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Doctoral School of Military Sciences

THESIS BOOKLET

for the Doctoral (PhD) dissertation of

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The Hungarian war invalid homes: past, present, future

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1. DEFINING THE SCIENTIFIC PROBLEM

Disabled soldiers are extremely neglected figures in historiography, which is why there is hardly any international or domestic literature that reviews or compares war care. However, during the study of the past, it became clear to me that several centuries ago rudimentary attempts were made in our country - for different purposes, with different means, and with varying success - for the state and/or the church to take care of disabled soldiers in addition to the family. The topic became particularly important to me when, during my research on Hungarian war care, I was confronted that we have almost no solid knowledge about war veterans' homes.

In the center of my dissertation, true to its title, is time, and the protagonists of change along the flow of time are the "unfortunate" soldiers of the past, the veterans' camps, and homes for the veterans. In my thesis, I will review how the military home for the disabled, founded in the name of the "ruler" and then the "nation's gratitude", evolved and finally ceased to be a home for the disabled, defined as an element of "social administration". By presenting the current Hungarian "veteran care without veterans" and foreign veterans' homes, I searched for answers to important and timely questions. I considered the priority goal of my research to be the investigation of whether the participation of the Hungarian Defence Forces in foreign missions expected in the (near) future justifies the establishment of a new institution, the veterans' home.

In summary, I see the scientific problem as follows:

1. Disabled soldiers only became the focus of society's attention - for a short time - during World War I. In the last years of the Great War, the states of Europe and North America realized that the complex care and compensation of war invalids could no longer be an individual problem, but a public matter. The paradigm shift from individual responsibility to social responsibility was greatly contributed to by the fact that by that time it had become completely unacceptable that the consequences of military service performed in the public interest be borne solely by disabled soldiers and their families.

The distinguished attention manifested in state-organized war care focusing on disabled soldiers, their families, and fallen soldiers and their relatives was characteristic of all the participating states of the war. However, the initial enthusiasm - regardless of whether the state was on the winning or losing side - was replaced in the years following the war by the almost

complete indifference of society and chaos caused by the often thoughtless ideas of decision-makers.

As a result, disabled soldiers, especially those placed in war-disabled homes, became an almost unsolvable social problem in the former belligerent countries against their will for many decades. The study of Hungarian war care, including the legal status, rehabilitation, financial and health care of disabled soldiers, as well as the changes of the hero cult from era to era, has once again become the focus of scientific interest and research since the centenary of the outbreak of World War I. However, our current knowledge about the Hungarian War invalid homes of the past is much more modest than war care. Even today, the home for the disabled is the forgotten stepchild of the universal, as well as military and medical history, and military health.

This is supported by the fact that the title of the New Volume of the Military Encyclopedia also includes the title disabled, which is only the currently valid Act XLV of 1994 on military care interprets who qualifies as war disabled based on the definition of the Act. The conceptual definition of the war invalid home - bearing in mind that this institution has stopped existing for almost half a century - was not included in the lexicon.

2. The research on the topic is made more complicated because, in the last nearly seventy years, the words disabled and veteran had a completely different meaning than in some countries of North America and Western Europe. Former soldiers injured in the world fires of the 20th century formed a well-defined and homogeneous group among disabled people everywhere. The common point of connection was the war that fundamentally changed their lives and the war-related deprivation they suffered there.

In our country, the public and official language identified this group with the word disabled, while the term veteran belonged to those with a history in the labor movement. The term veteran of Latin origin, with the definition of a seasoned, experienced soldier, only spread - basically - in the common language after the regime change. From the 1950s until the change of regime, the Hungarian veterans' homes did not care for war veterans, but only the elderly members of the nomenclature.

Unlike in our country, the terms veteran and war veteran used by the United States of America and Western European NATO allies have made their way into the common language for several decades through the mediation of military experts. However, the status of veterans following the completion of military service of longer or shorter duration in peacetime - and

even performed in an operational area or a foreign mission - only appeared in the last 40 years among our NATO allies.

The concept of veteran has only recently been defined in domestic law. The Ministry of National Defense launched the Veterans Program (VP) in 2020. According to the basic concept of the VP made public, in the future those ex-soldiers who verifiably took part in actual armed firefights and combat activities during foreign missions, will receive special respect.

However, the legal definition of the concept of veterans has only recently taken place. The amendment to Act XCVII of 2013 on data management in the defense sector and military administrative tasks related to fulfilling of certain defense obligations, in force since 1 January 2022, defined the concept of "military veteran" for the first time. The law defines veteran status based on merit earned in the past. Therefore, it is not understandable why the legislation also provides for the handling of data on injuries. Based on these, it is not clear whether ex-soldiers injured in foreign missions in connection with non-hostile acts of war are considered veterans.

3. Similarly to veterans' homes, we do not have systematic and practical knowledge about disabled care. As for the legal status of a veteran of the national defense described in point 2, the veteran definitions of foreign countries also provide for the merit-based recognition of soldiers who demonstrate outstanding standing in combat.

However, the foreign practice ties the veteran status to the duration of service spent in the field of operations, in a foreign mission. Furthermore, it is worth highlighting that special attention is paid to the most vulnerable among veterans, to soldiers injured and/or ill in foreign missions. In addition to the state and veteran advocacy organizations, other charitable organizations and market players are also actively involved in the complex care of veterans. However, the veterans created not only national but also international veterans' organizations. The study of the veteran care of the NATO member states, the countries neighboring our country, and the countries of the Visegrad Group to the conclusion that the vast majority of them use their available limited financial resources to ensure the long-term well-being of their veterans injured and ill in recent and current foreign missions.

4. Based on the current Hungarian regulations, the Ministry of National Defense provides rehabilitation for all injured and ill soldiers within the framework of military health.

Furthermore, based on its responsibility for compensation, the Hungarian Defence Forces is fully responsible for the damage caused in connection with the service relationship of the member of the staff, regardless of culpability. Therefore, the care of the present can be

defined - based on my definition - as "veteran care without veterans". Nowadays, we have entered a phase of scientific and technical development, as well as the transformation of social and economic processes, in which completely new, unexpected changes are taking place that are not at all probable from the processes of the past and present (e.g. the COVID-19 pandemic, the Russian-Ukrainian war, etc.).

The scientific problem of the future veterans' home can therefore be considered unique since we do have past data on injuries and illnesses that occurred in the mission area, but the conclusions, correlations, and trends drawn from them can essentially only serve as a basis for estimating the number of health damages that will occur in the future - with absolute certainty. Since we do not know the gender, age, place of residence, health status, disability, family situation, and educational level of the injured and sick soldiers of the future, we do not know what kind of care they need after complex rehabilitation. However, it can be assumed that in the future there will be injured and sick soldiers in the mission area who will have to be taken care of in the future.

The scientific problem of the future veterans' home is also closely related to one of the issues to be solved in 21st-century patient care, the human challenges affecting health systems - including military health - and the effective management with the help of digital health solutions. The future goal is to significantly reduce the differences in the geographical distribution of healthcare resources, to improve access to healthcare and the quality of healthcare services. The Hungarian veterans' home of the future is therefore unthinkable without modern digital healthcare applications.

2. RESEARCH OBJECTIVES AND HYPOTHESES

I have set the basic goal of my research to present the past of the "forgotten" homes for the disabled in Hungary in a scientific way and to outline the current "veteran care without veterans" in Hungary, as well as through the analysis of the veterans' homes of our NATO allies, countries neighboring our country and the countries of the Visegrad Group the possible directions of the future Hungarian veterans' home.

The objectives of my research work are as follows:

1. An overview of the almost two-century history of the military invalid home, war invalid home as a supply/care institution in Hungary, systematization of the knowledge, and the

exploration of which of these, looking back from a historical perspective, can serve as an example in the future in the institutional care of veterans.

2. Presentation of the accidents, and illnesses (health damage) that occurred in the foreign missions of the past two decades in connection with non-hostile and hostile acts of war, as well as the related national defense health benefits through the institutional system of military service law.

3. An overview and systematization of the institutional framework within which veteran soldiers are currently cared for in our NATO allies, in the states neighboring our country, and in the countries of the Visegrad Group, as well as what general conclusions can be drawn from a comparative analysis of the veterans' homes in these countries.

4. My goal is to investigate whether a veterans' home maintained by the Ministry of National Defense, or a veterans' home operating as a non-traditional institution, has a right to exist in the future and what possible connections they might have with military health.

I based my research work on the following hypotheses.

H1: I assume that in the past there were Hungarian military homes for the disabled, which - depending on the historical period - provide models that can be applied based on the challenges and needs of the future in the care of soldiers with impaired health.

H2: Based on the analysis of the accidents and illnesses of active soldiers who suffered health damage in foreign missions, I would like to prove by processing my investigation results that, in addition to the moral and financial recognition as a "military veteran", in the future, it would be justified for the Ministry of National Defense to create a new type of institutional care (veterans home).

H3: Through the analysis of the legal institutional system for the care of veterans in foreign countries, as well as the analysis of the system-level data of veterans' homes, I would like to prove that the establishment of a veterans' home in our country can also be suitable for veteran soldiers who prematurely end their military service – resulting from their health damage in a foreign mission – or for retired to settle the individual fate of veteran soldiers.

H4: Based on the analysis of the results of the available domestic and international data, I assume that based on the participation of the HDF in foreign missions, a veterans' home -

which is not yet operational in the current military health care - following rehabilitation, flexibly adapting to the challenges of the future and supported by digital healthcare solutions is justified structurally preparing your plan. Based on international practice, I would like to prove that, within the framework of the "smart home" concept, it is advisable to first implement the "digital veteran home" in the homes of retired veteran soldiers.

3. RESEARCH METHODS

The methods used during my research work were primarily determined by the interdisciplinary nature of the topic. When writing the dissertation, I used analysis, synthesis, and comparison among the methods of logic, and my research methodology was determined by the available sources.

To prove the hypotheses, I used the following research methods. I searched for and studied original documents mainly in the National Széchenyi Library and the National Archives of the Hungarian National Archives. I contacted the Military History Archives as well as several county books and archives. I researched the relevant sources for my topic with the help of foreign professional databases available electronically through the National Library of Health Sciences and domestic and foreign databases provided by the University Central Library and Archives of the National University of Public Service. Through interlibrary lending, I also had access to the materials of many national and county libraries. Related to my topic, I processed the research results of several doctoral dissertations on military (historical), legal, and military health topics.

In presenting the past, the dissertation can be regarded as having a historical approach, however, due to the limitations of the scope, I refrained from a more detailed presentation of the events and happenings of the homes for the disabled and the individual Hungarian historical eras.

In the course of the research, with the permission of the Director General of the MOD Defence Economic Bureau, I processed the compensation cases of professional and contract soldiers of the Hungarian Defence Forces for the period from 2000 to 2021 - during a foreign mission, related to an accident or illness related to service obligations. Furthermore, from 2017 to 2021, I studied and analyzed the III. of the military career, the compensation collector of all claimants receiving benefits based on its pillar - the health impairment benefit system - with particular regard to accidents, illnesses, and health impairments in the operational area, related to service obligations.

In the framework of questionnaire research conducted with the consent of the director of the NATO Centre of Excellence for Military Medicine, I gained knowledge about who maintains the veterans' homes in our NATO allies these days and how they operate. In the course of my work, I studied, classified according to the topic, analyzed the data, and then applied the statistical methods of data processing.

In researching the future in an open, dynamic system relationship and based on holistic thinking, I tried to systematize the revealed possible phenomena, changes, and connections. When researching the future, I used only qualitative methods among the integrated methodological solutions of future research. The research was carried out using one of the youngest methods of "futuristic paths" by the so-called I finished with a limited application of the "Horizon Scanning" (future-scanner) method in Hungarian.

I participated in domestic events and lectures related to war care and used the new scientific results and knowledge acquired there during my work. I kept in touch with the staff of the Ministry of National Defense, the National Association of War Invalids, War Widows, and War Orphans, as well as the presidency of the Hungarian Alliance of Military Fellowship, and I used what was said during the consultations when writing the thesis.

4. BRIEF DESCRIPTION OF THE EXAMINATION

In the thesis, after substantiating my introductory thoughts, the justification of the choice of topic, and its timeliness, I explained the scientific problem related to my research, based on which I formulated my research objectives and hypotheses, and also outlined the methodology of my investigation.

I have structured my dissertation into four main chapters along the past, present, and future timelines.

In the first chapter, I undertook a brief overview of the homes for war invalids in Pest, Pest-Buda, and the Trianon borders of Hungary. In the chapter, following the European perspective, I showed that hospitals existed in our country from the early Middle Ages, which were rooms, rooms or independent buildings connected to monasteries - intended for the reception of foreigners - but care for soldiers disabled in the war was not established until the beginning of the 18th-century care homes. In the chapter, I systematized how the military home for the disabled, which was founded in honor of the "ruler" and then the "nation", evolved and finally ceased to exist in the last third of the 20th century, defined as a peripheral element of the "social administration".

In the second chapter, I presented today's "veteran care without veterans" through the compensation responsibility of the national defense organization. After defining the definitions, I presented my theoretical research results related to the liability of the national defense organization for damages. I presented the connection between responsibility, the national defense organization's responsibility for compensation, and foreign missions. In the chapter, I reviewed my quantitative research carried out at the Ministry of Defense, which focused on soldiers injured and ill in foreign missions between 2000-2021 and former soldiers receiving health care benefits between 2017-2021. In the chapter, I analyzed in detail the accidents that occurred in foreign missions, in connection with hostile and non-hostile acts of war, as well as illnesses/damages to health.

In the third chapter, I presented the care of foreign countries for veterans and one of the defining elements of this was my international research results related to veterans' homes. Within this framework, I presented my questionnaire research conducted at the Budapest-based NATO Military Health Center of Excellence, accredited by the North Atlantic Council. In the chapter, I analyzed and systematized who qualifies as a veteran soldier in our NATO allies, in the states neighboring our country, and in the countries of the Visegrad Group, and I also presented the veteran concepts and veteran homes of these states.

In the fourth chapter, based on the qualitative methods of future research, I outlined my ideas about the Hungarian Veterans' Home of the Future. Based on the possibilities (stability or instability of processes and situations) and the direction of expectations (whether we prefer change or change or not), I formed four future alternatives. After that, I analyzed in detail why the Hungarian Veterans' Home of the Future is not the same as the institutions established for the rehabilitation of the current military health system, and why it is not one of the special social institutions providing specialized care within the framework of personal care. In this chapter, I developed the theoretical foundations of a digital veterans' home focusing on veterans' home care and veterans' home care.

In some chapters of the dissertation, you can find a detailed formulation of the problem, a description of the relevant regulators and (legal) norms, a detailed overview of the proposed method(s), and the formulation of partial conclusions.

5. SUMMARY CONCLUSIONS

As a general summary of the thesis, I can say that the research was a unique opportunity for me on the one hand, and an intellectual challenge and real creative work on the other.

The military homes for the disabled of the past and the homes for the disabled as part of the social administration of the (recent) past were without exception established after the wars and were finally liquidated within a few years or decades after that. The state, as a maintainer, considered only short-term, economic, and institutional solutions to be feasible. State responsibility with a strategic approach, i.e. ensuring that the disabled person works permanently, reliably, and predictably at home, was not included in the ideas of the decision-makers of the past. This pattern was broken by the Pesti Honvéd Menház, which opened in 1872 and provided shelter to the veterans of the 1848-49 revolution and war of independence. The Menház is our only military home for the disabled, which was founded in the spirit of "nation's gratitude". The national donation mobilized the entire Hungarian society, as every citizen considered it their moral duty to take care of the veterans of '48, depending on their financial means. The Menház was put under state management in 1881, however, the government promised that it would take care of the care of the former national defenders until the end of their lives. This promise was kept by the government - for almost half a century - until the death of the last veteran of '48 (1925).

In my opinion, the VP can only satisfy the different needs of the veteran community if, in addition to being recognized based on past merit, he was injured, fell ill/suffered health damage in military missions, or connection with this, the military career III. also takes into account the future needs of former active duty soldiers receiving benefits based on its pillar.

This is supported by the system-level analysis of the care of veterans and veterans' homes in foreign countries, which proved that the establishment of a veterans' home in our country is a reasonable institutional response in the interest of society and the armed forces, which is suitable for the well-being of veteran soldiers who end their service prematurely or are separated due to their age. and to settle his destiny.

In my dissertation, I supported the four future versions I hypothesized about the domestic veterans' home, based on the HDF's participation in foreign missions, a structural veterans' home - which is not yet operational in the field of military health - following rehabilitation, flexibly adapting to the challenges of the future and supported by digital healthcare solutions, is justified preparing.

With my research, I proved that instead of the "nursing home" type institutions designed for "retired soldiers" within the framework of the OP, as a first step, we should implement the digital veteran's home in the retired soldiers' own homes (smart home concept). After that, I consider it justified to create a digital veterans' home that will also meet the different future needs of veterans who are younger than this generation, injured and ill in the HDF missions abroad. This idea fits in with the foreign model whose goal is that in the future, the primary places of care for veterans will not be the social and medical institutions operating as traditional institutions, but the veterans' own homes.

6. NEW SCIENTIFIC RESULTS

1. I was the first in our country to present the institutional history of Hungarian military invalid homes and war invalid homes from the 18th century to the 20th century. I proved that, among the military nursing homes of the past, the Pesti Honvéd Menház provides a suitable model for the challenges of the present - and the future - as it is our only institution that was founded as a sign of "nation's gratitude" with the moral and financial support of Hungarian society. In addition to social responsibility, the state's strategic responsibility can also be justified in the operation of the Menház, as it provided long-term, reliable, and predictable care for disabled soldiers.

2. Based on my research focusing on the health damage that occurred during the foreign missions of the HDF, the analysis, systematization, and evaluation of the current veteran care and veterans' homes in foreign countries, as well as the future versions developed by me, I proved that the monetary and in-kind benefits stipulated in the currently effective legislation of the Ministry of National Defense, as well as the complex in addition to rehabilitation, in the future it must also provide a new type of institutional care (veterans' home).

3. By presenting the veteran terms used by our NATO allies, neighboring countries, and the countries of the Visegrad Group, as well as by including them in a unified system, I supported that the veterans' homes, through a reasonable distribution of the available resources, provide for veteran soldiers with impaired health and/or retired veteran soldiers needs.

4. I proved that it is advisable to standardize the definitions of the OP and the VP and, similar to foreign practice, to consider a veteran a soldier who retired after completing professional service or was demobilized after his contractual military service (not through his

fault or for disciplinary reasons). I define the soldiers injured and ill in foreign missions as a group of veterans requiring special care.

5. I confirmed that the future participation of the HDF in foreign missions justifies the preparation of a structural plan for a veterans' home, which is not yet operational in the current military health system, following the complex rehabilitation of soldiers with impaired health, flexibly adapting to the challenges of the future and supported by digital healthcare solutions. Based on international practice, I confirmed that, as part of the "smart home" concept, the first step is to implement the digital veteran's home in the retired veterans' own homes.

7. PRACTICAL APPLICATION OF THE RESEARCH RESULTS, RECOMMENDATIONS

The thesis and its results can be used:

1. The chapter of the dissertation presenting European and domestic war veterans' homes of the past can include the training programs of the National University of Public Service Faculty of Military Sciences and Officer Training and the National University of Public Service Doctoral School of Military Sciences, where it can be used as attitude-forming and scientific literature.

2. In addition to scientific public life, the thesis also draws attention to the Hungarian war veterans' homes and their residents for the Hungarian society, therefore it fits into the objectives of the Military Heroes' Memorial Program launched by the Military History Institute and Museum of the Ministry of Defense almost a decade ago.

3. A detailed analysis of service-related accidents and illnesses in HDF missions abroad will help the Ministry of National Defense to effectively prepare for health damage that may occur in the future.

4. An overview of today's international practice, focusing on the necessity of the revision and further development of the currently effective domestic regulations, provides guidelines for the future harmonization of legislation, public law organizational regulatory instruments, the VP, and the OP.

5. The thesis can help decision-making regarding military health, given that it draws attention to future challenges for which traditional institutional responses are no longer sufficient.

6. A digital veteran's home system that can be integrated into a comprehensive system, meets the (professional) expectations of 21st-century military health care - and also the needs of the patients - and supports the care, supervision, and care following complex rehabilitation, as well as the innovative application of AI, serves as a guideline. (smart home concept).

8. LIST OF THE AUTHOR'S RELATED PUBLICATIONS

Book chapter/ Book pages

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3. dr. Mihók Sándor: Hadigondozás Magyarországon a hadbalépéstől a háború befejezéséig, In. Cserhalmi Péter – dr. Mihók Sándor – Sztanó Zsuzsanna: Magyarországi hadigondozás az első világháborútól az 1989. évi rendszerváltást követő fordulatig, Tanulmánykötet, Kiadta: a Hadirokkantak, Hadiözvegyek és Hadiárvák Országos Nemzeti Szövetsége, Budapest 2020., 51-62.

Technical articles in a Hungarian-language journal in Hungarian

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4. dr. Mihók Sándor: A Pesti Honvéd Menház története, Honvédségi Szemle 2020/2. szám, 136-150.
5. dr. Mihók Sándor – Fejes Csenge: A katonai orvoslás a Római Birodalomban, Lélektan és hadviselés interdiszciplináris e-folyóirat II. évfolyam 2020/2. szám, 43-57.
6. dr. Mihók Sándor – Sztanó Zsuzsanna: A magyarországi hadigondozás témájának kutatása, különös tekintettel a jogi szabályozásra és a pénzügyi ellátások alakulására, Költségvetés – Pénzügy – Számvitel, a Honvédelmi Minisztérium Védelemgazdasági Hivatal tudományos-szakmai kiadványa, XX. évf. 1. szám, 2019. november, 62-71.
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1. Zsolt Fejes – Sándor Mihók: The military hospitals of the Roman Empire, *American Journal of Research, Education, and Development (RED)* 2018/1, 4-14.

2. Zsolt Fejes – Sándor Mihók: Suppliance of the disabled of the Great War with artificial limbs, *American Journal of Research, Education, and Development (RED)* 2017/4, 14-21.

9. SHORT ACADEMIC BIOGRAPHY OF THE AUTHOR

Sándor Mihók was born in Szeged in 1968, in 1987 he graduated from Ferenc Berkes Vocational High School in Kecskemét, and in 1990 he obtained a military/financial economist diploma at Zalka Máté Military Technical College.

He continued his studies at the University of Miskolc, where he graduated as a lawyer in 1996, then in 2000 he took a unified legal examination before the Legal Examination Committee of the Ministry of Justice. In 2007, he obtained a higher professional qualification at the Police College. In 2019, he participated and obtained a certificate in the "Secret Case Manager Training Course" organized by the Institute of Advanced Public Administration Training of the National University of Public Service.

From September 1990 to March 2012: served in the framework of a professional service relationship with the Hungarian Defence Forces and organizations under the direct control of the Minister of National Defense. From 2010 to 2011, he worked as a staff officer of the United Nations Peacekeeping Force in Cyprus (UNFICYP) in Nicosia as chief administrative and personnel officer. After his active military service, he worked in a law firm as an employed lawyer, and also as a consultant and security manager for business companies. He is currently an individual entrepreneur (general business management consultant).

Since 2016, he has been a volunteer reserve officer of the Hungarian Armed Forces, in the rank of lieutenant colonel (position: Hungarian Defence Forces Medical Center, senior officer).

Since 2006, he has been a member of the Supervisory Board of the Reconnaissance Soldiers Association. Since 2018, he has been the chairman of the Supervisory Board of the Foundation for Our Comrades, founded by the Hungarian Alliance of Military Fellowship. From 2019 to the editors of the interdisciplinary e-journal of Psychology and Warfare. From 2023, he has been a member of the Institutional Research Ethics Committee of the Hungarian Defence Forces Medical Center. On August 31, 2020, as an individual preparer, he obtained his final exam at the Doctoral School of Military Sciences.

In English, he has the NATO STANAG 3.3.3.3 exam and a higher-level C-level complex language exam extended with military language. He has a basic-general (B1) complex language exam in French. The number of scientific publications registered by the Library of Hungarian Scientific Works: 30, of which 4 are publications in foreign languages.