Committee on the Elimination of Discrimination against Women
Thirty-ninth session

Summary record of the 801st meeting (Chamber A)
Held at Headquarters, New York, on Tuesday, 31 July 2007, at 10 a.m.

Chairperson: Ms. Gabr (Vice-Chairperson)

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Any corrections to the record of the meetings of this session will be consolidated in a single corrigendum, to be issued shortly after the end of the session.
In the absence of Ms. Šimonović, Ms. Gabr, Vice-Chairperson, took the Chair.

The meeting was called to order at 10 a.m.

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

Sixth periodic report of Hungary (CEDAW/C/HUN/6; CEDAW/C/HUN/Q/6 and Add.1)

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

2. Ms. Rauh (Hungary) said that the Government of the Republic of Hungary was strongly committed to protecting human rights and fundamental freedoms, and eliminating all forms of discrimination. Convinced that the rights of women were in fact fundamental human rights, Hungary attached special importance to their protection and expansion, and fully accepted the norms and values set forth in the Convention. It also considered the periodic dialogue with the Committee to be an excellent opportunity to discuss any difficulties in implementation of the Convention.

3. Since the restructuring of the Government after the general election of 2006, the national mechanism for improving the situation of women had been located within the Ministry of Social Affairs and Labour. Despite a tight budgetary situation, the resources allocated to this field of operations had not been reduced, and the number of staff employed had steadily increased. In the autumn of 2006, the Council for Equality of Women and Men in Society had been restructured. The Council was a consultative and coordinating body, whose members were appointed both by the Government and by relevant non-governmental organizations and included experts involved in outstanding scientific and practical activities related to equality of opportunity for women.

4. The Government was attempting to prevent the development of stereotypes even in childhood. To that end, a DVD containing several educational films on the situation of women had been made. An experimental programme of analytical education dealing with stereotypes would start on a pilot basis in the 2007-2008 school year. With the assistance of non-governmental organizations, in recent years the Government had implemented a series of programmes aimed at increasing the commitment of men and promoting a more equitable division of work between men and women. Almost all types of paid childcare leave could be taken by either of the parents, and indeed there were some categories of leave that could be utilized only by fathers.

5. In order to prevent domestic violence against women, an institutional system had been set up consisting of a round-the-clock toll-free telephone service, regional crisis centres with nationwide coverage and a secret shelter. The Government cooperated closely with non-governmental organizations in the operation of the system, which provided immediate and effective help. Restraining orders had been part of the Hungarian legal system for a year, but experience so far and feedback from non-governmental organizations indicated that, significant improvements were needed. The Government had launched several public awareness and information campaigns at the national and local levels, and Hungary was also currently participating in the Council of Europe campaign to prevent domestic violence against women. Training sessions had been organized for experts and public employees who dealt with cases of domestic violence.

6. Of particular importance was an administrative measure intended to change police attitudes towards domestic violence. In 2003, an order had been issued, stipulating that police must take action in all such cases, and indeed that they were required to act proactively when acts of domestic violence appeared likely. Ongoing training of police officers was necessary if they were to deal effectively with domestic violence, and there was much work to be done in that regard. Sexual harassment was listed as a specific offence in the Equal Treatment Act, and women could institute legal proceedings in response to such behaviour.

7. Although the participation of women in public life was still not as high as would be desirable, there were some positive results to be highlighted: the Socialist Party currently in office had introduced a 20 per cent quota, and Parliament at its autumn session would be discussing a draft bill aiming to introduce a 50 per cent quota for both local and national elections.

8. Several earmarked programmes had been launched in the past few years to improve the situation of women on the labour market: the START Plus programme provided re-employment assistance to
people who had been engaged in caring for children or a relative; support programmes helped women become entrepreneurs and/or to strengthen an existing enterprise; and there were programmes to promote the establishment of family-friendly working environments.

9. Under Hungarian law, equal remuneration had to be paid for equal work, but nevertheless, it had not yet proved possible to implement equal remuneration for men and women. However, there was a proposal to amend the associated implementing regulations to make that possible.

10. There were a number of positive steps to be reported in health care. Targeted screening for breast cancer had been launched in December 2001, with 45 screening stations covering the entire country. The participation rate ranged from 37.2 to 41 per cent. A cervical screening programme had been started in September 2003, and by September 2006 some 2 million women had received letters of invitation. However, only some 96,000 women, or less than 5 per cent of those targeted, had attended screening examinations. The Lily Programme had been started in October 2005 in an attempt to raise women’s participation, widening its focus to women who were undergoing gynaecological examinations. The success of the programme was indicated by the fact that 41 per cent of those screened had been women who had not previously participated in organized screening. Mobile screening stations had been used in several various parts of the country, with varying results, but the operating costs precluded their being used nationwide. The Government had also organized on-site examinations by gynaecologists in cooperation with the local governments, with a 40 per cent participation rate. Another issue concerned the provision of data by private gynaecologists: because many women visited private specialists, the Government lacked accurate data.

11. The HIV/AIDS situation in Hungary was so far relatively favourable: as at 31 March 2007, the total number of registered HIV-positive persons was 1,385: 1,239 with identification codes and 146 anonymously. Men accounted for 75 per cent, 14 per cent were women and 11 per cent were of unknown sex. Sentinel screening examinations performed for the sixth time within 10 years had detected no HIV-positive pregnant women. In 2005, the number of abortions had been 48,689, while for 2006 the preliminary and partially estimated figure was 46,500. The decline had been observed in all age groups, including adolescents and women in their early twenties.

12. Since 1 January 2005, regional district nursing had been regulated by a new professional decree, and a new decree on the financing of such activities had come into effect on 1 June 2005. The reason for the changes was to regroup services in the areas of greatest demand. Since district nurses met 60 per cent of the persons they attended at educational institutions, the scale of school district nurse services had increased considerably from 481 persons in 2004 to 908 in 2006. Statistical data for 2006 showed a total of 3,807 district nurses working in the regions, who also prepared informative materials pertaining to family planning and delivered them to health-care providers. To that end, the Professional College of District Nurses had published a guideline in 5,500 copies, for distribution to each of the district nurse counselling centres.

13. As a result of demographic changes, the number of elderly single women in society was increasing. In 2004, the average age at death of men was 66.87 years, while the corresponding figure for women was 74.87 years. In the same year, average life expectancy at birth was 76.91 years for women and 68.59 for men. The mortality rate from cardiovascular diseases had decreased, while that from oncological diseases had been rising. However, that ratio could change significantly at different ages: in the case of young people, the majority of deaths were caused by external causes, such as accidents. In the 35-64 age group — especially in the case of women — tumour-related diseases had occurred at an exceptionally high rate. The leading causes of deaths in women were pulmonary cancer, followed by colon cancer and breast cancer, while in terms of rates of occurrence breast cancer was highest. Premature mortality due to either breast or cervical cancer was much higher among Hungarian women than the average figures in the European Union.

14. Since July 2006, Hungary had been witnessing the gradual renewal of the health-care system. A flat fee for medical visits had been established, with exemptions for children under the age of 18 and women receiving pregnancy-related care. The reform measures were expected to improve access to medical services, as well as their quality, and it was planned to extend the exemptions to the socially deprived.
15. The 10-year strategic plan that the Parliament had adopted on 25 June 2007 was a milestone in the series of measures conceived to improve the situation of Roma women. Each year, Hungary issued a statistical pocket book on the situation of women and men, and the most recent issue had contained a separate chapter on Roma women. The number of government publications concerning the rights of women had been increasing. Available free of charge, they presented information covering both international and domestic practices.

16. Cooperation with non-governmental organizations had improved considerably in recent years, in a constructive spirit of partnership that had been beneficial to both sides. For example, there had been consultation between the CEDAW delegation and the organizations submitting shadow reports.

17. In addition to the Convention, Hungary was also committed to the Beijing Declaration and Platform for Action. Those documents served as the basis of the National Action Plan Promoting the Social Equality of Women and Men, which was currently under preparation. In order to give the National Action Plan the broadest possible social basis, non-governmental organizations and experts were also being invited to participate in its preparation.

18. Having ratified the Optional Protocol in 2001, Hungary was involved in two individual complaints. The Committee’s recommendations pertaining to these cases had given rise to several positive changes such as, in the area of health care, the modification of the existing informed consent form, and the design of standardized forms for information-gathering purposes.

19. Hungary was aware that there were a number of areas where the measures taken were still not sufficient, or had not brought about the desired outcomes, and would welcome all constructive criticism that would help it to advance in the right direction.

Articles 1 to 6

20. Ms. Patten said that she had a number of questions relating to the Optional Protocol. The Committee was rather concerned about the level of consideration that the Government was giving to its Views on communication 4/2004, A.S. vs. Hungary. In Hungary’s initial response, it had informed the Committee that the Ministry of Social Affairs and Labour had asked the Public Foundation for the Rights of Patients to advise what compensation would be considered adequate, given the Committee’s recommendation that compensation should be paid commensurate with the gravity of the violation of the rights of Ms. S., namely permanent deprivation of her natural reproductive capacity. Having sent a further letter to the Government on 6 June to inquire about progress, the Committee had been deeply concerned to receive a second response on 17 July revealing a totally different stand by the Government, to the effect that payment of compensation was not feasible, on the grounds firstly that the Hungarian courts of justice had not found any infringement of the rights of Ms. S. and secondly that she had not lodged an appeal.

21. She wished to point out that the decision of the Court of the second instance had been final and no appeal had been permitted, and in any event the County Court had indeed found a violation, holding that the information given to Ms. S. had not been detailed: she had not been informed of the exact nature of the operation, of the risks involved or of possible alternative procedures. Even the Court of second instance had made a similar finding with regard to the fault of the doctor, disputing only the permanency of the harm suffered.

22. The stand of the Government of Hungary was somewhat disturbing: domestic court decisions could never relieve a State of its obligation to implement the recommendation of the Committee, an international treaty body. She urged the Government to give due consideration to the Views of the Committee.

23. Her second concern had to do with the Committee’s recommendation that Hungary should review its domestic legislation on the principle of informed consent in cases of sterilization, and should ensure its conformity with international human rights and medical standards including the Oviedo Convention and World Health Organization (WHO) guidelines. It was the position of the Government that its laws were in conformity with both WHO and Oviedo standards, but the Committee was of the view that section 187.7 of the Public Health Act was still not in line with international standards, since it provided that a special information procedure was not required when sterilization was done for health reasons, in the judgment of the doctor. However, the WHO guidelines allowed no exception. The relevant part of the Public Health Act was based on the premise that sterilization
was reversible, whereas the WHO guidelines emphasized that the counselling prior to the intervention should cover its irreversibility.

24. Further, following its recommendation that Hungary should monitor all sterilization procedures, the Committee was concerned about the Government’s response that, in view of the small number of cases, monitoring of sterilization had not been integrated into the 2007 workplan.

25. Finally, the Committee’s recommendation had been that Hungary should ensure that all relevant personnel and public and private health centres were aware of the Convention and general recommendations 19, 21 and 24. Hungary had informed the Committee of a proposed seminar, but the Committee considered that that was not enough to ensure that all stakeholders were made fully aware.

26. Ms. Shin commended the delegation for the candour and frankness of its report, but noted that it had been submitted very late. She asked what were the main reasons for the lateness and the obstacles in the way of ensuring that the next report was delivered on time.

27. Noting from the responses to the list of issues and questions (CEDAW/C/HUN/Q/6/Add.1) that Hungary had adopted the proposed amendment to article 20, paragraph 1, she asked whether that had been officially notified to the United Nations. Until that was done, the adoption would not be recognized.

28. She was glad to hear that there was a close relationship with NGOs, and wished to know how many women’s NGOs were funded. Were there some particular qualifications for NGOs to receive funding?

29. Congratulating Hungary on the Equal Treatment Act and the establishment the Equal Treatment Authority, she asked how many persons were working in the Authority and whether they included professionals specializing in cases of gender-based discrimination. She had noted from the country report that 202 cases had been investigated by the Authority in 2006, seven of them cases of gender discrimination. Were all of the cases investigated that were submitted, or did the Authority make a selection? In fact, a total of 202 cases in a year seemed very low, and she asked whether the new mechanism was adequately publicized. There had been eight cases claiming sexual harassment, of which only one had been substantiated. Six claims had been withdrawn. She asked about the reasons for the withdrawal, and whether mediation had been involved.

30. Ms. Maiolo wished to know what measures were being adopted by the Government, over and above educational programmes for young people, to eliminate stereotypes, in particular in the media. Specifically, she wished to know the results of the campaign launched in December 2005 under the title “Women and the Media,” and the results of Act 1 of 1996 on radio and television.

31. Secondly, while congratulating Hungary on the classification of sexual harassment as an offence, she wondered whether the Government had any plans to refine the information given about the new law, in order to make it clear that sexual harassment was a violation of the dignity of women. If that was not done, there was a risk of its remaining too general a concept.

32. Ms. Chutikul asked whether the Ministry of Social Affairs and Labour had any machinery for promoting the advancement of women at the local level. She also wished to know whether a system was in place for the overall monitoring of the implementation of the Convention, whether that system included indicators for the identification of expected achievements, and which entity was responsible for such monitoring.

33. Noting that the initial version of the New Hungary Development Plan of 2006 had taken no account of gender equality issues, she asked which government agency had been responsible for putting forward that Plan and whether that agency was aware of the Convention and the obligations that flowed from it. She also wished to know whether a system was in place for the overall monitoring of the implementation of the Plan and how gender equality issues would be incorporated into it. Lastly, she requested more information about the content and priorities of the National Action Plan Promoting the Social Equality of Women and Men, and whether the Plan would be based on the Convention.

34. Ms. Neubauer requested more detailed information on the work of the Division of Equality of Women and Men in Society, including how many staff members it had, what the size of its budget was, and how its mandate compared to that of the department which had been responsible for promoting gender
equality before the recent restructuring. She requested an update on the national action programme for gender equality, the elaboration of which had been the responsibility of that department, and asked what other specific action plans were envisaged to promote the full achievement of gender equality. Lastly, she asked in what ways the Division supported gender mainstreaming in Government ministries and other institutions and what mechanism existed for the coordination, monitoring and evaluation of the work of ministries and of local and regional authorities responsible for promoting gender equality.

35. Ms. Rapi (Hungary) said that national legislation on sterilization had recently been amended to take the Committee’s recommendations into account, in consultation with non-governmental organizations. A standardized informed consent form was being prepared. The Ministry of Social Affairs and Labour had recently compiled an information package for obstetrics and gynaecology departments throughout the country and had also organized seminars for district nurses. Thus far in 2007, no complaints regarding sterilization procedures had been filed with the Ministry of Health or other relevant organizations.

36. Ms. Dósa (Hungary) said that, in the case cited by Ms. Patten, the court had ruled against the complainant because it had found that there were no grounds for compensation under Hungarian law. The law on public health had been amended in 2006 to establish the obligation to inform sterilization patients of alternative methods of contraception and of the irreversible nature of the procedure. The law had thereby been brought into line with international norms. In cases where sterilization was performed for health reasons, the obligation to inform patients of the irreversibility of the procedure did not apply, but patients must nonetheless be informed of their diagnosis and of the consequences and possible risks of the procedure. The courts were increasingly ruling against health providers who failed to provide patients with the necessary information.

37. Ms. Rauh (Hungary) said that her Government would make a particular effort in future to submit its reports to the Committee on time.

38. The Council for the Social Equality of Women and Men was a forum in which NGOs, including women’s NGOs, were able to express their opinions to the Government on relevant matters and to participate in the elaboration of legislation and national development plans. The Government also supported women’s NGOs by giving them the opportunity to apply for grants for programmes designed to promote gender equality and to raise public awareness of gender issues and for their participation in international events. To her knowledge, some 100 women’s NGOs received such funding, but more precise information would be provided in the State party’s next report.

39. The Equal Treatment Authority, which was responsible for implementing the Equal Treatment Act, had a full-time staff of 15 lawyers and an advisory body of six experts, three of whom were experts on gender issues. A national list of recognized experts on gender issues would be prepared for inclusion in the National Action Plan. In addition to the Authority, Hungary had established the offices of general ombudsman, ombudsman for data protection and an ombudsman for the rights of minorities, all of which had websites and produced brochures publicizing their work. Nonetheless, the provision of information to the public needed to be improved. The Equal Treatment Authority planned to set up a special website on its anti-discrimination work, with information on the cases it had handled. In 2007, NGOs, employers and media organizations had also been invited to apply for funding for activities designed to inform the public of their rights, especially the right to equal treatment.

40. Details of the Equal Treatment Authority’s mechanisms and procedures were provided on its website. All complaints of sexual harassment were investigated by the Equal Treatment Authority, whose procedures were regulated by a Government decree. Complainants had the right to appeal in court against the Authority’s rulings, although in most cases the courts confirmed those rulings. One of the main reasons for the withdrawal of cases was anxiety on the part of the complainant about the possibility of the case being publicized.

41. Ms. Makár (Hungary) said that the national school curriculum included a civic education component, in which children were taught about their rights. In addition, as part of the national strategy for children, schools addressed the issue of breaking down gender stereotypes with a view to promoting happy family life. A regional campaign had also been conducted in conjunction with the “houses of opportunity” network to combat the use of gender stereotypes in the media. Funding had recently been
provided for programmes to address sexual harassment in the workplace and to promote responsible family planning. Further funding was to be awarded to media organizations that put forward the best proposals for programmes to combat stereotyping and violence against women.

42. The Ministry of Social Affairs and Labour had set up a working group for the purpose of eliminating stereotypes, the members of which included two Government experts and seven representatives of media organizations. As part of that initiative, an educational DVD had been produced and would be piloted in a number of schools in the coming year, with a view to disseminating it country-wide at a later stage. The working group was also preparing a glossary on the subject of stereotypes and a package of publicity materials on how to combat them.

43. Ms. Dósa (Hungary) said that Hungarian law contained no definition of the right to human dignity. However, that did not mean that the concept did not exist. The Constitutional Court had, in a number of rulings, provided an interpretation of the concept, to which other courts could refer in cases involving any kind of infringement of human dignity.

44. Ms. Rauh (Hungary) said that one of the main priorities of the Ministry of Social Affairs and Labour was to achieve social equality between men and women by mainstreaming gender into all government policies. The Ministry of Justice and Law Enforcement was responsible for the implementation of the Convention, which had been incorporated into national law.

45. The Government had made efforts, in consultation with women’s NGOs, to ensure that National Development Plan II, or the New Hungary Development Plan, constituted an improvement on National Development Plan I in terms of raising the profile of gender issues and enhancing monitoring of the implementation of gender equality programmes. NGOs were represented on the committee responsible for monitoring the implementation of the Plan.

46. Ms. Makár (Hungary) said that early efforts to promote gender equality had focused mainly on the situation of women in the labour market and on making the workplace more family-friendly. Efforts were now more broadly focused on promoting the equal participation of women and men in all areas of life.

47. Ms. Rauh (Hungary) said that, in recent years, Hungary had faced many social problems connected with the process of transition to a market economy, including problems of inequality between men and women. Nonetheless, a secretariat for equal opportunities had been set up in the late 1990s with responsibility for national follow-up to the Beijing Declaration and Platform for Action. The fact that responsibility for gender issues had been assigned to the Ministry of Social Affairs and Labour meant that those issues currently enjoyed a higher profile. However, no entity yet existed within the Government itself for the promotion of gender equality. Plans to create such an entity in the medium term and to provide civil servants and politicians with the necessary training were being drawn up.

48. With regard to family violence, a national crisis centre had been set up, along with nine regional centres for the provision of assistance to victims. Working groups had also been set up to address the issues of women in political life, equal pay for equal work, women and research, the work-life balance and trafficking in human beings.

49. With regard to public information activities, the houses of opportunity network now covered most regions of the country. The houses provided the public with information on a variety of subjects, including gender equality issues.

50. Ms. Gaspard, referring to the last paragraph of Hungary’s responses (CEDAW/C/HUN/Q/6/Add.1), noted that there might be some confusion between the ratification of the Optional Protocol and the amendment to article 20, paragraph 1, of the Convention, since the Committee had no record of the ratification by Hungary of such amendment. Did the Government intend to ratify it? She wondered why none of the ombudsmen specialized in women’s rights.

51. While she welcomed the delegation’s report on the Government’s current efforts to combat stereotypes, she noted that there had been a considerable delay in implementing the relevant recommendations made by the Committee in 2002 and urged the Government to expedite matters in that regard. She asked whether there was a body responsible for monitoring advertising to ensure that it was not degrading to women. Noting that minorities were often considerably discriminated against and stereotyped, she wondered whether the recent measures
taken by the Government in June concerning the Roma, and especially Roma women, addressed stereotypes.

52. **Ms. Simms** welcomed the positive steps that Hungary had taken to deal with women’s equality issues. However, she was concerned that stereotypes seemed to be interfering with the justice system. Referring to an Amnesty International report that Hungary was not dealing effectively with crimes of rape and other forms of violence against women because of the attitudes of the police and court officials, she wondered whether the Government had studied how rape and violence against women related to stereotypes.

53. Roma women suffered violence not only from Roma men but also from the wider society, which perceived them as an “inferior people”. Furthermore, the police and other institutions treated them very badly. That issue did not seem to have been adequately addressed. Women had a special place and a special need. Accordingly, gender-disaggregated data on minorities and the Roma people were needed to develop an effective programme for Roma women.

54. **Ms. Pimentel** expressed concern at the conservative and discriminatory mentality of Hungarian society regarding women’s roles. She was dismayed at how women were portrayed in textbooks and the media and at the growing acceptance of pornographic material, all of which was inconsistent with the principles of the Committee and of all human rights instruments. Hungary’s laws, policies and training and awareness-raising campaigns on that issue could be effective only if they were consistently enforced and continuously organized. She wondered whether the Government was contemplating amending the law to decriminalize prostitution and asked about the steps that had been taken to provide shelters and the necessary social services. She suggested that the Government could support the non-governmental organizations that were already doing excellent work in that field.

55. **Ms. Begum** welcomed the Government’s initiatives to prevent cervical and breast cancer. While she applauded Hungary’s initiatives to combat violence, including hotline services and regional crisis shelters, the incidence of domestic violence in the country — over 25 per cent of women over the age of 14 were victims — was nevertheless alarming. She wondered why Hungary had a law on sexual harassment yet did not have a separate law to combat domestic violence; whether there were enough shelters for the immediate protection of female victims of domestic violence; and whether such victims had access to legal and medical aid. Did migrant women victims of domestic violence enjoy the same rights as Hungarian women? She inquired about the situation of single women with children in refugee camps and the steps taken by the Government to protect their rights. It would be interesting to know what steps were envisaged to protect children from sexual exploitation and pornography. She had serious concerns about the setting of the age of consent at 14 without adequate protection and education in terms of safe sex, adolescent reproductive health-care services and the use and availability of contraceptives. Those concerns seemed to be borne out by the more than 48,000 abortions, including teenage abortions, performed in 2005. The report had provided no details on the extent and victims of human trafficking. The delegation should update the Committee on the proposed national programme to prevent trafficking in people, help victims and enable their social reintegration.

56. **Ms. Chutikul** wondered whether the Government was contemplating amending the law to decriminalize prostitution and asked about the steps that had been taken to provide shelters and the necessary social services. She suggested that the Government could support the non-governmental organizations that were already doing excellent work in that field.

57. She wondered whether the Criminal Code as amended strictly adhered to the definition of human trafficking under the Palermo Protocol. Had there been discussions among law enforcement officials, NGOs and other interested members of civil society about the criteria for victim identification? She inquired about the status of and some of the topics covered by the action plan against trafficking in persons developed by the Ministry of the Interior. Did it address both cross-border and domestic trafficking?

58. The Chairperson, speaking as a member of the Committee, wondered how the law on equal opportunities could be implemented to give more opportunities to women, in areas other than politics. She wanted to know how the Government intended to ensure the advancement of women in all aspects of
their lives, including education, employment and social services.

59. **Ms. Rauh** (Hungary) said that her Government would look into the issue of the amendment to article 20, paragraph 1, and report its findings to the Committee. While there was no specific ombudsman for women’s issues, the mere existence of the institution represented an achievement, as did the Equal Treatment Authority. The latter worked closely with NGOs to formulate recommendations and proposals to the Government through Parliament. Regarding stereotypes of Roma women, Parliament had adopted a decision of 25 June 2007 on gender equality as a whole, with a strategic plan targeting areas such as education, employment, housing and culture and relevant implementation measures. A separate section of the decision also provided for the establishment of gender equality in four priority areas.

60. **Ms. Makár** (Hungary) said that the current publication entitled “One hundred words on equality” was part of the ongoing efforts to combat stereotypes; a new version would be published shortly. All textbooks would be prepared taking into account gender equality, and new materials, including secondary school textbooks and teaching manuals, dealt with women’s role in society and history.

61. Regarding advertising, Hungary had an advertising ethics committee composed of the country’s 22 largest advertising firms. Advertising in Hungary must be in line with socially accepted norms and standards. The ethics committee could only make recommendations; it could not impose punishment. Hungary also had a National Radio and Television Council which, among other things, received complaints. The Government had been promoting a “family-friendly” workplace programme for some years as part of its efforts to break down stereotypes. A working group had been established on the role of women in decision making in the economic and political spheres; its plans included a day in Parliament.

62. **Ms. Rauh** (Hungary), responding to a query concerning measures taken by the Government to combat violence against Roma women, said that Hungary’s legal system was fully in line with European standards with respect to the protection of human rights. The ombudsman for minorities typically dealt with Roma women’s issues, including complaints of rights violations. Although the Government maintained an ongoing dialogue with human rights NGOs, consulting them regularly and using the information received from them as vital inputs in its policies, a quantum shift in attitudes was needed in the public administration and system of justice to address Roma women’s concerns. To that end, training programmes were organized every year. A European Union-funded programme focused on training public administration employees and providing financial assistance to NGOs that provided legal aid to those that needed it. Furthermore, in an attempt to close the tremendous trust gap between the Roma and the police, the police force now had Roma desk officers.

63. **Ms. Dósa** (Hungary) said that the publication of photographs and other forms of child pornography were punished under Section 272 of the Criminal Code and that indecent assault and other sexual crimes were punishable by a prison sentence of one year or a fine.

64. Human trafficking was also covered in the Criminal Code. A special criminal investigation team had been set up and the Government had prepared a draft national strategy to combat domestic trafficking, which would be coordinated with the public administration and relevant NGOs. She was pleased to report that the number of trafficking cases in Hungary had declined.

65. **Ms. Makár** (Hungary), said that in cases of domestic violence, both migrant women and single mothers had full access to crisis centres and shelters. The National Crisis Management and Telephone Information Service operated a toll-free hotline and employed staff who spoke various languages. There were two Secret Shelters, one organized by the Government and the other by an NGO.

66. **Ms. Dósa** (Hungary) said that the Ministry of Justice had initiated a dialogue with an advocacy organization to prevent the exploitation of women in prostitution. It had been agreed that a police expert would also participate in the dialogue. The Criminal Code was currently being amended to include a new definition of “offence” and two draft laws on prostitution were being elaborated, with the participation of relevant NGOs.

67. **Ms. Rauh** (Hungary) said that the Equal Treatment Act took into account all Hungary’s international obligations and that sectoral laws had been brought into line with the Act upon its
promulgation in 2003. A study of the laws was currently being conducted and any proposed amendments would be submitted to the Council for Equality of Women and Men in Society. NGOs would also be given the opportunity to review the amendments and offer their comments.

68. The Government did not wish to impose a quota system to increase women’s participation in political parties, as that would constitute interference. However, the Ministry of Social Affairs and Labour was conducting a study, the results of which would be sent to all political parties in the hope that they would establish a quota system themselves. In the autumn of 2007, Parliament would consider a draft bill to establish gender parity in national elections.

69. Ms. Shin noted that the Criminal Code defined sexual crimes such as rape and assault as “crimes against sexual morality” and pointed out that changing the names of the crimes to reflect their gravity would help to change attitudes. She was also dismayed that women were obliged to pay 6,000 forints to apply for a restraining order.

70. Ms. Chutikul said that the National Action Plan Promoting the Social Equality of Women and Men and the national strategy to combat domestic trafficking should include time frames and indicators for expected achievements. She also requested further information regarding the amendment of Criminal Code provisions governing prostitution.

71. Ms. Patten pointed out that, in its March letter to the Committee, the Hungarian Government had indicated that Ms. S. had been awarded compensation but that the Public Foundation for the Rights of Patients had not yet made a recommendation regarding the amount. The July letter to the Committee indicated that compensation had not been awarded at all. She would appreciate clarification of the matter.

72. Ms. Begum expressed concern that the minimum age of consent for sexual intercourse had been set at 14 and stressed that 14-year-old girls were, in fact, still children.

73. Ms. Rauh (Hungary) agreed that the definition of rape and sexual assault in the Criminal Code should be amended; in fact, a recommendation to that effect had already been made. She would be grateful if the Committee could include a similar recommendation in its concluding comments.

74. Ms. Dósa (Hungary) said that restraining orders were issued free of charge when the application was filed by the State. However, individuals who applied for a restraining order were required to pay a fee. Such cases were rare and usually involved “light physical injury”. If the perpetrator of the injury was found guilty, the applicant was reimbursed.

75. Ms. Rauh (Hungary) said that the delegation would take into account the recommendation by Ms. Chutikul that the National Plan Promoting the Social Equality of Women and Men and the national strategy to combat domestic trafficking should include time frames and indicators for expected achievements.

76. Ms. Dósa (Hungary), in reply to the questions concerning compensation for the violation of patients’ rights, said that the Convention formed part of national legislation and thus was directly applicable. The Government was focusing on prevention rather than compensation and national legislation had been amended to strengthen and protect patients’ rights. The Public Foundation for the Rights of Patients was not in a position to comment on the case of Ms. S., as it was currently before the courts.

77. With regard to the age of sexual consent, the Criminal Code provided that it was a crime to engage in sexual relations with a girl under the age of 14, regardless of consent. Sexual relations with a girl under the age of 12 was considered a “severe crime”.

Articles 7 to 9

78. Ms. Gaspard said that she was pleased that the Government intended to take measures to increase the number of women in elected positions. The delegation had referred to the establishment of a 20 per cent quota; she would appreciate further clarification, as that particular quota had not been mentioned in the report. She would also like to know whether the draft bill on gender parity in national elections was aimed at achieving parity in the election results or the lists of candidates. She noted that there were particularly few women in local office and wondered how the Government intended to increase their participation.

79. Ms. Maiolo said that the draft bill to introduce gender parity in national elections should require alternation between men and women on electoral lists.

80. Ms. Neubauer expressed surprise that women were severely underrepresented at the highest levels of
government and that sex-disaggregated data was not available. She recalled that the Equal Treatment Act provided that the public sector should adopt equal opportunity strategies.

81. Noting that the issue of women’s role in political decision-making and the advantages and disadvantages of a quota system were not on the public agenda in Hungary, she wondered how the Government would garner support for the draft bill to introduce gender parity in national elections. Lastly, she would like further information on the Government’s plans to increase female representation in the foreign service.

82. The Chairperson, speaking as a member of the Committee, said that she did not comprehend the claim that women did not wish to work in the foreign service owing to “the specific form of work and way of life”. She would appreciate clarification of that point.

The meeting rose at 1 p.m.