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The Moral Economy of Childbearing: Six Abortion Trials in Interwar Hungary*

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This article explores the moral economy of childbearing through six abortion trials in interwar Hungary. It argues that reproductive decisions in villages and small towns were shaped not simply by individual choice, but by collectively enforced norms, informal authority, and the imperative of preserving reputation. Drawing on criminal case files from four Hungarian counties, the study examines how shame, gossip, surveillance, and social pressure influenced women confronted with unwanted pregnancies. It highlights the roles of midwives, employers, female relatives, and other locally influential actors in mediating reproductive decisions on the boundaries of assistance, coercion, and illegality. The trials also reveal the circulation of informal knowledge about abortion and birth control, the importance of female support networks, and the narrative distortions produced by criminal proceedings. The article interprets childbearing as a hidden form of community coordination governed by a reputational economy centered on concepts of honor.

Keywords: moral economy; childbearing; abortion; interwar Hungary; informal authority

In the Hungarian secondary literature, the moral economy of historical communities remains a largely unexplored field, even though its study is crucial for a more precise understanding of the long-term functioning and transformation of the peasant world. In his examination of eighteenth-century English "bread riots" and "grain disturbances," E. P. Thompson argued that popular protest was grounded in a coherent system of customary norms the violation of which could provoke collective action. He termed this normative framework the "moral economy." Rather than accepting market exchange as governed exclusively by supply and demand, local communities evaluated economic conduct according to shared ideas of legitimacy, justice, and the common good. In periods of scarcity, when subsistence goods could not readily be replaced and prices rose

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beyond customary expectations, collective intervention could therefore appear both rational and legitimate. As a conceptual framework, the moral economy thus provided Thompson with a means of reconstructing the cultural language through which ordinary people understood power, obligation, and resistance.[1]

The concept subsequently became the subject of criticism and reinterpretation. In *The Rational Peasant*, Samuel Popkin rejected what he regarded as an overly romantic interpretation of peasant behavior, arguing that it could be explained more adequately through material interests and individual cost-benefit calculations. His approach also departed from Aleksandr Chayanov's model of the peasant household, according to which family labor was organized through a distinctive balance between household needs and the burden of labor, potentially resulting in self-exploitation.[2] James C. Scott, in contrast, retained the concept of moral economy but reformulated it through the principle of subsistence security. In his analysis of peasant societies in southeast Asia, shared ethical expectations derived primarily from the need to protect households against threats to their basic survival.[3]

Against the background of these debates, Thompson later clarified and broadened his original concept. He emphasized that moral economy did not imply irrational traditionalism, but rather active and rational decision-making embedded in cultural norms. In this expanded formulation, the concept illuminates not only the moral regulation of markets and collective understandings of justice, but also everyday economic practices, community sanctions, reciprocal obligations, and forms of solidarity.[4]

In the Hungarian secondary literature, the concept originally applied by Thompson to urban workers (and later expanded in response to criticism) was adopted by Tamás Hofer on the basis of the findings of his research conducted with Edit Fél in the village of Átány.[5] Hofer emphasized that, in the study of the peasant family, the concept of moral economy can be extended beyond understanding conflicts to include the functioning of an "archaic moral system of guidance" within the family itself. Based on his empirical approach, which focused on the middle-peasant property owners in Átány in the 1950s, he argued that local farms operated with finely calibrated quantitative indicators which,

1 Thompson, "The Moral Economy of the English Crowd in the Eighteenth Century."

2 Popkin, *The Rational Peasant;* Chayanov, *The Theory of Peasant Economy*.

3 Scott, *The Moral Economy of the Peasant*.

4 Thompson, *Customs in Common*, 259–352.

5 Hofer, "A parasztcsalád morális ökonómiája."

adapting to natural and political conditions, regulated the recording, distribution, and organization of labor. At the same time, "within this scale the values that counted as too much and those that counted as too little were marked out, and between them lay the range within which the proper personal choices were located."[6] According to Hofer, the peasant farm and the peasant household functioned as a moral model, shaped by a network of mutual obligations and expectations into a system of duties and entitlements regarded as just and legitimate.[7] Thus, the central point of his hypothesis is to emphasize the regulatory role of this moral model, rather than the authority of the household head who formally exercised control over the members of the peasant family. Although his concept did not attract many followers, it was not entirely forgotten.[8]

In this article, moral economy denotes a socially embedded normative order rather than an economy that was necessarily morally defensible. Community norms concerning reproduction could conflict with state law, professional ethics, and more general moral principles while nevertheless regulating local conduct and expectations. I argue that it may prove fruitful to apply the conceptual framework of moral economy to the ways in which interwar peasant society thought about childbearing. In the following pages, drawing on six court cases (Table 1), I formulate the hypothesis that reproductive practices in villages and small towns during the interwar period were the outcome of a community-based decision-making process grounded in rational considerations and capable of being adapted to the economic challenges faced by the community.

Table 1. The Six Abortion Cases Examined in the Article

Case	Place and date	Social and marital status	Method or intervention
Anna Stagl	Mohács, late 1928–early 1929; case file: 1929	Twenty-one-year-old unmarried domestic servant	Intervention by the midwife Róza Pendl; subsequently attempted home treatment, including heated tiles
Rozália Tóth	Cibakháza, 1928	Unmarried cook with one child from an earlier relationship	Self-induced abortion using a sharpened wooden instrument
Mrs. Henrik Giflo	Sajószentpéter and Miskolc, 1926	Engaged and subsequently married	Powders, possibly quinine, followed by an intervention performed by a midwife in Miskolc

6 Hofer, "Parasztcsalád morális ökonómiája," 384.

7 Ibid., 387.

8 See Szabó, *Kooperáló közösségek*.

Case	Place and date	Social and marital status	Method or intervention
Mrs. József Somogyi Hegedűs	Piskó, October 1918; case file: 1919	Married woman whose husband had been serving on the front; the couple later lived separately	Drank a decoction made from six cedar seeds; a sharpened cedar stick was proposed but apparently not used
Mrs. István Kiss	Cibakháza, probably 1927; case file: 1928	Married woman with three children; fetus conceived within marriage	Bone rod, probably an intrauterine contraceptive device, purchased in 1922 and used for approximately five years; it could also induce miscarriage
Zsófia Nagy and Dr. Imre Kincses	Vésztő, approximately 1930–31; case file: 1931	Nagy was unmarried; Kincses was a locally rooted physician	The precise nature of the intervention performed by Kincses remained disputed; he claimed that Nagy was already miscarrying when she reached him and that he later referred her to a hospital

Source: The court case files cited.

The adaptation of the norms and practices concerning abortion was realized through actors within these communities who possessed informal authority. The moral norms of historical communities, formed internally in response to external challenges and through the weighing of possible solutions, were therefore shaped not by formal agents of power, but rather by individuals occupying internal positions of informal influence.

The representatives of formal authority were, on the secular side, notaries and physicians, and on the ecclesiastical side, pastors and schoolteachers. Informal authority, in contrast, could be exercised primarily by midwives, healers, influential women, and the wealthier farmers of the community who possessed greater social prestige. These individuals were often members of the church council (presbytery), the local secular administration, local associations, and credit or consumer cooperatives. They therefore frequently acted as intermediaries between formal and informal forms of authority.

The influence of such informal authority on community norms can be observed, for example, in the conflict-resolution entries of presbytery records,[9] in social networks (such as in the selection of godparents or marriage witnesses),[10] in the development of the communities' economic and cultural practices (particularly in patterns of emulation), and in the shaping of birth control

9 Kósa, "Erkölcsi kihágások és büntetéseik."

10 Benda, *Zsellérből polgár*; Koloh, *"Szántani lehet, de vetni nem muszáj"*; Buzgó, "*A hálózatok földjén.*"

practices.[11] Given the nature of the sources, both custodians of the norms shaped by the community's moral economy and active agents in the formation of these norms, individuals who possessed informal authority are particularly visible in situations of conflict, even though one of their principal roles was precisely to prevent scandals from arising. In the case of childbearing, abortion trials provide a wealth of information about (1) the forms of shaming as a response to scandal; (2) the knowledge, experience, and strategies circulating within the female networks involved in abortion; (3) what was revealed and concealed during criminal proceedings and how various actors sought to distort information concerning the circumstances and explanations of the abortion; and (4) what all of this together reveals about the community's norms.

To explore these issues, I examine six abortion trials the hearings for which took place during the interwar period.[12] I begin with the case of an unmarried domestic servant from Mohács (Baranya County) who had likely carried out an abortion before but who appeared before the court for the first time. This is followed by the case of an unmarried cook from Cibakháza (Jász-Nagykun-Szolnok County) who already had a child from a previous relationship. The third case concerns a bride from Sajószentpéter (Borsod-Abaúj-Zemplén County) who became pregnant by a man other than her fiancé, while the fourth examines a married woman from Piskó (Baranya County) who had an affair with a Russian prisoner of war while her husband was serving on the front. The fifth case analyzes another trial from Cibakháza, in which the woman who induced the abortion was married and the fetus had been conceived with her husband. Finally, I examine the case of a physician from Vésztő (Békés County), whose situation illustrates well the conflict in roles arising from the collision of formal and informal authority within a single individual.

Analysis of these cases offers a more nuanced understanding of how the social stigma attached to an unwanted pregnancy influenced women's decisions, whether meaningful differences can be observed in the circumstances of the

11 Balassa, *Az eke és a szántás története Magyarországon*; Andorka, "Az ormánsági születéskorlátozás története"; Andorka, "Adalékok az ormánsági 'egyke' történetéhez"; Andorka, "A gyermekszám alakulásának társadalmi tényezői paraszti közösségekben"; Pakot, *Nemek és nemzedékek*; Pakot and Őri, "Socioeconomic and Religious Differentials in Marital Fertility"; Pakot, "Társadalmi státusz és gyermekvállalás"; Őri, "A termékenységi átmenet mintái," *Demográfia* 61 (2018); Koloh, *"Szántani lehet"*; Kis and Őri, "A termékenységi átmenet"; Őri, "A családrekonstitúciótól az eseménytörténeti elemzésig"; Őri, "Parental Loss in 18th–19th Century Hungary"; Pakot and Őri, "Fertility and Mortality Responses to Short-Term Economic Stress."

12 I would like to thank the archivists who significantly assisted this research in collecting the sources. Gábor Bojtos, Julianna Erika Héjja, and Lajos Kiss drew my attention to numerous relevant court cases.

cases, and how concepts of shame, gossip, communal surveillance, and social pressure can be captured and interpreted in these abortion cases. How did primarily female networks function in the organization of these prohibited interventions? How did communal knowledge about abortion circulate, and where were the limits of collective secrecy? I seek to answer these questions by analyzing the testimonies of defendants and witnesses.

At the same time, it is evident that the voices transmitted through the trials were narratives shaped and polished by lawyers in the course of legal proceedings; therefore, the witness testimonies recorded by the gendarmerie offer the greatest promise for more direct insight. It is particularly difficult to reconstruct community norms, since the individuals who appear in the sources, whether as suspects or as witnesses, were generally already defending their own interests, seeking to deflect personal responsibility, or minimize their involvement.

In this study, I interpret the moral-economic practice of childbearing as a hidden yet fundamentally well-functioning form of community coordination based on a normative logic realized through agents of informal authority. This normative logic organized the risks, costs, and benefits associated with reproduction within a moral order structured around the preservation of reputation, an order that over time proved capable of adaptation to the challenges faced by the community.

Shaming

In the autumn of 1928, Anna Stagl, a twenty-one-year-old domestic servant from Mohács, became more closely acquainted with a local farmhand, Márton Szidonya, a Bosnian. After her menstruation failed to come in December and January, Stagl realized that she was pregnant. Her miscarriage was induced by a midwife in Mohács, and although the servant girl initially attempted to treat herself at home, she was taken to hospital a few days later, where the local physician completed the procedure and reported the abortion.

Stagl was employed as a servant by the widow of a soda-water manufacturer in Mohács, and according to her testimony she decided on the abortion out of despair, because "she knew that Márton Bosnyák (sic!) would not marry her, and therefore she was extremely distressed about her pregnancy."[13] In addition to despair, the threat of shame also weighed on Anna Stagl. Her employer,

13 Hungarian National Archives, Baranya County Archives (MNL BaML), VII.1.b., 803/1929.

Mrs. Alajos Kiss, who was otherwise very satisfied with her work, had closely monitored the development of the young woman's relationship with the man and had even overheard their private conversations.[14] She testified that, when Stagl admitted to her that she had visited a midwife, "I naturally scolded her."[15] This can be interpreted as a direct form of shaming. Yet she called a doctor only several days later, which raises the suspicion that Mrs. Kiss may also have been deliberately delaying matters, hoping that the miscarriage would be completed and that hospitalization might thus be avoided, since going to the hospital carried the risk that the case would become public.

In the case of Rozália Tóth from Cibakháza, for whom a doctor was likewise summoned by her employer, it was only the court that concluded, "she was evidently also driven to the crime by a sense of shame."[16] This conclusion was drawn from the record of the Cibakháza gendarmerie post, according to which Tóth admitted that "even if it costs her life, she will not bring the fetus […] into the world, because it is enough for her to support the one child she already has from her meagre earnings."[17] From this statement, however, it becomes clear that Tóth's willingness to risk death because of her (at least) second extramarital pregnancy did not stem from concern about raising her existing child, since in that case she clearly would not have been willing to put her own life at serious risk, but rather from her fear of public disgrace.

In contrast, Mrs. Henrik Giflo of Sajószentpéter explicitly stated, though only during the court investigation that "at the time, I was Henrik Giflo's fiancée, and therefore I was ashamed of the matter."[18] Mrs. Giflo had maintained a sexually intimate relationship with a local land tenant, Imre Kovács, who was of Jewish origin. When the unmarried Kovács learned of her pregnancy, he first promised to employ her as a housekeeper so that she could raise the child. When she rejected this proposal, he initially gave her powders (perhaps quinine), and when these proved ineffective, he eventually directed her to a midwife in Miskolc, providing her with money and an escort.

14 "Through the door I could gather from their conversation that Anna Stagl had become pregnant by this young man." Ibid.

15 Ibid.

16 Hungarian National Archives, Jász-Nagykun-Szolnok County Archives (MNL JNSZML), VII.1.a., II.1049/1928.

17 Ibid.

18 Hungarian National Archives, Borsod-Abaúj-Zemplén County Archives (MNL BAZML), VII.1.b., B. 7264/1926.

The case came to light because Henrik Giflo, having learned of the events partly through gossip and later from his wife, decided himself to report the midwife, perhaps seeking to avenge the shame he felt he had suffered. Although Giflo had previously heard rumors that his fiancée might have had an affair with Kovács, it was only on their wedding night that, as he stated, he came to a firm conclusion:

> On our wedding night I noticed that my wife was not a virgin. I confronted her about it, to which she replied: "I went sledding and ran into a tree." To this I remarked: "Yes, the penis of that Jew." […] As a result of what happened on our wedding night, there were several disagreements between my wife and me, and later, after hearing talk that my wife had had an abortion, I began questioning her about it.[19]

The testimony also reveals that the husband might have harbored suspicions before the wedding. The woman's escort to Miskolc had suggested to Giflo that it would be better if he himself went there that day so that he might see something suspicious. Moreover, according to the testimony of Giflo's brother-in-law, "the whole community was already talking" about the abortion. In sum, Mrs. Giflo was disgraced in the eyes of the community because she had become pregnant outside marriage (and moreover, while engaged) by a man other than her fiancé. At the same time, she was disgraced in the eyes of her husband because she was not a virgin and had conceived a child with a man of Jewish origin. The stigma therefore affected not only the woman but also Giflo himself, who undoubtedly felt deceived and humiliated. Presumably seeking to escape the judgment of the community, he turned to the authorities, and he may well have subjected his wife to severe psychological and physical abuse.[20]

According to her testimony, Mrs. József Somogyi Hegedűs of Piskó, who in October 1918 gave birth to a "premature child," likewise sought to free herself from shame, as news had already spread through the village that "Juli is fat" (i.e., that she was pregnant).[21] The case came to light because, after inducing the miscarriage herself, the woman began to bleed heavily. Her mother therefore called one of the local midwives, who reported the suspected abortion to the village judge.[22]

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19 Ibid.

20 "Mrs. Henrik Giflo notes that she made this confession to the gendarmerie partly under the influence of beating…" Ibid.

21 MNL BaML, VII.1.b., B. 991/1919.

22 MNL BAZML VII.1.b., B 7264/1926/12.

The court records indicate that the husband, who had returned from military service and was living separately from his wife after these events, would nevertheless have accepted and raised the child as his own, just as he had done with the boy born a few years earlier, who had likewise been fathered by the same Russian prisoner of war. The stigma, therefore, was not primarily within the family but originated from the community. In her defense, Mrs. István Kiss of Cibakháza referred to her poverty and emphasized the difficulty of supporting the three children she already had.[23] As the trial revealed, in 1922, Mrs. Kiss had already purchased from another woman a bone rod (likely used as an intrauterine device) which, when inserted, made conception more difficult and, if pregnancy occurred, could induce a miscarriage by puncturing the fetal membrane. In her case, shame is far less self-evident than in the previous examples; however, the manner in which he acts foregrounded the tension between a low standard of living and the burden of having many children may still have provoked resentment among members of the community.[24]

In the case of Imre Kincses, a physician from Vésztő, Zsófia Nagy, the woman who requested the abortion, had likewise become pregnant outside marriage; her participation in the procedure as a "secret solution" was also an attempt to escape community stigma. The doctor's actions, however, were condemned only by the court. The community of Vésztő regarded the matter as a lapse for which they considered it worthwhile to petition the governor for clemency for Kincses, submitting a petition bearing more than four thousand signatures.[25] Two distinct moral judgments can be identified in this case. On the one hand, the community condemned Zsófia Nagy's extramarital pregnancy as a moral lapse. On the other hand, while the court regarded Kincses's involvement as a violation of both the law and medical ethics, the local community regarded him as a highly valued physician whose expertise and services were important to many of its members. This difference in social standing explains why the community petitioned the governor for clemency despite his conviction.[26] These cases suggest that news of abortion reached the authorities through a variety of social and institutional pathways, including medical intervention, reporting by family members, and public exposure. The fear of shame was less a trigger for

23 MNL JNSZML, VII.1.a., I.215/1928.

24 Gémes, "A magzatelhajtással kapcsolatos hiedelmek," 235–38; Koloh, *Baranyai lelkészek egykejelentései*, 17–19.

25 Koloh, "Kormányzói kegyelem."

26 Hungarian National Archives, Békés County Archives (MNL BéML), VII.1.c., B 4564/931/4.

prosecution than a powerful motive for seeking abortion. Premarital virginity, employers' expectations, and in one case even ethnic considerations also played a role. In the cases discussed, the person who brought the matter to the attention of the authorities varied: sometimes it was the physician who completed an ongoing miscarriage, sometimes a midwife acting in accordance with professional ethical expectations, and in another instance the offended husband. At the same time, it is evident that many more people were aware of these abortions, yet they did not report them and in some cases even attempted to help the pregnant women.

Informal Networks and Reproductive Decision-Making

This section examines how unwanted pregnancies were managed, from the search for advice and assistance through the abortion itself and its immediate aftermath. It focuses on the interactions among pregnant women, female relatives, friends, midwives, employers, and, in some cases, the men responsible for the pregnancy. These interactions reveal the circulation of informal knowledge, the operation of female support networks, and the practical strategies through which women attempted to resolve unwanted pregnancies while minimizing social and legal risks. Anna Stagl was comforted by her friend, the twenty-five-year-old unmarried servant Anna Scheit, who told her, "You are neither the first nor the last [to whom this has happened]."[27] When Anna Stagl also complained to her that the midwife she had approached had refused to perform the abortion, Scheit encouraged her by saying that "there are other midwives as well, and if one does not do it, another will."[28] Before the court, however, Scheit firmly testified that she herself had not recommended anyone and had not exerted any pressure on Stagl. This was despite the fact that, according to Stagl's testimony, Scheit had tried to persuade her that it would be better to approach another midwife than to remain alone in her situation. Stagl also sought advice from another friend, the twenty-three-year-old servant Katalin Bruckner. Bruckner later recalled the incident as follows: Stagl "once complained before Christmas that she was in a delicate condition and said that she would commit suicide because of it. I told her not to do such a thing, because she was neither the first nor the last to find herself in such a situation." Referring to the

27 MNL BaML, VII.1.b., 803/1929.

28 Ibid.

fact that she had been aware of Stagl's intentions, she added the following: "She also asked me to go with her, but I did not go."[29]

It is clear that Stagl approached her friends not only for words of comfort but also for practical assistance, asking them to accompany her to the midwife. As we shall see, a recurring element in many of the trials is precisely this role of the companion, when a woman seeking to terminate her pregnancy wished to be accompanied by another woman who was close to her. Such companionship may have been important both for ensuring sympathy and for providing a sense of safety in case the intervention caused physical distress. Some of the women also used various forms of self-help. These would-be solutions included practices shaped by folk traditions, such as, in Stagl's case, placing heated tiles on the abdomen, side, and soles of the feet in order to facilitate an induced miscarriage. They also included attempts to explore and navigate the illicit market for abortion services.

Another recurring element that emerges in the trials is the self-observation and description of bodily symptoms. Stagl's menstruation ceased after repeated sexual encounters, and she was also able to report precisely when the midwife's intervention took place and how intense the bleeding became before she was eventually taken to hospital. In the case of Rozália Tóth, the puncturing, which was performed with a mechanical device, represents a form of experiential knowledge acquired by women themselves: this dangerous act of intervention indeed involved accepting a serious risk of death. The extreme nature of the procedure is underscored by the fact that, after puncturing herself with the sharpened stick she had carved, Tóth immediately began bleeding, and within a short time, "a bloody mass about the size of a fist passed from her." Throughout the act she remained conscious of her actions and their potential consequences, as she stated that "the carved stick with which she had pierced the fetus was thrown into the fire, where it was destroyed."[30]

Another experience shared by Stagl, Tóth, and Mrs. Giflo was that the men from whom they had become pregnant rejected them, sometimes harshly and sometimes through less overt forms of coercion. Although Imre Kovács gave Mrs. Giflo one million crowns for treatment and one hundred thousand crowns for travel expenses, for her, the only acceptable solution would have been for him to have married her. These cases also raise the question of how far the

29 Ibid.

30 MNL JNSZML, VII.1.a., II.1049/1928.

women involved were able to assess the risk of becoming pregnant and, if they were aware of it, why they nevertheless assumed that risk. According to the testimonies, Stagl had previously been pregnant, and Rozália Tóth had already given birth to a child. Thus, while they may have been fully aware of the possibility of falling pregnant, these women may also have hoped that pregnancy would promise a considerable gain if the man would agree to marry them, which may have been seen as reasonably likely if he was unmarried, as in the cases of Anna Stagl and Mrs. Henrik Giflo. According to the records, however, no such promises were made.

In Mrs. Giflo's case, however, it was Kovács himself who organized the abortion after Mrs. Giflo rejected the alternative of becoming his housekeeper. He sought out a midwife willing to perform the intervention, provided money, and arranged for an escort. Several questions nevertheless arise: why was this midwife not at home when she knew they were coming; why did they not wait for her to return; and, above all, how was it possible that a stranger in the street was able to provide information concerning another midwife in the city who might be willing to carry out such a procedure? The answer to the last question may lie in a particularly high degree of female solidarity and willingness to help, since the woman in question was effectively assisting in the commission of a crime. It is thus hardly surprising that they did not remember her name, or at least claimed not to remember her name. They may have been trying to protect her, and she may well never even have told them her name, given the circumstances. The flexibility of the illicit market for abortion is further indicated by the fact that the midwife who ultimately performed the intervention demanded two million crowns in 1926, but the couple could pay only one million, promising to bring the rest later. This element also appears in several other trials, including the case of Róza Pendl, who carried out Anna Stagl's abortion: in 1929, she asked for 20 pengő, but Stagl could pay only 12. In the end, Pendl nevertheless performed the procedure for that amount, again with the understanding that Stagl would pay the rest later. After the humiliating and body-shaming remarks directed at her ("Juli is fat"), Mrs. József Somogyi Hegedűs decided to follow the advice she had received: she boiled six cedar seeds and drank the liquid, which induced a miscarriage within a few hours. The knowledge she obtained from her employer, Mrs. Sértő, can be regarded as part of the folk abortifacient knowledge circulating within local female networks, offering a solution to such "troubles," especially if we take into account that Piskó lay in the Ormánság, a region known for its practice of limiting family size to a single child. The figure

of Mrs. Sértő gradually assumes a hostile character in the testimonies, yet it is difficult to deny that she also showed an intention to help. Apart from the fact that Mrs. Somogyi Hegedűs was clearly attempting to shift responsibility, this also emerges from the defendant's own statement:

> She kept repeating that if "she had not died from three beatings [abortions], then I would not die from this one either." […] After constant persuasion, and with my mind driven out of me, I finally resolved to do it. Then Zsuzsa Kovács suggested that I sharpen a piece of cedar wood and stab the fetus with it. She even sharpened the cedar stick, but in the end, I did not dare to do it, even though I was not in my right mind. When she saw that I was hesitating, she suggested instead that I boil six cedar seeds in water and eat them.[31]

The fact that Mrs. Somogyi Hegedűs's mother remained by her daughter's side when she became ill, providing her with support and security, can also be considered a sign of her relative helplessness and reliance on immediate family members. When the mother saw that the bleeding was too severe, she called for the local midwife. According to the midwife's testimony, Mrs. Somogyi Hegedűs initially did not want to reveal what had happened to her. When it became clear that it would be impossible or at least dangerous not to explain the circumstances, however, she apparently appealed to the midwife's sympathy and asked her to help dispose of the miscarried fetus, but in vain.[32]

In Mrs. Kiss's case, the use of a bone rod over a period of about five years formed part of a shared female experience concerning birth control. The court did not even attempt to investigate how widespread the use of this device might have been, although it is highly likely that many others used similar instruments for the same purpose at the time. In the Ormánság region, for instance, the use of a wooden intrauterine device, or a so-called "facsiga" (wooden spiral), was also considered to be common during the period.[33] This device evidently had an informal market similar to that of abortion services, since the woman who sold it offered not only the instrument itself for 500 crowns (roughly the price of a chicken at the time),[34] but also included instructions for its proper use in the price. By using the device, Mrs. Kiss gained first-hand knowledge, and she

31 MNL BaML, VII.1.b., B. 991/1919.

32 Ibid.

33 Kovács, *A néma forradalom*, 124–26.

34 "A hónapos vásárról," *Magyar Jövő* 4, no. 50 (1922): 5.

concluded that even if she did become pregnant, the device would reliably induce a miscarriage.

Over the course of the first five years during which she was using the device, Mrs. Kiss must have experienced pain several times, and her husband also complained about the discomfort caused by the device. What no one could have anticipated, however, was that she would become ill in church and miscarry in the street. The horrific nature of the situation is reflected in her testimony: feeling unwell, she set out from the church toward her mother's house, "but on the way, at the corner of Tóvég Street, she collapsed, and there the fetus was expelled. After this happened, she got up from the ground and left the fetus lying in the street."[35] When she arrived home, her mother was not there, but her sister-in-law was. Thus, the person who provided assistance in this case was again one of the closest female relatives. Mrs. Kiss asked her sister-in-law to call the midwife and also told her that "at the corner of Tóvég Street she would see a fetus in some kind of membranous sac; she should pick it up in a piece of paper and bring it home."[36] The documents of the Kincses trial include a detailed list of the woman's bodily symptoms. This description, however, did not concern the pains experienced by Zsófia Nagy, but rather formed part of Kincses's defense, through which he sought to prove that when Nagy had arrived at his office, she was already in the process of miscarrying. Kincses clearly intended to act as an informal helper, yet once the case became public, he was primarily concerned with protecting his medical practice and, with it, his livelihood.

It appears that during the process of abortion the predominantly female circle that mobilized around the women seeking the procedure functioned as a kind of safety net, reducing the risks associated with the intervention. Another common feature of almost all the cases is the flow of informal knowledge among those involved regarding whom it was worth approaching—individuals who, according to the logic of the illicit market, offered assistance to women in difficult circumstances. The women also had shared knowledge about what methods could be used and how they should be applied in order to prevent the birth of an unwanted child.

It cannot be claimed, however, that men were entirely excluded from the process. When the fathers learned of the pregnancies, they reacted in a relatively wide range of ways. In the cases examined here, the reaction was, essentially,

35 MNL JNSZML, VII.1.a., I.215/1928.

36 Ibid.

some form of rejection. Had this not been the case, the women would have been considerably less likely to seek an abortion.

Silence and Distortion

One recurring element of the silences and distortions that can be discerned in abortion trials is the reference to pressure exerted on the suspected women during the gendarmerie investigation phase. Anna Stagl admitted her act several times both during the investigation and at the first main hearing, but later she withdrew her statements. Behind this change one may suspect her contact with the midwife, who consistently claimed that upon examining Stagl, she had determined that she had not been pregnant.[37] An intriguing aspect of the trial is that the midwife's defense attorney explicitly argued that "the midwives of Mohács are working against the defendant [i.e., the midwife], who was a student of Professor Scipiadesz and trained at his clinic; therefore they want to discredit her at all costs."[38] Invoking Elemér Scipiadesz, who by that time was already a professor of medicine at the University of Pécs (and later became its rector), may have been a shrewd tactical move, since he was regarded as an unassailable authority in gynecological circles of the period. Márton Szidonya, who almost boasted about having seduced Anna Stagl, attempted to defend his own position by claiming that "I am aware that at that time a young man from Monyoród used to visit the defendant, Anna Stagl, in the evenings, but whether she had a relationship with him I do not know."[39] By saying this, he sought to justify why the idea of marrying the woman who was pregnant with his child had never occurred to him.

In the trials of Anna Stagl and Rozália Tóth, the behavior of the pregnant women allegedly had aroused suspicion among several people, who nevertheless had not necessarily intended to bring the matter to the attention of the authorities. These were typically employers, but also close coworkers (in Tóth Rozália's case, for example, the maid who shared a room with her). Mrs. Giflo's story is likewise densely interwoven with networks of silence, as she may have feared that if the matter were to become public before the marriage, Henrik Giflo might withdraw from the wedding. In that case, she would have had a very hard time finding another husband within the settlement or in its immediate region. Kovács also

37 MNL BaML, VII.1.b., 803/1929.

38 Ibid.

39 Ibid.

encouraged her to lie. According to Giflo's statement to the gendarmes, "Kovács told her not to tell anyone, saying: I will give you 8,000,000 [eight million] crowns, and then tell your husband that the child was born at seven months."[40]

A recurring element in these trials is the claim that the miscarrying woman had lifted a heavy object. Anna Stagl, for instance, allegedly helped Szidonya lift a soda-water cart, and Mrs. Giflo later defended herself by stating that "I lifted a great deal of water from the water cart, after which, three days later, my bleeding began and the fetus was expelled."[41] Mrs. Somogyi Hegedűs likewise "stated that her child was lost prematurely because […] she had lifted a heavy load while transporting firewood."[42] Mrs. Somogyi Hegedűs's desperate search for a way out during the proceedings can be traced quite precisely, as she accused both the midwife and her employer. At a later stage of the trial, she stated that she herself had asked the midwife to "report the matter to the judge, so that either the judge or the notary could arrange for the burial of the body." At the same time, she also accused Mrs. Sértő, claiming that in the autumn of the previous year, in the presence of others (including a woman named Julianna Harangozó), she had "made the statement, or threat, that she would strangle me because I had told the truth about her."[43] Although it is possible that Mrs. Sértő was deeply offended that Mrs. Somogyi Hegedűs had revealed her in court, it could not be proven that she had actually made this statement. Mrs. Sértő herself denied the accusation, and she was defended by numerous other women in addition to Julianna Benke (alias Harangozó), who had been mentioned in Mrs. Somogyi Hegedűs's testimony. Not only the village midwife involved in the case spoke in her defense. Elderly women and young women alike testified on her behalf, including the eleven-year-old Mariska Molnár, who, as the niece of Mrs. József Somogyi Hegedűs, "despite repeated questioning, testified that in her presence, or to her personally, Zsuzsanna Kovács [Sértőné's maiden name] had said nothing concerning Mrs. József Somogyi Hegedűs, and she affirmed this under oath."[44]

As the relevant entry in the record makes clear, the witnesses formed a protective line in defense of Mrs. Sértő, in which the fact that several of them were also protecting their own livelihoods was hardly negligible. Yet there may

40 MNL BAZML, VII.1.b., B 7264/1926.
41 Ibid.
42 MNL BaML, VII.1.b., B. 991/1919.
43 Ibid.
44 Ibid.

well have been grounds for questioning Mrs. Sértő's irreproachable reputation, particularly regarding her willingness to assist women in distress. Mrs. Somogyi Hegedűs, who by then had already been given instructions by her defense counsel, appeared to allude to the notorious consequences of the tendency to have only one-child families in the Ormánság when she stated in court that "I am not the first pupil of Zsuzsanna Kovács, because she has taught others the same thing; for if she had not done so and taught them, there would be more than forty schoolchildren in Piskó."[45]

In the trial of Mrs. István Kiss, Mrs. Lajos Lopocsi likewise denied having sold anything to Mrs. Kiss or even having met her after the birth of her child, just as the midwives in the cases of Anna Stagl and Mrs. Henrik Giflo denied having committed any crime. It is also possible that Mrs. Kiss had not fully realized earlier that she was committing a criminal offense, since her defense was based on the claim that she had merely intended to prevent conception. The fact that the device could also be used for abortive purposes likely appeared to her as an extended form of prevention, though legally it clearly constituted abortion. The trial of Kincses, meanwhile, was replete with contradictions. In addition to attempting to prove that, when the woman had approached him, she was already undergoing a miscarriage that had begun independently of him, he also argued at length that his own mental capacity was insufficient, claiming that this had decisively affected his ability to act. These logical arguments repeatedly failed before the court, and in his case, only the collective support of the community ultimately produced any result.

Several defendants later claimed that their statements during the gendarmerie investigation had been made under duress, and they revised or withdrew parts of their earlier testimony before the court. Whatever the accuracy of their claims of coercion, defendants' revisions and withdrawals of earlier statements demonstrate how courtroom strategies reshaped the narratives preserved in the judicial record, distancing the accused from the act and reducing or deflecting responsibility. A common element of the defense was the reinterpretation of the immediate cause of the miscarriage: strenuous physical labor was repeatedly given as the decisive factor, even though the medical experts called to testify in the trials consistently rejected the idea that such exertion could induce miscarriage. Another shared feature is that during the trial the people (mostly women) who came to the assistance of the women seeking abortions tended to defend their

45 Ibid.

own interests and relativize their responsibility. They admitted that the condition of the woman who had sought or already had an abortion had seemed suspicious to them, yet they sought to obscure the nature of their own involvement. The men implicated in the trials likewise attempted to protect themselves. Szidonya insinuated that Anna Stagl had been a promiscuous woman. István Kupeczki, who had impregnated Rozália Tóth, cited his marital status, his children, and his lack of financial means to justify his refusal to marry Rozália Tóth or provide financial support. Imre Kovács attempted to prove that he would have helped the woman had she decided to keep the pregnancy. These reactions reflect the dynamics of criminal proceedings. Once individuals became defendants or witnesses, protecting themselves increasingly took precedence over earlier relationships of assistance or solidarity.

Community Norm

Having examined shaming, informal networks, and the reshaping of testimony during criminal proceedings, I now turn to the community norms that connected these processes. Among domestic servants in Mohács, who were both locally born and migrant women, the awareness that such situations were not unprecedented could provide considerable consolation in moments of crisis. This awareness could alleviate feelings of shame, while the compassion of other women may have encouraged Anna Stagl to regard seeking the help of a midwife as an acceptable solution. The proceedings also reveal that Anna Stagl's conversation had been overheard by her employer, suggesting that the walls did indeed have ears, and that the figure of the midwife only gradually transformed during the course of the trial: from a helper offering wise advice into a profit-seeking perpetrator. Rozália Tóth, in contrast, had no need of such assistance, since she had "already previously heard that a fetus could be destroyed by piercing oneself with some sharp object."[46]

Tóth decided to resort to abortion after István Kupeczki rejected her. Kupeczki's self-defensive narrative likewise appealed to the preservation of family peace and the maintenance of community order, since, as a married day laborer with three children, he claimed that he had repeatedly told the woman (Rozália Tóth) that "he had a wife and therefore could not marry her, and that

46 MNL JNSZML, VII.1.a., II.1049/1928.

he had no money, and thus could give her none."[47] From the context, it is more likely that the money in question would have served to finance the abortion rather than to provide support for raising the child.

If one takes the example of Imre Kovács into consideration as well, this raises the possibility that, in such situations, it may have been expected of the man to pay for the abortion of the woman who had become pregnant. At the very least, this would explain what kind of solution Tóth might have hoped for once marriage was no longer an option. This seems all the more plausible given that, according to her testimony, she already possessed some knowledge of abortion through word of mouth. The same kind of household surveillance that operated in Stagl's case was also present in hers: her employer and her roommate noticed her condition, and it was the unusually heavy bleeding that prompted them to call a doctor. This could partly have stemmed from a degree of cooperation with the woman herself, but even more so from the fear of public disgrace. Mrs. Giflo's case, in turn, helps us better understand the value attached to virginity. The conflict did not primarily arise because of the loss of virginity as an absolute value, since if that had been the case, Mrs. Giflo, who was still engaged, would presumably have guarded her virginity more carefully (assuming she had indeed lost it with Kovács). Rather, the problem seems to have been that Giflo had previously only heard rumors but had not believed them, and only on their wedding night had he realized that there had been some truth to the claims made about his fiancée, namely that she had had an affair, moreover with Kovács, a man of Jewish origin. As the previously cited part of his testimony indicates, it was the man's ethnic origin that the young husband resented in particular. In the trial, therefore, the offended Giflo retaliated by invoking what was considered a traditional value, namely virginity, or more precisely, its absence. It is worth noting that in Anna Stagl's case there was likewise no mention that she had been a virgin, although it seems unlikely that she would not have invoked this if it had been possible when Szidonya slandered her.

Mrs. Giflo's case also reinforces what earlier research has convincingly demonstrated: the midwife in this instance acted as a helper, even though within the framework of legal proceedings she was clearly judged to be guilty.[48] Mrs. István Sértő may likewise have acted as a helper. In this case, Mrs. Somogyi Hegedűs may actually have had a greater interest in terminating the pregnancy.

47 Ibid.

48 Deáky, *A bába a magyarországi népi társadalomban*, 119–24.

Mrs. Sértő, after all, could likely have found labor for her household, whereas Mrs. Somogyi Hegedűs would have had far fewer chances of finding employment in Piskó, a settlement of little more than four hundred inhabitants, or in the surrounding villages, as a woman without a man at her side and with a small child—let alone with two.[49] Here, too, the community kept a close watch on the woman. The village judge and the midwife both paid attention to her pregnancy, already knowing that she was expecting a child, but the village as a whole also observed her, as indicated by the remark that "Juli is fat." In this case, the midwife appeared less cooperative. First, the community already knew that woman was pregnant, and second, the midwife may have feared that if she acted differently she herself might become implicated, especially since Mrs. Somogyi Hegedűs had tried to involve her in concealing the evidence.

The example of Mrs. István Kiss from the Tiszazug region reveals familiarity with technical means of contraception. She had been able to use the bone spiral for years, suggesting that such a device was probably not unknown in her environment. Equally instructive is the portrayal of the husband's powerlessness, as he "repeatedly told his wife to throw away that particular contraceptive device, but she never listened to him."[50] Although the husband was not at all comfortable with the use of the device, he was nevertheless unable to prevent his wife from using it.

The trial of Imre Kincses reveals another aspect of how community norms operated. When someone emerged from the innermost circles of the community and became a representative of a helping profession, once he returned to his original community, the requests made because he had belonged to that community became, at least in his case, difficult to refuse. Kincses's formal position of authority thus effectively shifted into an informal role. He did not possess sufficient knowledge to treat Zsófia Nagy's condition properly. As a result, not only the young woman whom he referred to the hospital in Békéscsaba, but Kincses himself also became suspicious in the eyes of the chief physician there. At the same time, this transformation of roles ultimately may have worked in his favor, since it enabled him to mobilize several thousand people (almost half the population of the settlement) to stand up for their doctor, whom they explicitly described as "their own child." One finds the following on the signature sheets,

49 *Az 1920. évi népszámlálás,* 12. On the limitations of rural women's employment, see Zimmermann, "The Agrarian Working Class Put Somewhat Centre Stage," 85–86; Varsa, "The Women of Viharsarok," 121–23.

50 MNL JNSZML, VII.1.a., I.215/1928.

accompanied by a letter signed by representatives of the settlement's most significant associations and circles:

Signatures: in support of Dr. Imre Kincses's petition for clemency, by which we wish to demonstrate that the misfortune that has befallen him is also our sorrow; and just as a loving mother, if necessary, protects her endangered child with her own body, so we, as fellow citizens sharing the fate of our community, raise our moral swords to save our stumbling child.[51]

The cases discussed above demonstrate how the community could function both as a source of support and as a threat. When a criminal case was brought onto the official legal track, those who had offered consolation and assistance to the pregnant woman could just as easily turn against her during the trial if they needed to defend themselves. The operation of social surveillance also becomes clearly visible: interrogation, close observation, and the existence of informal channels for gathering information about others. These trials likewise testify to the circulation of informal knowledge, familiarity with household remedies, and the expected forms of support from men, while also revealing the activity of those informal regulators of the moral economy who exercised influence within the community. Perhaps the clearest example is provided by Mrs. Sértő, who, alongside her formal authority as an employer, possessed considerable informal power, which enabled her to align Mrs. Somogyi Hegedűs's behavior with the community's norms regarding childbearing. Something similar can also be observed in the case of Kincses, around whom the community closed ranks. Anna Stagl, in contrast, had been removed from her natural community when she moved to Mohács, making her far more vulnerable. Her employer supported her only as long as there seemed to be a chance that the matter could be concealed, and Rozália Tóth's situation developed in a similar way. In both cases, the role of the employer, who possessed economic power, extended into the informal sphere, clearly motivated by the desire to protect the reputation of the household, though in these cases unsuccessfully. Mrs. Lopocsi, like the Mohács midwife Róza Pendl, offered forms of assistance that could significantly influence the outcome of childbearing decisions, though not without payment, yet quite effectively. In doing so, such helpers were forced to navigate between the imperative to offer assistance and the risk of violating the law.

51 MNL BéML, VII.1.c., B 4564/931/4.

Conclusion

Approached from the perspective of the moral economy of communities, reproductive decision-making can be understood as structured around the norms of utility and fairness. These norms were largely enforced by individuals who possessed informal authority, meaning that childbearing was neither an entirely individual decision nor even one made jointly by spouses, but rather an action aligned with collective norms defined by a moral economy, in which women holding positions of authority played a crucial role. The support provided by this informal authority was not entirely altruistic. The midwife initiated the procedure for payment, while the employer could exercise closer bodily control over her employee. Abortion cases most frequently mobilized close female relatives, since the intervention always put the life of the woman seeking an abortion at serious risk. These relatives not only assisted the woman in distress but could also help conceal the evidence. Another lesson of the trials is that in highly tense situations, such as abortion proceedings, the community often closed ranks around the individual accused if he or she possessed informal authority. This reveals the dependence of the witnesses on that person. Understanding the operation of moral economy in relation to childbearing becomes easier if reproductive decision-making is viewed as a hidden form of coordination governed by a normative logic, within which a kind of reputational economy functioned, centered on the preservation of honor. The maintenance of honor provided better access to work, housing, and opportunities on the marriage market and subsequently also played a decisive role within married life. Protecting honor was therefore not only an individual but also a collective interest. In this context, those who found themselves in vulnerable situations, and particularly women, could count on assistance, or in other words, on the sharing of burdens: the midwife might provide treatment, female relatives a safety net, the employer practical support, and the man responsible for the pregnancy financial assistance. Even this combination, however, was not always sufficient to prevent a criminal trial. When such trials did occur, the community members involved understandably tended to defend the person who held informal authority, since that person's downfall would have represented a greater loss for them.

Archival Sources

Magyar Nemzeti Levéltár Baranya Vármegyei Levéltára, Pécs [Hungarian National Archives, Baranya County Archives] (MNL BaML)
VII.1.b. Records of the Royal Court of Appeal of Pécs. Case files
Magyar Nemzeti Levéltár Békés Vármegyei Levéltára, Gyula [Hungarian National Archives, Békés County Archives] (MNL BéML)
VII.1.c. Records of the Royal Court of Gyula. Criminal case files
Magyar Nemzeti Levéltár Borsod-Abaúj-Zemplén Vármegyei Levéltára, Alsózsolcai Fióklevéltár [Hungarian National Archives, Borsod-Abaúj-Zemplén County Archives, Alsózsolca Branch] (MNL BAZML)
VII.1.b. Records of the Royal Court of Miskolc. Civil and criminal cases
Magyar Nemzeti Levéltár Jász-Nagykun-Szolnok Vármegyei Levéltára, Szolnok [Hungarian National Archives, Jász-Nagykun-Szolnok County Archives] (MNL JNSZML)
VII.1.a. Records of the Royal Court of Szolnok. Criminal cases

Bibliography

Andorka, Rudolf. "Az ormánsági születéskorlátozás története" [History of birth control in Ormánság]. In *Gyermek, család, történelem: Történeti demográfiai tanulmányok*, 30–57. Budapest: Andorka Rudolf Társadalomtudományi Társaság, 2001.

Andorka, Rudolf. "Adalékok az ormánsági 'egyke' történetéhez Vajszló és Besence református anyakönyveinek családrekonstitúciós vizsgálata alapján" [Notes on the history of "one child" in the Ormánság region, based on the analysis of family reconstruction in the Reformed parish registers of Vajszló and Besence]. In *Gyermek, család, történelem: Történeti demográfiai tanulmányok*, 101–26. Budapest: Andorka Rudolf Társadalomtudományi Társaság, 2001.

Andorka, Rudolf. "A gyermekszám alakulásának társadalmi tényezői paraszti közösségekben (18–19. század)" [Social factors affecting changes in child numbers in peasant communities, 18th–19th centuries]. In *Gyermek, család, történelem. Történeti demográfiai tanulmányok*, 58–100. Budapest: Andorka Rudolf Társadalomtudományi Társaság, 2001.

Az 1920. évi népszámlálás. Vol. 1, *A népesség főbb demográfiai adatai községek és népesebb puszták, telepek szerint* [1920 population census. Vol. 1, Main demographic data of the population by municipalities and more populous farms and settlements]. Magyar Statisztikai Közlemények 69. Budapest: Pesti Könyvnyomda, 1923.

Balassa, Iván. *Az eke és a szántás története Magyarországon* [The history of the plow and plowing in Hungary]. Budapest: Akadémiai Kiadó, 1973.

Benda, Gyula. *Zsellérből polgár: Társadalmi változás egy dunántúli kisvárosban. Keszthely társadalma 1740–1849* [From peasant to citizen: Social changes in a small town in Transdanubia, 1740–1849]. Budapest: L'Harmattan, 2008.

Buzgó, Gábor. *A hálózatok földjén: A Bihar vármegyei Nagyléta község gazdasága és társadalma a környezettörténet és a hálózattudomány látószögében, 1870–1929* [In the land of networks: The economy and society of the village of Nagyléta in Bihar County from the perspectives of environmental history and network science, 1870–1929]. PhD diss., University of Debrecen, 2025.

Chayanov, Aleksandr V. *The Theory of Peasant Economy*. Edited by Daniel Thorner, Basile Kerblay, and Robert E. F. Smith. Homewood, IL: American Economic Association, 1966.

Deáky, Zita. *A bába a magyarországi népi társadalomban (18. század vége–20. század közepe)* [The midwife in Hungarian folk society, late 18th century–mid 20th century]. Budapest: Centrál Európa Alapítvány, 1996.

Gémes, Balázs. "A magzatelhajtással kapcsolatos hiedelmek a magyarság körében" [Beliefs regarding abortion among Hungarians]. In *A Szekszárdi Béri Balogh Ádám Múzeum Évkönyve*, vol. 4–5, edited by Mária G. Vámos and Miklós Szilágyi, 233–58. Szekszárd: Béri Balogh Ádám Megyei Múzeum, 1973–1974.

Hofer, Tamás. "A parasztcsalád morális ökonómiája" [The moral economy of the peasant family]. *Demográfia* 37, no. 3–4 (1994): 383–88.

Kis, Diána, and Péter Őri. "A termékenységi átmenet egy dél-alföldi német közösségben: Nemesnádudvar (1850–1945)" [Patterns of the fertility transition in a German village in the southern part of the Great Plain: Nemesnádudvar, 1850–1945]. *Demográfia* 64, no. 4 (2021): 271–316.

Koloh, Gábor. *"Szántani lehet, de vetni nem muszáj": Az ormánsági egykézés történetei (1790–1941)* [You can plow, but you don't have to sow: The stories of the one-child system in the region Ormánság, 1790–1941]. Budapest: HUN-REN BTK Történettudományi Intézet, 2021.

Koloh, Gábor. *"A pusztulás útján haladnak": Baranyai lelkészek egykejelentései (1934)* [They are heading toward destruction: Statements by pastors in Baranya County, 1934]. Budapest: HUN-REN BTK Történettudományi Intézet, 2022.

Koloh, Gábor. "Kormányzói kegyelem egy magzatelhajtó orvosnak" [Governor's pardon to a doctor who performed an abortion]. *Médiakutató* 26, no. 4 (2025): 45–56.

Kósa, László. "Erkölcsi kihágások és büntetéseik Gyulán a XIX. század első felében" [Moral offenses and their punishments in Gyula in the first half of the 19th century]. *Békési Élet* 1 (1979): 118–25.

Kovács, Imre. *A néma forradalom* [The silent revolution]. Budapest: Cserépfalvi, 1937.

Őri, Péter. "A családrekonstitúciótól az eseménytörténeti elemzésig: A demográfiai folyamatok megértése felé vezető út" [From family reconstruction to historical analysis: The path toward understanding demographic processes]. *Demográfia* 66, no. 4 (2023): 285–336.

Őri, Péter. "A termékenységi átmenet mintái egy mikrorégióban (Zsámbék, Tök, Perbál) a 19. század végén, a 20. század elején" [Patterns of the fertility transition in a microregion (Zsámbék, Tök, Perbál) in the late 19th and early 20th centuries]. *Demográfia* 61, no. 1 (2018): 53–90.

Őri, Péter. "Parental Loss in 18th–19th Century Hungary: The Impact of the Parents' Widowhood and Remarriage on Their Children's Survival, Zsámbék, 1720–1850." In *Stepfamilies across Europe and Overseas, 1550–1900*, edited by Lyndan Warner and Gabriella Erdélyi, 1–27. London: Routledge, 2024.

Pakot, Levente. *Nemek és nemzedékek: Demográfiai reprodukció a 19–20. századi Székelyföldön* [Genders and generations: Demographic reproduction in Székely Land in the 19th and 20th centuries]. Budapest: KSH Népességtudományi Kutatóintézet, 2013.

Pakot, Levente. "Társadalmi státusz és gyermekvállalás a Nyugat-Dunántúlon: Bük, 1850–1939" [Social status and childbearing in western Transdanubia: Bük, 1850–1939]. *Korall* 63 (2016): 130–57.

Pakot, Levente, and Péter Őri. "Fertility and Mortality Responses to Short-Term Economic Stress: Evidence from Two Hungarian Sample Populations, 1819–1914." *Explorations in Economic History* 97 (2025): 101671. doi:10.1016/j.eeh.2025.101671.

Pakot, Levente, and Péter Őri. "Socioeconomic and Religious Differentials in Marital Fertility during the Fertility Transition: A Micro-Level Study from Western Hungary, 1850–1939." *Demográfia* 58, no. 5 (2015): 5–37. doi:10.21543/DEE.2015.1.

Popkin, Samuel L. *The Rational Peasant: The Political Economy of Rural Society in Vietnam.* San Diego: University of California Press, 1979.

Scott, James C. *The Moral Economy of the Peasant: Rebellion and Subsistence in Southeast Asia.* New Haven and London: Yale University Press, 1976.

Szabó, Á. Töhötöm. *Kooperáló közösségek: Munkavégzés és kapcsolatok a falusi gazdálkodásban* [Communicative communities: Work and relationships in rural farming]. A Kriza János Néprajzi Társaság Könyvtára. Marosvásárhely: Mentor Könyvek, 2009.

Thompson, E. P. *Customs in Common.* New York: New Press, 1991.

Thompson, E. P. "The Moral Economy of the English Crowd in the Eighteenth Century." *Past & Present* 50 (1991): 76–136.

Varsa, Eszter. "The Women of Viharsarok: Peasant Women's Labour Activism in 1890s Hungary." *International Review of Social History* 69, no. 1 (2024): 99–126. doi:10.1017/S0020859024000130.

Zimmermann, Susan. "The Agrarian Working Class Put Somewhat Centre Stage: An Often Neglected Group of Workers in the Historiography of Labour in State-Socialist Hungary." *European Review of History: Revue européenne d'histoire* 25 (2018): 79–100. doi:10.1080/13507486.2017.1374926.