

COUNTRY REPORT – HUNGARY 2010

In Hungary the situation of giving birth outside a medical institution has to some extent remained unchanged, in some ways it has become worse.

The process we have been working on for years to achieve legal regulation seems to have stalled again.

Last year we reported on our dialogue with various civil rights organisations (Parents for Free Birth Union, the Hungarian Civil Liberties Union, the Association of Independent Midwives etc.) and with the representatives of professions involved in the birth process (obstetricians, health visitors, paediatricians, breastfeeding counsellors).

As a result of an enormous amount of effort invested, a draft regulation on homebirth was finally born in the autumn. The Ministry has requested input only from the Professional College of Obstetrics and Gynaecology for the production of the draft, leaving out, amongst others, the independent midwives who, from the groups having taken part in the preliminary negotiations, represented the only one with decades of experience in home birth.

The draft contains a number of unacceptable elements.

Fortunately a proposal based on the draft has not yet been put forward. It is expected that due to the change in government in May 2010 the question of regulating homebirth will not be in focus for a while yet.

Meanwhile we still have to face difficulties due to the lack of regulation.

Recently we gave account of our legal position - currently five of our midwives are on trial in connection with four births - and last time a specific case has been mentioned.

To provide a brief summary, families opting for birth outside medical institutions often suffer negative discrimination, while the activity of professional assistance is followed by legal steps on numerous occasions.

Some examples:

- women who give birth outside medical institutions have difficulty in obtaining and have to pay for the same anti-D injection that those giving birth in hospitals receive free and in some hospitals Rh negative mothers are given automatically
- at times women face difficulties in registering births
- in numerous districts the health visitors are obliged to report to the National Public Health Service if they receive information about a home birth
- in a number of cases the National Public Health Service calls in the mother in puerperium and attempt to find out who was present at the birth. If they are successful, legal proceedings follow.
- a number of paediatricians refuse to examine newborns born at home fearing the backlash from their professional authorities.
- if a homebirth for any reason continues in hospital and the fact of the planned homebirth comes to light, it frequently occurs that the mothers giving birth are given lectures and/or experience hostile treatment
- if a mother or a newborn, for whom we call a special ambulance, needs hospitalisation after the birth, the parents are often rebuked by the paramedics for having chosen such a dangerous way of giving birth
- paramedics have been known to have called the police on a number of occasions when the person not in

need of medical assistance refused to go to hospital

- homebirths officially continuing in hospital are always reported (by the ambulance service or the hospital) and investigated by the police, the midwives being the suspects. The investigative process at times carries on in court.

- the cost of homebirths is covered exclusively from donations as at present there is no official support available for home birth assistance even though the families opting for homebirth pay national insurance contributions just like the majority that opts for hospital births.

In 2009 we asked a Patients' Rights representative to help those families that encounter problems.

Following the shoulder dystocia tragedy in 2007 and the following media persecution, the number of births outside medical institutions has fallen, but in the past year there has been an increase according to statistics.

For reasons listed above we do not publish homebirth statistics officially as this would mean reporting ourselves to the police as many times as we admit to assisting at a homebirth.

On 7th April 2010, the Day of Homebirth, Marsden Wagner's Born in the USA was published in Hungarian by our foundation. We hope that the book will inspire change in professional circles.

As customary, this year we also held the annual reunion of children born at home, for the ninth time.

In the curriculum of tertiary educational institutions for midwives, assisting births outside medical institutions appears as a subject from next year. We do not yet know who the lecturer will be.

Our basic programmes, the one-week-long monthly preparatory course for birth, preparing together with expectant couples, ante- and post-natal consultations and the monthly professional case review groups have been running without problems.

The Daylight Birth Centre regularly offers other courses and runs groups on subjects related to the period of expectancy and birth. These include groups dealing with Caesarian births, bereavement and birth counselling, pelvic floor exercises, rebirthing, using baby carriers, breastfeeding issues.

Recently a few members of the working collective made up of midwives and doulas have received communication training to better cope with the hostile stream of news in the electronic and printed media.

Our work is being supported by a number of civil rights organisations, journalists and lawyers.

The strength of the home birth community can often be felt which means a lot to us emotionally.

In spite of all this we often experience that undisturbed birth and assistance of undisturbed birth is violated by the unfortunate situation in Hungary.