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Except where the text indicates the contrary, the law is as it stood on: 3 May 2022

For Parts I-IV, except where the text indicates the contrary, the law is as it stood on: 3 May 2022

For Parts V–VI, except where the text indicates the contrary, the law is as it stood on: 22 February 2023

The Covid-19 pandemic has hit Hungary five times so far, with nearly 1,880,000 confirmed cases resulting in more than 46,000 deaths.¹ The first two registered cases were announced on 4 March 2020,² and the first Covid-19-related death on 15 March 2020.³ During the first wave, from March to June 2020, two different periods can be identified. Between March and April, the number of active cases increased constantly, reached its peak in early May 2020, before declining steadily. This first wave, and the Government response to it, ended in mid-June 2020. By the second half of July, cases had again begun to increase steadily, then increasing more rapidly from August. This second wave saw greater infections but a lower mortality rate as more younger people became infected. Although the second wave lessened after three months, by the end of December 2020 the number of active cases was still higher than in the summer of 2020. In mid-February 2021, due to the arrival of the Alpha variant, the number of cases began to rise again. During the third wave, more people required hospital care than in previous waves. In August 2021, the Delta variant began to spread in Hungary, marking the beginning of the fourth wave. The number of people infected increased significantly and there was a period when more people died of Covid-19 in Hungary than anywhere else in the world.⁴ The fourth wave has claimed the lives of 10,000 people. The fifth wave, characterized by the Omicron variant, lasted from January 2022 to the end of February 2022.⁵

In preparation for the pandemic, the Government established an Operational Corps in January 2020. After the World Health Organization (WHO) declared the Covid-19 outbreak a pandemic, and the outbreak of the epidemic in Hungary, on 11 March 2020, on the basis of the Fundamental Law of Hungary,⁶ the Government declared a national state of danger. With this declaration, a special legal order came into force across Hungary. General rules of State operation were suspended, and the Government was given the authority to issue special, emergency decrees and introduce extraordinary and extensive measures, including restricting the daily lives of people. Although these measures were relaxed as the first wave subsided, they were reintroduced for the successive waves. Since November 2020, a state of danger has been declared in Hungary.

I. Constitutional Framework

1. Hungary is a parliamentary democracy operating in the form of a republic. Hungary is a unitary State, and parliamentary elections take place every four years under a mixed (majority- and proportionality-based) electoral system.⁷ The State structure is centralized, but municipalities have territorial autonomy with regards to questions of local public interest, although it is diminishing.

2. Since 2010 major changes have taken place in the Hungarian legal system, the Constitution as well as all major legal codes have been replaced. These amendments

created a new constitutional identity for the State, 8 often labelled 'illiberal' or 'non-liberal democracy'. 9

3. Government is responsible to Parliament, its mandate can be withdrawn by a constructive vote of no-confidence, and the President has only a symbolic function. The Government is the general organ of executive power; it exercises all the functions and powers which are not expressly conferred by the Fundamental Law or the law on another organ. The Government, as the head of the executive branch, can issue Government decrees in delegated competence matters mostly, but also as an original law-making power in matters where there is no statutory law. The Government is the principal organ of public administration.

4. The relationship between the executive and the judiciary did not change during the state of danger. During the pandemic the judicial system maintained its operation, albeit mainly online. This is discussed further in Part III.C below.

5. A special type of the dual management system, typical of military hospitals, was extended to non-military hospitals. On 29 March 2020, a Government decree effectively put the hospital system under military management. Military commanders were placed in hospitals as 'hospital commanders', and they made management decisions in a hierarchical military structure reaching up to the Government.¹⁰

6. During the pandemic the National Public Health Centre (NPHC)¹¹ played a crucial role in informing the public, mostly through its website.¹² The NPHC is a central budgetary body under the direction of the Minister of Human Capacities, acting as a central office,¹³ headed by the National Chief Medical Officer (CMO).¹⁴ The national response to Covid-19 is led by the Government; the Government appointed the Prime Minister to be in charge of eliminating the consequences of the Covid-19 pandemic.¹⁵

7. The Fundamental Law includes a very detailed separate chapter on 'special legal order', allowing deviation from the ordinary legislative process. A specific type of special legal order listed in the Fundamental Law is the 'state of danger' (*veszélyhelyzet*).¹⁶ The special legal orders of the state of emergency and state of national crisis are discussed in Part II.A below, and the question of by-elections held during the pandemic is addressed in more detail in Part III.D below.

8. In the aftermath of the first wave of the pandemic, some major Acts were amended,¹⁷ and a new legal order, 'the state of epidemiological preparedness' (*járványügyi készültség*), was introduced in the Hungarian legal system. The concept of the state of epidemiological preparedness was introduced in connection with the previously known special legal situation, the state of health crisis (*egészségügyi veszélyhelyzet*), included in the Healthcare Act.¹⁸ On 17 June 2020 the Government declared a state of health crisis and introduced a state of epidemiological preparedness.¹⁹ As a result, the state of epidemiological preparedness replaced the state of danger from 18 June to 4 November 2020,²⁰ and is still in force.²¹

9. The basic constitutional arrangements remained intact otherwise.

II. Applicable Legal Framework

A. Constitutional and international law

10. A constitutional state of emergency was not declared in Hungary, instead a state of danger was proclaimed. The Fundamental Law²² currently includes six different categories of special legal order: the state of national crisis (*rendkívüli állapot*),²³ state of emergency (*szükségállapot*),²⁴ state of preventive defence (*megelozo védelmi helyzet*),²⁵ state of terrorist threat (*terrorveszélyhelyzet*),²⁶ unexpected attack (*váratlan támadás*),²⁷ and state of danger (*veszélyhelyzet*).²⁸ A state of danger shall be declared by the Government in the event of a natural disaster or industrial accident endangering life and property, or in order to mitigate its consequences.²⁹ It is important to note that the Fundamental Law does not mention the possibility to declare a state of danger in the case of an epidemic or a pandemic, but it allows the use of this special legal order only in cases of natural disaster or industrial catastrophe.³⁰

11. However, a state of danger was declared on 11 March 2020 by the Government in a Decree for the elimination of the consequences of the human epidemic endangering life and property and causing massive disease outbreaks, and for the protection of the health and lives of Hungarian citizens.³¹ The Government claimed that the declaration of the special legal order was to ensure that rapid emergency measures necessary to control the epidemic are taken.³² As a result of decisions made exclusively by the Government, with the approval and support of the Parliament, a state of danger was in force between 11 March and 17 June 2020,³³ and it has again been in force since 4 November 2020.

12. During a state of danger, although the Parliament may remain in session, the basic legislative power temporarily resides with the Government. The Government is entitled to adopt decrees to suspend or derogate from certain Acts, or provisions of Acts, or take some other extraordinary measures;³⁴ the executive authority at the central governmental level thereof has the power to adopt, amend, or repeal every extraordinary state of danger measure. The Government decree declaring the state of danger expires after 15 days, according to the Fundamental Law, if there is no further parliamentary authorisation for its prolongation.³⁵ Thus, on 23 March 2020, the Government decrees³⁶ until the end of the state of danger period.³⁷ Hence, the Parliament authorized the Government to extend the applicability of the Government decrees³⁸ It was technically an unlimited temporal scope for governmental actions, as the end of the state of danger was supposed to be declared by the Government.³⁹

13. During the state of danger, the Government did not evoke international conventions or directly quote standards developed by the WHO. That '[t]he WHO has classified the Covid-19 infection as a pandemic' was announced at the beginning of the epidemic on the Government website.⁴⁰

B. Statutory provisions

14. The extraordinary power given to the Government was broad in scope and lacked express temporal limit or requirements on strict rational connection to the areas where an urgent response to the pandemic was required.⁴¹ The Government was obliged to inform the Parliament regularly about measures taken to eliminate the state of danger.⁴²

15. After 79 days, on 18 June 2020, the Parliament repealed the first Enabling Act⁴³—and the Government terminated the state of danger⁴⁴—but in doing so, the Parliament, in fact, transformed it into the new statutory state of medical emergency (*egészségügyi válsághelyzet*). According to the statutory provisions, if the CMO advises that a health emergency is warranted, the Government may invoke emergency powers on its own remit without consultation with Parliament—and the Parliament has no veto or ability to repeal such a declaration.⁴⁵ Following the recommendation of the CMO, in response to the Minister's proposal, the Government declared a state of health crisis on 18 June 2020.⁴⁶ A state of health care crisis can last for a maximum of six months and is revised every three months,⁴⁷ unless the Government extends the measures.

16. During the second wave of the pandemic a second Enabling Act was adopted on 10 November 2020,⁴⁸ which provided the Government with exceptional powers for 90 days.⁴⁹

17. Under the first Enabling Act, after the first 15 days of the state of danger, the Parliament gave the Government the power to renew the emergency decree repeatedly until the end of the state of danger.⁵⁰

18. Under the second Enabling Act, during the second term of the pandemic, the Government immediately got the authorisation to act freely until the end of the state of danger.⁵¹

19. The third Enabling Act on the containment of the Covid-19 pandemic was adopted by the Parliament and entered into force on 22 February 2021; originally, it limited its own effects as well, and set out that it would lose force after 90 days.⁵² Later on, an amendment to the law added that the law would remain in effect until the fifteenth day of the autumn session of Parliament in 2021; the Minister of Justice would be in charge to specify the day when the Enabling Act would be repealed by a ministerial decree.⁵³

20. Two general laws, the so-called Transitional Acts, were introduced, providing emergency powers to respond to Covid-19, laying down certain rules relating to epidemiological measures, and amending certain acts relating to epidemiological measures.⁵⁴ These acts were adopted through the normal course of legislation; the Parliament was in session during the state of danger.

21. The first Transitional Act amended the rules of the state of medical crisis, significantly widening the Government's ability to adopt restrictive decrees and measures.⁵⁵ Unlike the state of danger, the state of medical crisis is not one of the special legal orders provided for by the Fundamental Law, but a regime governed by the Health Care Act.⁵⁶ During the second and third wave of the pandemic the amended Act on Disaster Management⁵⁷ and the Health Care Act were relied on for the primary public health measures.⁵⁸ However, the Government decrees adopted in the course of the pandemic diverged from those measures provided for by pre-pandemic laws. Similar to the state of danger, the state of medical crisis is declared and terminated by the Government.⁵⁹ It may initially last for a period of six months, and then may be extended practically indefinitely.⁶⁰ Parliamentary approval is not needed to keep the decrees adopted under a state of medical crisis in force, unlike the decrees adopted in a state of danger.⁶¹ The reasons for the extension need to be reported to the Parliament's standing Committee on Health. On the basis of the amended Health Care Act, the Government ordered a state of medical crisis on 18 June 2020 for six months and later prolonged it.⁶²

22. The Second Transitional Act was enacted and entered into force on 1 December 2021.⁶³ These regulations were intended to protect the life, health, and personal safety of citizens in the event of an emergency, property and legal security, and to guarantee the stability of the national economy, in particular in the event of emergency measures.

C. Executive rule-making powers

23. As the Enabling Act authorized the Government to override any Act of Parliament, Government decrees were adopted in many areas,⁶⁴ not just in the areas originally listed by the cardinal Act concerning Disaster Management and Amending Certain Related Acts.⁶⁵ Between 30 March 2020 and the end of the first state of danger in June 2020, the Government issued over 150 decrees, using the powers granted by the first Enabling Act.

24. Some of the decrees adopted during the periods of state of danger were challenged before the Constitutional Court (see Part VI below). However, neither the Enabling Acts, nor the Transitional Act included any provisions that would facilitate the swift and effective constitutional review of Government decrees adopted during a state of danger or a state of medical crisis. Thus, the Constitutional Court refused in most cases to decide on the constitutionality of emergency decrees on procedural grounds, namely that the decrees were not in force any more at the time of the actual decision.

25. Furthermore, the overlap between the state of danger and the state of medical crisis created an unclear constitutional situation: the Government could decide arbitrarily whether it would act according to the state of danger or on the basis of the statutory medical crisis situation.⁶⁶

26. There were no executive rules adopted other than Government decrees. However, some of the specific rules related to the execution of Government decrees were set forth by ministerial decrees,⁶⁷ and during the third wave of the pandemic Government decrees gradually lifting the protective measures were enacted by decisions of the Ministers of the Interior.⁶⁸ All areas in connection with the pandemic, not only those related strictly to public health, were regulated by Government decrees.

D. Guidance

27. The Government was solely in charge of the regulations related to the pandemic, legislation was not delegated. Soft-law measures or guidance for the implementation of Government decrees were not introduced.

28. The NPHC published its first guidelines regarding Covid-19 on 23 January 2020, providing basic information about Covid-19 and some travel instructions.⁶⁹ Since March 2020, several links to information and fact sheets on different topics related to Covid-19, in Hungarian and in English,⁷⁰ were made available on this website.⁷¹ Another major source of information offered to the public during the pandemic was the central governmental website,⁷² connected to and updated by the Government of Hungary,⁷³ containing news and short, informative multimedia content—eg videos featuring the spokesman of the National Ambulance Service and the daily numbers of confirmed Covid-19 cases, those who had recovered, those who needed hospital care, and deaths.⁷⁴ During the first wave of the pandemic, an extensive media (internet and television) campaign called 'Stay at Home!' was launched, with the spokesman of the National Ambulance Service asking the elderly to stay home.⁷⁵ The mayors of the settlement local governments were in charge of providing supplies to the elderly of 70 years and above who, at the request of the Government, did not leave their domicile.⁷⁶ After vaccines against Covid-19 became available to the general

public, a new separate website designed for registration for Covid-19 vaccination was created. $^{77}\,$

29. The CMO had a visible role in advising the public during the daily press conferences of the Operational Corps Responsible for the Containment of the Covid-19 Epidemic,⁷⁸ concerning the necessary measures to be taken to diminish the negative impact of the disease.⁷⁹ The CMO was made a member of the Operational Corps. The CMO offered regular advice on how to keep small children attending nurseries and kindergarten safe and their toys and personal belongings clean,⁸⁰ how and how often hands should be disinfected,⁸¹ how to safely buy, store, and consume food bought in shops or ordered from supermarkets,⁸² how to protect and care for farm animals and pets,⁸³ etc. Basic rules in relation to Covid-19 were laid down for the operation and disinfection of restaurants.⁸⁴ Special information about financial support for employers,⁸⁵ special advice and precautions for expecting mothers and mothers with young children,⁸⁶ for vulnerable and high-risk groups,⁸⁷ and for children⁸⁸ were published, as well as a sample poster for home quarantine apartments and houses.⁸⁹ Emergency numbers by county were also collected and published online.⁹⁰

30. The CMO issued one significant, but questionable regulatory act in relation to the special legal order. The Government needed the Parliament's authorisation after 15 days for the measures to remain in force (see Part II.A above), which was eventually granted in Act XII of 2020.⁹¹ However, the law did not enter into force within 15 days of the adoption of the first emergency government decrees, so in order to maintain the measures, the CMO used a specific solution: she extended the measures imposed by the government decree by means of a normative decision, as an epidemiological measure.⁹² This solution was not in accordance with the general rules of the Act on Legislative Drafting,⁹³ and it demonstrates that legal order was occasionally interpreted in an ad hoc manner during the pandemic.⁹⁴

III. Institutions and Oversight

A. The role of legislatures in supervising the executive

31. The Fundamental Law provides that Government is obliged to lift the state of emergency when the conditions for its proclamation no longer exist (see Part II.A above). The provisions of the Fundamental Law do not contain any guarantees on the time limitation of the power to issue decrees. This means that if Parliament agrees to extend the emergency decrees without time limit, the Government can in principle maintain them in force indefinitely, since it has exclusive power to lift the emergency. Since the Parliament can only take its decisions in plenary session, it can only fulfil this constitutional obligation if it remains in session during the special legal order. Pursuant to the Enabling Act, the Government must regularly inform Parliament of the measures it has taken on the basis of the mandate. Secondly, Parliament may revoke the authorisation for the Government to extend its own emergency decrees for the entire duration of the emergency.⁹⁵

32. Regarding the temporary scope of its actions, the Government itself could not extend its power without further action required by Parliament, as the third Enabling Act in 2021 set forth a sunset clause and it will be repealed on 1 June 2022. The Parliament has consented to the extension of the validity of all government decrees issued from the declaration of the state of emergency until the adoption of the first Enabling Act, without a separate examination or debate.⁹⁶

33. Although the parliamentary control has its apparent limits, since the declaration of the state of danger on 11 March 2020 and as of mid-April 2022, there were 41 interpellations⁹⁷ and 556 immediate questions⁹⁸ discussed by Parliament related to the pandemic. Since the 2010 general elections, the Government holds a two-thirds majority in Parliament; thus, passing resolutions in support or in opposition to the decisions taken by the Government is extraordinary in Hungarian parliamentary practice. The lack of effective parliamentary control could be measured also by the number of petitions against Government decrees submitted to the Constitutional Court. According to the Fundamental Law, the Constitutional Court shall, at the initiative of one quarter of the Members of Parliament, review the conformity of any law with the Fundamental Law.⁹⁹ However, less than five such petitions have been submitted to the Constitutional Court and all of them were rejected by the Court (see Part VI below).¹⁰⁰

B. The functioning of the legislature where its ordinary business is disrupted

34. The Parliament has not ceased its sessions during the pandemic; thus, there was no need to resort to virtual meetings. The opposition parties have not complained about the functioning of the Parliament, except for some MPs. Parliamentary committees have also continued their work without interruption. Although some groups, the far right, libertarians, and some individuals raised their voices against the closures, the mask mandates, and vaccinations, and a few virus sceptics also expressed their opinion, mostly on social media,¹⁰¹ their exact numbers and the total impact of their views on the Hungarian society is unknown.¹⁰²

C. Role and access to courts

35. An extraordinary court break was ordered from 14 March to 31 March 2020.¹⁰³ After that period, remote hearings were set as the default court system procedure.¹⁰⁴

36. Judges held hearings either via the electronic communication network or by other audio-visual electronic means-specified by the guidance of the National Office for the Judiciary (NOJ), the national authority for the administration of justice—such as Skype or Microsoft Teams. If no such electronic means were available, judges were obliged to accept the parties' written submissions; the statements to be recorded at the hearing had to be obtained by the court in writing or by using an electronic means of identification and, if necessary, recorded in the minutes.¹⁰⁵ In cases where the physical presence of a party was necessary, submissions were to be obtained in writing or the person might have been interviewed by eligible electronic means capable of identifying persons (these were the same options as mentioned above). In September 2018, the President of the NOJ launched a project called 'VIA VIDEO', the aim of which was to connect the courtrooms to international bodies, domestic partner institutions, and other courts for remote hearings, with the help of appropriate technology tools.¹⁰⁶ Former data suggests that, until February 2020, VIA VIDEO has been used in more than 6,400 cases for remote interrogations and witness and expert hearings.¹⁰⁷ Mostly it was used in criminal cases, and the Act on Criminal Procedure was amended accordingly.¹⁰⁸ However, courts have limited access to VIA VIDEO, as there is usually only one equipped conference room per court building available. Each party and the judge would need a separate courtroom dedicated to conducting a remote hearing VIA VIDEO in order to be channelled to the official electronic network. Thus, VIA VIDEO is not suitable for such multi-party hearings, but may come useful for one-party submissions, or small cases. Despite all these difficulties, the President of the NOJ stated that there was no backlog of cases in the courts during the pandemic, rather the work of the courts had accelerated.¹⁰⁹ Skype for Business and Microsoft Teams are expressly recommended by the

NOJ for online hearings, but judges are free to make use of other encrypted programs too. $^{110}\,$

37. As for civil litigation, remote hearings became the default procedure.¹¹¹ Accordingly, court buildings were closed to clients, but adjudication still continued. Civil proceedings continued to run and so did deadlines. Hearings were also to be held in a limited number. Although a protocol from the NOJ or the courts was expected, it rested entirely upon judges to choose the audio-visual means and the host for the virtual hearing, including whether to shift the procedure to a document-only basis. Written electronic communication with clients is indisputably the safest solution for judges, as it is carried out through their own well-established network system called E-Per. There was no evidence found of disadvantages for users having no online presence or platform experience.¹¹²

38. The Hungarian Helsinki Committee conducted research on the Hungarian experience of remote hearings during the epidemic.¹¹³ According to this research, the number of legally completed criminal proceedings decreased in 2020 compared to previous years: while in both 2018 and 2019, 89 per cent of the 2016 volume was completed, in 2020 only 73 per cent of the base year's volume was concluded.¹¹⁴ The research found that the number of pending criminal cases fell sharply between 30 June 2017 and 30 June 2019, and then on 30 June 2020 produced an outstanding value from this trend.¹¹⁵ In 2020, the number of pending lawsuits increased not only in criminal cases, but in all cases.¹¹⁶

39. During the state of danger, the Constitutional Court's bodies have been meeting online; the full session of the Constitutional Court and its panels have been meeting via online video-conferencing.¹¹⁷ The constitutionality of ordering a state of danger or public health emergency was not referred to the Constitutional Court. In other issues related to the legislation during the pandemic, until 26 July 2021, 50 cases have been brought before the Constitutional Court.¹¹⁸ Many petitions were rejected on procedural grounds, because the challenged provision was no longer in force at the time of the decision.

D. Elections

40. By-elections, national and local, and referendums were suspended during the state of danger.¹¹⁹ During the state of epidemiological preparedness in September and October 2020, by-elections were held in 59 cases due to either the death or the resignation of the incumbents or due to the dissolution of the body of representatives in municipalities; in 32 cases by-elections were postponed due to the state of danger.

41. The Act on the Containment of Covid-19 provided that, if a dissolution of the representative body of a local government or a national minority self-government is declared, the decision to this effect shall become effective on the day following the end of the period of state of danger.¹²⁰ Furthermore, no by-elections may be called until the day following the end of the period of state of danger; the elections already called shall not be held. Moreover, no national and local referendums may be initiated until the day following the end of the period of state of danger; the national and local referendums already called shall not be held.

42. At the end of April 2022, a total of 135 elections were called to make up for the missed by-elections: in 80 settlements, a new mayor had to be elected, but in several cases a whole new municipal council had to be elected, and in many places a vacant seat had to be filled.¹²¹

43. After the Act on the Containment of Covid-19 was repealed,¹²² transitional provisions related to by-elections during the period of the state of danger were adopted, providing that by-elections are postponed and referendums cannot be initiated.¹²³ Later on, the temporary effect of Government Decree (483/2020) was prolonged.¹²⁴ National referendums could be held after 21 July 2021.

44. The performance of mayoral duties during the period of the state of danger provided that, in cases where the mayor is prevented from conducting their duties, the deputy-mayor should be acting temporarily.¹²⁵

45. Due to the aforementioned restrictions on assemblies, no rallies could be held to support electoral campaigns. All assemblies—meaning a public gathering held with the participation of at least two persons for the purpose of expressing an opinion in a public affair¹²⁶—were forbidden.¹²⁷

46. A motion to considerably amend the Election Bill was initiated by the Government during the pandemic.¹²⁸ The Government justified the proposed amendment with the alleged need to address the issue of so-called dwarf or fake parties, which have no real social backing. However, the key element of the proposition was to increase the minimum number of candidates for a national party list. The Act provides that a party may set up a party list only if it has a higher number of nominated candidates.¹²⁹ Finally, a further challenge is to pass the electoral threshold which, in the case of coalition lists of more than two parties, is 15 per cent. The amendment triggered harsh criticism from opposition parties,¹³⁰ political analysts,¹³¹ and non-governmental organizations (NGOs).¹³²

E. Scientific advice

47. The Operational Corps, an administrative body,¹³³ played a major part in providing information and making specific orders regarding public health and protection,¹³⁴ although decision-making remained with the Government and decisions were promulgated by Government decrees. The Operational Corps is led by the Minister of Interior and the Minister of Human Capacities, and its members include, among others, the CMO, the National Police Chief, the Director-General of the National Ambulance Service, and the Director-General of National Healthcare Service Centre. During the pandemic, the Prime Minister met occasionally with some selected specialists and epidemiologists, but a specific legally provided role was not granted to them.¹³⁵

48. The scientific advice on the basis of which the Government made its decisions to control the epidemic was not made public and was not published in any form during the pandemic; practically no data were available except for the daily updated infection numbers.¹³⁶ Although, it must be mentioned that vaccine efficacy data ending on 10 June 2021 were published in November 2021, however, not for the general public but in an English-language scientific journal.¹³⁷

49. Half a year later, at the end of the fifth wave of the pandemic in April 2022, it turned out that important research had been carried out in Hungary during the pandemic using domestic data—without the knowledge of the public. On 6 April 2022, the Hungarian Academy of Sciences and the Ministry of Human Capacities signed an agreement to cooperate in the scientific processing, analysis, evaluation, and dissemination of data and experience of the Covid-19 epidemic.¹³⁸ As it turned out, the Epidemiological and Clinical Research Working Group launched several research projects involving leading experts from the Ministry of Human Capacities and its institutions, national institutes, and universities,

the results of which were published continuously. The general public was not informed about this during the pandemic. $^{139}\,$

F. Freedom of the press and freedom of information

50. Hungary's media legislation has been the subject of sustained criticism, both nationally and internationally, since its introduction in 2010.¹⁴⁰ While minor adjustments were made to the legislation in 2013, the main causes for concern remained intact, shaping significantly the environment for media pluralism in Hungary up to the present day. ¹⁴¹

51. As to the freedom of speech, the first Enabling Act introduced a new specific incrimination of fearmongering,¹⁴² stating that '[a] person who, during the period of a special legal order and in front of a large audience, states or disseminates any untrue fact or any misrepresented true fact that is capable of hindering or preventing the efficiency of protection is guilty of a felony and shall be punished by imprisonment for one to five years.'¹⁴³

52. This amendment of the Criminal Code was criticized heavily by the profession from the beginning. It was argued that this definition, 'with the elastic concept of the "effectiveness of protection", the specification of the criterion of "suitability" of its "obstruction" or "prevention" raises serious concerns about rule of law.'¹⁴⁴ Although relatively few cases have reached the courts, according to official information, by mid-May 2020, the police had initiated criminal proceedings in 87 cases for fearmongering relating to the Covid-19 pandemic, which could disturb public order.¹⁴⁵ By July 2020, 134 related criminal investigations had been initiated. The majority of cases concerned people who had made critical remarks on social media about the government's handling of the pandemic.¹⁴⁶ Two cases received special attention when criminal proceedings started because of Facebook posts that were critical of the government; criminal procedure involved early morning searches, seizing computers, and taking people in for guestioning.¹⁴⁷ The Hungarian authorities have argued that the provision is precise enough to limit its applicability.¹⁴⁸ However, due to the high number of investigations launched, the Constitutional Court found it necessary to clarify that the crime must be interpreted in line with freedom of expression safeguards.¹⁴⁹ Although investigations were often dropped without charges, the high media coverage of the arrests had an intimidating and chilling effect on freedom of expression.¹⁵⁰ Eventually, the Constitutional Court decided that the amendment did not violate the Fundamental Law.¹⁵¹

53. Research proved that contact between independent media and public authorities became even more compromised during the Covid-19 pandemic in Hungary, not least because of the new provisions of fearmongering.¹⁵² Journalists claimed that the new legal provisions created a high level of uncertainty amongst them, as the interpretation of the law would in large measure depend on the goodwill of judges, especially the regulations concerning the burden of proof.¹⁵³

54. A Government Decree on derogations from certain data protection and data request provisions during the state of danger allowed public bodies to extend the deadline for responding to freedom of information requests to 45 days,¹⁵⁴ which could be prolonged once by an additional 45 days (instead of the original 15 + 15 days), if it was 'probable' that responding within the original deadline would jeopardize the fulfilment of their pandemic-related public duties.¹⁵⁵ It has been argued that this deadline, which can be up to 90 days, may render most information requests irrelevant by the time a response reaches the applicant and so seriously undermine the freedom of information enshrined in the

Fundamental Law.¹⁵⁶ The same rules were adopted during the second wave of the pandemic,¹⁵⁷ until the third Enabling Act was in force.¹⁵⁸

55. In 2020, repeated legislative restrictions on freedom of expression and information over the successive states of danger and thus during periods when opportunities for public consultation and debate were severely restricted, triggered serious concerns.¹⁵⁹ Several complaints were filed at the Constitutional Court. Regarding the derogations from certain data protection and data request provisions during the state of danger, the Constitutional Court did not decide the case in its merits because, according to the Fundamental Law of Hungary,¹⁶⁰ the questioned decree was no longer in force, there were no cases where the provision of the decree was applicable, and the rule lost its effect.¹⁶¹ The decision of the Constitutional Court was received with objective acceptance by some representatives of legal scholars in Hungary.¹⁶²

56. The same petitioner relaunched the constitutional complaint on 21 January 2021, when the same provisions became effective in autumn 2020, after the state of danger was repeatedly declared.¹⁶³ The Constitutional Court formulated a so-called constitutional requirement regarding the rules on access to data of public interest of the Fundamental Law: when the decree is applied, State organizations must explain the pandemic-related reasons for their restriction of the right of access to data of public interest.¹⁶⁴

G. Ombuds and oversight bodies

57. The actual activity of the Ombudsman (Commissioner for Fundamental Rights) has recently raised some doubts, mostly by NGOs.¹⁶⁵ During the pandemic the Hungarian Helsinki Committee turned to the Ombudsman on a number of issues, for example: asking the Ombudsman to investigate the extent to which the fundamental rights of convicts and their guards are respected in the implementation of epidemiological measures,¹⁶⁶ the forced evacuation of hospitals after 7 April 2020 when the Minister of Human Resources had instructed the heads of the hospitals that in less than two weeks about 40,000 hospital beds had to be made available to treat those infected with the new Covid-19 virus,¹⁶⁷ the timely vaccination of incarcerated/detained people,¹⁶⁸ or the ban on assembly ordered at the beginning of the state of danger and maintained throughout the state of danger.¹⁶⁹

58. Moreover, the pandemic itself and the measures taken were seen to have a significant effect on vulnerable groups in society.¹⁷⁰ After declaring that it is essential to care about vulnerable groups in this situation,¹⁷¹ the Ombudsman launched some investigations. On 29 April 2020, an ex officio investigation was launched after many people in nursing homes became infected with Covid-19,¹⁷² the Ombudsman visited several homes of older adults, some social institutions¹⁷³ and prisons,¹⁷⁴ and social housing for people with disabilities¹⁷⁵ during the pandemic. On 23 June 2021, the Ombudsman launched an investigation, at the request of Bernadett Szél, an independent Member of Parliament, because those who did not have an immunity certificate (who were not vaccinated) were required to take a PCR test at their own expense in hospitals for the resumption of elective interventions and rehabilitation benefits.¹⁷⁶ In August 2021, the Ombudsman issued a report declaring that this measure violates the rule of law, does not meet the requirements of legal certainty, may violate the right to human dignity, and violates the principle of equal treatment and should therefore be withdrawn.¹⁷⁷ The government only partially amended the decree, ordering that parents who accompany their children to surgery do not have to pay for their PCR test themselves.¹⁷⁸

59. However, based on the reports of the Ombudsman, in every visited institution, proper protection against the pandemic was provided. The Ombudsman could have initiated procedures regarding the Government Decrees,¹⁷⁹ opening the country in the autumn of 2021, without any prior public professional justification or scientific explanation,¹⁸⁰ and Government Decrees that might have violated the right to life, privacy, human dignity, or the right to health of the Hungarian people. Some subsequent attempts were made to professionally clarify the decision,¹⁸¹ even though the epidemic still posed a serious threat to health and life.

60. The opinion of the Hungarian Medical Chamber was not considered by the Government. When the number of registered cases and fatalities was at its peak,¹⁸² the first phase of lifting the protective measures had started.¹⁸³ According to the Hungarian Medical Chamber the opening was too early.¹⁸⁴

61. During the pandemic no special reviewer of legislation or other public official was appointed.

IV. Public Health Measures, Enforcement and Compliance

62. Public health measures have been introduced in Hungary in a scattered manner during the first two periods of state of danger. Almost all measures were stipulated by Government decrees with a nationwide scope.¹⁸⁵ Little autonomy was given to local municipalities. Most of the regulations were general in terms of territorial scope,¹⁸⁶ in some cases, different and more stringent measures were introduced in the capital.¹⁸⁷ Bans have been lifted gradually, subject to the number of individuals who have received at least the first dose of vaccination.¹⁸⁸

A. Public health measures

1. Individual mobility restrictions on citizens (stay-at-home, curfews, etc)

63. The first restrictions on individual mobility were introduced on 27 March 2020, and the corresponding Government Decree set forth that leaving one's place of residence or private residence could only take place for essential reasons.¹⁸⁹

64. The Government entrusted local governments to adopt stricter rules than the Decree on restricting movement and on physical distancing over the Easter holiday and the following two weekends.¹⁹⁰ Under this authorisation, in several towns of Hungary, local governments ordered curfews for the night, closed popular tourist attractions, parks, and public spaces, ordered people to keep a 10-metre distance from each other while jogging, ordered people to wear masks in public places, and allowed people to walk their dogs for no more than 30 minutes.

65. During the second wave, curfew was, together with further protective measures, applicable during the period of state of danger between 12 am and 5 am—with certain exceptions, such as commuting to or from work—everyone had to stay at home or their place of residence during this period.¹⁹¹ On 10 November 2020, the Government introduced new, stricter rules on curfews: curfew was introduced for the period between 8 pm and 5 am. Although a person was allowed to leave their domicile, place of residence, accommodation, or stay in a public space between 8 p.m. and 5 a.m. for performing work, for travelling to and from work, and for participating in training or a sports competition held for competitive athletes, these reasons had to be certified by a deed.¹⁹²

Dog walking was allowed with the proviso that individuals had to remain within 500 metres of their domicile. $^{193}\,$

2. Restrictions on international and internal travel

66. When the state of danger was proclaimed, on 11 March 2020, borders with Austria and Slovenia closed, and travel restrictions were introduced with regards to persons (noncitizens and citizens) travelling from Iran, China, Korea, and Italy.¹⁹⁴ The scope of restricted countries kept changing, taking into consideration the actual epidemic situation in those countries. The special provisions for the listed states expired on 27 March 2020.

67. The restrictions on international travel have gradually been lifted since 22 May 2020. Different rules governing entry into Hungary have been adopted for some of the neighbouring countries.

68. Hungary has lifted Covid-19-related restrictions gradually also with regards to business travellers entering the country from abroad.¹⁹⁵ The CMO was in charge of listing the countries from which Hungarian citizens could return without restrictions,¹⁹⁶ based on the WHO classification and the applied epidemiological professional rules. From August 2020, those arriving for business purposes could enter Hungary from the territory of any State.¹⁹⁷

69. Different rules were introduced governing the entry into Hungary of Hungarian citizens, of persons not holding Hungarian citizenship, of military convoys, of cross-border workers, and of persons passing through the territory of Hungary.¹⁹⁸ Hungarian citizens arriving from abroad or their non-citizen family members had to undergo a medical examination upon entry.¹⁹⁹ In case of suspected infection, they were placed in a quarantine facility.

70. Non-Hungarian citizens could not enter the territory of Hungary in passenger traffic the scope of the Decree covered border crossings with an ordinary passport or other travel document for non-official reasons.²⁰⁰

71. Citizens of neighbouring States, and Hungarian citizens living there, could enter the territory of Hungary within a distance of 30 kilometres from the State border for a maximum of 24 hours. Hungarians living in this 30-kilometer area could also enter if they had stayed within 30 kilometres of the border of the neighbouring State for less than 24 hours.²⁰¹

3. Limitations on public and private gatherings and events

72. During the first wave of the pandemic, it was forbidden to stay at a venue conducting regular music and dance events.²⁰² It was also forbidden to stay at a venue or an event, regardless of the number of participants and the location of the event, or to stay at a place of an assembly, regardless of whether they were public or private—a rite of a religious community, a conclusion of a civil marriage, or a funeral did not qualify as an event.²⁰³ Sports events were to be held without spectators and behind closed doors.²⁰⁴ Regardless of the number of persons present and except for those employed there, it was forbidden to visit events or performances from any branch of performing arts (theatre, dance, cinema, museum).²⁰⁵ Except for those employed there, it was forbidden to stay in a catering facility.²⁰⁶ A person who stayed, at an illicit time or in an illicit manner in these premises, committed an infraction (see Part IV.B.1 below).²⁰⁷ This decree did not apply to pick-up and delivery of food for take-away.²⁰⁸

73. During the second wave of the pandemic, from midnight of 10 November 2020, most of the restrictions were reintroduced and new regulations were announced: family gatherings and private events may only be attended by a maximum of ten people; weddings were only possible without a wedding reception, and only the best man, maid of honour, parents, and siblings may attend church and civil ceremonies; only 50 people could attend funerals.²⁰⁹

4. Closure of premises and facilities (eg schools, shops, services, parks, churches, sport facilities)

74. Students were prohibited from entering higher education institutions.²¹⁰ With the exception of kindergartens, no extraordinary break was to be ordered in public schools or nurseries for the purpose of coordinated protection.²¹¹ From 15 June 2020 onwards, universities were reopened, subject to the decision of the rector, but dormitories remained closed. It was the duty of the rector to ensure the conditions for maintaining protective distance.²¹²

75. During the first wave, the opening hours of restaurants were restricted to 3 pm,²¹³ and all shops had to be closed except for food stores, pharmacies, and drug stores.²¹⁴ Compliance with these measures was controlled by the police, and non-compliance was qualified as an infraction resulting in a fine (on compliance see Part IV.B.2 below).²¹⁵ The Minister responsible for innovation and technology is authorised to access and process any available data with a view to eliminating the state of danger.

76. After the initial period, a second phase of protection measures were introduced, which were applied throughout the country, with the exception of the capital.²¹⁶ Special restrictions were introduced to the capital by the Government—arguably without sufficient consultation with the municipal authorities, especially with the Mayor of Budapest—which stated that '[i]n the case of the capital, the government is asking for the opinion of the mayors of [the 23 districts of] Budapest'.²¹⁷ During this second phase, restaurants could be visited by observing the protective physical distance between individuals (1.5 metres) and staff had to wear protective face masks.²¹⁸ Hotels could be opened and open-air playgrounds could be visited.²¹⁹ From 1 June 2020, family events with no more than 200 attendees could be held, including weddings at restaurants and hotels.²²⁰ During a rite of a religious community, conclusion of civil marriage, or a funeral, maintaining protective distance of 1.5 metres had to be ensured, with the exception of the parties entering into marriage.²²¹ Mask wearing was not obligatory while playing sports or visiting parks.²²²

77. During the third wave of the pandemic, from midnight of 10 November 2020, most of the restrictions were reintroduced and new regulations were announced: ²²³ all forms of assembly were forbidden;²²⁴ restaurants had to close, but food delivery remained possible;²²⁵ shops and services had to close by 7 pm;²²⁶ hotels were allowed to host business travellers and personnel of the Hungarian Armed Forces and other law enforcement agencies and assigned health care workers only;²²⁷ there was a general ban on events;²²⁸ extracurricular facilities, including gyms, indoor swimming pools, museums, theatres, and zoos had to close;²²⁹ higher education could be continued only in an online format, and university dormitories were closed;²³⁰ a digital curriculum for distance learning was reintroduced in high schools, for children typically, 14 years old or older;²³¹ kindergartens, nurseries, and primary schools stayed open for children under 14;²³² mask wearing was compulsory in certain public spaces in towns larger than 10,000 people;²³³ and the designation of these public spaces was the responsibility of the local mayor.²³⁴

5. Physical distancing

78. During the first wave of the pandemic, strict provisions for restricting movement were introduced.²³⁵ Everyone was obliged to restrict social contact with other persons as much as possible, with the exception of those living in the same household, and to maintain a distance of at least 1.5 meters from other individuals, if possible.²³⁶ Leaving a domicile, place of residence, or private home was permitted only for a justified reason set out in the Decree.²³⁷ Persons of 65 years of age and older were allowed to visit a grocery store, drugstore, market, or pharmacy only between 9 am and 12 pm.²³⁸ During this timeframe, it was forbidden for people under this age to visit the aforementioned facilities.²³⁹ Individual recreational sports and walking may only be pursued outside settlement limits or, if pursued within settlement limits, alone or together with persons living in the same household and possibly in green spaces, with the proviso that a distance of at least 1.5 meters shall be maintained from others.

79. In late April and early May 2020, regulations regarding social distancing were slightly changed. During the second phase visiting public spaces and parks was again permitted, provided that the protective physical distance was maintained.²⁴⁰ However, the regulation providing for restricting social contact with other persons, with the exception of those living in the same household, was reinforced.²⁴¹ Two weeks later, Government Decree 207/2020 (15 May 2020) on the next phase of protective measures came into effect. From 18 May 2020, restaurants could be visited again by observing social distancing (1.5 metres).²⁴²

6. Use of face coverings and personal protective equipment (PPE)

80. During the first wave, wearing 'mouth and nose covers (such as medical masks, scarfs or shawls)' was compulsory when shopping in a store or using a means of public transportation.²⁴³ From 18 May 2020, staying and consuming ordered food or drink was permitted in the indoor part of a catering facility, but social distancing had to be maintained, and employees also had to wear mouth and nose covers in areas accessible to guests.²⁴⁴ Measures in the capital (Budapest) were introduced separately, but also by a Government Decree.²⁴⁵ These measures remained in force until the end of the first wave.²⁴⁶

7. Isolation of infected individuals and quarantine of individuals suspected of infection

81. Before 26 March 2020, only travellers who returned from countries considered to be affected by a high number of cases (China, Italy, South Korea, Iran) were required to self-isolate for 14 days.²⁴⁷ After 15 March 2020, Hungarian citizens entering the country from abroad had to undergo a medical examination upon entering Hungary.²⁴⁸ Depending on the outcome of the examination, individuals were subjected to different types of quarantine.²⁴⁹ Those who were suspected of being infected with Covid-19 were placed in designated quarantine facilities.²⁵⁰ Those who were not suspected of being infected were required to undergo official home quarantine for 14 days at their place of residence or stay.²⁵¹

82. The NPHC published a new procedure on Covid-19 on 21 September 2020. Important new elements were included: people who were asymptomatic, but were identified through contact tracing should remain in home quarantine for 10 days; self-isolation ('home quarantine') was mandatory for any asymptomatic person who had been in close contact with suspected or confirmed Covid-19 cases during the onset of symptoms and for two days prior to the onset of symptoms; and people with symptoms were asked to call their GP or the Emergency Ambulance Service instead of visiting health facilities for consultations. Home quarantine for these individuals could not end after two negative PCR tests.²⁵²

83. The last and actual version of this procedure was adopted on 5 April 2022. According to this procedure, people who have been in close contact with an officially confirmed infected person must be placed under epidemiological surveillance for 7 days. The 7 days are counted from the last encounter with the infected person or, for household contacts, from the beginning of the isolation of the infected person. On the fifth day from the start of the epidemiological surveillance, the person concerned may carry out a rapid test and, if the result is negative, the epidemiological surveillance may be lifted. There are separate rules for kindergartens and schools.²⁵³

8. Testing, treatment, and vaccination

84. On 16 March 2020, the NPHC published a procedure for Covid-19 testing.²⁵⁴ According to this procedure, if at least one of the following categories is met, the patient is a suspected case and a laboratory test should be taken. Category A is a patient with acute respiratory illness who has at least one of the following symptoms: fever (?38°C), cough, shortness of breath, *and* has a history of travel abroad during the 14 days prior to symptom onset. Category B is a patient with acute respiratory illness *and* who has been in close contact with a confirmed or probable Covid-19 case in the last 14 days prior to symptom onset. Category C is a patient with severe acute respiratory illness who has fever (?38°C) and at least one symptom/sign of respiratory disease (eg cough, shortness of breath, clinical or radiological sign of pneumonia), *and* requires hospitalization. In addition, any patient exhibiting respiratory symptoms can be considered a suspected case by the family doctor or the attending specialist, or the public health agency on the basis of the assessment of clinical and epidemiological data, such as the occurrence of multiple respiratory diseases in small communities, like hospital wards, workplaces, families, or among friends.

85. Free testing was only available for those whose general practitioner (GP) prescribed it and if it was performed by the ambulance. Private laboratories also operate, but the NPHC does not accept it as an official result. Anybody can request this test, at a cost of HUF 31,000 (approximately USD \$92), the delivery is HUF 15,000 (approximately USD \$45). If it is positive, the laboratory notifies the NPHC and sends the sample to them in order to do a confirmatory test.²⁵⁵ From 21 September 2020, for a person to whom SARS-CoV-2 RT-PCR sample collection and laboratory examination are available, subject to payment of a fee, the fee payable shall not be higher than HUF 19 500 (approximately USD \$58).²⁵⁶

86. The local government in Budapest screened healthcare and social workers for Covid-19 in a private laboratory, according to the city's Mayor, on 29 March 2020. Mobile screening units were introduced to help Covid-19 detection to ensure the elderly and those with chronic illness did not have to leave their homes.

9. Contact tracing procedures

87. It is important to note that since 5 March 2020, it was not clear from the procedural rules regarding contact tracing exactly who was looking for contacts and how. After the third wave, according to the experience of some GPs, contact tracing had virtually ceased, although this was never officially recognized or declared.²⁵⁷ During the summer of 2021, between the third and the fourth wave of the pandemic²⁵⁸ and at the beginning of the fourth wave, the inadequacy of contact tracing was also highlighted by some experts.²⁵⁹

88. Individuals who were in mandatory home quarantine could download, on a voluntary basis, a tracking application that shared their location data, photo, and health data with the authorities, in order for the police to regularly check whether they complied with the quarantine.²⁶⁰ For those who downloaded the app, the police checked electronically through the software whether the quarantine rules were adhered to.²⁶¹ Those who violated these rules, but installed the software, were subject to a fine amount to 50 per cent of the originally imposed amount.²⁶² If the home quarantine ended, the software could be deleted,

but the data would be retained for another 60 days.²⁶³ If someone did not voluntarily agree to install the software, the police would perform home visits more often to personally check on compliance with home quarantine.²⁶⁴

10. Measures in long-term care facilities or homes for the elderly, restrictions on visitors etc

89. The CMO ordered a nationwide ban²⁶⁵ on visits to social institutions and nursing homes.²⁶⁶ During the second wave, the nationwide ban was reintroduced.²⁶⁷ The ban was lifted in several stages,²⁶⁸ and visits in elderly homes were allowed since 29 April 2021, but only for those who had been vaccinated.²⁶⁹

B. Enforcement and compliance

1. Enforcement

90. The CMO has been responsible for the implementation of the epidemiological interventions together with the county and district Government Offices, in particular their public health departments and units. They coordinate the surveillance and the testing.²⁷⁰

91. An epidemiological deployment unit within the Operational Corps, headed by the Deputy Chief Medical Officer, has been established. If immediate intervention is needed in a particular area due to a high number of Covid-19 cases, the deployment unit should go on site.²⁷¹

92. The National Hospital Directorate General was established on 18 November 2020,²⁷² to monitor the functioning of the health care system, to substantiate the strategic Government decisions about the review of the health care system, and to contribute to the development of a coherent and transparent new national health management system. During the state of danger, the Minister of Interior controls the new institution.²⁷³

93. Enforcement of restrictive measures, with some exceptions, was controlled by the police. In cases of non-compliance with any restrictive measures, a police officer may take the measures and apply the coercive means specified in Act XXXIV of 1994 on the Police.²⁷⁴

94. The mayor of the settlement local government—or in the case of the capital, the mayor of the district—was entitled to order an extraordinary holiday for institutions providing nursery or kindergarten services. The mayor was obliged, as a matter of priority, to notify the Minister of Human Capacities when ordering a holiday.²⁷⁵ The mayor of the settlement local government was in charge of providing supplies to elderly persons of 70 years and more who, at the request of the Government, did not leave their domicile or place of residence.²⁷⁶

95. The autonomy of mayors or bodies of local governments to issue protective regulations was limited to decrees and rules concerning: the opening hours of a market operating in the settlement and its access by persons of 65 years and more;²⁷⁷ the use of public spaces by catering facilities;²⁷⁸ and, for a limited period of time, the introduction of special local protective measures for Easter 2020.²⁷⁹ Municipalities could introduce stricter measures (see Part IV.A.1 above).²⁸⁰

96. The military assumed an extensive role during the periods of the state of danger.²⁸¹ A Government Decree on hospital commanders and protecting healthcare supply created the institution of hospital commanders.²⁸² The Government ordered the heads of the healthcare institution providing inpatient care or outpatient care in connection with inpatient care, irrespective of identity, to ensure the protection of healthcare equipment and devices, and supplies of medicinal products and disinfectants.²⁸³ After obtaining the opinion of the Operational Corps, if required, the Minister of Interior could make a recommendation for

the secondment by a hospital commander of a healthcare institution to monitor the use of healthcare supplies purchased with budgetary funds.²⁸⁴ The Prime Minister, on a proposal from the Minister responsible for law enforcement, issued a letter of mandate to hospital commanders. After a letter of mandate was issued, the Minister responsible for law enforcement had to send the hospital commander to the healthcare institution.²⁸⁵ The activities of hospital commanders had to be directed by the Minister responsible for law enforcement.²⁸⁶ The head of the healthcare institution had to enforce recommendations by the hospital commander with regards to following the rules concerning epidemiological risks and protecting the healthcare supply.²⁸⁷ A hospital commander could not make any recommendations or take any decisions on medical professional matters.²⁸⁸

97. The use of the military in companies of strategic importance was quite unusual and considered disproportionate to the situation existing in spring 2020,²⁸⁹ as the Hungarian military is to protect the territory and the independence of the Hungarian State and its borders, and to participate in peace-making and ensuring international military cooperation, and none of its major goals are related to fighting against a pandemic.

98. Non-compliance with restrictions resulted in administrative sanctions.²⁹⁰ Civil sanctions were not introduced. The lowest amount of fine for this infraction, by way of derogation from Article 11(1) of Act II of 2012, was HUF 5,000 (approximately USD \$15), while its highest amount was HUF 500,000 (approximately \$USD 1500).²⁹¹ According to the Infringement Act, in a pandemic-free legal order, the lowest amount of fine—unless otherwise provided by the Act—is HUF 5,000 (approximately USD \$15), the highest amount is HUF 150,000 (approximately USD \$450), and in the case of offences punishable also by imprisonment, the highest amount is HUF 300,000 (approximately USD \$900).

99. The first Enabling Act introduced amendments to the Criminal Code in relation to the criminal offence of fearmongering.²⁹² For more details see Part III.F above.

2. Compliance

100. The data on compliance were collected and processed by the Ministry of Interior, as part of the crime statistics published by the Ministry on a separate website. According to these data, in 2020 a total of 54,278 and in 2021 a total of 91,864 procedures were initiated for breaches of state of danger government decree measures. Most of the procedures were initiated for violating the curfew: in 2020 a total of 16,363 and in 2021 a total of 44,576 cases were registered (data according to STAT-VIR as of 14 April 2022).²⁹³

101. The number of procedures initiated for non-compliance with local government decrees related to the opening of markets amounted to 211 in 2020.²⁹⁴ For violating the rules on wearing masks, 8,507 procedures in 2020 and 15,236 procedures in 2021 were initiated. For violating the rules on social distancing, 2,329 procedures in 2020 and only 68 procedures in 2021 were instigated. Between 11 November 2020 and 22 May 2021, 1425 procedures were initiated for gathering or assembling in a public space or a space open to the public,²⁹⁵ and between 11 November 2020 and 2 July 2021, 860 procedures were initiated for staying at the venue of an event and at the place of an assembly.²⁹⁶ The total amount of fines imposed on individuals in 2020 and 2021 was HUF 2.9 billion (approximately USD \$8.27 million), and the average amount of a fine in 2020 was HUF 80,000 (approximately USD \$228) and in 2021 was HUF 65,000 (approximately USD \$185). The total amount of administrative on-site fines imposed was HUF 833 million (approximately USD \$2.38 million), and the average amount of an on-site fine was HUF 27,100 (approximately USD \$77). Twenty-five persons in 2020 and 76 persons in 2021 were imprisoned. As of 14 May 2020, the police had launched 87 investigations over 'fearmongering'²⁹⁷ and 27 investigations over 'threatening with public danger'²⁹⁸ in connection with the state of emergency.²⁹⁹ While some investigations appear to have

targeted online posts promoting false facts, others have focused on citizens criticizing the Government. $^{\rm 300}$

V. Social and Employment Protection Measures

102. The Government introduced the so-called Economic Protection Action Plan (a loose umbrella term) to provide economic relief during and after the pandemic.³⁰¹ However, protection measures have been introduced by Government decrees in a scattered manner. Measures reflected sectoral industrial needs in a rather ad hoc manner. Regulations were often amendments of existing legal measures and were subject to frequent modifications. In the realm of 'workfare'-oriented social and employment policies, no new general universal payments—which are paid regardless of a person's income or social insurance record—and social insurance-based aids have been introduced during the pandemic. Administrative rules relating to social benefit claims were not eased either, leading to longer procedural times. As the Government did not allocate additional funds to finance social expenditures, large urban municipalities introduced and financed some local means-tested aids, the amount and eligibility of which being subject to their financial capacity. Social and employment measures were jointly financed by European and national funds; allocation of funds was in line with Fund for European Aid to the most Deprived regulations.³⁰² Social partners have not been involved in the decision-making process.

A. Social protection measures

1. Social assistance

103. Regarding social protection, the most important characteristic of the Hungarian measures is that no cash transfers were introduced. As for social pension, there is no form of non-contributory pension in Hungary. The amount of the minimum age-based pension (with a qualifying condition of a minimum of 20 years of service) has remained the same, ie HUF 28,500 (USD 82.02). There has been no change in the childcare support system either. Employers are allowed (but not obliged) to provide free childcare facilities for their employees if the public nursery, kindergarten, or school that the employee's child attends is temporarily shut down due to the pandemic.³⁰³ No cash-for-work scheme was introduced in Hungary. Schools switched to digital learning on 16 March 2020. As teaching was continuous, those who were eligible for free meals continued to receive this benefit.³⁰⁴ No additional benefits were introduced. Kindergarten meals are free for those who: receive regular child welfare allowance; are chronically ill or severely disabled, or have a chronically ill or severely disabled child in the family; families with three or more children; families with low per-capita income; and children who have been placed in foster care and removed from their own family. School meals are free for those who receive regular child welfare allowance, and meals are available at a 50% discount for those who: are chronically ill or severely disabled, or have a chronically ill or severely disabled child in the family; and families with three or more children.³⁰⁵ To help families with their mortgage, a payment moratorium was introduced on 19 March 2020.³⁰⁶ It consisted of a payment holiday until 1 July 2021 for principal, interest and fees under credit facilities, and loans and financial leasing provided in a business context. Any contracts maturing during the state of danger were prolonged. The moratorium also amended accessory and non-accessory secondary obligations (eg security interest, guarantee, etc). The payment holiday applied to loans already drawn under contracts existing at midnight on 18 March 2020. Debtors continued to have the right (but not the obligation) to make payments under the original terms. The parties could contractually agree to not apply the moratorium to their contract. The moratorium did not apply to bonds or hedging transactions; there was no waiver on interest and fees. There was no general moratorium on enforcement of rights and remedies for creditors, and specific temporary restrictions on court execution proceedings and the possible actions of bailiffs were introduced with effect from 24 March 2020.³⁰⁷ Until the

end of the state of emergency, a general suspension on evictions was introduced.³⁰⁸ Eviction procedures restarted 15 days after the state of emergency ended on 30 April 2022. No waivers on utility payments were introduced.

2. Social insurance

104. Both the number of unemployed people aged 15-74 and the unemployment rate rose: the former by 42,000 to 215,000, the latter by 0.9 percentage points to 4.5%. Among men, the number of unemployed increased by 14,000 to 106,000 and the unemployment rate by 0.5 percentage points to 4.1%, while among women, the number of unemployed increased by 28,000 to 109,000 and the unemployment rate by 1.3 percentage points to 4.9%. The number of unemployed persons aged 15-24 increased to 42,000, with the unemployment rate rising by 2.4 percentage points to 13.6%. Nearly one-fifth of all unemployed were young people. The unemployment rate for the 25-54 age group rose by 0.7 percentage points to 4.0%, and for the 55-74 age group by 1.1 percentage points to 3.3%. The average duration of a job search during the pandemic was 9.1 months, and 26.4% of the unemployed had been looking for a job for at least a year.³⁰⁹ However, there were no amendments made relating to unemployment benefits, pensions, healthcare insurance support, and social security contributions. Regarding public work, for those who were not able to perform mandatory work in order to receive unemployment aid due to the pandemic, wages were paid for the period remaining from their fixed-term contract.³¹⁰ Although the number of registered jobseekers grew from 234,000 in 2019 to 290,000 in 2020, and then dropped again to 238,000 in 2021,³¹¹ the number of registered public workers decreased from 1,011,000 in 2019 to 887,000 in 2020, and further to 841,000 in 2021.³¹²

3. Tax relief and other social measures

105. The personal scope of the Economic Stability Act was extended to cover persons facing immediate danger due to the Covid-19 pandemic. According to the regulation, those who receive any services or goods relating to disaster relief free of charge are exempt from any taxation, including personal income tax.³¹³

106. From the first wave of the pandemic onwards, procedures relating to family support, aids, and other benefits were eased.³¹⁴ Article 6(5) of Government Decree 81/2020 declared that eligibility for health insurance and family benefits granted under a separate Government decree with regards to caring for and raising children shall be extended until the end of the period of state of danger (see Part VI.G below).³¹⁵

B. Employment protection measures

107. Following the outbreak of the virus in Hungary, a special legal order entered into force affecting employment policy measures (for details concerning derogations please see Part II.A above). The Government unilaterally adopted measures directly affecting labour law without consultation with social partners.³¹⁶ Opposition politicians filed a claim before the Constitutional Court to abolish the decree, arguing that the unlimited scope given to employers and employees to deviate from the binding rules of the Labour Code was unconstitutional and infringed upon several European Union regulations and directives, such as the General Data Protection Regulation (GDPR); these exceptional regulations were in force until 30 days following the end of the state of emergency, which was on 18 June 2020. The Constitutional Court rejected the motion as the questioned legislation was no longer in force at the time of the decision.³¹⁷ As long as the decree was in force, provisions of collective agreements derogating from these rules could not be applied. Employment policy measures did not follow any trends of other national jurisdictions, as no monetary relief was given, apart from the partial wage-subsidy to employers. Hungary introduced a system for shortened working hours for specific industry sectors, which was labelled as 'Kurzarbeit-system', however actual measures were somewhat different from the original

German model. Although home office and telework arrangements were promoted by the Government, the related regulations for liability for damages occurring at home were not regulated, despite the repeated requests of social partners. The differences between teleworking and home office rules are not clear in Hungarian labour law. The situation is further complicated by the fact that the legislation on telework, which was adopted in the wake of the experience gained during the pandemic, only entered into force in May 2022.³¹⁸ Despite these legal uncertainties, telework and home office work were widely utilised during the pandemic. As no specific regulations were adopted during the state of danger concerning occupational safety and health for telework and home office workers, employers had to apply the general rules of the Labour Code.

1. Economic support for employers

108. In specific sectors most affected by the economic consequences of the pandemic, like gastronomy, hotels, taxi services, sports and leisure, and arts and entertainment, a partial waiver on social insurance contributions was introduced for employers. According to the Government decree, employers are exempted from the payment of the employer's social security and training contributions (15.5% + 1.5%), and only have to pay a flat-rate health insurance contribution of HUF 7,710 (USD 22.27) for each employee per month.³¹⁹ In these sectors, financial support for wages can be claimed. Up to 50% of the gross wages were paid out from the Employment Fund for three months upon the joint request of employees and employers; the program has been continuously prolonged. The maximum amount employers pledged that supported employees would not be dismissed for 30 days following the payment of the benefit. Employers in these specific sectors are exempt from social insurance contributions for the period during which they receive wage support. Support measures related to wages did not modify existing labour rights. Social partners were not consulted with regards to the regulations.

2. Worker protection from dismissal and other contractual protections

109. There have been no restrictions on employers' freedom to dismiss workers, either on an individual level or according to collective redundancies regulations. An employment relationship may be terminated by the employee and the employer by notice. Employers must justify their dismissals in writing. The reasons must be clearly specified, authentic, and substantial. Reasons of termination by notice may be in connection with the employee's conduct or competence or in connection with the employer's operations.³²⁰ The employer shall terminate a fixed-term employment relationship by notice if undergoing liquidation or bankruptcy proceedings; or for reasons related to the employee's ability; or if maintaining the employment relationship is no longer possible due to unavoidable external reasons.³²¹ Collective redundancy refers to a situation in which an employer, based on the average statistical workforce for the preceding six-month period, intends to terminate the employment relationship within a period of 30 days, for reasons in connection with its operations, such as, for instance, a reorganisation, a layoff, or a termination of an organisational unit. Employers shall follow specific procedural rules, including the notification of the works council and the government employment agency.³²²

110. The most important new measure, introduced during the first wave of the pandemic (from March to June 2020), was Article 6(4) of Government Decree 47/2020 regarding emergency relief. This decree provides that an employer may modify the announced working time schedule differently and derogate from the notification rules laid down in the Labour Code³²³—it means that the employer may modify the announced working time schedule at any time, including immediately before starting or during scheduled work. The employer can unilaterally assign the employee to home office work and telework: there is no need for a mutual agreement, and home office work may be ordered without a time limit

(as opposed to 44 working days a year as provided by the Labour Code). The Government Decree allowed the employee and the employer to derogate from the provisions of the Labour Code by mutual agreement. Any rule of the Labour Code, whether for the benefit or the disadvantage of the employee, may be derogated from by an agreement between the parties. It remained open whether the authority of the parties to deviate from the Labour Code by agreement is truly unlimited, that is, that any rule can be deviated from or not.³²⁴ Another open question not settled by the Decree was what would happen to these agreements after the end of the state of emergency. One interpretation was that these agreements would be null and void. However, parties may agree upon long-standing rules, such as exclusion of termination of employment for a year, or a longer working time reference period of two years. These exceptional regulations were in force until the expiry of a period of thirty days following the end of the state of emergency on 18 June 2020.

3. Other worker protections

111. There have been no measures introduced to protect vulnerable employee groups, such as: non-standard workers; casual or 'zero hours' workers; workers with protected characteristics; women; and parents with caring responsibilities.

112. Businesses shedding 30 to 50% of working time of their employees (compared to their pre-pandemic situation), who can prove that their orders have not fallen by more than 50% and who are working towards the 'interests of the national economy' were eligible for the following agreement. For every employee that is considered for layoff, the State agrees to pay 70% of the salary that was lost due to the worktime reduction. Income supplement is provided only for up to HUF 214,300 net (twice the minimum wage, USD 619.44) per month. Earnings beyond that threshold are not subsidized. The maximum amount received by an employer was HUF 75,000 (USD 216.94).³²⁵ Additional criteria for eligibility are that the employer must agree to keep the headcount level until the end of the year in order to be considered for the subsidy; the shortened work contract may not drop below four hours per day of working time; and employers must organize training for the employee for 30% of the hours that have been cut from their working time and pay wages for this time as well. Applications opened on 16 April 2020 and were later extended until 31 August 2020. The measure was financed by the European Social Fund and co-financed by the State budget.

113. As of 1 January 2021, significantly stricter rules applied for itemized tax for small taxpayers ('KATA'). The most stringent rules are related to the surtax: if the total revenues received by the KATA taxpayer from a foreign non-related party exceeds HUF 3,000,000 (USD 8,167), aggregated from the beginning of the calendar year, the KATA taxpayer should pay 40% of KATA surtax on the amount exceeding the HUF threshold. The tax base is 71.42% of the total revenues.

4. Health and safety

114. The employer may take any necessary and justified measures to control the health of the employee and was able to unilaterally order employees to telework.³²⁶ Employees who are concerned about the adequacy of the safety measures taken by the employer may refuse to take up the work. However, an employee who is concerned about working but does not have an adequate reason could be fired with immediate effect. Employers were not obliged to consent to the employee's absence from work, as it is not equitable to any of the leaves specified by the Labour Code,³²⁷ or an employer can make its consent conditional on not paying the employee any wages for the duration of the absence. In this respect, the Labour Code merely states that if the employee is exempted from work with the employer's

consent, they shall be paid for the time missed in accordance with the terms of their agreement.³²⁸ The Labour Code was not modified during the pandemic.

115. If Covid-19 is considered to be an occupational disease, 100% sickness benefit is payable (occupational sickness benefit) to the employee. Accident sickness benefit can be granted if the insured person has contracted the virus during the course of the insured person's work. This could reasonably be envisaged for health care workers (doctors, nurses, paramedics, etc) who deal with persons infected with the virus, however, any employer may require that the National Public Health Centre (NPHC) accept the disease infecting their employees as an occupational disease. Occupational diseases are investigated and diagnosed by the NPHC under Governmental Decree No 27/1996. After the NPHC's decision, and the health insurance body also has to decide to recognise the occupational disease as an industrial accident for social security purposes under Article 52 of the Social Security Act. Statistics show that in 2021, out of approximately 12,000 Covid-19-related requests to the NPHC, 70% of the cases were related to health workers, 20% to teachers, and only 10% to other professionals.³²⁹ The amount of sick pay paid to employees was drastically increased from HUF 127 billion (USD 367 million) in 2019, to HUF 153 billion (USD 444 million) in 2020, and HUF 163 billion (USD 472 million) in 2021.³³⁰ However, the number of sick leave days (the first 15 days of incapacity)³³¹ decreased from 8.8 million in 2019 to 8.6 million in 2020, and grew again to 8.8 million in 2021.³³²

116. Please see Part VI.B below on privacy concerns relating to employer data collection on employee protection status regarding Covid-19.

5. Activation

117. Anyone with a secondary school degree is eligible to participate in a basic IT course, organized by selected private companies and financed through Government subsidy to mitigate the negative effects of job losses and to facilitate re-employment in sectors where computer literacy is required.³³³

6. Social partners

118. There has been no social dialogue going on concerning the special pandemic-related measures introduced by the Government, because social partners were largely ignored both at the national and workplace levels. A subsequent emergency decree amended the working time banking system, which allows employers to schedule working hours flexibly on a daily and weekly basis. Applying a working time banking system at workplaces is an issue which had formerly been subject to a collective agreement.³³⁴ Under this derogation, employers were able to unilaterally expand the reference period for working time banking. However, after the state of emergency was lifted, the law reinforced the extended reference period for working time banking and stipulated that collective agreements regulating this issue were not applicable.³³⁵

7. Other legal measures

119. There was an attempt to modify the Labour Code and codify 'home office' work or teleworking as a self-standing institution. This instrument is unregulated by the current labour law, yet, due to the pandemic, employers increasingly ordered employees to work from home. Eventually the bill was not discussed by the Parliament.³³⁶ However, a new definition of telework was provided by an amendment to the Labour Code, providing that telework means that the employee works part or all of their working time at a place separate from the employer's premises.³³⁷

VI. Human Rights and Vulnerable Groups

A. Civil liberties

120. Regarding freedom of assembly, during the first wave of the pandemic, outdoor events with more than 500 participants—and indoor events with more than 100 participants—were prohibited (see Part IV.A.3 above).³³⁸ While the Act on Transitional Rules allowed all events to be held, it also entitled the Government to establish special rules with regards to these events.³³⁹ The Government, based on this authorisation, prohibited music and dance events held either indoors or outdoors, regardless of their public, non-public, or regular nature, if the number of persons present there, including those working for the event, would exceed 500 persons.³⁴⁰ At that time, however, there was no restriction on the number of people who can attend sports events.³⁴¹ Football games were played in front of around 15,000 soccer fans in Budapest. During the third wave (from February to April 2021), a blanket ban on assemblies in public spaces was introduced and the decree imposed heavy fines of up to HUF 500,000 (USD 1445.72) for non-compliance.³⁴²

121. Students at the University of Theatre and Cinematic Arts, who were protesting for the university's autonomy for 70 days and were keeping up a blockade at the campus premises,³⁴³ ended their physical gathering as per the regulation, but declared that they would be continuing their #freeSZFE protest in the online space.

122. The Government drafted legislation practically banning adoption by same-sex couples, which was considered an attack on the LGBTQ community.³⁴⁴ Since freedom of assembly was restricted, no protests could be lawfully organized against the motion.³⁴⁵ During the pandemic, the Government by its majority in the National Assembly also passed a constitutional amendment³⁴⁶ providing that 'the mother is female, the father is male', ³⁴⁷ that children have a right to their identity in line with their sex by birth, and requiring that children be raised with a Christian interpretation of gender roles.³⁴⁸

123. Government Decree 484/2020 (10 November 2020) on the second phase of protective measures applicable during the period of state of danger was challenged before the Constitutional Court. The petitioners asked for the Court to declare the non-conformity of Article 5(1)-(2) of the Decree with the Fundamental Law, arguing that the provisions unnecessarily and disproportionately restricted the right of freedom of assembly, prevented the individual assessment of circumstances, established a general prohibition on the possibility of an effective remedy, and unlawfully discriminated against persons who assemble for different purposes, such as those who wished to exercise their right of freedom of assembly or those who assembled for other purposes such as the practice of religion or education. Moreover, petitioners maintained, as it was classified as an infraction and incurred a fine, that it had an additional chilling effect. In both cases, the Constitutional Court ruled that the restrictions were proportionate during the periods of state of danger.³⁴⁹

124. Freedom of movement was severely restricted during the periods of state of danger (see Parts IV.A.4 and 7 above).

125. Governmental decrees also enacted rules regarding travel restrictions.³⁵⁰ As of 1 September 2020, the Government introduced serious travel restrictions, similar to those that had been in effect during the first wave of the pandemic.³⁵¹ Access to the territory of Hungary was denied to persons other than Hungarian citizens arriving from abroad.³⁵²

Several categories of non-Hungarian citizens, however, were exempted from this prohibition and granted the same treatment as Hungarian citizens (see Part IV.A.2 and 7 above).³⁵³

126. Regarding freedom of speech, the new criminal law regulations on fearmongering triggered particular attention (see Part III above). A constitutional complaint aimed at establishing the incompatibility of the regulations with the Fundamental Law and aiming to annul Article 337(2) of Act C of 2012 of the Criminal Code was filed. However, the Constitutional Court ruled that the provisions were not in conflict with the Fundamental Law,³⁵⁴ since the prohibition is only applicable to individuals knowingly stating false or distorted facts, and does not apply to critical opinions. Therefore, this does not extend to untrue facts the untruthfulness of which the perpetrator was unaware. At the same time, the decision established as constitutional requirement that the provision on the offense of fearmongering only sanctions the disclosure of a fact which the perpetrator should have known was false at the time the act was committed, or which was distorted by the perpetrator themselves, and which is suitable to prevent or frustrate the imposition of measures during the special legal order.

127. With regards to access to information, information about the pandemic and specific anti-epidemic measures, decisions, and legislation was strongly restricted for journalists, citizens, and politicians. A Government decree allowing authorities and public bodies to respond to information requests within 45 days, which could be extended for a further 45 days,³⁵⁵ was harshly criticized because in normal circumstances freedom of information requests must be fulfilled in 15 days (which can be extended by a further 15 days).³⁵⁶ The extension of the deadline arguably is a serious infringement of freedom of information and indirectly infringes freedom of expression as the data provided after 45 (or 90 days) loses its relevance. This particularly hinders journalistic work and endangers the control functions carried out by opposition politicians. MP Bernadett Szél challenged the constitutionality of this measure, but the Constitutional Court did not examine the complaint on the merits arguing that it would be unnecessary as the Decree was not in effect at the moment the decision was made (for further information, see Part III.F above).³⁵⁷

B. Privacy

128. During the first wave (from March to June 2020), regulations relating to data protection and retention aimed to foster contact tracing. For the purpose of contributing to the work of the police as an epidemiological authority, data controllers had to, at the request of the police, forward personal data without delay,³⁵⁸ free of charge, and as a matter of priority compared to other data transmission obligations.³⁵⁹ Later on, for the purpose of modelling and analyzing the spread of the epidemic, the Minister responsible for innovation and technology, as Government member responsible for science policy and information technology, was authorized to access and process any available data. State and local government organs, economic operators, and individuals were obliged to provide assistance and the requested data to the Minister responsible for innovation and technology for the performance of his task.³⁶⁰ From April 2020 onwards, the epidemiological authority had to forward to the police, for the performance of its monitoring tasks, any decision on ordering official home quarantine or on epidemiological isolation, observation, quarantine, or restriction under Act CLIV of 1997 on healthcare, as a matter of priority.³⁶¹ Data not required to monitor compliance with rules on epidemiological containment and official home quarantine shall not be registered. Registered data shall be deleted when the official home quarantine, epidemiological isolation, observation, quarantine, or restriction is

lifted.³⁶² During the second wave (from August 2020 to February 2021) of the pandemic, the rights of the police relating to data collection and management were reinforced.³⁶³

129. Derogations from provisions regulating data requests and addressing data processing activities relating to Covid-19 were introduced too, suspending GDPR rights. In particular, Government Decree 179/2020 provides that, with regards to data processing for the purpose of the prevention, study, and detection of Covid-19, data controllers can suspend the fulfilment of data requests under Articles 15–22 of the GDPR until the state of emergency is revoked in Hungary.³⁶⁴ Moreover, the Decree contains details on the time limit and information requirements for access requests. In addition, according to the Decree, data controllers may comply with applicable data information obligations under Articles 13 and 14 of the GDPR by publishing an electronic notice which describes the purpose, legal basis, and scope of data processing activities.³⁶⁵ The emergency decree received much criticism from various European data protection authorities and civil rights groups. The head of the European Data Protection Board (EDPB) was rather concerned about the measure, arguing that it was unnecessary and detrimental. In its most recent plenary session, the EDPB also specifically discussed Hungary's emergency measures in light of European data protection law.³⁶⁶

130. Regarding the performance of organizational tasks relating to voluntary vaccination against Covid-19, further data management regulations were introduced.³⁶⁷ The National Health Insurance Fund was authorized to send healthcare service providers the mail or electronic address, phone number, or other contact address provided as part of registration of the person registering for vaccination, as well as any health and personal identification data required for vaccination. After vaccination, any data received had to be deleted without delay.

131. There were concerns about how employers could handle employee data on immunity. The National Data Protection and Freedom of Information Authority (*Nemzeti Adatvédelmi és Információszabadság Hatósághoz*) (NAIH) issued guidance regarding how employers can lawfully determine whether an employee is protected against Covid-19. For certain occupations or employees, it may be necessary and proportionate for employers to know whether the employee is protected against Covid-19, with regards to labour law, occupational health and safety, and work organization. Employers can only ask employees to present their Covid-19 Protection Certificate and the application for Covid-19 vaccination. The company cannot make copies of them, store them in any form or manner, or transfer them to third parties. The employer can only record that the employee is certified as being protected against Covid-19 and how long this protection will last.³⁶⁸

C. Gender

132. In line with global trends, reported cases of domestic violence increased during the lockdown in Hungary. In March 2020 alone, a one-third increase in cases was reported according to official sources—women's organizations' helplines had already been overloaded prior to the pandemic. Women in households where less severe forms of control and coercion had been exercised by the male partner prior to the Covid-19 pandemic faced a deterioration of their situation. Their isolation—often a tool for abusers—was made easier; the frustration of being stuck at home and having to face financial stress enhanced the risk of violence; and it was even more difficult to seek help outside the household—eg, to secure a place in one of the very few shelters for domestic abuse victims—for those whose lives were in danger. Despite the warning data, the Hungarian Government refused, and

continues to refuse, to sign the Istanbul Convention on Preventing and Combating Violence Against Women and Domestic Violence.³⁶⁹

133. Working women were more severely affected by the pandemic; as many as 13% of Hungarian women lost their jobs during the different periods of state of danger. Women are generally overrepresented in jobs in social services that were and still are at the forefront of tackling the crisis: education, social care, and the healthcare system. They therefore have been more prone to infection.³⁷⁰

D. Ethnicity and Race

134. According to the results of the last census conducted in 2001—the next census originally planned in 2021 was postponed by way of derogation from the provisions of Act CI of 2018 on the 2021 census and will be conducted in 2022³⁷¹—the five major minorities in Hungary include Roma (3.2 %), Germans (1.9 %), Slovaks (0.4 %), Romanians (0.4 %), and Croats (0.3 %).³⁷² Roma communities in Hungary faced severe challenges and experienced significant deterioration in their social and living conditions during the pandemic. Data on infections in the Roma community is unavailable, but interviews with about a dozen Roma, who often live in cramped and unsanitary conditions, reveal harrowing stories of suffering and death and of huge healthcare challenges.³⁷³ Roma communities in Hungary have been facing extreme vulnerability due to the ongoing pandemic. Drastic reductions in income led to higher levels of debt, mental health challenges, and food insecurity; public work programs have been drastically reduced; and those who had seasonal work during the summer are better off than those who had had regular employment but were laid off. Families are resorting to selling their assets (such as mobile phones) to be able to withstand the financial impact, and approximately 40% of Roma households require financial assistance during the pandemic, as they continue to pay household expenses such as food, medical bills, and rent. A fifth of the families surveyed noted struggles to pay for monthly utility bills as their main financial concern between March and July 2020, during the first wave of the pandemic. Mental health precarity has risen, owing to economic pressure topped with limited access to testing facilities, personal protective equipment, and general healthcare services, and Roma access to public services has seen dramatic declines.

135. Roma communities across the country have limited access to government support services and healthcare: 74% of households report not having access to hospital care in their localities, and just 4% of respondents say members of their family have been tested for Covid-19. With only 3% of households reporting using their municipalities for information on the pandemic, the research suggests a weak communication line between central government, local authorities, and Roma communities about restrictions designed to mitigate the pandemic and the availability of support measures and strategies on how to respond to their constituents. Access to education for Roma communities is significantly limited during this pandemic, due to the shift to online education. This in part results from the Roma community not having adequate access to technology infrastructure sufficient for following online education. Only 41% of households report having access to both cable and mobile internet, and 13% report no access to the internet at all. Therefore, school drop-outs have increased dramatically.³⁷⁴ As schools were closed, research data suggests that Roma children who had access to free school meals suffered direct deprivation as a result of education moving online.

136. New forms of discrimination appeared and hate crime has increased. Focus group respondents encounter a prevalent narrative that Roma communities are responsible for exacerbating the spread of the pandemic.³⁷⁵

E. Disability

137. Special provisions regarding people with physical or mental disabilities during the pandemic were rare. In the first wave, the general provisions applied to every Hungarian citizen. From the second wave of the pandemic onwards, persons with intellectual or psychosocial disability or autism spectrum disorder were not obliged to wear face masks.³⁷⁶

F. Elderly

138. On 8 September 2020, the Chief Medical Officer ordered a ban on visits in all residential care homes. For family members, visits could be granted based on compassionate grounds to say goodbye to an end-stage patient. Permission to leave the institution was only granted under exceptional circumstances by the head of the residential care home or on other reasonable grounds, eg for medical purposes or health evaluation. Residents, however, could go out into the gardens of these institutions. New residents could only be admitted if in possession of two negative SARS-CoV-2 PCR tests.³⁷⁷ During the opening hours of shops, a special period was reserved for the elderly (persons aged 65 or over).³⁷⁸ Vaccination started with people with the highest risk of infection, most notably with those who were retired.³⁷⁹

G. Children

139. Schools were closed from 16 March 2020 (see Part V.A.2 above). The measure was announced by the Prime Minister during a televised speech and was called a digital working order rather than a school closure. The arrangements had no official end date, but the common assumption was that it would continue into the school year of 2020/2021.³⁸⁰ The announcement was made at 8.30 pm on a Friday and forced the schools to start this digital working order on the next Monday morning, and children were forbidden to enter school buildings. Rules were relaxed a few days later to allow the children of essential workers to be at school for childcare. Kindergartens and nurseries had to provide services, and children had to be separated into small groups of a maximum of five children in the same room.³⁸¹

140. Teachers were obliged by the national school authority to provide digital teaching for the compulsory number of lessons and to follow the curriculum meticulously. Children were at school digitally from 8 am until early afternoon and got 'homework', which they were obliged to send to the teachers online. This created a nearly impossible situation in families with more than one child, especially if either or both of the parents also needed to work from home. In the majority of schools, there was no single platform teachers used, so many students and their parents also had to use several platforms in a single day. The majority of teachers were untrained and inexperienced in digital learning. They did not receive professional support officially, although there was a lot of self-organized support, especially on Facebook. However, according to research data, about 20% of children could not and have not been reached by these digital provisions due to lack of devices or internet connection. In about another 20% of families, there were no possibilities for multiple connections with only one suitable and accessible device in the household.³⁸² Some municipalities have introduced visits to families not connected to see if children were actually inside the house from 8 am to 4 pm in the case of primary school pupils, and 8 am to 2 pm in the case of secondary school pupils. Generally, parents had the right to keep their children at home if they were concerned about their health. The written part of the

final exams at secondary school was held from 4 May 2020 onwards—the oral and practical parts of the exams were, as a general rule, omitted.³⁸³

141. In September 2020, schools started functioning regularly,³⁸⁴ but during the second wave of the pandemic, on 11 November 2020, secondary schools began operating again according to a digital working order. Nurseries, kindergartens, and elementary schools remained open—headmasters of schools were in charge of adopting measures relating to social distancing and the wearing of face masks and of ensuring compliance with the protective measures specified by the Chief Medical Officer.³⁸⁵ Generally, children under the age of six were not obliged to wear face masks in public places.³⁸⁶ During the third wave in March 2021, a digital working order was reintroduced in elementary schools as well.³⁸⁷ After the Government announced that it would reopen schools on 19 April 2021,³⁸⁸ there was tremendous resistance from teachers, students, and parents to the decision.³⁸⁹ Eventually, the opening was postponed and (upper) grades from five to eight in primary schools and secondary schools and vocational training institutions reopened on 10 May 2021.³⁹⁰ After waves of protest by trade unions, teachers, and parents, the Government finally gave in and prioritized teachers in Hungary's vaccination plan, to inoculate them before the reopening of schools (see Part IV.A.4 above). Government Decree 599/2021 on the compulsory use of the coronavirus vaccination by employees of public institutions (like public schools) provided that employers must impose unpaid leave on unvaccinated employees, but the employer may decide whether to terminate the employment relationship with immediate effect after the one-year period.³⁹¹ Many petitioners turned to the Constitutional Court concerning Government Decree 599/2021. In its decision, the Constitutional Court decided that in the case of public servants, the persons concerned by the restriction of fundamental rights did not have to fear that, if they did not take up the vaccination, the State might force them to do so. Although the legislature had introduced serious disadvantages, such as termination without notice which resulted in severe financial loss, they did not amount to a complete deprivation of the right to self-determination in that matter, and the possibility of a sanction under the contested legislation did not result in a disproportionate interference with the applicant" right to self-determination concerning health matters.³⁹²

H. Prisoners

142. During the first wave, the Hungarian Prison Service called upon the relatives of detainees to minimize the number of visits. However, visits were still allowed if the family members were separated from the detainee by a plexiglass screen. The number of visitors was also reduced to two per visit, and the Hungarian Prison Service suggested that detainees avoid visits with their elderly or young relatives. Phone calls and Skype calls were allowed for everyone to a certain limit, but according to complaints received from relatives and attorneys, not all could use this facility, partially because of the lack of sufficient financial or technical resources of their family.³⁹³ Rule compliance in prisons was reviewed by the Ombudsman (see Part III.G above) as his almost only activity during the pandemic, due to the necessity to observe the related international obligations, such as the Optional Protocol to the Convention Against Torture (OPCAT). The disproportionate restriction of Skype calls for prisoners who had the possibility of personal visits to keep in touch resulted in an abuse of the right to communicate.³⁹⁴

143. Some institutions suspended visits, referring to the curfew restriction Hungary introduced on 27 March 2020.³⁹⁵ On 5 April 2020, a Government decree introduced tighter measures for prisons, including, among others, a two-week isolation for new detainees; a transfer to hospitals for new detainees with any symptom of Covid-19; and the prohibition of leaving the institution even if a close relative is dying or to attend a funeral.³⁹⁶ Act LVIII of 2020 authorised the Director General of the National Prison Administration to restrict

forms of contact that involve leaving penitentiary institutions. In practice, this still meant a total ban,³⁹⁷ meaning detainees were not allowed personal visits from their relatives from the end of March 2020 for a consecutive 16 months, after which restrictions were eased for four months on 1 July 2021 which made visits possible again, but under significantly stricter conditions than before the ban—such as children were not allowed to visit, a one-hour visit of at least once a month was reduced to a half-hour visit no more than once a month, and adults were only allowed to visit if they had a vaccination card. On 8 November 2021, the prison visitation ban was reintroduced. As of 14 April 2022, all penitentiary institutions remain under total lockdown to reduce health risks related to the pandemic despite the fact that the Government lifted the last Covid-19 restrictions outside penitentiaries on 7 March 2022. This long-standing total lockdown has put a severe burden on detainees' family ties.³⁹⁸

I. Non-citizens

144. Until 26 May 2020, asylum could only be sought at the border (inside the transit zone), because of the current status of the mass migration emergency,³⁹⁹ although in practice no new entries were allowed in the transit zones as of March 2020. Only those lawfully staying could apply for asylum in the country. On 26 May 2020, Government Decree 233/2020,⁴⁰⁰ and from 18 June 2020, the Transitional Act,⁴⁰¹ introduced new rules on asylum. Those wishing to seek asylum in Hungary, with a few exceptions noted below, must first personally submit a 'statement of intent for the purpose of lodging an asylum application' ('[m]enedékjogi kérelem benyújtására irányuló szándéknyilatkozat')⁴⁰² at the Embassy of Hungary in Belgrade or in Kyiv.⁴⁰³ The embassy must then forward the 'statement of intent' to the National Directorate-General for Aliens Policing (NDGAP) in Budapest, which shall examine it within 60 days.⁴⁰⁴ The NDGAP should make a proposal to the embassy and inform the would-be asylum seeker through the embassy whether to issue a special, single-entry permit to enter Hungary for the purpose of lodging an asylum application.⁴⁰⁵ The law does not clarify what criteria are considered by the NDGAP when deciding on such applications. Applicants receive an email with one paragraph stating that the NDGAP decided either to suggest or not to suggest the issuance of a single-entry permit. The decision therefore presents no reasoning and the law does not foresee any remedy. Those issued a single-entry permit can then travel to Hungary in order to submit an asylum application.⁴⁰⁶ The Transitional Act was supposed to regulate the asylum procedure only temporarily. It entered into force on 18 June 2020 when the first state of danger was terminated by Government Decree 282/2020 according to Article 408(1) of the Transitional Act,⁴⁰⁷ but it remained in force and is still in force in an amended form. The provisions of the Transitional Act relating to the asylum procedure (Articles 267-275) will be in force until 31 December 2021 according to Article 55 of the Act CLXII of 2020.⁴⁰⁸

145. Only people belonging to the following categories are not required to go through the process described above: beneficiaries of subsidiary protection who are staying in Hungary; family members of refugees and beneficiaries of subsidiary protection who are staying in Hungary; and those subject to forced measures, measures, or punishment affecting personal liberty, except if they have crossed Hungary illegally.⁴⁰⁹

146. For all the others, including foreigners legally staying in Hungary, it is no longer possible to apply for asylum in Hungary or at the border.⁴¹⁰

147. During the state of danger, special rules apply to third-country nationals unlawfully entering and/or staying in Hungary and to those seeking asylum, including: police are authorized to pushback across the border fence irregularly staying migrants who wish to seek asylum in Hungary from any part of the country, without any legal procedure or opportunity to challenge this measure; and the deadlines to seek judicial review against

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inadmissibility decisions and rejections of asylum applications decided in accelerated procedures are drastically shortened to eight days.⁴¹¹

148. Asylum seekers are to be held in transit zones for the entire asylum procedure without any legal basis for detention or judicial remedies.⁴¹² All vulnerable persons and unaccompanied asylum-seeking children over 14 years of age are also automatically detained in transit zones.⁴¹³

149. Although there is a possibility in Hungary for launching individual constitutional complaint procedures in certain cases, only a few cases were lodged before the Constitutional Court. In asylum cases, the applicable legal act could be challenged only much later than the actual violation, after the termination of the appellate court procedure.

150. From 1 September 2020, Hungary has closed its borders to all foreigners with the exception of Visegrad countries, with regards to migrant workers and non-residents (see Part IV above).⁴¹⁴

J. Indigenous peoples

151. There is no relevant information to be reported.

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Footnotes:

¹ See Government of Hungary, 'Covid-19 Cases - Number of confirmed Covid-19 cases by county' (accessed 22 April 2022).

² See Government of Hungary, 'There are two patients with coronavirus in Hungary' (4 March 2020).

³ HungaryToday, 'First Coronavirus Death Reported in Hungary, Case Count Rises to 32' (15 March 2020).

⁴ Portfolio, '40,000 people have already died in Hungary from the coronavirus' (11 January 2022).

- ⁵ See Government of Hungary, 'Orbán: We have defeated the fifth wave' (4 March 2022).
- ⁶ Fundamental Law (18 April 2011), art 53(1).
- ⁷ Z Szente, Constitutional Law in Hungary (Wolters Kluwer 2022).

⁸ N Chronowski, ?The post 2010 "Democratic Rule of Law" practice of the Hungarian Constitutional Court under a Rule by Law Government' (2021) The Hungarian Journal of Legal Studies – Acta Juridica Hungarica 136–158, 145; F Gárdos-Orosz, ?The reference to constitutional traditions in populist constitutionalism – The case of Hungary' (2021) The Hungarian Journal of Legal Studies – Acta Juridica Hungarica 23–51.

⁹ T Drinóczi and A Bień-Kacała, ?Illiberal Constitutionalism: The Case of Hungary and Poland' (2019) 20 German Law Journal 1140–1166 (22 April 2022); G Walker, ?The Idea of Non-Liberal Constitutionalism' in I Shapiro and W Kymlicka (eds), *Ethnicity and Group Rights* (New York University Press 1997), 154–184.

¹⁰ See Government of Hungary, 'Hétfőtől kórházparancsnokok segítik a kórházak m? ködését és az egészségügyi készlet védelmét' [From Monday, hospital commanders will help hospitals operate and protect medical supplies] (28 March 2020); Ministry of Defense, 'Az orvosigazgatókat tehermentesítik a kórházparancsnokok' [Medical directors are helped by hospital commanders] (30 March 2020).

¹¹ Government Decree on the performance of the public health tasks of the capital and county government offices and the district (capital district) offices, as well as on the appointment of the state health administration body (385/2016) (2 December 2016), arts 6-6/E; amended by Government Decree amending certain government decrees regarding the establishment of the National Center for Public Health (162/2018) (10 September 2018), art 35.

¹² Government of Hungary, 'Official website' (accessed 3 May 2022).

¹³ Government Decree on the performance of the public health tasks of the capital and county government offices and the district (capital district) offices, as well as on the appointment of the state health administration body (385/2016) (2 December 2016), art 6.

¹⁴ Government Decree on the performance of the public health tasks (...) (385/2016) (2 December 2016), art 6/A(1).

¹⁵ Government Decree on the declaration of state of danger (40/2020) (11 March 2020), art 2(1); Government Decree on the declaration of state of danger (478/2020) (3 November 2020), art 2(1); Government Decree on the declaration of state of danger and the entry into force of state of danger-related measures (27/2021) (29 January 2021), art 2(1).

¹⁶ Fundamental Law (18 April 2011), art 53.

¹⁷ Act CXXVIII of 2011 on disaster management and amending certain related Acts; Act CLIV of 1997 on healthcare.

¹⁸ Act CLIV of 1997 on healthcare, arts 228–232/G.

¹⁹ Government Decree introducing a state of epidemiological preparedness (283/2020) (17 June 2020), art 1.

20 Government Decree on the declaration of state of danger (478/2020) (3 November 2020).

²¹ Government Decree terminating the state of danger declared on 11 March 2020 (282/2020) (17 June 2020).

- ²² Fundamental Law, Special Legal Order (18 April 2011), arts 48-54.
- ²³ Fundamental Law (18 April 2011), art 49.
- ²⁴ Fundamental Law (18 April 2011), art 50.
- ²⁵ Fundamental Law (18 April 2011), art 51.
- ²⁶ Fundamental Law (18 April 2011), art 51/A.
- ²⁷ Fundamental Law (18 April 2011), art 52.
- **28** Fundamental Law (18 April 2011), art 53.
- ²⁹ Fundamental Law (18 April 2011), art 53(1).

³⁰ Z Szente and F Gárdos-Orosz, 'Using emergency powers in Hungary: against the pandemic and/or democracy?' in M C Kettlemann and K Lachmayer (eds), *Pandemocracy in Europe: Power, Parliaments and People in Times of COVID-19* (Hart Publishing 2022) 155–178.

31 Government Decree on the declaration of state of danger (40/2020) (11 March 2020), art 1.

³² Government of Hungary, 'The Government is declaring a state of danger throughout the country' [*Veszélyhelyzetet hirdet az ország teljes területére a kormány*] (11 March 2020).

³³ As revoked by Government Decree terminating the state of danger (282/2020) (17 June 2020), art 1.

³⁴ Fundamental Law (18 April 2011), art 53(2).

³⁵ Fundamental Law (18 April 2011), art 53(3).

³⁶ Fundamental Law (18 April 2011), art 53(1)-(2).

³⁷ The First Enabling Act (30 March 2020), art 3(1).

³⁸ The First Enabling Act (30 March 2020), art 3(1).

³⁹ Fundamental Law (18 April 2011) art 54(3); See European Parliament,
'P9_TA(2020)0054 EU coordinated action to combat the COVID-19 pandemic and its consequences' (2020/2616 (RSP)) (17 April 2020), [46]; European Parliament, 'Hungary's emergency measures: MEPs ask EU to impose sanctions and stop payments' (14 May 2020).

40 Government of Hungary, 'The WHO has classified a coronavirus infection as a pandemic' [*A WHO világjárványnak minősítette a koronavírus-fertőzést*] (11 March 2020).

⁴¹ The First Enabling Act (30 March 2020), art 2(1).

⁴² The First Enabling Act (30 March 2020), art 4.

 43 The First Enabling Act (30 March 2020), art 8; Act LVII of 2020 on terminating the state of danger, art 2.

44 Government Decree terminating the state of danger declared on 11 March 2020 (282/2020) (17 June 2020).

45 The First Transitional Act, art 314.

⁴⁶ The Government immediately exercised its new authority via Government Decree introducing a state of epidemiological preparedness (283/2020) (17 June 2020).

 $^{\mathbf{47}}$ Government Decree introducing a state of epidemiological preparedness (283/2020) (17 June 2020), art 1(2).

48 The Second Enabling Act (10 November 2020).

⁴⁹ The Second Enabling Act (10 November 2020), art 5; however, the second state of danger was already proclaimed by Government Decree on the declaration of state of danger (478/2020) (3 November 2020), which had a temporal scope of 15 days; thus, it is argued that the Second Enabling Act was merely prolonging the initial 15 days to 90 days.

⁵⁰ The First Enabling Act (30 March 2020).

⁵¹ The Second Enabling Act (10 November 2020), art 2(1).

⁵² The Third Enabling Act (22 February 2021), art 5.

⁵³ Act XL of 2021, amending Act I of 2021 on the containment of the Covid-19 pandemic, arts 2–3.

⁵⁴ Act LVIII of 2020; Act CIV of 2020.

⁵⁵ The First Transitional Act, arts 314-319.

⁵⁶ Act CLIV of 1997 on healthcare, art 228; amended by The First Transitional Act, art 313.

⁵⁷ Act CXXVIII of 2011.

⁵⁸ See eg Government Decree on the declaration of state of danger (478/2020) (3 November 2020); Government Decree on further protective measures applicable during the period of state of danger (479/2020) (3 November 2020); Government Decree on the first phase of gradually lifting the protective measures (144/2021) (27 March 2021); Government Decree on returning to normal education in public upbringing institutions, vocational training institutions and in adults training, and terminating the extraordinary break in kindergartens (177/2021) (15 April 2021).

⁵⁹ Act CLIV of 1997 on healthcare, art 228(1); amended by the First Transitional Act, art 313.

⁶⁰ Act CLIV of 1997 on healthcare art 228(2)(b); enacted by the First Transitional Act, art 314.

⁶¹ Act CLIV of 1997 on healthcare art 228(2)(b)-(2)(c); enacted by the First Transitional Act, art 314.

 62 Government Decree introducing a state of epidemiological preparedness (283/2020) (17 June 2020), art 1(1).

⁶³ Act XCIX of 2021 on the transitional rules related to the state of danger; according to Act CXV of 2021 on the entry into force of Act XCIX of 2021 on the transitional rules related to the state of danger.

⁶⁴ Fundamental Law (18 April 2011), art 53(2)-(3).

65 Act CXXVIII of 2011.

⁶⁶ A state of epidemiological preparedness was declared by Government Decree introducing a state of epidemiological preparedness (283/2020) (17 June 2020); and was amended by Government Decree (584/2020) (15 December 2020), art 1; as a result Government Decree introducing a state of epidemiological preparedness (283/2020) (17 June 2020) will be in force until 17 June 2022.

⁶⁷ Decree of the Minister of the Interior on the implementation of Government Decree on the rules of the asylum procedure during the state of danger declared for the prevention of the human epidemic endangering life and property and causing massive disease outbreaks, for the elimination of its consequences, and for the protection of the health and lives of Hungarian citizens (233/2020) (26 May 2020) (15/2020) (26 May 2020); Decree of the Minister of the Interior on the procedure for making a declaration of intent to lodge an application for asylum (16/2020) (17 June 2020).

⁶⁸ Decision 1/2021 (6 April 2021) BM; Decision 3/2021 (30 April 2021) BM; Decision 4/2021 (22 May 2021) BM; Decision 5/2021 (2 July 2021) BM.

⁶⁹ National Public Health Centre, 'Information on the new coronavirus' [*Tájékoztató az új koronavírusról*] (23 January 2020).

⁷⁰ National Public Health Centre, 'Coronavirus information English' [Koronavírus tájékoztatók English] (accessed 1 May 2022); National Public Health Centre, 'General precautions in relation to the new Coronavirus infection' (13 March 2020); National Public Health Centre, 'Isolation, quarantining, and self-surveillance concerning the Coronavirus COVID-19 outbreak' (13 March 2020); National Public Health Centre, Opportunities to Reduce Contact Numbers – Community Events In Relation to COVID-19 Virus Infection' (14 March 2020); National Public Health Centre, 'Coronavirus disease (COVID-19) FAQ' (9 March 2020).

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⁷² Government of Hungary, 'Information website on the coronavirus' [*Tájékoztató oldal a koronavírusról*] (accessed 1 May 2022).

⁷³ Government of Hungary, 'About Hungary' (accessed 1 May 2022).

⁷⁴ Government of Hungary, 'Brochures available for download' [*Letölthető tájékoztatók*] (accessed 1 May 2022).

⁷⁵ Government of Hungary, 'The Government's call to the elderly: stay home!' [A kormány felhívása az idősekhez: maradjanak otthon!] (20 March 2020).

76 Government Decree on the measures to be taken during the state of danger declared for the prevention of the human epidemic endangering life and property and causing massive
disease outbreaks, for the elimination of its consequences, and for the protection of the health and lives of Hungarian citizens (III) (46/2020) (16 March 2020), art 2.

⁷⁷ Government of Hungary, 'National Chief Medical Officer: Registration for the vaccination has started' [*Országos tisztifőorvos: elindult a regisztráció a védőoltásra*] (8 December 2020); Government of Hungary, 'Vaccine information' [*Vakcinainfó*] (accessed 1 May 2022).

⁷⁸ Government Decision setting up the Operational Corps Responsible for the Containment of the Coronavirus Epidemic (1012/2020) (31 January 2020), 4; Government Decree on the responsibilities of the Operational Corps operating during the period of state of epidemiological preparedness (286/2020) (17 June 2020), art 2(2)(f).

⁷⁹ Government of Hungary, 'National Chief Medical Officer: Extreme discipline is required' [*Országos tisztifőorvos: rendkívüli fegyelmezettségre van szükség*] (11 November 2020); Government of Hungary, 'National Chief Physician: We live in the most critical weeks of epidemic management' [*Országos tisztifőorvos: a járványkezelés legkritikusabb heteit éljük*] (17 March 2021); National Public Health Centre, 'General precautions for new coronavirus infection' [*Általános óvintézkedések az új koronavírus fertőzéssel*] (13 March 2020); National Public Health Centre, 'Isolation, epidemiological surveillance and selfmonitoring for COVID-19 virus infection' [*Elkülönítés, járványügyi megfigyelés és önmegfigyelés a COVID-19 vírus fertőzéssel*] (13 March 2020).

⁸⁰ National Public Health Centre, 'Practical advice on coronavirus for kindergartens and nurseries' [*Gyakorlati tanácsok koronavírussal kapcsolatban óvodák, bölcsődék részére*] (10 March 2020).

⁸¹ National Public Health Centre, 'How to wash your hands properly' [*Helyes kézmosás menete*] (16 March 2020).

82 National Public Health Centre, 'Food involvement with coronavirus' [Élelmiszerek érintettsége a koronavírussal kapcsolatosan] (28 February 2020); National Public Health Centre, 'Food safety advice to the general public during the coronavirus epidemic' [Élelmiszerbiztonsági tanácsok a lakosság részére a koronavírus járvány idején] (24 March 2020).

⁸³ National Public Health Centre, 'Advice for animal keepers during the coronavirus epidemic' [*Tanácsok állattartóknak koronavírus járvány idején*] (23 March 2020); National Public Health Centre, 'Animal welfare advice for livestock holdings during the coronavirus pandemic' [*Állatvédelmi szempontú tanácsok koronavírus járvány idején a haszonállat tartó gazdaságok vonatkozásában*] (24 March 2020).

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85 National Public Health Centre, 'Information for employers about COVID-19 virus infection' [*Tájékoztató munkáltatói lehetőségekhez a COVID-19 vírus fertőzéssel kapcsolatban*] (14 March 2020).

⁸⁶ National Public Health Centre, 'Precautions for pregnant women and mothers with regard to their own health and the health of their baby with regard to COVID-19 virus

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⁹³ Act No CXXX of 2010 on Legislative Drafting.

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⁹⁷ Hungarian Parliament, 'Interpellations' (accessed 1 May 2022).

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 Alkotmánybíróság 3326/2020 (VIII.5) ABV (Constitutional Court); Az Alkotmánybíróság
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¹⁰⁵ Government Decree on certain procedural measures applicable during the period of state of danger (74/2020) (31 March 2020), art 21(3); amended, on 1 June 2020, by Government Decree amending Government Decree on certain procedural measures applicable during the period of state of danger (74/2020) (31 March 2020) and Government Decree amending certain rules on sentence enforcement in connection with the declaration of state of danger (90/2020) (5 April 2020) (229/2020) (25 May 2020), art 2.

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¹⁰⁹ J Fehér, 'Az Országos Bírósági Hivatal szerint felgyorsult a bíróságok munkája, egy év alatt 1,15 millió ügyet fejeztek be' [*According to the National Office of the Judiciary, the work of the courts has accelerated, with 1.15 million cases closed in one year*] telex (Online, 22 June 2021). ¹¹⁰ For more information on the digitalization of courts in Hungary, see Sz Kékedi, 'Hogyan tovább bírósági digitalizáció avagy hogyan lett az elektronikus kapcsolattartás a veszélyhelyzetben az ítélkezés kulcsa?' [What's next judicial digitization or how did electronic communication become the key to judgment in the state of danger?] (2020) 2 In Medias Res 308-321.

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¹²⁶ Act LV of 2018 on the right of assembly, art 2(1).

¹²⁷ Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), Preamble, arts 4(1), 5(1)-(2).

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¹³¹ See eg Gábor Török's opinion, Sz. J., 'Török Gábor a választási törvény módosításáról: másfél évvel a választások előtt ez tagadhatatlanul hatalomtechnikai trükközés' [Gábor Török on the amendment of the Election Act: one and a half years before the elections, this is undeniably a trick of power technology] nyugat.hu (Online, 11 November 2020).

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¹³⁴ See 'Ministry of Inferior', 'Operational Corps recommends introduction of visiting ban in hospitals and old people's homes' (8 March 2020).

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¹⁵⁸ The Third Enabling Act (22 February 2021), art 2(4)(17); Government Decree on renewing certain state-of-danger measures related to the state of danger declared on 8 February 2021 (271/2021) (21 May 2021), art 1(17).

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163 Government Decree on the declaration of state of danger (478/2020) (3 November 2020), art 1.

164 (Alkotmánybíróság) 15/2021 (V.13) ABH (Constitutional Court).

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189 Government Decree on restricting movement (71/2020) (27 March 2020), art 5.

190 Government Decree extending the restriction on movement (95/2020) (9 April 2020), art 3.

¹⁹¹ Government Decree on further protective measures applicable during the period of state of danger (479/2020) (3 November 2020), art 1(1)-(2); Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), Preamble, art 3.

¹⁹² Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), Preamble, art 3(5)-(7).

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194 Government Decree on the measures to be taken during the state of danger (...) (41/2020) (11 March 2020), arts 2–3.

¹⁹⁵ Government Decree on travel restrictions during the period of state of epidemiological preparedness (291/2020) (17 June 2020), art 15.

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202 Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 3.

 203 Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 4(1)-(2).

²⁰⁴ Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 4(3).

205 Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 5.

206 Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 6; Government Decree on restricting movement (71/2020) (27 March 2020).

207 Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 7.

208 Government Decree on restricting movement (71/2020) (27 March 2020), art 2.

 209 Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), art 6(3)-(5).

²¹⁰ Government Decree on the measures to be taken during the state of danger (...) (41/2020) (11 March 2020), art 4(b); Government Decree on extraordinary measures relating to the state of danger declared for the protection of health and lives and for the restoration of national economy (81/2020) (1 April 2020), art 6(2).

²¹¹ Government Decree on the measures to be taken during the state of danger (...) (41/2020) (11 March 2020), art 4(c); amended by Government Decree on the measures to be taken during the state of danger (...) (II) (45/2020) (14 March 2020), art 6(e); Government Decree on extraordinary measures relating to the state of danger declared for the protection of health and lives and for the restoration of national economy (81/2020) (1 April 2020), art, 6(3).

²¹² Government Decree on protective measures in the capital (211/2020) (16 May 2020), art 7(1)-(2).

²¹³ Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 1(1)-(2).

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215 Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), arts 7-8; Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 11.

²¹⁶ Regarding the territory of Hungary, with the exception of Budapest Capital, see Government Decree on the next phase of protective measures (207/2020) (15 May 2020), art 1(1); regarding the territory of Budapest Capital, see Government Decree on protective measures in the capital (211/2020) (16 May 2020), art 1(1); regarding the territory of Budapest Capital, see Government Decree on the next phase of protective measures in the capital (240/2020) (27 May 2020), art 1(1).

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218 Government Decree on the next phase of protective measures (207/2020) (15 May 2020), art 2(1)-(2).

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²²⁰ Government Decree on the next phase of protective measures (207/2020) (15 May 2020), art 5(1)-(2); during family events, the protective distance according to Government Decree on protective measures (168/2020) (30 April 2020) shall be maintained; Government Decree on the next phase of protective measures (207/2020) (15 May 2020), art 5(3).

²²¹ Government Decree on protective measures in the capital (211/2020) (16 May 2020), art 6(1)-(2).

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²²³ Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), art 29.

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²²⁵ Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), art 8.

²²⁶ Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), art 9.

²²⁷ Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), art 10(3)-(4).

²²⁸ Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), art 5(1)-(3).

²²⁹ Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), art 12.

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 233 Government Decree on the second phase of protective measures applicable during the period of state of danger (484/2020) (10 November 2020), art 1(1)(b).

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²³⁵ Government Decree on restricting movement (71/2020) (27 March 2020); Government Decree extending the restriction on movement (95/2020) (9 April 2020).

²³⁶ Government Decree on restricting movement (71/2020) (27 March 2020), art 1(1).

²³⁷ Government Decree on restricting movement (71/2020) (27 March 2020), art 3.

²³⁸ Government Decree on restricting movement (71/2020) (27 March 2020), art 6(1).

²³⁹ Government Decree on restricting movement (71/2020) (27 March 2020), art 6(2).

²⁴⁰ Government Decree on protective measures (168/2020) (30 April 2020), art 2(3).

²⁴¹ Government Decree on protective measures (168/2020) (30 April 2020), art 2(1).

242 Government Decree on the next phase of protective measures (207/2020) (15 May 2020), art 2(1)-(2).

²⁴³ Government Decree on protective measures (168/2020) (30 April 2020), art 2(2).

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²⁴⁵ Government Decree on protective measures in the capital (211/2020) (16 May 2020), art 4(1)-(2); Government Decree on the next phase of protective measures in the capital (240/2020) (27 May 2020), art 2(1)-(2).

²⁴⁶ On the basis of Article 53(1) of the Fundamental Law (18 April 2011); the Government terminates the state of danger under Government Decree on the declaration of state of danger (40/2020) (11 March 2020); Government Decree on the declaration of state of danger (40/2020) (11 March 2020) shall be repealed; Government Decree terminating the state of danger declared on 11 March 2020 (282/2020) (17 June 2020), arts 1, 3.

²⁴⁷ Government Decree on the measures to be taken during the state of danger (...)(41/2020) (11 March 2020), arts 2–3.

²⁴⁸ Government Decree on the measures to be taken during the state of danger (...) (41/2020) (11 March 2020), art 3(1)(a).

²⁴⁹ Government Decree on the measures to be taken during the state of danger (...) (41/2020) (11 March 2020), art 3(1)(b)-(d).

²⁵⁰ Government Decree on the measures to be taken during the state of danger (...) (41/2020) (11 March 2020), art 3(1)(b).

²⁵¹ Government Decree on the measures to be taken during the state of danger (...) (41/2020) (11 March 2020), art 3(1)(c).

²⁵² M Kovács-Angel, 'Even without a test, your GP may classify you as infected' [*Teszt nélkül is fertőzöttnek minősíthet a háziorvos*] 24.hu (21 September 2020); National Public Health Centre, 'Procedure for the new coronavirus identified in 2020' [*Eljárásrend a 2020. évben azonosított új koronavírussal kapcsolatban*] (9 October 2020); the actual and the only available version of the procedure was published on 5 April 2022, see National Public Health Centre, 'Procedures Epidemiological rules for SARS-CoV-2 infections 5 April 2022' [*Eljárásrend SARS-CoV-2 okozta fertőzések esetén követendő járványügyi szabályok 2022. április "05"*] (5 April 2022).

²⁵³ National Public Health Center, 'Procedures Epidemiological rules for SARS-CoV-2 infections 5 April 2022' [*Eljárásrend SARS-CoV-2 okozta fertőzések esetén követendő járványügyi szabályok 2022. április "05"*] (5 April 2022), ss 3.1, 3.1.1.

²⁵⁴ Ministry of Human Resources State Secretariat for Healthcare, 'Information about the new coronavirus disease (COVID-19)' [*Tájékoztató az új koronavírus betegséggel* (COVID-19) kapcsolatban] (13 March 2020); National Public Health Centre, 'Procedures Epidemiological rules for SARS-CoV-2 infections 5 April 2022' [*Eljárásrend SARS-CoV-2 okozta fertőzések esetén követendő járványügyi szabályok 2022. április "05"*] (5 April 2022).

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 ²⁵⁹ J Barát, 'Fourth wave: incomplete defence' [Negyedik hullám: hiányos védekezés] 168 (Online, 25 October 2021).

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267 National Public Health Centre, 'Ordering a ban on visits to inpatient health care providers' [Látogatási tilalom elrendelése a fekvőbeteg-szakellátást nyújtó egészségügyi szolgáltatóknál] (9 September 2020); National Public Health Center, 'DECISION – ordering a ban on visits to all inpatient health care providers operating in Hungary, both publicly funded and non-publicly funded' [HATÁROZAT – Látogatási tilalom elrendelése a Magyarország területén m?ködő összes – közfinanszírozott és nem közfinanszírozott – fekvőbeteg-szakellátást nyújtó egészségügyi szolgáltatónál] (8 September 2020).

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²⁷⁶ Government Decree on the measures to be taken during the state of danger (...) (III) (46/2020) (16 March 2020), art 2.

²⁷⁷ Government Decree extending the restriction on movement (95/2020) (9 April 2020), arts 2, 6(1); Government Decree on protective measures (168/2020) (30 April 2020), arts 3,

10(3); Government Decree on protective measures in the capital (211/2020) (16 May 2020), arts 3, 10(2).

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³¹⁷ Decision 3326/2020. (VIII. 5.) AB (14 July 2020) (Constitutional Court).

³¹⁸ Act CXXX of 2021, art74.

³¹⁹ Protected sectors are listed in eg, Government Decree 47/2020 on immediate measures (18 March); Government Decree 103/2020 on support for the employment of workers in the field of research and development under the Economic Protection Action Plan during the state of danger (10 April 2020); and Government Decree 485/2020 on certain economy protection measures (10 November 2020), art 5.

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³²¹ Act I of 2012 on the Labour Code, art 66(8).

322 Act I of 2012 on the Labour Code, arts 71-76.

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³²⁴ Government Decree 47/2020 on immediate measures (18 March), art 6(1) (with a view to ensuring compliance with prohibitions and restrictions ordered within the period of state of danger); see Government Decree 40/2020 on the declaration of state of danger (11 March 2020);

³²⁵ Calculation method: HUF 107,065* 2 * 0.5 * 0.7 = HUF 74 945.5.

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³³⁴ Government Decree 104/2020 on the supplementation of the labour law rules within the framework of the Economic Protection Action Plan of Government Decree 47/2020 on immediate measures necessary for alleviating the effects of the coronavirus pandemic on national economy (10 June 2020).

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³⁴⁶ Ninth Amendment of the Fundamental Law of Hungary (*Magyarország* Alaptörvényének kilencedik módosítása).

347 Fundamental Law, art L(1).

348 Fundamental Law, art XVI(1).

³⁴⁹ Order IV/288/2021 (Constitutional Court); and Order IV/1171/2021 (Constitutional Court).

³⁵⁰ See eg Government Decree 41/2020 on the measures to be taken (11 March 2020), art 1; in May 2020 Hungary began to open its borders: Government Decree 216/2020 on crossing the border from the Republic of Austria (21 May 2020); Government Decree 218/2020 on crossing the border from the Slovak Republic (21 May 2020); Government Decree 226/2020 on crossing the border from the Republic of Serbia (25 May 2020); Government Decree 235/2020 on crossing the border from the Czech Republic and the Slovak Republic (26 May 2020); Government Decree 243/2020 on crossing the border from the Republic of Slovenia (28 May 2020); Government Decree 251/2020 on crossing the border from the Republic of Bulgaria (29 May 2020); Government Decree 262/2020 on crossing the border from the Republic of Austria, the Czech Republic and the Slovak Republic (5 June 2020); Government Decree 263/2020 laying down special rules on border crossing (6 June 2020).

³⁵¹ In force from 1 September 2020 to 22 June 2021, Government Decree 407/2020 temporarily reintroducing border control (30 August 2020).

352 Government Decree 408/2020 on travel restrictions during the period of state of epidemiological preparedness (30 August 2020), arts 2–4, 14.

353 Government Decree 408/2020 on travel restrictions (30 August 2020), arts 1, 5–7, 9–13.

354 Decision 15/2020 (VII. 8) AB (Constitutional Court).

355 Government Decree 521/2020 (XI.25.) on derogation from certain data request provisions during the pandemic (25 November 2020).

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 358 In accordance with Act XLVII of 1997, art 5(3), on the processing and protection of health data.

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362 Government Decree 81/2020 on extraordinary measures relating to the state of danger declared for the protection of health and lives and for the restoration of national economy (1 April 2020), art 3(6).

363 Government Decree 408/2020 on travel restrictions during the period of state of epidemiological preparedness (30 August 2020), arts 15–16, in force since 1 September 2020.

364 Government Decree 179/2020 on derogations from certain data protection and data request provisions during the state of danger (4 May 2020).

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³⁷⁹ Government Decree 479/2020 on further protective measures applicable during the period of state of danger (3 November), art 9/A; amended by Government Decree 552/2020 amending certain government decrees regarding the period of the state of danger (2 December 2020), art 1.

380 Government Decision 1102/2020 on the introduction of a new work schedule in public education and vocational training institutions due to the coronavirus (14 March 2020), art 1.

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407 Government Decree 282/2020 terminating the state of danger declared on 11 March 2020 (VI. 17.), art 1.

408 Act CLXII of 2020 on the Government Personnel Decision Support System, art 55.

409 Government Decree 233/2020 on the rules of the asylum procedure (V. 26.), art 5(1); Act LVIII of 2020 on the transitional rules, art 271(1).

410 Government Decree 233/2020 on the rules of the asylum procedure (V. 26.), art 1; Act LVIII of 2020 on the transitional rules, art 267.

⁴¹¹ Act LXXX of 2007 on asylum, art 68; Asylum Information Database, *Country Report, Hungary* (accessed 5 August 2021).

⁴¹² Government Decree 233/2020 on the rules of the asylum procedure (V.May), art 4(5). Act LVIII of 2020 on the transitional rules, art 270(5).

413 Asylum Information Database, *Country Report, Hungary* (accessed 5 August 2021).

414 Government Decree 407/2020 temporarily reintroducing border control (VIII. 30.), art 1.