, depending on how many inhabitants live in the settlement, have the obligation to operate the basic child care institutions. There are two types of benefit, one is the *child welfare services* for families in a crisis situation and the other one is provision of the *daily institutions* for caring for small children under the age of 6.

(1)The ultimate purpose of the *child/family welfare services* is to support families, when they are in a crisis situation, hence to secure the children's physical, mental and emotional development in their own household, to prevent and treat children's vulnerability, and to simply help to manage conflicts in a family. Therefore these institutions have various tasks to do in a wide scale from giving basic information to providing the possibilities of different therapies or just simply organizing activities for children. All settlements have to operate family welfare services, independently of the number of the inhabitants, although it is typical that in the smaller settlements the services are managed only by one social worker. According to the law settlements of more than 400 000 inhabitants have the obligation to operate a child welfare service, where various services and social work have to be available.

(2)The major forms of child care for children under 3 are the *public nursery* and *family child care* supports in Hungary, besides these there are *home child care* and other alternative forms of child care. Only the public nurseries and family child care are worth mentioning here because of their number and availability, although the because of the low number of public nurseries and the large regional variations (there many more nurseries in bigger settlements) there are a significant problems resulting.

The reduction of the number of the public nurseries started in the 1990s, partly because of the reduction of the number of children and partly because of the generally poorer financial situation of the country after the transition. Many of the nurseries ceased to exist because they were maintained by large and then defunct state companies. The number of the nurseries started to increase again in 2004¹⁵, but there are still less than there were before 1990. Most of the nurseries operate in the larger settlements, due to the fact that according to the law only local authorities with 10 000 or more inhabitants have the obligation to maintain a day care service. These obligations are still not fulfilled entirely by all the settlements which have more than 10 000 inhabitants. Relatively fewer nurseries are to be found in North Hungary and the South Trans-Danubian Region compared to Hungary as a whole.

¹⁵ http://www.ksh.hu/docs/hun/xstadat/xstadat_hosszu/h_fsp001.html

As we can see, the number of nurseries is insufficient; therefore it cannot fulfill all the demands of parents. Parents often face serious difficulties in ensuring the enrollment of their children. Overall, there are places in the nurseries only for 10 % of children aged under 3.¹⁶

A child can be enrolled from the date when it reaches six months old and can stay in nursery until three years of age. However, it is not typical in Hungary that parents enroll their child to a nursery when they are under the age of 2. Why is it this? Maybe, because the parent is entitled to receive GYED until the child reaches the age of 2, after which parents can apply for GYES, which is a much smaller benefit. Besides, it is widely believed in Hungary that children should stay with their mother at home until they reach the age of 3, although this is not verified by any scientific research. We can assume this as a post socialist heritage: the parental leave system which support 2-3 years of leave was introduced in 1968, this was the first time when a working mother had the opportunity to stay at home with her children without losing her job and returning to her previous workplace while getting an state supported allowance.¹⁷

Children are enrolled into kindergartens when they are 3 years old, and they stay there until they are 6 years old, in case of a child not being ready to attend elementary school at this age, he/she can stay in the kindergarten one more year. It is required by law that parents have to enroll their child to kindergarten when they reach the age of 5, because the preparation for the schools starts in the last year of kindergarten. From 2014 this is going to change, the current government already enacted that that parents have the obligation to enroll their child at the age of 3, although the number of kindergartens and the places in kindergartens don't seem to be enough to be able to fulfill this requirement. Most kindergartens and nurseries are maintained by the local authorities.

It is already mentioned, that it is difficult to ensure the enrollment of a child, especially to the nurseries, but this in fact, also applies to kindergartens. There is waiting list for example for children who are enrolled, but there is no guaranteed place for them. Besides, the institutions are already overcrowded; the number of children is higher than the number of places. So, who is given priority place in nurseries? There is a central regulation, according to which, nurseries should provide services to those parents who work, who study or have an ill child, and are therefore unable to look after their nursery age children. Local regulations take account of the social disadvantages or the number of children (more than 3 children in a family). But there is not any official system which would monitor the selection process; thus a "back door" influence could count as well. Many kindergartens lack enough places to accommodate all applicants. Parents face many unwritten laws when they enroll their child. One common custom, for example, is that parents who have other children under the age of 3 are asked nicely to take the older child home right after lunch if there are not enough places where the kindergarden children can have an afternoon nap. This is used as a solution for the problem of overcrowding.

¹⁶ <http://demografia.hu/letoltes/kiadvanyok/Korfak/korfa-2012-1.pdf>

¹⁷ in: Blaskó Zsuzsa. Does early maternal employment affect non-cognitive children outcomes? ' A literature review, <http://econ.core.hu/file/download/bwp/BWP0805.pdf>

There are also private nurseries and kindergartens in Hungary, but the number of these is limited compared with the number of public run institutions. One special form of private nursery is the family child care system. These are non-profit institutions, which are established with state support, but parents still have to pay a fee. The monthly cost of a private nursery paid by the parents is approximately 60-80 000 Ft. The family child care facilities are the most common of the private institutions. The family child care institutions are typically opened in those settlements where there aren't any public nursery and/or kindergarten places. Children under 14 can be enrolled into a family child care facility.

The costs of the public nurseries are covered by the state and the local authorities. The parents pay for the meal (it is the same in kindergartens also), which is between 4-7000 HUF depending how many days the child spend in the institution. Low-income parents have the possibility to receive a discount or a fully free service. A new legislation was accepted in 2012 December, which allows local authorities to charge parents for the services of the nurseries (care fee). Most of the local authorities decided to charge for the services from 2013 January (there are settlements where the local government decided not ask for this fee, for example in the town of Gödöllő). This is a means tested fee, so not all the parents have to pay it. The fee is between 2 000 and 30 000 Ft, so there is a broad scale of charging. The system of this care fee have some deficiencies, for example a family with three children is free of the charge, therefore it can happen that a family with two children is obliged to pay a fee even if the income of this family is lower than the income of the family with three children.¹⁸

The nurseries generally have difficult financial circumstances, therefore the parents are asked to pay extra money every month to contribute to maintenance of the institute. This is a small amount of money (called group money), it can be between 500-1500 Ft, and it is always spent on the children (for example this money is used to buy Christmas presents for them). In most of the nurseries parents are also asked to bring fruit, this is also a very common custom to support the nursery. Besides, the parents are encouraged to participate voluntarily to help with more menial jobs around the nursery. Donations (for example toys) are also always welcomed.¹⁹

The costs of a private nursery for one child is approximately 60-80 000 Ft. Paid monthly by the parents. These private institutions are much more expensive than the public ones, although they also charge for the services (see the payment for the meal and care fee). 80 000 Ft is very close to the net minimum wage. In case of one of the parents earning only a minimum wage (and this is frequently the women), and the child is under 3 years old, it is not worth to enroll him/her into a private nursery if there is no place in a public nursery.

Grandparents (especially grandmothers) take on a big role in child care in Hungary. It is a common view that grandparents have a kind of obligation to help raise their grandchildren. A grandparent can receive a childcare benefit instead of the parents as well as, and besides a new rule was introduced

¹⁸ Personal experience of the author: In a Budapest nursery the mother had to remove her 2 years old child from the nursery because she earned less than the fee required.

¹⁹ <http://demografia.hu/letoltes/kiadvanyok/Korfak/korfa-2012-1.pdf>

by the current government in 2012, that those women who have 40 years of employment can take an early retirement independent their age. In our opinion this rule encourages older women to return to the world of unpaid work by helping to raise their grandchildren. This is again an example that the government supports a traditional female role.

On the whole, we can conclude that the relation of the child care benefits and the attitude of the state that it results in a family policy which doesn't help women's reintegration into the world of paid work. In addition the difficulties women face when they would like to return to work (for example there isn't enough flexible work, part time work), there aren't enough daily child care institutions for children aged under 3. The state doesn't support child care under the age of 3.²⁰

Temporary Child Care

These services provide temporary care for children, whose parents are not able to take care of them for a certain time, for example are unable provide a residence or a healthy way of living. There are two kinds of institution, one is the *Temporary home for children*, and the other one is the Temporary home for families. These are not designed specifically for women in an emergency situation, but this is a place where women can turn in a crisis, although these are open places.

The legal basis of the temporary houses system is in the Act of Child Protection, which obliges the local authorities since 2005 to operate a temporary home for children in the case that there are more than 20 000 inhabitants, and to operate a temporary house for families in the case that there are more than 30 000 inhabitants of the settlement. In settlements which have less than 20 000 inhabitants foster parents receive children in need, but there are only a few of these.

²⁰ <http://demografia.hu/letoltes/kiadvanyok/Korfak/korfa-2012-1.pdf>

II. Legislation Concerning the Treatment of Violence against Women

According to legal aid services of women's rights NGOs, the legislation of violence against women is still not on a par with the requirements of the international norms. State supported services providing rehabilitation for victims of violence hardly exist. There are no special institutions in Hungary right now, which could provide an effective protection and rehabilitation for the victims of domestic violence, sexual crimes, prostitution and human trafficking.

The Introduction of a New Criminal Offence for Domestic Violence

One of the most relevant legal and also political questions in Hungary in recent times, which concerns thousands of women²¹, is the insufficient legal form of how domestic violence is treated. The legal issues of domestic violence have been discussed since 1989. It is only after 20 years that an independent statutory definition of the offence of domestic violence was created in the system of criminal law. Up to the present, domestic violence wasn't defined as a specific crime in the Criminal Code of Hungary; instead the relevant part of the Criminal Code was referred in case of domestic violence.²² According to women's rights NGOs the implementation of the new legislation regarding domestic violence is a good start compared with the previous situation, but there are still deficiencies in the new legislation. In order to adapt the new law, training would be necessary to be provided for law enforcement staff, because in many cases the victims are failed to be recognized as a domestic violence victims, due to an inadequate approach in the course of the work of the police and prosecutor's offices.²³

However, it is a step forward that the new law sets down the offence under the condition of living together, but unfortunately not the under the circumstances of former partners. The law still doesn't recognize those relationships where the victims and the abuser are not partners or the partnership was not ever realized. Mental and economic violence are also left out from the new law. Up until recently, the accusation of a case of domestic violence had to be made by a private person. According to legal aid experts it is also a positive step forward that the practice of private prosecution is discontinued, which means domestic violence is still prosecuted by the law enforcement agencies even in cases, for example, of a terrified victim withdrawing charges against the abuser.²⁴

²¹ Violence in the partnership or in the family is the leading death cause for women between the age of 15-44, and every fifth woman is endangered in Hungary. Source: <http://patent.org.hu/hirek/n%C5%91i-jogok/hirek/joger%C5%91s-itelet-damu-roland-ugyeben>

²² http://patent.org.hu/Rendszerbe_zarva.pdf

²³ http://nol.hu/belfold/20130614-szexista_tarsadalom

²⁴ <http://nokert.hu/index.php/tudatossagnoeveles/kuezdelem-az-erszak-ellen/1176-dr-spronz-julia-a-parkapcsolati-erszakot-szankcionalo-toervenyszervezetrl>

Legal aid services of women NGO's and women's right NGO's²⁵ in Hungary have worked hard over the past years to raise awareness of the seriousness of the problem of domestic violence and to increase pressure on the political decision makers that they should take effective action against domestic violence. There was a politically very active period by women NGO'S prior to the introduction of the new legislation.²⁶ Women NGO's lobbied political parties hard until Parliament placed the matter of domestic violence on the agenda.

The concerted action started with a signature collection campaign organized by an individual to oblige Parliament to deal with the issue of domestic violence. Parliament did not respond to the demand of more than 100 000 civic signatures, but after several demonstration were held with the cooperation of women NGO's, the government bowed „to the will of the ladies” (as quoted by an MP, Antal Rogán, FIDESZ party leader). Because of the pressure of the demonstration and the public indignation caused by a strongly chauvinist claim of by an MP during a parliamentary debate, Parliament changed their standpoint and began to discuss the issue of domestic violence as an independent criminal offence. An extensive consultation began under the aegis of the Ministry of Human Resources, a Codification Working Group was set up under the name of the Civic Working Group, several women NGO's were invited take part in this group.²⁷

The women NGO's which were invited to the Civic Working Group have meanwhile, because according to their experiences their competency was not taken seriously. They were not given the opportunity to put their knowledge across, and they were often left out from discussions. Therefore after a while they declared themselves not able to take responsibility as professionals for the work of the Working Group, because in their opinion the protection and the safety of abused women and children did not seem to be taken into account in the professional materials.²⁸

The Ministry of Human Resources published a statement in 2103 January that the draft legislation is ready, even though there wasn't any common consent on the definition of violence against women (for example: violence among family members, violence among partners, domestic violence). At this point the negotiations stalled, and more importantly, they did not develop into a legislative proposal which would introduce the domestic violence as an independent crime.²⁹

The public was informed for the last time on the legislative proposal in April 2013 at a public meeting of the Sub-Committee on Gender Equality of the Committee on Human Rights, Minorities and

²⁵ for example: NANE Association, PATENT Association, MONA Association, Hungarian Women's Lobby

²⁶ It seems to be reasonable to say a few words about the birth of this law in order to show how hard is to communicate with the government by NGOs.

²⁷ Also participated: Ministry of Interior Affairs, Ministry of Jurisdiction, National Office of Judges, Public Prosecutors Office, Office of the Commissioner for Fundamental Rights, National Police Headquarters Office

²⁸ <http://patent.org.hu/hirek/n%C5%91i-jogok/hirek/kilepes-a-csaladon-beluli-er%C5%91szak-onallo-buntet%C5%91tenyallaskenti-megalkotasara-letrejott-civil-munkacsoportbol>

²⁹ <http://www.nokjoga.hu/book/export/html/306>, <http://patent.org.hu/hirek/n%C5%91i-jogok/hirek/joger%C5%91s-itelet-damu-roland-ugyeben>

Religious Affairs. The main topic of the meeting was the legislative proposal on the issue of domestic violence.³⁰ The women NGO's taking part in the meeting concluded that the new law would not serve the interests of the victims and would not correspond with international precedents.³¹

Finally the new law on domestic violence was adopted by Parliament at the beginning of June 2013. The adaptation of the law was 'slightly accelerated' by a scandal. It became clear that an MP, a member of the governing party (FIDESZ) abused his partner. The incident had huge media coverage and soon it became clear that domestic violence was indeed committed. It was typical, that the leading politicians of FIDESZ declared the whole issue to be private.³² All in all, given that 92% of MPs are male, and such a member is able to vote in Parliament who has just been accused of domestic violence, the adaptation of the new law can be seen to be a step forward.

Furthermore, according to the legal experts on domestic violence and women NGOs, police investigations and juridical procedures do not have such a practice or tool to provide efficient safety for the victims, to end and prevent further violence and to have their proper right to justice served. Let us examine some of the more important examples.

The police have a regulation which dictates when officers can intervene in case they are called, but the points of the regulation are inefficient for defending the victims. Many times the attitude of the police officers towards the victims and their knowledge relating to domestic violence are not adequate and up to date. Several cases have been reported by victims that the police officers advised against initiating an accusation against the abuser, because only those are condemned who commit a serious crime, or victims are often told, that they have a private problem. Therefore, in the majority of instances the recording of a case and an accusation did not happen.

Most of the elements of the witness protection program do not work for the immediate and long term interest of the victims.³³ The legislation on a so-called preventive restraining order³⁴ is also not able to provide an effective aid and a long term protection for victims. For the preventive restraining measure to be enforced an accusation has to have happened, so the victim personally has to initiate an active action first, even if she is not in a mental or physical condition to do so. The preventive restraining order can be issued by the police only for 72 hours and extended by the court for a

³⁰ <http://nokert.hu/index.php/tudatossagnoeveles/kuezdelem-az-erszak-ellen/1173-kirakat-es-kabare-a-mai-gniq-eselygyenlseg-albizottsagi-ueles>

³¹ <http://nokert.hu/index.php/tudatossagnoeveles/kuezdelem-az-erszak-ellen/1173-kirakat-es-kabare-a-mai-gniq-eselygyenlseg-albizottsagi-ueles>

³² http://nol.hu/belfold/20130614-szexista_tarsadalom

³³ http://mona-alapitvany.hu/wp-content/uploads/2012/12/KERET_Modsztani_ajanlasok.pdf

³⁴ The only option the victim might take is to ask for a preventive restraining order against the assaulter. This restraint is regulated by the paragraph: Be 138/A-138/B.

maximum of 30 days. It cannot be extended again. The inadequate attitude towards the victims which endanger their safety applies for the routine of litigations too.³⁵

It is always the victim who has to prove that violence occurred, therefore the victims face discrimination in this manner as well, because it is always the trustworthiness of the victims which is investigated.³⁶ More importantly, the courts tend to fail to recognize the incidence of violence in forced visitation cases, which occurs quite frequently in cases of children with an abusive parent. When women do not allow their children to visit an abusive father, they face fines and prison (for the offence called endangering the child), if they are not able to pay relevant fines.³⁷

There are only a few crisis intervention centers³⁸ where victims are able to go in cases of emergency, which were established by the previous government, but the current government reduced the number of these shelters by half. According to the Alternative Report submitted to the CEDAW Committee by the Hungarian Women's Lobby and the European Roma Rights Centre, there are 902 places in Hungary. Most of the shelters are operated by social workers, and functioning as the temporary homes for families, which are open places to the public, not because they have services opened to the public. Hence, these centers are not real or specific services for women victims and the safety of the victims are not the priority purpose of these centers.³⁹

Sexual Violence and Sexual Harassment

The law interprets sexual violence (rape) as a moral crime, a 'crime committed against sexual morality' and not against a victim (against the sexual self-determination of victims).⁴⁰ The criminal procedures, and the inadequate attitudes towards the victims by the investigators and court are share similarities with cases of domestic violence.⁴¹

The statistical figures show a relatively low proportion of the charges in cases of rape compared with other European countries. According to experts the reason for the low number of charges is the

³⁵ There are many situations during the process, when the victim cannot evade direct contact with the assaulter. Also, it is quite common that the victims did not receive a notice when the convicted assaulter is released from prison.

³⁶ http://patent.org.hu/Rendszerbe_zarva.pdf

³⁷ http://www2.ohchr.org/english/bodies/cedaw/docs/ngos/HWLandERRC_Hungary_ForTheSession_Hungary_CEDAW54.pdf

³⁸ http://patent.org.hu/Rendszerbe_zarva.pdf

³⁹ http://www2.ohchr.org/english/bodies/cedaw/docs/ngos/HWLandERRC_Hungary_ForTheSession_Hungary_CEDAW54.pdf

⁴⁰ http://mona-alapitvany.hu/wp-content/uploads/2012/12/KERET_Modszertani_ajanlasok.pdf

⁴¹ http://www2.ohchr.org/english/bodies/cedaw/docs/ngos/HWLandERRC_Hungary_ForTheSession_Hungary_CEDAW54.pdf

inadequate legal system and judicial procedures, which do not support the interest and safety of victims in an acceptable way.⁴²

During the procedures victims meet with prejudiced and incompetent experts and officials, therefore it is common for victims to withdraw the charges against their abuser in case of sexual crimes as well.⁴³

A study of methodological recommendations written by a women's NGO for professionals, who deal with victims of sexual violence, summarizes the main problems concerning the treatment of sexual violence in Hungary. Firstly, there is almost a complete absence of a systematic training programme for professionals dealing with the crime of sexual violence (for good examples, see: the work of NANE, <http://www.nane.hu>). The nature of violence and the effect of sexual violence on victims are not adequately taken into account by the professionals. Secondly, there aren't institutions designed specifically for the rehabilitations of victims of sexual violence. Thirdly, systematic scientific research is absent which would identify relevant data regarding sexual violence (incidence, circumstances, effects). And lastly, there is no material available in schools which would provide useful information for children and teenagers on how to defend against sexual violence or teach what is an equal partnership, gender equality, etc.⁴⁴ Out of their own interest, schools of course can organize programs for their students, as in the case of Gödöllő, where the REGINA Foundation offers educational sessions on the issue of equality in partnerships for the higher grades in two out of the six elementary schools in the town.⁴⁵

Sexual harassment is not a crime according to the Hungarian law. Sexual harassment is referred to in the law on equal treatment.⁴⁶ The Equal Treatment Authority deals with cases of sexual harassment, but according to legal aid service of NGOs promoting women's rights⁴⁷ there are few cases reported to the Authority. Where a victim files a suit for sexual harassment she/he can do it on the basis of harm to personal privacy.⁴⁸

⁴² http://mona-alapitvany.hu/wp-content/uploads/2012/12/KERET_Modszerani_ajanlasok.pdf

⁴³ http://nol.hu/archivum/20130107-megalazo_procedura_var_az_aldozatokra

⁴⁴ http://mona-alapitvany.hu/wp-content/uploads/2012/12/KERET_Modszerani_ajanlasok.pdf

⁴⁵ this is the Stop the Violence program for schools, <http://www.reginakozpont.hu/haz/taxonomy/term/19>

⁴⁶ The name of this paragraph of the law is: 2003. years CXXV. Law for equal treatment and promoting equality : http://www.egyenlobanasmod.hu/data/Ebktv_20130101.pdf

⁴⁷ http://www2.ohchr.org/english/bodies/cedaw/docs/ngos/HWLandERRC_Hungary_ForTheSession_Hungary_CEDAW54.pdf

⁴⁸ <http://www.nokjoga.hu/book/export/html/306>

Prostitution, Human Trafficking

Little research has been carried out so far on prostitution and the clients of prostitutes in Hungary. There is no research which contains relevant data concerning the whole country and the victims of human trafficking. However, there are two studies, which are worth mentioning. (1) A study was written in 2006-07 based on in-depth interviews. Leaders of state institutions and police officers were asked what kind of information and knowledge they have on prostitution and human trafficking. The study made it crystal clear that prostitutes are seen as independent persons who choose freely the „work” of prostitution mainly because of financial reasons or because they are the kind of the person who like to do this „work”. According to this study the disbelief and prejudice of prostitution as a free choice made by women is still very strong.⁴⁹ (2) The other study entitled 'Breaking the Silence: Trafficking in Romany Communities' was written in 2011 on Romany women prostitutes (it is available on-line; the link to this study is in the section of 'Further Readings'. It is highly recommended.

Not only general public opinion but the state and law have similar attitudes to the prostitutes. The law and institutions dealing with prostitutes consider them as free workers and not as victims of prostitution or crime. According to this view, prostitutes exercise their right to work. Similarly, police treat prostitutes as offenders and not as victims. Neither under the law, nor through the practice of policing is there any suggestion that anything can be done by the fact that women are forced to be prostitutes by violence. The law and the legal literature does not urge the police or courts to enhance a better understanding of the real background to prostitution, and on the other hand, the law forces police officers to avoid the human rights of prostitutes, reinforcing prejudices against them.⁵⁰

Practically, the Hungarian law regulates how prostitutes can be legally self-employed. The law and jurisdiction don't cover the social reintegration of prostitutes nor are the clients in any way held responsible.⁵¹

According to the law there is a legal form of prostitution⁵², which is not considered a crime since 1993. Later, in 1999, legal prostitution was regulated. Hence, individual prostitution is permitted by the law, but the law only sets the condition of prostitutions. For example, a prostitute must be legally an adult, pay tax and have a medical certificate required by the law.⁵³ A prostitute becomes an offender and is charged only when she breaks any of the rules. When a prostitute is found guilty of an administrative offence she is sentenced to a fine (maximum 150 000 HUF) or a period in custody.⁵⁴

⁴⁹ http://mona-alapitvany.hu/wp-content/uploads/2012/12/KERET_Modszeres_tani_ajanlasok.pdf

⁵⁰ <http://www.prostitutio.hu/juhasz.geza.hogyan.hatraltatja.htm>

⁵¹ <http://www.prostitutio.hu/cedaw.arnyekjelentes.prostitutio.reszlet.htm>

⁵² <http://www.prostitutio.hu/cedaw.arnyekjelentes.prostitutio.reszlet.htm>

⁵³ <http://www.prostitutio.hu/szabalysertesi.tv.reszlet.htm>

⁵⁴ <http://www.prostitutio.hu/juhasz.geza.hogyan.hatraltatja.htm>

The same offences concern clients only in the case where somebody buys the service of an under-age prostitute, otherwise the law allows that clients are punishable by a fine of maximum 50 000 HUF. According to social workers or news from the media cases of clients having ever been punished are not known, not even in the case of being caught in the act of committing the crime. Neither does it conflict with the law if a client makes an offer, and buys the services of an under-age prostitute (aged between the age of 14-18), and such cases do not count as an offence or a crime. The same goes for the requirement of medical certification or harassing behavior, only the prostitutes can be punished in these cases.⁵⁵

The purpose of the law of course was to regulate prostitution, therefore the meaning of a tolerance zone and protected zone was defined as well. The tolerance zone can be selected by the local authorities, which authorities are obliged to do in cases of a settlement which has more than 50 000 inhabitants.⁵⁶ Prostitution and soliciting are forbidden in protected zones. The aim of defining the protected zones is to ban prostitution from public places.

In the protected areas all forms of prostitution are prohibited, including soliciting. By creating "tolerance zones" the lawmakers wanted to remove prostitution from public spaces and push it into the private sphere. In the protected zones the law forbids prostitutes to "behave as a person who is willing to offer a sexual act", and because of this the law effectively works against prostitutes, who can be punished since the "behavior of the client" is unknown in the eyes of the law. The term "behavior" allows wide opportunity for police abuse and unjustified fines, as policeman can decide whether they suspect anyone of behaving like a prostitute no matter if they are "working" or not.

According to legal experts on prostitution the law is formally discriminative in nature, which can be further reinforced by the practice. The laws regulating prostitution do not count prostitution as a form of violence against women, but instead focus on promoting the legalization of prostitution and considers this legalization as a positive process. The lawmakers do not view prostitutes as victims and legislators do not provide any resources to prevent prostitution or try to reintegrate the victims of prostitution into society. NGOs working with prostitution are not satisfied with the work of the police, since the police are generally unskilled, uneducated on the topic of human trafficking and the NGOs concerned are certain that the police have knowledge about local brothels, but turn a blind eye to them, instead of doing anything.

It is not surprising that according to experts dealing with prostitution, the existing laws and the application of the laws are ineffective to fight against prostitution and human trafficking and to protect the victims. Besides, there is no an institutional system which would operate on a nationwide and professional basis and cooperate with other social institutions in order to help victims of prostitution and human trafficking. There is not a single shelter in Hungary which would meet the criteria of international standards on issues of safety and sufficient staffing. There are only six places in a shelter which is state supported for the victims of human trafficking. This shelter has been run by different NGOs and church organizations over the years, but there is no available information on the

⁵⁵ <http://www.prostitutio.hu/cedaw.arnyekjelentes.prostitutio.reszlet.htm>

⁵⁶ <http://szexmunka.hu/wordpress/wp-content/uploads/2010/12/kiadvany.pdf>

shelter.⁵⁷ The Transitory family houses operate as shelters for female victims of domestic violence and they also take the victims of prostitution and human trafficking in.⁵⁸ Victims can stay for only 30 days in a family house, which can be extended with a further 30 day in certain cases. The accommodation in the family houses is free, but the victims have to pay the travel cost to the family houses. There are approximately 40 places in these houses nationwide.⁵⁹

Two new shelters were opened this year in the spring; they are maintained by Hungarian Baptist Aid and the 'Nameless Roads' Foundation. According to news published in December 2012, Hungarian Baptist Aid receives 14 million HUF from the Ministry of Human Resources. The shelters are designed specifically to help the victims of human trafficking.⁶⁰

⁵⁷ http://www2.ohchr.org/english/bodies/cedaw/docs/ngos/HWLandERRC_Hungary_ForTheSession_Hungary_CEDAW54.pdf

⁵⁸ <http://www.nokjoga.hu/alapinformaciok/statisztikak>, http://mona-alapitvany.hu/wp-content/uploads/2012/12/KERET_Modszerani_ajanlasok.pdf

⁵⁹ <http://szexmunka.hu/2012/03/elhelyezes-a-prostitutcio-es-emberkereskedelem-aldozatainak/>

⁶⁰ <http://baptistasegely.hu/hirek/2012-12-14/coordination-meeting-between-minister-zoltan-balog-and-the-president-of-hbaid?lang=en>

III. Healthcare

Introduction of the healthcare system

The Hungarian health care system is governed by the national social security system (TB). The later has two main branches, health care and the national pension system. All working citizens donate a portion of their earnings (usually the employer pays on behalf of the employee). The security system runs or distributes all the different benefits and services associated with these areas.

All employed persons⁶¹, except those employed for seasonal jobs or on short term contracts, all persons who attend to any form of education or who are on unemployment benefits are covered by the support and insurance of this governmental body (anyone below the age of 18, pensioner, parents on GYES or GYED, those who receive regular benefits, homeless people, those who are receiving prolonged medical care or on prison are automatically included). These insured individuals are eligible to all health related services, but do not receive monetary benefits automatically. Unsupported citizens are able to fully attend the same services; however they will be charged later for using them.

If you are employed you are insured, but there are many who are covered by the healthcare insurance even though they do not pay a charge for it. According to the official record, in the year 2012 there are three times more people receiving the insurance than who pay for it. Experts in healthcare insure generally agree that approximately 3 billion people pay the insurance and almost 10 billion receive it.⁶²

Even though you mostly do not have to pay for medical treatment in Hungary, there is a strong informal economy built into this system. This means that patients offer illegal (undocumented, untaxed) money to practicing doctors, nurses and experts for receiving better services and more care than the other patients. We should also note here that wages in the health care system are extremely low, and healthcare staff are completely overwhelmed by their duties. This informal system has its own unwritten rules and the most common procedure is that the relatives give an unmarked white envelope containing cash bills to the treating doctor, but payments are only usually made after the patient (or relative) gathered information informally about how much they should donate.

⁶¹ forrás :

http://www.oep.hu/pls/portal/docs/PAGE/LAKOSSAG/OEPHULAK_EBELLAT/ELLATASMO/BIZTOSITOT_TAK_2013_01.PDF

⁶² http://hvg.hu/gazdasag/20120601_tb_fizetes

Pregnancy and child birth are exceptionally expensive in this informal system. Not everybody can afford to attend to a private doctor during pregnancy and the prices are different in each geographical region. Also, not all mothers have chosen delivery nurses and doctors who help at childbirth. But it is generally considered to be safer to have the above, and you can only get the best treatment and assistance if you pay for these services off the record⁶³. Those who select their treating doctors and nurses this way have to prepare for the following prices: monthly visit to the doctor (8-15 thousand HUF), childbirth: (80-100 thousand HUF), nurse: (approx. 30 thousand HUF).

And how do expecting mothers or family members learn these unofficial service charges? There are no written or displayed prices and in most cases families concerned do not even ask the treating doctor but information is informally exchanged or may be sought on specialized internet forum to answers, sometimes there are small leaflets in offices to inform the mother on prices. If we add up the above sums we can easily learn how much a childbirth "costs" in Hungary. The monthly visits and the other associated costs are approximately 275.000-300.000 HUF. Also there is a custom to give small tips for the employees of the maternity ward, where the mother and child stay for an average of three days.

The other very important issue we have to mention is abortion. We would like to approach this issue from the perspective of a woman who wants to undergo this procedure and show what she has to face in order to do so⁶⁴. In Hungary, abortion is legal until the 12nd week of pregnancy. The legalization was created in 1992 and the law regulates how and when the abortion can be carried out. Women below the age of 18 (between the ages of 14-18) can also have abortions, if their parents or legal guardians agree. The legal guardian only has to sign the necessary documents, and does not have to get involved otherwise. Women below the age of 14 can only have abortion if the parent or legal guardian initiate the process. The abortion can be carried out only in the following cases: if the pregnancy endangers the life of the woman, the fetus has severe functional disabilities, the pregnancy is a result of a crime, or if the pregnant women are in crisis. This law also defines what is considered to be a crisis (social marginalization, psychological/physical breakdown)

If this later is the case, the woman has to attend to the Family Protection Service on two occasions. The first visit aims to convince the woman to keep the fetus and the woman receives information about the financial benefits of keeping the baby and the possibility of adaptation. The expecting woman meets a Health Nurse during both visits. She stays anonymous during the first visit, and all her data is handled confidentially until the next visit. The Health Nurse does not investigate the causes of this crisis. The second visit takes place three days after the first and if the woman did not changed her mind, she is given all information regarding the abortion. The costs of abortion are not covered by the social security system, therefore there is a fee of 29 710 HUF, which can be reduced by fifty of seventy percent if the women refers to her social status.

⁶³ In Hungary the Health Nurses and the gynecologist/ obstetrics' are the one who sees after the mother, the birth itself is done by the gynecologist/ obstetrics and his/her assistant nurses, of which the later is the more active.

⁶⁴ All information about abortions from the website of patent.hu

In January 2012 the Patent Association organized a conference reacting to the changes implemented by the Fundamental Laws of Hungary, which protects the fetus from the moment of conception. This wording does not correlate to the international agreements, and according to experts this is a step taken to tighten the abortion laws⁶⁵. A governmental campaign started in 2011, which aims to change public opinion and which portrays abortion as infanticide and aims to create feelings of guilt in women⁶⁶.

During the spring of 2012 the government managed to prohibit the use of an abortion pill called Medabon, which can no longer be used or sold.⁶⁷

Health and Romany women

If we want to get a picture of the general health conditions of Roma women, we have to take a look into the overall health status of the Romany population, since the generally poor health conditions of this segment of the population can only be viewed within a broader context. There is also a lack of data regarding the health status of Roma women in particular.

There are several ongoing projects aimed to assessing the health status of the Romany population,⁶⁸ but we still lack an in-depth analysis on this subject.⁶⁹ Despite this, we have a pretty good picture on the health status of the Romany population, and their relationship to the social security system, which is much troubled.

⁶⁵ http://abortusz.info/images/stories/abortuszzigoritas_veszelye_magyarorszagon.pdf,
<http://abortusz.info/hirek/hirek/variaciok-egy-szandekra-nyiltan-a-burkolt-abortuszzigoritasrol>

⁶⁶ <http://abortusz.info/hirek/sajtokozlomenyek/ma-b%C5%B1ntudatkertes-%E2%80%93-holnap-abortusztalalom>

⁶⁷ <http://abortusz.info/tenyek-az-abortuszrol/abortusztabletta>

⁶⁸ The Hungarian Roma (Romany) minority is not a homogenous group but three larger communities (Oláh and Beás and Hungarian Czigany also called romungro). Nowadays the urbanized Roma community of Budapest is treated as a forth separate group because their distinct language and culture and also because they form a territorially specific group. Most of the Roma live on the peripheries of the society, excluded from several areas of everyday life, most of them are undereducated, unemployed and living in constant poverty.

⁶⁹ Regarding Roma women there was research which was concluded in 2002, 2003 and 2004 by the EU source: <http://nemekarca.postr.hu/ki-vedi-a-roma-nok-egeszseget>,
http://fra.europa.eu/sites/default/files/fra_uploads/180-ROMA-HC-EN.pdf

<http://www.szabonekarmanjudit.hu/wp-content/uploads/2010/08/A-roma-cig%C3%A1ny-n%C3%A9pess%C3%A9g-helyzete-Kopp-k%C3%B6nyv.pdf>

http://www.esely.org/kiadvanyok/2007_1/babusik.pdf

The health and living conditions of the Romany population is generally considered poor, their expected lifespan is shorter than those of the population as a whole, and the percentage of ill health is higher than across the entire populace.⁷⁰

The most alarming of the above that life expectancy for a Roma person is 10 years shorter than a non Roma person.⁷¹ The most common diseases are cancer, cardiovascular diseases, tuberculosis, hepatitis, reduced vision, liver damage due to alcohol consumption, smoking related problems and malnutrition. The Roma have a higher rate of infant mortality and early delivery, and Roma women have more miscarriage and early delivery. Mental health problems are also reported to be higher in the Romany population (one source claims that depression might affect 75% of all Romany people). This is further deteriorated by the lack of education, poor life conditions and unemployment.

There are many reasons for these poor living conditions, one of which is the limited access to the healthcare system (for example many Roma people live in the eastern part of the country where there are fewer district family doctors, pediatric doctors, and where they have less access to specialized doctors or more complex treatment and facilities). Romany people have less access to screenings, are less able to buy medicines, have poor living conditions (segregated housing and limited access to sanitary drinking water), unhealthy habitats, discrimination in the health service, and whose patients rights are often violated, lack proper nutrition, and whose wages are below the minimum living standards, all of which contribute to the Roma populace's poor overall health.⁷² There are in fact many more contributory factors, yet we can already see from the above that the generally poor health status of Romany are caused by a complex system: social standing, regional disadvantages, low education, long term unemployment, which together all contribute to this situation. Research concluded so far made direct connections between the poor health conditions and poverty.⁷³

There are many forms of discrimination witnessed against the Romany population.⁷⁴ Some of the most typical forms of discrimination in the healthcare system, which include: they are unable to access screenings; the doctor on duty denies treatment (e.g. thorough failing to visit the ghetto part of a community), humiliation of the patient (for example segregated accommodation in hospitals, special rooms for Roma women in the maternity ward,⁷⁵ humiliation and raised voices by the staff of hospitals.

In the case of Roma women, the access for the health care system is further hindered by their special family obligations and obstacles stemming from their traditional women roles. Moreover there are cultural heritages and customs which regulate the relation of the Romany community to health,

⁷⁰ http://www.sulinet.hu/oroksegtar/data/magyarorszagi_kisebbsgek/2009/ciganyok/A_ciganyok_magyarorszagon/pages/006_Biologia_vagy_kultura.htm

⁷¹ http://www.esely.org/kiadvanyok/2007_1/babusik.pdf

⁷² From Babusik: Almost the half of the Romany population lives in deep poverty.

⁷³ For more please refer to the Babusik report

⁷⁴ http://www.esely.org/kiadvanyok/2007_1/babusik.pdf

⁷⁵ <http://www.errc.org/article/gypsy-rooms-and-other-discriminatory-treatment-against-Romany-women-in-hungarian-hospitals/2063>

diseases and lifestyle. Even though these cultural factors do not apply to all members of the community; we have to consider a living cultural condition for the whole group. The motor of the community life, the group, is still considered to be more valuable than the individual. There are many cases where the personal health of Roma women are of secondary importance because of this cultural effect.

The issue of health traditionally belongs to the women in Roma families. The health of the family members (and the whole community) is a responsibility of the women. They are the ones who keep count of all illnesses and they are the ones who take legal action. The Romany woman takes on a liaising role when somebody becomes ill, as tradition requires that the condition of the patient is not only a matter between the healthcare professional and the individual patient, but extends to the family and the wider community. This role of the Roma women mostly hinders their own concerns about their own health. They also pursue traditions which limit the effect of some treatment or the development of certain forms of healthy lifestyle. A study commissioned in 2009 confirms the above that Roma women receive discrimination more often in the health service than non Roma women.⁷⁶

Roma regard the protection of young women as a priority. For the rest of the society, it might seem that they protect them too much (they can't go out alone and marry as a virgin). Young women are trained for their role and duties as a wife from a very young age. Sexual topics are considered to be a taboo in the family, also it is forbidden to speak about any woman issues, particularly menstruation in front of men. Therefore young people do not receive any information about sexual life, STDs or contraception.

Protecting one's health is not a priority, which is a common characteristic observed in outsider groups. Roma people often do not have the resources to focus on prevention, and there is a strong association between death and diseases. This later might contribute to the fact that they visit the doctors much later compared to the non Roma population. This connection also contributes to the fact that they experience their illnesses much intensively and this can easily cause conflicts with the hospital staff. This is why it is common for the whole family to escort or visit the patient and the diagnosis is expected to be available immediately after medical examinations. There are some special customs which act as a defensive factor to woman, for example the prohibition of sexual relationships before the marriage (on the other hand they marry very early), women are supposed to not smoke or consume alcohol and they maintain higher hygiene standards than an average person.

There are many superstitions and customs attached to pregnancy, childbirth and raising the children which affects the process of childbirth and the mother-to-be's health. For example Roma people would not usually present or buy "babakelengye" (a gift of clothing for the child) because it is believed that this may cause miscarriage, and also that a pregnancy must not be kept secret, since it is believed this may cause deafness to the baby. There is also a belief stating that a woman who does not give birth until the age of 18 will not be able to deliver a child at all. They believe that the baby should only be bathed every other day since the water might sap the baby's strength away. Also

⁷⁶In: European Women's Lobby Position Paper. Tackling multiple discrimination of Romany and Traveller Women- a crucial factor for the successful implementation of the National Roma Integration Strategies. December 2012

there is a custom for the mother or the grandmother to chew the food before giving it to the baby. Against thrush they believe it is enough to wash the mouth of the baby with the bath water. These are only some examples, but there is a large body of living custom passed to one generation to the next and is an integral part of the Romany culture.⁷⁷

In the eyes of the majority of the society Roma women are considered to be uneducated on the topics of childrearing and contraception and they are governed by their instincts in these issues. However a research conducted in 2002⁷⁸ found that Roma women still practice their traditions regarding marriage and childrearing.⁷⁹ The traditions are rooted in the Roma cultural heritage and have superstitious elements but the norms of the predominating society (for example having less children) are slowly undermining these traditions.

One of the research's most important points is that Roma women cannot be treated as a homogenous group and even though one can make generalisations about them; the different subgroups of Roma have to be treated differently. The protection of young girls and considering virginity as a value are still very relevant at the Oláh and Beás Roma group and the custom of stealing the bride is still practiced in these communities. Also, they have a common trait which is the lack of education of young women on menstruation.

The study affirms that Roma women start their active sexual life earlier and have a higher number of children than their non-Roma counterparts, also they embark on a permanent relationship earlier and make a clear separation between the life of men and women and they live according to their traditions, but at the same time elements of family planning are present in their life. However their knowledge and family education about sexual life, menstruation and contraception is still lacking. The constant mixing of traditions with modern rational influences (media, peer pressure from the majority of the society, conflicts with this majority, school, work) results in different cultural effects on individual groups, therefore we can't speak about Roma women as a homogenous group any more.⁸⁰

The role of the Health Nurses is especially important in the life of the Romany Population, to be more exact in the life of women. Mostly in smaller communities, where Roma live in ghettos,

⁷⁷ http://ec.europa.eu/health/ph_projects/2004/action3/docs/2004_3_01_manuals_hu.pdf

⁷⁸ Premature birth and birth with low weight are more common amongst Roma women. This fact fueled another study made amongst Roma women about the role of mother and child rearing among Roma women. There were four interview groups, representative sample. All groups were investigated separately, assessed and we present these result typical to the individual groups.
http://www.sulinet.hu/oroksegtar/data/magyarorszagi_kisebbsegek/2009/ciganyok/A_ciganyok_magyarorszagon/pages/006_Biologia_vagy_kultura.htm

⁷⁹ Oláh Roma can only have wedding ceremony if the bride is still a virgin and there are still many arranged marriages at very early ages. Also it is quite common that young woman with unwanted pregnancy are forced into marriage with a widowed male with children in the community.

⁸⁰ http://www.sulinet.hu/oroksegtar/data/magyarorszagi_kisebbsegek/2009/ciganyok/A_ciganyok_magyarorszagon/pages/006_Biologia_vagy_kultura.htm

segregated from others, the only link to the outside world and the predominant society are the Health Nurses.

Recommended Readings

You will find several research papers below, which are all highly recommended. They cover several aspects of Hungarian women's social status, for example the legal framework for domestic violence, women and health (especially reproduction rights and the health status of Roma women) and some materials which helps you understand the roots of prostitution amongst Roma woman. These papers are all written by experts of different NGOs working in the field.

1. Alternative report submitted to the UN CEDAW Committee for consideration in relation to the examination of the combined seventh and eighth periodic reports of Hungary January 2013 by the Hungarian Women's Lobby and the European Roma Rights Centre:
http://www2.ohchr.org/english/bodies/cedaw/docs/ngos/HWLandERRC_Hungary_ForTheSession_Hungary_CEDAW54.pdf
2. Public Health Fact Sheet. Left Out: Roma and Access to Health Care in Eastern and South Eastern Europe by OPEN SOCIETY INSTITUTE Public Health Program:
http://www.opensocietyfoundations.org/sites/default/files/leftout_20070423.pdf
3. Supplementary information on Hungary scheduled for review by CEDAW during its 54th Session:
http://www2.ohchr.org/english/bodies/cedaw/docs/ngos/CRR_PATENT_HungaryForTheSession54.pdf
4. "Gypsy Rooms" and Other Discriminatory Treatment Against Romany Women in Hungarian Hospitals. 2004. Rita Izsák: <http://www.errc.org/article/gypsy-rooms-and-other-discriminatory-treatment-against-Romany-women-in-hungarian-hospitals/2063>
5. European Women's Lobby Position Paper. Tackling multiple discrimination of Romany and Traveller Women- a crucial factor for the successful implementation of the National Roma Integration Strategies. December 2012:
http://www.rednetwork.eu/resources/toolip/doc/2013/02/09/ewl_position_paper_on_Romany_and_traveller_women_en-1.pdf
6. Civil Society Monitoring Report on the Implementation of the National Roma Integration Strategy and Decade Action Plan in 2012 in, Hungary:
http://www.romadecade.org/cms/upload/file/9270_file8_hu_civil-society-monitoring-report_en.pdf
7. Breaking the Silence. A report by the European Roma Right Center and the People in Need. Trafficking in Romany Communities. 2011: <http://www.errc.org/cms/upload/file/breaking-the-silence-19-march-2011.pdf>