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**Changes and effects of childbearing behaviour in modern  
Hungary, with special emphasis on the extreme endpoints of the  
female reproductive age**

**Thesis of Ph.D. dissertation**

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## **1. Raising a problem, objective, hypotheses, methods**

### **1.1. Determining the problem**

By the end of October 2011 the population of the world reached the psychological boundary of 7 billion. According to expert institutions the next turn of billions is expected to happen in 2025. As per the UN the population will grow to more than 9 billion by 2050. Strange as it may seem with regard to the news of the booming population, a maximum peak of 9 billion is forecast due to the drop of the pace of population growth per year in the last 25 years. The UN also expects the population to grow by a billion in the next 14 years, which is relevant because it will be the first time to happen slower by such amount than in the previous years. The next growth by a billion is forecast in 18 years' time, which indicates further deceleration, before reaching 2050. The slowing population growth is important because it is the contrary of what has been expected before. According to some experts this drop will cause a drastic decrease of population after 2050 and the number of inhabitants of the world will be only 6 billion by 2100. This fact would not be a problem if it had not been for the decrease of childbirth, which will lead to rapidly aging societies.

There are distinctive demographic changes in process in all corners of the earth, however, their time and pace is different. These processes can be separated into distinctive phases.

Generally we can mention the phase before the demographic transition, the first demographic transition, the second demographic transition and phases among demographic transitions, all of which have their own characteristics. In the phase before the demographic transition birth and mortality rate was high, and life expectancy was low. The number of population was also relatively small. In the first demographic transition living conditions became better, and health service became more wide-spread, leading to the stagnating high birth rate, decreasing death rate and higher life expectancy and a drastic population boom. In the second demographic transition the rate of birth started adjusting to the rate of mortality, while life expectancy was still increasing. Population is still growing, although its pace has decreased. Women do not need to give birth to so many children any more because due to the better circumstances more survived. After the demographic transitions the low birth and

mortality rate and high life expectancy have set in, leading to population decrease. A long life span cannot compensate for the small number of childbirth.

The developed countries are past those phases of the process which are to be experienced by certain regions. They have an uncongenial task as they have to provide those solutions for the population problems which may be copied by regions experiencing those problems later. In this respect Hungary is part of the developed regions, where the effects of the demographic transitions are experienced. The drastic demographic drop is a fundamental problem in every developed society. Without a change in today's tendencies the supply systems will break down, which may make social services crash as well. Without the sufficient number of taxpayers the provision for public health and pensions is going to be unsustainable. To maintain these, the reproduction of population is essential, therefore everything must be subordinated to it. A society where an insufficient number of children are born has no future.

## 1.2.Objectives

- The objectives of my thesis are to present how habits regarding childbearing have changed in Hungary since the beginning of the 20<sup>th</sup> century until today, which social processes are linked closely to the topic, how their index numbers changed, how they influenced the topic in question, and to observe the reasons and causes of these changes, to try to find solutions for them and to outline the options.
- To present the way Hungarian society has changed by the beginning of the 21<sup>st</sup> century analysing the most important scopes regarding childbearing.
- To place the problem on a world-scale geographically and in time, as it is not specifically Hungarian.
- To prove that considering the question of family, childbearing and marriage, Hungary belongs to the conservative countries.
- To present that our chance in every respect is in the young: they have to be taught how to grasp their opportunities, be offered alternatives, helped with making decisions, but we cannot make decisions in their behalf. We have to prepare them for life, outline their chances, stressing the consequences of their decisions. We live in a world where



our values are changing and in this insecure world young people are lost without guidance. Unfortunately they do not get it in their families any more.

- To focus attention on prevention and awareness, which are more and more important in a lot of areas because of the world's development. Awareness must be a part of everyday life.

### 1.3. Hypotheses

1. **hypothesis:** We live in a world where we can witness the complete readjustment of social relationships. The primary scene of the childbearing is the family, which in classical terms is created by marriage, and ends by the death of the husband or the wife, or by divorce. However, living together, which is freer than marriage, is becoming more and more wide-spread nowadays. The question is if it is possible to live a full and secure life and to raise children in a loose bond less restricted by law. **How much can the partners accomplish themselves and how much can life partnership be the means to bring up children and live a family life?**
2. **hypothesis:** in my opinion considering the changes of the number of children one of the most important point of views is the change of women's social role. Women bear an incredibly huge burden. The time when their task was only to bring up children and run the household has long been over, although women themselves started fighting from the end of the 18<sup>th</sup> century for greater respect, jobs, the right to vote, participation in education, and being equally treated as men. However, the requirements they have to meet are unreasonable, to say the least. Can women take the responsibility of motherhood in such circumstances? **What kinds of opportunities are offered by society to make women's situation easier?**
3. **hypothesis:** considering childbearing we can say that being religious usually means having more children. According to surveys, religiousness has changed structurally in the past few decades unrelated to religions or Churches. In connection with the topic the question can be raised if there is a difference between childbearing habits of religious and irreligious families. **Can re-advocating religious values be a solution of increasing childbirth?**

4. **hypothesis:** young people are in the most difficult situation. Older generations' future is dependent on them, while due to the changes in social values they are not prepared enough to face challenges. **Is today's adult population able to set an example to the young and teach them and help them make decisions?**
5. **hypothesis:** the question of abortion is a rather complex one, as it has medical, legal, health, religious, moral, not to mention political respects. In a demographic point of view abortion is a means of birth control, playing an important part in fertility and reproduction. Is abortion playing the same birth controlling, contraceptive role as it used to do?
6. **hypothesis:** Infant mortality is not only some data, but also is an index number of countries' development. It used to be the most important and most delicate indicator of the sanitary situation through decades. It had a great influence on birth rate and through it the reproduction coefficient of a country. Its role has decreased by now, however, its historic development is indispensable as far as the topic is concerned. **What kind of effect has today's infant mortality trend on childbearing?**
7. **hypothesis:** as its name shows, population policy is part of politics, and it has developed accordingly. As for its meaning, population policy is the effort of the society, the state or any bigger human community to influence the demographic processes and structures corresponding to social, national or communal requests. **Were the current population policies suitable for reaching these objectives?**
8. **hypothesis:** What kind of reserves does Hungarian society have? Which values can be used to escape the present social crisis?



### 1.3. Method

As for the method of my dissertation I tried to acquire a deep knowledge of the special literature, and I used the official data published by the Central Statistical Office. To obtain a thorough knowledge I got information by means of questionnaires based on personal experience, and I used the results in my thesis. To deal with the topic in the most circumspect way I inquired about the legal background as well. I plan to examine every area which I find important regarding childbearing. Based on these, after a short historical outline (Chapter 5) I wish to deal with:

- the revaluation of love relationships and its influence on childbearing (Chapter 6)
- the changes of women's position in society, revaluation of female roles and its effects on childbearing (Chapter 7)
- the role of religion in modern society and its influence on childbearing (Chapter 8)
- the opportunities of young people in present Hungarian society and their chances in love relationships, founding a family or in avoiding these (Chapter 9)
- the opinion about abortion in certain periods, its role today and its effect on childbearing (Chapter 10)
- the repression of infant mortality and its influence on childbearing (Chapter 11)
- the influence of welfare measures on childbearing (Chapter 12)

I continued by a summary including international outlook (Chapter 13). It is followed by my own examination, reinforcing my findings (Chapter 14), and my conceptions and plans (Chapter 15).

## 2. Findings

1. **thesis:** The number of marriages both indirectly and directly influences the number of children born. Hungary used to be one of the countries where a lot of marriages are contracted, however, this trend has changed in the past few decades. I find it important to emphasise that despite this trend Hungary is still a fundamentally conservative country, where marriage is one of people's explicit plans, may they be men or women. In some cases, however, their circumstances make it impossible to fulfil their ambitions. Besides this life partnership is gaining ground to the detriment of marriage,

as it is proven that young people today tend to choose this freer way of living together even when they have sincere intentions and want to found a family with their partners.

Young people nowadays start love relationships considerably earlier than the youth 20-30 years ago. Their conflict management techniques are restrained to breaking up, and by the time they decide to get married, they have learnt nothing but how to split up. This is their only way of solving problems within marriage as well, if they decide to get married at all – the majority of young people do not dare to engage themselves. Another problem is that due to the religious persecution of the Communist regime the church wedding suffered a loss of credit, and no higher maintaining force is provided in its stead to make couples solve their problems instead of simply declaring the relationship does not work. Those countries are successful where love relationships, either marriages or life companionships, are functioning well. It's an eternal truth that if something is forced, it will not work. Nowadays the freer life companionship, co-habitation is more accepted, as the young cannot imagine being perfected in marriage as well. According to experts what fails to succeed, should not be forced, but can be taught. The recipe of good marriage should be taught to young people, because its beneficial effect on one's health is proven. A man living in a good marriage is five times more protected against stress and health problems, whereas lonely men have the highest mortality rate. Marriage is good for women's health, too. A woman who can bloom as a wife, not to mention being successful in her job, will be immune from external attacks.

As the tendency shows that young people do not need to be persuaded to get married, but to create quality matrimony, which is a relationship of equal partners and is based on mutual love and respect. They have to be able to make compromises and be humble towards each other. It is a thought-provoking fact that childbearing is growing in countries where people starting a family in a life companionship get nearly the same benefits as their married counterparts. It is not a regularity either that life partnerships come to an end more easily, because getting divorced has become easier as well, so ending a relationship is not a question of legal documents any more. Of course the aim is to reinstate the old respect of marriage, however, not at all costs. Nonetheless, young people need to be educated as due to the peculiarities of modern age they do not know what a real family looks like. A lot of them are brought up in one-parent families, but even if the parents are together, it is not certain that they can set a good example. What starts at the younger generations spreads into older ones



sooner or later. It is observed that more and more young people under the age of 30 choose cohabitation as a kind of mock-marriage, maintaining the chance to quit it without a legal procedure in case of failure, mainly if there is no common child. It is often heard of that a couple have been together for 3-4, or even 6-8 years, enjoying themselves. They do not want children, are totally satisfied with their lifestyle and they do not know what the future brings. This is the typical single lifestyle, where they find happiness in their careers, achievements in their jobs, find it important to have quality free time, enjoy each other's company. In most cases they have their own flats, they are not dependent on each other or their parents, whom they rarely meet even if they live in the neighbourhood. In this way family relationships become loose, and because they start a family later, if ever, their children will not know their grandparents because of the huge age difference. There will not be an example for the next generation of how to care for the elderly, their parents. Unfortunately we seem to expect this kind of future prospect. Even if young people decide to get married, they do it much later, therefore they have less chance to have children.

2. **thesis:** In parallel with the institution of marriage falling into the background, women's roles are changing as well. Women have attained their independence and they take part in work as equals, however, within the family they have to meet the traditional requirements. Interestingly, the role of husbands has not changed. He is still the breadwinner, who needs his job satisfaction and successes to feel relaxed and satisfied. The balance is upset once the husband is out of this role due to an illness, a job or any other reason. Contrary to this, a woman is accomplishing several tasks. She works like a man, but her main pleasure is to be a mother at the same time. She can be fulfilled in her job if she is supported by a happy, balanced family, which is kept together by her care. The change of women's position in society basically derives from their participation in higher education. According to the latest studies today there are more female university graduates than males, and if this tendency remains, their rate will have reached 70% by 2020. Studying takes time from motherhood, however, so educated women postpone having children, and if they want to have a career as well, childbearing is put off even further. This typical delay in childbirth in developed societies has the consequence of trying to give birth at an age when fertility is considerably less. Therefore the number of children born is smaller than planned and

despite their original plans, a growing number of childless women and women with only one child is expected. Having children at a later age is a rather complex phenomenon. The postponement has mainly social reasons: the employment of women, changes in education, transformation of social values. Although it is partly planned, it is mainly due to the constant delaying because of the permanent changes of circumstances. While the reasons are mainly social, the consequences are sanitary and demographic, as the majority of these postponed childbearing plans fail to succeed, chiefly because of biological reasons. As a consequence the rate of those women who remain childless contrary to their previous plans is expected to grow.

Governments which are willing to take this fact into consideration conduct adequate demography policy. Nowadays there are more university graduate women than men in Hungary. The acknowledgement of women being admitted to higher education was a consequence of a thousand-year process. However, women are frequently discriminated against in our days, too. A woman gets less payment for the same amount of work than a man, and still there are areas where women's presence is not acknowledged. It would have a positive effect on childbearing if these could be changed. The government should conduct a policy in favour of women. Flexible working hours are rarely heard of, and the problem of looking after children is not solved, which is a pivot point of childbearing nowadays. The greatest battle in our days is not the university entrance exam, but finding a place at the nursery school for one's children. At present there is no suitable background infrastructure in Hungary for the appropriate employment of women. The so-called company-owned nurseries and kindergartens closed down, and there is no alternative instead of them. There is a great need for family-friendly, children-friendly workplaces. The theory that children only need their mothers until the age of 3 has long been ruled out, however, a mother who wants to take her half-year-old child to nursery is still almost looked down on. The well-conditioned attitudes of society are still alive and as people have difficulty in accepting changes in this matter.

3. **thesis:** It is interesting to observe childbearing from a religious perspective. It is a fact that families who consider themselves religious have more children than others. Examining the principles of the Church about the question we can say that it maintains its views without changing them, and those who are committed to the Church try to



live according to these principles about marriage, childbearing, divorce and the refusal of abortion. Keeping these principles results in the different statistics in these families.

They live in a traditional way, the majority of them are large families, where more generations may live together. Typically the mother is a housewife who takes care of the children at home.

I tried to find out if religious families really have more children, whether a marriage blessed by the Church has more maintaining force, how the Church can interpret its doctrines in the 21st century to be acceptable for crowds of people and how much more it means to be bought up in Christian spirituality. It can be stated that these families are less influenced by modern trends: they have more children, a classical family model, an extended family, where grandparents have a role as well, and the breadwinner is the father, while the mother is a housewife. As a consequence of bringing up more children, the mother does not have a good chance to be employed. These mothers start giving birth at the classically ideal age of 20-25, so contraception, abortion, childbirth at an older age are not relevant.

The Church persists in maintaining its principles, which are often thought to be old-fashioned, such as forbidding abortion, artificial contraceptives and sexuality for its own sake, and condemning artificial insemination. These seem to have the same aim: the protection of the conceived life.

4. **thesis:** In our country young people are in the most difficult situation. Social changes have lead to a lot of external stimuli which the young are exposed to. Besides puberty and sexual maturity, discos, drugs, alcohol and smoking play an important role in the lives of most of them. Girls become sexually mature earlier than boys, but they want to start sexual life later. They start their sexual life earlier and earlier, and as a consequence, they give birth at a later age, if ever. There may be 10-15 years between the first sexual intercourse and childbirth, which results in the necessity of contraception, not to mention the shorter time of productivity and the dangers and difficulties of childbearing at an older age.

Families would have a significant role at this age, helping young people through this difficult phase full of stimuli, however, this educational, supporting attitude is experienced in very few families only. The amount of information flooding our children is untraceable for adults. Young people are not able to fight it and may get false information, but they choose to believe it instead of believing their parents. A



characteristic of this particularly sensitive period is that adolescents' mental development falls behind their physical one, so they cannot realise what happens to them, only want to enjoy themselves. The majority of them is promiscuous and changes partners frequently, which needs to be paid regard to when the right contraceptive methods are considered. For the reasons mentioned above their knowledge about contraception is extremely insufficient. Their information mainly derives from their peers, magazines, and the Internet, and after the first sexual intercourse a relatively small amount of them visits a gynaecologist to discuss suitable ways of contraception with an expert. The first intercourse generally happens by chance, without thinking about the possibility of conception. At the start of their sexual life young people often do not use any birth control. Unintended pregnancies are the riskiest at a young age, whether they result in abortion or giving birth. Starting sexual life earlier is a general tendency, and acceleration is not the only one to blame. The majority of the youngest concerned are underprivileged. Experts say that the problem is that sexual life starts earlier and earlier, therefore the contraceptive period is lengthened. What is more, planning to have children is postponed to the 30s, not rarely the 40s of women, which results in the extreme enlargement of the contraception period. It is a great challenge and a problem to be solved to help youngsters find the right path and this thesis aims at emphasising its importance.

5. **thesis:** Infant mortality is not only some data, but also is an index number of countries' development. It used to be the most important and most delicate indicator of the sanitary situation through decades. When the change of family planning is observed, it can be stated that it was drastically influenced by the changes of infant mortality. It is a real success story that within a century the rate of infant mortality has dropped from 30% to 5%, and it is mainly due to premature delivery. A UN research found that slightly more than 10 out of 100 children are born prematurely, which means 15 million premature deliveries a year throughout the world. Unfortunately 1.1 million of them do not survive due to being born before term. In developed countries these increased data is in connection with phenomena such as artificial insemination and the preceding sterility treatments. These are the most common causes of premature delivery apart from the spread of late motherhood, smoking, illnesses in connection with higher living standards, obesity and high blood pressure and diabetes. In welfare societies such as Sweden this phenomenon is unknown. The very rare cases



are due to health reasons. There is a lot of work to do in these fields, particularly because our lifestyle and behaviour patterns challenge our organism and body and medicine as well, which tries to adjust to changes. We have to find a healthy boundary which is ethically and morally acceptable and may set an example to future generations.

6. **thesis:** The question of abortion is very interesting when this topic is concerned. It has a long and various history from a complete ban to legal abortion. It existed even in the ancient world, however, it became large-scale after World War II. It is a major factor in influencing the birth rate. There are opposing views regarding it all over the world. In certain countries abortion is totally forbidden, while others do not restrict it in any way. There are countries categorised between the previously mentioned ones, such as Hungary, which allow abortion on certain conditions. All points of view have their pros and cons, however, the long-term process of reproduction couldn't have been much influenced by and of them (e.g. Ratkó-era). It is a positive tendency that due to the spread of contraception the number of abortions is decreasing, though it is still skyrocketing among the youth. Every second birth ends in abortion in case of girls aged 15-19.

Based on the positive statistics of the previous years may prove that some kind of sexual culture is beginning to spread, however, it is no reason for being too optimistic. We have to fight for the minimization of abortion, which brings the importance of prevention into the limelight. Enlightenment, the teaching of facts to young people is vital.

7. **thesis:** Current social policy should form its principles based on all the point of views drafted above, and above all, should encourage women to give birth. We can state that because of today's serious demographic crisis state intervention has never been more needed. To ensure the birth of more children an indirect support system needs to be implemented, because our sustainable future, the pension system and health insurance system are at stake. A characteristic of modern life is that there is a constant social, economic and cultural change, which not only individuals and families, but also the decision-makers of social policy have to adjust to. An ideal political framework seems to be forming, which may find solutions to problems deriving from the changed economic circumstances. However, it is

important to state that these reforms should fit into a historically formed institutional and social environment. All these can have a dramatic effect on the direction of a nation's development.

Besides direct financial benefits it is very important for governments to help women with decisions concerning childbearing, going back to work and childcare. This is the most important part of family policy. Hungarian women with infants have shown only a small economic activity on an international scale. Welfare policies are in continuous transformation, which is proven by the fact that those countries where the current governments have succeeded in using modern intervention to create such a social environment where it is not incompatible for women to work and have more children could turn the proportion of employment and the index number of childbearing from inverse to direct. In practice it means that women dare to give birth because a professional childcare system is provided for the working mothers. The decreasing number of children and bad demographic index numbers can be the root of serious economic problems in the near future. Women will have a dual role in their avoidance: they are needed in both childbearing and employment. Although we still cannot talk about sexual emancipation, women are becoming as active in employment as men, therefore the question of planning a family cannot be separated from working. A suitable family policy is needed to ensure this dual role of women in society: to make sure that childbearing is not financially disadvantageous for a family and to avoid discrimination at work for the mother.

On a larger scale today family policy reaches out to everything which affects the welfare of families. Based on this new approach family policy is a collection of measures which may affect people's inclination to start a family, such as direct financial stimuli: regular or irregular financial allowances, tax reductions, home subsidies. Family-friendly initiatives in employment policy, for example maternity and parental leave, childcare institutions and services, flexible working hours, sexual emancipation in employment, training courses are also very useful, not to mention a wide-scale social acceptance of children and childbearing, such as the support of marriage and love relationships, sexual emancipation and children-friendly environment.



8. **thesis:** A survey found that the number of planned children in Hungary is 2-2.2, while the number of children born is 1.3, which is considered to be rather low in European context as well.

On average there is one child less in every family than planned. This is the reserve which can be calculated with. Researchers say that among the social, economic, welfare factors it is mainly for health reasons that previously planned children are not born. I am deeply convinced that setting these factors right these children could get a chance to be born.

The root of the problems is in a lot of cases is the behaviour of adolescents and young adults. The health of these age groups is the most neglected part of healthcare policy as the rate of traceable illnesses is very low. Those self-destructive behavioural forms, however, which may deteriorate later health and affect childbearing are formed in adolescence. These are smoking, alcohol abuse, drug abuse, lifestyle which lacks exercise and bad eating habits, which on the long run cause conception and insemination problems.

There should be a compulsory check-up system similar to compulsory lung cancer screening, which could work effectively if avoidance was sanctioned. The root of the problem is that malformations that could be avoided if they were identified and treated in time are diagnosed too late. This way the National Health Service could save a lot as well. The most typical generational malformation is Polycystic Ovarian Syndrome, which is the most common cause of female infertility. Approximately half a million women are affected in Hungary.

Men, especially young men should be put under scrutiny. In the 21<sup>st</sup> century we must face the fact that there are serious problems with men. Their life expectancy is approximately 10 years shorter than women's. They tend to commit more suicides, have more heart attacks, suffer from alcohol abuse, or be participants of serious accidents. They have lost their traditional role in the family as well. Physical jobs are more and more pushed into the background, positions needing women's abilities are becoming popular. There are more female university graduates, and this rate will have grown to 70% by 2020 according to estimations.

There is a peculiar duality in Hungarian society because although women have been freed from financial dependence men are still requested to be the breadwinners. A lot of men are suffering from status syndrome, which means he is expected to achieve more than is able to. It can lead to deformations of self-esteem causing

permanent chronic stress, which can result in illnesses. In a lot of cases it ends up in a crisis spiral made worse by losing their workplaces, families, homes. Their prospects are not good sexually, either. On the one hand stress may cause impotency. On the other hand women tend to be more and more initiative on this field as well, taking the last, but most sensitive sphere from men where they could succeed. Men are losing their remaining self-esteem as well. Today a lot of failures of love relationships are due to these problems. To make matters worse traditionally they are expected to suppress their negative emotions and should not cry. Today it is known how harmful it is, considering how difficult it is for men to handle difficult situations. Less and less of males aged 30-35 live in a steady relationship and have their own homes instead of living with their parents.

Traditional large families, which were multi-generational, patriarchal communities, used to be wide-spread in previous centuries. We can differentiate between multi-generational and large families. Multi-generational families are the ones where parents, their children and their families live together, while today we call large family a family raising more than two children. Growing up in such a family helps the children's socialisation a great deal, which later can be used to their advantage. There are more possibilities to learn about tolerance, co-operation, compromise, reinforcement, support, family traditions and roles. The crisis of family means that its institution is changing. Among the transformed circumstances the family members need help to find their new place. Family should be the first scene to find answers to today's challenges, but it is impossible. Therefore parents need organised help to treat problems connected to the young. Without the support of schools and organised education they are unable to face the educational challenges of modern era. There is a tremendous number of studies about the health preventing role of family. If we do not talk about it to young people, how can they be expected to know why we prefer marriage, which they find old-fashioned, to the more fashionable life-companionship and single lifestyle. They have to be given the possibility of positive choices, which can only be done by giving them information about the predictable consequences of their actions. We have a great chance to do it by school subjects like religious education or ethics, which was made compulsory from the 2013-/2014 academic year. With careful co-operation they could contain thematic explanatory lessons in their curriculums.



## 9. Continuing work, plans for the future

To realise my aims I have contacted the Hungarian agency of MFM Project, with whom the co-operation is in formation. I am planning to co-operate with PCOS Szívügy Foundation, Three Princes Three Princesses Movement, Population Round Table, and Klebelsberg Centre of Institution Maintenance.

My ambition is to create a curriculum which teaches suitable behaviour and etiquette to different age groups in an understandable way. The role of education in bringing up children is more enhanced with the regression of families. Responsible adults can only be brought up by proper enlightenment. There are numerous attempts to inform young people properly in Hungary. I plan to comprise an educational programme using these initiatives, which should contain the following:

1. Basic demographic knowledge including
  - a. The demographic changes in the world, geographic patterns, age, ethnic and religious status, breakdown by sex
  - b. The concept of family, its role, content
  - c. Demographical processes: marriage, divorce, life partnership, birth, death, migration
  - d. Reproduction
2. Questions of healthy lifestyle, including
  - a. Healthy diet and lifestyle, doing sports
  - b. Prevention of illnesses
  - c. The importance of prevention
  - d. Making them aware of their tendencies to illnesses and finding solutions to avoid them
  - e. Illnesses of generations, tendencies to illnesses, general information about PCOS, filling in a PCOS test
3. The role of families in healthcare. Men and women. Women in the family. Role changes.
4. Sex education
  - a. Male and female sexual characteristics. Menses
  - b. Sexual revolution
  - c. The art of making love. Sexual aberrations. Sexual problems.
  - d. Inception. Sexual life. Pregnancy

- e. Contraception
  - its history, means, methods
  - female contraception
  - male contraception
  - special contraception techniques for adolescents
- f. Sexually transmitted diseases
- g. Abortion
  - its history, index numbers
  - legal relations and its protocol
  - procedure and ways
  - ethical questions
- h. Adoption as an alternative
  - open adoption
  - secret adoption

## 5. My publications and lectures about the topic of the dissertation

### Articles

#### 2011:

- *Means of demographic policy and their effect on childbearing*, Jogelméleti Szemle 2011/4.

#### 2012:

- *The relationship of marriages, divorces and life partnership with childbearing* Jogelméleti Szemle 2012/2.
- *Relations (összefüggés) of religiousness to childbearing* Jogelméleti Szemle 2012/3

#### 2013:

- *Infant mortality*, Jogelméleti Szemle 2013/1. szám
- *The changed possibilities of young people in the fields of párkapcsolatok, contraception, abortion, giving birth to children at a young age, adoption.* Jogelméleti Szemle 2013/4.



**2014:**

- *The change in women's social ó megítélésének* (under production)
- *Abortion in a different way* (under production)

**Lectures**

- "*The change in childbearing habits, examining the adopted habits of young people*"  
lecture at a workshop conference called "Methodological Challenges in Examination  
of Social and Economical Processes". 4 February 2014, Szeged