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Regional Office for Aid to the Victims of War in Prague (1919–1938)

Summary: The killings and mutilations brought about by World War I left a significant mark on society: missing husbands and fathers, surviving war veterans, widows and orphans. The newly formed Czechoslovakia had to deal with this tragic legacy and care for the 600,000 men, women, and children affected by the war. To do this, it was necessary to strengthen the relevant public administration apparatus, as the existing social security was not prepared for such a burden. The new state could not fail where the Habsburg monarchy had already failed, ceasing to perform its basic social and economic functions for its population.

The Czechoslovak Republic, consisting of several higher-level administrative-territorial units called 'lands' (země), began to create regional offices and authorities to provide care for disabled soldiers or men who had fallen ill as a result of military service, widows of deceased soldiers, widows of disabled veterans of the war and post-war years, as well as parents of deceased or disabled victims of the war and from the post-war years.

This paper will describe the legislative framework of the authorities using the example of the Regional Office for Aid to the Victims of War in Prague, its functioning and organisation of personnel, as well as the types of cases handled by the authorities and their reception by society.

Keywords: Czechoslovakia, war invalids, social welfare, public administration, public service



Introduction

The loss of life and the many wounded brought by World War I left a significant mark on societies – many husbands and fathers went missing without a trace, and many of the survivors became war invalids, leaving behind widows and orphans. It is not without reason that Erich Maria Remarque's novel *All Quiet on the Western Front (Im Westen nichts Neues)* contains the following description of a war hospital:

On the next floor below are the abdominal and spine cases, head wounds and double amputations. On the right side of the wing are the jaw wounds, gas cases, nose, ear, and neck wounds. On the left the blind and the lung wounds, pelvis wounds, wounds in the joints, wounds in the kidneys, wounds in the testicles, wounds in the intestines. Here a man realises for the first time how many places a man can get hit.

Two fellows die of tetanus. Their skin turns pale, their limbs stiffen, at last only their eyes live – stubbornly. Many of the wounded have their shattered limbs hanging free in the air from a gallows; underneath the wound, a basin is placed into which drips the pus. Every two or three hours the vessel is emptied. Other men lie in stretching bandages with heavy weights hanging from the end of the bed. I see intestine wounds that are constantly full of excreta. The surgeon's clerk shows me X-ray photographs of completely smashed hip bones, knees, and shoulders.

A man cannot realise that above such shattered bodies, there are still human faces in which life goes its daily round. And this is only one hospital, one single station [...] A hospital alone shows what war is.¹

In Austria-Hungary, the idea of state aid for the disabled was born already at the beginning of 1915. It was put into practice by a decree of the Vienna Ministry of the Interior (Innenministerium Vien) of March 15, 1915, which established institutions called Regional Commissions for the Care of Soldiers Returning from War (Zemská komise pro péči o vracející se vojíny). A special advisory board was set up at the Vienna Ministry of the Interior to deal with this problem. It was decided that the management of the regional commissions would be primarily the responsibility of the insurance companies dealing with insurance against work accidents.²

The armed struggle did not end with the end of the World War in 1918 but continued with varying intensity between countries formed after the collapses of former powers or within the failed states. The challenge faced by the Department of Social Welfare and Health was thus significant. The newly formed Czechoslovakia, with a population of over 13 million inhabitants, had to deal with this tragic legacy and take care of

¹ Remarque E.M. 1989, 251-252.

² Brablec J. [1920], 3-4.

600,000 war invalids, widows, and orphans. This was only a preliminary estimate, but it nevertheless pointed to the need to strengthen the relevant public administration apparatus, as the existing system was not equipped to bear such a burden. The new state could not fail where the former Habsburg monarchy, which had ceased to fulfil basic social and economic functions concerning its population, had already failed, thus losing its raison d'être.

Tasks and responsibilities of the new state

The Czechoslovak Republic, consisting of several higher-level administrative units called 'lands (země), began to create regional directorates to assist war victims, which were supposed to take care of soldiers maimed by war or men who had fallen ill as a result of military service, widows of deceased soldiers, widows of disabled veterans of war, as well as parents of deceased.

The newly established departments of aid to war victims had a great deal of work: while in 1919 there were 170,000 people entitled to social insurance in the Czechoslovakia, by 1923 it was estimated that there were 350,000 victims in Bohemia, 180,000 in Moravia and Silesia, 170,000 in Slovakia, and 20,000 in Subcarpathian Ruthenia, with a further 20,000 living beyond the borders of Czechoslovakia. It is estimated that the war affected, to some extent some 800,000 people.4 Moreover, it can be assumed that the number of victims was much higher in Subcarpathian Ruthenia, but the widespread illiteracy and lack of trust in government authorities caused by the previous Hungarian administration meant that many more people needed help but did not ask for it. It was clear, however, that the number of individuals dependent on state aid would change, for example, due to the deaths of disabled people and widows, and also due to the growing up of orphans, who were entitled to maintenance support until they reached the age of 18 - after which they were obliged to find work or receive help from other public organisations. For such people, it was quite difficult to get a higher education,5 but the best students could count on additional benefits.6

Aid totalling almost one billion crowns in 1920 and almost 660 million crowns in 1921 was paid to the eligible individuals. According to the beneficiaries, the amounts were not sufficient to meet the needs of war invalids and families of the deceased and they demanded an increase in these amounts.⁷

³ Brablec J. [1920], 20–21.

⁴ Svoboda J. 1923, 4.

⁵ Růžička M. 2011, 207.

⁶ Růžička M. 2011, 208.

⁷ Stegmann N. 2010, 216.

Legislative, organisational, and dislocation changes

Paragraph 4 of the Act No. 199 of April 8, 1919, on the organisation of assistance to victims of war, became the basis for the establishment of regional departments for assistance to victims of war, which formed a part of the Ministry of Social Welfare (Ministerstvo sociální péče). According to the same paragraph, cooperation with other ministries was envisaged and based on other legal provisions, such as cooperation with municipalities (§ 6), and coordination of aid with foreign countries (§ 5). Further details were laid down in Government Decree No. 561 of October 17, 1919.

The Prague Office for War Victims (Pražský úřad pro válečné poškozence),8 which superseded the State Regional Commission for the Care of Returning Soldiers, was located in Prague (§ 1) in the building of the House of Invalids, where it began its operations on May 1, 1919,9 although the need to carry out the necessary adaptation work meant that regular work did not begin until June 1, 1919.10 Soon, however, the commission made efforts to obtain additional premises in the House of Invalids, as it had originally received only a part of it. Unfortunately, these attempts, which even took the form of a petition at the Revolutionary National Assembly (Revoluční národní shromáždění) and negotiations with the President, were unsuccessful.11



Fig. 1. Seal imprint of the Regional Office for War Victims in Czech (Source: MSP. Box 482)

The administrative headquarters were very modest, as the very building that housed the House of Invalids was founded in 1658 by Count Peter Strozzi, who in his will bequeathed money for the construction of the building that was to provide care for the war invalids. The building was not put into use until 1735 (Fig. 2). 12

Local aid departments for the victims of war were subordinate to the regional aid divisions and were located on the premises of the local political administration (§ 2). These units were executive organs of the district divisions, to which they were also subordinate in personnel and material matters. For this reason, the local divisions were tasked with carrying out the orders of the higher administration, but above all, with directly caring for the war victims (§ 3) and it was stipulated that 'all governmental institutions are obliged' to provide them with 'the necessary support' (§ 4).

⁸ In the National Archive, within the fund of the Státní úřad pro válečné poškozence v Praze, documents related to the activities of the Regional Office for War Victim Assistance in Prague are preserved (Fig. 1). After World War II, the office of the same name took over the functions of the interwar administration and only part of the documents was transferred to the archive. Box 1–31.

⁹ Brablec J. [1920], 6.

¹⁰ Skala J.K. [1922], 6.

¹¹ Skala J.K. [1922], 8.

¹² Heřmánek P. 2015, 15-16.

In the beginning, there were 38 such units in the Bohemia region alone.¹³ Some of them were responsible for several political areas, such as the Kutná Hora branch, which operated in both the Kutná Hora and Čáslav regions. Also, for example, due to the incorporation of some districts into the capital of the Republic, the number of units changed, and over time, their number decreased as a result of their merger.¹⁴ In 1925, there were already only 17 district offices in the Bohemia region, which was caused by a decrease in the number of applications.¹⁵

The district offices were headed by directors appointed by the Ministry of Social Welfare at the request of the director of the regional directorate for aid to war victims. The tasks of the staff employed in local units included the direct care of disabled people, i.e. making sure they were neat and clean and did not beg. Care workers helped them find job that would provide their clients with a livelihood. All of this naturally suggested maintaining confidentiality concerning the clients. However, in practical terms, there were many complaints about these employees, who were accused of rude behaviour or failure to observe working hours. Pranch managers were required to submit an annual report on their activities within two weeks of the end of the year.



Fig. 2. House of Invalids in the interwar period (Source: FČTK. No. 10770/2)

¹³ Svoboda J. 1923, 11-13.

¹⁴ Růžička M. 2011, 128, 260.

¹⁵ Růžička M. 2011, 331.

¹⁶ Růžička M. 2011, 128-129.

¹⁷ Brablec J. [1920], 28.

¹⁸ Brablec J. [1920], 28.

The directors of the regional divisions were appointed by the Ministry of Social Welfare, ¹⁹ which also directly managed them, while the director of the regional division managed the personnel of the regional branches. The director also appointed the managers of the various departments to whom he or she could delegate the right to sign less important documents. ²⁰ It was the Ministry that usually, at a director's request, appointed, promoted, transferred, or dismissed staff. ²¹ Directors of regional divisions were required to submit an annual report for the past year. ²²

The Regional Office for Aid to the Victims of War in Prague was initially divided into 17 internal departments, ²³ but it soon became apparent that there was a need for a reorganisation, which was gradually carried out in 1921. This slowness in implementing necessary changes was dictated by the desire to avoid administrative chaos. As a result, the Office was divided into a main bureau and 10 departments that could be further subdivided into groups, if necessary. ²⁴ However, reorganisations continued in the 1920s. Changes also took place in the 1930s, and the organisational structure finally stabilised in 1935, when the last major reorganisation took place. The bureau continued to deal with administrative and organisational work, resolve personnel issues, maintain contact with other units, and supervise legal and organisational issues. It oversaw the work of several departments:

- Department I which was responsible for pension issues and charitable support for war veterans in the region.²⁵
- Department Ia responsible for issues concerning social and charitable support for veterans and survivors of war, including the blind. It also dealt with the registration of tobacco kiosks operated by veterans, cooperatives, and other matters.²⁶
- Department Ib care for war veterans abroad.
- Department Ic care for the families of individuals fallen in the war.²⁷
- Department II medical care, both outpatient clinics and hospital care.
- Department IIa socio-medical examinations, decisions regarding the regional appeals commission, and administrative matters relating to the provision of orthopaedic aid devices.²⁸

¹⁹ Růžička M. 2011, 127.

²⁰ Brablec J. [1920], 26.

²¹ Brablec J. [1920], 26-27.

²² Brablec J. [1920], 27.

²³ Skala J.K. [1922], 14.

²⁴ Skala J.K. [1922], 14-16.

²⁵ Výroční zpráva. 1936, 3.

²⁶ Výroční zpráva. 1936, 4.

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²⁷ Výroční zpráva. 1936, 5.

²⁸ Výroční zpráva. 1936, 6.

- Departments IIIa-c-accounting.29
- Department IV various auxiliary units (e.g., records office, chancellery).³⁰

In 1936, according to Act No. 67/1936,³¹ which regulated the payment of benefits to war victims, the tasks considered by Department I changed. The Prague administration also organised various charity collections and events to obtain items for orphans, who also received goods from the invalids' associations. For example, in 1923, 2,800 suits for boys, 2,857 dresses for girls, 2,360 shirts for boys and 2,370 shirts for girls, and 1,200 pairs of shoes were distributed in this way, mainly for children aged 4 to 14.³² The administration first distributed aid to full orphans and then to orphans from large families, widows, and invalids.³³

As early as 1919, the first training courses for invalids were organised in agriculture, retail, and industry at trade schools, or directly with tradesmen and associations. 34 Furthermore, support was given for setting up their own businesses or taking over the running of tobacco shops provided by the authorities. 35 Another source of income was, for example, work in cinemas, 36 and in 1919 alone, 16 licences were issued to invalids' associations in Bohemia.³⁷ The issuing of cinema licences was a complicated matter, as there were many organisations interested in obtaining them. This required cooperation with the Ministry of the Interior, which usually issued cinema licences, and the Ministry of Social Welfare, which in turn lobbied for the interests of war invalids. Therefore, it was not uncommon for two organisations to compete for a licence to show biographical films in the same place, with the authorities trying to reach an agreement among themselves. In Duchcov, 38 for example, the local invalids did not agree to the contract, although the competitive company proposed to employ only war invalids in the cinema and to donate 20% of the profits to the war invalids' organisation and another 20% to the Ministry of Social Welfare (Fig. 3). 39 In other places, such as Louny, 40 the invalids' cinema had to break the monopoly of the only cinema in the town, whose owner was abusing his position.41

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29 Výroční zpráva. 1936, 7-9.
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³⁰ Výroční zpráva. 1936, 10–11.

³¹ Výroční zpráva. 1937, 3.

³² Růžička M. 2011, 206-207.

³³ Růžička M. 2011, 207.

³⁴ Brablec J. [1920], 15.

⁵⁴ Bidbice J. [1920], 13.

³⁵ Brablec J. [1920], 18.

³⁶ Růžička M. 2011, 292–293.

³⁷ Brablec J. [1920], 19.

³⁸ Duchcov – Ústí nad Labem Region, Czech Republic.

³⁹ MSP. Box 482.

⁴⁰ Louny – Ústí nad Labem Region, Czech Republic.

⁴¹ MSP. Box 4.

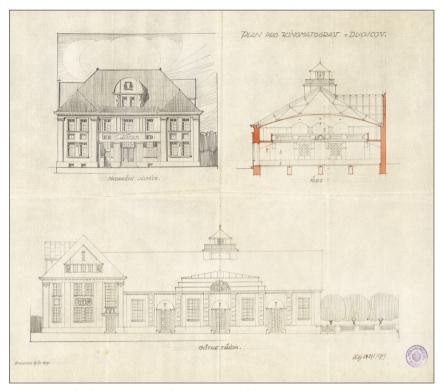


Fig. 3. Design for the construction of a cinema in Duchcov in 1919 (Source: MSP. Box 482)



Fig. 4. New boarding house for war veterans in Hořice, built and occupied in the mid-1930s. (Source: FČTK. No. 35613)

The building of the Regional Office for Aid to the Victims of War in Prague also housed the most affected war invalids, but they had to comply with certain rules, such as diet and night rest. Furthermore, they had the right to use the services of a hairdresser every week and were entitled to a change of underwear – all at the expense of the office.⁴²

The veterans lived in the House of Invalids until the mid-1930s, when a modern building was built in Hořice, completed in 1934 (Fig. 4). In May 1935, most of the disabled individuals were moved there, although some of them stayed in the previous House of Invalids, for instance, because of their work in Prague.⁴³ There were even protests against this change, as some people did not want the House of Invalids to become just an office building.⁴⁴

Employment of the management staff

From May 1 to December 31, 1919 – 43,515 cases were submitted to the Prague office, and 45 according to the preliminary records of war victims, 75,000 war victims were registered in Bohemia by the end of 1919. 46 Of course, due to the large number of invalids and the limited number of clerks, there were delays in handling cases. For example, in the first years, the Prague Office received between 30 and 50 appeals against the decisions of the local branches, but the regional board for aid to the victims of war could only process 20 appeals per day. 47 In the following years, the workload did not decrease, and while 43,515 cases were a huge number to handle during seven months in 1919, in 1920, the number increased to 107,949, and in 1921, to as many as 177,822. 48 These matters were dealt with by full-time employees, of whom there were about 200 in 1919, including war invalids. Within a year, the number of administrative staff increased by several dozen (Table 1, 2).

However, this proved insufficient, and by December 31, 1921, there were 441 staff, 73 of whom were clerks,⁴⁹ and by the end of 1923 the number of staff had risen to 547 people.⁵⁰ The workload decreased in the mid-1920s, when new applications for pensions stopped coming in, and the office no longer had to assist in setting up invalids' associations, obtaining licences, and resolving issues regarding determining

⁴² Růžička M. 2011, 187.

⁴³ Růžička M. 2011, 187.

⁴⁴ Růžička M. 2011, 225.

⁴⁵ Brablec J. [1920], 7.

⁴⁶ Brablec J. [1920], 9.

⁴⁷ Růžička M. 2011, 307.

⁴⁸ Skala J.K. [1922], 86.

⁴⁹ Skala J.K. [1922], 16.

⁵⁰ Zpráva 1924, 3.

the amount of invalidity pension following a medical examination.⁵¹ This allowed for a reorganisation of the Office, merging some departments,⁵² and gradually reducing staff. In 1935, 349 posts in the Office were standardised, but only 312 were filled, of which a further 28 jobs were transferred to other departments and one employee of the Ministry of Social Welfare was assigned to the Office, which resulted in an actual staff number of 285 individuals. Of these, 117 were war invalids and another 5 were disabled people and invalid officers.⁵³

Tab. 1. Number of employees of the Regional Office for Aid to the Victims of War in Prague in 1919

Category	Number
Officials	18
Contract workers	117
Auxiliary personnel	51
Servants	10
Total	196
Including invalids – legionaries	22
Including invalids – non-legionaries	88
Invalids in total	110

Source: Brablec J. [1920], 7.

Tab. 2. Number of employees of the Regional Office for Aid to the Victims of War in Prague in 1920

Category	Number	
Employees with legal training	4	
Accountants	11	
Office employees	13	
Contract workers	148	
Management support staff	74	
Servants	15	
Total	265	

Source: Skala J.K. [1922], 16.

⁵¹ Růžička M. 2011, 329.

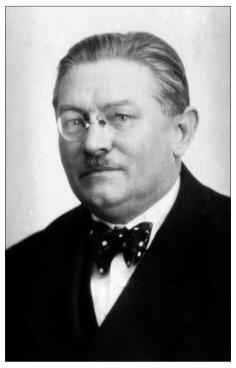
⁵² Růžička M. 2011, 330.

⁵³ Výroční zpráva. 1936, 83.

Fig. 5. Ondřej Kypr, passport photo from 1936 (Source: PŘ II. General office. Box 5127, case number K1765/6, 1941–1950)

For the management to function properly, qualified staff were needed. The first director of the Prague Office was Ondřej Kypr, who had already been involved in various organisations helping war veterans before its establishment (Fig. 5). He had himself fought in the war and been wounded,⁵⁴ about which – in addition to describing his work to support war invalids – he wrote in several of his works. At the same time, he edited the official journal "Sociální revue", to which he made a significant contribution. He also promoted the idea that disabled people should not just rely on state assistance but should be active themselves.⁵⁵

Ondřej Kypr headed the board of the Prague registry from May 1, 1919, although he did not have the required formal education to become a civil servant. The Ministry of Social Welfare ensured that he retained his position and received adequate remuneration as a contract worker. The reason for this was summarised in the following words: 'He handled his duties



perfectly and there are no grounds to change this situation' – as stated in the documents of the Council of Ministers meeting from 1927. The influential ruling Agrarian Party also supported Ondřej Kypr. Its secretary, Rudolf Beran, in a private letter concerning maintaining Ondřej Kypr's post during the reorganisation of the public service in 1927 came out strongly in Kypr's defence, stating, among other things, that 'Director Kypr has provided an extremely valuable service to the state, which should not be underestimated', as he had 'saved the invalids from Bolshevisation'.⁵⁶

From 1921 onwards, Ondřej Kypr's long-term deputy was Josef Skala, who first proved himself during the organisation of the Regional War Victims Board in Brno. In both places, he demonstrated exceptional organisational talent, and in one of the applications for his promotion, a senior minister stated that he had achieved a 'completely exceptional qualification' that required 'an exceptional promotion' and to keep him in public service. From J. Skala also prepared most of the annual reports, which were a compilation of statistics and other information on the office's activities.

⁵⁴ Růžička M. 2011, 118.

⁵⁵ Růžička M. 2011, 130.

⁵⁶ PMR. Box 1175.

⁵⁷ PMR. Box 1175.





Fig. 6–7. Manufacture of orthopaedic appliances in the war invalids' orthopaedic cooperative. (Source: FČTK. No. 36312, 36313)

Fig. 8. The title page of International medical journal "Slovanský sborník ortopedický" (Source: SSO 1934)

Fig. 9. Advertisement of a company 'Orthopaedicke družstvo' producing orthopaedic prostheses (Source: SSO 1934, advertising page)

Fig. 10. An advertisement for the ERGON company from Brno, which manufactures, among others, prostheses and orthopaedic footwear (Source: SSO 1934, advertising page)

Conclusions

In the endeavour to support the victims of the war, the legionaries were favoured as pioneers of the idea of an independent Czechoslovak state, which naturally caused dissatisfaction among those citizens who had hitherto served in Austro-Hungarian uniform, especially those of German and Hungarian nationalities, ⁵⁸ who were not thrilled with the establishment of the Republic in which the representatives of the formerly ruling nations became national minorities. This situation was considered at the time to be a deserved advantage and was also supported by Director O. Kypr. ⁵⁹

Overall, it can be said that significant efforts were made to find means of support and survival, particularly for war invalids, both through suitable work and in production cooperatives for them.

At the beginning of 1922, Ondřej Kypr proudly announced that Czechoslovak methods had been positively evaluated by representatives of analogous institutions in Austria, Great Britain, and even Yugoslavia, which had built its system on the Czechoslovak model. The influence of the Czechoslovak approach extended also to its neighbouring country, Germany.⁶⁰

In addition to the social care provided by state and regional institutions, the system was complemented by various voluntary associations. Since the war, it was necessary to produce various aids and devices for invalids, they often manufactured and took care of these themselves, for example, in an orthopaedic cooperative (Fig. 6–7). Unfortunately, these production cooperatives were not always properly managed. Also, the influence of medicine on the provision of aids cannot be overlooked. However, regional authorities played an indispensable role by providing financial support and issuing referrals for various medical examinations and orders for orthopaedic devices (Fig. 8–10).



⁵⁹ Skala J.K. [1922], 3.







⁶⁰ Skala J.K. [1922], 3.

⁶¹ Růžička M. 2011, 131.

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