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COUNTRY WELFARE STUDY

CZECHOSLOVAKIA

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## 1. THE PRE-WAR SOCIAL PATTERN

### A. SOCIAL GROUPS

#### 1. Governmental Units.

a. Provinces: The Czechoslovak Republic was composed on historical lines of four provinces: (i) Bohemia, (ii) Moravia-Silesia, (iii) Slovakia, and (iv) Carpathian Ruthenia. Each province elected its own Diet, by which in turn the provincial executive committee was chosen; the central government was represented by a centrally-appointed Provincial President, who was usually a Czech in Bohemia or Moravia, a Slovak in Slovakia, and a Ruthenian in Ruthenia. Differences in their historical background resulted in certain differences in the location of welfare responsibilities; in the "historic provinces" of Bohemia and Moravia, for example, which had formerly lived under Austrian law, the province was responsible for mental hospitals and for people without "settlement", and in Slovakia and Ruthenia, which had formerly been part of the kingdom of Hungary, the central government provided hospitals and children's residential institutions and operated a child-placement service.

b. Communes: Every province was subdivided into local administrative districts, each of which was composed of a number of communes. Every commune had to keep a list of handicapped persons and persons in receipt of public assistance. Primary responsibility for public assistance rested with the commune in Bohemia and Moravia; but in Slovakia and Ruthenia the commune was responsible only insofar as private charity proved inadequate. Persons without means of livelihood had a legal right to relief in Bohemia and Moravia, but not in Slovakia and Ruthenia. Communes differed widely in population and in wealth, and therefore in their ability to discharge this historic responsibility. At the census of 1930, population was distributed among the communes as follows:

<u>Population of Commune</u>	<u>Proportion of Czechoslovak Population</u>
Under - 1000	35%
1 001 - 5000	34%
5 000-50000	20%
50 000 - and over	11%

Eligibility for communal assistance depended on membership of a commune. As in most countries, there was some lag between the current legal definition of membership of a commune and the increasing mobility of labor. At the time of the 1930 census, less than half the people of Bohemia and only three-quarters of those of Ruthenia were living in the commune in which they were born.

The newer welfare services tended to be organized on a more-than-local basis.

In urban communes, most public welfare services were administered by civil servants as a department of the municipal administration.

2. Linguistic, Ethnic, and Religious Groups. Under the Minorities Treaty of 1919 and in accordance with its own constitution, the Czechoslovak Republic allowed a full measure of liberty and equality to members of racial, religious and linguistic minorities. Their right to their own welfare agencies, schools, religion, and language was recognized. Moreover, whenever 20% of the population of a city or district belonged to such a minority, it was to receive a reasonable share of the public funds appropriated to welfare and education. This was interpreted to mean that Germans, Magyars, Jews, and members of other minority groups, were entitled to have their own welfare agencies, and that these voluntary agencies could be used as agents of the State for such purposes as child-welfare. All these groups were presumed to collaborate loyally with the Czech and Slovak majority within the framework of the Republic. This stress on the multi-national character of the Republic was one of the basic reasons for the great importance attached to voluntary agencies in Czechoslovak welfare policy.

Since some voluntary welfare agencies were of religious inspiration, and since religious diversity was closely connected with historic differences between provinces, the distribution of the population according to religious denomination was of some importance in the welfare field. The general tendency was for Czechs to be Roman Catholic or to belong to some denomination that had broken away from the Church of Rome, either in the time of John Huss, or in 1919. Germans tended to be Lutheran or Roman Catholic. Slovaks were nearly all Roman Catholic. Ruthenians were either Greek Catholic - i.e., they used a Greek rite but recognized the Pope - or they were Greek Orthodox. The proportion of the population in the principal religious denominations at the 1930 census was:

Roman Catholic	74 percent
Greek Catholic	4 percent
Protestant	8 percent
Czech National	5 percent
Greek Orthodox	1 percent
Jews	2 percent
No religion	6 percent

3/ Occupational Groups. Before the War, an equal number of Czechoslovaks gained their living from agriculture and from industry - 35% getting their living from agriculture, forestry, and fisheries; 33% from industry, mining, and crafts; and 32% from commerce, finance, transportation, the professions and public service.



Of the 2.5 million persons gainfully occupied in industry, some 2 million were wage-earners. Of these, more than one million were members of trade unions. Labor organization was supported by the government, which made the trade unions its agents for administering unemployment insurance. This helped make their "beneficial" or "mutual-aid" activities as important as their work as spokesmen for labor in bargaining with employers and dealing with the government. Reliance on group action of this kind was another of the characteristics of the Czechoslovak Republic. It did not suffice however to meet more than part of the unemployment problem. In 1933, for example, the number of registrants at employment exchanges who failed to find work during the month of February was 920,000; yet the monthly average of unemployed trade unionists, who came within the scope of the unemployment insurance system, was only 248,000.

## B. LIVING STANDARDS

1. Family Budgets. Enquiries by the Statistical Office of the Czechoslovak Republic in 1931-32 resulted in the collection of many family budgets from different classes in the community. Those for the working classes gave an average annual income of 15,100 Kc. per family, of which 10,840 Kc. represented the earnings of the head of the family. The principal items of expenditure per family and per consumption unit in the Czechoslovakian working classes averaged:

Expenditure Per Family		
<u>Item of Expenditure</u>	<u>(in Czechoslovak Crowns)</u>	<u>Per Consumption Unit<sup>a/</sup></u>
Total	11 925	4243
Food	7 990	2750
Clothing	1 310	500
Rent	920	350
Heat	740	280
Light	140	50
Insurance	710	270
Taxes	115	43

<sup>a/</sup> A consumption unit is an adult male engaged in light work and weighing 65-70 kilograms.

2. Wage Level. In 1935, the median wage rate of persons contributing to a sickness insurance fund was 17 Kc. a day for men and 12 Kc. a day for women.<sup>1/</sup> In 1929, it had been 22 Kc. a day for men. Actual wage rates varied from occupation to occupation. In agriculture they were considerably lower than median.

<sup>1/</sup> The Czechoslovakian crown (Kc.) was worth a little more than 1d. (Sterling) or 3 cents (US), but its purchasing power inside Czechoslovakia was considerably higher.



In manufacturing industry they were higher, particularly in durable goods industries, 24 - 36 Kc. being quite normal wage-rates in manufacturing industries in 1935. In the coal mines 40 Kc. a day or 10,000 Kc. a year constituted average earnings in 1935. One may, therefore, consider earnings of 7000 - 10,000 Kc. a year as normal for adult male industrial workers.

3. Food. The Statistical Office of the Czechoslovak Republic in 1931-32 made some inquiries into living standards among different classes of the community. For the working-class, it found that consumption per consumption unit 1 / per annum included:

Meat	34 kilograms
Fats	24 kilograms
Potatoes	118 kilograms
Sugar	34 kilograms
Milk	180 litres
Eggs	239

Consumption of meat was less than that of Great Britain and the United States. Consumption of fats, on the other hand, was relatively high. Milk and egg consumption were also high. 2 /

4. Housing. The predominant type of housing consisted of very small dwelling units. At the census of 1930 it was found that 60 percent of the dwelling units had one or two main rooms, and that 90 percent of the urban wage-earners lived in one or two rooms. The Government gave some financial encouragement to housing both by way of loans and by way of guarantees. There was a tendency for this financial support to concentrate mainly on what was called "small apartments" of not more than 80 square metres, excluding the kitchen, and on what were called "very small apartments", of not more than 40 square metres, including the kitchen. Rents at Prague for two rooms and a kitchen in 1935 averaged in the case of controlled rents, 2300 Kc. a year, and in the case of <sup>un</sup>controlled rents, 5500 Kc. a year - the rentals on some housing still being restricted by law dating from the first World War.

Between 1918 and 1936, some 46,000 dwellings were financed by loans from social insurance carriers.

5. Health. Infant mortality has fallen markedly over a number of years, the improvement being much greater in the Western than in the Eastern provinces. Infant mortality per thousand live births averaged annually:

1 / See preceding footnote (page 3)

2 / Figures for households having an annual income of 2000-6000 Kc. per consumption unit, equivalent to 5780-17,340 Kc. per family, reprinted in ILO., Workers' Nutrition and Social Policy (1936) p. 216.

<u>Years</u>	<u>Czechoslovakia</u>	<u>Bohemia</u>	<u>Moravia</u>	<u>Slovakia</u>	<u>Ruthenia</u>
1919-1923	161	157	155	168	183
1924-1928	150	136	134	172	184
1929-1933	148	120	115	161	174
1934-1938	123	-	-	-	-

There were several hundred cases of typhus each year in Carpathian Ruthenia and there was some malaria and trachoma in Slovakia. The tuberculosis death rate per 100,000 population at Prague was 122 in 1938; it rose to 169 in 1942. The death rate from a number of avoidable diseases was:

Death Rates per 100,000 Population, 1936

<u>Diseases</u>	<u>Czechoslovakia</u>	<u>Great Britain</u>	<u>United States</u>
Tuberculosis	129	70	53
Pneumonia	129	72	93
Diarrhea and Enteritis	49	14	16
Diphtheria	16	8	2
Typhoid	6	1	3

About two-thirds of the population was insured for medical care; but only a small part of the self-employed peasantry were covered by this service.

Doctors numbered about 12,500 for about 14,800,000 people; but their distribution was uneven.

## 11. PRE-WAR WELFARE SERVICES

### A. SOCIAL INSURANCE

Social insurance being the principal Czechoslovakian method of meeting the social problems of the 1920s and 1930s, it is with the social insurance system that one's study of Czechoslovakian welfare administration must begin. Of the four principal branches of social insurance -- health; invalidity, old age and survivor's insurance; unemployment; and workmen's compensation -- the first was considerably expanded and the second and third were introduced under the Republic. Only the fourth remained approximately as it was in Hapsburg days.

A special system of insurance tribunals was established for hearing and determining claims to benefit and for receiving appeals. These tribunals contained representatives of employers and employees, as well as of the government. They were outside the ordinary system both of law courts and of administrative tribunals.



This growing system of social security, however, was not completed before the German conquest. There remained the task of expanding it to cover the self-employed who, in Czechoslovakia, were very numerous, and who had considerable need of protection against the cost of medical treatment and against invalidity and old age, although not against unemployment. The need for this further expansion of Czechoslovakian social security programme was generally recognized. It was hard, however, to devise practical means by which poor Slovak and Ruthenian peasants could pay the necessary cash contributions.

1. Sickness Insurance. This compulsory insurance covered all who worked under a contract of employment, service, or apprenticeship. It applied to agricultural as well as industrial workers. In 1924, wage-earners' dependents were given a statutory right to insurance benefits, with the result that  $2/3$  of the Czechoslovakian population was assured of medical treatment. When maternal and infant welfare centres were developed and school medical examinations introduced, it was possible to confine these new health services to advice, actual treatment being provided by the insurance doctors. The time limit for medical treatment was also abolished. Sick pay -- available to wage-earners only, not to their dependents -- could last for twelve months; it was exceptionally liberal, amounting on the average to two-thirds of base pay. Administration was left in the hands of 300 approved societies, under the control of joint committees representing employers, employees and the government. Each approved society made its own arrangements with doctors, so that some insured persons had a choice of doctor while others did not. Some approved societies arranged for treatment by individual doctors, while others opened their own clinics, sometimes on a grandiose scale, permitting considerable specialization by the doctors employed. Contributions were fixed by the approved societies and varied according to the wage class to which the insured person belonged, but if the contribution amounted to more than 5.5 per cent of a week's wages, as it usually did, the approval of the Government's Central Insurance Institute was needed. Insured persons transferred frequently from society to society. Administrative costs were high: they amounted to 14% of contributions. In addition to the general sickness insurance system special schemes were in force for non-manual workers, miners and government employees.



In September 1936, the number insured was:

General scheme	2,368,000
Non-manual workers	233,000
Minors	105,000
Total (without State employees)	2,707,000

2. Invalidity, Old Age and Survivors' Insurance. To the pre-existing system of invalidity insurance for miners, State employees, and non-manual workers, a system of invalidity insurance for wage-earners was added in 1924, thus making this kind of insurance as universal as health insurance for all persons working under contract of employment, service, or apprenticeship. The beneficiaries were of three principal kinds:

(a) the insured person who was entitled to invalidity benefit if he wholly or partly ceased to be able to earn his living, or to a retirement benefit after he reached the age of sixty-five; many elderly unemployed persons were pensioned in this way during the depression.

(b) his dependant survivors who became entitled to a certain proportion of what would have been his pension, the widow receiving half and each child one-fifth, or if it were a complete orphan, two-fifths of the wage-earner's pension;

(c) insured women were entitled to a small dowry of from 400-600 Kc. on marriage.

The pension, as in Germany, was made up of (a) a base payment fixed on the eve of the war at 650 Kc. a year; (b) a benefit varying in proportion to the number of contributions paid; (c) allowances for dependent children; and (d) a State supplement of 500 Kc. for those insured persons who were exempt from income tax. Contributions varied from 4 to 6½ per cent of weekly wages to be paid by the wage-earner, and the same amount to be paid by the employer. A State subsidy was added. Administration was in the hands of the health insurance societies, on behalf of the Central Social Insurance Institute. The number insured at the beginning of 1937 was:

By the Central Social Insurance Institute	2 060 000
Non-manual workers	350 000
State employees	450 000
Minors	100 000
Total	2 960 000

3. Unemployment Insurance. Czechoslovakia not having the kind of a system of poor relief in which its able-bodied unemployed could fall back, the Republic was obliged in its very early days to establish a system of national unemployment assistance. In 1921, however, the State gave up direct responsibility for this service and entrusted unemployment compensation to the trade unions, contenting itself with laying down certain general principles which it was able to implement by its power to make large grants to the trade unions in aid of their unemployment insurance activities. These grants varied from 200-300 per cent of the trade unions' benefit rate according to the extent to which the beneficiary had family responsibility. Total benefit rates towards which the State grant was payable, normally amounted to 2/3 of base pay. The maximum was fixed at 15 Kc. a day. The government grant was normally available up to 26 weeks, but under certain conditions of the labour market, it could be extended to 39 weeks. Contribution rates were fixed by trade unions subject to the approval of the Ministry for Social Welfare. Contributions were paid only by workers: employers did not have to contribute. The average number of persons in receipt of unemployment benefit in the course of each month was:

1931	102 000
1932	185 000
1933	248 000
1934	246 000
1935	236 000
1936	171 000

The weakness of this "Ghent" system of unemployment insurance in Czechoslovakia, as in other countries, was that unorganized workers were not insured against the risk of unemployment although they tended to be as much exposed to this risk. Approximately half as many persons were insured against unemployment as against sickness and invalidity. Trade union unemployment insurance therefore had to be supplemented by national government distributions of bread, milk, fuel, clothing, and Christmas gifts, and by national grants in aid of local assistance and provincial and local relief work.

4. Workmen's Compensation. This form of insurance was not universal; instead it covered a long schedule of enumerated occupations. For example, occupations in which motors or engines were used were regarded as dangerous; but lumbering was not. In Bohemia and Moravia workmen's compensation dated from 1887 and in Slovakia and Carpathian Ruthenia from 1907. It was not uniform. It covered certain enumerated occupational diseases, as well as work accidents. Administration was in the hands of three public insurance institutions located at Prague for Bohemia, Brno for Moravia and at Bratislava for Slovakia and Carpathian Ruthenia.



A fourth fund located at Bratislava administered injury insurance for agricultural workers. All of these funds were managed by Boards representing employers and employees. Contributions were fixed by each fund and varied according to the degree of risk assessed for each particular enterprise. Benefits were low except in the contingency of total incapacity or fatal injury. In the case of total incapacity, the benefit aimed at was two-thirds of the annual wage calculated on the first 12,000 ac. of wages. In the case of death the widow's pension would be 20 per cent of her husband's previous earnings and each orphan's pension 15 per cent, but the combined pensions of the widow and children were not to exceed two-thirds of the insured person's previous annual wage. Only half as many persons were insured against work injuries as against sickness and invalidity. The average number of persons insured, excluding agricultural workers, was in 1933:

Total	1 230 000
Prague Institution	770 000
Brno Institution	332 000
Bratislava Institution	128 000

#### B. SOCIAL ASSISTANCE

The function of social assistance in Czechoslovakia was to fill in some of the gaps left by the system of social insurances.

1. Public Assistance. Czechoslovakian public assistance continued to be administered on the basis of Austrian laws of 1863 and 1868 and a Hungarian law of 1886.

Eligibility depended on inability to make a living through one's own efforts. In some communes this was strictly interpreted, so as to exclude the able-bodied, or require people to use up their capital, or prove destitution by test work. In other communes this definition was broadly interpreted, so as to cover the supplementation of inadequate wages on behalf of large families.

Immediate responsibility rested with the commune of residence, but ultimate responsibility rested with the commune of settlement. Settlement in a Czechoslovak, as in an Austrian or Swiss, commune, was normally acquired by inheritance, marriage, or payment of admission dues, although since 1896 in Bohemia and Moravia it has also been obtainable gratis by persons who have lived ten years continuously in the commune to whose membership they desire to be admitted. In each commune public assistance has been administered by a special ad hoc board. Taking the country as a whole, these boards have tended to draw about one-eighth of their income from rents on their property, interest on their investments, gifts and legacies, refunds from previous beneficiaries,



and special taxes earmarked for public assistance purposes. For the remaining seven-eighths they had to draw upon the general fund of the commune.

They provided both home relief and sheltered care. The home relief was sometimes in cash, sometimes in kind, and in a few places where a mature economy had not yet given place to a money economy, the members of the commune took turns in caring for the indigent. Sheltered care in Bohemia and Moravia was provided by the commune on behalf of the young and old and by the province on behalf of the defective. Some homes for the young and the old were model institutions, as, for example, the Masaryk homes of the city of Prague. Many of the small communes boarded out their aged in private establishments. In Slovakia and Carpathian Ruthenia the communes were not responsible for finding shelter for the young; instead, as in Hungary, the State ran children's homes and took responsibility for placing children in families, although it charged up to their commune of settlement the cost of caring for such children when they were over the age of seven.

The number of persons who received public assistance during 1931 was:

Total	330 000
Bohemia	170 000
Moravia	80 000
Slovakia	70 000
Ruthenia	10 000

At Prague in 1931 some 19,000 persons were aided, of whom one-third were children below 16 and one-third were old people above 65. Some 6500 of these were given only non-recurring emergency assistance, many of them in kind. The other 12,500 were given regularly recurring assistance; one-quarter of them received it in residential institutions and three-quarters in their homes.

2. Unemployment Compensation. The communes have not felt able to bear the burden of unemployment through their public assistance machinery, and the feeling has been widespread that the problem of the able-bodied ought to be kept distinct from that of persons unable to make a living through their own efforts. A number of experiments have been tried, such as:

- a. National unemployment assistance allowances, 1918, temporarily.
- b. Nationally-subsidized voluntary unemployment insurance, 1921 (see 11.4.3.)

- c. National grants in aid of local relief work, and in aid of local public assistance.

old 3. Old Age Pensions. Employed persons who were sixty years or more in 1924 when the contributory pension system was introduced, were not included in that system. Instead they were made eligible for an old age pension if they were indigent, unable to work, and sixty-five years of age. This pension was to consist of a base pension of 500 Kc. to be paid by the State, and a supplement to be paid by the commune, varying from 50 - 100 Kc. according to the size of the population of the commune.

4. Child Welfare. Special ad hoc Child Welfare Boards were organized for communes, judicial districts, provinces and the nation as a whole so as to bring together agencies which worked primarily with mothers and children of particular ethnic and religious groups. The child welfare boards for judicial districts in Bohemia and Moravia were usually entrusted by the courts with guardianship duties on behalf of illegitimate and boarded-out children - a very important duty in Czechoslovakia as in most countries of North Central Europe, since in this region some 10% of the births are illegitimate. These boards also promoted or operated dispensaries, temporary shelters, and vacation colonies.

5. Medico-Social Services. The right to medical assistance was implemented in 1920 by the Republic assuming responsibility for paying the "district doctors" who treat the sick poor and supervise the health of school children. This was particularly important in a country where the self-employed agriculturalist was outside the sickness insurance system. It was hoped that in this way young doctors might be encouraged to settle in rural districts, instead of all gravitating to the rising cities.

6. Veterans' Assistance. The War Invalids' and Veterans' Administration had provincial and district offices all over the country through which it administered payments and services to survivors of the World War dead, and also to disabled veterans.

### C. VOLUNTARY AGENCIES

Czechoslovakia encouraged the development of a very large number of voluntary agencies to supplement the work of official bodies. On the whole, it may be said that provision of an adequate minimum for material existence was regarded as the duty of the State, while voluntary agencies were relied upon to provide case work and group work services, the general effect of which would be educational and preventive.



The private social service organizations in their development and their effort for coordination followed, on the whole, the scheme established by the public bodies. Most of these organizations soon realized that their task was to supplement the services given by the State and by autonomous governmental bodies. They were to fill in possible gaps in the public scheme, giving more individual attention where necessary, and experimenting with new methods of approach and new techniques before handing over the tasks to a public body. There was close collaboration of voluntary organizations with public bodies and with the social insurance agencies. These private organizations have been suppressed to some extent by the Nazi occupation but it may reasonably be expected that some will be revived soon after liberation. Some of the principal voluntary agencies, or groups of voluntary agencies, were:

1. The Czechoslovak Red Cross: This was practically the only Czechoslovakian voluntary agency that was not organized on an ethnic basis. It was under the direction of Dr. Alice Masarykova. Its structure was that given by the international convention. It has four provincial divisions with a large number of local chapters (736 in 1936). The main stress was on training of nurses and voluntary workers.

In 1938 there were about 50,000 of these voluntary workers trained in first aid. The Red Cross organized the transport of sick and injured persons by means of Sanitary cars (127 stations), it owned a considerable number of beds, tents and transportable barracks.

Many clinics, dispensaries and First Aid stations (288) were established throughout the country, especially in Slovakia and Carpathian Ruthenia. The Red Cross operated:

- 33 Dental Stations
- 3 Sanatoria (one of them in Prague)
- 3 Children's Convalescent Homes (Bukovany, Smokovee, Darkov)
- 30 Summer Colonies for Children
- 105 Children's Clinics
- 4 Mobile Dental Units
- 13 Dispensaries for Tuberculosis
- 31 Dental Clinics for Children

2. Association of Czechoslovak Voluntary Social Agencies: Also under the presidency of Dr. Alice Masarykova, this national council brought together some twenty agencies, including the Red Cross, the Masaryk League against Tuberculosis, the Association for Combating Venereal Disease, the Maternity and Infant Welfare Association, and the Association of Temperance Societies.



Its aim was to represent the voluntary Welfare Services in their relations with the central offices of the State, and to carry out various tasks for the benefit of several organizations (training of social workers, organization of nation-wide conferences and exhibitions, the publication of a common bulletin, etc.) in both the health and the welfare fields.

3. Denominational agencies: (i) "Charity" (Catholic Welfare organizations) had branches throughout the whole State. The Central Association was in Prague; the Regional Associations in the capital of each Province. Further there were Diocesan Centers and Parish Sections. The "Charity" owned several homes for old people and distributed small benefits directly to the poor. (ii) Protestant Social Welfare Association with four Regional Branches, distributed assistance through local offices and institutions. (iii) Jewish Social Welfare Association with four Regional Branches, distributed aid through local offices and institutions.

4. Trade Unions. Trade unions were encouraged by the government, and in particular were encouraged to enter the fields of mutual insurance and legal aid. In 1936 wage-earners' trade unions had 1,170,000 members, while 937,000 salaried employees were also members of unions. Collective contracts entered into by trade unions normally covered non-unionized labor in the same industry. In a few industries, the chief of which was coal mining, collective contracts provided for family allowances.

5. Cooperatives. The cooperative movement was highly developed in Czechoslovakia, one-third of the banking being done by credit cooperatives.

The principal forms of cooperation were, in 1937:

	<u>Societies</u>	<u>Members</u>
Consumers' cooperatives	816	805 000
Housing cooperatives	1340	79 000
Urban credit cooperatives	2005	1 543 000
Handicraft cooperatives	358	22 000
Rural credit cooperatives	6000	1 440 000
Dairy cooperatives	500	90 000
Non-specialized agricultural marketing cooperatives	1400	334 000
Forestry cooperatives	32	680

#### III. CLASSIFIED LIST OF PREWAR WELFARE SERVICES

The following incomplete list of welfare services in Czechoslovakia corresponds to the list of services in the Welfare Division policy statement (General Bulletin No. 85, November 1944).

#### A. REGISTRATION

Every one living in a commune, whether a national of Czechoslovakia or not, had to register at the town hall, indicating whether he was permanently or temporarily domiciled there. In city apartments, the caretaker helped the police assure the registration of all residents. Every commune had to keep a list of handicapped persons and persons in receipt of public assistance.

#### B. INFORMATION AND ADVICE

This was normally given by such voluntary and self-help agencies as are indicated above in 11.C.3, 4, and 5,

#### C. CASH ASSISTANCE

Outside the Social Insurance System, this was normally given by public agencies 11.B.1, 2 and 3, and also to a smaller extent by private agencies 11.C.3 and 4.

#### D. ASSISTANCE OTHERWISE THAN IN CASH

Besides social insurance services (11.A), national unemployment assistance in kind (11.A.3), local public assistance (11.B.1), medical assistance (11.B.5), and the aid rendered by denominational agencies (11.C.3), important assistance for special categories was given by University out-patient Clinics, student health clinics, and student cafeterias, and by such special associations as:

Czechoslovak Heart Association, with headquarters in Prague, owned a clinic for care of cardinals in Prague.

Czechoslovak Association for Fight against Cancer and Malignant Tumors had four regional branches.

Masaryk League against Tuberculosis, with central office in Prague, worked through offices in the capitals of the four provinces. It established 174 dispensaries for tuberculous patients. It had no hospitals of its own but supported those established by other organizations.

#### E. EMERGENCY SHELTER AND FEEDING

Besides facilities at the disposal of the state Ministry of Education, the provinces, and the communes, the most important facilities were those of the Red Cross (11C.1); see also "Children" below (111 F).



## F. MATERNAL AND CHILD WELFARE

The most important agency was the Child Welfare Board (II.B.4) which in some localities, but not everywhere, organized school milk, school meals, and - for the children of the uninsured - school medical and dental care. Others included:

Mothers' and Infants' Welfare Association, which had a branch in every district and owned an obstetric hospital in Prague-Stvanice and a foster home in Kre, near Prague.

"For our Children", which operated consultation-centres.

Eugenic Consultation-Centres, Consultation-Centres for Brides.

Clinics for Pregnant Women.

Clinics for Mothers.

"Care for Infants", owning hospitals in Karvin and Zebreh.

Organizations caring for children during summer vacations.

- (1) Regional Association for Care of Children during Vacations (Prague).
- (2) "Czech Heart" (Brno).
- (3) Central Organization for Care of Children in vacation-time in the district of Ostrava (Moravia).
- (4) Regional Association for Care of Children during Vacations (Bratislava).
- (5) "Health Generation", Labor Organization for Children's Health Vacation Colonies.
- (6) Trade Unions' Rest Homes and Holiday colonies.
- (7) Clerical and Administrative Workers Homes for Children - in Cesky Sternberg (Bohemia) and in Roznov pod Radhost (Moravia).
- (8) Metal Worker's Union Home for Children in Klokovec (Moravia).

Central Board of Care for Blind, with four regional branches.

Central Board of Care for Deaf-Mutes, with four regional branches.

For children separated from their families, sheltered care was provided by the commune in Bohemia and Moravia, and by the state in Slovakia and Ruthenia (I.A.1.a), while boarded-out and illegitimate children were placed by

district courts under the guardianship of District Child Welfare Committees in Bohemia and Moravia, and of state supervisors in Slovakia and Ruthenia (II B 4). See also III H below.

#### G. DISPLACED PERSONS AND MIGRANTS

No information is available on travellers' aid agencies, other than trade unions, or on transients' hostels.

#### H. SHELTERED CARE

For the aged the commune was responsible in Bohemia and Moravia (I A 1 and II B 1); <sup>for</sup> Children, see above (IIIF) supplemented for Catholics by II C 3. Other agencies included:

##### Miners' Welfare Institutions (excluding those operated by Miners' Sick Benefit Funds):

- (1) Three large Centers for Aged Miners (apartments for hundred of pensioners with their families).
- (2) Two Homes for Pensioners, in Bohemian mining districts.
- (3) Four Convalescent Homes for Miners' Children (for 700 in total) open all year around in the mining districts of Most, Falknov, Plzen, Bohemia).
- (4) Convalescent Home for 3000 Miners' children (and for pensioners) in Silesia; opened annually between May 1st and October 31st.
- (5) Convalescent Home in Stos (Slovakia), 120 beds; owned jointly with miners' Sick Benefit Funds.
- (6) Hospital in Bohumin (Moravia) attached to the local Municipal Hospital.
- (7) Hospital in Handlova (Slovakia).
- (8) Hospital in Podbrezova (Slovakia).

##### Czech Association for Help for Pulmonary Patients, which operated three sanatoria for tuberculous patients:

- (1) In Ples (Bohemia) for men and children (312 beds)
- (2) In Zambark (Bohemia) for women and children (250 beds)
- (3) In Motol-Frague for lupus (skin tuberculous) only.

"Humanity", a workers' organization, which owned sanatorium for tuberculous patients in Prossionice (Bohemia).



Central Board of Care for Patients Suffering from Mental and Nervous Diseases, with four regional branches.

Association of Czechoslovak Organizations for the Care of the Crippled: Among them the most important was The Association for Medical Care and Education of Crippled in Bohemia, and three other regional branches. Their activities were divided into four sections:

- (1) Hospital section for treatment and rehabilitation of physical defects.
- (2) Section of schools.
- (3) Section of workshops and educational stations for rehabilitation.
- (4) Agricultural section.

#### I. OCCUPATIONAL, RECREATIONAL, AND EDUCATIONAL ACTIVITIES

For these purposes, the most important agencies in addition to the trade unions were the Gymnastic Association, with central organizations in Prague, and local organizations throughout the country. Their membership was:

"Falcon" (Sokol)	820,000 members
"Eagle" (Orel - Catholics)	170,000 members
Union of Workers	
Gymnastic Associations	165,000 members
Union of Proletarian	
Gymnastic Associations	74,000 members

#### J. SOCIAL WORK TRAINING

Czechoslovakia had three schools for the training of professional social workers:

Higher School for Social Workers (Prague);  
School of Social Work (Vesna, Brno);  
School for Social Workers (Turciansky Svaty Martin, Slovakia).

#### IV. WARTIME CHANGES IN WELFARE SERVICES

##### War Crimes and Race Discrimination.

During German occupation it was officially estimated in the summer of 1943 that some 200,000 Czechoslovaks were in concentration camps in addition to some 200,000 Jews. It was also officially estimated that some 50,000 individuals had been executed in the Protectorate, leaving behind them families that were sometimes in very difficult circumstances.

### Food Rationing in Wartime.

Rationing in the German Protectorate of Bohemia and Moravia has been as complete as in Germany itself. The legal rations have been comparatively generous according to League of Nations reports; but the foodstuffs to which Czechs were entitled were not always available, and there was great deterioration in quality. In the autumn of 1943 the legal rations amounted to approximately 1,740 calories per normal consumer per day, compared with 1,930 in Germany itself, and contrasted sharply with Poland and Italy where the legal rations amounted respectively to only 1,200 and 1,065 calories. Slovakia being of less industrial value to Germany was allowed total rations of only 1,290 calories. Extra rations were lawful for persons doing heavy and very heavy work, the very heavy workers in the Protectorate being allowed as much additional bread and flour as would have been the case in Germany itself and slightly more meat and fat than in Germany. In Slovakia the additional allowances for very heavy workers were comparatively small. For children in the Protectorate rations were adequate up to the age of nine, but from that point onwards were inadequate according to League standards, as they were also in Germany itself. In Slovakia they were inadequate for children from seven up. For the adult male, rations reached three-quarters of adequacy in the Protectorate, but only half of requirements in Slovakia.

Of the following changes in welfare services, some were reported to UNRRA's Standing Technical Subcommittee on Welfare for Europe by the Czechoslovak government in the spring of 1944 <sup>1/</sup>, while others were reported by Dr. Emil Schoenbaum for the International Labour Office early in 1945 <sup>2/</sup>.

#### A. REGISTRATION

Civilians have been registered on the basis of German compulsory labour orders, the registration being done on an area basis, and records being kept in the respective area employment offices. This compulsory registration was introduced for certain categories in 1939 and was extended to all Czechs and Slovaks in 1942. In some cases the issue of food ration books has been made conditional on presentation of a certificate from an employment office. All employees have "work books". These are official certificates in which are listed all data related to the training, education and employment of the person concerned.

#### C. INSURANCE

A considerable part of the reserves of Czechoslovak social insurance institutions have been ordered transferred to Germany, Austria, Slovakia and Hungary.

<sup>1/</sup> TWE/E (EC1) 3

<sup>2/</sup> International Labour Review (February 1945)



Social insurance has been modified under German rule by the shortening of qualifying periods and the raising of benefit rates, although these benefits have had to be paid by higher contributions or stricter qualifying conditions. In particular, the Workmen's Compensation law has been amended so that the highest yearly income taken into consideration when calculating a basis for compensation, has been raised from 12,000 Czech Crowns (1939) to 72,000 Crowns (1944), with the result that some payments are now many times greater than before the war. It is not known whether this improvement has been counterbalanced by more stringent administration.

Sickness insurance was modified in 1941; by introducing fees for registration with a panel doctor and for getting a prescription; these were presumably part of the policy of deterring war workers from staying away from work in order to get medical treatment. The special insurance scheme for salaried employees was also reorganized in Bohemia and Moravia in 1941.

Pension Insurance was liberalized in 1942. The basic pension was increased, so as to provide a minimum of 6200 Kc for a retired worker with two children. The right to family allowances and to medical care, already enjoyed by salaried employees, was extended to wage-earners; but they were made to pay for this by having contributions deducted from benefits.

Unemployment Compensation was made a government responsibility in Bohemia and Moravia in 1940; when regular allowances were introduced on behalf of persons available for work but temporarily unemployed. These allowances were financed by a payroll tax of 1-2%, which is probably adequate only under war conditions.

#### D. ASSISTANCE

Two new semi-official organizations have been set up for assistance purposes, one for the Czechs and one for the Slovaks.

(1) Czech "Social Welfare" (Socialni Pomoc). According to news in the press and over the radio, this agency has helped 100,000 needy families containing at least 300,000 individuals. It seems to have been most active among miners and the children of miners.

(2) Slovak "Winter Relief" (Zimni Pomoc). This is an organ of the Hlinka political party. It was established in 1939. In 1943 it distributed relief in food, clothing and cash.

(3) It is said that a number of local voluntary agencies have come into existence for the purpose of feeding people who are in distress.

#### F. CHILD WELFARE

The number of elementary schools has been considerably reduced and education for children above the age of ten has been modified so as to lead them into manual employment.

#### G. DISPLACED PERSONS

The number of Czechoslovak nationals displaced to Germany and Austria seems to have been between 750,000 and 1,000,000. Their age grouping is not known with any degree of certainty. It seems probably that considerable harm may have been suffered by many of them, whose economic and social adjustment may present considerable problems after their repatriation.

It was estimated by the Allied military in 1944 that over 300,000 German nationals had been intruded into Czechoslovakia.

There is ground for thinking that several thousand Greeks and other United Nations nationals have also been displaced to Czechoslovakia.

#### 1. NATIONAL RECREATIONAL ORGANIZATIONS

National recreational organizations, such as the Sokol and the Workers' Gymnastic Association have been dissolved and their properties confiscated. In their place, two organizations have been created on the model of the Hitler Youth, one for Czechs and one for Slovaks.

(1) The Czech Youth Organization (Kuratorium pro vychovu mladeze). This has ranked with a State Department or Ministry. It has controlled all youth organizations, acting as a coordinating body which has influenced such other organizations as it has allowed to survive, by means of grants-in-aid, training courses for their leaders and the power to license or suppress them. This Czech organization was, therefore, less unified than the Hitler Youth.

(2) Slovak Youth Organization. This was a branch of Hlinka's Fascist guard.



V. PLANS FOR POST-WAR WELFARE

Professor Emil Schoenbaum in 1944 prepared a memorandum on social security on behalf of the Czechoslovak government at London, which constituted a kind of Czechoslovak equivalent of the "Beveridge Report".

In this Czechoslovak program, more importance is attached to insurance than to assistance, because the reliance of the Czechoslovak treasury on indirect rather than direct taxes would make any other method of financing social security regressive.

The principal points in the Schoenbaum program were:

A. Health Insurance: Full and first-class medical care ought to be provided on an insurance basis for the whole population. Insofar as this is done, the argument for separate provision for salaried employees falls to the ground. Health insurance contributions should be made uniform. Administration should be simplified and cheapened by concentrating it in a comparatively small number of district insurance units; but separate sections for miners might be necessary on account of their exceptionally long record of mutual aid. Medical care need not be under the sole control of the health insurance units; the public health authorities should also have a voice in making arrangements with the medical profession.

B. Pension and Dowry Insurance: Elderly wage-earners who are unlikely to regain employment should be pensioned -- as had already been done for salaried employees -- even if they are not incapacitated or have not reached 65 years of age. Benefit scales should be made uniform, in keeping with the movement of workers from profession to profession. Housing loans should be facilitated, by securing them on the borrowers' pension rights, and redeeming them out of his pension; in particular, this would encourage pensioners to acquire small subsistence holdings in rural districts. So that the young might also benefit, the Pension Insurance System should also be prepared to finance holidays and sports by means of a voluntary surcharge.

Compulsory periodical medical examinations should be introduced as part of the pension and health insurance schemes.

Workmen's compensation should cease to exist as a separate insurance system.

C. Unemployment Insurance: This should be introduced.

D. Family Allowances: These should be introduced after the completion of adequate administrative arrangements. The method of financing them would depend on the financial situation.

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\* In Czech; translated by Helen Hrachovska of UNRRA Training Center, Maryland



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*Donner*  
*Hickler*  
*Chen*  
*Sommer*  
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U N R R A - Czechoslovak Mission

- 1. *Adma Doyle*
- 2. *Welford*
- 3. *D. P. Hickler*

REPORT ON

DISPLACED PERSONS AND ASSOCIATED WELFARE PROBLEMS  
IN CZECHOSLOVAKIA

September - October, 1945.

1. PREAMBLE
2. SPECIAL CIRCUMSTANCES
3. PROGRESS OF REPATRIATION:
  - i/ Home to Czechoslovakia
  - ii/ Home from Czechoslovakia
  - iii/ Home through Czechoslovakia.
4. CONTINUING PROBLEMS:
  - i/ Internally displaced Slovaks
  - ii/ Non-repatriable displaced persons
  - iii/ Refugees.
5. WELFARE PROBLEMS
6. CONCLUSION.

*HOLD*

*Why this  
writing of  
reports?*

21563



To: Mr. P.I. Alexejev, Chief of Mission,  
also for the attention of

D.D.G. Department of Relief Services,  
Director D.P. Division,  
Director Welfare Division.

E.R.O.

From: Elfan Rees, Welfare and Displaced Persons Officer.

1. As this report covers the first two months in which I have combined the duties of Displaced Persons Officer with my previous duties as Welfare Officer, I have thought it well to give a fairly comprehensive survey of the position as it now stands combining in one report, as is now done in my office, both the Displaced Persons and Welfare aspects of the operations concerned.

2. SPECIAL CIRCUMSTANCES

Every country operation will present its special difficulties but some reference to the difficulties in Czechoslovakia is a necessary background to this report.

They may be listed briefly as:

a/ The division of the country into two self-contained military zones occupied respectively by U.S. and U.S.S.R. forces.

Some limited information has been readily available from the U.S. zone but no information either as to number or services has been secured regarding the U.S.S.R. zone. There is an additional complication in the piecemeal relinquishment of Displaced Persons responsibilities by the U.S. Army to the Czechoslovak Government due on October 1st 1945.

b/ The division of the country into two "provinces" viz. Bohemia and Moravia, and Slovakia each exercising what is virtually complete and tragically uncoordinated autonomy in their Displaced Persons and Welfare operations, as in others.

The failure of Bratislava to provide, for Slovakia, even the vague global figures ventured by Prague, for Bohemia-Moravia, and the marked inferiority of the Slovak welfare programme are only indices of the difficulties consequent on this partition.

c/ The large number of Departments and Authorities dealing with Displaced Persons viz.

Czech Army G.H.Q.  
Ministry of Interior  
Ministry of Social Welfare  
U.S. Army  
U.S.S.R. Army  
various Allied Repatriation Missions,

and the grave lack of coordination between them. I am not always satisfied that the failure to pool information is due to departmental



inexperience and oversight.

d/ The many categories of Displaced Persons, some of which clearly and others probably, fall outside the terms of reference of UNRRA resolutions and agreements. viz.

Sudeten Germans /2,579,400/  
Other Germans elsewhere in the Republic /146,600/  
Hungarians / 776,000/  
German refugees in U.S. Army zone /105,000/  
Silesians and Poles now opting for Czech citizenship  
/25,000/

Figures in parentheses show the estimated number involved.

e/ The geographical situation of Czechoslovakia which firstly, with the consent of its Government makes it a staging post and main route for east bound repatriation from Germany particularly to Poland and Yugoslavia, and

secondly, with strict border control on the west and practically none on the east, makes it the last hopeless halting place of west bound refugees from the east.

### 3. PROGRESS OF REPATRIATION

#### a/ Home to Czechoslovakia

The Repatriation Division of the Ministry of Labour and Social Welfare has estimated that 1,000,000 persons have been repatriated through Prague up to October 1st, 1945. In this instance there is also a figure for Slovakia which estimates that 180,000 have been returned to their homes by the same date. There probably remain some 800,000 Czechs to be brought home by the Repatriation Office. It is difficult to ascertain how many of them are technically Displaced Persons, but an estimate of 100,000 would seem generous.

The great majority of Czechs displaced into enemy or enemy occupied territory have now been repatriated, an infinitesimal fraction only are unwilling to return. One train of 1,200 from Scandinavia and another from Germany, British zone, also of 1,200 are due in November, while some Czechs are yet to be repatriated from Belgium and France. Homeward repatriation movements therefore that are either operating or contemplated mainly concern Czechs who sought refuge in allied territory.

Figures are as usual difficult to obtain but the following are instances:

United Kingdom: 3,000 - 4,000 Czechs have yet to be brought home. The movement is now under way by boat and train from Ostend - air lift having been abandoned following an isolated disaster. If this first train of 450 persons is an indication this movement is a model of repatriation, the credit for which goes to the British War Office and the Belgian authorities, including the Belgian Red Cross. U.K. has an additional complication in that there will remain some 2,000 Czech refugees so-called "anti-Fascists" of German or Hungarian origin whose ultimate status and destination remains to be defined.



Palestine: 2,000 Czechs are awaiting repatriation. 500 of them are on care and maintenance and the delay in their return - caused by lack of shipping - is a heavy drain on the very limited foreign exchange resources of this country.

Iran: 400 Czechs in Teheran have now been granted Russian visas and are about to begin their journey home. 230 of them are reported to be eligible for UNRRA assistance.

Jugoslavia: Some 4000 Czechs are displaced in Yugoslavia. There seems now no prospect of repatriating them this winter and meanwhile they are reported to be living on scant provisions and in very hard circumstances.

These must serve as not uncommon examples of the continuing problem. As the numbers involved in the samples are comparatively small it may be as well to point out that the great majority, some 450 thousand, of those yet to be repatriated are located in Vienna, Hungary and Roumania and are not by any technical definition Displaced Persons.

b/ Home from Czechoslovakia

About 1,000,000 allied nationals have been repatriated from Czechoslovakia east and westwards since May 10th, 1945. There are now less than 300 western and 200 eastern Displaced Persons registered in the U.S. Army zone. This remarkable and very successful repatriation movement was organized by D.P.A. - U.S. Army XXII Corps, but, if credit goes to any individual, the mainspring has been 1st Lieut. Schoenborn of Czech Army G.H.Q. The romance of his achievement in repatriation is a story that will never be written and would never be believed. There is no statistical information of any kind available about Displaced Persons in the U.S.S.R. Army zone. It is unlikely that detailed statistics were ever compiled and improbable therefore that a complete picture of Displaced Persons operations in Czechoslovakia can ever be available.

While it is generally assumed that there remain only a very few allied nationals displaced in this zone substantial numbers /an average of 600 per week in recent weeks/ particularly of Italian nationality continue to arrive in Prague seeking repatriation. Attached as appendix I are detailed figures of outward repatriation from May 10 - October 31st.

c/ Home through Czechoslovakia

In accordance with Article IV of the appropriate supplement to the UNRRA - Czechoslovakia Agreement the government of Czechoslovakia have been especially cooperative in facilitating the transit of Polish Displaced Persons from Germany to their homeland. A note on this movement is attached as Appendix II. It is not yet certain whether the movement will continue throughout the winter but it seems unlikely owing to /i/ difficulties of reception in Poland /ii/ shortage of coal for locomotives and /iii/ the hazards of winter travel, not all due to the climate!



#### 4. CONTINUING PROBLEMS

##### 1/ Internally displaced Slovaks

The largest single problem outstanding is that of Slovakia. The Minister of Social Welfare in the Slovak Provincial Council has estimated that there are 300,000 persons internally displaced in Slovakia of whom 50,000 are destitute. As this is almost entirely a problem of welfare it is referred to in greater detail under section 5 sub-paragraph V.

##### ii/ Non-repatriable Displaced Persons

Perhaps the most difficult problem is that of Displaced Persons who are unwilling to be repatriated to their country of origin. This group is composed of former citizens of the Baltic states - most of them with passports qualifying them as stateless - a few Ukrainians, Yugoslavs and a substantial number of Poles. The great majority of these people have so far avoided registration and it is impossible therefore to give any accurate figures - estimates available vary between 2,500 and 15,000. This problem will now be brought to a head by the decision of the Ministry of the Interior to force the registration and subsequently control the location and movement of such people. Decisions as to their future - so far deferred - will be forced upon the authorities as a result of this decree and also because the hope - shared by the Government and the Displaced Persons - that they could be admitted into Germany for care and maintenance has been dashed by the firm refusal of U.S. III Army to allow any further infiltration to Bavaria, except to Bavarians and then only on a "head for head" basis. Already some 10,000 have been evacuated to Bavaria or via Bratislava en route to Palestine.

It seems clear that Czechoslovakia will be very reluctant host to these people and is only likely to tolerate their continuance in the country if they are virtually interned in camps and maintained by UNRRA. A formal application to the Mission along these lines can be anticipated within the next month.

##### iii/ Refugees

The "non-repatriable" problem referred to above is further complicated by the arrival in Czechoslovakia - in increasing numbers - of "west-bound Poles". These people are mostly Jews who have been repatriated from Germany and have found it necessary to leave their country again. They also are now refused re-entry into Germany and, with U.S. control of the German border very rigid and almost no control of the eastern border, the number arriving in Czechoslovakia is likely to increase. 1,400 are known to be in the environs of Prague and the official estimate of a maximum of 2,000 is, in my opinion, optimistically low. Appendix III gives a note on current negotiations regarding these people and of clarifications of policy sought from E.R.O. I believe that the provision of congregate care for these people is imperative but I am a little apprehensive of its implications. It seems fairly certain that, without a closing of the eastern border - which would be a tragedy from any humanitarian point of view - the establishment in Czechoslovakia of organised care and maintenance



of Polish refugees will lead to an indefinite extension of the problem. It will be seen that the Mission has particular need to be in touch with the Inter-Governmental Committee on Refugees and it is much regretted that their representative, who recently visited Prague, failed to make contact with the Mission until his imminent departure made a conference impossible. As a footnote I can add that a Dr. Brondvajna - a Polish Jew - who arrived from Poland this week, told me of an alleged Polish governmental statement that they cannot at the moment guarantee the safety of Jews in Poland.

5. WELFARE PROBLEMS

1/ Repatriated Czechoslovaks

In general the welfare provision for repatriants in Bohemia-Moravia is wellorganised and imaginative in plan. All Displaced Persons pass through a reception centre on their return, where they are sympathetically processed and maintained for an average of one week. Those found medically fit then return to their homes receiving grants of Kc 1,000 per head from the Ministry of Social Welfare and heads of households further grants of Kc 5,000 from the Ministry of the Interior. They receive supplementary rations automatically for one month and subsequently on medical certification.

The provision of reception centres for those who need repatriation is fairly adequate and those I have visited are well-run. An intelligent use is also made of the spas which seem to abound in the country. Unhappily sanatoria provision for the tuberculous is seriously inadequate.

Accurate figures as to health condition are not available but Bratislava reception centre reported 25% of the repatriants to be in advanced stages of T.B. and a further 40% suspect. They also estimated that only 5% were found fit for normal working life. This latter estimate was confirmed by Morávská Ostrava Reception Centre. As a correction to these possibly high figures I attach as Appendix IV a broad analysis of 1,150 medical examinations conducted at the Prague Centre which shows as many as 34.5% healthy. This better figure is due in part to the fact that the sample included persons repatriated from Britain. I should add that Dr. Lilico is sceptical as to the value of this analysis.

The only serious welfare problem is the general lack of clothing. This may be due to delayed deliveries and also in part to unplanned distribution while, in Slovakia, inefficiency and lack of staff are contributory factors. The fact remains however that the supply of used clothing is generally inadequate for the minimum needs of repatriants and unless more shipments arrive soon the winter problem will be very serious.

I attached as Appendix V a statement of distribution from Prague Centre between May - August, 1945.

I have noticed in my visits that the proportion of children's wear amongst the used clothing is much higher than the proportion of children who return from Concentration Camps. There are many other urgent needs for children's wear and its allocation is being canalised accordingly.



By and large the reabsorption of the repatriant into his community, the restoration of his property, etc. goes as well in Bohemia-Moravia as it goes badly in Slovakia. It would be improper to omit the observation that the majority of repatriants from Bohemia-Moravia were deported as politically undesirable while almost all those from Slovakia were deported for racial reasons. The anti-semitism prevalent in Slovakia has most unhappy consequences for the repatriant and is in many ways intensified by his presence. I am satisfied that - as far as food and clothing and general UNRRA aid is concerned as well as the good intention of the Government - the repatriated Jew in Slovakia receives fair treatment, indeed, because of his condition as a Displaced Person, he receives more than the average. He is also much helped by the J.D.C. I am not satisfied however that he is being received back into the community or helped to recover his old home or even start a new one, admittedly more difficult in Slovakia than in Bohemia. Some of them may yet be refugees in Bohemia!

ii/ Displaced Persons in transit.

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While there are occasional complaints and breakdowns, in general the Welfare of Displaced Persons in organised transit is sympathetically and efficiently taken care of. The Government is always ready to help and I have personally found them most cooperative. The movement of Poles detailed in Appendix II is an instance of this, another occurred this week, when the Netherland Repatriation Mission appealed to us to provide ten days victuals for the crews of seven Dutch barges commandeered by Germany and only now able to leave the U.S.S.R. zone of occupation. The appropriate Government department advanced the necessary supplies immediately.

iii/ Static Displaced Persons not of Czechoslovak nationality

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This problem is covered in sub-paragraph ii of section 4. I can only reiterate the general unsympathetic attitude of the authorities and their reluctance to accept any continuing responsibility for the welfare of this group. Both individually and collectively they are becoming more and more a burden on the Mission. There is a constant stream of personal tragedies through my office and I feel very much the need of a competent Case-Worker to deal with what is now almost a full time job. Meanwhile representations have been made on my request, to the Rome conference for authority to make cash grants to the urgently necessitous pending a more general solution of their problem.

The only Camp for such people is Camp Karlov at Plzen which is still run by U.S. XXII Corps and managed by UNRRA team 130. This team is serviced from Munich and, although I maintain close contact with it, it is not a component part of the Mission. The camp is full and I have failed for some time to get any more people admitted not even to the much desired "American Zone".

iv/ Charita.

No statement on welfare for Displaced Persons can be complete without generous reference to the magnificent work of Charita, a Roman Catholic voluntary organisation. They are doing the best welfare job in the country.



v/ Internally Displaced Slovaks

\*  
homeless  
Slovaks

This is the largest single welfare problem in the country and is the deep concern of the whole Mission. I am personally disquieted at the lack of urgency in the Government's approach to it and the unhappy complication of Slovak autonomy. I sometimes believe that there is an, as yet undisclosed, intention of colonising the Sudetenland with these \* which will be, at least for them, a fairly simple and practicable solution to their problem. Meanwhile I attach as Appendix VII copies of letters to and from Minister Major which indicate the present state of our activity in the matter.

6. CONCLUSION

This report is an attempt to bring those concerned up to date on the Displaced Persons and related Welfare problems in Czechoslovakia and is our answer to M. Delierneux's letter D.P.4/6/1 Des, No. 301 of 11th October.

It is written at a critical but as yet indefinite moment in the development of the situation. The coming month will see decisions of vital importance on at least three issues viz.

- a/ The non-repatriable Displaced Persons
- b/ The Polish refugee
- c/ The internally Displaced Slovak.

Any one of these decisions may have a far reaching effect on the Mission's planning, operations and personnel which cannot wisely be anticipated now.

7. PERSONAL

I feel bound to add a personal footnote to this report to the effect that I contemplate, with increasing dis-ease of conscience, the plight of substantial groups of people in this country with whose well-being UNRRA is either not officially concerned or on whose behalf UNRRA has not been asked by the Government to exercise its promissive powers.

The withholding - by default - of UNRRA aid and assistance is a novel and, to me, unwelcome variant of persecution. There is also something very unreal ~~also~~ about clearing Concentration Camps only to find them filled with new inmates, and about repatriating Displaced Persons only to find the creation of new ones keeping pace with one's achievements. It is both tragedy and farce that while UNRRA is struggling to solve the existing problem of Displaced Persons some of its constituent members are creating a new one. Meanwhile I would urge that to turn a Displaced Person into a refugee and then disown him is no solution even to the original problem. A realistic approach to the future of stateless persons including a generous definition of that term and specific explanation of channels of emigration and resettlement are fundamental to the work which the world believes UNRRA to be doing.



Appendix I.

Copy.

Repatriation by Czechoslovak Trains registered by the Czechoslovak Ministry of transports, for the period from May 10th - October 31st.

This does not include transports by trucks, transport by allied - including Russian Railway material, although these transports also have been handled by Czechoslovak authorities to a great extent. It is estimated, that it is about 50% of the total shown below, or about 340.000 people, which brings the grand total up to over 1,120.000 people.

Western allies	65.000	
Italians	13.000	
Balts, Westbound	2.000	
Polish Jews, Westbound	4.000	
Polish Jews Southeastbound	7.000	/Bratislava-Budapest-Bucarest-Constanze/
Swiss	1.000	
Austrians	23.000	
Hungarians	30.000	
Yugoslavs	25.000	
Poles	350.000	
Russians	81.000	
Rumanians	28.000	
Bulgarians	5.000	
Greeks	600	
Various	11.000	
Germans	23.000	/Westbound via Furth im Wald/
	658.600	
Western allies in mixed trains	35.000	
	693.600	
By truck and Russian trains	340.000	
Individual	10.000	
	1,143.600	



Appendix II.

C O P Y .

Notes on Polish Repatriation - October, 1945.

1. Dead line - October 3rd, 1945.
2. Daily rate - 4 trains per day - 1,500 per train.
3. Origins of Trains Loads:
  - France: 14 trains - to run alternate days
  - Belgium: 1 train - about October 7th
  - Germany:
    - VII U.S. Army: 32 trains - 15 per week
    - III " " : 30 trains - 2 per day
    - French zone: 4 trains - 1 tr. per week.
4. Total estimated October repatriation: 168,000
5. Routing:

Route 1. Furth Pilsen Prah Pardubice Prerov Moravska Ostrava Schumin Petrovice	Route 2. Furth Pilsen Prah Kudowa
---	--
6. Feeding:
  - a/ U.S. Army provides rations to Pilsen plus seven days rations for continuing journey.
  - b/ U.S. Army - UNRRA provide hot meal at Pilsen
  - c/ Polish Red Cross - Charita provide hot drinks at intermediate stations according to route.
7. Health and Welfare Division.
  - a/ UNRRA Team at Pilsen for Station duty and to maintain Camp Karlov for emergency use.
  - b/ Polish Mission at Pilsen, Prah and Moravska Ostrava
  - c/ Polish Liaison Officer at all stations en route
  - d/ Polish Red Cross personnel on each train.
  - e/ Czech Red Cross nurses at all stations en route.



f/ Polish Red Cross Mobile Mission under two doctors, C/O Dr. Sagnakosky, stationed at Prague with supplies provided by International Red Cross.

2. Personnel

U.S. Army Pilson  
U.S. Army P.T.O. Capt. Maren  
Chief of Repatriation  
Polish Legation Praha Mr. Wyszewski  
UNRRA Team Pilson, Dr. Sellman  
UNRRA Mission Praha.



Appendix III.

C O P Y.

Czechoslovak Mission.

Prague, 29th October 1945.

To: Mr. P. I. Alezajev, Chief of Mission

From: Mr. Elfan Rees, Welfare and Displaced Persons Officer

Subject: Conference on Polish Refugees at Ministry of the Interior on Friday, October 26th.

Present: Dr. Novak / Counsellor Ministry of Interior /,  
Dr. Dobrovolsky / Counsellor Foreign Office /,  
Dr. Langerova / Repatriation Office Ministry of Social Welfare  
1st Lt. Schoenborn, / Czech C.H.Q. /  
Mr. J. Traub / American J.D.C. / Mr. Landa / Prague J.D.C. /  
Mr. Elfan Rees / UNRRA /

- 1/ It will be as well to describe this conference as informal as no-one would commit himself to any positive viewpoint or undertaking.
- 2/ It was stated that there were known to be some 1,400 Polish Jews in C.S.R. who were unwilling to return to Poland and that action now contemplated would uncover more to an estimated maximum of 5,000. The Ministry of the Interior are shortly to force the registration, and control the location of all foreign nationals who are without visas or passports.
- 3/ The problem before the conference was the future - both immediate and long term - of these persons.
- 4/ It was made clear that it is the policy of the Czechoslovak Government that all such persons should leave Czechoslovakia as soon as possible. At the same time it appears to be agreed that bringing this about by the forcible return of Polish Jews to Poland is impracticable at the present time.
- 5/ It was further recognised that the final evacuation and resettlement of these people was the responsibility of the Inter-Governmental Committee of Refugees.
- 6/ The only alternative solutions to the immediate problem that seem to present themselves are:
  - (i) The admission of these people to one of the allied zones in Germany where they can be cared for in one of the UNRRA Displaced Persons camps.
  - (ii) The establishment of Camps - on Czechoslovak territory - similar to those operated by UNRRA in Germany.



- 7/ The Czech Government obviously prefer solution 6 (1) above. It appears at the moment however that there is very little prospect - owing to the already overcrowded state of Bavaria - of the U.S. Army relaxing their very strict sealing of the western border.
- 8/ The difficulties of solution 6 (11) are:
  - (a) The Czech Government does not feel it should have to accept responsibility - in its present many difficulties - for this problem.
  - (b) The Czech Government lacks both the supplies for such a camp and the man-power to run it.
- 9/ Mr. Traub was asked for any proposals he had from the J.D.C. and stated that his Committee was not in a position to accept responsibility for the problem or to help in any substantial way. He expressed the view that it was a task within the competence of UNHRA.
- 10/ Dr. Dobrovolsky then asked me to state what proposals UNHRA wished to make to the Government. I stated categorically that UNHRA would make no proposals unless and until the Government defined the problem and specifically asked UNHRA for assistance.
- 11/ Considerable discussion ensued as to who should initiate action it even being suggested that the Polish Charge should do so; I had to re-emphasise that UNHRA could not do so within the sovereign authority of the Czech Government until they were forced with a formal request.
- 12/ It was finally agreed in general terms that the most feasible solution of the problem would be for a Camp or camps to be established in which the Ministry of the Interior would be responsible for all security measures and UNHRA would accept responsibility for supply, management, care and maintenance - using the services of the J.D.C. for internal welfare programmes.
- 13/ It was left for the two Ministries to decide which, if either of them, would officially approach UNHRA in the matter.
- 14/ Meanwhile - in anticipation of a formal request or at least a more formal conference - I am anxious to be furnished with clarification or decision from E.E.C. on the following questions.
- 15/
  - (a) Are persons who - having once been repatriated to Poland and who subsequently fled from Poland - still Displaced Persons within UNHRA terms of reference.
  - (b) If such persons are recognised as Displaced Persons am I right in assuming that by the terms of Articles I and II of Supplementing Agreement Number VI the Mission can assist the Government in running the contemplated Camps - by calling forward UNHRA teams as necessary and, by the terms of Article V of the same Agreement, provide the necessary supplies.



- (c) If these persons are deemed not to be Displaced Persons will UNRRA - if requested to do so by the Government - assist in their care in any way.

16/ I attach a draft Cable to H.R.O. seeking guidance on these points.

Reference Polish and other nationals CSR unwilling return home. Estimated maximum number now five thousand.

- 1/ Can you explore possibility readmission such persons Germany for care and maintenance in existing camps.
- 2/ Alternatively can we assume that - if so requested by Government - we can under terms Article I and II Supplementary Agreement VI - manage and maintain, with UNRRA teams, camp or camps by method outlined Article V same Agreement.
- 3/ If such persons - example Polish Jews - have been repatriated Poland and subsequently sought refuge CSR are they still Displaced Persons.
- 4/ If not Displaced Persons can Administration assist if requested by Czechoslovak Government and if so under what restrictions.

Mr. Rees/cf



# Appendix IV.

## Statistical review of results obtained through medical examination of " healthy " D.P.'s.

Results obtained on the basis of the first 1150 medical reports:

Cases registered . . . . . 1150 . . . . . 100 %

Healthy	396 . . . . .	34.5
general weakness, avitaminosis	317 . . . . .	27.5
lung diseases, unspecified	83 . . . . .	7.-
T B - lungs	84 . . . . .	7.5
rheumatism	71 . . . . .	6.-
heart diseases	71 . . . . .	6.-
serious nervous diseases	57 . . . . .	5.5
diseases of the digestive organs	35 . . . . .	3.-
blood diseases	15 . . . . .	1.50
diseases of the urinary system	8 . . . . .	0.50
infectious diseases	13 . . . . .	1.-

1.150 . . . . . 100 %

Sent away:

to recreation centres	.....175
to health resorts	..... 90
to sanatorias	..... 86
to hospitals	..... 17

368

sg: Dr. Neumann

11.9.45.



# Appendix V.

C O P Y.

## Report of the Clothing Department of the Repatriation Office - Dr.Brandys:

From the beginning, i.e. from May 45 till September 5th 45 we issued 75,068 pieces of different clothing and bedding to 9,143 D.P.'s. / 5822 men, 2766 women, 555 children/.

We had applications of 50,000 D.P.'s but could only supply a quarter of them, because of lack of material. We issued:

### To 5.822 men:

1.751 overcoats  
3.223 suits  
763 coats  
102 waistcoats  
746 trousers  
5.169 shoes  
14 dress coats  
6.738 shirts  
5.625 pants  
5.305 socks  
1.660 ties  
141 military shirts  
141 " trousers  
4 " overcoats  
13 collars  
921 hats, caps  
166 gloves  
888 jumpers  
3 swimming suits  
5 overalls  
4 dungarees  
35 blouses for work  
28 trousers " "  
10 furs  
8 gaiters  
1 hood  
1 cape  
86 p.of braces  
1.958.90 m material for suits  
23,-- m material for coats

### To 2.766 women:

493 coats  
4.517 frocks  
3.368 vests  
815 night shirts  
2.745 panties  
63 suits  
383 jackets  
861 skirts  
2.845 p.of shoes  
2.050 p.of stockings  
229 dressing gowns,  
bathing gowns  
and costumes  
1.720 blouses  
751 hats and caps  
748 brassieres, girdles  
918 belts  
841 jumpers  
192 p.of gloves  
47 pyjamas  
1 muff  
12 woolen scarves  
3 furs  
7 pieces of fur  
779 aprons  
38 overalls  
1 cape  
3.- m coat material  
5.- m material f.pyjama  
5.- m material f.dressing-gown  
5.- m flannel  
9.- m suiting  
21.- m dress-material  
1.- veil  
8 remnants of material



To 555 children:

98 boys coats  
 229 suits  
 63 jackets  
 91 trousers  
 384 shirts  
 273 pants  
 303 p.of shoes  
 273 p.of stockings  
 118 caps  
 134 jumpers  
 17 p.of gloves  
 21 neckties  
 18 pyjamas  
 8 pants  
  
 171 girls coats  
 425 frocks  
 321 vests  
 264 knickers  
 34 jackets  
 72 skirts  
 126 blouses  
 235 p.of shoes  
 223 p.of stockings  
 154 jumpers  
 31 girdles  
 108 caps  
 1 suit  
 24 p.of gloves  
 71 pinafores  
 15 dressing gowns  
 351 babies underwear  
 1 overall  
 5 muffs  
 1 sleeping bag  
 50 cm remnants for knickers  
 70 cm " " "  
 150 cm " " "  
 60 cm " " underwear  
 90 cm " " "  
 120 cm " " "

Bedding issued:

293 pillows  
 131 eiderdowns  
 86 blankets, ordinary  
 311 blankets  
 355 covers for eiderdowns  
 584 pillow slips  
 3 covers for blankets  
 594 sheets  
 57 curtains  
 2 divan covers  
 78 napkins  
 182 dish clothes  
 29 table cloths  
 79 dusters  
 4.052 towels  
 5.543 handkerchieves  
 1 carpet  
 45 handbags  
 27 trunks  
 23 kit bags  
 56 knapsacks  
 18 p.of forks and knives  
 13 umbrellas and sticks  
 3 small carts  
 2 prams  
 3 bath towels



Appendix VIIa.

C O P Y.

Palac "Atlas" Kralovska 1. Prague X.

8th October, 1945.

Dear Mr. Minister,

Emergency Relief Work in East Slovakia.

I have received reports from Dr. Lilico, Mr. Elfan Rees, and other officers of the Mission which indicate that your Government is faced with a very serious problem of homeless and destitute people in Eastern Slovakia.

From the information before me, which is necessarily limited, it appears that the situation is most desperate in Stropkov, Vranov, Medzilaborce, Trebisov, and Humene, although other areas are also affected.

You will appreciate that under the terms of UNRRA Charter such war victims as these people are have a very high priority claim on the resources of the Administration.

We should like to feel reassured therefore that nothing is left undone to ensure that at least minimum requirements of shelter, food and clothing are provided for them before the onset of winter. It seems possible that your Government can approach the problem by the energetic use of some or all of the following resources placed at its disposal by our Mission.

(i) The provision of special transport facilities, either to help in an emergency building programme or to evacuate the people concerned to other districts where shelter is available.

(ii) A priority allocation of food.

(iii) The procurement of minimum requirements of household equipment e.g. blankets.

(iv) The procurement of Feeding Units in the event of resort to communal feeding.

(v) A priority allocation of clothing.

I would be most grateful if you can inform me as to the ascertained size of the problem and your Government's proposals to meet it, emphasising any ways in which you would desire assistance from the Mission. Mr. Elfan Rees is at your disposal for discussion of any details with your representative.

I have the honour to be

Yours very truly,

(P.I. Alexejev)  
Chief of Mission.

The Honorable  
Minister Vaclav Majer  
Minister of Food,

P r a g u e.



20th October

Kv 1485/45

Emergency Relief in Slovakia

Dear Mr. Alexejev,

I am very much obliged for your letter announcing that under the terms of UNRRA charter such war victims as the inhabitants of the mentioned districts Stropkov, Vranov, Medzilaborce and Humenne have high priority on resources of UNRRA.

May I assure you that the Czechoslovak Government and the Slovak National Council are doing everything in their power to relieve these hardly stricken districts.

I am sending a copy of your letter to the President of the Slovak National Council and am asking him to let you have exact data as to ascertain size of the problem. After having their reply, I will inform you about all details of our proposals.

The help of Mr. Rees is greatly appreciated and we will discuss with him all questions involved.

Sincerely yours,

Vaclav Majer  
Minister of Food.

Mr. P. I. Alexejev  
Chief of the Mission of UNRRA,  
P r a h a X.,  
Kralovska l.



To: Conrad Van Hyning

18th June, 1945

From: Leonard Marsh

CZECHOSLOVAKIA: WELFARE SERVICES

Herewith is an advance copy of our proposed supplementary version of the Czechoslovakia booklet. For the moment we shall simply mimeograph a small number of copies, marked "Draft". Will you let us have any comments or suggestions as soon as possible? We do not regard this particular booklet as up to the same standard of detail and completeness as the others on which the E.R.O. has worked, but it is reasonably adequate for such uses as may be called for in present circumstances, and we would like to make it available wherever appropriate. In particular we would propose to offer it to our Czechoslovakian representative on the Welfare Subcommittee (Mr. Englander, alternate for Dr. Kunosi, and acting chairman since the latter has just returned to Czechoslovakia); in so doing, I will explain the contributions of the two Welfare Division offices, mention the limitations already referred to above, and invite any modifications or additions they may be able to furnish if the handbook is used in Czechoslovakian welfare programmes (for training, preparation of non-Czechoslovakian nationals, etc.).

Unfortunately, it proved quite impossible for the Czechoslovakian Ministry of Social Welfare's office in London to undertake any examination of the revised text. Their staff have been greatly reduced, and the officials who remain are very busy with the work of facilitating the shipment of relief supplies. We have therefore had to rely solely on a final review by Dr. Ambros (Czechoslovakian member of the Welfare Division staff): Areas here have no particular welfare services information. A note on sources additional to those in your list which we used is attached. We could add these to the sources listed in your document for general acknowledgment and reference purposes. *Please edit this*

*in any way you think desirable.*

*LCM*  
*2.*

Atts. Czechoslovakia: Welfare Services  
Sources.

LCM/BLH



## SOURCES

This booklet was compiled partly in the Welfare Division of the Washington headquarters, and partly in the European Regional Office. A list of sources used, and of references for interested readers is given below. In addition to the published sources, various materials were obtained from the U.K. Ministry of Economic Warfare, from information pamphlets issued by Czechoslovak authorities, and (particularly for post-occupation developments) Political Intelligence Department files. Information on national recreational organizations was obtained from Dr. Ambros (Welfare Division, European Regional Office)

A number of Czechoslovak officials were consulted in the first stage of compiling a preliminary file of references. But unfortunately shortage of time and staff made it impossible for the Czechoslovak Ministry of Social Welfare in London to undertake any examination of the final text. It is realized that some of the subjects deserve more extensive treatment than they have been given, but the limitations imposed have been those of the material available.

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<sup>+</sup> In Czech; translated by Helen Hrachovska of UNRRA Training Center, Maryland.



CZECHOSLOVAKIA:      WELFARE SERVICES

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## CZECHOSLOVAKIA: WELFARE SERVICES

### PART I.

#### I. INTRODUCTION

##### A. Country and Population

###### 1. Country

The Czechoslovak Republic is composed of four provinces: Bohemia, Moravia-Silesia, Slovakia and Carpathian Ruthenia. Differences in their historical background have resulted in certain differences in the location of welfare responsibilities; in the "historic" provinces of Bohemia and Moravia, which had formerly lived under Austrian rule, the province has wider responsibilities than in Slovakia and Ruthenia, which had formerly been part of the kingdom of Hungary, and where more responsibility has been taken by the central authority.

###### 2. Population: Distribution and Trends

At the last census, held on December 1st, 1930, the population of Czechoslovakia was 14,729,536 and was increasing. The average rate of population increase over the whole country was 7.17 per 1,000 in 1931 and 4.42 per 1,000 in 1935; a lowering of the death rate due to steady improvement in the care of health and the standard of living <sup>was</sup> accompanied by a decrease in the birth rate. In density of population Czechoslovakia came seventh among European countries with an average of 272 persons per square mile. The density of population is greatest in the western parts of the country and decreases progressively towards the east; this is explained partly by the preponderance of industry in the west and the fact that the capital, Prague, is situated in Bohemia, and partly by the mountainous character of much of the eastern part of the country and the consequent poverty of its soil. The density of population per square mile for the four provinces was: Bohemia - 358; Moravia-Silesia - 325; Slovakia - 177; Carpathian Ruthenia - 168.

According to the census of 1930, 52.2% of the population were country dwellers, living in communities with a population up to 2,000, 37.8% were living in towns and 10.0% in cities, of which there were five in the country: Prague (population on 1st January, 1938 - 958,833), Brno, Moravská Ostrava, Bratislava and Plzen (Pilsen). The following table shows the distribution of population by communes:

<u>Population of Commune</u>	<u>Proportion of Total Population</u>
Under - 1000	35%
1 001 - 5000	34%
5 000 - 50000	20%
50 000 - and over	11%



### 3. Linguistic, Ethnic and Religious Groups.

As was natural in a country which has been at the cross-roads of nations, there were many nationalities represented in the Czechoslovak Republic. The Czechs and Slovaks predominated, being together 66.91% of the total. The Ruthenians were 3.71% of the total. The other most important national groups were: Germans 22.32%; Hungarians - 4.78%; Jews claiming Jewish nationality- 1.29%; Poles - 0.57%.

Under the Minorities Treaty of 1919 and in accordance with its own constitution, the Czechoslovak Republic allowed a full measure of liberty and equality to members of racial, religious and linguistic minorities. Their right to their own welfare agencies, schools, religion, and language was recognised. Moreover, whenever 20% of the population of a city or district belonged to such a minority, it was empowered to receive a reasonable share of the public funds allocated to welfare and education. This was interpreted to mean that Germans, Magyars, Jews, and members of other minority groups, were entitled to have their own welfare agencies, and that these voluntary agencies could be used as agents of the State for such purposes as child-welfare services. This stress on the multi-national character of the Republic was one of the basic reasons for the great importance attached to voluntary agencies in Czechoslovak welfare policy.

Since some voluntary welfare agencies were of religious inspiration, and since religious diversity was closely connected with historic differences between provinces, the distribution of the population according to religious denomination was of some importance in the welfare field. The general tendency was for Czechs to be Roman Catholic or to belong to some denomination that had broken away from the Church of Rome, either in the time of John Huss, or in 1919. Germans tended to be Lutheran or Roman Catholic. Slovaks were nearly all Roman Catholic. Ruthenians were either Greek Catholic - i.e. they used Greek rites but recognized the Pope - or they were Greek Orthodox. The proportion of the population in the principal religious denominations at the 1930 census was:

Roman Catholic	74 per cent
Greek Catholic	4 per cent
Protestant	8 per cent
Czech National	5 per cent
Greek Orthodox	1 per cent
Jews	2 per cent
No religion	6 per cent

### 4. Occupational Groups

Before the war, an equal number of Czechoslovaks gained their living from ~~agricultural~~ pursuits and from industry, 35% getting their living from agriculture, forestry, and fisheries; 34.5% from industry, mining, and crafts; and 30.4% from commerce, finance, transportation, the professions and public service. Of the 2.5 million persons gainfully occupied in industry, some 2 million were wage-earners. Of these, more than one million were members of trade unions. Labour organisation was supported by the government, which made the trade unions its agents for administering unemployment insurance. This helped make their "beneficial" or "mutual-aid" activities as important as their work as spokesmen for labour in bargaining with employers and dealing with the government. Reliance on group action of this kind was another of the characteristics of the Czechoslovak Republic. This system did not suffice however to meet more than part of the unemployment problem. In 1933, for example, the number of registrants at employment exchanges who failed to find work during the month of February was 920,000; yet the monthly average of unemployed trade unionists, who came within the scope of the unemployment insurance system, was only 238,000.



## B. Living Standards

### 1. Family Budgets

Enquiries by the Statistical Office of the Czechoslovak Republic in 1931-32 resulted in the collection of many family budgets from different classes in the community. These for the working classes gave an average annual income of 15,100 Kc. per family, of which 10,840 Kc. represented the earnings of the head of the family.<sup>1</sup> The principal items of expenditure per family and per consumption unit in the Czechoslovakian working classes averaged:

<u>Item of Expenditure</u>	<u>Expenditure Per Family</u> <u>(in Czechoslovak Crowns)</u>	<u>Per Consumption Unit</u> <sup>2</sup>
Total	11 925	4243
Food	7 990	2750
Clothing	1 310	500
Rent	920	350
Heat	740	280
Light	140	50
Insurance	710	270
Taxes	115	43

### 2. Wage Level

In 1935, the median wage rate of persons contributing to a sickness insurance fund was 17 Kc. a day for men and 12 Kc. a day for women. In 1929 it had been 22 Kc. a day for men. Actual wage rates varied from occupation to occupation. In agriculture they were considerably lower than median.

In manufacturing industry they were higher, particularly in durable goods industries, 24-36 Kc. being quite normal wage-rates in manufacturing industries in 1935. In the coal mines 40 Kc. a day or 10,000 Kc. a year constituted average earnings in 1935. Earnings of 7000-10,000 a year might therefore be considered as normal for adult male industrial workers.

### 3. Food

The enquiry mentioned above gave data regarding living standards among different classes of the community. For the working-class, it was found that annual average consumption (per consumption unit) included:

Meat	34 kilograms
Fats	24 kilograms
Potatoes	118 kilograms
Sugar	54 kilograms
Milk	180 kilograms
Eggs	239

1. The Czechoslovakian crown (Kc.) was worth a little more than 1d. (sterling) about 3 cents (US), but its purchasing power inside Czechoslovakia was considerably higher.
2. A consumption unit is an adult male engaged in light work and weighing 65-70 kilograms.



Average consumption of meat was less than in Great Britain and the United States. Consumption of fats, on the other hand, was relatively high. Milk and egg consumption were also high. 1/

#### 4. Housing

The predominant type of housing consisted of very small dwelling units. At the census of 1930 it was found that 60 per cent of the dwelling units had one or two main rooms, and that 90 per cent of the urban wage-earners lived in one or two rooms. The Government gave some financial encouragement to housing both by way of loans and by way of guarantees. There was a tendency for this financial support to concentrate mainly on what was called "small apartments" of not more than 80 square metres, excluding the kitchen, and on what were called "very small apartments" of not more than 40 square metres, including the kitchen. Rents in Prague for two rooms and a kitchen in 1935 averaged in the case of controlled rents, 2300 Kc. a year, and in the case of uncontrolled rents, 5500 Kc. a year, the rentals on some housing still being restricted by law dating from the first World War.

Between 1918 and 1936, some 46,000 dwellings were financed by loans from the various agencies who handled social insurance.

#### 5. Health

The death rate was falling steadily; from 14.15 per 1000 in 1930 and 13.33 in 1935. The proportion was more favourable in the western part of the Republic than in Slovakia and Carpathian Ruthenia, where there was a great deal of leeway to make up in the health and welfare services. Even here, however, steady progress was apparent and progress was faster than in the western provinces. The number of deaths fell from 16.2 per 1000 in Slovakia and 18.37 in Carpathian Ruthenia in 1931 to 14.29 and 17.02 respectively in 1935. The infant mortality rate was also falling markedly, the improvement being much greater in the western than in the eastern provinces. Infant mortality per 100 live births averaged annually:

Years	Czechoslovakia	Bohemia	Moravia	Slovakia	Ruthenia
1919-1923	161	157	155	168	183
1924-1928	150	136	134	172	184
1929-1933	148	120	115	161	174

There were several hundred cases of typhus each year in Carpathian Ruthenia and there was some malaria and trachoma in Slovakia. The tuberculosis death rate per 100,000 population at Prague was 122 in 1938; it rose to 169 in 1942. The death rate from a number of avoidable diseases was:

Diseases	Death Rates per 100,000 Population, 1936		
	Czechoslovakia	Great Britain	United States
Tuberculosis	129		
Pneumonia	129	79	53
Diarrhoea & Enteritis	49	72	93
Diphtheria	16	14	16
Typhoid	6	8	2
		1	3

1/ Figures for households having an annual income of 2000-6000 Kc. per consumption unit (equivalent to 5780-17,340 Kc. per family), from ILO Study, Workers' Nutrition and Social Policy (1936) p. 216



About two-thirds of the population was insured for medical care; but only a small part of the self-employed peasantry were covered by this service.

Doctors numbered about 12,500 for about 14,800,000 people (i.e. about 8.4 per 10,000 inhabitants) but their distribution was uneven.

Czechoslovak statistics for 1936 show that there were in that year 384 hospitals with 58,150 beds; 168 of these were public general hospitals with 43,340 beds; 31 were insane asylums with 16,080 beds, 37 sanatoria with 5,910 beds and 96 homes for incurables with 9,720 beds. In the same year there were 8,250 qualified midwives.

### C. Outline of Governmental Machinery.

#### 1. Central Administration

The Czechoslovak State, created after the First World War, was until 1939 a constitutional Republic. The Constitution, promulgated in 1920, took as a model principally the constitutions of France and the United States, adapting them to the special conditions of the country.

At the head of the republic was a President, elected in a joint meeting of both Houses of the National Assembly for a period of seven years. According to the constitution he could only be re-elected once, but an exception was made by law permitting the very first President (Masaryk) to be re-elected as long as he would accept office. He resigned after 17 years of service.

Legislative power was effected by the National Assembly, consisting of the House of Deputies (300 members) and the Senate (150 members), both elected directly on a basis of proportional representation. Men and women over the age of 21 had the right and the obligation to vote, on pain of a fine. The deputies were elected for a term of 6 years, the Senators for 8 years. The President of the Republic summoned the National Assembly to two ordinary sessions, one in spring and one in autumn, and to as many extraordinary sessions as might be required. In the intervals a Permanent Committee, two-thirds of the members of which were appointed from the House of Deputies and one third from the Senate, carried on current business.

The executive power of government was in the hands of the Cabinet, presided over by the Prime Minister. The members of the Cabinet (Ministers) were appointed by the President of the Republic. They were responsible to the National Assembly for the detailed conduct of government, and to defend the bills they introduced. During the 20 years between the two wars the Cabinet never resigned in toto but was only reorganised when required by realignment of the coalition, one party or another withdrawing when it disagreed with the coalition policy.

#### 2. Provincial Administration

Czechoslovakia was divided for administrative purposes into four regions or Provinces: Bohemia, Moravia-Silesia, Slovakia and Sub-Carpathian Ruthenia.

In the Provinces there was a combination of the territorial self-administration and the State administration. The representatives of the central government were the four Provincial Presidents (usually a Czech in Bohemia or Moravia, a Slovak in Slovakia and a Ruthenian in Ruthenia), and their Provincial offices. The Presidents were the chairman of the Provincial Councils and the Provincial Committees which represented the territorial



the territorial self-government and corresponded roughly to the House of Deputies and the Senate. These bodies were elected by the inhabitants of the Provinces on the same basis as the National Assembly. They were empowered to deal with such charitable, health, social, economic, transport and cultural interests of the province and its population as exceeded the authority of the districts.

### 3. District Administration

Each Province was sub-divided into administrative districts of which there were 253 in the whole of the country. Seven of the districts covered only one single municipality each. These were substantially self-governing units. Their administrative machinery was similar to that of the Provinces. The District Office under a Chief District Officer represented the State authority; in addition there were the District Officer and the District Committee. The members of the Committee were partly elected by the Council and partly nominated by the State. The Council and the Committee were concerned with those matters of welfare, health, economy and culture of the District which were beyond the competence of the communes.

### 4. Communal Administration

Each District was composed of a varying number of communes. There were altogether as many as 23,031 communes.

The commune was administered by an elected body of Representatives whose number was fixed by law according to the number of inhabitants. The Representatives were elected for a period of 4 years. They chose from among themselves one as a Mayor who acted as their Chairman and was the head of the Communal Office. They also elected from among themselves a small Communal Office, the officials of which were selected by the Representatives and appointed by the Mayor.

Although the communal administration was based on self-government a certain supervision was exercised by the District administration. Communes differed widely in population and in wealth and therefore in their ability to discharge their responsibilities.

## II. ADMINISTRATION OF SOCIAL WELFARE SERVICES

### III. VOLUNTARY AGENCIES

In the Czechoslovak Republic great emphasis was put on social welfare. A special Ministry was created and given a wide range of responsibilities. The sums allocated to this Ministry of Social Welfare since the foundation of the Republic represented about 10% of the total State expenditure during that period, and averaged some 850 million Kc. (about 6.5 million £ at par) each year. Even in 1937, when the expenditure on defence had increased to 12% of the total, the allocation to the Ministry of Social Welfare, fell to 8% though in terms of money spent it increased from 836 to 878 million Kc.



The sphere of activities of the Ministry of Social Welfare covered the following matters:

- (a) Labour legislation (domestic and international), employment exchanges, wage agreements, factory inspection and supervision of homeworkers, unemployment assistance, emigration and repatriation.
- (b) Public assistance; child welfare; care for abnormal and handicapped persons; war and post-war victims
- (c) Social insurances (accident, sickness, old-age and invalidity)
- (d) Housing and construction
- (e) Consumers' and producers' cooperatives.

The administration of these services was not uniform, and was divided between the central and the local government authorities and certain unofficial public institutions. Thus certain forms of assistance (e.g. assistance to disabled ex-servicemen) were controlled entirely from the centre, others (e.g. poor relief) were principally the concern of the local government authorities. Social insurance came under the administration of independent public institutions, while the responsibility for unemployment relief was shared by the State and the trade unions. Ultimately, however, the control was vested in the Ministry of Social Welfare which co-ordinated the work of the various bodies concerned.

In many functions of a social nature, the Ministry of Social Welfare cooperated with other Ministries, whose responsibilities included certain matters extending into the sphere of social services. Thus the Ministry of Home Affairs was the competent authority for matters concerning paupers, the Ministry of Public Works for the welfare of miners, the Ministry of Agriculture for the welfare of agricultural workers, the Ministry of Commerce for the welfare of traders, the Ministry of Justice for social questions in the sphere of judicial administration, and the Ministry of Public Health for social hygiene and public health.

### III. VOLUNTARY AGENCIES

Czechoslovakia encouraged the development of a very large number of voluntary agencies to supplement the work of official bodies. On the whole it may be said that provision of an adequate minimum for material existence was regarded as the duty of the State, while voluntary agencies were relied upon to provide case work and group work services, the general effect of which would be educational and preventive.



The private social service organisations in their development and their effort at coordination followed, on the whole, the scheme established by the public bodies. Most of these organisations soon realised that their task was to supplement the services given by the State and by autonomous governmental bodies. They were to fill in possible gaps in the public scheme, giving more individual attention where necessary, and experimenting with new methods of approach and new techniques before handing over the tasks to a public body. There was close collaboration of voluntary organisations with public bodies and with the social insurance agencies. The voluntary societies were mainly organised on a national basis and were often subsidised by the State. Some of the principal voluntary agencies, or groups of voluntary agencies were as follows:

1. The Czechoslovak Red Cross. This was practically the only Czechoslovakian voluntary agency that was not organised on an ethnic basis. It was under the direction of Dr. Alice Masarykova. Its structure was on the lines laid down by the international convention. It had four provincial divisions with a large number of local chapters (736 in 1936). The main stress was on training of nurses and voluntary workers.

In 1928 there were about 50,000 of these voluntary workers trained in first aid. The Red Cross organised the transport of sick and injured persons by means of ambulances (127 stations). It owned a considerable number of beds, tents and transportable barracks. Many clinics, dispensaries, and first-aid stations (238) were established throughout the country, especially in Slovakia and Carpathian Ruthenia. The Red Cross operated: 33 dental stations, 31 dental clinics for children, 4 mobile dental units, 13 dispensaries for tuberculosis and 3 sanatoria (one of them in Prague), 3 children's convalescent Homes (Bukovary, Smokovec, Dorkov), 30 summer colonies for children, 105 children's clinics.

The Junior Red Cross was active in thousands of schools; in the course of its systematic health education, through which about half a million children received regular instruction in hygiene, it introduced showers, medicine cabinets and other services.

2. Association of Czechoslovak Voluntary Social Agencies. Also under the presidency of Dr. Alice Masarykova, this national council brought together some twenty agencies, including the Red Cross, the Masaryk League against Tuberculosis, the Association for Combating Venereal Disease, the Maternity and Infant Welfare Association, and the Association of Temperance Societies.

Its aim was to represent the voluntary welfare services in their relations with the central offices of the State, and to carry out various tasks for the benefit of several organisations (training social workers, organisation of nation-wide conferences and exhibitions, the publication of a common bulletin, etc.) in both the health and welfare fields.

3. Denominational Agencies: (i) "Charity" (Catholic welfare organisations) had branches throughout the whole State. The Central Association was in Prague; the Regional Associations in the capital of each Province. In addition there were Diocesan Centres and Parish Sections. The "Charity" owned several homes for old people and distributed small benefits directly to the poor. (ii) The Protestant Social Welfare Association, with four regional branches, distributed assistance through local offices and institutions. (iii) The Jewish Social Welfare Association, with four regional branches, distributed aid through local offices and institutions.



4. Trade Unions. Trade unions were encouraged by the government, and in particular were encouraged to enter the fields of mutual insurance and legal aid. In 1936 wage-earners' trade unions had 1,170,000 members, while 937,000 salaried employees were also members of unions. Collective contracts entered into by trade unions normally covered non-unionised labour in the same industry. In a few industries, the chief of which was coal mining, collective contracts provided for family allowances.

5. Cooperatives. The cooperative movement was highly developed in Czechoslovakia, one-third of the banking being done by credit cooperatives.

The principal forms of cooperation were as follows (1937 figures):

	<u>Societies</u>	<u>Members</u>
Consumers' cooperatives	816	805,000
Housing cooperatives	1340	79,000
Urban credit cooperatives	2005	1,543,000
Handicraft cooperatives	858	22,000
Rural credit cooperatives	6000	1,440,000
Dairy cooperatives	500	90,000
Non-specialised agricultural marketing cooperatives	14007	334,000
Forestry cooperatives	32	680

#### IV. SOCIAL INSURANCE

Social insurance was the principal Czechoslovakian method of meeting the social problems of the 1920s and 1930s. Of the four principal branches of social insurance - health; invalidity, old age and survivor's pensions; unemployment insurance; and workmen's compensation - the second and third were introduced under the Republic. Only the fourth remained approximately as it has been in Hapsburg days, and the first was considerably expanded.

A special system of insurance tribunals (as in Britain) was established for hearing and determining claims to benefit and for receiving appeals. These tribunals contained representatives of employers and employees, as well as of the government. They were outside the ordinary system both of law courts and of administrative tribunals.

This growing system of social security, however, was not complete before the German occupation. There remained the task of expanding it to cover the self-employed who, in Czechoslovakia, were very numerous, and who had considerable need of protection against the cost of medical treatment and against invalidity and old age, although not against unemployment. The need for this further expansion of Czechoslovakian social security programmes was generally recognised. It was hard, however, to devise practical means by which poor Slovak and Ruthenian peasants could pay the necessary cash contributions.

##### A. Sickness Insurance

This compulsory insurance covered all who worked under a contract of employment, service, or apprenticeship. It applied to agricultural as well as industrial workers. In 1924, wage-earners' dependants were given a statutory right to insurance benefits, with the result that two-thirds of the Czechoslovakian population was assured of medical treatment. When



maternal and infant welfare centres were developed and school medical examinations introduced, it was possible to confine these new health services to advice, actual treatment being provided by the insurance doctors. The time limit for medical treatment was also abolished. Sick pay - available to wage-earners only, not to their dependants - could last for twelve months; it was exceptionally liberal, amounting on the average to two-thirds of basic pay. Administration was left in the hands of 300 approved societies, under the control of joint committees representing employers, employees and the government. Each approved society made its own arrangements with doctors, so that some insured persons had a choice of doctor while others did not. Some approved societies arranged for treatment by individual doctors, while others opened their own clinics, sometimes on a grandiose scale, permitting considerable specialisation by the doctors employed. Contributions were fixed by the approved societies and varied according to the wage class to which the insured person belonged, but if the contribution amounted to more than 5.5. per cent of a week's wages, as it usually did, the approval of the Government's Central Insurance Institute was needed. Insured persons transferred frequently from society to society. The proportion of the fund devoted to administration amounted to as much as 14% of contributions. In addition to the general sickness insurance system special schemes were in force for non-manual workers, miners and government employees.

In September 1936, the number insured was: 2,707,000 (excluding State employees) divided up as follows:

General scheme	2,368,000
Non-manual workers	233,000
Miners	105,000

#### B. Invalidity, Old Age and Survivors' Insurance.

To the pre-existing system of invalidity insurance for miners, State employees, and non-manual workers, a system of invalidity insurance for wage-earners was added in 1924, thus making this kind of insurance as universal as health insurance for all persons working under contract of employment, service, or apprenticeship. The beneficiaries were of three principal kinds:

(a) Insured person: entitled to invalidity benefit if he ceased wholly or partly to be able to earn his living, or to a retirement benefit after he reached the age of sixty-five. Many elderly unemployed persons were pensioned in this way during the depression.

(b) Dependent survivors: entitled to a certain proportion of what would have been the man's pension, the widow receiving half and each child one-fifth, or if it were a complete orphan, two-fifths of the wage earner's pension.

(c) Insured women; entitled to a small dowry of from 400-600 Kc. on marriage.

The pension, as in Germany, was made-up of (a) base payment fixed (on the eve of the war) at 650 Kc. a year; (b) a benefit varying in proportion to the number of contributions paid; (c) allowances for dependent children; and (d) a State supplement of 500 Kc. for those insured persons who were exempt from income tax. Contributions varied from 4 to 6½ per cent of weekly wages to be paid by the wage-earner, and an equal amount being paid by the employer. A state subsidy was added. Administration was in the



hands of the health insurance societies, on behalf of the Central Social Insurance Institute. The number insured at the beginning of 1937 was 2,960,000 made up as follows:

By the Central Social Insurance Institute	2,060,000
Non-manual workers	350,000
State employees	450,000
Miners	100,000

#### C. Unemployment Insurance

Since the Czechoslovak system of poor relief was not intended for the able-bodied unemployed (see under Public Assistance) the Republic was obliged in its very early days to establish a system of national unemployment assistance. In 1921, however, the State gave up direct responsibility for this service and entrusted unemployment compensation to the trade unions, contenting itself with laying down certain general principles which it was able to implement by its power to make large grants to the trade unions in aid of their unemployment insurance activities. These grants varied from 200-300 per cent of the trade unions' benefit rate according to the extent to which the beneficiary had family responsibility.

Total benefit rates, towards which the State grant was payable, normally amounted to two-thirds of the base pay. The maximum was fixed at 15 Kc. a day. The government grant was normally available up to 26 weeks, but under certain conditions of the labour market, it could be extended to 39 weeks. Contribution rates were fixed by trade unions subject to the approval of the Ministry of Social Welfare. Contributions were paid only by workers; employers did not have to contribute. The average number of persons in receipt of unemployment benefit in the course of each month <sup>varied between</sup> ~~was~~ a little over 100,000 and nearly 250,000 in the thirties.

The weakness of this "Ghent" system of unemployment insurance in Czechoslovakia, as in other countries, was that unorganised workers were not insured against the risk of unemployment although they tended to be as much exposed to this risk. Approximately only half as many persons were insured against unemployment as against sickness and invalidity. In practice, therefore, trade union unemployment insurance had to be supplemented by national government distributions in kind of bread, milk, fuel, clothing, and Christmas gifts, and by national grants in aid of local assistance and provincial and local relief work, (see under Unemployment Assistance).

#### D. Workmen's Compensation

This form of insurance was not universal; instead it covered a long schedule of enumerated occupations. For example, occupations in which motors or engines were used were regarded as dangerous; but lumbering was not. In Bohemia and Moravia workmen's compensation dated from 1887 and in Slovakia and Carpathian Ruthenia from 1907. It was not uniform. It covered certain enumerated occupational diseases, as well as work accidents. Administration was in the hands of three public insurance institutions located at Prague for Bohemia, Brno for Moravia and at Bratislava for Slovakia and Carpathian Ruthenia.



A fourth fund located at Bratislava administered injury insurance for agricultural workers. All of these funds were managed by Boards representing employers and employees. Contributions were fixed by each fund and varied according to the degree of risk assessed for each particular enterprise. Benefits were low except in the contingency of total incapacity or fatal injury. In the case of total incapacity, the benefit aimed at was two-thirds of the annual wage calculated on the first 12,000 Kc. of wages. In the case of death the widow's pension would be 20 per cent of her husband's previous earnings and each orphan's pension 15 per cent, but the combined pensions of the widow and children were not to exceed two-thirds of the insured person's previous annual wage. Only half as many persons were insured against work injuries as against sickness and invalidity. The average number of persons insured, excluding agricultural workers, was 1,230,000 in 1933, divided between the Prague, Brno and Bratislava Institutions as follows: 770,000; 332,000; and 128,000.

## V. SOCIAL ASSISTANCE

Various branches of social assistance in Czechoslovakia existed, filling in one way or another some of the gaps in the system of social insurances.

### A. Public Assistance

Czechoslovakian public assistance continued to be administered on the basis of Austrian laws of 1863 and 1868 and a Hungarian law of 1886.

Primary responsibility for public assistance rested with the commune in Bohemia and Moravia; but in Slovakia and Ruthenia the commune was responsible only insofar as private charity proved inadequate. Persons without means of livelihood had a legal right to relief in Bohemia and Moravia, but not in Slovakia and Ruthenia. Communes differed widely in population and in wealth, and therefore in their ability to discharge this responsibility.

Eligibility for communal assistance depended on membership (residential or settlement rights) in a commune. As in most countries, there was some lag between the current legal definition of belonging to a commune and the increasing mobility of labour. At the time of the 1930 census, less than half the people of Bohemia and only three-quarters of those of Ruthenia were living in the commune in which they were born.

This was of considerable practical importance, because immediate responsibility rested with the commune of settlement. Settlement in a Czechoslovak commune, as in an Austrian or Swiss, one was normally acquired by inheritance, marriage, or payment of admission dues, although since 1896 in Bohemia and Moravia it had become obtainable gratis by persons who had lived ten years continuously in the commune to whose membership they desired to be admitted. In each commune public assistance was administered by a special *ad hoc* board. Taking the country as a whole, these boards tended to draw about one-eighth of their income from rents on their property, interest on their investments, gifts and legacies, refunds from previous beneficiaries, and special taxes earmarked for public assistance purposes. For the remaining seven-eighths they had to draw upon the general fund of the commune.



Public assistance included the obligation of providing the poor with the necessary maintenance, taking the necessary measures in the event of their illness and caring for the children of the poor including their education. Eligibility depended on inability to make a living through one's own efforts. In some communes, this was strictly interpreted, so as to exclude the able-bodied, or require people to use up their capital or prove destitution by test work. In other communes the definition was broadly interpreted, so as to cover the supplementation of inadequate wages on behalf of large families.

Both home relief and shelter care were provided. The home relief was sometimes in cash, sometimes in kind, and in a few places where barter had not yet given place to a money economy, the members of the commune took turns in caring for the indigent. Shelter care in Bohemia and Moravia was provided by the commune on behalf of children and the aged. Some of these homes were model institutions, as, for example, the Masaryk homes of the city of Prague. On the other hand, many of the small communes boarded out their aged in private establishments. In Slovakia and Carpathian Ruthenia the communes were not responsible for finding shelter for children; instead, as in Hungary, the State ran children's homes and took responsibility for placing children in families, although it charged up to their commune of settlement the cost of caring for such children when they were over the age of seven.

As the cost of institutional care of the poor was too heavy a burden for many of the smaller and poorer communes, the Poor Laws of 1920-1922 made the districts and provinces responsible for the erection and maintenance of hospitals, homes for incurables, youth welfare centres, institutions for the handicapped, moral delinquents and mentally deficient. Most of these institutions were erected by the districts but if they were beyond their financial capacity the province would be responsible, either for subsidies or for the entire cost.

The number of persons who received public assistance during 1931 was 33,000 distributed as follows: Bohemia 170,000; Moravia 80,000; Slovakia 70,000; Ruthenia 10,000.

In Prague in 1931 some 19,000 persons were aided, of whom one-third were children under 16 and one-third were old people over 65. Some 6,500 of these were given only non-recurring emergency assistance, many of them in kind. The other 12,500 were given continuous assistance; one-quarter of them receiving it in residential institutions and three-quarters in their homes.

#### B. Unemployment Assistance

The communes were not able to bear the burden of unemployment through their public assistance machinery, and moreover the feeling grew widespread that the problem of the able-bodied ought to be kept distinct from that of persons unable to make a living through their own efforts. Among the expedients which were to cope with this problem were (a) National unemployment assistance allowances (temporarily in 1918); (b) nationally-subsidised voluntary unemployment insurance (1921) through the Trade Unions and (c) national grants in aid of local relief work, and in aid of local public assistance.



Only half or one third of the total number of unemployed were covered by the insurance scheme of the trade unions. The remainder received State assistance on a very much lower scale through the Employment Exchanges. The cash benefits amounted to only 10 to 20 Kc. a week (=ls. 6d. to 3/-). In addition, however, they received a good deal of assistance in kind which varied according to the season, and the various districts. For instance in the winter of 1936 an unemployed worker in the Karlovy Vary (Karlsbad) district received weekly 3lbs. of bread, 7 half-litres of milk, 15 kg. of potatoes, together with some flour, meat, margarine and coffee and a supply of coal. The assistance in kind was distributed in the form of coupons which could be exchanged at the local shops and cooperatives.

The funds necessary for unemployment assistance were sanctioned by the Government on the application of the Ministry of Social Welfare. The cash benefits and corresponding number of coupons were allotted to the District Social Commissions which distributed them to the Communal Social Commissions. The communes could demand that the coupons could demand that the coupons should be paid for in the form of work of public utility, if they provided the individual unemployed person thereby with employment for at least 3 days per week. A coupon was the substitute for a half-day's wages; time worked in excess of one day had to be paid in cash.

### C. Medical Assistance

#### 1. General

The right to medical assistance was implemented in 1920 by the Republic assuming responsibility for paying the "district doctors" who treated the sick poor and supervised, the health of school children. This was particularly important in a country where the self-employed agriculturist was outside the sickness insurance system. It was hoped that in this way young doctors might be encouraged to settle in rural districts, instead of all gravitating to the growing cities.

State doctors were appointed in every commune, with the principal duty of giving to the poor the necessary medical treatment free of charge and of rendering the necessary assistance to poor women in childbirth. On the other hand the payment for medicaments prescribed by the State doctor for poor patients, and the necessary care and assistance to poor expectant mothers and provision for their confinement free of charge, was left to the communes.

#### 2. For the Unemployed

A serious consequence of prolonged unemployment was that a large percentage of unemployed lost the right to claim benefits under the Sickness Insurance in case of illness and became thus dependent on poor relief. In an attempt to overcome this problem, the Ministry of Social Welfare, with the help of the Ministry of Health, the Central Social Insurance Institute, and the other public and private health institutions, organised special medical assistance for the unemployed and their families in 1932. For this purpose a Central Board at the Ministry of Social Welfare was set up, which was composed of representatives of the Ministries, the social insurance institutes, the doctors' and pharmacists' organisations, etc. The Board operated through District Committees for Medical Assistance for the Unemployed, on which were represented the local medical institutions, the



health insurance institutes, district authorities, local authorities, the trade unions, doctors, pharmacists, etc.

Funds were provided with the help of public and private charity. Medical attention and treatment were given either in surgeries, at home or in public or private hospitals. The expenses resulting from the District Committees were practically limited of charge. The administrative service was also given voluntarily. The necessary accommodation was provided by the district authorities, the public employment exchanges, the sickness insurance institutes, which also leased their surgeries, etc.

In connection with the medical assistance for the unemployed the Ministry of Health organised a State Convalescent Scheme for the children of the unemployed and part-time workers, under which children of families from districts with a high percentage of unemployment were sent for 6 weeks to a convalescent home, where good food and medical supervision remedied the effects of undernourishment.

### 3. Tuberculosis

Care was provided for tuberculosis patients by organisations such as the Masaryk League against Tuberculosis, the Czech Association for Help for Pulmonary Patients and "Humanity" (a workers' organisation). The Masaryk League had a central office in Prague and worked through offices in the capitals of the four provinces. It established 174 dispensaries for tuberculous patients. It had no hospitals of its own but supported those established by other organisations. The Czech Association for Help for Pulmonary Patients operated three sanatoriums in Bohemia. "Humanity" owned a sanatorium for tuberculous patients in Prossionice (Bohemia).

### D. Assistance to Mothers and Children

#### (1) Child Welfare Boards

The most important agencies for maternity and child welfare were the ~~Child Welfare~~ Child Welfare Boards organised at provincial, district and communal levels. These were not State organs but societies formed on a nationality basis to bring together all agencies which worked primarily with mothers and children. They enjoyed complete autonomy.

The State contribution for child welfare (which amounted to about 750 million Kc. a year) was allocated to each province in proportion to its total population and was shared between the provincial boards in proportion to their respective shares of that population. The provincial boards in turn allocated funds to the various district boards in proportion to their needs. The district boards also received funds from the local authorities and from voluntary subscriptions and this revenue was taken into account when the allocation of funds from the provincial board was made.

The activities of the boards included the provision of milk stations, feeding and clothing in schools, nursery schools and kindergartens, clinics for mothers and babies, free dispensaries, day nurseries, orphanages, convalescent homes, summer colonies, the placing of orphans in homes and their supervision by trained personnel, and institutions for blind, deaf, crippled or abnormal children.



There were several thousand institutions for the assistance of children, such as orphanages, homes for mentally deficient children, for blind and deaf-mutes, clinics for mothers and infants, nurseries etc. Many of these were very modern as regards building, equipment, and methods of treatment.

During the depression years, special provisions were made for the children of the unemployed, who received each half a litre of milk per day, a Christmas Bonus etc. The administration of this special scheme was entrusted to the Provincial Child Welfare Boards. To protect the health of children, warm clothes and extra fuel<sup>was</sup> distributed in wintertime, and in summer arrangements were made for them to pass the day-time on farms outside the towns in which they lived.

The District Child Welfare Boards were encouraged to organise clubs in which young persons of both sexes (14-21 years) could be properly fed and occupied as well as taught. If the local authorities provided a building for such a club, the Ministry of Social Welfare undertook to meet the cost of food and supervision.

## 2. Special Categories

In Bohemia and Moravia the provision of maintenance, education and training for orphans and deserted or neglected children, by the establishment of the necessary institutions, was by law the responsibility of the commune. When the commune was unable to meet the cost, assistance was given by the district. The protection of physically or mentally deficient children was undertaken by the province.

In Slovakia and Carpathian Ruthenia orphans and deserted or neglected children were placed in State institutions or in families under supervision. The maintenance of older children, had, however, to be refunded to the State by the commune of origin.

Illegitimate children were protected by special legislation. The personal status of the illegitimate child was that of its mother. The father was in the first place responsible for the sustenance of his illegitimate child, after him the mother, then the mother's parents.

For minors without paternal care the law provided for a guardian to care for the minor and manage its property. If a minor was placed in an institution or in a family under the supervision of an institution the guardian's duties were performed by the head of the institution. Guardianship might also be entrusted to a child welfare organisation.

Children up to the age of 14 in outside care and illegitimate children were protected by special compulsory inspection, originally only in Bohemia and Moravia, but after 1936 in Slovakia<sup>and</sup> Carpathian Ruthenia also. The inspection of children in foster-homes <sup>and</sup> was the responsibility of the district "guardian court", but in Bohemia and Moravia was usually entrusted by the court to the district child welfare board. The supervision of children in institutions was a provincial responsibility and was again usually delegated to the provincial child welfare board.

## 3. Voluntary Agencies

Other organisations caring for mothers and children were the units of the Mothers' and Infants' Welfare Association which had a branch in every district and owned an obstetric hospital in Prague-Stvanice and a foster home in Krc, near Prague. There was also "For Our children" which operated consultation-centres; and "Care for Infants" owning hospitals in Karviná and Zabreh. Several organisations cared for children during summer vacations. These in



Karvina and Zabreh. Several organisations cared for children during summer vacations. These included (1) The Regional Association for Care of Children during Vacations (Prague). (2) "Czech Heart" (Brno) (3) Central Organisation for Care of Children in Vacation-Time, in the district of Ostrava (Moravia) (4) Regional Association for Care of Children during Vacations (Bratislava) (5) "Health Generation", a Labour Organisation for Children's Health Vacation Colonies. (6) Rest Homes and Holiday Colonies run by trade unions. (7) Clerical and Administrative Workers Homes for Children in Cesky Sternberg (Bohemia) and in Resnov pod Radhost (Moravia). (8) Metal Worker's Union Home for Children in Klatovec (Moravia).

#### E. Juvenile Delinquents

An act of 1931 provided for the penal procedure regarding delinquent minors, and also for their education and protective supervision. This consisted of the official supervision of the education of minors, and protective family or institutional education of minors who were taken away from their families and placed in a more appropriate family or institution. These protective measures were taken by the "guardian courts" or by the juvenile courts. Only juveniles over 14 could be punished as well as being subject to these other measures.

#### F. Old Age Pensions

Employed persons who were sixty years old or more in 1924, when the contributory pension system was introduced, were not included in that system. Instead they were made eligible for an old age pension if they were indigent, unable to work, and sixty-five years of age. This pension was set at a base pension of 500 Kc. to be paid by the State, and a supplement to be paid by the commune, varying from 50 - 100 Kc. according to the size of the population of the commune.

The pension system was administered by the communal and district authorities. Pension claims had to be made to the communes in which the claimant was domiciled, the final decision being taken by the administrative authority of the district to which the commune belonged. In 1937 there were still some 137,000 recipients of this pension.

#### G. Veterans' Assistance

The War Invalids' and Veterans' Administration had provincial and district offices all over the country through which it administered payments and services to dependants of war victims and also to disabled veterans.

#### H. Handicapped

There were in existence a Central Board of Care for the Blind, a Central Board of Care for Deaf Mutes, and a Central Board of Care for Patients Suffering from Mental and Nervous Diseases, all with four regional branches, caring for children and adults.

Organisations for the care of the crippled were united in one association. Among these organisations the most important was the Association for the Medical Care and Education of Crippled in Bohemia and three other regional branches. Their activities were divided into four sections: hospital section for the treatment and rehabilitation of physical defects; schools section; section for workshops and educational stations for rehabilitation; agricultural section.



## VI. INDUSTRIAL WELFARE

The very first act passed by the National Assembly of the Czechoslovak Republic on 19th December 1918 was concerned with the limitation of working hours. It stated that the actual working hours of employees and workers might not in principle exceed 8 hours a day or 48 hours a week. In occupations when there was a fluctuation in the natural order of things or owing to seasonal influences, it was permissible to divide hours of work into periods of four weeks in which the total number of hours could not exceed 192. This applied mainly to agriculture, tile and glass work and construction. The act also regulated the provisions for daily work intervals and a weekly uninterrupted rest of 32 hours.

Night work was only permitted in certain occupations and overtime was only allowed in certain cases of emergency if no other measures could be taken, i.e. increasing the number of workers. In any case a special permission of the authorities had to be obtained. Overtime could not exceed 2 hours a day or 240 hours a year altogether.

There has always been a considerable amount of home labour in Czechoslovakia. This is true in poor mountainous districts, where in many cases it was the only source of income for the population; in the poor agricultural districts such as South Bohemia, where home labour formed an additional source of income; and in the large towns, where home labour in particular in the ready-made clothing industry, was a supplement to the income of the poorer classes of the inhabitants. The principal branches of home labour were glassware, clothing, leather goods, mother-of-pearl ware, wooden toys, textiles and musical instruments. The working and wage conditions, control of wage agreements, and establishment of minimum wages and prices for home labour were regulated by a special Act of 1919, which was carried out through Central and District Commissions for each separate branch of home industry. There were in 1930 some 65,000 enterprises employing about 200,000 home labourers.

Special laws prohibited the employment of children under 14 and restricted employment of young persons and women. Night work was prohibited for women and minors. Boys under 16 and girls under 18 could be employed only in light work which did not injure their health or retard their physical development. No women or boys under 16 could be employed in mines or in other dangerous or unhealthy occupations. Special protection of expectant and nursing mothers was provided with full pay before childbirth and six weeks after. For a further 12 weeks the sickness insurance granted them special assistance to the amount of half their daily wages.

Holidays with pay were made the established right of every worker in 1925. At least one week's holiday was assured by law to all persons in any employment including domestic servants, while collective contracts often provided for longer holidays. Office workers were entitled to paid holidays of one to four weeks according to the length of their services.



The enforcement of all laws and regulations concerning the protection of labour in respect of sanitary provisions, working hours and working conditions, wages and labour agreements, was entrusted to the factory and works inspection, for which a Central Factory Inspection Office was attached as an independent department to the Ministry of Social Welfare. ~~The main task of this State department was to supervise the maintenance of all labour, wage and other regulations and in particular of these regulations which aimed at protecting the workers against accidents. For the purpose of this inspection the country was divided into 34 districts and 3 special factory inspection offices.~~ The main task of this State control was to supervise the maintenance of all labour, wage and other regulations and in particular of these regulations which aimed at protecting the workers against accidents. For the purpose of this inspection the country was divided into 34 districts and 3 special factory inspection offices.

The institution of Works Committees was well developed in Czechoslovakian <sup>factories</sup>. They were set up under a law of 1920 for mines, 1921 for all industrial concerns employing more than 30 persons and 1932 for banks and financial houses. By these bodies workers were given direct representation in the administration of the plants. Provision was also made for disputes between employers and employees to be brought before the Labour Courts which existed in the large towns and in each district.

The allocation of labour was carried out through State Employment Exchanges (with Provincial and District Offices) and Trade Union Employment Exchanges. All applicants ~~for~~ work were required to register with the nearest State Employment Exchange even if they were registered with a Trade Union. They were obliged to accept any employment which was offered to them, if it was suited to their strength and state of health and did not prevent them from resuming their normal employment at a later date. When filling vacancies preference was given to those who drew assistance direct from the State (the others were already provided for by the Trade Union Employment Exchanges) and ~~to~~ those who had any dependants. Employers were compelled to apply to the Employment Exchanges, but they were not bound to engage any men that were offered to them but could choose those that suited them best for practical or political reasons.

#### VII. FAMILY ALLOWANCES

Systems of family allowances were general in all types of employment. All collective agreements (including agricultural workers) provided for a payment in some form or another, either in cash or in kind, varying according to the district. Agricultural workers received no extra wages but received benefits in kind equal to about 25% of wages if they had a family.

State employees (including railway officials) were also paid allowances. Higher officials (including young administrative officials) and teachers received 1,800 Kč. a year for one child and 3,000 Kč. a year if they had more than one child. Lower officials received 1,200 Kč. and 2,100 Kč. a year respectively. These rates were payable in respect of children up to the age of 17, but payment was prolonged until the age of 24 in respect of a child who underwent higher education (i.e. at a university or technical college) and indefinitely in the case of an infirm child.

#### VIII. TRAINING OF SOCIAL WORKERS

There were three Schools for Social Workers. The first one to be opened in 1918 was the High School for Social Workers (Vyšší škola sociální práce), Prague, which in 1936 became the Masaryk School of Hygiene and Social Work. The two other schools, opened in 1926 and 1927 were at Brno and at Turčianski Svätý Martin in Slovakia. All the schools had a 2 years' course. The curriculum included theoretical and practical work. Some 70 students qualified every second year.

In addition there were 8 schools for Nursing, the first one founded by the State in Prague in 1916, and later taken over by the Red Cross. The training of midwives, for whom there were 6 schools, was regulated by a law of 1928. The professional organisations of nurses, midwives and social workers found time, apart from professional duties, for much voluntary work.



## IX. NATIONAL RECREATIONAL ACTIVITIES

Recreational activities were organized by numerous mutually independent institutions, including public and private bodies and the army. The Czechoslovaks took an active interest in every form of recreation and provisions were made for them to enjoy them all.

The most characteristic feature of the organisation of recreational activities in Czechoslovakia was the part played by the gymnastic organisations. The first, and most important, of these was the Sokol (Falcon) organisation. It was founded in 1862 by Dr. Miroslav Tyrš and its aim was the harmonious development of man by means of wise physical and moral culture. At the end of the nineteenth century a similar organisation was founded by the workers' movement - the Union of Workers' Gymnastic Organisations - and in 1902 a Catholic gymnastic organisation, the Orel (Eagle), was founded. All these, and the many other similar organisations, received State encouragement and support, without distinction of race, but were managed entirely by volunteers.

In 1935 an inquiry into recreational facilities was conducted by the Ministry of Public Health and Physical Education and much of the information given below is based on its results. It was, however, incomplete, as positive replies were received from only 186 out of the 229 districts of the Republic (excluding Carpathian Ruthenia).

Recreational schemes were financed by the State, by local authorities and by the gymnastic and other associations. In 1934 the State provided a total of 9,230,000 Kc. for physical culture of which about 900,000 Kc. was allocated to summer camps, 1,250,000 Kc. to courses in physical education and 600,000 Kc. to the five university sports centres.

In the same year the local authorities contributed 43,500,000 Kc., distributed as follows:

Playing fields	8.5 million Kc.
Bathing places and swimming pools	8.1 "
Parks	13.0 "
Summer camps and colonies	4.3 "
Theatrical and musical performances	9.6 "

Voluntary physical culture organisations spent some 120 million Kc. annually on their activities and the maintenance of recreation grounds, swimming pools and summer camps.

The State encouraged physical education in all forms. Physical education had been compulsory in all primary and secondary schools since 1867, and a law of 1937, regarding education for national defence, made it compulsory for men between the ages of 6 and 30 and for women between the ages of 6 and 21. The Ministry of Health was the Department most concerned with physical education. It ran courses for instructors (9,736 persons attended these courses in 1935), subsidised physical education activities run by private organisations and maintained the huge Masaryk Stadium in Prague. It was advised by a consultative committee, representing various private organizations, Government offices and universities.



The following facilities provided by the local authorities and gymnastic organisations were available in 1936:

	Schools and local authorities	Organisations
Playing fields	2,068	2,846
Gymnasiums	548	1,430
Bathing places and swimming pools	542	442
Ice skating rinks	62	269
Summer camps and colonies	63	368
Lawn tennis		935
Golf		4,368
Allotments		
Miscellaneous (rifle ranges, riding schools, etc.)	91	288

The gymnastic organisations were the backbone of the whole movement. It was estimated by the Ministry of Health in 1936 that over 2,000,000 persons (or one in every seven citizens) were active members of one or other of the organisations. In addition to the three main ones there were others organised by political parties and national minorities.

The Sokol had some 800,000 members. It trained its own instructors who were unpaid. In 1932, for instance, it had 13,520 men and 9,635 women instructors, and 592 men and 367 women attended instructors' courses. In the same year there were over 18 million attendances at the various Sokol activities. The number of participants in the great national demonstrations (slets) increased rapidly. In 1932, 91,395 persons took part; in 1938, the figure was 150,000. Full membership if the Sokol was conferred at the age of eighteen, but children were enrolled as pupils. Often whole families took part. The organisation was entirely democratic and fraternal.

The Sokol had its own accident insurance scheme for persons injured while taking part in its activities. While the number of accidents increased with the number of members, the benefits paid were less in the last year, as the accidents were of minor nature:

Year	Total Membership	No. of Accidents	Paid in Benefits
1927	599,941	2,982	568,941 Ko.
1931	663,746	3,403	734,126 "
1936	759,960	5,572	628,385 "

The gymnastic organisations did not confine themselves to physical activities only. In 1936, for instance, the Sokol devoted over 157,000 meetings to cultural activities, the Union of Workers' Gymnastic Associations over 28,000 and the Orel over 38,000. Such activities included lectures, theatrical performances, marionette shows and music.

Provision was also made for such activities by local authorities and adult education institutes. For instance, in 1935 the following events were organised:

Lectures and discussions	51,000
Amateur theatricals	26,200
Educational cinema performances	11,500
Marionette shows	9,100
Popular recitals	2,500
Various other events	32,800



## PART II. CHANGES UNDER OCCUPATION

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## PART II. CHANGES UNDER OCCUPATION

### A. Effect of Occupation on Administration

#### 1. Territorial Division

By the end of March 1939, the Republic of Czechoslovakia had been divided into four parts. The border regions in the west, the "Sudetenland", had already been incorporated into the Reich. Carpathian Ruthenia was seized by Hungary. Slovakia was declared an independent republic under German protection. Bohemia and Moravia were declared, by a decree of March 16th 1939, to be an "autonomous" Protectorate of the Reich.

#### 2. Bohemia and Moravia

Over the Protectorate Government and supervising it at every step was set up the office of the Protector. The Protector had an absolute authority with the right to settle by decree any matter he chose, and made full use of his authority. Even in the Protectorate Government a German was appointed as Minister of Economy and Labour, and was given the right to issue decrees without informing his colleagues. The principle of Cabinet responsibility was abolished. The Czech Ministers were completely subordinate to their German Director Generals (Prasidiabhefs) and could sign nothing without their approval. The Protectorate was divided into 19 administrative areas each headed by a German sheriff (Landrat), who was responsible to the Protector but otherwise exercised absolute power within his area. All provincial representative bodies were dissolved and district committees and municipal councils had German members forced upon them. In many towns the Czech mayors were replaced by Germans. Later, as a result of a decree of May 7th, 1942, the Czech local authorities in many areas were given tasks which they were compelled to carry out as administrative authorities acting on behalf of the Reich. This meant the introduction of Reich administration in the place of Czech administration. The German sheriffs became "Inspectors of the Reich Protector" and their powers were increased accordingly. In addition the Protector replaced leading Czech local government officials with Germans or attached German officials to the Czech district administrations.

#### 3. Slovakia

Slovakia was independent only in name. In practice, the German Ambassador and the German military mission had more power than the whole Slovak Government and from the outset the Germans treated Slovakia as their colony. The advent of the era of National Socialism in Slovakia was proclaimed in July, 1940, the Hlinka Party playing the role of the Nazi Party in Germany, and an administrative system analogous to that of the Nazi "Gauleiters" was set up by the Minister of the Interior. Elected councils were dissolved and Commissioners, who were usually Slovaks but had to be members of the Hlinka party, were appointed in their place. This system proved unsatisfactory, however, and later the councils were restored, being no longer elected but appointed by the local Hlinka party office. The bulk of legislative authority was transferred, in practice if not in theory, from Parliament to the Government.

The Germans placed advisers within the Slovak administrative system. They issued direct orders, sometimes contrary to those of the Slovak Ministers. Without the consent of these advisers the Slovak authorities could not reach any independent decision. Much authority was also given to the leader of the German National Group in Slovakia. This group formed a separate privileged section of the population and was not subject to Slovak legislation.



## B. Effect of Occupation on Social Life

### 1. War Crimes and Race Discrimination

During German occupation it was officially estimated in the summer of 1945 that some 200,000 Czechoslovaks were in concentration camps in addition to some 200,000 Jews. It was also officially estimated that some 50,000 individuals had been executed in the Protectorate, leaving behind them families that were sometimes in very difficult circumstances.

### 2. Displaced Persons

The number of Czechoslovak nationals moved to Germany and Austria was estimated in July 1944 at 865,000. Their age grouping is not known with any degree of certainty. It is altogether probable that considerable harm may have been suffered by many of them, whose economic and social adjustment may present considerable problems after their repatriation. Readjustment problems have also been intensified by the presence of German nationals who have been intruded into Czechoslovakia. It was estimated by the Allied military in 1944 that the total was over 300,000.

### 3. Food Rationing in Wartime

Rationing in the German Protectorate of Bohemia and Moravia has been as complete as in Germany itself. Nevertheless in view of the importance of Czech industry to Germany it has been in the German interest to maintain the rations at a reasonable level. The legal rations have been comparatively generous according to League of Nations reports (they were in fact higher than anywhere else in occupied Europe except Denmark ~~at the time~~), but the foodstuffs to which Czechs were entitled were not always available, and there was great deterioration in quality. In the autumn of 1943, the legal rations amounted to approximately 1,740 calories per normal consumer per day, compared with 1,930 in Germany itself, and contrasted sharply with Poland and Italy where the legal rations amounted respectively to only 1,200 and 1,065 calories. Slovakia being of less industrial value to Germany was allowed total rations of only 1,290 calories. Extra rations were lawful for persons doing heavy and very heavy work, the very heavy workers in the Protectorate being allowed as much additional bread and flour as would have been the case in Germany itself and slightly more meat and fat than in Germany. *Comparatively small allowances for children in the Protectorate, rations were adequate* In Slovakia the additional allowances for very heavy workers were up to the age of nine, but from that point onwards were inadequate according to League standards, as they were also in Germany itself. In Slovakia they were inadequate for children from seven up. For the adult male, rations reached three-quarters of adequacy in the Protectorate, but only half of requirements in Slovakia. The Slovak ~~urban~~ population was, however, undoubtedly able to supplement the official rations from the black market and the rural population's diet was relatively little affected.

### 4. Registration of Population

Civilians have been registered on the basis of German compulsory labour orders, the registration being done on an area basis, and records being kept in the respective area employment offices. This compulsory registration was introduced for certain categories in 1939 and was extended to all Czechs and Slovaks in 1942. In some cases the issue of food ration books was made conditional on presentation of a certificate from an employment office. All employees have "work books". These are official certificates in which are listed all data related to the training, education and employment of the person concerned.



## II. ADMINISTRATION OF SOCIAL WELFARE SERVICES

In Bohemia and Moravia the Ministry of Social Welfare and the Ministry of Health were liquidated. The Ministry of the Interior took over matters of public health and social welfare. All matters concerning labour were the responsibility of the Ministry of Economy and Labour, headed by a German whose first concern was to assist German war production. In Slovakia matters were similarly transferred to the Ministry of the Interior.

As far as is known the activities of the local authorities, continued, but all their work was closely supervised by the Germans.

Two new semi-official organisations were set up for assistance purposes. "Social Welfare" (Socialni Pomoc) was started in Bohemia and Moravia and "Winter Relief" (Zimni Pomoc) in Slovakia. The Germans had their own "Winterhilfe" organisation.

## III. VOLUNTARY AGENCIES

As far as is known, some voluntary welfare agencies, continued to operate throughout, though under the supervision of the authorities. The Czech Red Cross, however, is known to have been closed. In certain cases voluntary work superseded by the activities of "Social Welfare" and "Winter Relief". For instance, all collections had to be run by these organisations and the efforts of voluntary agencies were limited to the collection of subscriptions from their members.

In the Protectorate all trade unions were amalgamated into a single organisation which was controlled by the Germans. The administration of unemployment insurance was removed from their hands in 1940 and made a government responsibility. In Slovakia only one trade union was allowed to exist, the Christian Social Trade Union Association, which belonged to the Hlinka Party.

In the Protectorate the cooperative movement was taken out of the hands of the workers and subordinated directly to the Minister of Economy and Labour. In Slovakia cooperatives continued to operate in Slovak hands, though subject to a certain extent to German control.

## IV. SOCIAL INSURANCE

### A. Changes under Occupation

A considerable part of the reserves of Czechoslovak social insurance institutions were ordered to be transferred to Germany, Austria, Slovakia and Hungary. Social insurance was modified under German rule by the shortening of qualifying periods and the raising of benefit rates, although those benefits had to be met by higher contributions or stricter qualifying conditions. In particular, the workmen's compensation law has been



amended so that the highest yearly income taken into consideration when calculating a basis for compensation, was raised from 12,000 Kc. (1939) to 72,000 Kc. (1944) with the result that some payments are now many times greater than before the war. It is not known whether this improvement was counterbalanced by partial or more stringent administration.

Sickness insurance was modified in 1941, by introducing fees for registration with a ~~pa~~ doctor and for getting a prescription; these were presumably part of the policy of deterring war workers from staying away from work in order to get medical treatment. The special insurance scheme for salaried employees was also reorganised in Bohemia and Moravia in 1941.

Pension insurance was liberalised in 1942. The basic pension was increased, so as to provide a minimum of 6200 Kc. for a retired worker with two children. The right to family allowances and to medical care, already enjoyed by salaried employees, was extended to wage-earners; but they were made to pay for this by having contributions deducted from benefits.

Unemployment Compensation was made a government responsibility in Bohemia and Moravia in 1940, when regular allowances were introduced on behalf of persons available for work but temporarily unemployed. These allowances were financed by a payroll tax of 1-2%, which was probably adequate only under war conditions.

#### B. Plans for Post-War Changes

Professor Emil Schoenbaum in 1944 prepared a memorandum on social security on behalf of the Czechoslovak government in London, which constituted a kind of Czechoslovak equivalent of the "Beveridge Report".

In this Czechoslovak programme, more importance is attached to insurance than to assistance, and emphasis placed on progressive methods of taxation for financing social security.

The principal points in the Schoenbaum programme may be summarised as follows:

a) Health Insurance. Full and first-class medical care ought to be provided on an insurance basis for the whole population. Insofar as this is done, the argument for separate provision for salaried employees falls to the ground. Health insurance contributions should be made uniform. Administration should be simplified and cheapened by concentrating it in a comparatively small number of district insurance units: but separate sections for miners might be necessary on account of their exceptionally long record of mutual aid. Medical care need not be under the sole control of the health insurance units: the public health authorities should also have a voice in making arrangements with the medical profession.

Compulsory periodical medical examinations should be introduced as part of the pension and health insurance schemes. Also workmen's compensation should cease to exist as a separate insurance system.

b) Pension and Dowry Insurance. Elderly wage-earners who are unlikely to regain employment should be pensioned (as had already been done for salaried employees) even if they are not incapacitated or have not reached 65 years of age. Benefit scales should be made uniform, in keeping with the movement of workers from profession to profession. Housing loans should be facilitated, by securing them on the borrower's



pension rights, and redeeming them out of his pension; in particular, this would encourage pensioners to acquire small subsistence holdings in rural districts. So that the young might also benefit, the Pension Insurance System should also be prepared to finance holidays and sports by means of a voluntary surcharge.

c. Unemployment insurance. This should be introduced in a comprehensive state-organised form.

d. Family allowances. These should be introduced after the completion of adequate administrative arrangements. The method of financing them would depend on the financial situation.

## V. SOCIAL ASSISTANCE

### A. Activities of "Social Welfare" and "Winter Relief"

Both these relief schemes were modelled on the German "Winterhilfe" organisation. The Czech "Social Welfare" was set up in the Protectorate in November 1942 to provide supplementary social assistance for the population taking the place of a former organisation, "National Welfare" (Narodní Pomoc). It was stated to be a public corporation, and was headed by a Commissioner, assisted by a Central Committee, who appointed delegates in each district. These in turn appointed delegates in each commune. The organisation was under the supervision of the Minister of Education. Funds were raised by public subscription which took the form of collections and a so-called "voluntary" tax deducted from salaries and graded according to income and family responsibilities.

According to German controlled press and radio reports the principle adopted in the use of the funds was that of "constructive help", and continuous financial assistance was seldom granted. Over a hundred million Kc. were spent in the first year of the organisation's existence. Of this more than half was spent in grants to individuals, about a hundred thousand families containing at least 300,000 individuals receiving assistance. Thirty-three million Kc. were spent in this way in Bohemia and twenty-three millions in Moravia. Expenditure in 1944 was higher than 1943 according to press reports.

The rest of the money was devoted to such purposes as food kitchens, purchase of potatoes, clothing the needy, health services, summer colonies for children, support of sick persons, erection of institutions and maintenance of persons in such institutions, and Christmas gifts for children.

The Slovak organisation "Winter Relief" was an organ of the Hlinka party and was set up in 1939, being run on similar lines to "Social Welfare". In 1943, it was said to have spent some thirty-six-and-a-half million Slovak crowns on relief expenditure in the form of food, clothing and cash grants. The expenditure was still rising in 1944.

### B. Maternity and Child Welfare

Some extra rations were made available for expectant mothers and they enjoyed a certain priority in the allocation of foodstuffs. The extra rations were, however, usually insufficient in quality and quantity.



The child welfare and health services, as far as is known, were maintained on the pre-war level and in some cases extended. Day nurseries were set up for instance, for the children of women employed on war production. The Child Welfare Boards continued to function, working in cooperation with the new relief organisations.

The number of elementary schools was considerably reduced and education for children above the age of ten was modified so as to lead them into manual employment.

## VI. EXPLOITATION OF WORKERS

In Bohemia and Moravia the control of labour passed into the hands of the Minister of Economy and Labour (a German) and all labour legislation was inspired by the drive to increase war production.

The maximum hours of work were raised from eight hours a day and forty-eight hours a week to ten and sixty respectively. This period could, however, be further prolonged by overtime. Workers were allowed to change their jobs only with the consent of the labour exchange. Wages were increased to a certain extent but never caught up with the rising price level. The Czech law on paid holidays was replaced by another which contained insignificant improvements but at the same time made it possible for the Minister of Economy and Labour to cancel holidays or replace them by pay in lieu of holidays. No elections to works committees were held and the committees had only a decorative function.

Between 1941 and 1943 four decrees dealing with compulsory labour were issued. The last and most comprehensive, issued in February 1943, ordered the mobilisation for war work of all men between 16 and 65 and women between 17 and 45 years of age (including expectant mothers and mothers of one child over six years of age or of two children over fourteen years of age), as well as of certain categories of schoolchildren up to the age of 16.

The Jews received the worst treatment. They had no claim to overtime pay, to the continued payment of wages in case of sickness, to special grants or paid holidays. They could be dismissed without notice while they themselves had to comply with the legal period of notice. Regulations protecting young workers, as well as all legal limitation of hours of work, were specifically stated as not applying.

In Slovakia conditions were very similar. A Central Labour Office was established in 1940, with local labour exchanges in every district, and workers were forbidden to leave their places of work without permission. The object was the firm control of the workers and their absorption into the German war machinery.

A pre-military labour service was organised by officers of the Reich Labour Service. It was conducted by the Labour Department of the Ministry of National Defence, and was part of the armed forces. Service was compulsory and lasted for two years.



## VII. MEDICO-SOCIAL SERVICES

That the health of the population suffered as a result of the occupation can be seen from the increase in tuberculosis and the efforts made by the authorities to control the disease. For example, the number of patients in the "Bulova" hospital for tuberculosis in Prague increased steadily, being 10,429 in 1936, 15,628 in 1940, 20,396 in 1941 and 5,255 in the first quarter of 1942.

Measures had to be taken to prevent the spread of the disease, which would of course have spread to the Reich if left unchecked. According to the press, a mass X-ray examination of the whole population was set on foot and the League for the Prevention of Tuberculosis organised meetings at which workers were given instructions on how to prevent tuberculosis. Tuberculosis was made a notifiable disease and those suffering from it had to be segregated. Tuberculosis Welfare Centres cared for tuberculosis patients and also examined their families and took preventive measures at their place of employment. The number of hospital beds was insufficient and in 1944 a new tuberculosis hospital was opened in Prague.

Infected persons who were unable to continue their treatment on account of financial difficulties were told that they could receive financial assistance from the Tuberculosis Relief if they were German and from "Social Welfare" if they were Czech.

According to the radio, medical advisory centres were set up in the Protectorate for the medical care of workers and for preventive measures against disease. They also carried out research work on disease among workers.

## VIII. NATIONAL RECREATIONAL ORGANISATION

National recreational organisations, such as the Sokol and the Workers' Gymnastic Association were dissolved and their properties confiscated. In their place, two organisations were created on the model of the Hitler Youth, one for Czechs and one for Slovaks.

The Czech Youth Organisation (Kuratorium pro výchovu mládeže) was ranked with a State Department or Ministry. It controlled all other youth organisations. Acting as a coordinating body it influenced such other organisations as it allowed to survive, by means of grants-in-aid, training courses for their leaders and the power to license or suppress them. This Czech organisation was, to this extent less unified than the Hitler Youth. In Slovakia the Slovak Youth Organisation was organised as a branch of the Hlinka Fascist guard.