Proposal Dr. Irene Messinger for the Central European History Convention July 17th—19th 2025, University of Vienna

The Disruption of Social Work Knowledge: The Impact of Fascist Regimes in the 1930s on Individuals, Institutions, and Professional Expertise in Vienna

As in many other European countries, the professionalization of social work in Austria began in the early 20th century. In Vienna, the first social work course for women was established in 1912. The interwar period saw innovative public health and housing programs, driven by Red Vienna's progressive welfare policies (1919–1934). However, the political ruptures of Austrofascism (1934–1938) and the National Socialist regime (1938–1945) profoundly altered social work, subordinating it to ideological agendas.

These regimes disrupted Vienna's role as a hub of social work innovation in the Habsburg Empire, where psychoanalytic and psychological approaches, as well as community care (e.g. Settlement Movement Ottakring), had been developed and implemented. Social democratic organizations were banned in February 1934. By 1938, numerous Jewish-run organizations and institutions were destroyed and abolished. Between 1934 and 1945, many social workers were forced into exile or perished in concentration camps due to political or racial persecution. Their persecution had lasting effects on the development of social work in Austria. Case studies include networking figures like Ilse Arlt, Anna Freud, and Else Federn, illustrating how Viennese practitioners contributed to the field's knowledge and how these approaches were ultimately lost after the war.

This proposal presents findings from my habilitation project "Verfolgung und Widerstand von Fürsorgerinnen aus Wien 1934-1945. Biografien, Netzwerke, Wissenstransfer" (Persecution and Resistance of Viennese Social Workers 1934-1945), submitted to the Institute for Contemporary History, University of Vienna. Using feminist biographical methods, I am analyzing 80 biographies of persecuted social workers, reconstructing their lives, networks, and contributions. While some exiled social workers achieved remarkable careers abroad, this lecture will not cover this knowledge transfer. The project intersects social history, gender and labor history, and the (intellectual) history of a profession, offering new insights into the history of Viennese as Central European social work.

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BUDAPEST: A SANITARY DANUBE CAPITAL

The history of Budapest between 1850 and 1950 was turbulent, marked by numerous environmental changes. The Danube, which flows through the city, as well as several streams that feed into it, has always been essential to the city's functioning. As a result of population growth driven by the great urbanization and industrialization of the 19th century, the environmental problems of unified Budapest grew, particularly in relation to housing, public health, and water management. During this period, solutions to these problems were primarily seen in terms of infrastructure development, influenced by the sanitary movement. Consequently, the construction of water pipes, waterworks, a new sewage network, and the regulation of the urban stretch of the Danube and its various streams on both banks were all part of the urban planning process that began in the 1860s.

These developments were essentially treated as professional matters of engineering and public health, but the various institutions, scientific organizations, and individuals involved also brought many other factors into the decision-making process. The professionals behind the development of the sewage system came primarily from two disciplines: engineering and medicine. These experts carried out their work in scientific associations and often served as members of the city's municipal or state administration.

This paper explores the knowledge possessed by the professionals involved in the reform, how they acquired the necessary knowledge, what tools and resources were available to them, and the role of European knowledge transfer in Budapest's sanitary reform. Particular attention is given to the relationship between Vienna and Budapest. How were Budapest's sanitation efforts received in Vienna, and vice versa?

Birth Control in Interwar Hungary

In the Austro-Hungarian Empire, the demographic transition began in the last third of the 19th century and ended rather quickly in the first third of the 20th century. In addition to political regime change and economic uncertainty, the new states had to cope with radical changes in childbearing patterns. In a multicultural region with diverse ways of life, responses to the spread of birth control between the two world wars varied. In Hungary, a strong pronatalist discourse began in 1927, not entirely independent of Mussolini's natalist policies in Italy. My presentation will summarise the results of a research project that I have been conducting for several years and that I intend to carry out in the near future on a Central European scale. I will present these results in three points.

First, I will describe the demographic transition in Hungary at the municipal level. This approach leads to a rethinking of the model of demographic transition. My results suggest that spatial inequalities, which are not explained by administrative or ethnographic boundaries, but by the specificity of transport opportunities, are more important.

Based on this, I will show how the Hungarian population discourse between the two world wars thematised the issue of birth control through different regions. Highlighting one region without any context has led to numerous misinterpretations. In this section, I will use the example of a micro-region to illustrate how the Hungarian pronatalist discourse deepened social fault lines.

In the third point, I will examine the social responses that emerged despite the strong pronatalist discourse. Among these, I highlight the issue of abortion, which was almost completely prohibited by law, but widely practised. These show that the practice of birth control was more likely to fit in with, or run counter to, the normative system of a community, regardless of its religious and economic circumstances.

I will conclude my presentation by looking at parallel research in the region. I will also discuss some possible questions for further research.

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