



**Convention on the Rights
of Persons with Disabilities**

Distr.: General
28 June 2011

Original: English

Committee on the Rights of Persons with Disabilities

**Implementation of the Convention on the Rights
of Persons with Disabilities**

**Initial reports submitted by States parties under article
35 of the Convention**

Hungary*

[14 October 2010]

* In accordance with the information transmitted to States parties regarding the processing of their reports, the present document was not formally edited before being sent to the United Nations translation services.

Contents

	<i>Paragraphs</i>	<i>Page</i>
Abbreviations.....		4
I. General provisions of the Convention.....	1–29	5
Articles 1–4 of the Convention.....	1–29	5
II. Special rights.....	30–240	9
Article 5 – Equality and non-discrimination.....	30–45	9
Article 8 – Awareness-raising	46–49	12
Article 9 – Access.....	50–69	13
Article 10 – Right to life.....	70–71	16
Article 11 – Situations of risks and humanitarian emergencies.....	72–73	17
Article 12 – Equal recognition before the law	74–78	17
Article 13 – Access to justice	79–85	18
Article 14 – Liberty and security of person	86–89	19
Article 15 – Freedom from torture or cruel, inhuman or degrading treatment or punishment	90–96	20
Article 16 – Freedom from exploitation, violation and abuse	97–100	21
Article 17 – Protecting the integrity of the person.....	101–103	21
Article 18 – Liberty of movement and nationality.....	104–107	22
Article 19 – Living independently and being included in the community.....	108–111	22
Article 20 – Personal mobility.....	112–121	23
Article 21 – Freedom of expression and opinion, and access to information.	122–125	25
Article 22 – Respect for privacy.....	126–129	26
Article 23 – Respect for home and the family	130–134	26
Article 24 – Education.....	135–153	28
Article 25 – Health	154–169	34
Article 26 – Habilitation and rehabilitation	170–193	38
Article 27 – Seeking and providing employment	194–223	42
Article 28 – Adequate standard of living and social protection.....	224–231	47
Article 29 – Participation in political and public life.....	232–235	48
Article 30 – Participation in cultural life, recreation, leisure and sport	236–240	49
III. The special situation of women and children living with disabilities	241–251	50
Article 6 – Women with disabilities	241–242	50
Article 7 – Children with disabilities.....	243–251	51
IV. Special obligations	252–268	52
Article 31 – Statistics and data collection.....	252–255	52

Article 32 – International cooperation	256–257	53
Article 33 – National implementation and monitoring	258–268	54

Abbreviations

NDC	National Disability Council
ORSZI	National Rehabilitation and Social Institute
FSZK	Public Foundation for Equal Opportunities for Disabled Persons
MEOSZ	National Federation of Disabled Persons' Associations
MVGYOSZ	Hungarian Federation of the Blind and Partially Sighted
SINOSZ	National Association of the Deaf and Hard of Hearing
ÉFOÉSZ	Hungarian Association for Persons with Intellectual Disability
AOSZ	Hungarian Autistic Society

Abbreviations of legal regulations

Constitution	Act XX of 1949 on the Constitution of the Republic of Hungary
Disability act	Act XXVI of 1998 on the rights and equal opportunities of persons with disabilities
Public education act	Act LXXIX of 1993 on public education
Higher education act	Act CXXXIX of 2005 on higher education
Child protection act	Act XXXI of 1997 on the protection of children and guardianship administration
Social act	Act III of 1993 on social administration and social provisions
Sports act	Act I of 2004 on sports
Sign language act	Act CXXV of 2009 on Hungarian Sign Language and the use of Hungarian Sign Language
Act on equal opportunities	Act CXXV of 2003 on equal treatment and on the promotion of equal opportunities
NPD	Parliamentary Resolution No. 10/2006. (II. 16) on the new National Programme of the Disability Affairs

I. General provisions of the Convention

Articles 1–4 of the Convention

1. The most important difference between the term “disability” in the Convention and the one used in Hungary is that, with some exceptions, according to the Hungarian legal system, the individuals with psycho-social disabilities are not considered persons belonging to the group of disabled people. As a result of the accession to the Convention, persons with psycho-social disabilities are invited to the National Council on Disability (NCD), being a forum for the dialogue between the Government and the organs protecting the right of the disabled and are offered the right of consultation but not provided with voting right.

2. At the same time, persons with psycho-social disabilities are provided, as described below, with social protection in their capacity of psychiatric patients rather than as a group of disabled individuals, including social institutional care, active employment policy tools and disability pension insurance. For the time being, however, there is no national strategy and the financial supports given to other disabled persons are not granted to that target group.

3. In Hungary the term “disability” is not unambiguous in rules of law. Its scope is basically subject to the sources available to the sector in question and the development of the institutional system providing the service. As to financial support, the criteria concerning disability are strict, basically reflecting the medical approach. As to the conditions regulating the utilization of the service the social model is given an increasing importance. For the time being, human rights are reflected mainly in equal chances regarding access, i.e. the conditions for the involvement in model programmes financed by the state.

4. The definition of “disability” is more and more frequently built on the terminology of Act XXVI of 1998 on the rights and equal opportunities of persons with disabilities (hereinafter referred to as “disability act”). Accordingly, persons living with disabilities are the individuals who are to a significant extent or entirely not in possession of sensory — particularly sight, hearing — locomotive or intellectual functions, or who are substantially restricted in terms of communication and are thereby placed at a permanent disadvantage regarding active participation in the life of society.

5. As to the monthly disability allowance, disabled individuals are persons over 18 whose condition is steady or final and who are not able to live independently and, as a result, need the permanent support of others. The person is seriously disabled if is completely blind and that disability cannot be corrected through therapeutic equipment or operation, or if has a minimal sight and amblyopia, and, as a result, is able to perceive the world of life only through hearing and touching. The person is seriously disabled if his loss of hearing is so high that he is not able to understand others through hearing and to learn to speak without any therapeutic equipment and, as a result, he is not able to speak understandably. The person is seriously disabled if his mental damage is of medium or higher level for genetic reasons or for the damage to the fetus or trauma in the course of birth or a serious illness before the child turns 14. The person is seriously disabled if he, irrespective of his IQ, suffers from pervasive development disorder afflicting his personality as a whole and based on autonomy tests his condition can be categorized as serious or mid-serious (autism). The person is seriously disabled if his locomotive damage or disorder is of a level necessitating the permanent utilization of some appliance for moving or if he is not able to move even with such an appliance or if, for lack of limb, he is not able to care for himself and he needs constant care and nursing.

6. As to financial supports, the increased amount of family allowance can be considered the “counterpart” of the disability allowance. This support can be required for children under 18 who, owing to their steady illness or disability, need permanent or advanced care or nursing. Furthermore, it can be provided to the person over 18 under his own right.

7. As for the supports given for transport, the person is seriously disabled if, owing to his locomotive illness, he is not able to use the means of mass transport independently but is not confined to bed constantly.

8. The term used for “disability” is the most modern in the field of public education. By virtue of Act LXXIX of 1993 on Public Education (hereinafter referred to as public education act) the child needs special education if he is mentally or physically disabled, or if he has organoleptic or speaking disabilities, or if he suffers from autism. He has multiple disabilities if he suffers from more than one deficiency. Furthermore, this group includes the children and students/pupils who suffer from steady and serious disorder regarding learning functions or behavioral development that can or cannot be traced back to some organic reason. In practice the establishment of special needs has aspects connected with the special education of handicapped children. It means the condition when the child’s special characteristics are so different from what is average that based on such, development is only possible through special educational means, methods and appliances.

9. According to Act CXXXIX of 2005 on Higher Education (hereinafter referred to as higher education act) the student (applicant) is a person with disability if he is physically or mentally disabled, or if he has organoleptic or speaking disabilities, or if he suffers from autism. Furthermore, he is to be considered as disabled if he suffers from learning or behavioral development disorder.

10. The system of adult education uses practically the definition included in the disability act.

11. Act XXXI of 1997 on the protection of children and guardianship administration (hereinafter referred to as child protection act) used the definition of the public education act in terms of the rights, financial supports and services provided for by the act. The act calls the institution providing child protection care as special children’s home expressly established for handicapped children while it calls the child as a child requiring special care.

12. As to the entitlement to the nursing allowance and home assistance in the alarm system, Act III of 1993 on social governance and social benefits (hereinafter referred to as social act) uses the aspects regarding the entitlement to disability allowance. As far as the support service is concerned, the person is in need socially if he receives social allowance, allowance for the blind or an increased amount of family allowance. The rehabilitation institution for persons with disabilities may accept the application of the person who is mentally or physically disabled, has damaged sight and whose education, training and rehabilitation employment can be implemented only within an institutional framework. Persons suffering from some psychiatric disease may be cared for in a rehabilitation institute for psychiatric patients. The home for the handicapped may accept the application of persons with disabilities who cannot be cared for by their family or whose temporary care in the home is justified by the necessity to relieve the burdens of the family. The nursing home for the handicapped may receive persons with disabilities over 16, irrespective of the type or seriousness of the disability.

13. As to pension insurance no definition can be found for disability. Similarly to healthy persons, people with disabilities can obtain entitlement to pension in the social security system based on the insurance principle. However, before reaching the age entitling to old age pension, a disability or accident related disability pension may be

applied for. There are several conditions for the entitlement to disability pension. One of them is the more than 50% health damage (medical aspect). For health damage between 50 and 79% a further condition is that the applicant cannot be employed further in his former job or in another position corresponding to his qualification without rehabilitation as a result of his health damage and that the rehabilitation experts organ does not recommend his rehabilitation (social policy condition). Another insurance-based condition is the certification of the service time provided for on the basis of the age. The disability pension may be approved only if the applicant does not perform any gainful activity or if he does, his income should at least be 30% lower than the average of his earning in the four calendar months before the health damage and he should not receive any sick pay or accident related sick pay. The rehabilitation expert's body establishes whether the disability can be considered as final and when the medical re-examination is to be conducted (generally in 1–3 years). The conditions for the establishment of the accident related disability differs from what is described above in the necessity to examine whether the disability is mainly the result of an accident or of an occupation-related disease.

14. In employment policy legal provisions use the term “employee with changed capacity for work”. As to qualification, supports due to the employee and employer as well as the payment obligation of the employer are relevant. Currently the National Rehabilitation and Social Institute is entitled to establish changed capacity for work. According to present rules, criteria include total health damage of at least 50%; exact and detailed conditions are included in Government Decree 177/2005 (IX.2.) on the subsidies that may be given to employers employing workers with changed working capacity.

15. As far as the employment policy is concerned, it is a significant condition that the applicant cannot be employed further in his former job or in another position corresponding to his qualification without rehabilitation as a result of his health damage and that the rehabilitation expert organ does not recommend his rehabilitation. Considering the low employment level of the handicapped, the extent of the damage health is not necessary in each of the cases. Based on regulations in force, the person has changed capacity for work if he has limited sight or if he receives allowance for the blind or if he receives disability allowance owing to the development disorder afflicting his personality as a whole. This category includes the person who, based on rules of law, is to be considered as mentally seriously handicapped and, as a result, he is entitled to allowance reducing the tax base, as provided for by the act on the income tax of private persons. Furthermore, the person has changed capacity for work if his hearing damage reaches or exceeds the 60 decibel hearing threshold on the basis of an audiologist's expertise or if he is to be considered as physically seriously handicapped based on rules of law on the transport allowances of the physically handicapped.

16. Furthermore, Act I of 2004 on sports (hereinafter referred to as sports act) also enlists the groups of disabled persons that are as follows: physically handicapped, mentally handicapped, deaf, hard of hearing, transplanted and blind natural persons or natural persons with visual impairment.

17. As to “communication and sign language”, the most important regulation is Act CXXV of 2009 on Hungarian Sign Language and the use of Hungarian Sign Language (hereinafter referred to as sign language act). The Republic of Hungary recognizes the Hungarian sign language as an independent, natural language and the community of the person using the sign language as a language minority, the members of which have the right to use, develop and protect the Hungarian sign language, to cultivate, enrich and pass on deaf culture. The annex of the sign language act enlists special communication systems as well.

18. Hungary has no rules of law resorting to negative discrimination on the basis of disability.

19. As far as “reasonable accommodation” is concerned, it is significant that the European Union — where Hungary is a member state — is just working out the council directive regarding the implementation of the principle of equal treatment of individuals irrespective of their religion or Weltanschauung, disability, age or sexual attitude. The draft of the directive will define the term of “reasonable accommodation” in harmony with the Convention.

20. The requirement of “reasonable accommodation” is included in the disability act, obliging the employer to transform the work environment according to needs, with special regard to work tools and equipment. To facilitate the employment of disabled persons, the employer is obliged to provide for an environment that can be accessed with equal chances even in the course of the hiring procedure, if the vacant job has been publicly announced and the job is applied for a disabled person preliminarily communicating his special needs and if meeting such needs does not imply disproportionately high burdens for the employer. The burden is disproportionately high if the fulfillment of the obligation makes the operation of the employer impossible.

21. “Universal design” is a term not yet defined in the Hungarian law though the resolution of the Parliament 10/2006. (II.) OGY on the national disability programme (hereinafter referred to as disability resolution) uses the term, and the Public Foundation for the Equal Changes of Disabled Persons (hereinafter referred to as Public Foundation) regularly uses it in the course of its developments.

22. The application of the general principles and the fulfillment of the obligations provided for in Articles 3 and 4 of the Convention are described in the section dealing with special rights and the rights of disabled children and women.

23. Following its accession to the Convention Hungary made efforts for progressive implementation mainly in terms of the rights related to the sign language, community based care and full legal capacity and capacity to act. Details are included in the section dealing with special rights.

24. The forum of political and professional dialogues between the Government and disability interest protection organs is the NCD having 27 members (14 civil and 13 governmental members). The Council has the right to opionate on the motions to be submitted to the Government and to make regulations and programmes that are related to the life of disabled persons. Disabled persons are involved in the development of regulations and policies aimed at introducing the Convention mainly through the above body. In recent years the NCD has made 12 studies on the comparison of the domestic legal system with the Convention, which can be downloaded from the homepage of the Council. These studies have been offering the ground for the interest reconciliatory work, including the preparatory works regarding the sign language act.

25. In accordance with the principle of mainstreaming, based on statutory provisions the representative of the NCD takes part, for example, in the work of the National Social Policy Council and that of the national tendering commission established for financing the employment by social institutions, home care and services facilitating the transport of the handicapped.

26. Furthermore, introducing statutory provisions on the involvement of interest protection organs can be considered a best practice. Thus the number of vehicles that can be procured and transformed for the disabled is established by the minister responsible for social affairs, in agreement with the National Association of the Unions of the Physically Handicapped. Rules of law provide for the involvement of the above association in the administrative works connected with the supports for making apartments suitable for the needs of the physically handicapped. The Hungarian Federation of the Blind and the Partially Sighted participates in the textbook provision to partially sighted students/pupils

on the basis of statutory provisions. Furthermore, the photo card of the federation — similarly to the one issued by the National Federation of the Deaf and Persons with Hardness of Hearing — entitles its holder to discounts in mass transport.

27. The act on legislation also enables interested social organizations and interest protection organs to express their opinion on draft regulations. The organizations representing persons with disabilities may learn the draft of rules of law having relevance for them and express their opinion on such in the course of public reconciliatory talks. All this is guaranteed by a provision of the act on the freedom of information, according to which the drafts of rules of law have to be disclosed by the parties engaged in preparatory works and the possibility of opinionating is to be offered via the Internet as well.

28. Hungary does not have any measure assuring protection on a level higher than what is provided for by the Convention.

29. The provisions of the Convention extend to each field of the state without any restriction or exception as Hungary is not a federal state and is not a decentralized country in this respect.

II. Special rights

Article 5

Equality and non-discrimination

30. Act XX of 1949 on the constitution of the Republic of Hungary (hereinafter referred to as the Constitution) provides for equality before the law and human and civil rights for all individuals without differentiating in terms of race, color, language, religion, political or other opinion, national or social origin, pecuniary, birth or other situations including, among others, disabilities. It is the state's primary obligation to respect and protect basic rights. The rule stipulated as a basic principle in the Constitution is detailed by Act CXXV of 2003 on equal treatment and promotion of equal opportunities (hereinafter referred to as equal opportunities act) and thus the act defines the personal and material scope of equal treatment, extending to — among others — the discrimination based on disabilities as well. It defines in details the conducts that are contrary to the principle of equal treatment, including direct or indirect negative discrimination, harassment, unlawful separation and revenge. The act also defines the terms of direct and indirect negative discrimination.

31. From the right to dignity the Constitutional Court deduced the equality comparative function of that right. Since each human being has the same dignity, it is prohibited to make unjustified and unreasonable differences between people or groups of people. All this was summarized by the Constitutional Court in its decision 9/1990. (IV. 25.) AB as follows: "Through the interpretation of the ban on discrimination provided for by the Constitution it can also be established that the ban on discrimination does not mean that every and all differentiating including even the one aimed at discrimination of a greater social equality is also prohibited. The ban on discrimination means that the law has to treat everybody as equal (with equal dignity) i.e. the basic right of human dignity shall not be reduced and the aspects of dividing entitlements and allowances are to be defined with the same respect and care, taking into account individual aspects to the same extent."

32. It is justified to demonstrate the health, social, child protection and education systems in respect of the equal and efficient legal protection of persons with disabilities, the ban on negative discrimination, the principle of giving preference and equal treatment.

33. Within the health, social and child protection systems, the rights of persons with disabilities are protected by the Public Foundation of Patients' Rights, Dependents' Rights

and Children's Rights. Furthermore, the watchdog system operated within the National Public Health and Medical Service also fulfills such duties within the health system.

34. The child protection act also provides for the ban on negative discrimination and equal treatment in terms of the access to children's rights and certain services of the child welfare and child protection system. The child with disability has the right to make use of special services facilitating his personal and individual development. The special department of the ministry, the Institute for Social Policy and Labor, methodological institutions, operators, the authorities licensing the operation as well as county social and guardianship agencies monitor the observation of the statutory provisions concerned.

35. The requirement of equal treatment extends to all training and educational programmes that are implemented on the basis of requirements approved or stipulated by the state or the organization of which the state directly or indirectly contributes to. The principle of equal treatment is especially breached if a person or group is unlawfully separated in an educational institute or in its section or if education or training is restricted to a field, or if an educational system or institute is established or maintained which does not reach the level provided for by the professional requirements and rules and, as a result, does not offer the opportunity of pursuing studies, passing state exams and of preparing for such in general.

36. The public education act provides for the services rendered and the preference given to children with disabilities within the framework of a general regulation, which reflects the pedagogic attitude to the equality of healthy children and children with disabilities and to their same human dignity. The education based on the principle of equality wishes to provide children with disabilities with the same cultural goods as provided to healthy children even if the contents of the training, the competences and skills to be developed have to be adjusted to the possibilities changed and restricted by the disability. The school teaching students/pupils with special educational requirements may decide to teach the curriculum of one school year for more than a school year. When the average number of a group or class is calculated, the child or student/pupil with special educational requirement must be taken into account as two or three children subject to his disability type, meaning that the special classes organized for them may have max. 7–15 students/pupils each. In the case of integrated classes that multiplication has to be applied when the max. number of students/pupils is calculated for a class. No matter whether or not actual education is conducted separately or in a class having healthy students/pupils as well, the institutes engaged in the teaching of students/pupils with special educational requirements have to organize rehabilitation exercises (both health oriented and pedagogic ones) as well beyond ordinary classes compulsory for all school types. Depending on the disability type, rehabilitation classes account for 15–50% of all compulsory classes. The student/pupil with special educational requirements is entitled to a longer preparation time when he takes an exam (even the final exam) and he has to be offered the possibility of using special equipment used in the course of ordinary classes (e.g. typewriter, computer). Furthermore, he may pass an exam to be taken in writing even orally, if necessary. The schoolmaster may exempt the student/pupil with special educational requirement from assessment and ranking in certain subjects or subject parts. In the case of such an exemption the student/pupil concerned is to be developed and offered the opportunity of closing up through individual exercises that are based on a specific development plan. When the exam is taken, the student/pupil may choose from among other subjects in lieu of the ones concerned, in accordance with the rules on examination. All the students/pupils with special educational requirements are furnished with textbooks free of charge.

37. As to the practical exercises of vocational training in secondary vocational schools and vocational schools, students/pupils have the same rights in terms of labor protection and interest protection as the ones provided to employees by the Labor Code. When a

contract is concluded with the student/pupil and it is performed, the requirement of equal treatment has to be met. For his needs related to practical training to be met, the pupil/student may initiate a labor law dispute.

38. Under the title of preference the person with disability applying for admittance by a higher educational institute is to be given additional points. Based on the higher education act the student with disability has to be exempted from learning certain subjects or subject sections or from the obligation to take an exam in a justified case. If necessary, he is to be exempted from the obligation to take a language exam or a part or level of such an exam. In this case, too the student with special educational requirement is entitled to a longer preparation time when he takes the exam and he has to be offered the possibility of using special equipment (e.g. typewriter, computer). Furthermore, he may pass an exam to be taken in writing even orally, or vice versa, if necessary. It is an important criterion that the exemption may be provided only in relation to the circumstance giving rise to it and it shall not lead to the exemption of basic study performance certified by the diploma. Based on the act the individual may pursue studies for twelve semesters in a higher educational institution in the scheme financed by the state, including higher vocational studies; the period of supporting may be increased by four semesters for students with disabilities.

39. Based on Act CI of 2001 on adult education the programme of adult training has to be adjusted to the varying qualification and skills of the adults taking part in said training. When persons with disabilities are trained, the institution holding the course has to meet the personal and material conditions required by the target group concerned. In the light of the requirements of professional aptness, vocational and health aptness set in professional and examination conditions, the person with disability has to be provided with preparation and the possibility of taking the exam as required by his disability concerned and given assistance in fulfilling his obligations. The institution engaged in adult training has to conclude a contract with the participant of the training in accordance with the rules of the civil law. The institutions providing accredited adult training have to operate a client service and complaint administration system. The rules on handling complaints are to be made available to the participant of the training and records are to be kept on complaints lodged in, the result of related examinations and the measures taken.

40. In Hungary the National Disability Programme made by NCD on the basis of the disability act includes the disability policy and disability programmes. Governmental Resolution 1062/2007.(VIII.7.) on the middle term action plan on the implementation of the new National Disability Programme for the years of 2007–2010 provides for its implementation. In addition — in accordance with mainstreaming — several other programmes also deal with the issues of disability.

41. The programme “Making life better for children” is a comprehensive package of measures that is for reducing poverty and increasing the opportunities of children through the improvement of employment, education, health care, social services and the improvement of the welfare of children. Duties include the establishment of an integrated system of early assessment of the status of children, the development of daytime services for small children, providing access to such on appropriate level, the issues of equal opportunities and the provision of family services.

42. The “National Health Programme of the Decade of Health” is aimed at facilitating the healthiest possible life for each Hungarian citizen. Its basic values are as follows: health as a basic human right, reducing inequalities and solidarity, participation and responsibility of individuals, groups and institutions in the field of health development.

43. The long-term development concept of psychiatric services is the “National Programme for Psychic Health” which is fully adjusted to the relevant documents of the World Health Organization and those of the European Union and which relies on the

problems outlined in and the structure of the document titled “European Pact for Mental Health and Well-being 2008”. Its fields are as follows: prevention of suicide and depression; mental health of the youth and mental health in education; mental health in the work environment, mental health of the elderly, fight against stigmatization and discrimination.

44. The “Portál Programme – library strategy 2008–2013” is aimed to giving special support to the persons with disabilities. Thus the development of the library services to persons with disabilities is given utmost importance in each library project financed by the European Union. Therefore, the whole of the library system has to be suitable for making available public information, knowledge and culture to everybody with equal chances, irrespective of residence and the type of the locality.

45. The document titled “General Education Strategy 2007–2013” also stipulates the strengthening of social cohesion and the provision of equal cultural opportunities for those in a disadvantageous position for reasons beyond their control.

Article 8

Awareness-raising

46. A best practice is provided by the “Accept it and accept me” programme of the Hand in Hand Foundation, which demonstrates the life of the mentally handicapped and by the national interactive road show of the interest protection organization of the deaf, dealing with the world of persons having hearing impairment. About 50,000 persons took part in nearly 30 events and the number of media appearances exceeded 150. Two outstanding concerts were given state support, in the course of which the band called “Don’t Give Up” consisting of persons with disabilities played together with other Hungarian start musicians. The event led to a new approach in terms of social support as the above handicapped persons organized the collection not for themselves but for Roma children in disadvantageous position and for supporting children’s homes in Transylvania, spectacularly proving their motto saying that “everybody is rich enough for giving help to others”. About 15,000 people participated in the concerts and appearance in the national media was excellent.

47. Schools play a dominant role in developing the attitude of new generations. The professional document “Start – Preparation for recognizing disabilities and giving help to children and young people with disabilities (CD and DVD) was compiled by the Public Foundation with the support of the education administration, providing an alternative curriculum for learning disability types by pupils of grades 1–12.

48. When the Convention was ratified, the ministry responsible for the promotion of equal social opportunities entrusted national interest protection organizations — those for the deaf, blind and persons with hearing and sight impairment and those for the mentally handicapped — with compiling and reproducing the sign language and Braille as well as an easily understandable version of the Convention. The above three versions were published — for the first time in the history of Hungary — in the annex of Magyar Közlöny (Hungarian Gazette). A copy of each format was sent by the ministry to all the county and university libraries where such can be borrowed. The sign language and the easily understandable version is available on the ministry’s homepage as well.

49. A further best practice is the outstanding project “Developing the background for the elimination of physical and info-communication obstacles” implemented by the Public Foundation and subsidized by the state and the European Union. The provisions of the Convention are present and discussed in certain professional fields of each of the 70 — mainly accredited — training programmes developed under the programme.

Article 9 Access

50. There is a significant progress in the field of access in respect of both legislation and other measures. The disability act has been amended several times, in which equal access has been given preference in lieu of making buildings apt for the physically handicapped. In addition to former and existing requirements related to the physically handicapped the requirements of other disability groups are also covered by the rules of law on national landscaping and construction requirements and this change-over is reflected in several other sector-specific rules of law. The act on the sign language was adopted in relation to which subtitling and sign language interpretation have been set as criteria for certain TV programmes. The training and utilization of help dogs have been regulated since 2009. Through increasing resources nearly fifty fold, mainly from EU resources, tenders have been invited expressly for the elimination of obstacles while equal access has been introduced as a horizontal requirement for infrastructure developments of the sectors. The training programmes of specialists are being transformed, including the training of different engineers and construction specialists, communication specialists as well as the elimination of obstacles on homepages (making them accessible). Following national surveys nowadays several homepages give information on the service providers that can be accessed with equal chances.

51. Through a threefold system of requirements, the disability act makes compulsory the “elimination of obstacles” (i.e. accessibility) regarding public services belonging to the responsibility of the administration and municipalities. It separately defines the equal opportunity of the access to services, buildings and information. In case of public services rendered by the state the act set the deadline of 31 December 2010 for each service while it defines the deadlines for municipalities based on the compulsory scheduling of educational, health and social services as well as that of municipality client services as follows: 31 December 2008, 2009 and finally 2010. The deadline is 31 December 2013 for the buildings and services of the private sphere. Furthermore, the act states that if owing to his disability anybody is unlawfully afflicted by some drawback — for example, an institute fails to make its services available with equal opportunities by the deadline set — he will be entitled to all the rights that are governing without prejudice to inherent rights. In practice all this means that the person with disability concerned — or any other person acting on his behalf — may institute a court action against the institution in default.

52. Act LXXXVIII of 1997 on the formation and protection of the built environment sets the requirements regarding the elimination of obstacles in public buildings and interprets basic terms: “the built environment shall be considered accessible if convenient, safe and independent use of such areas is ensured for all persons, including handicapped persons or groups for whom special facilities, equipment or technical solutions are necessary.” Government Decree 253/1997 (XII.20) on National Requirements of Spatial Planning and Building gives details on the requirements of the elimination of obstacles regarding the built environment.

53. As to special shops dealing with medical aid the regulation sets material conditions according to which a service room accessible from the public road or, for shops operated in health institutions, the room accessible from the traffic route of the institution can be considered as such a condition. If hearing aids are also distributed, special rooms for hearing examinations are also a must (free sound and audiometric units). Special workshops must be accessible for the physically handicapped from the public road or traffic route of the institution for taking the size, trying and delivering of the aid if limb prostheses, and walking splints or corsetry are also to be made. Such a workshop must have an independent and separated room of at least 25 square meters that is furnished with toilet.

54. Act CLXXXIII of 2005 on railway transport and act XXXIII of 2004 on passenger transport by bus set the deadline for the elimination of obstacles as 1 January 2013 for railway transport and interurban bus transport, respectively. Supervisory power is exercised by the National Transport Authority, which may handle the complaints regarding passenger rights and impose fines. The domestic application of the regulation 1371/2007/EC on railway passengers' rights and obligations is assured by Government Decree 270/2009 (XII.1.) on the detailed conditions of railway passenger transport performed on the basis of regional, suburban and local operation licenses and Government Decree 271/2009 (XII.1.) on the detailed conditions of railway passenger transport performed on the basis of national licenses. The decree includes detailed technical prescriptions and standards for providing access for the physically handicapped with equal changes, including for example the enlisting of low platforms, ramps, elevators, wide doors, seats reserved for persons with disabilities.

55. Act LX of 2009 on electronic public services set the conditions necessary for the utilization of electronic services, therefore, it provides for the possibility of starting and handling cases without any obstacles and over the phone for the physically handicapped where made possible by the nature of the case. The inter-ministerial commission of informatics in public administration pays special attention to the improvement of the opportunities of the physically handicapped and for the assurance of equal access to public services. Recommendation No. 19 prescribes that the homepages operated by central public administration organs must be available for the blind, persons with visual impairment and for the color-blind, too. The Web Content Accessibility Guidelines 2.0 (WCAG 2.0) were translated into Hungarian in 2009.

56. Act C of 2003 on electronic communications provides for the increased consideration of the requirements of users with disabilities. According to the ministerial decree issued on the basis of the act the radio equipment and telecommunications terminal equipment have to be suitable for utilization by persons with disabilities. As to subscribers with disabilities, support from the central budget can be given for the utilization of universal electronic telecommunications services. Based on the decree 6/2006. (V.17.) on radio amateur services, a 50% discount from the examination fee is offered to persons with disabilities.

57. One of the goals of Act LXXIV of 2007 on the rules on broadcasting and digital switchover is the considering of the requirements of users with disabilities in the course of digital switchover.

58. Based on CI of 2003 on the post, the easy and undisturbed access to postal services by persons with disabilities is to be assured when postal access points are established and operated. Based on decree 14/2004 (IV.24.) on the requirements of the service quality in relation to the protection of consumers and the access to postal services by persons with disabilities, the postal service provider is obliged to assure free accessibility for persons with disabilities at the places of the provision of the services, including the possibilities of gaining information. The person with disability is entitled to equal opportunities in terms of information when postal services are utilized. The postal service provider has to provide the possibilities of gaining information for the person having serious disabilities in terms of communication. The service provider is obliged to make public the operation order, working hours of the client service, its operational conditions and Internet accessibility and the accessibility possibilities of the person helping the person with disability at the places of client service and on its Internet homepage. The social organ representing the consumer or the interest of the consumer or that of persons with disabilities may lodge in complaints regarding postal services to the service provider.

59. The social act provides for the right to an obstacle-free environment and the right of accessibility of information and the most significant data the person with disability may be

interested among special rights. When the new operation license is issued to an organ providing social services, free accessibility is a must.

60. In Hungary 2003 saw the start of the establishment of the sign language interpretation services. Currently there are 19 county and 3 metropolitan (Budapest) sign language service providers in the country and one national service provider operates for the deaf and blind. Legal background is provided by the sign language act on the basis of which the service can be rendered only in accordance with the act as from 1 January 2011.

61. Based on Act I of 1996 on radio and television broadcasting the public service and national television broadcaster is obliged to make available all public announcements, news and movies through sign language or subtitling as well at least two hours a calendar day in 2010. Thereafter the daily hour number will increase 2 hours a day and the service will be compulsory in the entire broadcasting period as from 2015. The programme started with subtitling or sign language interpretation is to be provided in such a way during its full period, not hurting the unity of the programme.

62. Based on decree 27/2009 (XII.3.) on the rules of training, testing and usability of help dogs such dogs are the ones that assist the person with disability in exercising his right to equal accessibility, living an independent life and that prevent emergency, fulfill habilitation duties and that comply with certain veterinary requirements. To provide equal access to public services, the owner and the coach are entitled to stay with the dog and use the dog in organs, institutions providing public services, on the territories of service providers and in all other areas and facilities with the exception of areas not open to the public.

63. For each new investment to be implemented from state and EU resources on the basis of the national disability programme it should be stipulated when the support is awarded that the building, structure to be constructed or the new mass transportation vehicle or other equipment must meet the requirements concerning free accessibility. At the same time the national disability programme obliges the ministries to make the schedule regarding the implementation of free accessibility for everybody for the years of 2008–2010.

64. To achieve the above target, the Public Foundation compiled and issued in 2007 the publication titled “Auxiliary document for the implementation of complete accessibility” which was revised and issued again in 2009 under the title “Auxiliary document for providing the conditions for the free accessibility to public services with equal opportunities”. The above documents are available to everybody on the homepage of the Public Foundation and that of the Government. The application of the document is compulsory for each tender to be implemented from EU resources. Furthermore, the aspects of the documents are also suitable for assessing accessibility. The publication deals with the elimination of obstacles in the built environment, the architectural elements of the information communication accessibility (forming lead lanes, colour usage, lighting, utilization possibility of structured spaces, accessibility of alarm equipment), with making information systems accessible (client direction systems, direction marks, information systems, pictograms, colour coding), with the utilization of sound amplifiers (induction loop amplifiers, receivers-transmitters) and with making homepages and online services accessible.

65. In the field of health care, 23 out-patient clinics and 8 hospitals were made accessible for everybody in small regions, while related works are underway in emergency care and oncology developments. In the field of child protection, tenders may be invited for the development of child welfare services, kindergartens and family day-care centers. The accessibility of library services in terms of infrastructure conditions is assured through the “Knowledge Depot Express” programme, including the backing of the procurement of

supplementary devices and software. The Rehabilitation Information Centers operated in labour centers are fully accessible in each county.

66. As far as the protection of public order is concerned, the number of arrested persons with disabilities is very low. Owing to this fact and the high costs of assuring accessibility as well as because of scarce resources, currently the police are not able to make the necessary transformation works. The incompatibility of the requirements related to the security of guarding and to assuring accessibility with equal opportunities is a theoretical problem. The person in custody may be safely detained only if he does not hold any device that can be used as means for attacking. In general, certain medical aids necessary for persons with disabilities for their everyday living may jeopardize the security of detainment. Therefore it is a reasonable solution if the person with disability is kept in custody in a health care institution of the prison where qualified staff is available and all the duties related to accessibility have been completed.

67. While making a governmental study, the accessibility of 90 public administration homepages were checked. Twenty-three percent of the websites examined (for example those of ministries, county rank cities, the Constitutional Court and that of the Board of Customs), their 40% included sub-pages for the persons having sight impairment and their 10% offered the possibility of changing the text size.

68. The national tourism database maintained by Magyar Turizmus Zrt. includes the list of hotels and places of other accommodation where rooms accessible for everybody can be found according to the information provided by said hotels. Experience shows that these data are not always reliable.

69. An "Accessibility Cadastre" is available on the accessibility position of the State Employment Service, which is updated every six months.

Article 10

Right to life

70. Based on the Constitution, everybody, i.e. persons with disabilities too, has the innate right to life, meaning that nobody can be deprived of it arbitrarily. In its resolution 23/1990. (X.31.) on the abolition of capital punishment the Constitutional Court established that "human life and human dignity form an inseparable unity and have a greater value than anything else. The rights to human life and human dignity form an indivisible and unrestrainable fundamental right which is the source of and the condition for several additional fundamental rights. The constitutional state shall regulate fundamental rights stemming from the unity of human life and dignity with a view to the relevant international treaties and fundamental legal principles in the service of public and private interests defined by the Constitution. The rights to human life and dignity as an absolute value create a limitation upon the criminal jurisdiction of the State."

71. Sector-specific rules of law regarding health care — mainly act CLIV of 1997 on health (hereinafter referred to as health act) and the act on the protection of the life of the fetus (hereinafter referred to as fetus life act) — basically reflect the provisions of the Constitution, however, it is to be mentioned that the fetus life act makes abortive treatment possible for a wider circle than in general for the fetuses deemed to have health damage or some disability.

Article 11

Situations of risks and humanitarian emergencies

72. In our country the so-called extraordinary legal order is regulated by the Constitution and Act CV of 2004 on national defense. In this respect the regulation contained in the Constitution directly concerns persons with disabilities – it states that their right to social security shall not be suspended even in the case of extraordinary legal order. However, the act on national defense does not include special provisions for persons with disabilities for such a case.

73. According to Hungarian rules of law, persons applying for recognition (including persons with disabilities) are entitled to different services and support when the procedures of admittance are conducted, therefore they are entitled to health services as well, for which they can make use of travel allowances. If the person asking for recognition is not covered by social security, he may make use of the health services enlisted by the act free of charge when he becomes sick, including certain examinations, treatments, medicines, bandages, medical aids and the repair of such equipment. The costs of the services refunded by the agency for refugees to the health service provider if the payment of such is not assumed by the Republic of Hungary in an international agreement.

Article 12

Equal recognition before the law

74. The Constitution declares that each person has legal capacity in the Republic of Hungary. Such legal capacity is general, unconditional and equal. As far as legal capacity is concerned, in its decision 64/1991.(XII.17) AB the Constitutional Court establishes that “legal capacity is a formal quality. Each human being has to have legal capacity but not only human beings may have that capacity. Therefore, two basic content rights also belong to the basic legal situation of the human being, manifesting themselves in the formal category of legal capacity and expressing the human quality of the individual. Dignity is a quality inherent to human life, which cannot be divided and restricted and which, as a result, is equal for each individual. The right to equal dignity together with the right to life assures that in legal terms no difference can be made among human lives as far as their value is concerned. The human dignity and life of every human being is untouchable irrespective of his physical and mental development and condition or of the fact how far he makes use of his human opportunities and why he makes use of them to some extent.” Based on Act IV of 1959 on the Civil Code (hereinafter referred as Civil Code) the human being has legal capacity from his conception if he is born alive.

75. According to the Civil Code guardianship may restrict or exclude the ability to act. The court shall order guardianship for the person over 18 whose discretionary power is significantly reduced in general or for a longer period or periodically regarding certain cases owing to his psychic condition, mental disability or some addiction. The consent of the guardian or subsequent approval is needed for the validity of the legal declaration of a person with limited ability to act. The person under guardianship may make legal declarations in all the cases concerning which the court has not restricted his ability to act unless the court has restricted his ability to act in general. The Civil Code gives examples for related cases: applying for services related to social security, for social and unemployment benefits, disposing of the income resulting from the above or from employment relationship; right to dispose of movable and immovable properties; making family law declarations; making pecuniary decisions regarding the obligation to support somebody; making legal declarations regarding flat rental; estate cases; legal declarations related to the care in special social homes; exercising the rights related to health care;

arrangements regarding the place of abode. The Civil Code stipulates the revision of the guardianship within 5 years from the date when the order on the guardianship restricting the ability to act becomes final.

76. The court shall order guardianship excluding the ability to act for the person over 18 who has no discretionary power at all for long owing to his psychic condition or mental disability. The legal declaration made by such a person is null and void, his guardian shall act in his name but if the person under guardianship is able to express his opinion, his requests and wishes have to be heard and taken into account, if possible, before decisions are made. Even in cases of guardianship excluding the ability to act the court shall order revision unless the lack of the discretionary power of the person concerned can be considered as final. The expert in forensic medicine shall make a declaration to this end in his expertise.

77. The adult (person over 18) having problems with the ability to act may be given assistance through the institution of guardianship for exercising their rights and managing their pecuniary affairs. The court of guardians shall appoint the guardian for the person for whom the court orders guardianship and such guardian shall make decisions on the person and assets of the person under guardianship and on the management of his financial matters together with and in lieu of the person under guardianship. There is no need for the guardian's activities for concluding minor contracts regarding the meeting of the everyday needs of the person with limited ability to act, who shall dispose over 50% of his income freely and may freely conclude contracts through which he obtains advantages only.

78. According to the resolution 1129/2010.(VI.10.) of the Government on the compilation of a new Civil Code the new code shall modernize the private law regulation of private and pecuniary conditions, increase legal security and facilitate being at home, for persons and entities exercising and seeking rights, in the code regulating the coordinated relations of natural persons and legal entities. In the course of all this the compliance with related international contracts is also among the aspects of preparatory committees. The provisions — including the one on the abolition of excluding guardianship and the provision on the introduction of supported decision-making — of Act CXX of 2009, which was adopted but did not come into force, are to be revised on the basis of the above aspects. Related solutions are to be taken into account by the legislator when the new Civil Code is compiled, meaning that excluding guardianship is also expected to be revised. In the present phase of preparatory works no further details can be given (including even the plans regarding the regulations on supported decision-making).

Article 13

Access to justice

79. The National Police Headquarters issued its measure 4/2004.(II.19.) on enforcement of the rights of persons with disabilities in police procedures for assuring equal opportunities for persons with disabilities and the formation of practice of the police staff when measures are taken. The document contains measures regarding the full observance of rules on the measures taken against persons with disabilities, on providing assistance, to the necessary extent, for exercising the rights of persons with disabilities and on the employment of a sign language interpreter, if necessary.

80. Upon the request or with the consent of the client, taking into consideration the circumstance of the client concerned (or the features of the case) the Legal Assistance Service shall appoint a legal assistant as a patron lawyer or, in exceptional cases, a patron lawyer for the efficient access to justice for persons with disabilities. The service makes available the form to be completed for the support on its homepage, together with its

contact data and the list of its client service facilities. Upon the client's request the service will give assistance in completing the form. The victims of crimes are given further assistance, who, in addition to favorable assessment, are supported when their rights are enforced.

81. By virtue of Act CXXXV of 2005 on crime victim support and state compensation Victim Assistance Services give assistance to the victims of crimes. The victims of willful crimes against individuals are given compensation. The single sum compensation or the annuity is destined to express the solidarity of the society. The compensation can be given to the direct physical victims of crimes whose bodily integrity or health was seriously damaged as a result of the crime and to the relatives and dependents of such victims. The social indigence of the victim is a condition. According to the act the financial indignity is not to be examined if the victim receives some disability allowance or the personal allowance of the blind.

82. If, in the proceedings conducted by the Legal Assistance Service or the Victim Assistance Service, a deaf person or a person with speech impairment takes part, a sign language interpreter shall be employed. The costs of the sign language interpreter shall be borne by the Service.

83. According to the instruction 50/2008. (OT.29.) on the victim assistance duties of the police issued by the National Police Headquarters for the appropriate performance of the victim assistance duties of the police the victim assistance clerk shall pay special attention to the affairs of victims with disabilities in the course of the cooperation and when works are done in practice.

84. The sign language act stipulates that in the course of court and police proceedings the acting authority shall provide a sign language interpreter if requested by the person with hearing impairment or by a deaf and blind person. The costs of such interpretation shall be borne by the acting authority in each case.

85. In the Hungarian law the rules on the so-called party competence ("competence in actions") are adjusted to the level of competence of the person concerned, meaning that incompetent persons or persons with limited competence shall not act independently concerning certain acts of suits.

Article 14

Liberty and security of person

86. Based on the Constitution, everybody has the right to liberty and personal security in the Republic of Hungary and persons may be deprived of their liberty only for the reasons and based on proceedings provided for by the act. The arrested person suspected of a crime has to be set free within the shortest possible time or has to be prosecuted. The victims of unlawful arrest or custody shall be given compensation.

87. Personal liberty is assured by making use of the services voluntarily. As far as persons under guardianship are concerned, the legal declaration is made through the legal representative. Before utilization the person to be cared for is given information on institutional care through the so-called ante-care proceedings. The guarantees for rights regarding special care are integrated in legal regulations which were compiled with the involvement of the interest protection organs concerned.

88. The regulations applicable in reformatories do not extend to the rules facilitating the integration of young persons with disabilities. Young persons with slight mental disability are cared for together with the healthy persons, in an integrated way. The courts do not send

young persons with physical or organoleptic disabilities to such institutions for lack of the necessary infrastructure.

89. Based on the child protection act children not living with their families are to be provided with full care adjusted to their age, health condition, development and needs, replacing family care as far as possible. Such care is to be provided by foster parents, if possible, or in children's homes. The personal liberty of the child may be restricted in a children's home and in fully justified cases only, if the child concerned jeopardizes himself or others. The educational supervision restricting personal liberty may be ordered on the basis of a resolution passed by the child welfare agency and reviewed by the court compulsorily and may be exercised only for two months on one occasion, which may be repeatedly ordered, if necessary. The child is represented by a legal representative of children's rights in these proceedings. Educational supervision is ordered very rarely in practice.

Article 15

Freedom from torture or cruel, inhuman or degrading treatment or punishment

90. The Constitution declares that nobody may be tortured, subjected to cruel, inhuman or degrading treatment or punishment and it is especially forbidden to make medical or scientific experiments on human beings without their consent. Act IV of 1978 on the Penal Code stipulates that conducts violating this latter provision are to be punished.

91. By virtue of the Constitution it is forbidden to conduct medical or scientific experiments on human beings without their consent, including persons with disabilities. Based on the ability to act of the person concerned, the consent may be given in accordance with the provisions of the health act. Persons with limited ability to act or incompetent persons are provided with legal guarantees assuring increased protection.

92. The health act contains as a basic principle that in the course of health care the human dignity of the patient is to be respected. The patient may be subjected only to the interventions necessary for his treatment. In the course of the care the patient may be restricted in the exercising of his rights only for the period justified by his health condition and to the extent and in the way provided for by the act. In the course of the care the personal liberty of the patient may be restricted through physical, chemical, biological or psychical methods or procedures only in emergency or for the protection of the life, bodily integrity or health of the patient or others. It is forbidden to resort to torturing, cruel, inhuman, punishing or restricted measures. Restrictive measures may be applied only for the period of the cause giving rise for its order.

93. Persons living with disabilities may take part in the clinical testing of medical devices only under the same conditions as healthy people may do. Clinical tests are licensed by the Health License and Public Administration Agency.

94. The Additional Protocol to the Convention on Human Rights and Biomedicine, concerning Biomedical Research and the Additional Protocol to the Convention on Human Rights and Biomedicine, on the Transplantation of Organs and Tissues of Human Origin, both related to the Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine (Convention of Oviedo) were promulgated through Act LXXXI of 2006. The Hungarian regulation includes stricter and more guarantees for incompetent persons than for other patient groups.

95. The social act regulates the utilization of the services alongside the voluntary principle. Acting voluntarily may be guaranteed for persons with restricted ability to act

through the legal representative. As far as the rights of the persons cared for are concerned, the social act regulates the guarantees of restrictive measures applied in conditions implying (direct) jeopardy in the same way as the health act does.

96. The child protection act states that the child — including children with disabilities — has the right to human dignity and to protection against assaults — physical, sexual and psychic violence — and against negligence and information damages. The child shall not be tortured, assaulted physically or exposed to other cruel, inhuman or degrading punishment or treatment.

Article 16

Freedom from exploitation, violation and abuse

97. Though it does not extend specifically to persons with disabilities as they have the same rights as healthy people do, the child protection act has a widespread regulation regarding the prevention, detection and treatment of abuses. The alarm system is aimed at preventing, detecting and treating the abuse and exploitation related to children. The specialists of education, training, health care, social institutions and those of the police are obliged to disclose risk factors learned by them and take all the steps through which such factors may be terminated, treated, reduced or prevented. Furthermore, the public prosecutor's office, the court, the patron service and the organizations engaged in victim assistance and damage mitigation, the facilities receiving and providing temporary accommodation to refugees, social organizations, churches and foundations fulfill duties regulated by the act. By virtue of the data protection act specialists are obliged to treat private data strictly confidentially. Only the events expressly jeopardizing children or even their life are exceptions to all this when a related report is to be made to the chief, operator of the institution concerned, to the competent child welfare agency or to the police if there is suspicion of a crime.

98. In harmony with the health act, the social act regulates the restrictive measures to be applied in situations implying risks.

99. Based on the National Core Curriculum pedagogues have to prepare pupils/students for independent life, right decisions, healthy life style and the treatment of conflicts. Basic goals contain self-recognition, self-control, self-responsibility, independence, the requirement of self-development and the respect of personal dignity. Being aware of norms and understanding behavioral rules and the rules of conduct generally accepted are a must for social involvement. It is important to know the basic assets related to the individual, the group, the work organization, gender equality, discrimination freedom and to the society and culture.

100. Claims related to the non-observance of the principle of equal treatment may be enforced before the Equal Treatment Authority on the basis of the provisions regulated by the equal opportunities act.

Article 17

Protecting the integrity of the person

101. Based on the health act, making somebody infertile artificially (sterilization) is only possible with the consent of the person concerned. This rule is to be observed both when the individual in question asks for the intervention for family planning purposes and when the operation is necessitated by health reasons. An increased guarantee protection is to be given to persons with limited ability to act and to incompetent persons. In addition to the legal representative's consent the approval of the court of guardians is needed for the

validity of the application for making a person with limited ability to act infertile artificially, while an incompetent person may be sterilized only on the basis of a final court decision.

102. Based on the act on the protection of the fetus the pregnancy may be terminated only on the basis of the written application of the mother unless the intervention is needed for health reasons. The consent of the legal representative is needed for such a declaration of a person with limited ability to act while the declaration is submitted by the legal representative for an incompetent person.

103. Based on the act on the official and administrative health activities the health administration organ supervises the observance of the rules on the operation of health institutions and exercises professional control over the activities of health service providers.

Article 18

Liberty of movement and nationality

104. Based on the Constitution nobody may be deprived of his/her Hungarian citizenship arbitrarily in the Republic of Hungary. By virtue of Act LV of 1993 on Hungarian Citizenship the child of a Hungarian citizen shall become a Hungarian citizen by birth. Upon request a non-Hungarian citizen may be nationalized if certain conditions stipulated by the act are met. Among others, the said conditions include the certification of a successful examination taken by the individual concerned in the Hungarian language in the subject of basic constitutional knowledge unless the person in question is exempted from it on the basis of the act. Persons with limited ability to act and incompetent persons will be exempted from the obligation to take such an examination.

105. Based on the Constitution Hungarian citizens shall not be expelled from the territory of the Republic of Hungary arbitrarily and they may return from abroad any time. Based on the Constitution everybody lawfully staying on the territory of Hungary has the right to move freely and choose his place of abode freely, including the right to leave the residence or the country. Foreigners lawfully staying on the territory of Hungary may be expelled from the country only on the basis of a resolution passed in accordance with the provisions of the act.

106. In the operative part of its decision 58/2001 the Constitutional Court established that “the right pertaining to names is a fundamental right deducible from the right to human dignity guaranteed under Article 54 para. (1) of the Constitution. Every man has got the inalienable right to have and bear his own name representing his (self)-identity. This right may not be restricted by the State. Other elements of the right pertaining to names, and in particular the selection, changing and amendment of names, may be constitutionally restricted by the legislature.”

107. The above provisions shall apply to everybody including persons with disabilities without any discrimination.

Article 19

Living independently and being included in the community

108. Basic services listed in the social act are aimed at giving assistance, through the means of social work, to those in need in maintaining their life style as well as in solving their problems resulting from a health condition, mental state or other facts. Special basic services have several forms that back the independent living of persons with disabilities, their remaining with their families or their living in an own housing environment. The

support service is aimed at transporting and providing personal assistance in performing activities at home and related to the apartment for persons with physical disabilities, persons with sight or hearing impairment or for persons with mental disabilities or multiple disabilities. The goal of communal care is supporting psychiatric patients and their families. Daytime care is provided by daytime institutions, the home assistance service (fulfillment of basic caring and nursing duties, assistance in the prevention and elimination of emergencies) and by the home assistance service under the alarm system (assistance provided to persons with disabilities and psychiatric patients capable of using the alarm equipment for the elimination of crisis situations). If 24-hour care is needed for supporting independent living the traditional forms of institutional social care – caring-nursing homes, rehabilitation institutions provide solution in addition to the homes operated for such persons. Beyond institutional rehabilitation care the so-called exterior accommodation is a new service form.

109. The ministry responsible for disability matters maintains 4 in-patient institutions caring for persons with disabilities which provide caring, nursing, rehabilitation services, accommodation in special homes and basic services (day-time care, assistance to families) for persons with multiple disabilities. Making use of the advantages of the maintenance by the ministry these institutions operate as methodological centers as well, mainly in the field of basic rehabilitation and daytime rehabilitation.

110. Special home care is provided as a part of the health care system, facilitating the maintenance of independent living and shortening the period of or making unnecessary hospital care. In 2009 possibilities were expanded with supplementary special procedures including UH inhaling, breathing therapy, suction utilization and oxygen therapy.

111. Institutions engaged in basic child welfare care are open to the members of the community irrespective of disabilities. Such institutions include the child welfare services, kindergartens and family daytime homes. The basic social services enlisted in the social act are also available to everybody and there is no discrimination in terms of the accessibility of “mainstream services”. The family doctor (including the night duty service as well) will provide care in the flat of the patient, if necessary, assuring in this way the continuity of the accessibility to health care services. If the patient has to be cared for at another point of the health care system, the family doctor shall refer the patient to such a facility and organize the transport of the patient. In addition to the ambulance, upon the request of the doctor patients are transported by patient transport services that are continuously available. If the patient can travel by mass transportation means with the assistance of another person, the costs of the accompanying person shall also be borne by social security.

Article 20

Personal mobility

112. According to the decree on the transport allowances of persons with serious physical disability such persons are entitled to a financial support for passenger car acquisition, passenger car transformation and transport allowance.

113. The decree on the parking certificate of persons with limited ability to move provides for parking easements for persons with physical disabilities, persons with sight impairment (or blind persons), persons with mental disability, persons suffering from autism and persons with multiple disabilities. This easement exempts the person concerned from the payment of parking fees and from the observation of certain traffic rules.

114. The transportation of seeing-eye dogs and help dogs is free of charge in the domestic railway and bus transport network.

115. Government decree 85/2007. (IV.25.) on the allowances of public mass transportation provides for an extraordinarily high (90% or free of charge) discount from the fares in public mass transportation for the persons with serious disabilities and accompanying persons. As far as railway and bus transport is concerned, the staff at the stations and the one on the vehicle (the driver of the bus in bus transport) are obliged to pay special attention and give every possible help to passengers with disabilities when they get on and off the vehicle to make their journey smooth.

116. The insured referred to out-patient special care, in-patient care and medical treatment or rehabilitation is entitled to support for his travel costs. In addition, the insured is entitled to receive support for his travel costs related to the trial and delivery of his medical aid. The support is to be given to the accompanying person as well, if such escort is deemed necessary by the physician referring the patient to the special care. If the person with disability makes use of a health service, the cost refund is due for the utilization of scheduled interurban and public means of transport. Persons unable to travel by mass transportation means as certified by a medical certificate are entitled to a per kilometer amount as cost refund, as provided for by relevant rules of law. If the person has to be accompanied by another individual, this amount is to be given to the insured and the accompanying persons jointly. In addition, compensation is due to the accompanying person for his travel to and from the place of abode of the insured person.

117. Government Decree 132/2009. (VI. 19.) provides for the refund of the costs of local and interurban travels related to training, the support given for commuting and gaining work experience, the support for group passenger transportation related to commuting and gaining work experience, the support for the travel costs related to making use of the service and for the refund of the costs of local and interurban travels connected with job seeking. When the person concerned travels to the place of training the costs of using own vehicle may also be refunded for persons with physical disability. The costs of commuting, those of traveling for gaining work experience by local and interurban vehicles or the costs of commuting by own vehicle may be refunded to the person with physical or other disability or to the relative of such a person, too.

118. In addition to general consumer protection rules medical appliances and medical aids may be distributed and used in the course of health care services if they meet the quality requirements stipulated by specific rules of law and have the certificates and markings provided for. For the medical aids that can be prescribed on the basis of social security support (which meet the requirements enlisted in the EN ISO 9999 standard), further provisions regulate the quality and cost efficiency requirements of the devices that can be utilized by persons with disabilities. The positive opinion of the Health Quality Development and Hospital Technology Institute, Health Strategy Research Institute, Health License and Administration Institute all acting as authorities are needed for the inclusion of the devices in the list of supported equipment. Furthermore, such an opinion is to be obtained from the boards of the medical profession on the basis of which the National Health Insurance Fund may establish the support amount subject to the budget available for the support of medical devices.

119. Training courses dealing with mobility had not been computed before the country accessed the Convention, therefore from among best practices the following can be mentioned. According to the decree 15/2006. (IV.3.) on the training and qualification requirements of basic and master courses the training of teachers dealing with family and child protection does include knowledge related to mobility. As to basic social services assuring mobility, the social act stipulates compulsory further training for the professional staff of support services and communal care, which is aimed at conveying the latest knowledge in the field. Several programmes aimed at expanding the knowledge connected with disabilities were conducted within the framework of the public health programme.

120. The qualification of habilitation (help) dog coach was included in the list of the National Training List in 2009 and became, as a result, a qualification recognized by the state. The qualification may be obtained in three professional fields – help dog coach, signaling dog coach and seeing eye dog coach. The programme of the governmental National Public Foundation for Employment can be mentioned among best practices, in the framework of which new jobs are created through supporting the training of habilitation (help) dog coaches by financing the training costs and then through supporting the employment of the qualified specialists and the infrastructure investments of employers as a result of which persons with disabilities may receive help dogs.

121. The Rehabilitation Center of Persons with Physical Disabilities operated by the ministry responsible for social affairs began implementing the project of the “Tool development workshop and service network backing the employment and independent living of persons with physical disabilities” within the framework of the Operative Programme of Social Renewal in 2007. The project is aimed at facilitating the social and labour market integration of persons with physical disabilities through the establishment of a national network dealing with the development of auxiliary and sports equipment. As a part of said network one workshop dealing with auxiliary and sports equipment is planned for each region, meaning that in 2011 seven new workshops may operate in Hungary.

Article 21

Freedom of expression and opinion, and access to information

122. The disability act also provides for the right to access to information. Details are included under Article 9 above. When railway and bus stations are made accessible in full in the course of renovation works, special attention is paid to the establishment of the accessibility of the information system (information boards with ordinary, embossed and Braille printing, color coded boards and icons, board with symbols that are easily understandable). Furthermore, special light boards (with lettering), sound information, alarm and emergency equipment, induction loop system, cover lead and protection lanes, contact marking of steps, handholds, door edges and handles are to be established. The homepages including information and schedules are available to blind individuals and persons with sight impairment as well. When tenders are invited for accessibility, environment design engineers check the satisfaction of each condition for obtaining information separately.

123. From among the results of the Public Foundation’s project “Establishment of the professional background for the physical and info-communication accessibility” mentioned under Articles 8 (above) and 26 (below), the curriculum developments significant in terms of communication are demonstrated hereunder. Results include the training programmes concentrated on augmentative and alternative communication forms and easily understandable communication as well as related tools. Furthermore, the curriculum of language examinations of levels A1-A2-B1-B2-C1-C2, adjusted to international standards, has also been compiled.

124. Information on the accessibility of telecommunication devices and on the accessibility of public web pages is given under Article 9 above.

125. The sign language act stipulates that the Hungarian sign language is an independent, natural language and persons with hearing impairment and deaf and blind persons must be enabled to learn the Hungarian sign language and the special communication systems meeting their requirements to the highest possible extent as well as to use such. As from 1 January 2011 the operation of sign language interpretation services will be the compulsory

duty of the state and the resource necessary for the operation of said services will be included in the prevailing act on the budget.

Article 22

Respect for privacy

126. Based on Act LXIII of 1992 on the Protection of Personal Data and Public Access to Data of Public Interest special data — for example the ones related to health condition — may be treated if the person concerned has given his consent to this end or if treatment is provided for by an act. Even in the case of compulsory data treatment the requirement of target orientedness is to be taken into account based on which personal data may be treated only for a certain purpose, for the exercising of rights and fulfillment of obligations. Each phase of data treatment must achieve said goal. Only personal data necessary and suitable the achievement of the goal of the data treatment may be treated solely to the extent and for the period needed for the achievement of the goal. When compulsory data treatment is ordered, the relevant act shall define the target of and the conditions for the data treatment, the field of the data to be treated, the possibilities of their knowledge, the term of the data treatment and the person engaged in the treatment of the data.

127. Even the health act guarantees that the data regarding the bodily, mental and psychic condition of the person concerned and the health documentation may be utilized only for the purpose, for the period and by the person provided for by the act – in all other cases the data can be treated only with the written consent of the person concerned (or his legal or authorized representative). The data protection provisions include protection, without any discrimination, for persons with disabilities as well. The data protection commissioner facilitates the enforcement of legal provisions.

128. The social act stipulates the protection of personal data and separately provides for the protection of the data emerging in the course of the care, with special regard to the target groups that are able to represent their own rights with difficulties or which cannot represent such at all.

129. The above provisions concern especially the right to life, human dignity, bodily-mental health, the protection of personal data and the right to the protection of secrets related privacy. Special attention is to be paid to the fact that only entitled persons should have access to the data of the persons requiring certain cares. Special rights contain the principle of self-determination, the respect for the decisions of persons with disabilities concerning their life style, the establishment and maintenance of connections with other persons.

Article 23

Respect for home and the family

130. The Constitution protects the institution of marriage and family. In the opinion of the Constitutional Court, the constitutional protection of the institution of marriage also means that the Constitution guarantees the liberty of marrying as well. “In many of its decisions regarding the constitutional interpretation of the right to human dignity the Constitutional Court pointed out that the right to human dignity as a manifestation of general personality rights also includes the right to the liberty of self-determination. However, the right to the liberty of marrying is a part of the right to self-determination, meaning that that right is also given constitutional protection on the basis of the Constitution.” [Decision 22/1992. (IV. 10.) AB]

131. The Civil Code in force provides for family law declarations on the exemplary list of affair groups that can be restricted, which may concern the legal declarations made by a person with limited ability to act regarding community property law, the legal declarations related to origin, the name of the child or the change of the name and the consent to the adoption of his child. If the person with limited ability to act is under guardianship restricting competency in general or for any of the above affair groups, such a legal declaration may be made by him only with the prior approval or subsequent consent of his guardian. This provision shall not apply to the declarations of pecuniary nature for the making of which the person with limited ability to act is entitled by the legal regulation. As to family law, such a personal declaration is the one to be made before the registrar when the person marries, or the institution of a divorce action. The person under guardianship excluding competency shall not make such declarations regarding the above issues either but he is to be heard in such cases and the wishes and requests of a person able to express his opinion but under guardianship excluding competency is to be taken into account, if possible. When the new Civil Code is prepared, the regulations on competency and family law shall also be reviewed.

132. Based on the health act, anybody may have access to reproductive programmes — like in the case of all health care services — under equal conditions. Based on the child protection act an aptness examination is to be conducted when somebody wishes to become a foster parent or when somebody wants to adopt a child (from medical, psychological, environmental and life style aspects). However, all this does not exclude the persons with disabilities from any of the possibilities but full competency is a condition for becoming a foster parent or for the adoption of a child.

133. The child protection act focuses on rearing children — including children with disabilities as well — in families: the child may be taken away from his family only if serious risk factors are identified or if the risk of negligence, assault is found or if the child's life is jeopardized. The child may be separated from his parents or other relatives only in his own interest, in the cases and in the way provided for by the act. The child shall not be separated from his family only because of risk factors generated by financial causes. The child has the right to protection in an adoptive family or through other forms substituting parental care or care by relatives. When such a protection is provided to the child his freedom of conscience and religion is to be respected and attention is to be paid to his national, ethnic and cultural origin. Unless otherwise provided for by the act, the child has the right to learn his origin, natural parents and to maintain connections with his family — if this latter gives its consent to this end — even if the parental right has ceased to exist in respect of him. The child has the right to maintain connections with both parents even if the parents live in different states.

134. District nurse duties are defined by the decree 49/2004. (V.21.) EszCsM on the services provided by district nurses. District nurses regularly meet the children (both healthy children and children with disabilities) living in their district region and if there is a risk of endangering, the nurse shall inform the child welfare agency accordingly, which shall make further arrangements, if necessary. It is the duty of the district nurse to provide assistance and consultancy for the child with disability and his family (in cooperation with the family doctor and other competent specialists, if necessary) and to prevent health, mental and environmental endangering in the family cared for, to recognize such endangering, to give help to the right life style and to the establishment of a harmonic and tender family environment.

Article 24 Education

135. A special chapter in Act LXXIX of 1993 on public education covers the enforcement of the right to special care and to activities for rehabilitation purposes. Also in harmony with the Convention on the Rights of the Child, children and students who need special education have the right to receive pedagogical care according to their condition and within the framework of special care, from the date when their disability was established. Therefore, as against the general practice, the system of services rendered within the framework of public education also covers the period before kindergarten age (0–3 years) in the case of children living with disability.

Number of those receiving early development and care (persons)

		<i>1.9.2006–31.8.2007</i>		<i>1.9.2007–31.8.2008</i>		<i>1.9.2008–31.8.2009</i>		
Total		2 458		2 308		2 273		
Of this:	Home care	1 246	Of this:	Home care	1 199	Of this:	Home care	1 080
	Institutional care	1 212		Institutional care	1 109		Institutional care	1 193

136. Based on a governmental order, the Public Foundation surveyed the whole area of early childhood intervention, including public education, health as well as social care and services. As a result of the empirical survey, proposals were made on working out the service-development strategy and inter-portfolio cooperation schemes.

137. Children with grave-accumulated disability have been obliged to go to school since the modification of the public education act in 2006, and this obligation can be fulfilled within the framework of development education at school. 1 September 2010 is the legally prescribed deadline for establishing the development school system. In order to achieve the goal, Public Foundation issued a publication and organised conferences — based on a government order — about its experience on institution development. The publication entitled “Járhat Ő is iskolába” (S/he can also go to school) not only highlights the basic professional-theoretical issues but also presents the promising practices and the legal regulatory framework.

138. The “principle for school education of students with special needs” — issued at a decree level — is meant to ensure that the school development of students with special educational needs should be carried out through mediating appropriate contents and the programmes of development therapies for rehabilitation purposes should be turned into content elements of the pedagogical programmes of the institutions. Competence-based programme packages — that are also suitable for supporting co-education — have been made public as a result of development work serving the purpose of creating chances. Recommendations have been made for each programme package in consideration of the characteristics of all disability types. Among other things, the recommendations cover the description of the features required for identifying the disability causing special educational needs, the prioritised ability areas and expectations with regard to the field of competence, the forms of organising learning as well as the behavioural patterns of the pedagogue and the non-disabled members of the learning group at the receptive educational and pedagogical institution. The methodological, institutional guidelines supporting daily pedagogy work, the documentary guidelines as well as the tools supporting the way of life and learning according to various disability types have been worked out under the programme.

The number and rate of children receiving education at kindergarten and with a need for special education

	<i>Educational year 2007/08</i>	<i>Educational year 2008/09</i>	<i>Educational year 2009/10</i>
All children at kindergarten	323 958	325 677	328 545
Girls	156 201	156 979	158 154
Kindergarten children and students in remedial/special education	4 660	4 917	5 027
Kindergarten girls and students in remedial/special education	1 558	1 589	1 616
Rate of those receiving remedial/special education in proportion of all students (%)	1.44	1.51	1.53
Rate of girls receiving remedial/special education in proportion of all girls (%)	1.00	1.01	1.02

Number of children, students belonging to specific disability groups, receiving kindergarten education and basic/secondary training and requiring special education

<i>Definition of the special education need of children/students</i>	<i>School year 2007/08</i>		<i>School year 2008/09</i>		<i>School year 2008/09</i>	
	<i>In total</i>	<i>Of this: girls</i>	<i>In total</i>	<i>Of this: girls</i>	<i>In total</i>	<i>Of this: girls</i>
Medium-degree mental disability	6 192	2 420	6 254	2 485	6 213	2 478
Hard of hearing	1 101	497	1213	559	1288	590
Deaf	483	244	455	218	445	207
Partially sighted	540	239	537	229	557	239
Blind	269	122	266	128	275	126
Physically handicapped	1 235	492	1299	501	1216	494
Speech impediment	4 048	1 118	4 311	1 101	3 790	1 013
Mild mental disability, partially sighted	148	77	159	77	148	80
Mild mental disability, blind	41	13	34	10	9	4
Mild mental disability, hard of hearing	207	81	227	84	187	76
Mild mental disability, blind	124	46	51	23	63	26
Mild mental disability, physically handicapped	308	129	406	164	423	192
Medium-degree mental disability, blind	95	36	76	32	43	17
Medium-degree mental disability, deaf	19	8	20	10	30	9
Medium-degree mental disability, physically handicapped	219	75	296	117	351	131
Deaf-blind	15	5	17	5	38	10
Autism	1 276	231	1 621	258	1 865	325
Learning development disorders	27 020	9 011	23 757	7 573	29 708	9 688
Behavioural development disorders	3 060	726	3 442	793	2 664	577
Total	78 882	28 716	75 664	26 929	77 844	27 553

<i>Definition of the special education need of children/students</i>	<i>School year 2007/08</i>		<i>School year 2008/09</i>		<i>School year 2008/09</i>	
	<i>In total</i>	<i>Of this: girls</i>	<i>In total</i>	<i>Of this: girls</i>	<i>In total</i>	<i>Of this: girls</i>
Of this: girls	28 716		26 929		27 553	X

Rate of those receiving remedial/special education according to institution types and in proportion of all students (%)

<i>School year/ institution</i>	<i>Primary school</i>	<i>Vocational school</i>	<i>Special vocational school*</i>	<i>General secondary school</i>	<i>Specialized secondary school</i>
School year 2007/08	5.43	2.65	100.00	0.34	0.46
School year 2008/09	5.00	2.76	100.00	0.44	0.58
School year 2009/10	5.00	3.36	100.00	0.56	0.70

* Institution established expressly for students with special educational needs (students with disability).

139. The preference given within the framework of public education and higher education was presented above in connection with Article 5.

140. The travel costs of children and students in need of special education are refunded if such costs incur in connection with institutions providing early development and care as well as preparation for development, and with regard to making use of activities and development for rehabilitation purposes.

141. Based on the stipulations of the public education act, the Public Foundation has rendered support for introducing parent-assisting services out of state resources, in the form of tenders, in each year since 1997. This scheme provides the opportunity to organise parent clubs, leisure time and sensitivity programmes, parent courses as well as mental hygiene sessions. The purpose is to support services to parent groups caring for children and adults with special educational needs, by reacting to their requirements.

142. Data on students living with disability in a breakdown by professions and profession groups can only be given about training at special vocational schools — that can be launched for young people who are unable to progress with the other students due to their special educational needs — but not in the case of students who take part in integrated education. Special vocational schools can prepare students for learning the professions (and taking relevant exams) specified in the National Registration of Qualifications, and in the case of young people who cannot take the professional examination due to their condition, a two-year special course can be organised to teach the skills required for starting work and life.

Statistical data on special vocational training: number of students at the training courses of special vocational schools, according to profession groups

<i>Profession group</i>	<i>Number of students 2007/08</i>	<i>Number of students 2008/09</i>	<i>Number of students 2009/10</i>
1 Health	24	18	4
2 Social services	0	22	40
3 Education	17	17	0
4 Arts, culture, communication	23	19	209
5 Mechanical engineering	181	200	166
6 Electrical engineering, electronics	0	0	51
7 Informatics (software)	375	297	77
9 Building	695	624	596
10 Textiles, clothes, footwear, leather	520	513	551
11 Woodworking industry	378	312	303
12 Printing	65	37	21
13 Transport	0	0	30
16 Secretarial and office work	85	79	234
17 Wholesale and retail sales, marketing, management, administration	225	219	374
18 Hotel and catering trade, tourist trade	288	353	400
19 Craft skills, hair and beauty services, security services	581	769	567
20 Agriculture	966	881	755
21 Food processing	149	175	146
Total	4 572	4 535	4 524

Students with special education needs at vocational schools and special vocational schools, education statistical almanac

	<i>2007/08</i>	<i>2008/09</i>
Number of institutions	489	451
Total number of students	129 066	128 848
Of this: integrated (with special education need)	3 412	3 971
Of this: girls (with special education need)	1 110	1 160

Special vocational schools, education statistical almanac, 2008/09

	<i>2007/08</i>	<i>2008/09</i>
Number of institutions	137	140
Total number of students	9 773	9 809
Of this: girls	3 788	3 861

143. The state budget grants normative student allocations to students taking part in state-supported training schemes, provided in the form of support based on studies and social considerations. Governmental Decree no. 51/2007. (III. 26.) on allocations to students in higher education and payments to be made by them regulates the scope of titles within the framework of social allocations, and in consideration of life situations. Persons becoming students for the first time in full-time, state-supported, high-level special training, basic training, uniform, undivided training and then in master training are entitled to basic support (school starting support) for half a year in an amount equalling 50% of the student normative and 75% in master training. Those in need living with disability may receive regular social scholarship during the total period of their training. The monthly amount of the regular social scholarship may not be lower than 20% of the annual student normative.

144. In 2008, an experimental model programme was launched in cooperation with the Public Foundation at the Debrecen University in order to introduce the note-taking service based on the method applied at the University of Rochester, United States of America. In this programme, the healthy classmates of students with impaired hearing in higher education take notes about the materials of the lectures in harmony with the needs of people with impaired hearing. The experimental model programme proved to be successful, therefore the future objective is to propagate the programme at institutions of higher education.

145. According to the census in Hungary in the year of 2001, there were 46,800 young people aged 15–29 who live with disability. While 15% of those aged 25–29 living with no disability graduated from college or university, this rate is only 5.5% among young people in this age group living with disability. People with disability are significantly disadvantaged in terms of education, although there has been a favourable trend as a result of the extra admission points introduced in 2007.

	<i>High-level special training</i>	<i>Training at college level</i>	<i>Training at university level</i>	<i>Basic training</i>	<i>Master training</i>	<i>Undivided training</i>	<i>Special extended training</i>	<i>PHD, DLA training</i>	<i>Total</i>
Number of students in total – 2007	12 398	109 363	87 703	146 750	984	14 591	18 762	7 153	397 704
Of this: those living with disability – 2007	23	215	243	468	2	47	7	8	1 013
Number of students in total – 2008	15 677	59 366	62 897	191 561	6 997	20 030	17 594	6 911	381 033
Of this: those living with disability – 2008	47	125	131	804	17	47	5	3	1 179
Number of students in total – 2009	18 511	24 936	38 258	220 489	19 322	25 070	16 928	6 817	370 331
Of this: those living with disability – 2009	115	67	111	1 195	65	90	6	9	1 658

146. In Hungary, there is no difference in teaching boys and girls either based on the effective legal regulations or in practice.

147. The copyright law enables persons living with disability to freely use copyrighted works in connection with their disability and to an extent justified by the purpose. With regard to this regulation, the institution may digitalise works for blind students. Such free use of the whole book is also permitted despite the fact that otherwise the law prohibits copying for private purposes. Students with disability may use course book and note subsidy in the case of special-note and note-substituting technical tools promoting other

preparation methods in harmony with the provisions of the organisational and operating rules of institutes of higher education.

148. Students learn Braille-writing as well as augmentative and alternative communication within the framework of school education, and children who are not at school yet are educated within the framework of early development and care, where learning appropriate communication is one of the educational elements. Currently, sign language is taught in the seventh and eighth grades at schools teaching deaf students, but teaching can also be conducted in sign language under the regulations concerning the education of deaf students.

149. The sign language act says that “Teaching Hungarian sign language or a special communication system to deaf or deaf-and-blind children is obligatory at remedial/special teaching-educating institutions set up for children, students who are deaf-and-dumb or with impaired hearing, in the course of kindergarten education and from the preparatory year for school teaching and education”. The teaching of Hungarian sign language or a special communication system must be organised if it is requested in writing by the parent (guardian) from the head of the institution. The learning of the Hungarian sign language is organised and financed in harmony with the Governmental Decree. The Hungarian sign language can be taught exclusively by a pedagogue specialising in sign language. Special communication systems may be taught by pedagogues specialising in the pedagogy of people with impaired sight or hearing. This provision will be effective from September 2017 due to the current lack of necessary expert training.

150. It is also from the academic year starting in September 2017 that the sign language act provides the opportunity that in the course of the basic education of young people with impaired hearing the parents can freely choose from the auditive-verbal (i.e. based on audible speech and lip-reading) and bilingual (i.e. based on bilingual sign language and audible speech) teaching methods. Institutions caring children with impaired hearing must start a bilingual class upon request.

151. The state supports the extended training of pedagogues, co-education and the establishment of the receptive education system from EU funds. The four most important relevant tender programmes are as follows: “institutional sensitivity and preparations trainings (for example, integrated teaching of students who are in a disadvantaged position and who need special education, practice of introducing new learning organisation and education organising procedures, transforming the evaluation culture)”, “diagnostics of special educational needs, training the development of children in need of special care”, “competence-based teaching, equal access in innovative institutions” and “integration of students with special educational needs”.

152. The impairment of body, sense organ, brain and speech is established by expert committees at national and county level. The committee is headed by a special education teacher with qualifications corresponding to the type of impairment, and the members are a psychologist and a specialist doctor. Expert opinion is given about the examined children, and a proposal is made for appropriate care on the basis of the opinion. The examination may be requested by the parent but — if another person suspects the disability (for example, nurse, kindergarten pedagogue etc.) — the parent may also be obliged to take his/her child to the examination. Two EU projects provide resources for extending early diagnostics and development opportunities as well as for introducing unified examination tools in order to start professional development as soon as possible. In the higher education system, the basic training faculty for baby and small child education provides skills for identifying early development needs and for learning appropriate development procedures, together with the extended training faculty of differentiated development for kindergarten pedagogues and primary school teachers. In the field of health training, physiotherapist qualifications can be obtained at the faculty of basic care and patient care training.

153. The purpose of the extended training entitled “Complex examination procedure: pedagogical, special education diagnostics and consulting at special pedagogical services” is to work out the uniform professional approach and practice of education consulting as well as pedagogical and special education diagnostics and consulting activities pursued within the framework of expert committees in the public education system as well as to improve the quality of pedagogical and special educational examination and consulting activities.

Article 25

Health

154. When using health services, the legal regulations in the health sector do not make any differentiation with regard to disability, however, they make a difference between patients in terms of acting capacity. However, the difference is made in a positive manner: It contains guarantee elements ensuring that persons who need help to exercise their rights should receive health care that is justified by their condition, that is the most necessary for them and that is at appropriate standards. It was laid down as a basic principle that — in the course of health care — all patients should be able to safeguard their human dignity and self-identity, furthermore, that their autonomy and all other rights should not be infringed. Based on the health act and within the framework specified by law, all patients have the right to health care that is appropriate, that is justified by their health condition, that is continuously available and that fulfils the requirement of equal treatment. These basic principles and legal regulatory provisions ensure that people living with disability can have access to health care in a manner similar to all other patients. The institution of the representative of patient rights also serves the increased protection of people living with disability. Based on the health act, the representative of patient rights pays special attention to protecting the patient rights of those who are exposed due to their age, bodily or mental handicap, health condition and social situation as well as to the complaints regarding the enforcement of the requirement of equal treatment, and — by virtue of an authorisation — the representative represents patients upon official procedures launched in order to establish whether the requirement was infringed.

155. Organised public screening is a public health activity that is embedded into the health care system, it is financed from public funds, it covers population groups qualified as endangered based on their age, it covers the personal invitation and follow-up of the target persons and it is repeated at a professionally justified frequency. The Decree No. 51/1997. (XII.18) of the Ministry of Welfare on age-based screening tests promotes the implementation of public screening tests within the framework of the National Public Health Programme. Equal chances for access are promoted by the facilities provided for mobile and accessible screening tests, special tests and transportation. The first two parts of the “Screening for Life Programme” (in 2007 and in 2008) were organised in large Hungarian towns, and the approximately 100,000 participants attended almost 250,000 free health screenings. The third phase of the programme covers settlements (with 2–10,000 residents) in the most disadvantaged small regions. The population of 3–4 neighbouring small settlements was also involved at places with fewer than 3,000 inhabitants. There are no surgeries or hospitals near most of the selected 43 settlements, and visiting the doctor is cumbersome for the local population, or they need to make several trips.

156. The purpose of the EU project entitled “National communication of screening programmes” is that the target groups should learn about the importance of screening and they should use the opportunity of organised and targeted oncological screening tests and cardiovascular risk screening. Major specific targets of the project: increasing the number of participants in screening; influencing the population’s screening-related attitude in order

to enhance self-care and the sense of responsibility, as well as developing the communication and motivation skills of health staff dealing with screening and caring activities through sensitivity training schemes.

157. Based on the act on embryo protection, the state promotes the use of contraception products and devices at reduced prices and subject to eligibility, the issue of publications on contraception and on the protection of embryo life as well as the supply of related information at forums of mass communication. Furthermore, the state promotes the development of the system of crisis management consulting that is professionally well-prepared and is available for the mother and for the whole family, as well as regulates — in the course of the consulting — the forms and the conditions of effective cooperation between state — and civilian organisations. Support is rendered to activities and organisations aimed at protecting embryo life, especially if they also provide financial support to pregnant women in need. Attention is paid to increased protection of pregnant women at work through the tools of labour law regulations. Local municipalities help pregnant women and their families in getting prepared for, and bringing up yet-to-be-born children through child welfare and child protection provisions.

158. Free pregnancy care is provided to Hungarian citizens and their spouses having residence in Hungary as well as to non-Hungarian citizens having a valid immigration or settlement permit. Within the framework of pregnancy care, pregnant women are informed about the lifestyle required for the healthy development of the embryo, about proper nutrition and about the importance of avoiding impacts that are harmful to the embryo (especially smoking and drinking alcohol). Screening tests are carried out to check the healthy development of the embryo and to protect the health of pregnant women. Assistance is rendered to pregnant women to get prepared for child-birth, breast-feeding as well as baby- and child-care. The detailed rules on pregnancy care as well as the range of optional screening tests that are obligatory and that are available free of charge within the framework of state care are specified in the decree of the health minister.

159. Based on decree number 49/2004. (V. 21) ESzCsM on district nurse services, district nurses must perform their tasks in connection with persons who have an address in the district in question. The ownership of addresses shall be determined according to the stipulations of act LXVI of 1992 on the registration of the personal data and the addresses of citizens. District nurses are also obliged to provide care to persons permanently staying in their districts if they report their claim for care in writing. In this case, the district nurse notifies the district nurse competent according to the reported domicile about taking into care immediately and in a written form. District nurses also deal with tasks related to the child protection system in order to promote the up-bringing of children within families as well as to prevent and to terminate the exposure of children to danger. When perceiving danger, they are obliged to make a report to the children's welfare service as well as to initiate official proceedings in case the child is maltreated or seriously neglected or any other grave, endangering cause prevails as well as in case of gravely endangering behaviour of the child caused by him/herself. Special nurse service is operated at educational institutions and at institutions caring for disabled children. District nurses are obliged to carry out screening tests once a year for all children (both healthy and disabled) belonging to their district. Should the district nurse perceive any deviation, s/he sends the child to the family doctor or to the competent children's welfare service.

160. Early development and neuro-rehabilitation (neuro-therapy) capacity development was carried out under the national baby and child health programme entitled "The child is our common treasure". The Hungarian National Public Health and Medical Officer Service conducted a situation analysis into the current practice of early development. A uniform methodology has been worked out for screening the sight and the hearing of newborn babies and children aged 0–18. Two guiding principles have been issued for family doctors

and district nurses, and a methodology guide has been made for district nurses in form of a DVD. The programme prescribes that the completed multi-media educational material introducing the development neurological, diagnostic and therapy methods and protocols must be made known to all doctors (primarily neo-natal specialists) and district nurses who deal with babies, and it must be integrated into paediatric and child neurology education and extended training in order to prevent physical, mental and accumulated disabilities. The multi-media educational material has been completed, and it has become a part of training and extended training.

161. The provisions related to medical aids are highlighted in articles 9 and 20 above and article 28 below.

162. The conditions of independent child rehabilitation examination have been worked out. The minimum conditions of child rehabilitation have been elaborated through the involvement of Professional Colleges, and professional guiding principles have been issued for four areas.

163. Expert training with regard to the field of health is regulated in a ministerial decree. We are presenting the following training schemes — as a good practice — conducted in order to sensitize experts towards the rights of persons living with disability. The National Institute of Child Health held an extended training course under the title “the basics of child rehabilitation and development pediatrics” to the doctors of the expert committees that are active in the field of public education as well as to specialist candidates getting prepared for the special rehabilitation exam. The Government sponsors the tender entitled “Training programmes for health employees, shortage job training and competence development” out of EU resources. In- and/or outpatient institutions dealing with public financed health care, organisations dealing with rescue activities, patient transportation organisations, family doctor services as well as services rendering home care may apply for sponsorship of their employees’ training costs. Furthermore, support may be given to work out medium-level and higher special training schemes, extended training schemes and new health qualifications.

164. The regulations of the health act regarding consent to various treatments have been elaborated in a manner that the individuals’ needs and opinions can be taken into full consideration in conformity with their conditions. The act says that the patient’s autonomy — where one of the most important elements is given by information-based consent — can be restricted only to the extent and in the manner justified by the patient’s health condition. Consent to treatments is given by patients after full information is provided to them in an individual form. Aside from the exceptions specified in the act, the condition on using any health service is that patients give their consent that is based on proper information and that is free from any deception, threat and force. The act separately stipulates that in the case of patients who need help when exercising their rights their opinion on health care-related decisions must be taken into consideration as far as it is allowed in professional terms.

165. According to Act LXXXIII of 1997 on obligatory health insurance provisions, health services may be used — from among the health insurance provisions — to the extent justified by the health condition. Persons entitled to the health services of health insurance are entitled to health services with the same professional contents. As a result, persons living with disability do not suffer any disadvantageous discrimination as regards access to health insurance. Their obligation to pay health insurance contribution is subject to the size of their contribution base (and thus to the amount of their income) just as in the case of other insured persons. Therefore, insured persons living with disability do not have to pay higher insurance fees due to their disability than insured persons with no disability.

166. The legal regulations on health issues stipulate that the rights of patients must be protected in the course of health services and measures. It is an important principle also laid

down in the act that equal chances must be enforced when making use of health services. Health services can be used at health service providers who concluded a financing contract with the health insurer for the given service. All health equipment that are specified at the health service providers as an objective condition among the minimum professional conditions can be used by the insured persons for preventing, diagnosing and treating their diseases within the framework of health provisions and by applying the above-mentioned basic principles. In addition to this, the insured persons are entitled — following the doctor's order — to the subsidy granted for the price of the medical aid suitable for treating their condition and regulated in a decree as well as to the subsidy granted for the repair and renting charge of the medical aids.

167. The Governmental Decree No. 180/2010. (V. 13) on the basic principles, the conditions and the detailed rules on admitting health technologies into health insurance financing as well as on the revision and the amendment of the circle of the already admitted technologies entered into force on 1 July 2010. With its enactment and with the admittance into health insurance financing of new medical procedures and medicine technical tools that emerge as a result of regular medical-professional, technological and IT development and innovation and that improve the quality, safety and accessibility of patient care, the purpose was to provide patients with the best possible access to the latest medical tools and procedures, possibly close to their residence and with shorter waiting time as well as to provide them with equal chances. As a result of the technology evaluation and the priority list, new procedures are marked out every year along objective and transparent aspects to extend the circle of publicly financed procedures and it also becomes visible for the society under what considerations the procedures are integrated into social insurance and what cost-effective procedures the contributions paid by them are used for. Before the entry into force of the Governmental Decree, decision was made on the admittance of the new tools and technologies through a long individual procedure.

168. The regulations on the distribution of medicines in Hungary are in conformity with the EU guidelines in all respects. When working out the decree-level regulations, the portfolio laid great emphasis on enforcing the rights of the blind and the partially sighted. The decree number 30/2005. (VIII. 2) EüM on the labels of, and patient information about medicines for human use prescribes what information and in what manner is to be provided on the labels of medicines and in the patient information sheet. The National Institute of Pharmacy permits the distribution of the medicine after the approval of the final sample, according to the stipulations of the decree. It is checked that the inscription (name, effectiveness) is also shown in Braille writing. In the case of medicines already approved for distribution upon the entry into force of the decree, compliance with the provisions on labelling and patient information must be ensured by 31 December 2010 at the latest. The decree says that — upon request by the patients' interest representation organisations — the holder of the distribution permit must also provide patient information in a format suitable for the blind and partially sighted. The "suitable form" is not restricted to information in Braille writing, but it can also be a document with enlarged letters or it can be visualised in an electronic format. The Budapest University of Technology and Economics and the National Institute of Pharmacy jointly developed the system entitled "medicine line" – as a result of this, patient information on medicines is available to anybody without restriction in terms of place and time. In the year 2009 no special interest could be perceived towards alternative patient information because the medicine line was used — on average — only forty times every month.

169. The health administration encouraged the preparation of professional protocols also with regard to those living with disability; thus, for example, the professional guiding principle regarding persons living with autism spectrum disorder was published in 2008.

Article 26

Habilitation and rehabilitation

170. The system of complex rehabilitation has three main institutional pillars: the National Rehabilitation and Social Institute (in the following: ORSZI), the Administration of Pension Insurance and the Public Employment Service.

171. Complex rehabilitation is a process that starts with the qualification of health damage and with the exploration of the rehabilitation needs. The purpose of rehabilitation annuity — within the framework of the social insurance pension system — is to promote the rehabilitation (based on the available and developable abilities) and the social (re)-integration of persons living with damaged health. The objective is that people with damaged health can make a living — based on their remaining abilities — from income gained as active employees in the labour market instead of receiving passive disability pension. One of the conditions for entitlement to rehabilitation annuity is health damage between 50–79%, due to which the employee cannot be employed without rehabilitation in his/her current job or in the job preceding the health damage or in any other job that is in conformity with his/her qualifications. S/he cannot pursue earning activities, or if s/he does, his/her wage is by at least 30% lower than the four-month average wage preceding the disability. Another condition is the eligibility for rehabilitation and the acquisition of service time prescribed according to his/her age. The rehabilitation annuity is 120% of the amount of disability pension, which can be paid at most for three years. A further condition for the establishment and the payment of the provision is that the applicant concludes a rehabilitation agreement with the state employment organisation and fulfils the stipulations of the agreement. The rehabilitation annuity can be established from 2008, and it is paid by the Administration of Pension Insurance.

172. The ORSZI deals with medical, employment and social expert activities within the framework of a complex committee. The four-member expert team determines the rate of health damage, the professional work ability and the rehabilitation eligibility of the person concerned, together with the possible direction, the needs and the period of rehabilitation. With a view to get prepared for the new qualification, multipliers have been trained to provide methodology training to the employment experts who work in committees dealing with the complex qualification of persons at an adult age and with modified work abilities. Altogether, 36 persons received a certificate in the course of the programme.

173. It is an important task of the Public Employment Service to promote the rehabilitation — based on abilities that exist and that can be developed — of persons living with damaged health, especially those receiving rehabilitation annuity, as well as to promote their social integration as a result of the above, through active cooperation with other rehabilitation actors. The purpose of cooperation — for a fixed period of time — with persons receiving rehabilitation annuity and obliged to cooperate is that the state employment bodies should successfully contribute to the rehabilitation of persons receiving rehabilitation annuity, to the implementation of their self-employment and to their employment in the open labour market through specific forms of support, through the services rendered and/or promoted by them as well as by promoting access to other services and subsidies (in the field of health, social issues etc.). Within the framework of the EU-financed Social Renewal Operative Programme, the purpose of “subsidies that can be granted within the framework of promoting the rehabilitation and the employment of people with changed capacity for work” is to provide complex rehabilitation services to people living with health damage and with modified work abilities that help them to return to their former workplace, to seek renewed employment in the labour market as well as to encourage employers to employ persons with modified work abilities. The programme

supports the employment rehabilitation of people with changed working abilities and the improvement of their employability and working abilities.

174. The rehabilitation of people pursuing wage-earning activities and receiving rehabilitation annuity must be attempted primarily at their place of work. To that end, the competent office contacts the employer, who is obliged to consult on the opportunities of rehabilitation measures within ten working days following the contact. If the employer agrees to take the required rehabilitation measures, the employer's representative must also be involved in elaborating the rehabilitation agreement and the rehabilitation plan. The competent office lays down the employer measures required for the successful implementation of the rehabilitation plan together with the obligations assumed by both parties (employer, office) in a separate cooperation agreement. The agreement specifies the required rehabilitation measures that promote the rehabilitation — at work — of the persons receiving annuity. The office provides information to the employer about the subsidies and services that can be used when employing persons receiving rehabilitation annuity.

175. One of the key areas of successful habilitation and rehabilitation is helping the transition from school to work. For this purpose, the Public Foundation launched the programme entitled "Practice at Work" through governmental subsidy. The objective is that mentally handicapped, well-socialised students with appropriate work abilities at special vocational schools that develop skills (but do not provide professional qualifications) should be prepared for undertaking work. The students go to various, open labour-market workplaces for practice once a week. The students are taken to the workplaces by a school assistant, and the students change workplaces every two months. As a result of this, they learn about eight workplaces — and together with this, about eight types of work at various points of the settlement — by the end of the school year. Apart from the students, employers and labour centres also belong to the target group of the programme. Over the past years, a version of the above programme has also been worked out and adapted to disabled persons living at social institutions as well as to disabled persons living in families (Work Practice at Institutions, Adult Work Practice). Methodological publications have also been issued in order to propagate the programmes.

176. Another good practice is the "Springboard" (Dobbantó) programme coordinated by the Public Foundation. This programme is aimed at providing professional preparations and extended training to school leaders as well as to pedagogues who are in direct contact with young people attending vocational training. The completed methodological guide supports pedagogues in the practical implementation of team work and development based on an individual schedule, and supports leaders in working out and propagating a flexible practice to be introduced within the traditional school framework. The introduction of the new methodology is assisted by "mentors who assist changes" (trained in 130 hours), and leaders are supported by trained "educoaches".

177. Another good practice is the KOMP programme — coordinated by the Public Foundation — which is meant to ensure that the real objective for pedagogues, students and parents should not be just obtaining a final certificate at the institutions but they should become aware of the job opportunities and — to that end — they should carry out conscious career planning. It is a specific feature of the programme that it generates organisational restructuring within the institutions in harmony with other developments focused on vocational schools and by using their impacts, by activating and involving the actors (students, pedagogues, institutions, parents, labour market players) as well as by connecting the special training activities with the development of basic employee competences, with information provided to the employers and with the real practice of seeking employment.

178. The career offices that are operated at institutes of higher education promote and support the successful employment of students in the labour market.

179. With regard to the area of health rehabilitation, it is to be pointed out that in May 2009 the health ministry announced the tender entitled “Support to organisations dealing with health activities and promoting the rehabilitation of patients”; within this framework, 45 institutions — carrying out rehabilitation activities and not financed from the central budget — were granted support for rehabilitation programmes and publications organised for groups of people living with various disabilities. Materials providing information on applying medical aids for disabled people and presenting other supporting procedures were also among the winning tender applications.

180. Upon request by the health government, the Institute of Basic and Continuing Education of Health Workers organised six extended training schemes for employees active in specialised rehabilitation fields. The programme covered the area of rehabilitation in internal surgery, cardiology, respiratory and locomotor organs, neurology and psychiatry. The national conference was attended by 327 specialised employees and 21 qualified lectures were given. The regional conferences were attended by 695 specialised employees and 61 qualified lectures were given. Another four training schemes were organised for health care experts through the cooperation of the Public Foundation in order to prepare them for communication with, and treatment of people who live with disabilities and who make use of health care. Titles of the training schemes: “Building a bridge of communication between healthy people and those living with disabilities”, “Patients with special needs in health care”, “Providing equal chances in health care to patients in need of special care”, “Communication training in order to create chances”.

181. When providing care to disabled people in the social field, a development plan must be prepared on the basis of the principles of normalisation, habilitation and rehabilitation. Central elements of rehabilitation: development: rendering assistance to the world of work and towards accessing meaningful employment; providing preparations; protected workplace; self-enforcement. Individual development plans must be prepared for people who stay at rehabilitation institutions for disabled persons, in a disabled people’s home and who stay in their own homes, specifying the manner of treatment streamlined to the individuals as well as the documentation covering the development of self-supplying abilities. The contents of the individual development plans must be worked out jointly with the clients and their acceptance must be verified through the clients’ signatures. Rehab institutional provisions (with in-patient facilities) can be used through eligibility examination by experts, where attention is paid to the voluntary nature.

182. Within the framework of training support to job-seekers, training for job-seekers living with disability can be financed at a higher rate, which also covers the costs of adaptation required for practical training.

183. The National Institute of Vocational and Adult Education invited a tender in order to raise the qualification and the employment level of people living with disability. In the first step of the complex programme, support was given to training schemes adapted to the labour market needs of the regions concerned, and in the second step support was given to organisations that render employment rehabilitation services in order to promote the employment of those who successfully complete the training.

184. Upon governmental order, the Public Foundation set up nine, complex regional rehabilitation institutions with nationwide coverage for persons who suffered eyesight damage at adult age in order to promote the social integration and the labour market rehabilitation of employment-aged persons with damaged eyesight. These institutions provide elementary and employment rehabilitation services after health rehabilitation. Elementary rehabilitation covers the teaching of the following: functional eyesight test,

functional eyesight training, teaching orientation and traffic, teaching the usage of tools that help the conduct of life, re-teaching everyday activities, teaching Braille reading, teaching the usage of communication and computer technology tools. The employment rehabilitation service covers the complex survey of the labour market and the preparation of persons with damaged eyesight. Parallel with this, workplaces are explored and prepared, which is followed by mediation and training at work. In addition to institutional development, a methodology manual was made to describe the service as well as three methodology films in the topic of elementary rehabilitation, employment rehabilitation and functional eyesight test. In the second development phase, the service also became available for deaf-and-blind people. When the project was started in 2004, the service was only available in Budapest (at the National Institution for Blind People); 50 people received care every year at an annual level, but today 550 people receive care at the nine centres.

185. In order to enhance the quality of the former service, the Public Foundation organised psychology training and supervision as well as extended training in elementary and employment rehabilitation to experts dealing with the elementary and employment rehabilitation of people with damaged eyesight.

186. Support was also rendered to personalised, alternative labour market services in order to promote the labour market (re)-integration of unemployed people with changed working capacities, living with disability and/or with lasting health damage (see paragraph 3 below). The tender programme provided 37 civil service provider organisations with the chance to run the employment rehabilitation service, and a direct result of this is the employment of job-seekers in the open labour market.

187. The target group of the project entitled “Complex labour mediation and consulting service for physically handicapped people” covers unemployed people at an active age, with modified work capacity, living with disability and with impaired health. It is coordinated by the Motivation Foundation.

188. The target group of the programme entitled “Supported Employment” covers people with slight or medium degree mental disability, autism or epilepsy as well as cumulatively disadvantaged people where the main disadvantage concerns mental abilities. It is coordinated by the Salva Vita Foundation.

189. The programme entitled “Solution for Employers as well as Employees with Changed Work Capacities” was launched within the framework of British-Hungarian cooperation with the purpose to encourage the participation of non-profit organisations in promoting the employment of people with changed capacity for work and living with disability. The programme was launched in the autumn of 2002, and the support became continuous with a view to the results in the merit. The experimental programme was managed by the Labour Centre of Zala County. The purpose of the programme is to activate the available work capacity of inactive people who are still at an active age and who are living with a changed work capacity, to raise their interest and motivation as well as to strengthen their self-confidence for the sake of renewed employment. Working out an acceptor and receptive social environment and approach is also an essential purpose of the programme. Extension has been started with a view to the acceptance and the achievements of the programme in the labour market, and — as a result of continuous development — today as many as 17 service providers are dealing with the programme along unified standards and work processes and with the help of trained consultants.

190. Although the system of social provisions and employment-promoting services is well-established in Hungary, there is no regular practice for the service provider organisations of various sectors to work together on solving problems that concern several areas. In the case of the model programme promoting the employment of those bringing up people with serious-cumulative disadvantages, an experimental programme is being

elaborated and conducted to cover the whole family and to offer complex (social, labour market) services so that parents who have been taking care of their children (many times at an adult age) in their homes can find appropriate placement for their children, they can step out of the caring position and they can join the society as employees.

191. The employment of job-seekers who live with disabilities is promoted by the work relationship between labour centres and employment-health care stations – as stipulated in governmental and ministerial decrees; within this framework, the examination into the opportunity of employment, professional suitability and eligibility for the job provides help for choosing an occupation and profession with the remaining abilities. From among the services, an independent consulting form is rehabilitation consulting, which covers various, complex consulting opportunities for job-seekers living with disabilities. Special importance is attached to the possibility of employing a mentor (rendering assistance in the labour market) who helps people living with disabilities to find jobs. The Rehab Information Centre is an independent, accessible service station made available for people living with disabilities.

192. In 2007, a training and curriculum development project was launched in order to build up a mentor network for complex rehabilitation and to prepare colleagues at branch offices dealing with clients who receive rehabilitation annuity; as a result, more than 500 people received training from among the associates of the State Employment Service as well as non-profit organisations set up for employment purposes. The professional training and after-training of employment experts was also carried out by December 2009. The “Rementor” programme was conducted by the Szent István University in Gödöllő.

193. The purpose of the tender programme entitled “subsidy to the costs of students in high-level extended training in the topic of employment rehabilitation” is to increase the national training capacity for training experts who support the employment rehabilitation of people living with disabilities. The Public Foundation granted support — through tendering within the programme — to institutes of higher education starting training in this topic by providing 80% cost reimbursement to students taking part in the training. The governmental body responsible for rehabilitation matters supported the establishment and the implementation of further special extended training in the topic of rehabilitation. Extended training entitled “elementary rehabilitation of people with impaired eyesight”, which provided the opportunity of obtaining appropriate qualifications to experts working at nine elementary and employment rehabilitation centres set up in the country for people with impaired eyesight. The training was carried out in cooperation with the Bárczi Gusztáv Faculty of Special Education at the Eötvös Loránd University of Sciences. With a view to develop the quality of rehabilitation provisions to people living with disability, the state supported the establishment of the high-level extended training faculties called “early childhood intervention therapist” and “rehabilitation of people living with autism”.

Article 27

Seeking and providing employment

194. The Constitution proclaims the prohibition of disadvantageous discrimination and declares that in the Republic of Hungary everybody has the right to work as well as to the free choice of work and occupation. The Constitution says that everybody has the right to equal wages for equal work, without any discrimination, and all workers have the right to income that conforms to the quality and quantity of the work performed by them. As far as the above fundamental right is concerned, regulations in force basically do not make any difference regarding competence – only the public servant status is an exception to this as such a status may be filled by persons with full competence only.

195. By virtue of the law on equal chances, disability-based discrimination in the field of employment means infringement to the requirement of equal treatment. The requirement of equal treatment is not infringed by conduct, measure, condition, failure, instruction or practice that restricts — in an unavoidable case — the disadvantaged party's basic right with a view to enforce another basic right, provided that the restriction is suitable for meeting the objective and it is in proportion with it, furthermore, in cases not pertaining to the above aspect, the restriction has reasonable grounds that are directly related to the legal relationship in question according to objective considerations. In this regard, proportionate discrimination does not mean the infringement of the requirement of equal treatment if it is justified on basis of the type or nature of the work and it is based on all essential and lawful conditions that can be taken into account upon the application.

196. By virtue of the law on equal chances, harassment means infringement to the requirement of equal treatment. Harassment means behaviour harmful to human dignity as well as behaviour of sexual connotation or other nature related to the protected attributes (thus disability) of the persons concerned, and its aim or impact is the establishment of a threatening, hostile, humiliating, dishonourable or aggressive environment against a person.

197. Several nationwide programmes support the employment of people with changed working abilities, including employees in the most disadvantaged position. The manor-house project worked out for people living with autism was launched in 2004, and it is ongoing also at present. Its purpose is to organise complex care for people living with autism by providing accommodation and complex rehabilitation as well as by providing primarily protected employment in agriculture, food industry or tourism. Currently nine manor-houses are run throughout the country.

198. Those persons living with disability who are unable to enter the open labour market can appear in various scenes of the protected labour market based on their abilities. Social employment financing is available — within an annual budget specified for social institutions — to those who can join the world of labour only through partial activities or with regular, high-intensity support (technology, human resources).

199. The National Employment Foundation has worked out and supported transit models that are meant to ensure mobilisation towards the open market by improving the chances of employees to seek jobs and by creating an interest on the employer side.

200. The National Employment Foundation was requested to conduct the programme entitled "encouraging the employment activity of employers and employees with changed work abilities". The programme was meant to explore the secondary elements of encouragement (not based on state subsidies) that can convince the open market players about the advantages of employing people with changed capacity for work.

201. The main task of the National Employment Foundation is to promote the extension of employment, to improve the adaptation abilities of employees and job-seekers, to render services to employers as well as to improve the labour market chances of disadvantaged people and to promote their employment. It draws into the service programmes the widest possible range of inactive people, and provides a chance to satisfy the self-information needs of those seeking and offering jobs.

202. Under the Governmental Decree 291/2006 (XII.23) on the Public Employment Service, the Service organises and renders services, deals with work mediation, gathers reports on labour needs, provides information and consulting and carries out customer service activities related to the tasks performed by them. Furthermore, it provides information in connection with the European Employment Service (EURES), keeps contacts with employers taking part in the economic life of the county and the small region concerned, with local municipalities and other organisations in the county and the small

region concerned, cooperates in economic restructuring and in programmes aimed at improving the situation of employment.

203. Mediation is a primary service task of the labour centres, and it is free of charge for all parties. In the course of mediation, the most important objective is to provide a meeting point for those who seek and offer jobs as well as to establish a legal relationship for employment between them. To that end, the service highlights the differences in the demand and supply structures so that the demands can be better fulfilled through appropriate re-training schemes and other forms of support. A further task of the service is to provide a solution for the life situation of people registered as job-seekers as well as to promote preparations required for getting jobs or taking labour market positions through human services, prioritised programmes or active employment-policy instruments.

204. The Governmental Decree on the rules of accrediting employers employing employees with changed work capacities and on controlling accredited employers entered into force on 1 November 2005, the Governmental Decree on budgetary support that can be rendered to the employment of employees with changed work capacities and the ministerial decrees on implementation entered into force in several stages from 1 November 2005 to 1 July 2007. The changes in these legal regulations affect 40,000 employees with changed work capacities. The essence of the changes is that employers may obtain certificates on three levels (basic, rehabilitation and extraordinary) and eligible supports are adjusted to the level of the accreditation.

205. Support may be used for employing employees with changed work capacities based on Act IV of 1991 on promoting employment and on provisions to the unemployed and on the basis of the MüM decree 6/1996. (VII.16) on its implementation.

206. Participation in training schemes that promote employment can be supported if the training schemes promote access to work or the preservation of the jobs of the participants.

207. Capital allocations up to HUF 3 million help job-seekers to become entrepreneurs – the allocation can be reimbursable or non-reimbursable; furthermore, wage support can be granted at most for six months and it may not be higher than the amount of the lowest compulsory wage; as well as consulting costs required for starting and pursuing entrepreneurial activities are reimbursed.

208. Wage support can be granted to help rehabilitation employment up to 40–100% of the wages and benefits payable to employees. The support can be granted from 1 July 2007 only to employers holding an accreditation certificate. Wage support may be requested by the employers at the labour centre competent at the place of employment or at the corporate seat of the employers, except for public administrative bodies as well as state or local municipal budgetary organisations if employees with changed work capacities are, or will be employed within the framework of employment relationship.

209. Subsidies may be granted from the Rehab Fund Part of the Labour Market Fund — based on a tendering procedure — for establishing and transforming workplaces and for providing free access to workplaces as well as for modernising and making investments into work tools. With a view to the economic crisis, this form of subsidy cannot be granted temporarily since the second half of 2009. Its role has been taken over by the Social Renewal Operative Programme, which will be introduced later.

210. The costs of passenger transport, administration, logistics, work organisation and transportation can be reimbursed in the form of cost compensation support and tendering. Rehab cost subsidy can be granted to employers who agree to employ — in a contract concluded with the authorities through a tendering procedure — people who cannot be employed in the open labour market due to their health condition or disability and who meet the conditions for the qualification for the extraordinary accreditation certificate.

Wage support and cost compensation support to the employment of people with changed capacity for work, in HUF 1,000

<i>Description</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>	<i>2007–2009 in HUF 1,000</i>
Wage support	7 988 956	15 892 841	16 038 399	39 920 196
Support to protected organisations	20 556 578	28 771 758	29 440 698	78 769 034
Support to organisations receiving cost compensation support	1 889 297	3 027 660	2 583 791	7 500 748
Total	30 434 831	47 692 259	48 062 888	126 189 978

211. Within the framework of the Social Renewal Operative Programme, the following forms of support can be granted to encourage the employment of people with changed capacity for work based on Governmental Decree No. 132/2009.(VI.19) and within the framework of the EU-financed programme entitled “Assistance to the rehabilitation and the employment of people with changed capacity for work”.

212. Wage support: wage support to extend employment; wage support to extend rehabilitation employment; support to the employment of persons rendering assistance at work; wage cost support for the purpose of gaining work experience, work practice and work trial.

213. Support to self-employment: Support can be granted upon request under the programme, for not more than six months up to the amount of the obligatory minimum work wage.

214. Reimbursing local and point-to-point travel costs related to going to work and gaining work experience between the place of residence or place of abode and the place of work. Reimbursement of local and point-to-point travel costs related to going to work and gaining work experience can also be determined — based on Governmental Decree No. 39/2010. (II. 26) — in the case of getting to work by own motor vehicle as well as for persons with physical handicap or disability and their relatives. Transporting groups of passengers can also be supported in the case of employers who provide for the travel of employees between their residence (place of abode) and the place of work in the form of transporting groups of passengers. The costs of local and point-to-point travel can also be supported in connection with job-seeking if the travel is required in order to obtain expert opinion on occupation health and training suitability initiated by the labour centre. The reimbursement of the costs of occupation health and training suitability examinations is requested by the employer and/or the training institution, but the costs of examination are reimbursed by the labour centre directly to the organisation carrying out the examination.

215. Support to training costs in the case of training employees who are in employment: The support may be requested by employers employing employees who cannot be further employed without training.

216. Hungary applies the following four tax-policy tools in order to encourage employers and employees.

217. In the case of seriously handicapped private persons, the tax on the aggregate tax base is reduced by the amount (personal allowance) equalling 5% of the monthly minimum wage valid on the first day of the taxation year, every month, from the month of the starting day of the handicapped status during the period while this status prevails, on the basis of the relevant certificate. In 2010 this is HUF 3675 every month.

	2007	2008
Number of people using the allowance	68 000	67 000
Rate of tax remitted by the state	HUF 2.5 bn	HUF 2.7 bn

218. Based on Act LXXXI of 1996 on corporate tax and dividend tax, the profit before tax can be reduced — in the case of employing people with work capacity changed at least at 50% — with the amount of wages paid to the employee with changed work capacity every month per person, but at most with the minimum wage valid on the first day of the taxation year, provided that the average staff number of the employees employed by the tax-payer does not exceed 20 persons in the taxation year.

	2007	2008
Number of entrepreneurs using the allowance	798	756
Rate of tax remitted by the state	HUF 594M	HUF 620M

219. The social cooperative is a cooperative whose objective is to find employment for its members who are without a job or are socially disadvantaged, and to encourage the improvement of their social situation by other means; Social cooperatives (with the exception of school cooperatives) establish their tax base and determine their tax exemption under the rules relevant to non-profit business associations of public benefit and prioritised public benefit. Social cooperatives are given tax exemption at the rate that is represented by its revenues gained from the preferential activities within the total revenues.

220. Private entrepreneurs may reduce their revenues — in the case of employing people with work capacity changed at least at 50% — with the wage paid to the employee every month per person, but at most with the monthly minimum wage valid on the first day of the month (in 2010 the minimum wage is HUF 73,500).

	2007	2008
Number of private entrepreneurs using the allowance	250	267
Rate of tax remitted by the state	HUF 201M	HUF 244M

221. The Rehab Dialogue Committee is the interest representation body of persons with changed work capacity. The committee has two sides: employer and employee side. The Local Industry and Municipal Workers' Union represents employees with changed work capacity, and the National Association of Protected Organisations represents employers.

222. The Controlling Body of the Labour Market Fund — where the governmental side is also represented in addition to the social partners, while employees are represented by the trade union delegates — takes an important role in allocating employment-related subsidies.

223. The government launched the programme "Chance for the future" in 2002 in order to set up new, remote workplaces. The central labour market programme — started in order to propagate remote work — intends to promote the establishment of new workplaces as well as wishes to encourage the application of flexible forms of work, the more flexible

operation of work organisations and the further modernisation of the work culture. By further propagating remote work, the tender offers a chance to access the labour market also for those actors in the labour market who belong to a disadvantaged group. Those applicants who also create a chance for people living with disabilities are given special consideration.

Article 28

Adequate standard of living and social protection

224. Children welfare services rendered under basic children welfare provisions are free of charge for those who use these services. In the case of services that are subject to fee payment, a reduced fee is to be paid according to the level of needs in social terms, and the reduction can even be set at 100%. Meals to children with disabilities are subsidised at a 50% discount, regardless of the social status of the children and their families. Further preferences may be granted if the family is in a socially disadvantaged position.

225. Within the framework of the social protection system, support to commodity purchases as well as financial support that is granted on the basis of disability and that can be used freely are aimed at reducing poverty and reimbursing the disability-related extra costs.

226. Transport subsidies to people with serious physical handicap are aimed at rendering partial contribution to the handicap-related extra transport costs. Support to passenger car purchases can be rendered up to 60% of the purchase price, but its highest amount is fixed at HUF 300,000, and at most HUF 30,000 can be granted for converting passenger cars.

227. The health insurer grants subsidy to insured people (through social insurance support) for medical aids belonging to the structure conforming to the EN ISO 9999 standard. All insured people may use the aids whose condition is in conformity with what is described in the indication of the aid in question. The aids are ordered to these patients in the doctor's prescription. The subsidised aids and their ordering conditions as well as the rates of subsidies are specified in a decree. Currently, medical aids are subsidised at 50, 70, 80 and 98%. When purchasing the aids, patients do not have to pay the full price and then claim reimbursement from the insurer but they only need to pay the part remaining above the amount of subsidy. In the case where patients are entitled to public health care and have a certificate, the part payable by the patients is also covered by the state. The legal regulatory background of the Internet catalogue for subsidised medical aids has been completed in order to provide full information to the patients.

228. Higher family allowance is granted to the seriously disabled person's natural parent or adoptive parent, the spouse living with the parent, the foster parent, the professional foster parent, the guardian and the ad hoc guardian. Seriously disabled persons who have reached their 18th year of age are entitled to care on their own right if a higher amount of family allowance was paid after them until their 18th year of age. Disability support may be granted to seriously disabled persons who have reached their 18th year of age.

229. People living with disability may become entitled to social security pensions that are payable under the insurance principle. Disability pension and accident-related disability pension may be applied for prior to reaching the pension age if the legal regulatory conditions are fulfilled.

Data on granted disability and accident-related disability pension as well as rehabilitation annuity

<i>Number of granted provisions (persons)</i>	2006	2007	2008	2009
Disability and accident-related disability pension	39 211	34 386	26 272	23 238
Rehab annuity	-	-	2 246	12 525

<i>Number of granted provisions (persons)</i>	2006	2007	2008	2009
Disability and accident-related disability pension above the pension age limit	351 000	356 000	359 000	363 000
Disability and accident-related disability pension below the pension age limit	453 000	442 000	429 000	402 000
Rehab annuity	-	-	300	7 000

230. Non-reimbursable state subsidy may be used for the extra costs of arranging a technically accessible apartment for persons who are seriously handicapped in physical terms. Subsidy may be granted up to HUF 250,000 for building or purchasing a new, accessible apartment, and at most HUF 150,000 for arranging an existing apartment to be free from obstacles. The subsidy is granted by the credit institution authorised thereto, based on the proposal by the National Federation of Disabled Persons' Associations.

231. The purpose of support to create a home is to help young adults leaving temporary or permanent education to get a flat or to provide for permanent residence. Those young adults who are entitled to support towards creating a home are those whose education ceased to exist upon the coming of age, and the value of their cash, insurance or other assets does not exceed the rate specified in the legal regulations. The support can be used in full or in part for buying, building, renovating, transforming or extending land plots, flats, detached houses or farms, for paying rental fees of rented flats and for paying off in one amount a credit-institutional loan granted to create a home. In justified cases, the support to create a home can also be used for a single contribution to be paid by young disabled adults to a social boarding institution that provides appropriate care. The rate of support to create a home must be established on the basis of the years spent in continuous education and based on the common value of the cash and real estate assets of the eligible person.

Article 29
Participation in political and public life

232. The Constitution provides for active and passive election rights. All Hungarian citizens at an adult age and having residence in the area of the Republic of Hungary have active and passive election rights upon electing parliamentary representatives, at national referenda and upon popular initiatives. All Hungarian citizens at an adult age and having residence in the area of the Republic of Hungary and citizens of other member states of the European Union at an adult age and having residence in the area of the Republic of Hungary can be elected at the elections of local municipal representatives and mayors and they can elect if they stay in the area of the Republic of Hungary on the day of the election or national referendum, however, only Hungarian citizens can be elected mayor and the lord mayor of Budapest. According to the Constitution, those people have no election rights — and, as result shall not take part in referendums or people's initiatives, either — who are under guardianship restricting or excluding acting capacity or who are prohibited from exercising public matters, who are imprisoned or who are under forced institutional

treatment ordered in criminal proceedings (based on a final verdict). In the case of *Alajos Kiss v. Hungary*, Application no 38832/06, the European Commission of Human Rights decided that full and general exclusion from the election rights is against Article 3 of the supplementary protocol to the European Convention of Human Rights in the case of persons with limited acting capacity about whom it is proclaimed without the individual ascertainment of their abilities that they are not entitled to the election rights.

233. Apart from ensuring classical political participation rights, the Constitution also guarantees further participation rights: All Hungarian citizens have the right to hold public office in accordance with their skills, qualifications and professional knowledge, and petition rights are guaranteed. Based on the above-mentioned provision of the Constitution, everybody in the Republic of Hungary has the right to submit a written petition or complaint to the competent state organisation individually, or jointly with others.

234. Based on Act C of 1997 on the election procedure, the elector citizens who cannot read or who are hindered in the election due to their physical handicap or other reasons may ask for the assistance of another elector citizen, or in the lack of this, the joint assistance of two members of the canvassing committee. The law says that votes can be cast exclusively personally, and only at the polling station marked out at the elector citizen's residence. An exception to this rule is provided by the law for voting by citizens with physical handicap. In such cases, the elector citizens must be contacted — upon their request — by at least two members of the canvassing committee with a mobile urn within the competence area of the canvassing committee. Elector citizens may request the mobile urn in writing from the head of the local elector office, or from the canvassing committee on the day of voting. Voting with a mobile urn is to be carried out by the canvassing committee at the residence of the elector citizen. Should citizens living with disability still intend to cast their votes at the polling station, they can make use of assistance for this by other elector citizens or in the lack of this, the joint assistance of two members of the canvassing committee as specified above.

235. Based on the law on the freedom of association, all private persons, thus also persons living with a disability, have the right to establish organisations and communities with other people and to take part in their activities. In the central budget, the state grants specific, annual operational support to six different, national interest-protection associations representing people with various types of disabilities so that they can pursue their interest-protection activities. From the annual subsidies, the national interest-protection associations pass on support to their member organisations – i.e. organisations active in counties and regions and maintaining a membership with the associations. The social organisations of people living with disability can get support from the resources of the central budget through tender applications in order to render their services and to carry out their programmes. Further state support is granted to the maintenance of organisations by the National Basic Civil Programme, which is meant to strengthen the operations of civil organisations as well as to promote the development of the civil sector through tenders. Organisations representing the interests of persons living with disabilities can also get individual support from the central budget in order to carry out professional programmes and developments.

Article 30

Participation in cultural life, recreation, leisure and sport

236. Act LXIV of 2001 on the protection of cultural heritage says that efforts must be taken to ensure equal chances for people living with disabilities when making the cultural heritage accessible. Act CXL of 1997 on museums, public library supplies and public education specifies in general terms that cultural goods are accessible for everybody in

Hungary. The purpose of this act is to provide everybody with the right to use libraries. The requirement of equal treatment is laid down as a basic principle. The ministerial document entitled “Recommendation on improving library supplies to library users living with disabilities” was published in 2009. Public education conferences provide the opportunity for people living with disabilities to report their own problems together with the chances that improve their life quality. Therefore, for example, people with impaired sight made a report at the e-conference on techniques that help access to electronic documents. The cultural government supports people living with disabilities with regard to public education programmes, thus to the “Common Voice” International Festival of the Special Art Workshop, the events of the Nyírség Association of People with Impaired Sight as well as the cultural and art activities of people living with Down’s syndrome. The National Cultural Fund provides regular support — through tenders — to the public educational and art events and programmes of civil organisations dealing with people in a disadvantaged situation (for example, the public educational and art camps of the “For Them, With Them” Association).

237. The requirements towards tourism facilities are identical in the case of children and adults. The tourism tenders (attraction and accommodation development) invited by the Regional Operative Programme prescribe in all cases as an obligatory condition that facilities should be freely accessible. The national tourism database contains information — voluntarily supplied by the service providers — on accessible tourism facilities.

238. Act LXXVI of 1999 on copyrights promotes access by people living with disabilities to cultural contents. By virtue of the act, people living with disabilities can have free access to all copyright contents. Using works of art not for business purposes belongs to the field of free use if it exclusively serves the fulfilment of needs by people living with disabilities — directly related to their disability — and if it does not exceed the level justified by the purpose.

239. The sports act also stipulates provisions on sports pursued by people living with disabilities. The Hungarian Sport Federation for People with Special Needs — set up by virtue of law — and the Hungarian Paralympic Committee run, organise and supervise contests, leisure time activities and student sports for people living with disabilities out of state support.

240. Students with disabilities can access games as well as recreation, sports and holiday facilities in an identical manner as students living with no disabilities within the framework of the regular school educational system. The central budget, the local municipalities and the public foundations serving these purposes generally grant support to the acquisition of special instruments as well as to recreation, sports and holiday facilities for children living with disabilities in the form of tenders, at all times subject to the opportunities.

III. The special situation of women and children living with disabilities

Article 6 Women with disabilities

241. The constitutional provision on the prohibition of disadvantageous discrimination also contains the prohibition of gender-based disadvantageous discrimination. It is proclaimed that the Republic of Hungary also guarantees equal rights for men and women with regard to civil, political, economic, social and cultural rights. Based on the act on equal opportunities, the gender of persons is qualified as a protected attribute.

242. The Governmental Decree No. 1004/2010. (I. 21) on the National Strategy Promoting the Social Equality of Men and Women specifies the goals that are to be reached by 2021, while the tasks covering 2010 and 2011 are stipulated by the Governmental Decree No. 1095/2010. (IV. 21) on the 1st Measurement Plan of the National Strategy Promoting the Social Equality of Men and Women.

Article 7

Children with disabilities

243. Hungary has also ratified the Convention on the Rights of the Child. Thus, children make decisions on major issues concerning their lives — for example, choosing schools — together with their parents after their 14th year of age. A children's self-governmental system is run in special child protection care, and a student self-governmental system is run at public educational institutions. The national interest-representation organisations dealing with disability issues have established sections for young people. The ombudsman of the future generations, the commissioner of education rights and the representative of children's rights take a prominent role in protecting children's rights.

244. The child protection act specifies the basic rights and obligations of children — thus children living with disabilities — and it also covers the rights protection activities of the ombudsman and the children's rights representative together with the manner of interest representation.

245. The protection of children's constitutional rights is promoted by the ombudsman through his/her special tools. His/her task is to examine cases of abuse concerning children's constitutional rights as well as to initiate general or individual measures in order to provide remedy for them. The measures are reported to the General Assembly (Parliament) every year.

246. The children's rights representative provides for protection of the legally stipulated rights of children receiving child protection care as well as helps children to learn and enforce/fulfil their rights and obligations. S/he pays special attention to the protection of children who need special care. S/he helps children to draw up their complaints and may initiate the examination of such complaints. S/he participates in the case discussions of the children's welfare service and in the placement meeting of the regional children's protection service. S/he represents children in procedures related educational supervision based on delegation by the guardian's office.

247. The children's rights representative is entitled to request information and documents and to gather on-spot information in the area of the entity dealing with children's welfare and children's protection services. The children's rights representative is obliged to properly handle children's personal data, under the legal regulations on data protection.

248. The elected members — with voting rights — of the interest representation forum are: representatives of the children's self-government, parents or other legal representatives of children receiving care, representatives of young adults, representatives of the institution's employees and representatives of the entity running the institution. The interest representation forum examines the incoming complaints and decides over issues within its competence, it may initiate further measures with the operator, with the children's rights representatives and with other organisations having competence. The interest representation forum may form an opinion to the head of the institution about issues concerning young adults and may make a proposal for planning and running services carried out in harmony with the institution's basic activities, as well as about the use of the revenues deriving therefrom. The interest representation forum exercises a right of consent when approving the policy.

249. The child, the child's parent or another legal representative, the children's self-government, the young adult as well as the interest rep and professional organisations protecting children's interests may submit complaints — under the prescriptions of the policy — to the head of the institution or to the interest rep forum in order to remedy provision-related problems in the case of infringement to the children's rights and in the case of breach of obligations by the institution's employees. The head of the institution and/or the interest rep forum examine/s the complaint and gives information on other possible manners of remedying the complaint. The child's parent or other legal rep, the children's self-government, the child or the young adult may turn to the operator of the institution or to the rep of children's rights if the institution's head or the interest rep forum fails to send a notice about the results of the examination within 15 days, or does not agree with the measure taken. Children placed in boarding institutions may establish children's self-governments in order to represent their interests. The children's self-government that was elected by more than 50% of the children may proceed in rep of all children of the boarding institution for children. Children's self-governments decide on their own operation by requesting the opinion of the head of the institution. The children's community accepts its own organisational and operational rules, which are approved by the head of the institution. The approval may only be refused if the rules are against the laws or contrary to the organisational and operational rules or policy of the institution. The children's self-government may form an opinion towards the head of the institution about the operation of the children's boarding institution and about all issues concerning the children, and such opinions must be taken into consideration by the head of the institution.

250. Girls and boys living with disabilities are brought up, developed and educated according to gender, in mixed groups. Integration according to gender is basically typical also of social and child protection institutional care in the course of daytime activities. No data are available on other differences with regard to the situation of boys and girls.

251. The Constitution and the child protection act say that children living with disabilities own rights in the same manner as other children. The opportunities of preferences that can be applied in the case of children living with disabilities are presented in connection with other articles.

IV. Special obligations

Article 31

Statistics and data collection

252. Data collection concerning people living with disabilities is extremely diverse. The requirement on having a uniform picture emerged in the period of making the national report. Therefore, the administration dealing with equal chances entrusted the Public Foundation to explore and accurately lay down the data collections that describe various life situations of people living with disabilities as well as to complete the study providing guidelines for uniformisation. A secondary objective is to supply real data that support professional-policy decisions influencing the life quality of people living with disabilities.

253. Based on Act XLVI of 1993 on statistics, obligatory data supply on the personal information of natural persons may only be ordered by law. The Governmental Decree No. 288/2009. (XII. 15) on data collected and taken over by the National Statistical Data Collection Programme (OSAP) entered into force on 1 January 2010. This serves as a basis for most of the targeted and "mainstream" data collections. The OSAP is run by the Central Statistical Office, the OSAP draft is compiled by the Central Statistical Office, and a related opinion is given by the National Statistical Council. This is when the national organisations

of people living with disabilities can also present their standpoints. Among other things, this covers the following: “OSAP 1206 Statement on provisions that can be granted in cash and in kind”, “OSAP 1515. Details on those receiving family allowance”, “OSAP 1915. Statistical report on family support”, “OSAP 1911 Statement on disability support data”. The OSAP also collects statistical data every year on child welfare, child protection, social and higher educational service activities and on transportation benefits for physically handicapped persons. Data are collected in the field of health based on the ESzCsM decree No. 76/2004. (VIII. 19). Statistical data on disability pension are collected by the pension insurance administration bodies. Under the sign language act, the Public Foundation keeps registration about the sign language interpreter services provided free of charge, specifying data on the number of hours used by the person requiring the service as well as indicating whether the service was used in connection with a student scheme or adult training. Registration on accredited employers as well as on those having a protected workshop is kept by the Public Employment Service on the basis of a decree.

254. By virtue of the act on statistics, the results of data collection carried out by organisations belonging to the official statistical service are public – with the exception of qualified data. These organisations provide for the publication of data within their own competence. The organisations of the official statistical service can supply data to the following bodies: bodies of the state and public administration, social organisations, interest representations, local municipalities, public bodies, scientific organisations, economic organisations, the population, telecommunication bodies and international organisations. The information system covers communication from publications and from data stocks stored on other data carriers. Statistical data are most often published in homepages (for example, the Public Education Info System, the Higher Education Info System) and there are also annual informative publications (for example, Social Statistical Almanac).

255. For the last time, data were collected about people with disabilities at the census in 2001. The Central Statistical Office conducted a survey in 2002 and 2008 to examine whether the respondents were hindered by their lasting health damage or disability in finding work. The next overall data collection will take place based on the act on the census in 2011, on the one hand, within the framework of the census (covering the total population), and, on the other hand, through sampling within the framework of a survey targeted with a different, more detailed line of questions. The opportunity for the NDC to participate in working out the above survey is guaranteed by the census act.

Article 32

International cooperation

256. The “Grundtvig” and the “Leonardo Da Vinci” programmes — supporting international cooperation — have been available in Hungary almost from their start in the European Union (1997 and 2001). Meeting the requirements of people living with disabilities is one of the objectives declared in the deed of foundation of the Tempus Public Foundation, which operates as a national office. For the sake of this, the Tempus Public Foundation pays special attention to the specific needs upon considering tenders that support cooperation in special training and adult education as well as upon awarding subsidies. Thus, with regard to the mobility cost item, a higher-than-the-basic-sum subsidy is awarded in justified cases — calculated based on the actual costs — and the travel of several accompanying persons is supported. The requirement of the “Leonardo Da Vinci” mobility project is that the work programme for professional practice / study trips should be elaborated jointly by the domestic and international partners, in keeping with the training needs of the participants.

257. The Székesfehérvár Regional Training centre launched a project under the tender programme supporting cross-border cooperation in special and adult training schemes in order to pass on domestic experience and to adapt methods to institutions of the Kovászna, Hargita and Maros counties in Romania teaching in the Hungarian language. The rehabilitation sub-project was started in 2009, whereby methodology seminars are organised in the topics of occupational and training rehabilitation; video conference is organised to process the Hungarian and Romanian experiences regarding the professional training and re-training of people living with disabilities and changed work abilities, a training rehabilitation forum page will be launched in the homepage of the training centre, and a methodology brochure will be compiled by collecting the content elements involved in the delivery of the experience.

Article 33

National implementation and monitoring

258. Based on the Governmental Decree on the tasks and scope of ministries, the Ministry of National Resources is responsible for the Hungarian coordination of implementing the Convention on the Rights of People with Disabilities. According to the Organisational and Operating Rules of the portfolio, the task is carried out by the General Department of Rehab and Disability Affairs. In the spirit of “mainstream” policy, several portfolios operate organisational units that also cover disability issues, and numerous general departments within the ministries employ a governmental officer who is an expert in disability affairs. From among these, it is worth highlighting the deputy state secretariat at the Ministry of National Resources that especially deals with sports pursued by people with disabilities, or the Rehab Directorate at the National Employment and Social Office, operating as a background institution of the Ministry for National Economy (dealing with the accreditation of organisations intending to employ people with changed work abilities), as well as the General Rehab Department (dealing with the implementation and coordination of various support programmes).

259. The implementation of the Convention is assisted by the NDC; it was delegated through a governmental resolution. The composition and the tasks of the Council were already covered above in connection with Articles 1–4.

260. The implementation of the Convention is, and can be basically safeguarded by the parliamentary commissioner of citizen rights and by the Equal Treatment Authority. The parliamentary commissioner of citizen rights issued an individual publication in 2009 to report on the results of the programme entitled “With Respect – Differently” conducted in the field of disability affairs.

261. No organisation has been appointed to control (monitor) the implementation of the Convention until the completion of the report, despite this it can be said that continuous monitoring is practically under way. A good example for this is the “Civil Caucus”, set up by civil organisations expressly for this purpose, which also prepares the shadow report. The activities of the Public Foundation can also be regarded as monitoring as they cooperate in the implementation of numerous tasks that derive from the Convention and that have been presented above. Upon governmental request, the Public Foundation compiled an indicator list highlighting the implementation of international documentations on disability matters; the purpose was to set up an indicator list to control and assist the implementation of the Convention on the Rights of People with Disabilities, the ten-year action plan of the Council of Europe and the disability action plan of the European Union.

262. The Government was pleased to note that the representatives of Hungarian civil organisations dealing with disability matters also prepared their shadow report after several

months' of expert work. The ministry responsible for disability matters was represented at a high level at the press conference of the civil report, indicating that the authors of the report are looked upon as partners, and in the future great emphasis is planned to be laid on cooperation between the governmental and the civil sides.

263. The following table highlights expenses on disability issues:

<i>Expenses</i>	<i>HUF M</i>	
	2009	2010
State-owned social institutions	2 222.2	2 063.5
Wage support related to employing people with changed work abilities	12 000	12 000
Cost compensation related to employing people with changed work abilities	35 300	30 300
Support to social institutional employment	5 600	3 000
Transportation support to physically handicapped people	1 982,5	1 250
Support to physically handicapped people for acquisition and conversion	1 660,5	1 600
Supporting services, community provisions and assistance through signal systems at home	6 910	7 275.2
Running the National Disability Council	9.1	9
Support to programmes promoting the equal chances of people with disabilities	620.6	500
Disability annuity	12 740	13 076
Annuity to people with changed work abilities	72 650	67 949
Health impairment annuity	2 532	2 454
Disability support	30 108	30 421
Public medical care	21 000	21 000
FSZEK (Metropolitan Ervin Szabó Library)	193.9	190
ÉFOÉSZ – Hungarian Association for Persons with Intellectual Disability	138	70
SINOSZ – National Association of the Deaf and Hard of Hearing	177	70
MEOSZ – National Federation of Disabled Persons' Associations	160.7	105
MVGYOSZ – Hungarian Federation of the Blind and Partially Sighted	207	97.5
AOSZ – Hungarian Autistic Society	30	40
+ tender fund	37.8	300
Support to the operation of the Hungarian Paralympic Committee	16	15.4
Hungarian Sport Federation for People with Special Needs	28.8	27.8
Support to sports pursued by people living disabilities	275	0
Support to the operation of the Hungarian Paralympic Committee and its member organisations	0	57.3
Support to the Hungarian Sport Federation for People with Special Needs and its member organisations	0	172.7
Support to preparations for, and participation in the Winter Paralympic Games		12
Support to the paralympic preparations		20

<i>Expenses</i>	<i>HUF M</i>	
	2009	2010
Support to special educational and ethnic minority school books and to public educational provisions to children and students in need of special education	101	80
Wage supplement for people with changed work abilities	750	650
Job-creating support for rehabilitation purposes	4 000	3 000
Operative Programme of Social Renewal 1.1.	22 477	29 490
Disability and accident-related disability pension	632 100.5	655 821.6
Rehab annuity	7 045.1	14 073
Support to medical aids (to the debit of the health insurance fund, which not only covers support to aids for people living with disabilities)	46 035.6	45 400
Reimbursement of travel costs (of this: HUF 5–600 M related to public education)	4 500	4 200
Total		

<i>Normatives</i>	<i>HUF/person/year</i>	
	2009	2010
Daytime care	HUF 454 110	HUF 405 600
Boarding institution	HUF 787 450	HUF 710 650
Special education	HUF 239 000	HUF 224 000
Early development	HUF 239 000	HUF 230 000
Development preparation	HUF 322 000	HUF 305 000
Extraordinary child protection provisions		HUF 842 750
Special child protection provisions		HUF 842 750
Care providing home		HUF 739 000
Infant school care		HUF 494 100
Supplementary support to students living with disabilities	HUF 120 000	HUF 120 000

264. The local municipality normatives that can be connected to disability issues are specified in Chapter IX of the budget (IX. Supports and assigned personal income tax of local municipalities), while the normatives of churches and civil operators (what is called “human normatives”) can be found in the chapters of the Ministry of Social Affairs and Labour and the Ministry of Education and Culture, but they are not specified in details but they are included in various educational and social normatives (this is why we do not know the exact amounts).

<i>Description</i>	<i>2007</i>		<i>2008</i>		<i>2009</i>	
	<i>No. of users (thousand persons/ month)</i>	<i>Amount of expense (HUF bn)</i>	<i>No. of users (thousand persons/ month)</i>	<i>Amount of expense (HUF bn)</i>	<i>No. of users (thousand persons/ month)</i>	<i>Amount of expense (HUF bn)</i>
Disability support	15.3	7.5	16.6	29.7	18.5	30

<i>Description</i>	<i>2007</i>		<i>2008</i>		<i>2009</i>	
	<i>No. of users (thousand persons/ month)</i>	<i>Amount of expense (HUF bn)</i>	<i>No. of users (thousand persons/ month)</i>	<i>Amount of expense (HUF bn)</i>	<i>No. of users (thousand persons/ month)</i>	<i>Amount of expense (HUF bn)</i>
Traffic benefits for people with serious physical handicap	107.7	2.4	182.6	3.5	143.8	2.3
Higher amount of Family allowance	34.0	3.6	131.2	38.6	148.7	42.5

<i>Annual expense: (in HUF bn)</i>	<i>2006</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>
Disability and accident-related disability pension above the pension age limit	252.2	276.6	304.9	317.8
Disability and accident-related disability pension below the pension age limit	295.5	309.3	325.8	314.2
Rehab annuity			0.6	7

Rehab contribution

265. Rehab contribution is paid by employers who employ more than 20 persons, provided that they do not employ at least 5% persons with disabilities (this is labelled revenue, and it can only be used for rehabilitation purposes).

266. The purpose of rehabilitation contribution is that the contribution collected from employers not employing persons with disabilities should be used for supporting employers who employ persons with disabilities.

267. This contribution increased by 500% from 2010, its amount is HUF 964,500/not employed disabled person/year (in 2009 it was HUF 177,600). The Government expects revenues of more than HUF 62 bn instead of 16 bn (in 2009), thus the revenues will slowly near the expenses on similar purposes, therefore rehabilitation-related expenses will not have to be planned to the debit of other chapters of the budget.

268. Although the rehabilitation contribution is not a resource for the following items from a legal and budgetary viewpoint, it can be set against these in terms of professional-policy:

- Job-creating subsidies for rehabilitation purposes financed from the Labour Market Fund – Rehab Section
- Operative Programme of Social Renewal 1.1. full fund (advancing domestic and EU parts, which means that the EU part will flow back in years)
- Wage support related to employing people with changed work abilities
- Cost compensation related to employing people with changed work abilities
- And support to social institutional employment

<i>Revenues</i>	<i>2009</i>	<i>2010</i>
Rehab contribution	16 080.0	62 393.0

<i>Expenses</i>	<i>2009</i>	<i>2010</i>
Labour Market Fund – Rehab Section	4 000	3 000
Operative Programme of Social Renewal 1.1.	22 477.0	29 490.0
Wage support related to employing people with changed work abilities	12 000	12 000
Cost compensation related to employing people with changed work abilities	35 300	30 300
Support to social institutional employment	5 600	3 000
Total	79 377	77 790
