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 \* The present document is being issued without formal editing.

 \*\* The annexes to the present report may be accessed from the web page of the Committee.

 Replies of Hungary to the list of issues and questions in relation to its ninth periodic report\*,\*\*

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Contents

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  | *Page* |
| 1. Introduction
 | 3 |
| 1. Responses to the list of issues and questions
 | 3 |
| Visibility of the Convention, the Optional Protocol and the Committee’s general recommendations  | 3 |
| Impact of the pandemic on women’s rights and gender equality  | 3 |
| Definition of equality and non-discrimination  | 4 |
| National Human Rights Institutions  | 6 |
| National machinery for the advancement of women  | 6 |
| Women human rights defenders, civil society and non-governmental organizations  | 10 |
| Temporary special measures  | 10 |
| Discriminatory stereotypes  | 11 |
| Gender-based violence against women  | 11 |
| Trafficking and exploitation of prostitution  | 14 |
| Participation in political and public life  | 15 |
| Education  | 15 |
| Employment  | 16 |
| Health  | 19 |
| Economic and social benefits  | 23 |
| Disadvantaged groups of women  | 25 |
| Marriage and family relations  | 26 |
| Climate change and disaster risk reduction  | 27 |

 I. Introduction

1. Hungary has the honour to submit its responses to the List of issues and questions in relation to its ninth periodic report, dated 8 March 2021, issued by the Committee on the Elimination of All Forms of Discrimination against Women. The responses are based on the contributions of ministries and relevant national authorities and court institutions, coordinated by the Ministry of Foreign Affairs and Trade. Where indicated, supplementary information is included in the attached Annex.

 II. Responses to the list of issues and questions

 Visibility of the Convention, the Optional Protocol and the Committee’s general recommendations

2. The prohibition of discrimination of women appears in various aspects of the Hungarian law enforcement system. Female detainees and convicts are positively discriminated as they have access to special screening tests, treatment for pregnant and sick women and mother-child protection.

3. The topic is integrated in the training program of the judiciary and prosecutors. Between 2013 and 2021, 129 programs were held relating to domestic violence. In addition, several trainings were delivered to police officers about: (i) handling domestic violence, (ii) identifying and managing harm of domestic violence and trafficking in human beings, (iii) gender-based violence and domestic violence and recognition of recurring and multiple domestic violence and (iv) sensitization (descriptions and participation data detailed in the Annex).

4. In addition, the HNP HQ Criminal Department continuously publishes criminal information related to human trafficking on the internal website MyPolice, and makes professional materials and standards related to human trafficking available to all police officers.

 Impact of the pandemic on women’s rights and gender equality

5. The Hungarian Government took appropriate steps to mitigate the effects of the pandemic on the economic situation as well as on the everyday lives of women – notably women with small children – who faced heightened challenges, via the following measures:

 Expanding the social protection of women

6. During the state of emergency, the Hungarian Government prolonged the entitlement for family benefits in the periods 11 March-30 June 2020, and 8 March–7 April 2021, respectively. This means that if the parents’ entitlement to childcare fee (a benefit based on social security status), childcare allowance (an individual entitlement) or child-raising support (a benefit for families with 3 or more children) expired during one of the above periods, they continued to receive the benefits until the end of the corresponding period. These measures also contributed to the preservation of jobs of women, because women could afford to stay on unpaid leave.

 Ensuring childcare services

7. During the first wave of the pandemic, extraordinary breaks were ordered in numerous kindergartens and nurseries. This put a heavy burden on working parents, especially women. To ease this burden, Hungary set up rules for establishing workplace childcare services, to be provided by employers (detailed in the Annex). Furthermore, the Hungarian Government introduced a free, on-call service of childcare, organised by the self-governments.

8. During the second and the third waves of the COVID-19, nurseries and kindergartens remained open due to the low level of infections among small children. In 2021, Hungary introduced a continuous substitution fee for nursery educators. Hungary’s Recovery and Resilience Plan (2021), in addition to other forms of support, envisages the establishment of further nurseries (see paragraph 63).

 Supporting the victims of domestic violence

9. During the first wave of the pandemic, the National Crisis Management and Information Telephone Service – available 24/7 free of charge – has experienced a growing number of emergency calls relating to domestic violence. The providing system was operating on full capacity. Where possible, quarantine rooms and all necessary facilities such as masks or disinfectants were provided.

10. Additionally, victim support continued via the Internet, too: crisis ambulance services were provided and virtual information leaflets were disseminated online. Furthermore, a smartphone application called ‘*Realize and Connect*’ (‘*Kapcsolj egyből*!’) was developed in 2019 that was of great aid for victims during the curfew.

 Supporting sectors in which women are overrepresented

11. Within the framework of the Economy Protection Action Plan, crucial sectors and industries most affected by the COVID-19 – such as tourism, creative industry, health and food industry – received extra funding, tax cuts and wage subsidies. Further, Hungary provided a one-time bonus allowance of HUF 500,000 (USD 1,753) to health care professionals as they took on a special risk when fighting against the disease. During the third wave of the COVID-19, home office was introduced in the public administration, and the Government encouraged the private sector to offer teleworking for their employees. This measure also contributed to the greater involvement of fathers in caring for the children.

 Access to sexual and reproductive health care services

12. Measures taken to control the pandemic did not limit the access of women to sexual and reproductive health care services. Acute gynaecological care, pregnancy care and abortions were continuously provided. Fathers also had the possibility to stay with their partner while she was giving birth.

 Definition of equality and non-discrimination

13. The right of women to non-discrimination and equality is ensured by the Fundamental Law of Hungary, as well as Act CXXV of 2003 on Equal Treatment and the Promotion of Equal Opportunities (the Equal Treatment Act). Article 8 of the Equal Treatment Act provides a non-exhaustive list of the protected characteristics upon which no discrimination is allowed. Out of these potential grounds for discrimination, more grounds may be invoked in the same complaint. Therefore, the Equal Treatment Act is able to combat multiple and intersecting forms of discrimination, and the previous Equal Treatment Authority—now a separate unit of the Office of the Commissioner for Fundamental Rights—has the competence to investigate such cases. A good example for that was the denial of the 13th month salary from women who were absent for a longer period to care for their permanently sick children (decision nr. EBH/130/2017).

14. Another decision concerned a student whose admission to a primary school was denied because the parents formed a same-sex couple (decision nr. EBH/366/2014). Although the decision did not consider ‘family status’ as a separate ground of discrimination, the authority held that in this case the child became a victim of discrimination on the ground of (the mother’s) sexual orientation.

15. The Hungarian legal environment does not have any definition for the concept of ‘gender’. As to ‘sex’, section 3 x) of Act I of 2010 on civil register proceedings defines ‘sex at birth’ as ‘the biological sex, as defined by the primary sex characteristics and the chromosome’.

16. Hungary emphasises that the main reason for women experiencing disadvantages is that childbearing affects their career, their education, their engagement in public life, work-life balance and numerous other spheres of their life. Therefore, since 2010, the Hungarian Government has been striving to ensure that the choice to have a child does not cause any disadvantages to women.

17. As detailed in the 9th periodic report of Hungary, the Government of Hungary guarantees the protection of the economic, social and cultural rights and equal access to basic services of all persons in the Fundamental Law. The privatization of some services does not affect the right of citizens to basic public services. Concerning education, schools, kindergartens and nurseries may be established and maintained by the state, local governments, legal entities (churches, foundations etc.) or natural persons. About 90 per cent of the children attend public educational institutions, and the educational data of women shows a favourable trend: in 2016, 31.6 per cent of women had high school diplomas and 20.1 per cent of women had university degrees (as opposed to 27.1 per cent and 17.2 per cent of men, respectively).[[1]](#footnote-1)

18. Concerning the health sector, the current Hungarian healthcare system is based on social security. Employers, employees, public servants etc. must pay a statutory contribution, while certain groups (minors, students, pensioners etc.) are entitled to health insurance benefits. For those in need for social reasons, entitlement to healthcare services is provided and the social security compensation is paid by the local government. Medical care in Hungary is, as a general rule, free of charge. If the treatment is not prescribed by a physician, or is not provided through the normal hospital system, the fees imposed by the care-provider will be paid by the patient. To improve access to health care for disadvantaged women, special programmes were initiated, see paragraph 80.

19. In 2020, the Government adopted the Empowering Women in the Family and Society Action Plan 2021–2030 (the Action Plan 2021–2030) together with its first implementation plan covering the period 2021–2022.[[2]](#footnote-2) These plans cover numerous aspects of both public and private life, such as the better reconciliation of family life and work, empowering women in areas where they are underrepresented, creating equal economic, health and social protection for women and men. For the actual measures see paragraph 25.

20. Action Plan 2021-2030 was elaborated by a working group of experts from different professional areas (Working Group Responsible for the Elaboration of the Empowering Women in the Family and Society Action Plan 2021–2030, the Working Group for Action Plan 2021–2030) and consulted with NGOs. The Working Group for Action Plan 2021–2030 serves as a general gender equality machinery, consisting of experts from all ministries, and it is responsible for the implementation of Action Plan 2021–2030.

 National Human Rights Institutions

21. The Commissioner for Fundamental Rights (the Commissioner) is the general successor of the previous Equal Treatment Authority. This legal succession did not entail any change in the mandate that is set out in the Equal Treatment Act. The Commissioner may, *inter alia*, investigate any potential violation of the requirement of equal treatment both upon request or ex officio, he/she may initiate a class action to protect victims or groups of victims of discrimination, he/she opines draft legislation or governmental decisions concerning equal treatment, he/she regularly informs the National Assembly and the public opinion about the enforcement of the requirement of equal treatment etc. The mandate therefore covers the promotion of women’s rights and their protection from all forms of discrimination.

22. In 2020, the Equal Treatment Authority received an initial budget support of HUF 462 million (approx. USD 1.54 million), which increased to a total of HUF 484.7 million (approx. USD 1.62 million) due to a one-off mid-year budget support. In 2021, the National Assembly allocated the same budget support (i.e. HUF 462 million).

23. Before its integration, the Equal Treatment Authority had nine public servants performing the professional authority tasks, eight of whom have continued to work at the General Directorate for Equal Treatment of the Office of the Commissioner, ensuring that this General Directorate continues to operate on an equally high level.

 Table 1

 Number of cases concerning discrimination based on sex, pregnancy/parenthood (submitted by a woman) and gender identity

| *Year* | *Total* | *Outcome* |  | *Region* |
| --- | --- | --- | --- | --- |
| *Violation* | *Settlement* | *Termination on procedural grounds* | *Rejection of complaint* | *Budapest* | *Outside Budapest* |
|  |  |  |  |  |  |  |  |
| 2013 | 39 | 4 | 4 | 21 | 10 | 13 | 26 |
| 2014 | 30 | 3 | 3 | 7 | 17 | 13 | 17 |
| 2015 | 29 | 5 | 0 | 13 | 11 | 9 | 20 |
| 2016 | 33 | 5 | 5 | 8 | 15 | 10 | 13 |
| 2017 | 37 | 4 | 7 | 11 | 15 | 9 | 28 |
| 2018 | 21 | 6 | 2 | 3 | 10 | 3 | 18 |
| 2019 | 34\* | 9 | 3 | 8 | 11 | 8 | 26 |
| 2020 | 33\* | 8 | 0 | 11 | 11 | 6 | 27 |

 \* *Includes cases suspended due to labour court litigation*.

 National machinery for the advancement of women

24. No dedicated impact assessment was prepared on the National Strategy for the Promotion of Gender Equality 2010–2021. Yet some favourable trends may be observed, such as the labour market data of women, detailed under the heading ‘Employment’.

25. This National Strategy for the Promotion of Gender Equality 2010–2021 was replaced by Action Plan 2021–2030. This contains several goals and measures for empowering women, ranging from enhancing the participation of women in education and science to the prevention of social disadvantages of and violence against women, as presented below.

| *Empowering Women in the Family and Society Action Plan 2021–2030* |
| --- |
|  |
| **Chapter 1: Supporting the reconciliation of family life and work**  |
|  | *Promoting the division of labour between women and men via* |
|  |  | Encouraging atypical forms of employment e.g. by the expansion of the Family-Friendly Workplace tender program; |
|  |  | Assessing the needs of women and men and the reasons for low levels of atypical forms of employment. To this end, an analysis of the gender employment gap will be carried out through an 18-month Structural Reform Support Program, including research on the low participation of women in the labour market despite measures taken, and the development of new measures. |
|  | *Increased recognition of women’s “invisible”, “unpaid” work via* |
|  |  | Awareness-raising campaigns;  |
|  |  | Researching the participation of women and men in ‘unpaid’ work; |
|  |  | Researching nursing tasks (caring for a sick or elderly relative); |
|  |  | Recognising grandparent responsibilities. |
|  | *Reconciliation of work and family life between women and men with regards to parental leave via* |
|  |  | Programs/tenders that support contact with the workplace during childcare; |
|  |  | Researching the role of men in the family; |
|  |  | Supporting the division of labour between women and men. |
|  | *State and employer assistance in care tasks via* |
|  |  | * Increasing the number of workplaces nurseries and kindergartens;
 |
|  |  | * Supporting those involved in care tasks.
 |
|  | *Awareness-raising in education via* |
|  |  | Strengthening the Education for Family Life program with an emphasis on harmonious co-operation between women and men from kindergarten onwards and involving health visitors in primary and secondary education; |
|  |  | Continuing the programs of the Digital Child Protection Strategy of Hungary; |
|  |  | Developing methodologies and supporting material for teachers, kindergarten, school social support professionals and school psychologists. |
|  | *Awareness-raising of companies via* |
|  |  | Updating the National Action Plan on Corporate Social Responsibility in order to reinforce the responsible behaviour of companies. |
|  | *Creating a family and child-friendly environment via* |
|  |  | Introducing tenders and awards. |
| **Chapter 2: Facilitating the participation of women in areas where they are underrepresented** |
|  | *Promoting women’s participation in decision-making in the public sphere via* |
|  |  | Training and mentoring. |
|  | *Promoting women’s leadership within the business sector via* |
|  |  | Career guidance in secondary education; |
|  |  | Presenting the example of female leaders; |
|  |  | Mentoring program; |
|  |  | Establishing awards; |
|  |  | Increasing the proportion of higher education institutions offering family-friendly solutions, with the support of family-friendly workplaces as well as the assistance of post-secondary institutions. |
|  | *Breaking down invisible barriers to women in science via* |
|  |  | Supporting PhD students who have dropped out of research due to childcare;  |
|  |  | Supporting investments in child-friendly solutions (changing and breastfeeding areas, children’s corners, childcare) in educational and research institutions; |
|  |  | Presenting best practices of women researchers, PhD students in media campaigns |
|  | *Supporting the orientation of girls and women towards STEM careers via* |
|  |  | Organizing related career guidance sessions in secondary education; |
|  |  | Providing related scholarships in higher education. |
|  | *Promoting the participation of girls and women in vocational training and higher education, reducing their drop-out rates via* |
|  |  | Developing and applying special educational organization models; |
|  |  | Implementing catch-up and development courses; |
|  |  | Organizing vocational training and higher education programs, developing and operating an incentive system to participate in the programs, specific (early) career guidance, skills development and implementing communication programs, supporting forms of further education compatible with parenting for the ‘unemployed, out of education and training’; |
|  |  | Launching a large-scale digital competence development program for women. |
| 1.
 | *Development of gender equality expertise via* |
|  |  | Providing training in public administration. |
| **Chapter 3: Achieving equal economic, health and social protection of women and men** |
|  | *Support of the employment of women with children aged under 6, in addition to the objectives set out in Chapter 1 via* |
|  |  | Career counselling for young women, building a mentor network; |
|  |  | Training and counselling for mothers with small children; |
|  |  | Increasing the capacity of institutions providing nursery care; |
|  |  | Facilitating disadvantaged mothers without qualifications having at least four children to work in sectors such healthcare, social sphere, child or elderly care (sectors that recognize the experience acquired at home as a mother), if there is no way of employment in their original job. |
|  | *Supporting female entrepreneurs via* |
|  |  | Competence development, training, research and mentoring programs; |
|  |  | Presenting models of successful female entrepreneurs. |
|  | *Closing the gender pay gap via* |
|  |  | Researching the root causes; |
|  |  | Carrying out targeted measures; |
|  |  | Researching the differences between women’s and men’s pensions. |
|  | *Reducing the risk of poverty in the areas of employment, social security, health and social care as well as digitization via* |
|  |  | Conducting sex-disaggregated data collections and data evaluations on specific target groups (single parents, children with disabilities, large families, disadvantaged individuals); |
|  |  | Providing beneficial educational opportunities for pregnant mothers; |
|  |  | Further developing the network of Family and Career Points; |
|  |  | Further announcing and expanding the Family-Friendly Obstetrics and Family-Friendly Hospital tender; |
|  |  | Strengthening the network of health visitors through introducing incentives, raising wages, with special emphasis on disadvantaged settlements in order to provide more support to pregnant mothers; |
|  |  | Raising awareness on the health of disadvantaged women and encouraging them to take part in organized public health screenings; |
|  |  | Offering free mental health counselling, by providing psychologists in Health Promotion Offices for disadvantaged women; |
|  |  | Integrating people living in poverty and Roma women into the labour market, taking into account the further development and expansion of early school leaving prevention programs; |
|  |  | Strengthening the child-raising competencies of disadvantaged mothers (by expanding the network of Sure Start Children’ Homes); |
|  |  | Supporting single-parent families living in poverty, providing study grants for single-parent children; |
|  |  | Recognizing the work of women caring for an elderly relative at home; |
|  |  | Promoting digital literacy. |

26. The result-oriented targets of the Action Plan 2021–2030 are:

 • Providing sufficient capacity for nursery care;

 • Increasing the proportion of people working in atypical forms of employment by 8 per cent;

 • Increasing the number of higher education institutions with family-friendly solutions by 10 per cent;

 • Increasing the number of family-friendly hospital wards by 10 per cent.

27. The financial support behind the Action Plan 2021–2030 stems from both domestic and EU resources. The exact budget and the responsible ministries are specified in the implementation plans that are adopted by the Working Group for Action Plan 2021–2030.

28. In 2020, Katalin Novák was appointed as Minister without Portfolio for Families, and her tasks include the work towards gender equality and the empowerment of women. To carry out this task, a separate body called Gender Equality Unit handles the gender aspects of legislations or governmental measures of the other ministries (without taking these measures out of the competence of the respective ministries).

29. The Working Group for Action Plan 2021–2030 (presented in paragraph 20), while implementing the Action Plan 2021–2030, also coordinates between ministries on gender equality issues.

30. Action Plan 2021–2030 explicitly sets out strategic measures for the systematic training of public servants on women’s rights and gender equality (see paragraph 25.2.f) above).

 Women human rights defenders, civil society and non‑governmental organizations

31. In its decision of 2012, the Government established the Human Rights Working Group with the main purpose of monitoring the implementation of human rights in Hungary, conducting consultations with civil society organisations, representative associations and other professional and constitutional bodies, and promoting professional communication on the implementation of human rights in Hungary.

32. The Working Group established the Human Rights Roundtable in 2012, which currently operates with 72 civil organisation members. Further, 40 organisations take part in the activities of the thematic working groups based on invitation. The Roundtable holds its meetings in 11 thematic working groups; each of them is intended to deal separately with legal and practical problems of and sectoral political proposals for vulnerable groups of society. The Thematic Working Group Responsible for Women’s Rights aims to monitor the enforcement of women’s fundamental human rights in Hungary, particularly in the field of employment, education, health care and partnership. This working group invites various participants of the civil society: 26 civil society organisations are members and an additional 10 organisations participate with consultative status in the work of the Thematic Working Group.

33. In accordance with the judgment of the Court of Justice of the European Union in Case C-78[/](https://undocs.org/en/A/RES/78/18)18 Commission v Hungary, Act on the Transparency of Organisations Receiving Funding From Abroad was repealed by Act XLIX of 2021 on the transparency of civil organisations carrying out activities that are able to influence public life. Pursuant to the new law, every civil association and foundation having a yearly balance sheet total exceeding HUF 20 million (approx. USD 68,027) is controlled by the State Audit Office.

 Temporary special measures

34. It is the Women’s Public Leadership Training Program[[3]](#footnote-3) that serves as a temporary special measure for the motivation and education of women to take part in political and public decision-making. The free training program is organised by a private educational institution, and it targets women aged 18–36 who speak English and Hungarian (irrespective of their educational background). The trainers come from both the public and the private sector. The Government of Hungary supports the training program with HUF 20 million (USD 70,282) per year.

 Discriminatory stereotypes

35. As detailed in paragraph 25, Action Plan 2021–2030 includes crucial measures for awareness-raising in education with regards to the role of women and men.

36. The revision of the National Core Curriculum (the NCC)[[4]](#footnote-4) was introduced in a yearly phasing-in schedule starting in September 2020. It prescribes the full respect for human rights throughout the whole education cycle, including the respect for equality, democracy and religious diversity as well as the knowledge of basic concepts concerning gender equality and anti-discrimination.

37. The NCC lists the twelve most important development areas that include ‘*Education for citizenship and democracy*’, ‘*Education for sustainability and environment consciousness*’ and ‘*Education for Family Life*’. The educational goals must be embedded in each school subject.

38. School subjects like *History* and *Civic Studies* are special in respect of GCED[[5]](#footnote-5) as they provide the best channels for creating democratic commitment. Gender equality is among the so-called ‘comprehensive’ topics in *History*, which means that the issues concerning men’s and women’s lifestyles, social status, and emancipation are to be tackled in a recurring way during the whole teaching-learning process.

39. The preparation for family life helps children and adolescents to form responsible relationships, to manage conflicts arising in their current and future families and to deepen their understanding about gender equality. The NCC allows that ‘Education for Family Life’ is taught as a separate subject.

40. Education for Family Life is elaborated according to the maturity and mental development of students in the various age groups (grades 1–4, 5–8, 9–12.). The curriculum deals with the identity of women and men, the basic differences between them (sex characteristics, brain activity, communication), and the role of women and men in a relationship and as a mother or father. The curriculum supports the positive experience of biological, mental, and behavioural changes in adolescence, dismantles negative stereotypes, and presents different forms of male-female relationships. The course also touches upon the issues of social relations, communication, conflict management, self-knowledge, emotional intelligence and resilience. In terms of methodology, the course uses tools related to non-formal learning, involving experimental learning and interactive methods.

 Gender-based violence against women

 Criminalisation of stalking

41. According to Article 34 of the Istanbul Convention, stalking means the “*intentional conduct of repeatedly engaging in threatening conduct directed at another person, causing her or him to fear for her or his safety*”. In Hungary, section 222 on harassment of the Criminal Code renders such behaviours punishable.[[6]](#footnote-6) Due to the personal nature of the crime, it can only be prosecuted upon a private motion filed by the person concerned. Since the disturbing and harassing acts have various forms, the Criminal Code uses the general term “*disturbs another person regularly or permanently*”, that is “*causing fear or interfering with the private life or daily lifestyle of*” the other person.

42. Harassment covers the threatening of someone with the commission of a violent act against a person or an act causing public danger; or to pretend that an event harming or directly endangering the life, physical integrity or health of another person is about to take place. These acts are punishable more severely.

 Legislation concerning restraining orders

43. Act XC of 2017 on criminal proceedings (the Criminal Procedure Code) has significantly amended the rules of restraining orders with effect from 1 July 2018 (as detailed in Hungary’s 9th Periodic Report). The Criminal Procedure Code does not restrict the application of these rules to certain types of domestic relationships or cohabitation, and it is not limited to couples sharing children. Restraining orders can be issued in any case where it is necessary to avoid obstruction or frustration of taking evidence, or to eliminate the possibility of committing another offence regarding the victim against a defendant who is reasonably suspected of having committed a criminal offence punishable by imprisonment or who has been indicted.

44. In 2020, the Criminal Code was amended to tighten the conditions of parole (see section 38). If the perpetrator commits a violent crime against its relative and later is on probation, it may be placed under supervision, too (section 69(2)). In these cases, the perpetrator is required to stay away from the home or habitual residence, workplace, institutions or other places – in particular nurseries, kindergartens, schools, health care institution, religious sites – regularly visited by the victim, the victim’s relatives or other individuals affected (section 71).

 Measures undertaken to criminalize rape upon the lack of consent, instead of based on the use of force, and the relation of ‘sexual coercion’ to the offence of rape

45. The criminal offense of ‘sexual coercion’ (section 196 of the Criminal Code) ensures earlier protection by criminal law than the criminal offence of sexual violence (section 197 of the Criminal Code). The term ‘rape’ is covered by these two criminal offences.

46. The offence of sexual coercion renders punishable a sexual act committed by intimidation. This intimidation does not have to be direct; is not *vis absolute* (like in the case of sexual violence) but rather *vis compulsiva*, and it does not actually qualify as threat or violence, it is only capable of bending the will of another person. Coercing someone to engage in or endure a sexual act includes every kind of behaviour that causes the victim not to give voluntary and free consent to the sexual act, thereby implying the lack of consent. This offence can be established even if the perpetrator performs the sexual act by exploiting the relative age difference between him/her and the victim. The number of prosecutions, convictions and sentences imposed are detailed in the Annex.

47. By contrast, the offense ‘sexual violence’ covers sexual acts committed by violence or a direct threat against life or bodily integrity. It also covers cases in which the victim is incapable of self-defence (e.g. unconscious) or of declaring his/her will for a sexual act (e.g. being under the influence of drugs or alcohol, or having mental disabilities. Performing a sexual act with a person under 12 years old constitutes sexual violence even if the victim had given consent.

48. The Criminal Code also introduced a new criminal sanction, namely “rendering electronic data permanently inaccessible” (section 77), applicable since 2013. The introduction of this sanction addresses offenses committed via online means.

49. The prosecutors, judiciary and the police are also members of the child protection alert system that plays a very important role in identifying the indicators of domestic violence. Within the national priority project ‘Development of Crisis Management Services’, 5000 members of this alarm-type system were trained during the course of 2 years (2019–2020) at 200 different training locations. We also reiterate the training program for the police mentioned under question 1, detailed in the Annex.

50. The victim support system in Hungary is based on several institutional pillars. The first pillar is the regional victim support services operating in all counties and in the capital as part of the Government Offices. The second pillar consists of 7 victim support centres across the country, that will become a national network until 2025. The third pillar is the Victim Support Line, which is available 24 hours a day, 7 days a week on 06 80 225 225. This support system is professionally managed and coordinated by the Ministry of Justice. These victim support services are available to all victims of crime, including victims of gender-based violence.

51. In addition to the above, crisis centres and secret shelters are operating (maintained mostly by civil organisations, see their presentation in paragraphs 111–117 of the 9th periodic report of Hungary). Following the accommodation of a victim in such centres or shelters, the maintaining organization is entitled to a state normative support. The state also provides additional support: HUF 6 million (USD 21,045) per year for crisis centres and HUF 16 million (USD 56,119) per year for secret shelters.

52. Crisis centres and secret shelters operate on the basis of a professional protocol, which sets out the minimum number of professional staff required. In all cases, the professional leaders, family caregivers and caregivers are the direct employees of the maintainer. Psychological or mental health counselling, legal counselling, and developmental and pedagogical counselling are typically provided by external specialists.

53. In 2020, the National Crisis Management and Information Telephone Service initiated the placement to 1439 individuals, out of which 503 were women and 925 children.

54. Since 2020, family helpers, health visitors, ombudsman offices, and crisis ambulances disseminated flyers that provide information on the signs of domestic violence and opportunities on how to seek assistance. The flyers were published in local newspapers and online, too.

55. In 2019, a new application called *‘Realize and Connect*’ (‘*Kapcsolj egyből*’) was released, which shows the location of the nearest available help services, and has a ‘panic button’ function.

56. There is no consolidated law on violence against women in Hungary. The relevant legislation is incorporated in sectorial legal instruments, in line with international standards. The Criminal Code provides the relevant rules on violent crimes against a person regardless of the victim’s gender; however, under the criminal offence of domestic violence, certain forms of violence against women, family members, close relatives etc., are punishable more severely.

57. The requested data are in the Annex.

58. Hungary decided not to ratify the Istanbul Convention. The Hungarian National Assembly in its Political Declaration 2/2020. (V. 5.) OGY expressly confirmed that it does not support the ratification of the Istanbul Convention because it prescribes an approach based on a definition of gender for the transposition of its provisions. The National Assembly does not wish to make part of our national legal system neither the concept of gender, nor the gender-based approach of the Istanbul Convention. Furthermore, the provisions of the Istanbul Convention on granting asylum based on gender are contrary to the Hungarian legal framework implementing the Hungarian migration policy and ensuring effective action against illegal immigration. In our view, it is not the ratification of a treaty, but the tangible results of Government actions that make prevention and combating violence against women and domestic violence a reality. The Hungarian legal system is in line with the provisions of the Convention prescribing a legislative task. Furthermore, Hungary offers a variety of support measures so that victims feel that they are not alone, and that they can count on the community and the country.

 Trafficking and exploitation of prostitution

59. In 2020, the Government adopted the National Strategy against Trafficking in Human Beings for 2020–2023. It is based on the four pillars of the “4P” paradigm, as follows:

 • Prevention: awareness-raising in public educational and childcare institutions, provision of rescue cars for the sheltered accommodations and the child protection system; expanding the Barnahus network, nationwide media campaigns addressing both the at-risk populations and the demand side of human trafficking, development of information materials, etc.

 • Protection: review of referral protocols, further development of the web-based system for victim identification, broadening the portfolio of services for identified victims; cooperation agreement for joint labour inspections; etc.

 • Prosecution: legislative amendments; training programme for investigators, prosecutors and judges; anti-trafficking group within the National Bureau of Investigation elevated to independent unit with its staff being expanded; etc.

 • Partnership: research activities, sustained cooperation between state bodies and NGOs, international cooperation mechanisms.

60. The strategy is implemented by the Ministry of Interior in close cooperation with the ministries and other state bodies involved in the fight against human trafficking, as well as the NGOs operating the state-funded sheltered accommodations (see paragraph 26).

61. In line with the national strategy, Act V of 2020 *on the amendment of certain laws to prevent the exploitation of victims of human trafficking* was adopted.[[7]](#footnote-7) In addition to the perpetrators who enslave the victims for profit, the conscious use of services or other activities of victims of human trafficking (the demand side) also became punishable. Sexual intercourse or illicit use of human body constitutes an aggravated case with maximum 5 years of imprisonment. An even higher penalty rate is applicable if someone pays for sexual intercourse with a minor.

62. This law amendment package has introduced several other safeguards with a view to protecting minors from the harmful effects of prostitution. *Act on Organized Crime* stipulates that persons under 18 may not offer sexual services. However, the violation of prohibition of offering sexual services is not punishable if the offender was under 18 at the time of the commission of the act (see *Act on Minor Offences* as amended). In practice, it means that prostitutes below 18 years are regarded as presumed victims of human trafficking and not perpetrators. Therefore, offence procedure cannot be commenced against them. Instead, they are taken into designated special childcare institutions and receive adequate support.

63. Hungary provides the following services to victims of human trafficking after assessing their needs: facilitating the enforcement of interests (provision of information and legal advice, emotional help), instant monetary aid, state compensation, certificate of victim status, witness care, sheltered accommodation (see paragraphs 117–118 of the 9th periodic report).

 Participation in political and public life

64. The Government of Hungary holds that it is of paramount importance for women to have fair chances and opportunities to apply for senior or leadership positions, and to participate in public life, including legislation and judiciary. In this spirit, chapter 2 of the Action Plan 2021–2030 sets out certain goals, see paragraph 25.

65. There are further initiatives to encourage women to participate in political and public life. The Women for Hungary Club and the Women for the Hungarian National Movement – both being private associations founded by the Minister for Families – are initiatives that support women e.g. by rewarding outstanding performances during the COVID-19 crisis.[[8]](#footnote-8) The Women’s Public Leadership Training Program, supported by the Government of Hungary by HUF 20 million (USD 70,282)/year, offers free training for women aged 18–36 wishing to pursue a career in public life.

66. In 2020, the number of female ministers in Hungary increased to three (Minister without Portfolio for Families, Minister without Portfolio for the Development of Public Assets and Minister of Justice). The additional requested data are indicated in the below table:

 Table 2

 Rate of women employed in 2020

|  |  |
| --- | --- |
| Judiciary and court system | 63.4% |
| Scientific research and development | 36.6% |
| Tertiary education | 61.3% |

 Education

67. As a general ambition, Hungary wishes to increase the number of students studying mathematics, science, technology, and information technology. To this end, Hungary adopted “Shifting of Gears in Higher Education Mid-term Policy Strategy 2016” that supports students by, inter alia, providing study-based scholarships. Similar to international trends, women’s participation in IT and engineering is lower than that of men (14 per cent and 24 per cent, respectively). To address this general phenomenon, the relevant ministry is planning a new scholarship program. The objective of the so-called Informatics, engineering, agriculture and science training scholarship program is among others to increase the number of women studying in these fields. The orientation of women towards STEM-fields is one of the objectives of the Agenda 2021–2030 (see Chapter 2 d)). As an institutional best practice, the then-state-owned University of Miskolc initiated the so-called ‘Know-Ledge Program’ with its subproject ‘MEnők – Women in the world of Science.” The university published a book with interviews and DIY activities for the younger generation the interviewees were women with outstanding scientific achievements in STEM-related academic fields.

68. Concerning the participation of Roma, asylum-seeker or migrant students in education, no statistics is available because data on national, ethnic, religious or linguistic minority status can only be collected on a voluntary basis. In 2013, the network of Roma vocational colleges was set up and in 2020, these Roma vocational colleges (altogether 11) had 330 students. To support Roma girls in education, in the Bari shej-Fata maré-Girl Program was launched in 2016.

69. The aim of this program is to reduce dropout rates of Roma girls, to increase their chances of further education and to provide a complex service that focuses on personal development. The target group consists of 10–18-year-old elementary or secondary school girls – especially Roma students – who are at risk of dropping out.[[9]](#footnote-9) To these girls, a mentor is assigned who is assisting them both with learning and managing their everyday lives for two years. The girls took part in self-knowledge and career guiding sessions, in trainings aimed at preventing victimization of trafficking and sessions dealing with family roles and parenting skills. The project ended in 2020, with ca. 440 mentors in 16 counties supporting nearly 2000 young girls (and indirectly, their families).

70. As to the educational programmes on family skills, the currently available MSc courses – Consultancy in Family Education, Mental Health Family Consultant, Economics of Family Policy, Public Policies for Human Development and Interdisciplinary Family Studies view women’s roles in the family from a multi‑angled perspective and provide a balanced approach.

71. To prevent and address violence and harassment in educational settings, most higher education institutions have their own policies and procedures (such as Code of Ethics, Equal Opportunities Code, Guidelines against discrimination and sexual harassment, Ethics Committee, Gender Equality Plan etc.).

 Employment

72. According to Eurostat, the average gender pay gap in Hungary between 2012–2016 decreased. This trend is explained by the fact that Hungary carried out significant wage increases in sectors that have a high female employment rate, such as public education, health sector and social services. Since 2016, the gap is fluctuating.

73. There are certain objective reasons behind the general differences between earnings. The greater participation of women in childcare (hence, a later return to the labour market) or the possibility for women to retire at a reduced rate, i.e. after 40 years of employment, may all lead to a certain average pay gap in favour of men.

74. Nevertheless, to promote women’s rights, the Hungarian laws provide that any discrimination in payment between men and women in the same workplace and in the same job violates the requirement of equal treatment. The amount of the national mandatory minimum wage and the guaranteed minimum wage–set by the Government–does not discriminate between women and men. Beyond this legislation, the Government does not have the right to intervene directly in wage negotiations in business in the private sector. The pay-system of the public sector does not discriminate between women and men.

75. Over the last three years, the most significant increases in the share of women have been in administrative services (+3.3 percentage points), public administration (+3 percentage points) and IT (2.7 percentage points). To continue the favourable tendency, the Government promotes the STEM fields to women and girls (see paragraph 42).

76. According to its mandate under the Equal Treatment Act, it is the Equal Treatment Authority that is competent to examine and decide on cases of discrimination. As of January 2021, the Equal Treatment Authority merged into the Office of the Commissioner for Fundamental Rights, see paragraph 21 above.

77. Measures taken by the Equal Treatment Authority to raise awareness among employers included the publication of summaries on its website about its decisions finding a violation of the principle of equal treatment and also about settled cases, communication campaigns on all forms of discrimination as well as providing short lectures as part of settlements to staff of employers against whom the complaint was directed. The Authority also commissioned research on the perception of discrimination and published the results in its websites.

78. The Authority did not directly engage in the development of mechanisms to conduct job evaluations. In cases of equal pay however, the Authority found the existence of objective job-evaluation systems in the practice of employers beneficial regarding the identification of employees in a comparable situation to that of the complainant.

79. The Hungarian Labour Code already allows for various types of atypical employment (e.g. job-sharing, teleworking, time bank scheme). The Agenda 2021–2030 expressly sets out the promotion of atypical forms of employment e.g. by the expansion of the Family-Friendly Workplace tender program that is a yearly tender for a non-refundable financial support available for both public and private workplaces that introduce family friendly measures.

80. The Hungarian Labour Code provides for extra paid leave for both parents annually, as well as a paid paternity leave upon childbirth. The provisions on paternity leave and parental leave will be amended due to the transposition of Directive 2019/1158 of the European Parliament and of the Council on work-life balance for parents and carers. The deadline for the first stage of transposition is 2 August 2022.

81. Before the pandemic in 2020, female employment has improved steadily. Between 2010 and 2019, the number of employed women grew by 15 per cent and, parallel, the female unemployment rate fell from 10 per cent to 3.3 per cent (a historic low since the regime change). This steady tendency was broken by the pandemic that hit those sectors especially hard in which women were frequently employed. Female employment rate reduced by 2 per cent, yet it is believed that this indicates an exceptional period, rather than a change of trends. The Government of Hungary vigorously supports the recovery from the COVID-19 crisis, as evidenced by the Economy Protection Action Plan.

 Table 3

 Female employment data



82. The share of part-time workers in Hungary has been traditionally low, yet a continuous growth is apparent.

 Table 4

 Full-time and part-time female employment data

| *Year* | *Part-time employed women, thousand* | *Rate of women in part-time employment, %* |
| --- | --- | --- |
|  |  |  |
| 2018 | 139.6 | 6.9 |
| 2019 | 152.8 | 7.5 |
| 2020 | 164.7 | 8.2 |

*Source*: Hungarian Central Statistical Office.

83. Labour market indicators for people with a disability have improved in recent years, while this group of workers is characterised by significantly lower employment than the total labour force.

 Table 5

 Labour market data for women aged 19–64 with disability

| *Year* | *Employed, thousand* | *Employment rate, %* | *Unemployed, thousand* | *Unemployment rate, %* | *Activity rate* |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
| 2018 | 60.6 | 22.2 | 5.3 | 8.1 | 24.2 |
| 2019 | 60.5 | 22.6 | 5.9 | 8.9 | 24.9 |
| 2020 | 59.7 | 25.2 | 4.3 | 6.7 | 27.0 |

*Source*: *Hungarian Central Statistical Office*.

84. The labour market indicators of the Roma population are generally worse than the average indicators, irrespective of gender. Data for the past three years are presented in the below table.

 Table 6

 Labour market data for Roma and non-Roma women

| *Year* | *Employed Roma women, thousand* | *Unemployed Roma women, thousand* | *Employment rate, %* |  | *Unemployment rate, %* |
| --- | --- | --- | --- | --- | --- |
| *Roma women* | *non-Roma women* | *Roma women* | *non-Roma women* |
|  |  |  |  |  |  |  |
| 2018 | 32.9 | 7,4 | 35.6 | 67.5 | 18.3 | 3.5 |
| 2019 | 31.5 | 5,1 | 38.7 | 67.8 | 13.8 | 3.1 |
| 2020 | 28.2 | 6,1 | 35.1 | 67.7 | 17.8 | 4.0 |

*Source*: *Hungarian Central Statistical Office*.

85. Data on international migration disaggregated by sex published by the Hungarian Central Statistical Office are not available.

86. In order to tackle sexual harassment at the workplace, the Equal Treatment Authority published an information booklet titled Preventing Harassment at the Workplace and Forms of Legal Redress (2015), awareness-rising communication campaigns on all forms of discrimination as well as providing short lectures as part of settlements to staff of employers against whom the complaint was directed.

87. The number of cases considered by the Equal Treatment Authority concerning sexual harassment claims submitted by women in the years 2016–2020, as well as their outcome are presented in the table below. In 2021, no new complaints of sexual harassment at work have been received yet.

| *Year* | *Number of cases* | *Decision establishing a violation of the principle of equal treatment* | *Settlement* | *Rejection of the complaint on its merits* | *Termination of proceedings* | *Rejection of the complaint on procedural grounds* |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| 2016 | 4 | 1 | 1 |  | 2 |  |
| 2017 | 4 |  | 1 | 1 | 2 |  |
| 2018 | 4 |  | 1 | 3 |  |  |
| 2019 | 1 |  |  | 1 |  |  |
| 2020 | 5 |  |  | 3 | 1 | 1 |
|  **Total** | **18** | **1** | **3** | **8** | **5** | **1** |

88. Hungary submitted its 2021 National Recovery and Resilience Plan to the European Commission on 11 May 2021, and this plan is currently in the process of being accepted. The submitted version includes significant support for the development of nursery places. The rationale behind the support is that the gender employment gap may be reduced via encouraging the reconciliation of work and family life that in turn can be supported by improving the number of nursery places and promoting access to affordable, sustainable and quality childcare. The development of high-quality nursery care creates new institutions, services, and jobs, and it supports women raising children under the age of 3 to return to the labour market.

 Health

 Life expectancy

89. Life expectancy at birth in Hungary grew significantly between 2000 and 2017 (from 71.9 years to 76.0 years), an increase slightly higher than the average across the EU (3.6 years). This increase is mainly driven by a reduction in mortality caused by cardiovascular diseases, in particular stroke.

 Table 7

 Life expectancy in the EU and in Hungary



90. In 2010, the healthy life expectancy at birth of women was 59 years, rising by 2.5 years in 2018, i.e. 61.5 years.

91. In 2019, women in Hungary lost 35,503 healthy life years per 100,000 people. Chronic non-communicable diseases account for the 90 per cent of women’s health losses was caused by, while 7 per cent was caused by injuries, and 3 per cent by infectious, maternal neonatal and nutritional diseases.

92. For both men and women, the leading causes of death are circulatory diseases, cancers, and respiratory diseases, as evidenced by the below table.

|  | *Crude mortality rate, 2018* |  | *Standard mortality rates, 2018* |
| --- | --- | --- | --- |
|  | *Number of cases, 2018* | *Total number of cases by %* | *Number of cases per 100,00* | *In comparison with EU 28 (2016)*  | *Change compared to 2011* | *Change in comparison with EU28 since 2011* |
|  |  |  |  |  |  |  |
| **Women** |
|  **Total mortality** | **67 029**  | **100%** | **1 179** | **144%** | **-4%** | **-2%** |
| **Circulatory system diseases** | **36 156** | **54%** | **636** | **210%** | **-7%** | **8%** |
|  Myocardial ischaemia | 17 435 | 26% | 307 | 354%  | -11% | 26% |
|  Cerebrovascular disease | 6 416 | 10% | 112 | 154% | -25% | -17% |
| **Malignancies**  | **15 297** | **23%** | **267** | **128%** | **-2%** | **-4%** |
|  Lung | 3 375 | 5% | 59 | 184% | 5% | -3% |
|  Breast | 2 127 | 3% | 37 | 113% | -7% | 6% |
|  Colon and rectum | 2 198 | 3% | 38 | 165% | -6% | 0% |
|  Pancreas | 1 082 | 2% | 19 | 126% | -11% | -25% |
|  Ovary | 716 | 1% | 13 | 120% | -9% | -3% |
|  Cervix | 408 | 1% | 7 | 193% | -5% | 8% |
| **Men** |
|  **Total mortality** | **64 016** | **100%** | **1 833** | **147**% | **-9%** | **-10%** |
| **Circulatory system diseases** | **28 539** | **45**% | **888** | **208**% | **-11%** | **-8%** |
|  Myocardial ischaemia | 14 667 | 23% | 460 | 283% | 14% | 6% |
|  Cerebrovascular disease | 4 851 | 8% | 150 | 172% | -27% | -30% |
| **Malignancies** | **17 953** | **28%** | **468** | **131%** | **-7%** | **-8%** |
|  Lung | 5 341 | 8% | 131 | 159% | -16% | -13% |
|  Colon and rectum | 2 836 | 4% | 77 | 191% | -11% | -13% |
|  Prostate | 1 314 | 2% | 42 | 106% | -5% | 0% |
|  Pancreas | 1 071 | 2% | 27 | 137% | -12% | -23% |

93. The total mortality decreased by 4 per cent for women between 2011 and 2018, with mortality from cerebrovascular disease decreasing by 27 per cent. The same trend was observed for early mortality: for both sexes, its value decreased between 2011 and 2018. There was also a positive trend in preventable and avoidable deaths between 2011 and 2016, with a decrease of 11 per cent over 5 years. Concerning maternal mortality, in 2015, 15 mothers died in Hungary between the onset of pregnancy and the 42nd day after giving birth. According to a report published in 2015 by Save The Children, the maternal mortality ratio in Hungary is 17, ranking Hungary 51st among the 179 countries surveyed. The most common causes of maternal mortality in Hungary are uncontrollable severe bleeding during pregnancy or childbirth, cardiological diseases, pregnancy poisoning, and thrombosis. Nearly a quarter (22.9 per cent) of all deaths of women was caused by cancer.

 Frequency of risk behaviours

94. The majority of women’s risk factor-related health losses were caused by, in order of prevalence, hypertension, high body mass index, high blood sugar and cholesterol, smoking and high salt intake in both 2010 and 2019.6

95. According to the latest national European Population Health Survey in 2019, 27 per cent of the population over the age of 15 smoke, and 25 per cent report smoking every day. Both men and women in the 18-34 age group have the highest rates of daily smoking.[[10]](#footnote-10)

96. In 2019, 1.5 per cent of the female population were heavy drinkers. The proportion of heavy drinkers within the female population increased between 2009 and 2019 from 1.1 per cent to 1.4 per cent.[[11]](#footnote-11)

97. Regarding the adult population, men use a higher proportion of illicit drugs than women in their lives (see Annex).

 HIV prevalence

98. In 2020, the total number of registered HIV infected persons was 201, of which 15 were women (see Annex). The distribution of 2,129 patients treated for HIV in 2019 by age and gender is presented below. Women represent a significantly lower proportion (12 per cent), and the majority of HIV patients is aged 30-49 years:[[12]](#footnote-12)

 Table 8

 Number of patients in the HIV indication by gender and age



*Source*: *National Institute of Health Insurance Fund Management*.

 Measures taken – organised screening system

99. Currently, there are three types of organized medical screenings covering age groups at risk: (i) biannual breast screening (mammography); (ii) cervical screening (cytology) every 3 years after a negative screening for women aged 25 to 65 years; (iii) since 2018, organised colon and rectum screening. The organization, supervision and monitoring are conducted by a central coordination, provided by the National Public Health Centre (the NPHC), and a territorial coordination is by county medical screening coordinators.

 Organized breast screening (mammography)

100. Concerning women, malignant breast cancer accounts for nearly 2,200 deaths and more than 9.000 new diagnoses each year. Since the launch of organized breast screening in 2002, 10.595 malignant cancers were diagnosed. The target population is about 1.500.000 women aged 45 to 65 years. On average 40 per cent of the invited women attend the organized breast screening. However, the proportion of women are tested is higher (approx. 70 per cent), because numerous women take their diagnostic mammography test in public or private health care service.

101. The service’s capacity is adequate even with full public participation: 39 Complex Mammography Centres and 10 Mammography Screening Station provide territorial care, covering the whole country.

 Organized cervical cancer screening

102. In Hungary, cervical cancer accounts for more than 400 deaths and 1.000 new diagnosis each year. The target group of the screening is women aged 25-65 (approx. 2.700.000 persons). The annual number of eligible for an organized screening is 400.000 people. According to the data of NPHC, the proportion of women are tested is around 60 per cent. The human resource and infrastructural requirements are adequate and allow the whole target group to participate.

103. While screening allows early detection of pre-cancerous or cancerous lesions, vaccination against human papillomavirus (HPV) can prevent HPV infection that causes the disease. As reiterated in paragraph 220 of the 9th periodic report of Hungary, the Government provides vaccines against HPV for girls aged at least 12 in the 7th grade of primary school. In the 2019/2020 school year, 83.5 per cent of the eligible girls received the vaccine. Since 2020, this free vaccination program extended to boys aged at least 12 in the 7th grade of primary school, thereby preventing the spread of the disease more effectively.

 Organized colon and rectal screening

104. In Hungary, colon and rectum tumour accounts for 5,000 deaths and 11,000 diagnosis each year. To discover and remove the preventive condition of early colon cancer in average-risk individuals, and to detect and receive early treatment of pre‑existing early-stage tumours, biannual colorectal cancer screening for both sexes aged 50–70 years (approx. 2,600,000 persons) are organised.

 Measures taken – supporting the health care of Roma women and women living in rural areas

 ‘Bring the screening closer to people’ mobile screening programme

105. This program aims to increase the participation rate in screenings/tests. 10 general test buses provide screening services near the place of residence, primarily in so-called ‘catching-up settlements’. Participation in the general health check, cardiology and gynaecological examination and a colon test unit package for the eligible people is uniformly ensured in all settlements. Further tests (angiological, dermatological, ear-nose acology and dietetic advice) are available according to the spare capacity at local/county health service providers contracted with the NPHC. The participation rate is detailed in the Annex.

106. During the pandemic, test buses took part in COVID-19 testing in the Central Hungary region.

 School programs to promote full health, mental health and reduce addictions

107. In 2020, the State Secretariat for Health launched a complex prevention program in schools – School programs to promote full health, mental health and reduce addictions – in association with State Secretariat for Public Education and in implementation of the Hungarian School Sport Federation. The program aims to contribute to reducing school aggression, early school leaving and prevention of addictions by supporting the psychological health development of children and their teachers, by increasing the methodological knowledge of teachers and by organizing preventive health-promoting exercise and other programs for public education institutions. The program consists of four sub-programs and several interventions (detailed in the Annex).

 Centre of Excellence of Eastern European nurses to reduce smoking

108. Between 2014 and 2019, the National Korányi Pulmonology Institute participated in the international project ‘Centre of Excellence of Eastern European nurses for reduce smoking’, which aims to research the smoking habits of health professionals and to train health professionals to perform quit-support activities. In 2018-2019, 43 nurses were trained in Szabolcs-Szatmár-Bereg County, who deal with smoking pregnant and breastfeeding mothers. After the one-year follow-up, 18 nurses reached 57 patients, out of which 43 persons stayed abstinent until the end of the pregnancy, and 19 persons quitted smoking.

 Measures to reduce drug-use in segregated areas

109. Since 2016, numerous expert signals and explorative research results have reported that the use of new psychoactive substances in rural and urban segregates, among disadvantaged and cumulatively disadvantaged populations, has increased significantly. To address the issue, the Ministry of Human Capacities launched a comprehensive program, detailed in the Annex.

 Economic and social benefits

110. Concerning measures addressing poverty and exclusion, the measures adopted by the Government of Hungary equally target women and men. We note however, that women are overrepresented in single-parent families, therefore, the beneficiaries of these measures were mostly mothers. Hungary supports single parent families by providing:

 • A higher amount of family allowance, that can be deducted both from the personal income tax and from the pension and health insurance contributions;

 • Orphan care (this monthly benefit will increase from HUF 24,250 (USD 85) to HUF 50,000 (USD 175) in 2022);

 • A

 • Advance payment of child support;

 • Extra days off to care for a child;

 • Enjoying additional protection in labour law (protection against dismissal, atypical employment); and

 • Special support for children raised in single-parent families to go on holiday in so-called Elizabeth camps on the shores of lake Balaton.

111. Further, single parent families may be entitled to the regular child protection allowance on more favourable terms than two-parent families, as the income limit below which the allowance can be granted is lower (since 2018, 145 per cent of the minimum old-age pension). Since 2017, children of single parent families are given priority at the nursery admission. Another important decision of the Government was to provide financial support of half a billion HUFs (approx. USD 1,700,680) for setting up a centre where lawyers, family care workers, psychologists and other professionals help single parent families.[[13]](#footnote-13)

112. Married couples, partners and single parents can also apply for Family Housing Support benefits based on their already borne children. Single-parent families can further benefit from all the support of the new Home Creation Program, launched in 2021.

113. The coverage of the new form of early retirement, as provided by Act LXXX of 1997 on Social Security Pension Benefits, does not extend to women working in the informal economy, but it takes into account periods in which women were raising their children or were caring for their severely disabled child.

114. To promote female entrepreneurship, the SEED Foundation – founded by ministries, trade associations, a university and a credit institution – has been operating various programs, as presented below:

 ‘Dobbantó’ Female Entrepreneurial Program

115. This competence development program, supported by Budapest Bank, is a twelve-day-long training for the female entrepreneurs and for those who aim to establish an enterprise.[[14]](#footnote-14) The program’s goal is to equip the participants with solid entrepreneurial knowledge and help build a network. Usually 20–22 women participate in a course, selected from a 2.5–3 times oversubscription of applicants. In the past 12 years, SEED has trained about 500 female entrepreneurs, most of them still being active members of the entrepreneurship network. Taking into account the attendees in club events, altogether 2,000 entrepreneurs participated in this program.

116. In 2014, the European Training Foundation and the European Institute For Gender Equality included the program in the 12 European’ Best Practice’. A short video introductory video is available at <https://youtu.be/9uI_e3Fg_X8>.

 Online Business Model Canvas workshops

117. This is an 8-hour intensive workshop leading through the steps of creating a Business Model.

 Quick IT and digITall workshops

118. Seed Foundation has launched a 2 times half-day training focusing on Entrepreneurial Digitalization for women entrepreneurs under the name QuickIT with the support of the Budapest Bank in 2020. The goal is for women to increase their competitiveness by improving their digital literacy. Later on, SEED has extended the training for 4 days and integrated it into the Dobbantó Program (see above).

 National Mentor Program

119. This 6–12 month-long program connects entrepreneurs, who would like to get advice on certain aspects of their company with a mentor. Mentors are volunteering entrepreneurs with significant experience and knowledge who provide guidance to their mentees through monthly meetings. Almost 200 mentees took part in the programme, all selected via interviews.

120. The National Mentor Program has a subgroup dedicated for female businesses, and 92 of 201 mentees are enterprises led and owned by women. Almost half of the mentors are also well-established female entrepreneurs who are familiar with and can provide guidance with issues regarding gender differences in business and other issues specific to female owned enterprises.

 Online Entrepreneurial Forum

121. The Online Entrepreneurial Forum was created in 2020 with the aim to bring together experts and entrepreneurs in an online forum to share their experiences and knowledge. The SEED Foundation has held 30 of such forums so far, one of them being specifically dedicated to female businesses during the economic crisis. On this forum, national and international research data were presented, and individual cases were showcased.

 Successful women’s enterprises

122. Since 2019, SEED issues a call for applications each year to find female entrepreneurial/managerial role models.[[15]](#footnote-15) The award granted by SEED is beneficial both from PR and from network building perspectives.

 Disadvantaged groups of women

123. The Police does not have a register of racial origin, in particular of disadvantaged groups of women, elderly women, women with disabilities, rural women and women belonging to minorities, including Roma.

124. According to the Act XXXIV of 1994 on the Police, the police officers must act without bias. The National Police Headquarters and the National Roma Self-Government concluded a cooperation agreement. The aim is to establish a conflict- and prejudice-free relationship between the Police and the Roma minority. To execute the actual tasks stemming from this cooperation agreement, annual evaluation are carried out, and the future tasks are in a yearly action plan.[[16]](#footnote-16)

125. Act II of 2007 on the Admission and Right of Residence of Third Country Nationals (the Act on Admission and Residence) introduces the concept of ‘Persons eligible for preferential treatment.’ The term refers to unaccompanied minors, minors, elderly people, disabled people, pregnant women, single parents with minor children and persons who have been subjected to torture, rape or other serious forms of psychological, physical or sexual violence. These persons must be paid special attention to during the administrative proceedings.

126. In the asylum-proceedings, female applicants can choose the gender of the interpreter or case officer participating in their personal interview.[[17]](#footnote-17) During the hearings, if a topic such as sexual harassment or domestic violence comes up, the authority pays special attention.

127. When providing reception conditions, women shall be accommodated separately from men, except for married couples, and families with minors. The needs for persons eligible for preferential treatment, and the gender identity of the asylum-seeker are also taken into account.

128. Persons with special needs may be eligible to additional health care services, rehabilitation, psychological and clinical psychological care or psychotherapeutic treatment free of charge.

129. In the reception facilities, the social workers pay attention to pre-integration when organizing leisure programs (for example by providing Hungarian language lessons) and organize programs separately for women (for example hand crafts).

130. Pursuant to Act on Admission and Residence, a residence permit may be issued on the grounds of family reunification, among others and broadly speaking, to a third-country national who is a spouse, a minor child (including adopted or foster) or – on special conditions – parent/sibling of:

 • A Hungarian citizen;

 • A third-country national holding a long-term visa, or residence permit, or immigration permit;

 • A refugee in Hungary.

131. For persons who remained in Hungary beyond the duration of lawful residence due to humanitarian reasons or reasons in connection with his/her gainful employment, or those who are victims of trafficking in human beings, a certificate of temporary residence shall be issued. Further, even in the absence of regular eligibility, a residence permit may be issued to migrants who have been subjected to particularly exploitative working conditions, or to third-country national minors who were employed illegally. ‘Particularly exploitative working conditions’, as defined by the Act on Admission and Residence, refer to working conditions, including those resulting from gender-based discrimination which, for example, affect workers’ health and safety, and which offend human dignity.

 Marriage and family relations

132. The protection of the family, being a fundamental unit of society and the basis of the survival of the nation, is a high priority of Hungary. The Fundamental Law protects the institution of marriage as the voluntary union of a man and a woman, and the basis of family ties are marriage and the relationship between parents and children.

133. The measures of the Family Protection Action Plan are widely available, without any differentiation of families. Hungary provides vast support to couples and families who, in the absence of such support, would not be able to move forward according to their plans and desires in terms of home creation, starting a family or expand their respective families.

134. To help women in an abusive relationship, the support services detailed in paragraphs 25–30 are widely available in the whole country.

135. Under the Civil Code, while the legal age for marriage is 18 years, minors above 16 years may marry exceptionally. This requires the prior consent of the Guardianship Authority that is preceded by a meticulous investigation (involving personal interviews, the permission of the applicant’s legal representative, opinion of the applicant’s GP of his/her mental and physical condition, personal income assessment etc.). A marriage of a minor without the prior consent of the Guardianship Authority is void. For this reason, there is no criminal offence as ‘child marriage’, hence no related case either. In 2019, out of 438 applications submitted by minors for the permission to marry, 65 were rejected.

 Climate change and disaster risk reduction

136. As part of the objective “Promoting climate change adaptation and risk prevention”, EU Member States should have a national or regional risk assessment for disaster management, including climate change adaptation, in order to implement related investments. Pursuant to Article 6 (a) of Decision No 1313/2013/EU of the European Parliament and of the Council of 17 December 2013 on an EU Civil Protection Mechanism, Hungary prepared a National Disaster Risk Assessment Report in 2014, revised in 2020.

137. The report identified 12 types of risk, with a particular focus on climate change-related risks (e.g. heat and cold waves, drought, floods). 30 risk scenarios and 72 sub‑scenarios were developed, depending on the possible consequences. The report applied an integrated and holistic approach, taking into account the potential impacts on the stability of society without any discrimination (in this vein, not mentioning a gender perspective specifically).

138. In relevant decision-making mechanisms, including decisions on disaster risk reduction and adaptation to climate change, the participation of women within the professional disaster management body in all levels. The “National Disaster Management Directorate General” issued the “Equal Opportunity Plan for Disaster Management Organization”, that stipulates the requirement of equal treatment and equal opportunities for employees. The design principle of equality prohibits direct and indirect discrimination, in particular discrimination on gender.

1. <https://www.ksh.hu/docs/hun/xftp/idoszaki/mikrocenzus2016/mikrocenzus_2016_4.pdf> table 2.3. [↑](#footnote-ref-1)
2. See Government Decision 1685/2020. (X. 22.). [↑](#footnote-ref-2)
3. <https://www.mcc.hu/en/women-public-leadership-programme>. [↑](#footnote-ref-3)
4. Government Decree 110/2012. (VI. 4.) on the issuance, implementation and application of the National Core Curriculum. [↑](#footnote-ref-4)
5. Global Citizenship Education (UNESCO). [↑](#footnote-ref-5)
6. <https://njt.hu/translation/J2012T0100P_20200716_FIN.PDF>. [↑](#footnote-ref-6)
7. Entry into force: 1 July 2020. [↑](#footnote-ref-7)
8. <https://www.nokmagyarorszagert.hu/dij/>. [↑](#footnote-ref-8)
9. Indicators are repetition of school years, having older siblings already dropped out, having parents with low qualifications, lack housing etc. [↑](#footnote-ref-9)
10. EUROSTAT. <https://www.ksh.hu/docs/hun/xftp/idoszaki/elef/te_2019/index.html#dohnyzssalkoholfogyaszts>. [↑](#footnote-ref-10)
11. Hungarian Central Statistical Office: <https://www.ksh.hu/stadat_files/ege/hu/ege0038.html>. [↑](#footnote-ref-11)
12. National Public Health Centre World AIDS Day – 1st December. Information (01.12.2020). <http://neak.gov.hu/sajtoszoba/kozlemenyek_eu_napok/egeszsegugyi_vilagnapok_aids>. [↑](#footnote-ref-12)
13. See at <https://egyszulo.hu/english>. [↑](#footnote-ref-13)
14. See at <https://youtu.be/DV2ZQMjelOg>. [↑](#footnote-ref-14)
15. The call for this year is already available at <https://seed.hu/hirek/a-tortenet-folytatodik-sikeres-vallalkozonok-es-noi-vallalatvezetok-kerestetnek-2021-ben-is>. [↑](#footnote-ref-15)
16. HNP HQ decree 22/2011. (X. 21.) on Cooperation and Contact between the Police and Roma Minority Self-Governments. [↑](#footnote-ref-16)
17. Government Decree 301/2007 (XI. 9.) on the implementation of Act LXXX of 2007 on Asylum. [↑](#footnote-ref-17)