

## LEGISLATIVE EFFORTS ON CHILD PROTECTION IN SLOVAKIA IN THE FIRST HALF OF THE 20TH CENTURY

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**Summary.** The study is an insight into legal protection of child through primary legislation which was effective in Slovakia in the first years of the formation of the public and private social system, provided by multiple subjects in multiple stages. The authors pay attention to the former Hungarian and latter Czechoslovak legal norms which continued to be effective during the war Slovak Republic and post-war (post-1945) era when the first general codes on child care and youth care were adopted. In both the Hungarian and Czechoslovak environment, the legislative efforts on child care and youth care (social protection, protection of health, protection through the means of criminal law, etc.) were strengthened in this period.

**Key words:** child and youth care, care for the poor, Kingdom of Hungary, Czechoslovakia, the war Slovak Republic

### INTRODUCTION

In Slovakia, it became a necessity to solve the child protection issues<sup>1</sup> in the first half of the 20<sup>th</sup> century. The care for the youngest members of the society has always been understood as their protection and the society has always been responsible for their education, alimentation, and safeguarding of the material and intellectual needs. In the same time, it has always been understood as care for the population itself, for its survival and change of the generations. Our aim is to scrutinise the original Hungarian norms effective in Slovakia, legal norms taken over into the Czechoslovak legal order after 1918, as well as the legal norms adopted after the establishment of Czechoslovakia,

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<sup>1</sup> The study is the result of working on VEGA Project No. 1/0018/19 entitled The Renaissance of the Forgotten and Re-Discovered Institutes of the Hereditary Law in Slovakia.

and to evaluate whether they provided useful/useless, effective/ineffective means of child and youth protection. The study is an insight into laws effective until 1948 whose adoption dated back to the last years of the Hungarian Kingdom, to interwar Czechoslovak era and to the period of World War II when the Slovak Republic existed. The care receivers were the children of minor age who were handicapped due to their bad social situation, poor health, non-functional family, etc.

## 1. HUNGARIAN LEGISLATION ON CHILD CARE AND YOUTH CARE

The fundamental piece of legislation on child care and youth care was Law no. XX of 1877 on Guardianship and Curatorship which contained only basic provisions on *patria potestas*, guardianship, and curatorship over a child (i.e. a person of minor age) and over a mentally or physically handicapped people who hence had no legal capacity or were legally dependent on others. The preferred type of care was the home care provided by a family, together with foster care that was eligible but inadequately regulated.

In case of failure of the family care, it was the state (state bodies and self-government bodies) which took over the responsibility and this happened with rather increasing frequency. The fundamental piece of legislation which regulated the care for the poor was Law no. XXII of 1886 on Establishment of Municipalities (Art. 145). This Law imposed a duty on municipalities to take care of the inhabitants of the municipality who were in need of public help, provided that the local conditions allowed it and the help from the private charitable associations was not sufficient. The municipality carried out also general supervision over local charitable associations. It took over the role of the care provider only subsidiarily, provided that other means (care provided by close or distant relatives, benefactors, private associations, etc.) failed [Dudeková 2013, 212]. Pursuant to Art. 146, the municipality had to employ a midwife if more than one thousand five hundred inhabitants lived there.<sup>2</sup> This midwife had to provide healthcare for the poor mothers free of charge.

The original piece of healthcare legislation was Law no. XIV of 1876 on Public Health as amended by Law no. XXXVIII of 1908 on Providing Healthcare in Municipalities<sup>3</sup> which imposed several duties on municipalities

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<sup>2</sup> The municipalities with fewer inhabitants joined to employ and pay the midwife.

<sup>3</sup> Law no. XXXVIII of 1908, Art. 1 imposed the duty on municipality to take care of the poor who were ill and not nursed in a hospital or other medical institution, furthermore of the incurably ill who could no longer stay in the hospital/medical institution, of incurably mentally ill who were not dangerous, of the poor feeble-minded persons, and of the deaf, deaf-mute, and lame persons. The municipality bore expenses for provided healthcare, education, and alimentionation of the found children and of the children older than seven years of age who were officially declared for abandoned. Furthermore, it carried out general supervision over public hygiene

and districts. Pursuant to Law no. XIV of 1876, the municipality had to secure healthcare providing for the poor, mentally ill, deaf-mute, blind, lame, abandoned and found children.

Law no. XIV of 1876 contained special provisions on child protection as the childcare was according to it under supervision of the health magistrate.<sup>4</sup>

It imposed a criminal sanction on a parent, a guardian, and a foster parent who did not ensure medical help to children younger than seven years old (i.e. those who did not start their compulsory school attendance). The municipal physician had to provide healthcare to the ill child free of charge and the physician who was not employed by the municipality and provided some kind of medical services was paid by the municipality of the child's residence.<sup>5</sup> Law contained provisions on supervision over wet nursery (breastfeeding of another's child), on mandatory health checks of breast-feeders, and on sanitation inspections of medical examination rooms. Regarding the children with compulsory school attendance, the very Law contained provisions on vaccination and fight against infectious diseases [Bokesová-Uherová 1989, 111]. Vaccination and other prophylactic measures were regulated especially by secondary legislation, mostly issued by the Ministry of Interior with the aim to fight against infectious diseases such as smallpox, typhus, shigellosis, rubella, pertussis, diphtheria, scarlet fever, measles, chickenpox, meningitis, trachoma, postpartum fever, Asian cholera, and others. Special care was necessary for children suffering from a typical disease of the poor working children, tuberculosis (see the Regulation no. 191049/VIIb of 1912).

In 1898, the Country Sickness Fund was established on the basis of Law no. XXI of 1898 on Funding the Public Healthcare, with the aim to cover the public health care expenses. Pursuant to Art. 3, Subsection d) and e), it was the Country Sickness Fund which covered the fees for provided healthcare and education for abandoned children under the age of seven, as well as the nursing fees for the first time mothers who gave birth to their children in a hospital. Pursuant to Art. 8, it was the municipality of residence of an abandoned child

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and had an epidemiologic agenda with task to fight against infectious diseases. Art. 2 regulated the duties of forensic-medicine origin which were taken over by state bodies in the 1920s.

<sup>4</sup> The Ministry of Interior was the supreme public health body. The Health Department of this Ministry managed and controlled all the related issues. The Country Council for the Public Healthcare Issues was an advisory body. Bokesová-Uherová 1989, 107.

<sup>5</sup> Law no. XIV of 1876, Art. 20: "The one who is legally bound to raise and educate children or does so voluntarily, is obliged to ensure healthcare for the sick children." Law no. XIV of 1876, Art. 21: "The one who neglects the duty pursuant to Art. 20 in the municipality or district where a physician holds a surgery, shall be liable to a term of imprisonment of up to five years or a fine up to ten golden ducats." Law no. XIV of 1876, Art. 23: "Each medical examiner is obliged to notify the municipality about the death of a child below the age of seven who died without access to health care. The municipality is afterward obliged to notify the health bodies of the first instance."

above seven, orphan, deaf-mute, incurably physically or mentally ill which had to take care of them.

These pieces of legislation were the base for the latter laws adopted as soon as the state bodies became concerned due to disquieting statistics on high mortality of suckling babies and “the children worth of care,” i.e. the children placed in private orphanages ran by the Church, municipality, county or some association [Jáger and Janigová 2013, 108]. Law no. VIII of 1901 on Public Children’s Homes (Shelters) was the first Law dedicated to legal protection of children, and hence became the ground for all the subsequent pieces of legislation on the very issue.<sup>6</sup>

This Law envisioned: a) establishment of public children’s homes *ex officio* (in Slovak known as “shelters”) for children below seven years of age who were officially declared for abandoned (Art. 1);<sup>7</sup> b) foster care for healthy children in families (Art. 2); c) institutional care for children with special needs (Art. 2);<sup>8</sup> d) institutional care in public children’s homes for children below the age of fifteen, if they were not placed in foster families after the third year of age or the seventh year of age (Art. 2) or in other public or private institutions (“orphanages”).

Pursuant to this Law, the establishment and running costs of the public children’s homes were covered by the Country Sickness Fund, the State Budget, and by voluntary contributions. The expenses for healthcare provided for children below the age of seven were born by the state. The expenses for healthcare provided for children aged seven to fifteen were born by the municipality of their residence. An orphan older than fifteen years of age was deemed for legally independent. If the orphan was not capable to take care of himself/herself, he or she could be placed in a poorhouse [Jáger and Janigová 2013, 109].

The care providing for children older than seven years who were in need of public help was regulated by Law no. XXI of 1901 on Care for Children Older than Seven Years Old in Need of Public Help. Both this Law and Law no. VIII of 1901 envisioned the placement of “older” children (i.e. children aged seven to fifteen) “in shelters or responsible foster families, preferably farmer and

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<sup>6</sup> No comparable laws existed in the Austrian part of the Monarchy in that time, and hence there was a legal gap in the Czech law after 1918.

<sup>7</sup> Law no. VIII of 1901, Art. 1: “Public children’s homes will be established in the capital city of Budapest and in various places throughout the Kingdom, in order to provide protection for children under the age of seven who were found and officially declared for abandoned. Public children’s homes in villages will be established stepwise, in places where educational institutions for midwives have been established and where the local community will perform charitable activities in favour of these children’s homes.”

<sup>8</sup> Law no. VIII of 1901, Art. 2: “Placement into institutional care is necessary for ill, weak, backward children and children with special needs and health requirements. Other children should be placed elsewhere.”

craftsmen families” (see Art. 2).<sup>9</sup> Older children were supposed to be granted the possibility to continue in their studies. Pursuant to Art. 3, the expenses for alimentation and education of children aged seven to fifteen were paid by the municipality of their residence.

Law no. VIII and XXI of 1901 were executed by Executive Regulation of the Ministry of Interior no. 1/1903 B.M. on Protection of Abandoned Children. According to this Regulation, an abandoned child was a pauper child younger than fifteen years old, who had no relatives bound and able to aliment and educate the child if the benefactors or charitable institutions did not care for the child’s alimentation and education instead. Such child had the right to be placed in the public children’s home after he or she had been officially declared for abandoned by the ruling of the guardianship court with jurisdiction over the child (i.e. the court which administrated justice over the child or over the territory where the child was found).

Especially uneasy was the problem with beggars and roamers at the end of the 19<sup>th</sup> century and in the beginning of the 20<sup>th</sup> century. Abetment to begging and roaming of the children and youth under the age of eighteen was criminal pursuant to Law no. XL of 1879 on Summary Offences, pursuant to Law no. VII of 1913 on Criminal Youth Courts, and pursuant to Law no. XXI of 1913 on Publicly Dangerous Idlers.

Criminal protection of children was achieved through Law no. XXXVI of 1908 (amendment of the Criminal Code no. V of 1878), and Law no. VII of 1913 on Criminal Youth Courts as amended by Law no. 48 of 1931 Coll. (i.e. the first Czechoslovak Law of unifying character). Pursuant to Law no. XXXVI of 1908, Art. 16, a person could be criminally liable if older than twelve years old and if intellectually and morally capable to recognise danger and after-effects of own actions and to have control over own behaviour. The age of criminal liability was changed to fourteen years of age through Law no. 48 of 1931 Coll. These laws aimed to “reclaim and re-educate” the young perpetrator and were especially effective. They were regarded as very progressive as they protected the young perpetrator and achieved the purpose of criminal law through reformation instead of punishment (borstal schools).

Pursuant to Law no. VII of 1913, special Criminal Youth Courts were established at district courts. These dealt with young perpetrators, their guardians, parents, curators, and tutors who insufficiently or improperly raised and educated the children and youth or even misused them (e.g. aforementioned abetment to begging or roaming). Different educational measures applied to young perpetrators, especially *admonition* and *conditional discharge with severe probation* (the so-called trial probation with the primary aim to protect the young perpetrator). In cases of gross misconduct, the court could impose

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<sup>9</sup> Lecture of the doctor Janovský for the social workers, held from 17<sup>th</sup> to 27<sup>th</sup> of August, 1922. In SNA, f. IMSS, box 8, no. 25.

a *borstal training* [Tůma 1925, 167, 171; Idem 1920, 15] or *imprisonment*. The *borstal training* could not be imposed if the perpetrator was older than twenty-one years of age. If the perpetrator was older than eighteen years of age and committed a felony, the court could impose the most severe punishment, i.e. imprisonment in the State Juvenile Detention Centre. A young perpetrator discharged from the prison or discharged conditionally could be subject to further probation pursuant to Law no. VII of 1913, Art. 26–30.<sup>10</sup>

## 2. SLOVAK LEGISLATION ON CHILD CARE AND YOUTH CARE DURING THE FIRST CZECHOSLOVAK REPUBLIC

Protection of children was after the establishment of Czechoslovakia secured through means of health law, social law, and criminal law. Many of the above-mentioned former Hungarian laws and regulations were taken over to the Czechoslovak legal order with effect solely for the Slovak part of Czechoslovakia. The primary aim was to ensure the child protection minimum standards according to objective quality of life measures. The general legal framework was the Constitution, especially the provisions on the protection of marriage. Pursuant to Art. 126 of the Constitution adopted in 1920, “marriage, family and motherhood were to a great extent protected by the laws.”

The competencies of the public healthcare bodies (state bodies, municipalities, etc.) were altered as follows: the supreme administrative body was the newly created Ministry of Public Health and Physical Education which cooperated with other ministries, public bodies, and half-official private charitable associations and organisations. Pursuant to Government Regulation no. 385 of 1922 Coll., the competencies of the county bodies were transferred to the regional bodies that became the most important local public health bodies. Just to mention, the county and district bodies had important epidemiology competencies. For instance, they ordered and executed sanitation inspections in educational institutions which they could close until the violation was not corrected, they carried out supervision over public and private health institutions and charitable associations, they carried out supervision on immunization programme, as well as supervision over district health personnel.<sup>11</sup> Respective competencies were in large extent transferred from the self-government bodies to the state bodies (see Law no. 332 of 1920 Coll.: “The Health Police is no longer a local body but a state body.”

Short after the establishment of Czechoslovakia, the fundamental Law no. 256 of 1921 Coll. on Protection of Children in Substitute Care and Out-of-Wedlock Children was adopted, together with Government Regulation no. 29

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<sup>10</sup> See also the Hungarian Ministry of Justice Regulation no. 56000 of 1913.

<sup>11</sup> See also the Government Regulations no. 96 of 1928 Coll. and no. 186 of 1928 Coll.

of 1930 Coll. and Government Regulation no. 40 of 1932 Coll.<sup>12</sup> Pursuant to Law no. 256 of 1921 Coll., the Minister of Social Care obtained authority to decide on the following: a) conditions of substitute child care in favour of children below the age of fourteen (possible only upon approval obtained from the guardianship court); b) supervision over children in substitute child care (especially abandoned children) and over out-of-wedlock children who were in the care of their parents or of the single mother only; c) conditions of foster care, supervision over foster parents, rights and duties of foster parents, and of parents towards the supervisory bodies.

The Law was executed with the help of the local self-governmental bodies, administrative bodies, and voluntary associations which co-operated in childcare issues and carried out the supervision. Pursuant to Law no. 256 of 1921 Coll., Art. 2, the Guardianship Department/Court of First Instance was the supervisory body in Slovakia and Ruthenia and its jurisdiction hinged on identifying the child's residence. Supervision in substitute care issues was carried out by higher courts and by the Ministry of Justice. Supervision in institutional care issues was carried out by the Country Department and the Ministry of Social Care which cooperated with the non-governmental body called Country Headquarters of the Regional Youth Care.<sup>13</sup>

Pursuant to Art. 3 of the Government Regulation no. 29 of 1930 Coll., the supervisory competency over children in non-institutional substitute care could be transferred (following the Czech example<sup>14</sup>) on newly established half-official associations called Regional Youth Cares, provided that these Regional Youth Cares consented and were able to successfully carry out that task.<sup>15</sup> If the competent Regional Youth Care took over the supervision over the so-called children worth of care (especially out-of-wedlock children and children in foster care), the respective tasks were fulfilled by authorised personnel, i.e. the public guardians or fiduciaries. The Regulation imposed information and record-keeping duties on villages (Art. 22). Hence, the villages were bound to provide relevant information on children who lived in their district to the Regional Youth Cares (e.g. information about children in substitute care or out-of-wedlock children), to submit reports on the administration

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<sup>12</sup> These Laws were abolished in the 1950s (see Law no. 69 of 1952 Coll. on Social-Legal Protection of the Youth).

<sup>13</sup> Country Headquarters were under the supervision of the Country Department since the 1930s.

<sup>14</sup> They were private associations established in Slovakia in the 1930s, following the Czech example. As Bokesová–Uherová states: “Public and state bodies were supported by voluntaries, i.e. citizens who joined the Regional Committees of the Regional Youth Cares. The Committees were established as associations, pursuant to Regulation of the Ministry of Social Care no. 3888 of 1921. State bodies could transfer the competency to carry out the public care on the Regional Youth Cares indeed.” [Bokesová–Uherová 1989, 257–58].

<sup>15</sup> It happened after the establishment of the Regional Youth Cares in the 1930s.

of childcare and to notify the supervisory bodies about the necessary measures in favour of these children. If requested, the schools attended by these children had the same duty.

Adoption of Law no. 125 of 1927 Coll. on Organisation of Countries, led to fruitful discussions about the necessary enhancement of the public child care and youth care. The main objectives were especially to: 1) transfer the agenda of regional guardianship departments/courts on public administration bodies; 2) secure due payment from people legally bound to aliment the children; 3) harmonise the legal acts, especially the civil law and family law legal acts in order to create a stable unified legal background [Lauschmann 1928, 434].<sup>16</sup>

It is necessary to say that the First Republic legal acts were not satisfactory. It was especially their too general character that led to the start of an extensive expert debate in the 1930s. This was supposed to culminate in the adoption of a new general Czechoslovak Law on the Youth Care, together with its Slovak version. Sadly, this never happened, mainly due to the conclusion of the Munich agreement in 1938 [Chura and Kizlink 1989, 969].

The Draft Bill imposed duties on the voluntary, private and public care providers with the aim to improve the quality and extent of care providing. The financially demanding forms of care (e.g. institutional care for the physically and mentally ill children) were supposed to be funded from public finance or directly by the State (state founders) and not from private sources. Therefore, the improvement was supposed to happen mainly through better public financing and support of the charity. Providing care was supposed to become a public issue. Ministry of Social Care, Ministry of Education and National Edification, Ministry of Healthcare and Physical Education, and Country Headquarters of the Youth Care (with control, coordination and administration activities in the Countries) were supposed to be the main responsible bodies. The extensive expert debate definitely preset the subsequent trends in providing social care for the children and youth.<sup>17</sup>

### 3. THE FIRST SLOVAK LAWS ON PUBLIC CARE FOR THE YOUTH

The Slovak State was established in 1939, March 14. Pursuant to Law no. 1 of 1939 Coll., the former Czechoslovak legal acts were taken over and so the above mentioned Hungarian Laws and First Republic Czechoslovak Laws continued to be in effect during the existence of the war Slovak State. The general world-view of the then-existent Slovak society was based on Christianity and traditionalism what influenced the social policy makers and led to aggravated protection of marriage, motherhood, family, and hence also

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<sup>16</sup> For the same conclusions see: Júnová 1936, 412.

<sup>17</sup> For the draft bill and related preparations see: Fasora 1999, 158–59.



protection of the children and youth in need. For that reason, many of the legal norms adopted between 1939 and 1945 were of “pro-natalist” character, i.e. introduced insurance relief, tax relief, and classical pro-family measures such as children’s allowance, budget price rentals, other financial compensations, etc.<sup>18</sup> As J. Vicen said: “The Slovak social policy is based on continuance of the previous legislation and approach to children in state care. This continuance is a positive step towards further enhancement” [Vicen 2010, 12].

As we have already stated, there was an extensive expert debate about the necessity to adopt a general legal norm on child care and youth care in inter-war Czechoslovakia. This was achieved in 1940 when Law no. 213 of 1940 Coll. on Public Care, Public Guardianship, and Regulation of Child Protection Supervision was adopted. The care receivers were the children named in Law no. 256 of 1921 Coll. and in addition, the children whose parents divorced or separated and were in need of help.<sup>19</sup>

The competencies of the Czechoslovak Ministry of Social Care were transferred to the Slovak Ministry of Interior and its Department of Social Affairs. The Guardianship Departments and Courts continued to work and were placed under the supervision of the Ministry of Justice. Law no. 213 of 1940 Coll. emphasised the importance of public guardianship (Art. 3–6) which could be carried out only by “moral persons who cherished the Christian values.” They were appointed by the guardianship courts which preferred *people who educated children* (e.g. teachers, tutors), *social workers and functionaries of charity organisations* (Art. 4, Sec. 4). The guardianship courts of the first instance continued to be the primary supervisory bodies (Art. 3 and 4) but the primary administration was reserved to the Regional Youth Cares. These half-official associations became, already during the First Republic, the main care providers which cooperated with the Youth Social Care Headquarters in Bratislava, which subsequently cooperated with the Ministry of Interior or the Ministry of Justice. Supervision over the state care providing was carried out by the Ministry of Interior which cooperated with the respective local Regional Youth Care (Art. 17). Duties and competencies of the municipalities, guardians, and schools were designated by Law much clearer than they had been in the past when the regulations were vague, fragmented or even non-existent.

Guardianship was regulated by Czechoslovak Laws and legal practice. Legal duties of the guardians included providing the same care as parents were bound to provide to their children, especially to care for the children’s wellbeing, to protect their right to an adequate standard of living and to provide them a fair Christian education.<sup>20</sup>

<sup>18</sup> For more information see: Podolec 2017, 147–68.

<sup>19</sup> According to this Law, full age was reached in 21 years of age.

<sup>20</sup> Art. 22, Sec. 1: “Guardians are obliged to care for wards as devoted parents care for their

To sum up, Law no. 213 of 1940 Coll. introduced broader competencies of the state bodies which before had been equal to the private care providers (usually natural persons who had acted as guardians and legal persons in form of institutions or other open or closed care units). This Law respected the First Republic factual framework, care providers and their competencies, however, with much deeper interference of the State.

After the restoration of Czechoslovakia in 1945, the care for children and youth became again a legislation issue, according to the spirit of sovietisation which influenced both the society and the lawmakers. Law no. 48 of 1947 Coll. on Youth Care Organisation comprised though of mere nine articles [Mikloško 2009, 19]. It significantly changed the structure of care providers in favour of boards of district people's committees and Ministry of Social Care, instead of private and half-official associations called Regional Youth Cares and Headquarters of the Youth Care in Bratislava which had been established in the 1930s. Government Regulation no. 202 of 1947 Coll. dealt with personal, organisation and competency issues related to the newly created system of public care providing. After February 1948 and adoption of The Ninth-of-May Constitution, the State interference only deepened, especially through Law no. 265 of 1949 Coll. on Family Law. As A. Škoviera said [Škoviera 2007, 40]: "The sophisticated childcare and substitute care was gradually dismantled since 1948." Guardianship as a form of substitute care was abolished<sup>21</sup> and replaced with institutional care whose provider was the State. As a result, faceless, impersonal, and monolithic children's homes were established. Law no. 69 of 1952 Coll on Social and Legal Protection of the Youth became the new legal basis.

## CONCLUSION

The study is an insight into the development of social care and healthcare providing for children, as well as their protection through the means of criminal law. Care for the children and youth was an ever-important traditional social issue, however, for a long time covered only by volunteer activists. Some competencies in child care and youth care were transferred on the municipalities and counties during the existence of the Hungarian Kingdom. These included immunization activities, care for the poor, school attendance supervision, health supervision, etc. The interference of the State grew gradually,

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own children, meet their nutrition, clothing, and healthcare needs, provided that those who are legally bound or obliged to do so fail, and to provide them an appropriate Christian and patriotic education."

<sup>21</sup> This institute was restored in Czechoslovakia in 1973 (see Law no. 50 of 1973 Coll. on Guardianship).

especially since the establishment of the Czechoslovak Republic when the relevant competencies of the municipalities were transferred on district authorities. The hypertrophy of legal norms which regulated the child care and youth care, competency conflicts, funding problems, low State subventions, etc. were the long-lasting problems. Legislative attempts in Czechoslovakia either failed or were only partially successful (see the Draft Bill on Youth Care, not passed upon). Legislative attempts were, on the other hand, successful during the existence of the war Slovak State where Law no. 213 of 1941 Coll. (though based on the Czechoslovak draft bills) was adopted. The increase of State interference was significant since the change of the political regime and adoption of Marxism-Leninism. The fundamental legal norms of this era were Law no. 48 of 1947 Coll. on Youth Care Organisation and Law no. 69 of 1952 Coll on Social and Legal Protection of the Youth.

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## PROJEKTY USTAWODAWCZE DOTYCZĄCE OCHRONY DZIECI W PIERWSZEJ POŁOWIE XX WIEKU W PRAWIE OBOWIĄZUJĄCYM NA SŁOWACJI

**Streszczenie.** W artykule analizie zostaje poddana prawna ochrona dziecka w ustawodawstwie Słowacji w pierwszych latach formowania się publicznego i prywatnego systemu socjalnego, zapewnianego przez wiele podmiotów. Autorki zwracają uwagę na dawne prawo węgierskie i czechosłowackie, które nadal obowiązywało w okresie wojennym i powojennym (po 1945 r.), kiedy zostały uchwalone pierwsze kodeksy dotyczące opieki nad dziećmi i młodzieżą. Zarówno w środowisku węgierskim, jak i czechosłowackim prace legislacyjne dotyczące dzieci i młodzieży (ochrona socjalna, ochrona zdrowia, ochrona za pomocą środków prawa karnego itp.) zostały w analizowanym okresie wzmożone.

**Słowa kluczowe:** ochrona dzieci, ochrona biednych, Węgry, Republika Czechosłowacka, Słowacka republika w stanie wojennym

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