Written Comments of the European Roma Rights Centre

Concerning Hungary

for Consideration by the
United Nations Committee on Economic, Cultural, and Social Rights
at its 38th Session

Overview


The report is presented to complement the current initiatives and policies of the Hungarian government aimed at creating an environment where economic, cultural and social rights are enjoyed by all members of the Hungarian state. The report also aims to provide recommendations for development in specific areas where research show a shortfall between the stated aims and goals of government policies and real material conditions on the ground.

The submission is based mostly upon research conducted by the ERRC, further substantiated by contributions by consultants, into the situation of Romani communities in Hungary. Unless otherwise specified, references to research in this report refer to the findings of this research.

Romani communities in Hungary face serious problems with regard to their status within society. Discrimination in access to education, health care, housing and employment as well as issues of violence are amongst the main problems experienced by Romani communities in Hungary.

1 The European Roma Rights Centre (ERRC) is an international public interest law organisation engaging in a range of activities aimed at combating anti-Romani racism and human rights abuse of Roma. The approach of the ERRC involves, in particular, strategic litigation, international advocacy, research and policy development and training of Romani activists. The ERRC is a cooperating member of the International Helsinki Federation for Human Rights and has consultative status with the Council of Europe, as well as with the Economic and Social Council of the United Nations.
In 2005, Hungary joined in the Decade of Roma Inclusion (2005-2015)\(^2\). Within this initiative, Hungary adopted four National Action Plans (NAP) in January 2005 that specify goals and indicators in the areas of housing, health, employment and education. However, very limited attention is paid to the specific situation of Romani communities in the actions plans.

This report does not constitute a comprehensive assessment of all issues experienced by Romani communities in Hungary. It aims to describe some key areas of concern for Romani communities related to rights enshrined in the Convention. The ERRC hopes that this report will assist the Committee in arriving at a more complete assessment of Convention matters and provide suggestions as to possible recommendations to the Hungarian government by the Committee.

**Executive Summary:**

**Employment**
- **Structural Exclusion of Roma from the Labour Market**
  Due to the endemic discrimination affecting Hungarian Romani communities, many of them have been long-term unemployed, only sporadically participating in the formal employment market/sphere

- **Racial Discrimination against Roma by Employers**
  Structural exclusion of Roma from the labour market is further aggravated by patterns of discrimination against Roma by employers. A number of recent Roma-specific studies affirm the significant levels of discrimination against Roma in the labour market.

- **Government Measures to Address Exclusion of Roma from the Labour Market**
  The Hungarian government has undertaken a number of initiatives targeting Roma and other disadvantaged groups aiming at their inclusion in the labour market. Few of these initiatives however were designed to meet the needs of the labour market or to re-build confidence and work-based competences of the Roma. Crucially, there is no evidence of individualisation of the labour market programmes according to factors such as gender, age, length of unemployment, etc.

**Healthcare**
- **Physical Remove from Health Services**
  Access to health services is problematic for some communities due to the fact that these communities live in geographically isolated and/or economically depressed areas. A survey conducted by the Hungarian Delphoi Consulting in 2003 revealed inequalities in access to health care affecting smaller settlements. Excluding Budapest, 5.9% of the country’s population lived in a settlement without a local GP. This number was 6.1% in the case of pensioners or about 128,000 pensioners lived in settlements without direct access to a GP. In the case of Roma, figures indicated that, excluding Budapest, 18.6% of the country’s total Roma population or over 100,000 individuals lived in settlements without a local GP. This situation results from the fact that Roma tend to live in small settlements, and their numbers are high in very small villages that are dying out or are secluded and are becoming predominantly Roma. These settlements have no basic institutions and the non-Romani inhabitants have moved out while poorer Roma have moved in.

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\(^2\) More information about the Roma Decade of Inclusion [http://www.romadecade.org](http://www.romadecade.org)
- **Provision of Maternity Health Services in Segregated Settings**
Targetted research by the ERRC on access of Roma to health care in 2003-2005 revealed systematic ethnically-based separation of Romani women in maternity wards in hospitals in various places throughout Hungary. In 2003, the ERRC documented forty-four cases in which Romani women were reportedly placed in separate hospital rooms from non-Romani women. In Miskolc, Borsod-Abaúj-Zemplén County, in the Vasgyári hospital, according to the testimony of one Romani woman, despite the fact that there was a free bed in a room with five other non-Romani women, the Romani woman was placed in an empty room all by herself. She stated that this was humiliating and that she felt offended. Another Romani woman from the same hospital said that the separate “Gypsy room” was not cleaned during her stay in the hospital and that the Romani women in the room had to clean it themselves.

- **Denial of Emergency Aid**
In some parts of Hungary, Roma reported to the ERRC that emergency aid services refuse to attend to their calls – ambulances are not sent or sent only after repeated requests by the patients. In many instances, the ethnic background of the patient is easy to recognise by their address. In a 2004 study, Delphoi Consulting found that 20.7% of adult Roma reported denial of ambulance coming on calls during weekends and nights. The denial of visitations by an ambulance during night duty affects children and adults at the same ratio. Forty percent of the Roma who live in segregated settlements with a large number of people together, experienced the denial of an ambulance visit.

- **Perceived Discrimination in the Provision of Medical Services**
Roma who have had encounters with medical professionals often have the perception that they have been treated with less care and respect as compared to non-Romani. Although some of the interviewed Roma found it difficult to identify obvious examples of discrimination, they believed that less favourable treatment of Roma is a fact. As a 46-year-old Romani man in Arlo, north-east Hungary, stated: “You just feel it. You feel by the way they approach you. It is difficult to express in words.”
A number of people said that they cannot describe doctors’ attitudes towards them as “rude” but rather as “lack of desire to give their time and efforts to us”.

- **Informed Consent in Cases of Sterilisation**
The ERRC notes that the Hungarian government has to amend its legislation and policies concerning patient’s informed consent in cases of sterilisation according to a recent decision by the UN Committee on the Elimination of Discrimination against Women (CEDAW). The decision, communicated to the ERRC in August 2006, condemned Hungary for violating the Convention on the Elimination of All Forms of Discrimination against Women in connection with the sterilisation of a Romani woman. On 2 January 2001, a Romani woman (Ms.S) was sterilized by doctors at the Fehergyarmat hospital. While on the operating table she was asked to sign forms giving her consent to this and other operations. However they did not explain the intervention, its nature, possible risks, or what the consequences of being sterilized would be. She was not told about other forms of birth control either. It was only after the operation that she learnt that she could not become pregnant again. Ms S. wasn’t awarded any remedy by Hungarian courts.

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Housing

- Forced Evictions
  Forced evictions are now widely and frequently reported in Hungary, apparently arising due to a number of factors, including changes to the legal regime which have significantly eroded the rights of tenants. Roma in Hungary have been subjected to forced evictions with increasing frequency in recent years.

- Racial segregation in the field of housing
  "In 1971, nearly two-thirds of the Roma households (65.1%) lived in segregated areas called 'colonies' under unfavourable housing conditions. [...] Started in the 1960s and continued until 1988, the colony elimination programme had a very important role in improving the settlement and housing conditions of Roma people compared to their former situation. The 1993-94 survey pointed out that 13.9% of the Roma population (about 70 000 people) lived in segregated settlements or colony-type neighbourhoods with insufficient utility supply, and low infrastructure, or in urban colonies in poor conditions.

- Denial of access to social housing
  Local authorities in Hungary have in recent years sold off significant amounts of the public (including social) housing stocks, apparently in order to compensate for declining revenues, creating a situation in which Hungary may not be able in practice to meet the housing needs of the poor and/or extremely poor. In addition, as detailed below, a number of local authorities have adopted very arbitrary rules as to eligibility for public (including social) housing, rules which in practice may preclude many Roma from eligibility. Finally, widespread anti-Romani sentiment in Hungary means that unfortunately, allegations of racial discrimination in the allocation of public housing are often plausible.

Education

- Segregated Schooling of Roma
  Educational attainment is directly related to the quality of educational services provided. An increasing number of Romani children in Hungary in recent years are deprived of equal educational opportunities as a result of widespread patterns of school segregation. Segregated education of Romani children is a major reason for the significant disparities in the quality of schooling between Roma and non-Roma. Recent research has demonstrated that segregated schools provide inferior educational services and magnify initial disadvantages.

- Prohibition of Segregation in Domestic Law
  School segregation is prohibited under Hungarian law. According to the Hungarian Equal Treatment Act, “unlawful segregation is a conduct that separates individuals or groups of individuals from others on the basis of their characteristics as defined in Article 8 without a reasonable explanation resulting from objective consideration.” The Act further stipulates that, “the principle of equal treatment is especially violated if a person or group is a) unlawfully segregated in an educational institution, or in a division, class or group within such an educational institution, b) limited to a care or educational system, or a care or educational system is created or maintained whose standards do not reach accepted professional requirements or do not meet professional rules, and thus do not ensure a reasonable expectable opportunity to prepare for state exams.

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4 Article 10 (2) of the CXXV Act of 2003 on the Promotion of Equal Treatment and Equal Opportunities.
Limitations of government interventions:
Financial incentives for schools to integrate Romani children are an important but not necessarily efficient method for achieving desegregation of Roma education. Surveys and anecdotal reports in Hungary have indicated that few potential beneficiaries of the preferential subsidies for integration provided by the government undertook to apply for them.

Methodology

The information contained in this report was compiled through primary and secondary research conducted by the ERRC. This data was complemented by contributions by experts in the various social and cultural spheres/fields that formed the focus of this report.

Recommendations

- Government must take the lead in ensuring equality of opportunity for Roma to access the labour market. To achieve this, the government must move from their current passive position to one that is actively promoting equality of opportunity for ethnic minorities, especially in employment and particularly for Roma. The message from government that employment discrimination against Roma will no longer be tolerated must be clear and explicit.

- Hungary should review domestic laws to identify how and why the legislation is so widely perceived to prevent the collection of statistics and data on the basis of ethnicity.

- Legislation which provides a strong and regulated approach to achieving equality in employment, should be enacted. The burden for change must rest with employers, public and private. Employers must be made responsible for achieving a proportionate workforce and a workplace free of discrimination and to apply the relevant measures and take the necessary steps to change that situation within their own workforce.

- The key to the legislation must be that every company, public and private, are required to have an ethnically proportionate workforce.

- If as a result of the review the company discovers that they do not have a proportionate workforce, they must ensure that corrective measures are taken and that goals and timetables are set for execution of the process.

- The public sector should lead by example and the requirement to have a proportional workforce should be imposed on government Ministries. It should be a statutory requirement for the public service to monitor and guarantee equality in their workforce.

- The Hungarian government should establish specific goals and timetables to reduce the employment differentials between Roma and non-Roma employed in the public service.

- Disqualification from government and EU tenders would be a major driver for change for many companies. Contract compliance is an effective mechanism to guarantee that only companies which comply with the principles of fair and equal employment have access to government resources.
• At all levels of government, national regional and local, before a grant or contract (national, EU, World Bank loans and donor funding, etc.) over a certain value is awarded, but low enough to guarantee a high degree of coverage, should require that companies provide proof that they comply with equal opportunity practices in their company.

• Companies should be required to obtain a certification on equality grounds before they can be considered for a grant or contract.

• Instead of a heavy-handed approach involving measures such as public works, the government need sophisticated programmes that take account of the needs of the labour market and are designed to provide sustained and targeted investment to re-build the confidence and work-based competences of the Romani population.

• To begin to understand the complexities of the problem and the solutions of the mass unemployment that exists in Roma populations, government need to invest in sophisticated labour market intelligence that will break the problem down and develop more manageable, sustained and systematic types of intervention.

• Design long-term policies for tackling health inequalities between Roma and non-Roma and define concrete measures and targets to be achieved.

• Carry out regular assessment of the impact of public health policies on Roma, based on publicly available data disaggregated by ethnicity and gender. Ensure continuity for practices proven to have had a positive impact.

• Ensure that health policy programmes are developed with an intersectoral perspective for effective targeting of Romani communities in order to reduce health inequalities. Health policy programmes should identify ways in which health authorities can support other governmental bodies that are responsible for sectors affecting health and access to health services such as social assistance, housing and sanitation; and food security policies.

• Carry out screening of Romani communities for tuberculosis and hepatitis B and ensure that all affected individuals are treated. Launch health prevention and promotion programmes in relation to these highly contagious and fully avoidable public health threats.

• Immediately proceed with action to provide a safe and healthy environment for Romani communities living in extremely substandard conditions and relocate to areas providing adequate housing alternatives, on a voluntary basis and after consultation with those affected, families living under such conditions to other areas.

• Undertake periodic analyses on the basis of health data disaggregated by ethnicity and gender of the factors influencing access of Roma to health services, including racial discrimination.

• Ensure preferential distribution of costs and benefits of investment in health care provision in areas with high numbers of Romani populations.
• Conduct on a regular basis anti-discrimination training of public and private health care providers as well as include anti-discrimination training subjects in the curricula of medical universities and colleges.

• Ensure that existing laws and policies for gender equality include provisions for preventing and addressing the multiple barriers female members of minority groups face in exercising their fundamental human rights;

• Exempt vulnerable population groups, including Romani women in vulnerable positions, from user fees and other out-of-pocket payment for medical services and from medication costs;

• Provide on a regular basis outreach services to reach Romani women and girls who might otherwise have little access to medical services;

• Implement patient-oriented educational health programmes for Romani women not limited to reproductive and maternal health; support culturally appropriate interventions to reduce morbidity and mortality from breast cancer and cancer of the uterus;

• Implement educational programmes aimed at prevention of tuberculosis and hepatitis B.

• In order to achieve systematic and effective implementation of school desegregation programmes, the government should ensure the enactment in national legislation of an enforceable statutory duty to desegregate education requiring public authorities to take action to eliminate segregated education within a certain period of time.

Article by Article discussion

Articles 6 and 7: Recognition of the right to work and the right of everyone to the enjoyment of just and favourable conditions of work.

1. Structural Exclusion of Roma from the Labour Market

Due to the endemic discrimination affecting Hungarian Romani communities, many of them have been long-term unemployed, only sporadically participating in the formal employment market/sphere. Discrimination in education (see section on education in this report), especially systematic tracking of Romani children to substandard schools and classes for mentally disadvantaged children, has had disastrous impact on the life-chances and opportunities for Romani people in Hungary. Many Roma left school with little or no qualifications which subsequently placed them in a disadvantageous position in the highly competitive modernised Hungarian employment market. Whereas the command economy during the Communist era needed the unskilled labour that the Roma could provide, the market economy in Hungary in the post-transition period had far less need of such workers. Because of this, unemployment amongst Roma populations is significantly higher than the non-Roma population.\footnote{The UNDP report shows that the share of respondents who perceive themselves as unemployed stands at: almost 60% Hungary – UNDP Survey - Avoiding the Dependency Trap: December 2002 - Page 33.} Unemployment, and
particularly long-term unemployment, is generally regarded as being one of the root causes of poverty and social exclusion. According to a UNDP Report, “employment and labour income problems are usually ranked highest among the problems seriously affecting Roma households”\(^6\). For the Roma, the ratio of dependents per economically active person is 3-5 times higher than of non-Roma people.\(^7\)

Romani communities in Hungary were disproportionately affected by the economic restructuring that took place between the mid-eighties and mid-nineties in Hungary.\(^8\) According to the Hungarian scholar Gabor Kertesi, “Job loss among Roma workers was even more dramatic than the, far from negligible, job loss in the whole working age populations.”\(^9\) In Hungary, in the 1990s, the employment rate of Romani male workers was only 4-5% behind the rates for male workers from the majority populations; whereas a decade later in the mid 1990s, the small difference in employment rates of Roma and non-Roma had grown to an enormous gap of 45%.\(^10\)

Many Roma have never recovered from the economic restructuring that took place in the 1980s and 1990s and since that time there has been inadequate public investment in retraining or re-skilling the Roma workforce. As a consequence, many have become marginalised from the labour market. Even today young Roma search mainly for unskilled jobs at the bottom end of the labour market and so far economic growth has not generated sizeable numbers of low level employment opportunities. The economic growth and development in Hungary are in strands of the labour market where Roma do not have the experience or skills to compete. According to the Central European Management Intelligence, unemployment rates are greater than 50 percent among the Roma.\(^11\)

2. Racial Discrimination against Roma by Employers

Structural exclusion of Roma from the labour market is further aggravated by patterns of discrimination against Roma by employers. A number of recent Roma-specific studies affirm the significant levels of discrimination against Roma in the labour market. A World Bank study noted: “Discrimination both explicit and implicit permeates many aspects of life, including education, employment and housing.”\(^12\) When asked why they had difficulty finding employment, ethnic affiliation was the top reason given by respondents to a recent UNDP survey in Czech Republic, Hungary and Romania.\(^13\)

ERRC research in 2005 in three Hungarian municipalities (Budapest, 8th district; Miskolc; Eger) also confirmed high levels of rejection of Roma job applicants from employers on grounds related the applicants’ ethnicity.\(^14\) Our of 80 individuals interviewed, 55 responded that they had

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\(^7\) Hungary. JIM. Pg. 7.
\(^9\) Ibid. p.19.
\(^10\) Ibid.
\(^11\) Central European Management Intelligence, Macro balance and the economic enlargement (Study).
\(^12\) Ringold, Dena, Roma in an Expanding Europe; Breaking the Poverty Cycle; A World Bank Study, Washington DC, USA, 2003, p.13.
\(^14\) Number of the Roma population keeps increasing in the northern regions of the country, hence the choice
encountered discrimination when seeking employment. Twenty per cent reported that had been told that they were not being employed because they are Roma. Furthermore, in the town of Eger it was reported that labour offices have a filtering mechanism to ensure that Roma are not sent to companies who do not hire Roma. For example, a young woman testified:

I was registered at the labour office as unemployed and one day they called me about a job opportunity – cleaning work at the Public Health and Sanitation Office. I got the address from the labour office but when I went to the Public Health Office to find out about the job, they told me that the position had already been taken. I returned to the labour office to let them know. The labour office phoned the Public Health Office and they were told that the job was in fact still open but the reason they gave why I was not suitable for the cleaning position was – because I am Romani.

Most of those interviewees who claimed they experienced discrimination (39%) recorded it “as just a feeling”. An overwhelming reason for this ‘feeling’ was based on being told on the telephone that a vacancy was still available, but when the applicant turned up at the prospective employer they were immediately told that there was no longer a vacancy. This story was repeated over and over again by respondents.15

Over 90% of those interviewed have been employed officially; had a labour agreement and paid taxes on their earnings. A significant number (65%) of those interviewed said they have been employed on a casual basis; have worked or are at present working illegally. The longest period of time that people have been in continuous employment the data is as follows:

- 9 people said the longest period they have been continuously employed was between one week to six months, which is very low.
- 34 people said that they have been employed continuously for over 5 years, 17 people said they have been employed for 2 to 5 years and 15 people for 1 to 2 years.

Discrimination in employment is prohibited under the Hungarian Equal Treatment Act as well as under the Hungarian Labour Code. Existing anti-discrimination provisions however rely on individual enforcement, an approach which has severe limitations. It is dependent on individual challenging of illegal discrimination, does not address broader causes for inequality, and cannot remedy the situation of larger groups of people in disadvantaged position.

Proactive equality approach involving an enforceable positive duty on public and private bodies to identify and address inequalities in employment is currently non-existent in the Hungarian legal system. A step in the direction of promoting equal opportunity policies was introduced by the requirement that legal entities in state majority ownership employing more than 50 employees are obliged to adopt an equal opportunities plan under the Equal Treatment Act and the Labour Code.16 However, no mechanisms for ensuring compliance with these provisions have been put in place. Information on the results of reviewing the fulfillment of this obligation by companies and sanctions imposed on bodies which failed to comply is not available.

of the cities of Eger and Miskolc. The 8th district of Budapest has a sizeable Roma population, thus this region became the third sampling unit.


3. Government Measures to Address Exclusion of Roma from the Labour Market

Hungarian government has undertaken a number of initiatives targeting Roma and other disadvantaged groups aiming at their inclusion in the labour market. Few of these initiatives however were designed to meet the needs of the labour market or to re-build confidence and work-based competences of the Roma. Crucially, there is no evidence of individualisation of the labour market programmes according to factors such as gender, age, length of unemployment, etc.

One example of government intervention to remedy massive unemployment is the Phare program *Combating Exclusion from the World of Work* launched in 2002 and 2003. A specific component of the programme targeted the Roma population. According to government sources, throughout 2002 and 2003, 3000 Romani people took part in various trainings and courses offered through the programme. *The Combating Exclusion from the World of Work* consisted of qualification trainings, social trainings and short-term employment. Unfortunately, the programme lasted only 18 months. After this programme, some received additional employment for 18 months. Yet, employment was not assured for them after this period.\(^\text{17}\)

Whilst the ERRC recognises that programmes like the one described above can be very helpful and rewarding, it should also be borne in mind that initiatives such as this are only temporary solutions that target a limited number of people who need or are encouraged to participate in job training and educational programmes.

According to a Hungarian government representative, responsible for the Roma’s employment conditions at the Employment and Social Ministry, employment trainings programmes are offered through local employment offices for the Roma.\(^\text{18}\) However, local employment offices and the Social and Employment Ministry encounter problems on tracking the development of Roma in the workforce after taking part in programmes, because employment offices cannot collect data related to minorities. Based on this obstacle, it is considerably difficult to evaluate the effects of the programmes for the Roma employment situation.

According to the Employment and Social Ministry, the most common work activity that Roma participated in as a means of combating their severe unemployment was public utility work.\(^\text{19}\) Public utility work is short-term employment offered by Local Authorities. This work usually does not require many or any qualifications and on conclusion of the term of employment, does not leave the worker with a set of further skills. For example, jobs like street cleaning and park maintenance are usually included in public work. The Local Authorities hold the power in applying for more funds to keep public utility workers. At the end of this period workers become unemployed again and are entitled to unemployment benefits. Therefore, this type of work does not help the Roma prepare to enter the workforce.

ERRC research indicated that in most public works schemes there is little or no connection between work in the scheme and regular full-time employment and no obvious route into the formal labour market on completion of the programme. Research findings thus reinforce the ILO observation that, “Public works are not usually popular among the unemployed as they provide unskilled short-term jobs with no prospect of a long-term assignment, and they also carry a

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18 ERRC interview with Istvan Szirmai, September 12, 2006, Budapest.
19 The implementation of 1021/2004 (III.18) provision by the Government, 2006 March.
certain stigma.”20 An ILO evaluation of labour market policies in transition economies further showed that less than 10% of participants in public work schemes were able to find a job afterwards.

Recommendations

1. Government must take the lead in ensuring equality of opportunity for Roma to access the labour market. To achieve this, the government must move from their current passive position to one that is actively promoting equality of opportunity for ethnic minorities, especially in employment and particularly for Roma. The message from government that employment discrimination against Roma will no longer be tolerated must be clear and explicit.

2. Hungary should review domestic laws to identify how and why the legislation is so widely perceived to prevent the collection of statistics and data on the basis of ethnicity. Then take the necessary steps to amend the legislation to ensure an end to these restrictive and obstructive practices.

3. Legislation which provides a strong and regulated approach to achieving equality in employment, should be enacted. The burden for change must rest with employers, public and private. Employers must be made responsible for achieving a proportionate workforce and a workplace free of discrimination and to apply the relevant measures and take the necessary steps to change that situation within their own workforce.

4. The key to the legislation must be that every company, public and private, are required to have an ethnically proportionate workforce. Initially each firm would have to undertake a review of the ethnic composition of their workforce and thereafter record, monitor and annually report the information to a specifically designated state body.

5. If as a result of the review the company discovers that they do not have a proportionate workforce, they must ensure that corrective measures are taken and that goals and timetables are set for execution of the process. Although it would be impossible for every employer and every organisation to change the ethnic composition of their workforce overnight; it must be a process that starts now and is linked with and guided by clear goals and timetables.

6. The public sector should lead by example and the requirement to have a proportional workforce should be imposed on government Ministries. It should be a statutory requirement for the public service to monitor and guarantee equality in their workforce.

7. Governments should establish specific goals and timetables to reduce the employment differentials between Roma and non-Roma employed in the public service. Governments should publish the timetable and on an annual basis report the progress that is being achieved. If properly managed this mechanism would go some way to strengthen and modernise recruitment practices to government Ministries in the five countries included in the research.

8. Disqualification from government and EU tenders would be a major driver for change for many companies. Contract compliance is an effective mechanism to guarantee that only companies which comply with the principles of fair and equal employment have access to government resources.

9. At all levels of government, national regional and local, before a grant or contract (national, EU, World Bank loans and donor funding, etc.) over a certain value is awarded, but low enough to guarantee a high degree of coverage, should require that companies provide proof that they comply with equal opportunity practices in their company.

10. Companies should be required to obtain a certification on equality grounds before they can be considered for a grant or contract.

11. Instead of a heavy-handed approach involving measures such as public works, Governments need sophisticated programmes that take account of the needs of the labour market and are designed to provide sustained and targeted investment to re-build the confidence and work-based competences of the Romani population.

12. To begin to understand the complexities of the problem and the solutions of the mass unemployment that exists in Roma populations, governments need to invest in sophisticated labour market intelligence that will break the problem down and develop more manageable, sustained and systematic types of intervention.

**Article 11: The Highest Attainable Standard of Health**

Research indicates serious disparities in health status between Roma and non-Roma in Hungary. According to a Delphoi Consulting study, the Roma population has a life span about 10 years shorter than that of the non-Roma population. The same study found that 4% of Roma were affected by tuberculosis, while for the total population this percentage was below 1; 9.3% of Roma suffered from asthma compared to 1.4% of the general population; 17.1% of Roma suffered from ulcer compared to 3% of the total population; and 13.3% of Roma were affected by blindness compared to 1% of the total population.²¹

Health status is a complex phenomenon affected by numerous factors, among them poverty, lower levels of education, higher exposure to health risk factors due to inadequate housing, etc. High levels of social exclusion among Roma determine the poorer health status of this community. Inadequate housing of Roma – often the result of direct discrimination in housing policies and lack of systematic government policy to ensure access to adequate housing – is a crucial factor contributing to both poor health and exclusion of Roma from access to health care. Forced evictions are widely and frequently reported in Hungary, apparently arising due to a number of factors, including changes to the legal regime which have significantly eroded the rights of tenants. Roma in Hungary have been subjected to forced evictions with increasing frequency in recent years. According to one study monitoring the Hungarian media during the period January 1, 2003 through November 1, 2003, in 55% of eviction or threatened eviction cases reported, the victims were identified as Romani, although Roma account for probably

around 6 percent of the total population of Hungary. Further, local authorities often fail to provide alternative accommodation to forcibly evicted Roma, effectively rendering many homeless. Forced evictions often lead to the removal of children from their families into state care system given that the family is in crisis situation and cannot take proper care of the child.

Disparities in health status in the case of Roma are aggravated by structural barriers for access to quality health services arising from the functioning of the health care system as well as from regional inequalities in Hungary.

Furthermore, disparities in health status are influenced by high levels of prejudice among health practitioners resulting in discriminatory practices in the treatment of Romani patients and in the provision of medical services of lower quality. ERRC interviews with a number of health care professionals in Hungary as well as testimony of Roma revealed that many medical professionals freely express negative prejudices and stereotypes of Roma. ERRC researchers repeatedly heard racist, humiliating remarks about excessive birth rates among Roma, abuse of the social welfare system by Roma, unwillingness of Roma to find decent work, irresponsibility about their lives and the lives of their children. A common view is that Romani patients are undisciplined with regard to medical treatment; they purportedly call doctors and ambulances on a whim and not when they really need it, and they visit the doctor when seeking some benefit. Such prejudiced attitudes may lead to inefficient treatment of patients. For example, a 32-year-old Romani man from Arlo, Borsod-Abaúj-Zemplén County, Hungary, testified to the ERRC that he is a bricklayer and as a result of the heavy physical work he suffered an intervertebral disc protrusion. He went to consult with a doctor who was acting as a substitute for his GP. The doctor expressed doubts that the man had any serious problems because the doctor thought he was too young. The doctor then made remarks that the man wanted to be examined only to be placed on sick leave and make money. The doctor reportedly did not even let the man explain his problem. Three months later, when the regular GP was back, the man was sent to hospital for treatment of his spine.

The ERRC brings to the attention of the CESCR the following concerns about access of Roma in Hungary to health care and discriminatory practices in the provision of health care:

Physical Remove from Health Services

Access to health services is problematic for some communities due to the fact that these communities live in geographically isolated and/or economically depressed areas. A survey conducted by the Hungarian Delphi Consulting in 2003 revealed inequalities in access to health care affecting smaller settlements. Excluding Budapest, 5.9% of the country’s population lived in a settlement without a local GP. This number was 6.1% in the case of pensioners or about 128,000 pensioners lived in settlements without direct access to a GP. In the case of Roma, figures indicated that, excluding Budapest, 18.6% of the country’s total Roma population or over 100,000 individuals lived in settlements without a local GP. This situation results from the fact that Roma tend to live in small settlements, and their numbers are high in very small villages that are dying out or are secluded and are becoming predominantly Roma. These settlements have no basic institutions and the non-Romani inhabitants have moved out while poorer Roma have moved in.

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Provision of Maternity Health Services in Segregated Settings

Targeted research by the ERRC on access of Roma to health care in 2003-2005 revealed systematic ethnically-based separation of Romani women in maternity wards in hospitals in various places throughout Hungary. In 2003, the ERRC documented forty-four cases in which Romani women were reportedly placed in separate hospital rooms from non-Romani women. In Miskolc, Borsod-Abaúj-Zemplén County, in the Vasgyári hospital, according to the testimony of one Romani woman, despite the fact that there was a free bed in a room with five other non-Romani women, the Romani woman was placed in an empty room all by herself. She stated that this was humiliating and that she felt offended. Another Romani woman from the same hospital said that the separate “Gypsy room” was not cleaned during her stay in the hospital and that the Romani women in the room had to clean it themselves. The women stated that the phenomenon of separate rooms had not existed during Communism, when all women were treated equally. In 2005, 39-year-old Ms B.C. also told the ERRC that in the Miskolc maternity hospital, rooms 8 and 9 were only for Romani women. She herself was placed in such a room. The rooms are reportedly called by the doctors “the Chinese quarter”. During an interview with the ERRC in October 2005, a doctor on duty in the Miskolc maternity hospital stated that there are separate rooms for Romani women in the hospital. He argued that this is not discriminatory treatment but was done for hygienic reasons, “because all Romani women are smokers.” He claimed that Romani women who do not smoke would be placed in a mixed room.

Ms Szilvia S., 26, a Romani woman from Nagyecsed, Szabolcs-Szatmár-Bereg county, reported that room No. 8 in the Mátészalka hospital was a “Gypsy room”. M., a young Romani woman from the same town, told the ERRC that, on both occasions when she went to the hospital to give birth, she was put in room No. 8. When she asked the nurse if she could change rooms, she was told that there were no other beds available. The nurse also said that women in room No. 8 were not allowed to bring stereos or television sets into the room, whereas this was allowed for non-Roma in other rooms. A 37-year-old woman from Tiszavasvári in the same county, told the ERRC that the maternity ward in the hospital in the town of Nyíregyháza had two divisions: Class A and Class B. Class A was for women who were able to choose a doctor and pay, and Class B was for Romani and poor women. A 20-year-old man from the same town told the ERRC that in February 2004, when his wife gave birth to their youngest child, she was first placed in Class A and then moved to Class B, according to him for no other reason but her Romani background.

Denial of Emergency Aid

In some parts of Hungary, Roma reported to the ERRC that emergency aid services refuse to attend to their calls – ambulances are not sent or sent only after repeated requests by the patients. In many instances, the ethnic background of the patient is easy to recognise by their address. In a 2004 study, Delphoi Consulting found that 20.7% of adult Roma reported denial of ambulance coming on calls during weekends and nights. The denial of visitations by an ambulance during night duty affects children and adults at the same ratio. Forty percent of the Roma who live in

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26 ERRC interview, October 2005, Miskolc, Hungary.
segregated settlements with a large number of people together, experienced the denial of an ambulance visit.\textsuperscript{29}

Denial of emergency aid services to Roma is also confirmed by medical professionals themselves. Some of them justify failure of emergency services to respond to calls from Roma by claiming that Roma abuse the emergency aid system – they resort to emergency aid because it is more comfortable and they don’t have to wait for their appointment with doctors. A paediatrician from Arlo, north-eastern Hungary, for example, commented: “When they call the emergency, they are often very arrogant. I don’t even feel like talking to them. They call the ambulance for no reason. Somebody is coughing and they cannot go to the doctor because there are another five kids at home. It is easier for them to call the doctor.”\textsuperscript{30}

\textbf{Extortion of Money from Patients}

The practice of giving money to doctors for provision for which the doctor is not entitled to a direct payment appears to be widespread in Hungary and does not affect only Romani patients. The usual explanation for such payments provided by the patients is that they serve as guarantee for quality treatment and good attitude on the part of the health providers. Indeed, some Roma in Hungary testified to the ERRC that they voluntarily offered money to doctors in the hope to be treated with due care. In a number of cases, however, provision of medical services to Roma was made conditional on the ability of the patient to give a bribe to the doctor. Doctors demanded payment from Romani patients even in cases when patients made clear that they cannot pay or cannot pay the amount specified by the health provider.

During ERRC field research in Hungary in 2005, a number of Roma testified that they were coerced by doctors into making out-of pocket payments in order to receive services. In what seems to be a disturbing trend doctors frequently demand money from Roma to deliver children. In the north-eastern Hungarian Romani communities of Arlo and Bánszállás, seven interviewees stated that a certain obstetrician, Doctor K., made them pay for delivering their child. He reportedly told his patients: “If you pay, you will have a baby, if you don’t pay – you will not have the baby.” A 21-year-old Romani woman testified to the ERRC that Doctor K. told the woman that the delivery of her child would cost twenty thousand Hungarian forints (approximately Euro 80). The woman’s husband paid Doctor K. five thousand forints and pleaded with the doctor to allow him to pay less as he was unemployed and did not have the money. Doctor K. reported told him: “Isn’t your first baby worth ten thousand forints to you? If you want to have a healthy baby you’d better pay.” The husband was able to pay Doctor K. five thousand more forints after which Doctor K. agreed to assist with the birth.

\textbf{Perceived Discrimination in the Provision of Medical Services}

Roma who have had encounters with medical professionals often have the perception that they have been treated with less care and respect as compared to non-Roma. Although some of the interviewed Roma found it difficult to identify obvious examples of discrimination, they believed that less favourable treatment of Roma is a fact. As a 46-year-old Romani man in Arlo, north-east Hungary, stated: “You just feel it. You feel by the way they approach you. It is difficult to


\textsuperscript{30} ERRC interview, March 2005, Arlo, Hungary.
express in words.”31 A number of people said that they cannot describe doctors’ attitudes towards them as “rude” but rather as “lack of desire to give their time and efforts to us”.

In a number of instances, Romani patients complained that doctors failed to examine them or performed only cursory examinations. The perception of the Romani patients has been that doctors avoid physical contact with them. A 54-year-old Romani woman from the village of Csenyété, in Borsod-Abaúj-Zemplén County, Hungary, told the ERRC that the GP in their village never checks patients, just writes prescriptions.32 A 70-year-old Romani woman from the same village told the ERRC that she had problems with blood circulation. She was given a diuretic by the doctor who was in place of the village GP. The woman insisted that the doctor take her blood pressure. He refused to do so, and reportedly pushed her out of his room, yelling “Get out!” She thought that “the doctor hated the Gypsies.”33 In Tiszavasvári, a 29-year-old Romani woman told the ERRC that the paediatrician did not want to check her 4-year-old child despite the fact that the child had high temperature. The doctor only ordered the nurse to bring an injection. The woman believed that the doctor was racist and said that she asked assistance from the medical centre to change him.34

Informed Consent in Cases of Sterilisation

The ERRC notes that the Hungarian government has to amend its legislation and policies concerning patient’s informed consent in cases of sterilisation according to a recent decision by the UN Committee on the Elimination of Discrimination against Women (CEDAW). The decision, communicated to the ERRC in August 2006, condemned Hungary for violating the Convention on the Elimination of All Forms of Discrimination against Women in connection with the sterilisation of a Romani woman. On 2 January 2001, a Romani woman (Ms.S) was sterilized by doctors at the Fehergyarmat hospital. While on the operating table she was asked to sign forms giving her consent to this and other operations. However they did not explain the intervention, its nature, possible risks, or what the consequences of being sterilized would be. She was not told about other forms of birth control either. It was only after the operation that she learnt that she could not become pregnant again. Ms S. wasn’t awarded any remedy by Hungarian courts. The complaint before the CEDAW brought by the ERRC and the Budapest-based NEKI claimed that Hungary is in violation of a number of provisions of the Convention, as a result of: (1) Failure to provide adequate information on contraceptive measures and family planning; (2) The lack of informed consent on the part of the Roma woman as a violation of her right to appropriate health care services, and (3) Interference with Roma woman’s ability to have children in the future.

The Committee held that appropriate compensation should be paid to Ms S. commensurate with the gravity of the violation of her rights. The decision of the Committee further states that the government should review domestic legislation on the principle of informed consent in cases of sterilisation and ensure its conformity with international human rights and medical standards. It should also repeal provisions allowing physicians “to deliver the sterilization without the information procedure generally specified when it seems to be appropriate in given circumstances.” Public and private health centres that perform sterilization procedures, including hospitals and clinics, should be monitored so as to ensure that fully informed consent is being

32 EERRC interview, October 2005, Csenyété, Hungary.
33 EERRC interview, October 2005, Csenyété, Hungary.
34 EERRC interview with a 29-year-old woman, May 2005, Tiszavasvári, Hungary.
given by the patient before any sterilisation procedure is carried out, with appropriate sanctions in place in the event of a breach.

Recommendations:

1. Design long-term policies for tackling health inequalities between Roma and non-Roma and define concrete measures and targets to be achieved.

2. Carry out regular assessment of the impact of public health policies on Roma, based on publicly available data disaggregated by ethnicity and gender. Ensure continuity for practices proven to have had a positive impact.

3. Ensure that health policy programmes are developed with an intersectoral perspective for effective targeting of Romani communities in order to reduce health inequalities. Health policy programmes should identify ways in which health authorities can support other governmental bodies that are responsible for sectors affecting health and access to health services such as social assistance, housing and sanitation; and food security policies.

4. Carry out screening of Romani communities for tuberculosis and hepatitis B and ensure that all affected individuals are treated. Launch health prevention and promotion programmes in relation to these highly contagious and fully avoidable public health threats.

5. Immediately proceed with action to provide a safe and healthy environment for Romani communities living in extremely substandard conditions and relocate to areas providing adequate housing alternatives, on a voluntary basis and after consultation with those affected, families living under such conditions to other areas.

6. Undertake periodic analyses on the basis of health data disaggregated by ethnicity and gender of the factors influencing access of Roma to health services, including racial discrimination.

7. Ensure preferential distribution of costs and benefits of investment in health care provision in areas with high numbers of Romani populations.

8. Conduct on a regular basis anti-discrimination training of public and private health care providers as well as include anti-discrimination training subjects in the curricula of medical universities and colleges.

9. Ensure that existing laws and policies for gender equality include provisions for preventing and addressing the multiple barriers female members of minority groups face in exercising their fundamental human rights;

10. Exempt vulnerable population groups, including Romani women in vulnerable positions, from user fees and other out-of-pocket payment for medical services and from medication costs;

11. Provide on a regular basis outreach services to reach Romani women and girls who might otherwise have little access to medical services;
12. Implement patient-oriented educational health programmes for Romani women not limited to reproductive and maternal health; support culturally appropriate interventions to reduce morbidity and mortality from breast cancer and cancer of the uterus;

13. implement educational programmes aimed at prevention of tuberculosis and hepatitis B.

**Article 11.1, Right to an adequate standard of living**

In the field of housing, a number of the actions of the Hungarian government in recent years in both policy- and law-making have dramatically worsened the situation of many persons. Roma have been particularly affected, both because of powerful racial animus in Hungary, and because the Hungarian government has noticeably failed to provide adequate anti-discrimination law provisions in the field of housing. Some aspects of the very troubling corpus of housing issues in Hungary as they relate to Roma follow:

**Forced Evictions**

Forced evictions are now widely and frequently reported in Hungary, apparently arising due to a number of factors, including changes to the legal regime which have significantly eroded the rights of tenants. Roma in Hungary have been subjected to forced evictions with increasing frequency in recent years. According to one study monitoring the Hungarian media during the period January 1, 2003 through November 1, 2003, in 55% of eviction or threatened eviction cases reported, the victims were identified as Romani, although Roma account for probably around 6 percent of the total population of Hungary. Further, local authorities often fail to provide alternative accommodation to forcibly evicted Roma, effectively rendering many homeless. Forced evictions often lead to the removal of children from their families into state care system given that the family is in crisis situation and cannot take a proper care of the child.

The obligations of States to prevent and remedy forced evictions are most clearly set out in General Comments of the UN Committee on Economic, Social and Cultural Rights (CESCR) concerning Article 11(1) of the International Covenant on Economic, Social and Cultural Rights (ICESCR), to which Hungary is a party. In its General Comment 4, CESCR, which monitors States’ compliance with the ICESCR stated, at paragraph 18, “[…] instances of forced eviction are *prima facie* incompatible with the requirements of the Covenant and can only be justified in the most exceptional circumstances, and in accordance with the relevant principles of international law.” In its General Comment 7 on forced evictions, the CESCR defined forced evictions as “the permanent or temporary removal against their will of individuals, families and/or communities from the homes and/or land which they occupy, without the provision of, and

35 For a non-exhaustive list of forced evictions cases documented by the ERRC with support from the Norwegian Foreign Ministry and the British Embassy in Budapest, see “Comments of the European Roma Rights Center (ERRC) and the Centre on Housing Rights and Evictions (COHRE) on the occasion of the Article 16 Review of Greece, Hungary and Turkey under the European Social Charter supervision cycle XVII-1”, December 1, 2003, available on the ERRC Internet website: [http://errc.org/publications/indices/housing.shtml](http://errc.org/publications/indices/housing.shtml).


37 Except where otherwise noted, cases summarized are based on ERRC field research.

access to, appropriate forms of legal or other protection.” Paragraph 16 sets out, “Evictions should not result in individuals being rendered homeless or vulnerable to the violation of other human rights. Where those affected are unable to provide for themselves, the State party must take all appropriate measures, to the maximum of its available resources, to ensure that adequate alternative housing, resettlement or access to productive land, as the case may be, is available.” The United Nations has further set out in its Fact Sheet 21 on the Right to Adequate Housing the duty of governments to respect and protect the right to adequate housing and specifically, refrain from and prevent the practise of forced evictions on their territory.

Racial segregation in the field of housing

"In 1971", nearly two-thirds of the Roma households (65.1%) lived in segregated areas called 'colonies' under unfavourable housing conditions. [...] Started in the 1960s and continued until 1988, the colony elimination programme had a very important role in improving the settlement and housing conditions of Roma people compared to their former situation. The 1993-94 survey pointed out that 13.9% of the Roma population (about 70 000 people) lived in segregated settlements or colony-type neighbourhoods with insufficient utility supply, and low infrastructure, or in urban colonies in poor conditions. Another study carried out in 2000 found that approximately 20% of the Roma population (100 000 people) lived in segregated settlements. The difference between 1993-94 and 2000 can be explained by the increasing segregation and marginalisation of the poorest stratum of the population.

Although the overall living conditions for the whole Romani population have, according to some surveys, improved in the last three decades, many Romani settlements in Hungary are manifestly inadequate for living. According to the World Bank, 54.9 percent of Romani households in Hungary do not have access to hot running water, 34.7 percent do not have access to cold running water, 66.6 percent do not have adequate sewerage, 49.8 percent do not have bathrooms or showers in their homes, 50.1 percent do not have indoor toilets and 13.2 percent have one or more member sleeping on earthen floors in their homes. According to another study, the homes in which Roma were found to be living in Hungary were disproportionately small, given the number of people per household. 32.8% of houses where Roma families live have only one room whereas this is 15.4% for the non-Romani population.

Segregating forces in Hungary are extremely powerful. In recent years, non-Roma have on a number of occasions obstructed Roma from moving into certain areas. Roma have been prevented from moving into housing by physical force (e.g. Roma families bought houses which were subsequently damaged by locals such that the Roma could not or would not move in, or sometimes the families were prevented from moving into housing by the locals forming “human

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39 CESCR. General Comment 7: The right to adequate housing (art. 11.1 of the Covenant): forced evictions. May 20, 1997, paragraph 3.
40 Sociological Institute of the Hungarian Academy of Sciences, 1971 survey.
41 Study commissioned by the Ministry of Agriculture and Rural Development, 2000.
43 In 1971 61% of the Romani houses had earthen floors, in 1994 only 10.1% had earthen floors; 56.1% of Romani houses had electricity in 1971 and 97.9% of Romani houses reportedly had electricity in 1994. in Forray R. Katalin and Mohácsi Erzsébet (ed.), 2002, Esélyek és korlátok, A magyarországi cigány közösségek az ezredfordulón, Budapest-Pécs, p. 35.
45 Forray and Mohácsi, p. 35.
chains” – Aba-Belsőbáránd, etc.) as well as by local authorities as a result of petitions by inhabitants (Celldömőlk-Alsóságon, Eger Felnémeti).46

On 26 September 2003, the European Roma Rights Center (ERRC), together with the Legal Defense Bureau for National and Ethnic Minorities (NEKI), filed a pre-application letter against Hungary with the European Court on Human Rights in Strasbourg. The submission concerns racially-motivated threats and discrimination in access to housing, perpetrated by the local government officials and the non-Romani residents of Gyüre47. Ms. Bertalan Nagy is a Hungarian citizen of Romani origin with six children decided to buy a house in Gyüre. After it became publicly known that Mr. and Mrs. Kahlík -- both Ukrainian citizens of Hungarian origin -- intended to sell their house to Ms. Nagy, several non-Romani inhabitants of Gyüre as well as a number of local government officials resorted to threats and coercion to try to block the upcoming real estate transaction. The mayor and the notary held a meeting at the local council office, on the day when the purchasing contract was finally signed, following which five men, driving a council-owned car, went to the Kahlík's family house and threatened them by saying that the whole village would rather gather and burn their house down then allow it to be sold to Roma. Later that day, Mr. László Herceg, the mayor of Gyüre, spared no effort and came personally to ask the Kahlíks to terminate the contract as "Roma cannot buy a house in Gyüre" and "no Gypsy may live on the main street". On 15 August 2001, Ms. Nagy was called to come to the Council office for a meeting. The mayor of Gyüre, the notary, a representative of the Ministry of Internal Affaires, the deputy mayor of Jánd (the village affected by the by floods where Ms Nagy escaped from) and a representative of the Minority Self-Government of Gyüre all took part. Ms. Nagy was told not to buy the house because the Kahlík family, being Ukrainian, could not sell the property. In addition, Ms. Nagy found out that, two days earlier, the notary of Gyüre had gone so far as to sequester the Kahlíks family house based on a debt that subsequently turned out to be non-existent. In view of the obvious inability and/or unwillingness of the Hungarian authorities to provide Ms. Nagy and the Kahlík family with a remedy domestically, ERRC and NEKI have decided to turn to the European Court of Human Rights on their behalf and request that international justice be served and their clients afforded adequate and comprehensive redress.48

On 8 July 2005, ERRC with NEKI submitted an application to the European Court of Human Rights in a companion case to Kahlík in which the same local government tried to stop the sale of a house to a Romani family on racial grounds.

Denial of access to social housing
Local authorities in Hungary have in recent years sold off significant amounts of the public (including social) housing stocks, apparently in order to compensate for declining revenues, creating a situation in which Hungary may not be able in practice to meet the housing needs of the poor and/or extremely poor. In addition, as detailed below, a number of local authorities have adopted very arbitrary rules as to eligibility for public (including social) housing, rules which in practice may preclude many Roma from eligibility. Finally, widespread anti-Romani sentiment in Hungary means that unfortunately, allegations of racial discrimination in the allocation of public housing are often plausible.

46 Forray and Mohácsi, p. 36.
47 The application asserts violations of Article 3 (freedom from inhuman and/or degrading treatment), Article 8 (right to family and private life), Article 1 of Protocol 1 (right to peaceful enjoyment of ones possessions), Article 13 (right to an effective domestic remedy) and Article 14 (right to non-discrimination) of the European Convention on Human Rights.
48 For more information on the case, please go to http://www.errc.org/cikk.php?cikk=327
In recent years, Roma in Hungary have often been blocked from accessing social housing, despite frequently manifest need. Many Roma are excluded from access to social housing in Hungary as a result of decisions taken by local authorities. There are very widespread allegations of discrimination in the allocation of public housing -- including social housing -- in Hungary. Also, according to ERRC research, many local governments have enacted provisions barring persons caught arbitrarily occupying property from having access to social housing for a number of years, generally between 3 and 5 years, though in an extreme instance, a representative of the Debrecen local government stated that illegal occupants are denied access to social housing for a period of 10 years. While on its face such provisions are not discriminatory, by proportion and also possibly even by number, many more Roma than ethnic Hungarians are apparently unable to afford even nominal housing costs, forcing a disproportionate number of Roma to occupy homes without legal permission. As a result, many persons with the greatest need for social housing are effectively denied access to such. For example, out of twenty-eight Romani families surveyed in segregated settlements in Ózd, seventeen (i.e., well over half) reported that they could not apply for social housing because they had previously been caught illegally occupying property in the city. In Budapest, Ms N.T., a 50-year-old Romani woman, told the ERRC that she had applied several times for social housing from Budapest’s 8th District authorities, but was rejected because the family had occupied housing several times without permission. Ms N.T.’s 10-member family, including 6 children below the age 18, illegally occupied a 24-square-metre flat in Budapest’s 8th District at the time of ERRC research. The family had also reportedly been rejected for financial aid by the local government. ERRC is concerned that the above refusals of social housing have a specially negative impact on the most needy families and can lead to the removal of children from their families.

After the ERRC had challenged the above decrees on a number of grounds, on February 22, 2005, the Hungarian Constitutional Court struck down as unconstitutional provisions of Budapest 3rd district local government decree regulating social housing. After these developments, on 2 May 2005, the Parliamentary Commissioner for Civil Rights and the Parliamentary Commissioner for National and Ethnic Minority Rights officially requested the Minister of Interior to order the county-level administrative offices to examine the local self-government regulations on social housing, with the aim to ensure that criteria for allocating social housing are constitutional. An amendment to the Hungarian Housing Act from March 2006, included an explicit requirement of social criteria for the allocation of social housing. The impact of this amendment is still to be seen.

Often, local governments place arbitrary conditions on eligibility for housing assistance, with the effect that Roma do not qualify to receive public housing, including social housing. For example, some local governments reportedly require applicants for social housing to possess large amounts of money before their applications for social housing are considered. The local governments of both Budapest’s 8th District and Ózd impose such conditions. During interviews with members of

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49 For example, Decision 41/2003 of Budapest’s 8th District Government on social housing states, at Article 6(1), “A new contract cannot be made with those persons who: […] (b) occupied any flat arbitrarily or by trespass in the last three years […]” (unofficial translation by the ERRC). Decision 41/2003 entered into force on September 1, 2003. Amongst the other districts in Budapest that responded to the ERRC’s request for information, the term is 3 years in the 21st District and 5 years in Budapest’s 1st, 3rd and 10th Districts.

50 According to Ms Zsuzsa Feczák, Head of the Civis Ház Housing Department “[…] squatters have no chance at all to get a legal rental contract. Obviously, the local council would like to know that the flats it owns are in the hands of the rightful tenants. Squatters, as we all know, do not look after their surroundings or houses.” (ERRC interview with Ms Zsuzsa Feczák, October 2003, Debrecen.)
the local government in Ózd, it was revealed that the local council gives preference to families who can prove savings in advance, and who will be able to fund their own housing in a few years, with the help of a state-subsidised loan. This all but excludes persons who are unemployed and/or relying on social welfare or otherwise in situations of poverty and/or extreme poverty -- including many Roma -- from accessing social housing. A similar situation has been documented in the eastern Hungarian city of Debrecen.

Roma in Hungary have also been denied access to social housing as a result of the distribution of social housing by local governments via public auction. Ms Ildiko Batizi, head of the Debrecen-based non-governmental organisation Provisional Homes for Families explained, “It is very hard to get a social flat in Debrecen because of the bidding. The person who offers the highest price gets the flat. Nowadays, social flats can cost up to 40,000 forints per month. Many Roma who most need such flats have no possibility to pay this amount.”\textsuperscript{51} In the eastern Hungarian town of Hajdúhadház, social flats are also let through public auction, though such auctions are often not advertised. Reportedly, many flat auctions are announced only to a select few, usually those with ties to the local government. Romani residents in Hajdúhadház report that they do not receive notification that social flats will be auctioned off, with the exception of those flats in poor condition and located near Romani settlement. There are currently around one hundred social flats in Hajdúhadház, according to Mr Levente Kis of the Association for Hajdúhadház, but not a single Romani family reportedly occupied a social flat in the town at the time of the ERRC research in April 2003.\textsuperscript{52}

Broadly, Hungarian lawmakers have failed to state explicitly that discrimination in access to housing is banned. Although Hungary importantly adopted a comprehensive anti-discrimination law in December 2003, the law is noteworthy for failing to include unequivocal provisions banning discrimination in access to housing. Despite comprehensive lists of service providers and areas covered by the ban on discrimination included under Articles 4 and 5 of the new law, housing is not explicitly included as covered by the ban. Although housing appears at Article 26 of the law under Chapter III in matters related to the implementation of justice, provisions in the key area of access to housing (Article 26(1)(b)) pertain only to housing provided by the state or local government, and are vaguely worded such that only "setting the conditions for the sale or rental of flats" are covered by the ban.

In the following, we show a table on the repartition of Roma living in different areas based on segregation (%).\textsuperscript{53}:

<table>
<thead>
<tr>
<th>Repartition</th>
<th>Budapest</th>
<th>City</th>
<th>Town</th>
<th>Village</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only Roma live together but not settlement</td>
<td>16,9</td>
<td>18,9</td>
<td>10,4</td>
<td>11,2</td>
</tr>
<tr>
<td>Ghetto, settlement lived only by Roma</td>
<td>27,8</td>
<td>4,0</td>
<td>32,1</td>
<td>28,4</td>
</tr>
<tr>
<td>Mixed environment</td>
<td>47,3</td>
<td>50,1</td>
<td>40,5</td>
<td>51,0</td>
</tr>
<tr>
<td>No Roma family lives in the neighbourhood</td>
<td>4,1</td>
<td>6,6</td>
<td>6,1</td>
<td>7,7</td>
</tr>
<tr>
<td>Cannot be determined</td>
<td>3,8</td>
<td>20,4</td>
<td>10,9</td>
<td>1,8</td>
</tr>
</tbody>
</table>

\textsuperscript{51} ERRC interview with Ms Ildiko Batizi, April 2003, Debrecen.
\textsuperscript{52} ERRC interview with Mr Levente Kis, April 2003, Hajdúhadház.
Article 13: The Right to Education

Serious gaps in the educational attainment of Romani and non-Romani children are acknowledged by the Hungarian government. The government report states that, “According to a survey carried out by the Ministry of Education in 2000, almost all Roma children complete the eight classes of the primary school. This is a significant improvement, since at the beginning of the seventies and the nineties this proportion reached respectively only 26% and 75%. However, a great number of these children finish their primary school studies only after the compulsory schooling age, and their studying in secondary grammar or vocational schools is not satisfactory either from a quantitative or from a qualitative point of view. Some 84-85% of Roma children completing their primary education go on studying at secondary level, but only one fifth of them choose schools providing a secondary school leaving certificate that would allow studies in higher education. The majority of Roma secondary school pupils get qualified in subjects that provide them with only limited chances for employment. Less than 1% of Roma hold higher educational certificates.”

1. Segregated Schooling of Roma

Educational attainment is directly related to the quality of educational services provided. An increasing number of Romani children in Hungary in recent years are deprived of equal educational opportunities as a result of widespread patterns of school segregation. Segregated education of Romani children is a major reason for the significant disparities in the quality of schooling between Roma and non-Roma. Recent research has demonstrated that segregated schools provide inferior educational services and magnify initial disadvantages. The authors concluded that: “School segregation, irrespective of the mechanism that generated it, has a significant effect on students’ development. School segregation of children from families of lower social status leads to a declining level of education in schools attended by those students. The two phenomena are connected, not incidentally but in a causal way. In a highly segregated school system, initially disadvantaged children are bound to receive lower quality education than in a less segregated school system.”

Special remedial schools for children with mental disadvantages: One of the most harmful discriminatory effects from the functioning of the educational systems in Central and Eastern Europe has been the erroneous placement of Romani children in special remedial schools and classes for children with light mental disadvantages. As elsewhere in this region, Hungary’s system of remedial special schools for children with developmental disabilities has been used for about half a century as a repository for Romani children whom the regular primary schools could not or did not want to educate. More recent research indicates that the tendency of overrepresentation of Romani children after 1989 remained stable.

55 In Hungary there are several types of special schools for children with various health and mental disorders. Romani children have been found to predominate in one specific type of special schools – the schools for children with light mental disadvantage. We use the term “special schools” to refer to this particular type of schools.
Most experts agree that a good number of Romani children attending special remedial schools are not even slightly mentally disabled. The reasons for placement in special education rarely have to do with the intellectual capacity of the children: a combination of culturally-biased tests; prejudices among educationalists; lack of information on the part of Romani parents; vested interest of special remedial schools which receive substantially higher state subsidy than regular schools; and lack of independent mechanisms to supervise placement of children in special schools, have determined overrepresentation of Romani children in these facilities.

**Inter-school segregation:** Romani children tend to be concentrated in certain schools within one municipality while their number is considerably fewer in other schools. The schools with higher numbers of Romani children are also schools where the majority of the students come from socially-vulnerable backgrounds. To a certain extent, these disparities are created by residential patterns. However, they are reinforced and perpetuated by factors related to the operation of the educational system in Hungary. One major factor which has predetermined the high selectivity of schools and consequently the concentration of Romani children is the free school choice system in effect in Hungary since 1993. Parents can enroll their children at any school and schools can admit or reject anybody they want from out of the district. This system has caused stable patterns of segregation along ethnic and social lines: children of middle-class families tend to study in better schools, while children of poorer families, among them a significant number of Roma, study in worse schools. This system has created drastic disparities in the quality of schooling between schools. The schools with higher percentage of Romani children are of lower quality and are avoided by non-Romani parents and teachers.56

**Segregation within schools:** Romani children are often placed in separate classes within schools. A widespread practice of segregating Romani children in Hungarian mainstream schools is based on a Ministry of Education decree from 1997 on the education of the national and ethnic minorities. The decree was used as a ground for segregating Romani children in all-Romani “catch-up” classes which are frequently substandard, offering poor quality education in spatially segregated areas. Most Romani children educated in “catch-up” classes are never mainstreamed into the normal school system, but rather finish their educational career in the separate system, often as early as the 5th class.

Another form of separating Romani children from non-Romani children is establishing classes specialised in language teaching, mathematics, etc. which are usually reserved for non-Romani children.

**Private Students:** Mainstream schools also rid themselves of Romani children by putting pressure on Romani parents to place their children in the so-called “private student status”, which in effect is used to release the child from compulsory school attendance and to end the school’s obligation to educate Romani children adequately. Students can be exempted from all class attendance if they are officially permitted home study. Such students fulfill their educational obligation by taking exams at the end of each semester, before an independent panel.

**Data about School Segregation**

According to a study carried out by the Hungarian Institute for Education Research in 2000 as many as 770 homogenous Roma classes existed in Hungary; 9000 Roma pupils, 9.6% of all,  

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attended these classes. In 740 classes the proportion of Roma pupils exceeded 75%; these classes were attended by 10,000 Roma pupils, 11% of all. And in 1230 classes the proportion of Roma pupils was between 50% and 74%, these classes were attended by 13,000 Roma pupils, 14.3% of all. Of Roma pupils, who constitute 11% of all general school pupils, a good third, that is to say 32,000 persons, is attending classes where Roma pupils are in majority.\footnote{Ibid.}

In the academic year of 1999/2000 18% of Roma pupils attended schools of Roma majority, whereas this proportion was 30% in 2004.\footnote{See Babusik, Ferenc. Survey of Elementary Schools Educating Romani Children. Delphoi Consulting, 2000, at: http://www.delphoi.hu/aktual.htm.}

A survey by the Hungarian Delphi Consulting in 1998 examined the ratio of Romani students in special remedial programmes. It was established that the higher the ratio of Romani students in the school, the higher the likelihood that the schools would initiate a remedial education programme. Thus the schools which ran remedial programmes constituted 23.2% of the total number of schools where the percentage of Romani children was between 15% and 25%, 31% of the total number of schools where the percentage of Romani students was between 25% and 40%, and 36.6% of the total number of schools where the percentage of Romani students was above 40%. Further, the research established that the higher the ratio of Romani children in the school, the more Romani children participate in remedial education. Romani students constitute the majority of students in remedial special programmes. In almost all types of schools, regardless of the size of the school and the number of Romani students in it, Romani children comprise more than 50% of all students in remedial special education. In schools where the number of Romani children is more than 25%, the ratio of Romani children in special education exceeds 77%.\footnote{See Babusik, Ferenc. Survey of Elementary Schools Educating Romani Children. Delphoi Consulting, 2000, at: http://www.delphoi.hu/aktual.htm.}

Below we provide some examples illustrating exclusion of Romani children from equal opportunities by means of school segregation.

**Miskolc**

Miskolc is the second biggest Hungarian city, located in the Borsod-Abaúj-Zemplén County. According to information obtained by the ERRC from local experts, in the school year 2004/2005 in the 34 mainstream and 2 special remedial schools of Miskolc, out of 13,000 pupils, 17.5% were Roma. In that year, there was one Roma-only school (with 172 students) and two special remedial schools in which the majority of the student body -- above 60%, was Romani. Out of the total school population in Miskolc, 2.5% attended special remedial education, while the Romani pupils who attended special schools were 9.2%.

54.8% of the Romani children in the municipal regular schools of Miskolc attended classes where they are in minority; 31% attended classes where the proportion of Romani pupils was 50-99%; and 13.2% attended Roma-only classes.

In schools where the ratio of the Romani students was relatively high, segregation within the school was of considerable extent. Romani children were separated from their non-Romani peers on the basis of foreign language education. For example, out of 1,136 pupils in bilingual classes (English-Hungarian or German-Hungarian), there were 7 Roma children only in these classes.
Alsózsolca

Alsózsolca is a town of 6,200 inhabitants in Borsod-Abaúj-Zemplén County of Hungary. According to unofficial estimates, Roma residents are about 25% of the total population and Romani children comprise about 50% of the school population. Part of the Romani community – around 500 persons -- lives in a separate settlement.

The town has three schools. School No 3 was established in the late 1980s as a special remedial school in proximity to the Romani neighbourhood. According to estimates by local sources, Romani children are close to 100% in this school. According to the school headmaster, around one-third of the Romani children in the town have been identified as children with mental disadvantage. Most of them are educated in school number 3, but one part of them is also in school No 2.

School No 2 is a standard school in which the proportion of Romani children is roughly 50% of the student body. According to the director, the school has to maintain separate Roma classes to prevent transfer of non-Romani children to other schools, including to the neighbouring city of Miskolc. The information provided by the school authorities reveals that in the lower grades, in which there are enough children to have more than one class per grade, some of the classes are Roma-only. The Roma-only classes are small classes, a reduction allowed in cases of children with disadvantages.

There is a third school, school No 1, which by its material conditions and by the educational achievement of children is considered the best school in the town. An estimated 20-30% of its student body are Romani children. According to local sources, the school systematically avoids Romani students. ERRC research indicated that in the school year 2003-2004, 14 Romani children were transferred from this school into the special school without any examination. (Field research, Hungary, April-May, 2006)

2. Government policies to desegregate education:

2.1. Prohibition of Segregation in Domestic Law

School segregation is prohibited under Hungarian law. According to the Hungarian Equal Treatment Act, “unlawful segregation is a conduct that separates individuals or groups of individuals from others on the basis of their characteristics as defined in Article 8 without a reasonable explanation resulting from objective consideration.” The Act further stipulates that, “the principle of equal treatment is especially violated if a person or group is a) unlawfully segregated in an educational institution, or in a division, class or group within such an educational institution, b) limited to a care or educational system, or a care or educational system is created or maintained whose standards do not reach accepted professional requirements or do not meet professional rules, and thus do not ensure a reasonable expectable opportunity to prepare for state exams.”

The mere prohibition of segregation, without a positive legal duty to eliminate segregated education, does not necessarily lead to eliminating segregation as demonstrated by a recent

60 Article 10 (2) of the CXXV Act of 2003 on the Promotion of Equal Treatment and Equal Opportunities.
61 Article 27(3), Act on the Promotion of Equal Treatment and Equal Opportunities.
decision of a Hungarian court. In June 2006, the Debrecen Appeals Court found that the local council of Miskole, Hungary, has violated the prohibition of segregation in education of the Hungarian Equal Treatment Act by carrying out an administrative merge of several schools while preserving their original catchment areas. The action of the local council, the stated aim of which was to eradicate segregation, resulted instead in a consolidation of segregation – the Romani children continued to study in nominally integrated but separate facilities. The court however refused to grant the order requested by the claimant – the Chance for Children Foundation – to integrate the Romani children in mainstream classes. The Court invoked limitations of its perceived mandate when refusing to grant the request.62

2.2. Financial Incentives for Integrated Education

In 2003 the Hungarian government launched several initiatives to tackle segregation and exclusion of Romani children from education. The main government initiative directly aimed at integrating Romani and disadvantaged children in education is a statutory integration grant financed by the State. Amendments to school legislation provide an option for school maintainers who undertake to ensure progressive integration of disadvantaged students in classes with other students in the same school, to receive higher per student allowance.63 The measure targets primarily a widespread in Hungary form of segregation of Romani children within mainstream schools, by means of establishing separate classes on the basis of student achievement and on the basis of remedial education according to a modified curriculum.64

Another measure to reduce segregation concerns limitations of school choice. An amendment to the Hungarian Public Education Act, in force from January 2007, which introduces certain limitations with regard to the number of disadvantaged children who can be enrolled in a given school.65 According to the amendment, in case that a local municipality maintains more than one school, the boundaries of the neighbouring catchment zones have to be drawn so that the proportion of severely disadvantaged children shall not exceed 25% of the total number of severely disadvantaged children in that municipality. In addition, schools which have free space after the enrolment of the children from the respective school district, are obliged to enrol preferentially disadvantaged children and children with special educational needs (mentally disabled, dyslexic, etc.). Under this mechanism, decisions about which students get to fill empty spaces in a school will be made on the basis of drawing lots, transparently, in front of the applicants.

2.3. Limitations of government interventions:

Financial incentives for schools to integrate Romani children are an important but not necessarily efficient method for achieving desegregation of Roma education. Surveys and anecdotal reports

62 Further details about this judgment are available from the website of the Chance for Children Foundation, at: http://www.cfcf.hu/?nelement_id=29&article_id=38.
64 Detailed description of these types of segregation is provided in the ERRC report “Stigmata: Segregated Schooling of Roma in Central and Eastern Europe”.
in Hungary have indicated that few potential beneficiaries of the preferential subsidies for integration provided by the government undertook to apply for them.66

One significant limitation of the additional per student grants as they are applied in Hungary is that they do not address spatial segregation, i.e. uneven distribution of Roma in the schools within one administrative unit resulting in “ghettoisation” of some schools. Integration normatives have no effect on the migration of non-Romani children between schools and respectively cannot regulate the proportion of Romani and non-Romani children in a given school. On the contrary, according to experts, if segregation within one school is diminished, i.e. Romani students attend same class with non-Romani peers, absent adequate measures to control the distribution of Romani children in a number of schools, segregation between schools is likely to increase, i.e. the proportion of Roma students in some schools increases over time as a result of withdrawal of non-Romani children. A survey in Hungary carried out in June 2004 indicated that whereas segregation within schools has slightly diminished, segregation between schools has increased.67

Schools with substantial numbers of Romani children have no chance to increase the number of non-Romani children in them as a result of integration normatives. Free school choice regulations allow non-Romani children to avoid schools where the number of Romani children increases. The only type of “integration” such schools can apply is integration of Romani children from special remedial classes with other Romani children in standard classes. This process, however, does not change patterns of segregated education of Roma.

Recommendations:

In order to achieve systematic and effective implementation of school desegregation programmes, the government should ensure the enactment in national legislation of an enforceable statutory duty to desegregate education requiring public authorities to take action to eliminate segregated education within a certain period of time. The duty to desegregate education should comprise the following components: i) a baseline assessment of the situation with segregated education, including reliable data about the numbers of Romani children in segregated facilities, types of segregated facilities, and their location; ii) launching a consultation process involving relevant stakeholders, including Roma civil society organisations with the aim of formulating the principles and methods of desegregation; iii) development and implementation of long-term plans for desegregation and periodic updating of these plans; iv) annual assessment of the implementation progress based on quantifiable indicators; v) regular impact assessment to ensure that laws, regulations, and administrative provisions do not operate against the results of the desegregation policies.

66 For example, a survey among 573 school directors in 2004 in Hungary, found that 26.4% of the directors have encountered unanimous agreement among teachers and non-Romani parents with regard to the implementation of the integration subsidy; 29% of them have encountered disagreement on the part of teachers; and 24% have encountered disagreement on the part of non-Romani parents. The same study also found that 33% of the schools surveyed have already applied for the integration normative; 24.5% intended to do so; and 42.5% declared they will not apply. Of those who declared that they will not apply, 41% pointed as a reason the high number (over 80%) of the Romani children in them; 8% believed the introduction of the integration normative is too problematic; 5% opposed the integration normative; 7% did not have enough information; and 39% provided various other reasons. See Havas Gabor, Liskó Ilona: Szegregáció a roma tanulók általános iskolai oktatásában. Felsőoktatási Kutatóintézet, Budapest 2005.

67 Ibid.