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Gender and Professional Work in Russia and Hungary

Chapter 13 in *Gender in Twentieth-Century Eastern Europe and the USSR* edited by Catherine Baker¹

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Introduction

This chapter explores the similarities and differences in the histories of women's advancement in professional work in the 20th-century state socialist context of Hungary and Russia (the largest republic of the USSR). The dramatic increase in the number of women in paid labour was heralded as a major socialist achievement: women constituted 51 per cent of the workforce in Soviet Russia and 41 per cent in Hungary in 1970.¹ Moreover, women in socialist countries seemed to have achieved the holy grail of western feminist pursuit by gaining access to professions such as law, medicine and engineering, traditionally dominated by men in most western countries.² By the mid-1970s, 60 per cent of workers in professional occupations in the USSR were women.³ The USSR and other socialist countries are often referred to as an (Eastern) bloc due to similarities in politics and policies; however, the difference between the countries within the bloc must not be underplayed. This chapter demonstrates similarities and differences between the histories of women's work in Soviet Russia and Hungary through exploring women's advances in two professions – medicine and

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² The authors have made equal contributions to this chapter.

law. In doing so, it aims to understand how far one can speak of a common history of gender and professional work in 20th-century state socialist countries.

At the end of World War II, Hungary (as well as Bulgaria, Romania, Hungary, Poland, Eastern Germany and part of Czechoslovakia) was in the so-called zone of 'Soviet influence'. Together with Yugoslavia and Albania they formed the 'Soviet Bloc', a group of countries expected to follow the leadership of the Communist Party of the Soviet Union and on the whole, adopt Soviet models of ideology and policies, including those related to gender equality. However, the adoption of Soviet policies, including those related to gender equality at work, was a complex process; moreover, gender-related labour policies underwent much change even in Soviet Russia itself. A more nuanced and contextual understanding of the comparative histories of gender and professional work requires seeing women's position in the professions in relation to varieties of state socialism. That is, it must take into consideration the specific historical, structural and cultural contexts of individual countries, as well as the relationships between them. This chapter's comparison of Russia and Hungary demonstrates how this might be done.

After comparing the state socialist histories of Russia and Hungary, the chapter gives an overview of the development of the professions in socialist societies and discusses socialist policies on women and professional work. It then turns to Éva Fodor's concept of women's limited inclusion in the world of paid work, developed with reference to Hungary and Austria, to explore women's position in medical and law professions in Hungary and Russia.⁷ As the chapter demonstrates, there were many similarities in the patterns of Russian and Hungarian women's inclusion in and exclusion from the professions in these two contexts, but the gendered work histories of the two countries were by no means the same.

The Russian and Hungarian Contexts

Before comparing women's participation in professional work in Russia and Hungary, the two countries' paths to socialism, and the relationship between them, must be understood. Soviet Russia was the largest republic of the USSR and a flagship of radical communist policies. After the Bolshevik revolution in October 1917, the Russian Communist Party came to power and the country embarked on dramatic and large-scale social, political and economic transformations, including the abolition of private property, nationalization of industries, mass-scale industrialization, agricultural collectivization and centralized economic planning.⁸ The history of socialism in Russia was characterized by several periods, from the 1917 Bolshevik regime and New Economic Policies in 1921, followed by Stalin's rule and repressions between 1922 and 1952, Khrushchev's thaw in 1953, Gorbachev's perestroika of 1985 and the eventual dissolution of the USSR in 1991. During these periods, work-related gender agendas inevitably also varied - from genuine excitement and enforcement of equality policies in the revolutionary years and an unprecedented increase of women in paid work, to declarations that 'the woman question' had been resolved in the 1960s and a resurgence of domesticity rhetoric in the late 1980s.¹⁰

The context of Hungarian state socialism, meanwhile, began at the end of World War II when Hungary was in economic chaos. After a brief period of multi-party democracy, the Hungarian Communist Party gained power in 1949 and a new, 'Soviet-style' constitution came into force. The country embarked on rapid and extensive industrialization, which lasted until the early 1960s, a period often referred to as the 'classical', Stalinist model of socialism in Hungary. The curtailment of personal and political freedoms and poverty stirred

resentment, contributing to an uprising against Communist rule in 1956. Although the revolution was overpowered by Soviet military invasion and followed by severe retaliation, the new regime, led by János Kádár, sought to reconstruct Hungarian Communism rather than restore the Hungarian variant of Stalinism. After 1966 economic reforms were introduced, leading to improved standards of living. At the same time, a new, unwritten social contract between the leadership of the Hungarian Communist Party and the population emerged: Communist rule was not to be criticized or opposed openly, and in return individuals were allowed more freedom from state interference than before 1956. As a result, the Hungarian version of state socialism is often termed 'goulash communism' and the country was seen as the 'happiest barrack' of the Eastern Bloc. Although the

Professions in State Socialism

Another dimension of context for comparing women's participation in the professions is the specific nature of professional structures and arrangements under state socialist regimes, which were very different from their 'Western' counterparts. In the Anglo-American context, the term 'profession' typically refers to high status, highly-paid and prestigious occupations which are characterized by complex scientific knowledge, requiring long training periods and formal qualifications. Traditional 'liberal' professions such as medicine, law, accounting and engineering tend to be independent from the state. These professions are 'chartered' by the state, which means that they are represented by professional associations which are mandated to regulate the terms of entry, training and certification requirements; in return, professions 'promise' to ensure the quality of their members' work and pledge to work in the public interest. However, professions in the Anglo-American context have been widely

criticised for breaking that promise and pursuing status and pay instead of the public good. ¹⁶ Moreover, professions in the West have been also criticised for continuous exclusion and discrimination of women who tend to be concentrated in 'feminized' lower-prestige and lower-income fields and specialities. ¹⁷ For example, the Soviet and 'Western' contexts differed dramatically in the number of professional women. For instance, women constituted only 6 per cent of physicians in the US in 1950, and only 17 per cent in 1990. ¹⁸ In contrast, over 70 per cent of doctors in Soviet Russia were women in 1950, and 69 per cent in 1990. ¹⁹ These figures must, however, be seen in relation to the very different history and structure of professions in state socialism.

Before 1917 in Russia and 1945 in Hungary, the development of professions in both countries largely resembled that of their western counterparts. The contrast with the Western model was most radical in Russia. After the 1917 revolution, Russian professions were stripped of their institutional autonomy and independence as the state attempted to undermine the power of the intellectual class of bourgeois professionals. ²⁰ Professionals were largely 'proletarized': ²¹ they became just another group of salaried employees in state-controlled organisations. In the case of Soviet medicine, existing professional associations, such as the Medical Council, were abolished by the Bolshevik government, which took control of professional regulation, education and entry requirements. Medical faculties became state-controlled vocational schools in the late 1930s and the number of doctors increased significantly to serve the new nationalized healthcare system. The medical profession's general development and day-to-day functioning were also determined by directives of the Ministry of Health. ²²

The Soviet legal profession had a somewhat similar fate. The early Bolshevik government dismantled the Bar Association, but partly restored it in the 1920s when regional colleges of advocates were formed (these could decide on admissions to the profession, but the Ministry of Justice and its local executive committees or ispolkoms still monitored their activities closely). The number of lawyers, in contrast to doctors, decreased dramatically, since litigation was considered an attribute of capitalism and was expected to become redundant in a socialist state. Law was amongst the lowest-status, lowest-paid professions in the USSR. Unlike doctors, however, Soviet lawyers managed to preserve some autonomy. For instance, solicitors remained one of the few self-supporting professions in the USSR: although their salaries were state-determined, they were derived entirely from client billings, through a fee structure determined by the Ministry of Justice.

Developments in Hungarian professions were similar, but overall less radical than in Soviet Russia. The Hungarian Medical Chamber was dissolved immediately after World War II. General practitioners, who had been self-employed before the war, became 'district physicians' in the nationalised system of healthcare. The number of doctors in Hungary increased, but to a smaller extent than in the USSR. Medical training remained within universities, and doctors' prestige did not drop as significantly as in Russia. There were also divisions within the profession: practitioners' status, pay levels and opportunities to boost pay through receiving informal gratuities from patients were all higher for city-based doctors than in rural areas. Despite the dramatic restructuring of the profession, specialist training continued to be delivered in teaching hospitals, leaving opportunities for informal networks of professionals to survive. In law, the number of solicitors in Hungary decreased significantly after 1945 as it had in Russia, but the Bar Association remained at least formally active. It was

radically reorganized in 1950: in-house lawyers were excluded from it altogether, while solicitors lost the right to maintain an independent private practice and were forced to work in semi-autonomous teams. Specialist training of lawyers was also redesigned: examination criteria were determined by the state, rather than the professional associations.²⁸

In both countries, the deprofessionalization process under state socialism had a direct relationship to the changing gender composition in both law and medicine. Firstly, state control over higher education²⁹ and professional regulation made it possible to increase the number of professional women through ensuring their entry into higher education and subsequent mandatory work placements.³⁰ Secondly, in both societies, the restructuring of the system of professions led to a decrease in the prestige and remuneration of professionals. Communist ideology privileged working-class values and industrial labour, meaning that professions and intellectual labour were considered a 'non-productive' and, therefore, less socially valuable activity.³¹ Both of these changes made it 'easier' for women to enter professional work.

The 'Woman Question'

The communist struggle put the so-called 'woman question' firmly on the agenda of socialist states. Marx, Engels and the Bolshevik feminist Aleksandra Kollontai had all considered that, for class struggle to succeed, an essential prerequisite was to integrate both men and women by abolishing the oppression of one sex by another that existed in capitalist societies. Both Soviet Russia and Hungary passed laws that established women's equality in political and legal matters and in marriage. Direct discrimination at work was also tackled. By the late 1970s, about 90 per cent of women in Soviet Russia were in education or working full-time,

and women comprised 51 per cent of the economically active population, while in Hungary 64 per cent of women were economically active in 1980 – a higher number than in most capitalist economies.³³ In both countries women also entered professions such as medicine and law, and represented significant percentages in the historically male-dominated areas.³⁴

An essential element of the communist pursuit of gender equality at work was to reduce gender inequality in education, and by the late 1970s men's advantage over women in higher education had disappeared in both Russia and Hungary. Soviet ideology dictated that women should be emancipated, specifically that 'domestic enslavement' should be combated. To 'free up' women for paid work, the socialist states strove to relocate some household duties into the public sphere: workplace canteens were established, and there was an 86 per cent increase in the number of childcare facilities, such as free nurseries and kindergartens, between 1961 and 1970 in Russia. In Hungary the number of children enrolled in nurseries increased from approximately 7,000 in 1951 to more than 40,000 in 1970. Policy measures were adopted in both countries to make it easier to balance work and motherhood: long, state-funded maternity leave, free childcare and other social benefits let women participate in paid work at about the same rate as men.

Women's entry into the workplace was not just, however, driven by the state's ideological commitment; it was also a matter of economic necessity. 40 Human losses after World War II had resulted in great labour shortages, and to keep up with the rapid pace of industrialization the state needed female workers. The stakes of integrating women into the economy may have been slightly higher in Russia, given its agrarian economy and tremendous post-war demographic crisis. For the most part, work for women was not a choice – socialist ideology dictated that every able-bodied adult was obliged to be in regular

and continuous employment. In addition, healthcare, pensions and most benefits families could get (such as access to childcare facilities and housing benefits) depended on employment status, making work a necessity. 41 Unemployment did not officially exist under state socialism, and the state's attitude towards those not in employment varied from tolerance towards housewives to prosecuting those who presented a 'danger to society' by willingly 'avoiding' work. 42

Despite the inclusion of women in the workforce and their representation in many occupations, horizontal and vertical gender segregation persisted in paid work in both countries. Women were concentrated in more 'feminine' sectors such as education and services, whilst men were clustered in higher-paid and more prestigious industries such as construction and heavy industries. ⁴³ In Soviet engineering, for instance, women's participation increased but never exceeded 46 per cent. ⁴⁴ This segregation was seen by the general population as natural, since the dominant gender ideology rendered men the primary breadwinners. ⁴⁵ Furthermore, despite some positive discrimination (quotas for women's participation), women in both countries remained under-represented among political elites and in managerial positions, even in feminized industries. ⁴⁶

Finally, the gender division of unpaid work in the household saw little change: despite women's inclusion in paid work, housework and childcare continued to be regarded as women's duties. This resulted in the infamous 'double burden', which was exacerbated by poor infrastructure, shortages of food supplies, queues, and long working hours. ⁴⁷ This situation significantly impeded women's career progression in both countries. Women were also deemed to have a demographical duty to the state as mothers, and although the 'woman question' in Soviet Russia had been declared solved, it came back on to the agenda

in the 1960s when the declining birth rate prompted discussions about the negative consequences of women's employment on their duty as mothers. ⁴⁸ In Hungary, discussions about women's situation from the mid-1960s onwards also increasingly focused on demographic problems. ⁴⁹ These developments clearly underscore the dual expectations that socialist states had of women.

In light of this, several studies have questioned whether women were actually liberated by state socialism. Mary Buckley suggests the process is better characterised as the mobilization rather than the liberation of women; others, meanwhile, contend that the ideal of gender equality was genuinely embraced, especially in the early periods of socialist societies.⁵⁰ Éva Fodor has argued that the simple opposition of either idealizing state socialist regimes or dismissing state socialist achievements in women's emancipation has been an unproductive framework for understanding these developments. Instead, after comparing early 1980s statistical data and policy frameworks from state socialist and capitalist countries with shared histories (Hungary and Austria), Fodor conceptualizes women's position in the world of paid work and politics under state socialism as 'limited inclusion'. 51 Although most women were in paid work, they were often seen as 'second-rate' employees; it was difficult for them to enter the high-prestige specialities and top managerial positions and they were significantly under-represented from the sphere of politics.⁵² The 'limited inclusion' concept is helpful in explaining patterns of women's participation in both the professions discussed in this chapter (medicine and law) and in both countries (Soviet Russia and Hungary).

The Terms of Women's Inclusion in the Professions

Women's inclusion in professions in Russia and Hungary had several similarities. Both countries saw the widespread gendering of professions, with women expected to choose more 'feminine' specialities; the normalization of the 'double burden', meaning that women were expected to 'choose' careers and jobs which were more compatible with their role as mothers; and the greater acceptability of women working in lower-paid sectors because they were not seen as primary breadwinners. Vertical segregation was also widespread in both countries, as managerial positions were seen as more appropriate for men. Despite these similarities, however, the unique history of each country and the two states' differences in 'socialisms' created important divergences in the experiences of professional women.

In medicine, firstly, women's inclusion followed a similar pattern in both countries, but the degree of integration varied. Soviet medicine started to become female-dominated in the 1920s, and by the 1950s 70 per cent of doctors were women.⁵³ This 'female supremacy' was seen as an example of achieving equality between sexes in a socialist society.⁵⁴ There were a number of reasons why the number of women in Soviet medicine was so high. The first was linked to the expansion of medicine: in the late 1930s, when the Party decided to double the number of medical graduates, entry into medical education was subject to gender quotas and quotas for the 'proletariat' and people from rural backgrounds.⁵⁵ Secondly, medicine was seen as a more appropriate profession for women than, for instance, engineering because women were seen as naturally suited to caring, and seen as a 'safer' career for potential mothers than industrial work.⁵⁶ Thirdly, as discussed above, medicine was considered a non-productive and less 'valued' profession, reflected by physicians' low salaries (according to one study, a Soviet physician's salary was typically 20 per cent lower than a factory worker's).⁵⁷ Such devaluation made the profession more 'suitable' for women

who were not considered primary breadwinners. All in all, women came to be a good 'fit' for this profession, whilst men were concentrated in more prestigious and higher-paid fields such as engineering or industrial production. Even within medicine, women were clustered in particular specialities that were seen as 'more feminine', such as those related to women and children: in the 1970s, women comprised around 70 per cent of paediatricians, obstetricians and gynaecologists and other lower-status specialities, whilst only 30 per cent of surgeons were women, since their specialism was seen as more prestigious and more 'masculine'.

'masculine'.

In Hungary, only 15 per cent of doctors were women in 1952, however their share had increased to a third by 1970 and to 47 per cent by 1990, 60 though these figures were still significantly lower than Russia's. There was also strong gender segmentation between medical specializations: by the end of the state socialist period, women had come to dominate less prestigious specializations such as paediatrics (73 per cent), ophthalmology (77 per cent) and dermatology (70 per cent), while they were almost completely absent from surgery (9 per cent) and obstetrics and gynaecology (8 per cent). 61 Interestingly, unlike in Russia, obstetrics and gynaecology has always been a male-dominated specialty in Hungary. The literature offers virtually no explanation for this curious difference, but it is probably related to the context of practising these specialities in Hungary. Only qualified gynaecologists and obstetricians were allowed to provide these services, including cervical cancer screening; given the widespread practice of informal gratuities and the fact that that Hungary (unlike Russia) never completely abolished private practice, 62 this speciality must have been very lucrative and thus remained male-dominated.

Both countries also witnessed widespread vertical segregation within the medical profession. Managerial positions were seen as more appropriate for the 'stronger sex', and according to one study men made up 50 per cent of 'all chief physicians and executives of medical institutions in 1969' in Russia even though only 15 per cent of medical professionals were men.⁶³ The patterns were similar in Hungary. Given these gendered patterns of segregation, researchers suggest that women's inclusion was limited.

In law, meanwhile, women's inclusion in both countries followed a similar but not identical pattern. Unlike in medicine, there was a drastic decline in the overall number of lawyers, both in Russia and Hungary. 64 Within this reduced profession, women constituted about 30 per cent of Soviet lawyers in 1949 and 21 per cent of lawyers in Hungary in 1973.⁶⁵ Law, like medicine, showed clear gendered patterns across specialisations: women were concentrated in the least prestigious areas, such as civil law, and in the USSR they comprised 99 per cent of notaries. 66 These areas were considered more 'appropriate' for women because the regular and relatively short working hours made it easier to combine work with caring for the home and children. Moreover, civil law was considered 'clean' work as opposed to 'dirty' criminal law, which involved working with prisoners. Men, on the other hand, were concentrated in criminal or international law – the only specialities that retained higher status.⁶⁷ With a career in criminal and international law, men were also more likely to pursue political careers or enter the very prestigious sphere of diplomacy.⁶⁸ Similarly to medicine, although women constituted a high proportion of law graduates, not many women were found in top managerial positions.

Hungary, however, differed from Soviet Russia in that the reduction in the number of lawyers in Hungary was more dramatic. Many Hungarian lawyers of Jewish descent had

perished in the Holocaust, while other lawyers who were unwilling to work in the new statedetermined professional structures had to leave the profession; in 1960, 14 per cent of law graduates were working in manual occupations.⁶⁹ Although more women started to study law at university in socialist Hungary, the process of their integration was slow and they remained vastly under-represented: their share was only 4 per cent in 1960 which had increased to 21 per cent by 1980.⁷⁰ In the mid-1970s most women in the legal profession worked as in-house corporate lawyers or as judges, while they were almost completely absent from the ranks of solicitors (only 10 per cent of them were women in 1973)⁷¹ and state prosecutors. The strict, almost militaristic organization of the prosecutor's office probably made it 'less suitable' for women, although in the second half of the state socialist period the number of women among public prosecutors did increase. 72 By 1990, approximately one third of all law graduates were women, 73 and they outnumbered men among judges.⁷⁴ Despite the very slow and modest increase in the number of female lawyers, a discourse of public concern about the 'feminization' of the profession emerged in the 1980s when women first outnumbered men among first-year law students. 75 This suggests that the legal profession continued to be regarded as prestigious and feminization, which they felt was synonymous with devaluation, was seen as a threat. The discourse persisted after the end of state socialism.

Gender, Professions and the Post-Socialist Context

The end of the Cold War and the withdrawal of Soviet armed forces from the countries of the Eastern Bloc was followed by the first multiparty elections, in 1990 for Hungary and 1991 for

Russia. In 1991 the USSR itself was dissolved, causing dramatic political and economic changes for socialist societies. These included a shift from a state-controlled to a market economy, privatization and marketization, as well as mass unemployment and a fundamental change in social organization. The post-state-socialist transformations had many gendered effects. The state-led discourse of women's emancipation disappeared in both Russia and Hungary; in fact, the collapse of industries and mass unemployment gave rise to rhetoric suggesting that paid jobs should first be offered to men whilst women should return to what Gorbachev had called their 'purely womanly mission', that is, domesticity. But, whilst women in both countries were significantly affected by unemployment and the insecurity of the transition, Reither country saw a drastic decline in the number of women in professional work.

Post-socialism did, however, pose new challenges for working women. Firstly, public-sector jobs remained low-paid, while in the private sector pay was higher but so was insecurity. Secondly, gender discrimination increased in both countries, and although new 'gender equality' legislation was introduced in Hungary as part of the EU accession process, both old and new regulations were often disregarded by employers. ⁸⁰ Thirdly, the socialist welfare system began to collapse. A significant drop in the number of affordable childcare places made it more difficult to balance paid work with family care, which was still deemed to be women's duty. Moreover, whilst extended maternity leave remained available in both Russia and Hungary, the value of maternity benefits declined, and long absence from the workplace was more detrimental to women's careers in the emerging capitalist labour markets than it had been under state socialism. ⁸¹

In medicine, the most important changes for both Russian and Hungarian professionals were the new opportunities for private practice. This, however, led to vast inequalities of pay and working conditions between the private and public sector, with public-sector pay becoming extremely low. Gender segregation patterns among doctors persisted in both countries, 82 and there was some evidence that in post-Soviet Russia women's access to more prestigious specialities and positions had deteriorated since the end of state socialism. 83 The medical profession's efforts to re-establish autonomy from the state remained weak, especially in post-Soviet Russia, and gender equality was not on the agenda of the re-emerged professional associations. 84

Both countries' legal professions, on the other hand, did much better after the fall of the regime. Post-socialist markets became open to international business, creating demand for litigation and solicitors. Civil, commercial, economic and tax law (low-status and female-dominated specialities under state socialism) became revalued in the new market economies. Although there were worries that women would be forced out of the profession as soon as the state withdrew its protection in the 1990s, this was not the case, and women continued to dominate those fields. However, there was an influx of men into these specialities, so at the time of writing it remained to be seen how this would affect female lawyers in the longer term. The number of lawyers in Hungary increased rapidly, reflecting the needs of the market economy. This rapid growth facilitated women's entry into the profession, and by 2001 40 per cent of all law graduates were women, an increase from 33 per cent in 1990. Yet although female lawyers were initially in a better position than men to take up the private sector's new jobs, by the 2010s there was some evidence that law was becoming 're-masculinized' due to interlinked processes of discrimination and women

self-selecting into more 'secure' state employment.⁸⁸ The socialist legacy meant the Hungarian judiciary remained feminized, and although there were unofficial efforts to stop this trend, 68 per cent of Hungarian judges were women in 2013.⁸⁹

Conclusion

In both Russia and Hungary, women's inclusion in the professions was embedded in the complexity of economic, political and ideological contexts that determined both the socialist gender regime and the structural organization of professional work. A commitment to socialist ideology in both countries, bolstered by the labour shortage and economic necessity, created a strong agenda to include women in paid work, while de-professionalization and the devaluation of the professions facilitated the channelling of women into these jobs.

Moreover, since socialist gender ideology constructed women as workers and mothers, professional work was a good 'match' because it allowed women to balance the two roles.

However, despite similar trends in women's professional employment, the Hungarian and Russian situations were by no means identical, because of differences in the historical development of socialism in the two countries and because of the relationship between them. In both countries, the history of socialism was fragmented. This meant that gender inclusion policies were not simply 'adopted' from the USSR to Hungary; even within the USSR, policies on gender inclusion varied, from a genuine belief in gender equality in the early revolutionary years to the re-traditionalization of gender roles after perestroika. Socialism in Hungary, after the 1956 revolution, was not as zealous as in Soviet Russia. Although Hungarian leaders still followed the Soviet model, there was negotiation and adaptation of the 'centralized' gender politics imposed by the USSR, partly motivated by popular

resentment about the imposition of policies and ideologies. Specific historical circumstances also produced contextual differences in the pattern of women's professional inclusion in each country. For instance, since Hungarian professions had preserved slightly more autonomy than their Soviet counterparts, professional communities could resist the state's pursuit of mandatory gender equality: this resulted in more traditional gender patterns persisting (as with law) and a stronger disavowal of the 'feminization' of professional work.

In conclusion, although Soviet Russia served as a model for gender policies within the Eastern Bloc, the policies were not simply transferred to and fully emulated in other countries. As the chapter has suggested, Russia and Hungary represent different historical varieties of state socialism and therefore, whilst there are significant similarities, the patterns of women's inclusion in professional work in these two countries are often divergent and contextually conditioned. Therefore, the question remains how useful any comparison of this nature may be. This chapter suggests that, if one proceeds with caution and takes into account historical variations in state socialism between countries as well as changes within each country over time, then it is possible to tease out meaningful intersections, similarities and contrasts. Understanding contextual differences, then, becomes a starting point for unpacking the variety and difference of gender regimes in different socialist and post-socialist societies.

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⁸ Fowkes, *Eastern Europe*.

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- ²⁹ For instance, in Hungary women made up only 16 per cent of the population with completed higher education in 1949; this increased to 40 per cent in 1980 and 45 per cent in 1990: Hungarian Central Statistical Office (HCSO), *Magyarország népessége és gazdasága: múlt és jelen* (Budapest: HCSO,1996).
- ³⁰ An interesting characteristic of socialist higher education was 'class quotas' (e.g. enforced in Hungary between the late 1940s and the early1960s) designed to limit the entry of students from professional and other non-manual backgrounds to diminish their advantages, albeit with limited success: Eric Hanley and Matthew McKeever, 'The Persistence of Educational Inequalities in State-Socialist Hungary: Trajectory-Maintenance versus Counterselection', *Sociology of Education* vol. 70, no. 1 (1997): 1–18.

³¹ Riska, *Medical Careers*.

³² Mary Buckley, *Women and Ideology in the Soviet Union* (Ann Arbor: University of Michigan Press, 1989).

³³ Lapidus, *Women in Soviet Society*, 173; István Polónyi and János Tímár, 'A népesség, a gazdasági aktivitás és a nemzetközi migráció távlatai Magyarországon 1950–2050', *Közgazdasági Szemle* vol. 49 (2002): 960–71.

³⁴ Mandel, 'Soviet Women'.

³⁵ Theodore P. Gerber and Michael Hout, 'Educational Stratification in Russia during the Soviet Period', *American Journal of Sociology* vol. 101, no. 3 (1995): 611–60.

- ³⁷ Mandel, 'Soviet Women', 256. On the earlier Soviet period see also Kaminer, this volume.
- ³⁸ HCSO, Kisgyermekek napközbeni ellátása (Budapest: HCSO, 2012): 3.
- ³⁹ Lynne Haney, *Inventing the Needy: Gender and the Politics of Welfare in Hungary* (Berkeley, CA: University of California Press, 2002); Theodore P. Gerber and Olga Mayorova, 'Dynamic Gender Differences in a Post-Socialist Labour Market: Russia, 1991–1997', *Social Forces* vol. 84, no. 4 (2006): 2047–75.
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- ⁴² See, for instance, Ferenc Kőszeg, speech in Hungarian Parliament, *Parlamenti Napló*, 10 February 1992, available at: http://www.parlament.hu/naplo34/174/1740036.html (accessed 14 February 2015).
- ⁴³ Buckley, Women and Ideology; Harden, 'Gender and Work'; Fodor, Working Difference.
- ⁴⁴ Mandel, 'Soviet Women', 262.
- ⁴⁵ Ashwin (ed.), Gender, State and Society.
- ⁴⁶ Fodor, Working Difference.
- ⁴⁷ Einhorn, Cinderella.
- ⁴⁸ Susan Gal and Gail Kligman, *The Politics of Gender after Socialism: a Comparative-Historical Essay* (Princeton, NJ: Princeton University Press, 2000); Harden, 'Gender and Work'.

³⁶ Buckley, Women and Ideology.

⁴⁹ Haney, *Inventing the Needy*.

- ⁵² Navarro, Social Security and Medicine; Einhorn, Cinderella; Fodor, Working Difference.
- ⁵³ Riska, Medical Careers, 38.
- 54 Mandel, 'Soviet Women', 270.
- ⁵⁵ Donald A. Barr and Rudi Schmid, 'Medical Education in the Former Soviet Union', Academic Medicine, vol. 71, no. 2 (1996): 141–5; Harden, 'Gender and Work'; see also Hanley and McKeever, 'The Persistence of Educational Inequalities'.
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- ⁵⁹ Riska, *Medical Careers*, 81.
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 [Ministry of Social Welfare], *Évkönyv 1990* (Budapest: Ministry of Social Welfare, 1991),
 120.
- ⁶¹ Népjóléti Minisztérium, Évkönyv 1990, 120.
- ⁶² Weinerman, *Social Medicine*.
- 63 Mandel, 'Soviet Women', 270.
- ⁶⁴ Huskey, *Russian Lawyers*; Miklós Szabó, 'A jogászképzés társadalmi funkciójáról-húsz év múlva', *Jogtörténeti Szemle*, Special Issue (2005): 27–32.
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⁵¹ Fodor, Working Difference.

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- ⁶⁸ Brown, 'Russian Women Lawyers'.
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- ⁷⁰ Szabó, 'A jogászképzés társadalmi funkciójáról', 28.
- ⁷¹ Valuch, *Magyarország társadalomtörténete*, 164.
- ⁷² Andrea Tóti, 'Mobilitásvizsgálat a Komárom-Esztergom megyei jogászság körében', *Jogtörténeti Szemle* no. 4 (2000), available at: http://jesz.ajk.elte.hu/toti4.html (accessed 12 February 2015).
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- ⁷⁴ Tóti, 'Mobilitásvizsgálat'.
- ⁷⁵ Fodor, Working Difference, 148.
- ⁷⁶ See, e.g., Ashwin (ed.), *Gender, State and Society;* Sarah Ashwin (ed.), *Adapting to Russia's New Labour Market* (London and New York: Routledge, 2006); Einhorn, *Cinderella*; Gal and Kligman, *Politics of Gender*; Gillian Pascall and Anna Kwak, *Gender Regimes in Transition in Central and Eastern Europe* (Bristol: Policy Press, 2005); Nanette Funk and Magda Mueller (ed.), *Gender Politics and Post-Communism: Reflections from Eastern Europe and the Former Soviet Union* (New York: Routledge, 1993).

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