



**Convention on the Elimination
of All Forms of Discrimination
against Women**

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**Committee on the Elimination of Discrimination
against Women
Fifty-fourth session**

Summary record of the 1106th meeting

Held at the Palais des Nations, Geneva, on Thursday, 14 February 2013, at 3 p.m.

Chairperson: Ms. Ameline

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The meeting was called to order at 3 p.m.

Consideration of reports submitted by States parties under article 18 of the Convention *(continued)*

Combined seventh and eighth periodic reports of Hungary (continued)
(CEDAW/C/HUN/7-8; CEDAW/C/HUN/Q/7-8 and Add.1 and Add.1/Corr.1)

1. *At the invitation of the Chairperson, the delegation of Hungary took places at the Committee table.*

Articles 10 to 14

2. **Ms. Zou** Xiaoqiao wished to know why the State party report contained no data on education disaggregated by gender and ethnicity. Gender segregation in education continued to prevail, with women disproportionately represented in fields such as teacher training and education science and poorly represented in information technology, engineering and agriculture. She asked whether policies had been implemented to encourage women and men to pursue non-traditional careers and what awareness-raising programmes had been launched to eradicate gender stereotypes and promote gender equality. She noted with concern that the new national core curriculum included courses to prepare students for family life, as such courses might perpetuate gender stereotypes. What were the State party's reasons for including family life in the curriculum?

3. **Mr. Bruun** said that the State party should take a more gender-sensitive approach to the labour market. Labour market participation for women was very low and the unemployment rate among women remained high, at 11 per cent. Few efforts had been made to strike a balance between women's family and professional lives. On the contrary, the measures in place to prevent mothers of children under 3 from losing their posts had been removed or weakened during the reporting period. He asked what measures the State party had taken to deal with women's weak position in the labour market.

4. Noting that the gender pay gap had steadily increased during the reporting period, he wondered why employers were not obligated to provide employee pay data broken down by gender and why the Government, for its part, had failed to collect such data. More information was needed on the work of the Equal Treatment Authority and its handling of cases of employment discrimination. He wondered whether sanctions had been applied in cases of discrimination and what follow-up measures had been taken. Minority women's representation in the labour market continued to be a matter of particular concern. New provisions had been introduced in the Labour Code to support women with disabilities, but the targeted employment programme for preventing discrimination against Roma women had come to an end. He wished to know what was the impact of the programme on the situation of Roma women.

5. **Ms. Patten**, noting that several cases of pay discrimination had been brought before the Supreme Court during the reporting period, she wished to know whether the Government had been promoting greater transparency among companies in the disclosure of salaries as a means of bridging gender pay gaps. She commended the State party's pledge to create 1 million new posts over the coming decade but asked for further clarification on what steps had been taken to ensure that occupational segregation did not occur. She also wished to know whether there were efforts to encourage women to take up non-traditional careers, to heighten awareness among companies about gender issues and to include women in innovative industries. She wondered what measures had been taken with social partners to analyse existing collective agreements for hidden discrimination, to ensure that women were fairly represented in the collective bargaining process and to

develop new gender-sensitive criteria to evaluate work performance, with a view to promoting equal pay for equal work.

6. The number of reported cases of sexual harassment had remained low, which suggested that women encountered difficulties in seeking remedies through the Equal Treatment Authority. She therefore asked what steps the Government had taken to address the issues faced by women in filing complaints. Further information was needed on the legal assistance available to women and the labour inspectorate's role in addressing violations of equal treatment.

7. **Ms. Schulz** requested clarification on the guarantees provided by the State party to ensure that women had access to safe, legal abortions in view of the new constitutional provision to protect life from the moment of conception. At present, only surgical abortions were available to women, as the Government had restricted the use of medical abortion drugs. She asked the State party why it denied access to such drugs, which were considered to be a safer and less invasive alternative to surgical interventions. In order to have access to abortion services, women must attend two counselling sessions, with a three-day waiting period between the first and second meeting. Was the Government planning on removing such mandatory counselling requirements, which ran contrary to recommendations from the World Health Organization? If not, would it consider eliminating the three-day waiting period to provide women with quicker access to safe, legal abortion? Independent sources also indicated that health-care workers in Hungary had provided women with information to deter them from undergoing abortions. What steps were the Government taking to retrain health-care workers to provide objective information on the risks of abortion and the risks of continuing with an unwanted pregnancy? She sought clarification of a poster campaign on the protection of unborn life that had been endorsed by the Government, which seemed to take an anti-abortion rather than pro-adoption position.

8. Noting that the range of contraceptive methods available to women was restricted owing to cost considerations and waiting times, she asked why the Government had not improved access to modern and affordable contraception, especially for disadvantaged women. Lastly, she asked whether any steps had been taken to enable more women to give birth at home and to reduce the high level of unnecessary procedures such as caesarean sections in hospital.

9. **Ms. Gbedemah**, noting that a provision of the Health Act allowed for the sterilization of women with disabilities with restricted or no legal capacity, wished to know what steps the Government had taken to abolish that provision. Had the National Disability Council expressed its views on the matter? What steps had the State party taken to ensure that the recommendations of the Council took due account of the jurisprudence of the Committee? Had a comprehensive policy on persons with disabilities been implemented and were the legal rights of women with disabilities covered?

10. She wished to know what measures had been put in place to provide women sex workers with adequate access to health care. Had the Government taken any steps to produce a health policy on the sexual and reproductive needs of sex workers?

11. **Mr. Simonyi** (Hungary) explained that the State party had data on the number of students attending vocational, secondary and higher education institutions. However, it did not have disaggregated data on Roma girls. Gender inequality in education continued to exist, with girls being overrepresented in grammar schools but underrepresented in vocational colleges. The Government had introduced courses for children aged 3 to 6 to tackle gender stereotypes and discrimination at a very early age. Such courses continued at the primary and secondary school level. Courses on family life and basic human rights were two distinct subjects that were handled separately by schools. The courses aimed to strengthen the notion of family and educate students about social responsibility.

12. **Ms. Grábics** (Hungary), responding to questions on the representation of women in tertiary education, said that certain gender stereotypes still prevailed. Women were underrepresented in scientific and technical fields and overrepresented in other subjects traditionally reserved for women. The Government had launched a new scheme to empower women and break down gender segregation with a focus on disadvantaged women. The Ministry of Education had received a grant from the European Union in 2012 for the scheme and would reapply for another in 2013 to cover specific gender issues more extensively, such as career counselling for women and equal opportunities for Roma women and women with disabilities, and to reach a higher number of children.

13. **Ms. Táncsics** (Hungary) said that the Ministry of National Resources had increased university enrolment and the number of grants awarded, which would have a positive impact on women's representation in tertiary education.

14. **Ms. Gregor** (Hungary) said that the Equal Treatment Authority investigated every reported case of gender-based pay discrimination and imposed sanctions, as appropriate, including fines against companies that violated the law on equal pay for equal work. Under a recent Government decree, the name of any employer found guilty of gender-based pay discrimination would appear on the website of the Equal Treatment Authority. The Authority had in some cases requested employers to adopt wage transparency policies to eliminate gender pay gaps, subject to fines for non-compliance.

15. **Ms. Szalai** (Hungary) said that the employment rate had remained stable between 2007 and 2011 and women had not been more adversely affected by the economic crisis than men. The unemployment rate stood at around 11 per cent for women and men in 2011. Hungary lagged behind other members of the European Union in providing for flexible working arrangements for young mothers, with women with children under 3 years of age in particular having great difficulties in finding the kind of employment that would allow them to reconcile family and work life. Although her Government had made some progress on creating new day-care centres and day nurseries to address the problem, more such institutions were needed. Lastly, a major employment programme was under way to increase the employment of women. A component of that programme targeted women aged under 25 and another women aged over 55.

16. **Ms. Török** (Hungary) said that a very popular programme was in place to promote the employment of Roma women and welfare of Roma children, reaching 1,000 Roma women.

17. **Ms. Horvath** (Hungary) said that her Government was in no way seeking to restrict women's access to safe and legal abortions. Although the drug used for medical abortions had been registered in Hungary, the drug was not currently on the market because of a pending lawsuit involving patent rights. Other countries had been affected by similar lawsuits.

18. There was no evidence to suggest that medical staff had tried to influence women's decisions about whether or not to have an abortion. Although doctors were free to decide whether they wished to perform abortions, they were prohibited by law to refuse performing an operation if such a refusal would be detrimental to the patient's health. All women in Hungary had legal access to abortion, which was covered by the public health-care system. About 125 types of modern and affordable contraceptives were available in Hungary. The price of contraceptives was subsidized for persons unable to afford them.

19. Home births had always been an option in Hungary. Some progress had been made in promoting safe home births. For example, insurance companies currently offered coverage of pregnancy complications to women who chose home births. Legislation regulating home births, which had been enacted in 2011, was currently under review.

20. Unfortunately, caesarean sections were very common in Hungary, accounting for 34 per cent of all deliveries, and further efforts were needed to train doctors to avoid performing unnecessary operations. While the role of midwives was growing in Hungary, an appropriate legislative framework enabling midwives to assist in safe home births was needed.

21. Turning to the issue of forced sterilization, she said that compensation had been granted to the victim of the procedure, in accordance with the recommendation made in the concluding comments of the Committee (CEDAW/C/HUN/CO/6, para. 9). Communication No. 4/2004, *Ms. A.S. v. Hungary*, had been distributed to all hospitals in Hungary and the recommendations of the Committee translated and published on the Government website. The law had been amended in 2008 in order to bring it into line with international norms concerning women with disabilities. No one could be forced to undergo sterilization in present-day Hungary.

22. All sex workers were guaranteed full access to health services in Hungary. Furthermore, health workers received continuous training on the prevention of sexually transmitted diseases among sex workers.

23. **Mr. Szőke** (Hungary) said that the Hungarian National Disability Council was seeking to involve more non-governmental organizations representing children and women with disabilities in its work. Among the advances made under new legislation on persons with disabilities was the establishment of a National Disability Programme, requiring the Government to submit reports on the progress of this Programme.

24. **Ms. Zupcsán** (Hungary), in reply to the questions concerning the poster campaign, said that a third of all pregnancies in Hungary were terminated. Consequently, persons wishing to adopt had waiting periods of 2 to 3 years before a child came up for adoption. The campaign also sought to place children currently in care institutions with families.

25. **Ms. Debreceni** (Hungary) said that there were groups in Hungary challenging the laws on abortion before the Constitutional Court, claiming that the right to life of the foetus was not sufficiently protected. Pregnant women in financial difficulty received State support in the form of tax allowances and other subsidies, beginning in the twelfth week of pregnancy.

26. **Ms. Pimentel** asked whether the policy of protecting the foetus meant that the right of the child to be born prevailed over the woman's right to decide whether she wanted to have the child. She observed that although private health-care professionals had the right to refuse to perform abortions, public services were legally bound to make abortions available.

27. **Ms. Schulz** would like an update on Agnes Géreb's current situation and whether the champion of home births had been released from house arrest. Was she still banned from assisting in home births? She would be well qualified to train obstetricians in birthing techniques that avoided caesarean sections or other unnecessary medical interventions. She asked whether the Government intended to waive the obligation of compulsory counselling on abortion. Lastly, had it conducted evidence-based evaluations of the physical, psychological and emotional consequences of carrying to term unwanted pregnancies for the purpose of adoption?

28. **Ms. Al-Jehani** noted with concern that the State party's focus on demographic challenges could infringe on women's rights. She wished to know how the national school curriculum dealt with family life and parenting. Was parenting presented as the responsibility of women or of both parents? What kind of Government help was provided to men wishing to take part in child-rearing? Were there any training programmes on child-rearing for men? How did labour laws support men who wished to care for their children?

29. **Ms. Nwankwo** asked what actions had been taken to remedy the lack of unified, comprehensive, age-sensitive and human rights-based reproductive health education in primary and secondary schools.
30. **Ms. Neubauer** (Country Rapporteur) said that many proceedings initiated against the perpetrators of sexual violence, including rape, failed because of inadequate medical records, thus discouraging victims from reporting the crime and seeking redress. The extremely low rate of rape in Hungary, among the lowest in Europe, might well be a reflection of the low level of reporting sexual offences. How did the Government intend to address the problem?
31. **Ms. Zupcsán** (Hungary) said that education on family life was not a substitute for sex education; both were part of the national curriculum and intended for boys and girls alike. There was a growing number of men who performed domestic chores and raised children. Men who cared for their children were also entitled to family benefits.
32. **Ms. Horváth** (Hungary) said that she did not know of any instance in any hospital in which a doctor's refusal to perform abortions had disrupted the provision of legal reproductive health-care services.
33. Turning to the case of Ms. Géreb, she said that her work had been instrumental in promoting home births and had prompted discussions on when it was appropriate for midwives to hand deliveries over to obstetricians. Efforts were being made to increase awareness about unnecessary caesarean sections. She was not aware of any studies on the effects on women of carrying unwanted pregnancies to term.
34. **Ms. Hajdu** (Hungary) said that the courts and the prosecution services had acted fully in accordance with the law in the case of Ms. Géreb, which they had treated with particular seriousness given that it had involved a death. She provided figures on stalking and harassment, including 5,000 reported cases of such offences against women.
35. **Ms. Zupcsán** (Hungary) said that Hungarian society did not hold the expectation that women would become mothers. While she concurred that statistics were needed on the psychological effects of carrying unwanted pregnancies to term it would also be useful to have data on the termination of such pregnancies. It was necessary to draw attention to all dimensions of the issue.
36. **Mr. Simonyi** (Hungary) said that the inclusion of family education in the curriculum was vital to encourage children to develop family values and young people to engage in healthy relationships.
37. **Mr. Bruun** expressed concern that recent changes in tax regulations and social policy had worsened the situation for groups at risk of poverty, particularly single parents and Roma women, that the income of such persons was below the poverty line and that they faced losing their benefits if their children did not attend school. He asked if there was any provision of bank loans and credits for the women who had become unemployed following the widespread closure of micro- and small businesses during the recent crisis. Would the delegation provide an analysis of the new social security system, given that women's entitlements to a pension were largely subject to a requirement of 40 years of paid work? Had there been a gender impact assessment of the new system?
38. **Ms. Patten** asked whether support was provided for women working in the informal sector, often in hazardous conditions. Did the Government have a pro-poor approach linking the informal economy, social protection and empowerment?
39. **Ms. Hayashi** asked how women had benefitted economically from public development funds and recent improvements in infrastructure in rural areas. She noted with satisfaction that the Government was seeking solutions to problems in cooperation with the

Roma people under its national strategy to promote Roma integration. To what extent were the policies of National Roma Self-Government gender-sensitive and what safeguards were in place at the national level to ensure that those policies were in keeping with the Convention? She requested details of the reports on the local equal opportunity situation of the Roma that local authorities were required to submit when applying for European Union development funds or bidding for domestic tenders, in accordance with the national Roma integration policies outlined in the report.

40. **Ms. Zupcsán** (Hungary) said that all people were covered by social security in Hungary and that bringing up children, not retirement, constituted the greatest risk of poverty. Pensions were usually awarded to women after 40 years of work, but women who both worked and raised children were entitled to retire as early as after 32 years of service, as a maximum period of 8 years for bringing up children was taken into account in the pension calculations. Many women opted for early retirement.

41. **Mr. Lantos** (Hungary) said that improvements in infrastructure and public transport since 2007 had greatly enhanced rural women's mobility and access to public administration and health services. There had been a focus on boosting employment in outlying urban residential areas, or microdistricts, through such improvements and incentives to companies; currently only three microdistricts in the Budapest area were not accessible by public transport.

42. **Ms. Szalai** (Hungary) said that road and communications developments had boosted rural women's employment. Many women worked in both the formal and informal economic sectors and workers in the informal economy were being integrated into the formal labour market. In addition, tax incentives were provided to businesses to increase the employment of rural women.

Articles 15–16

43. **Ms. Leinarte** requested clarification of the statement in the report that persons under 16 with diminished capacity could marry with the authorization of the court of guardians. The Constitutional Court considered that the definition of the family set out in recently adopted family law was at variance with the fundamental law, as it was too narrow in scope. Given that only married couples were considered to have legal status, what legal protections were afforded to households consisting of single parents or grandparents caring for their grandchildren? Were there provisions for partnerships other than formal legal marriages and, if so, how were the land rights of women in such relationships protected? Would the introduction of common law marriages in the new Civil Code entail a broader definition of family?

44. **Mr. Tallódi** (Hungary) said that persons between the age of 16 and 18 years lacking full legal capacity required a licence from the guardianship authority to enter into marriage. The number of early marriages in Hungary was under the European average. Single mothers had the same rights as married couples raising children. Lastly, the law had been amended so as to give both heterosexual and homosexual couples the right to enter into registered partnerships, which accorded them a legal status similar to that of married couples.

45. **Ms. Kontra** (Hungary) said that grandparents bringing up their grandchildren were entitled to the same child support and family benefits as parents. Lastly, the presumption of paternity was applied to registered partnerships, which was an important step forward for the rights of the child.

The meeting rose at 5.10 p.m.