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In Pursuit of Greater Hungary: Eugenic Ideas of Social and Biological Improvement, 1940-1941

Marius Turda

Oxford Brookes University

Few periods in modern Hungarian history have generated more debate than the period between the outbreak of the Second World War on September 1, 1939, and the German invasion on March 19, 1944. Hungary's political life during this time is generally described as a particular blend of conservatism and nationalism, recurrently punctuated by antisemitism.¹ Hungarian cultural and religious elites, moreover, were often tempted by, but never completely succumbed to, radical political ideologies like fascism or Nazism, although Hungary's involvement in the Holocaust was significant.²

Despite sustained scholarly scrutiny, there are still many unanswered questions about this period. One such question pertains to the impact of social and biological policies introduced by the Hungarian government in the early 1940s. Formulated in a time of conflict and growing social and economic unrest, concerns for the nation's health dominated the political agenda. A state welfare program gradually emerged, one that drew as much sustenance from Hungary's renewed nationalism as from the widespread acceptance of eugenic ideas of social and biological improvement.

The vision of Greater Hungary that materialized during this period was expressed through nationalist metaphors, irredentist propaganda, and, more important, through laws and strategies of institution building. It was these strategies, coupled with a dedicated sense of national purpose, that ultimately forged a new relationship between the individual and the state. Within a new territorial framework, Hungarian politicians reworked the legacy of the past and the opportunities afforded by the current changes in regional and international politics to express their hopes for a better future.

In the years 1940 and 1941, national politics in Hungary sought to restore the country's sense of historical mission in the region. Hungary's successful territorial enlargement prompted wider social and economic reforms, as well as a radicalization of the political culture. The growth of expert knowledge about the population, together with the initiation of a nationwide program of social and biological engineering based on the protection of Hungarian racial values, were the most important outcomes of this process of nation (re)building.

That racial ideas figured centrally in both cultural and political discourses at the time has long been established — most notably, of course, for Germany.³ The multifaceted history of eugenic thinking, however, has been slow to surface in the scholarship on the interwar period in central and eastern European countries.⁴ With respect to Hungary, historians have yet to bring their analysis of race and eugenics to the wider field of nationalism and cultural debates about the nation.⁵ Until very recently, eugenic arguments in general have been ignored as historical resources, although most of the existing scholarship has concentrated intensely on nationalism, antisemitism, and the radical right.⁶ Without their corresponding racial imagery, however, these political ideologies appear distorted and ultimately lacking the very essence that sustained them.

One attempt to correct this historiographic deficiency and interpret the Hungarian religious and antisemitic debates of the 1940s in terms of their racial content is Paul Hanebrink's *In Defense of Christian Hungary*. Commenting on the Hungarian Parliament's approval of Act XV on August 8, 1941, for example — an act often described as the “third Jewish law” — Hanebrink did not hesitate to describe the moment as symbolizing Hungary's transformation into “a racial state.”⁷ But is this description warranted? Was Hungary — like Nazi Germany — working toward “a comprehensive program for a racial new order”?⁸

This article engages with the question by discussing eugenic plans of social and biological improvement implemented in Hungary between 1940 and 1941. The emphasis here is not — as is often the case — on popular culture, academic debates, and specialized scientific journals. I choose, instead, to focus primarily on government activity, which strongly demonstrates the connection between the rhetoric of social and biological regeneration and practical politics. It was the government and other official institutions from which eugenic projects of national renewal were disseminated in the 1940s with unparalleled political vigor and intellectual vitality. Central to this political activity were ideas of territorial expansion, population control, and the idealization of the nation. Within this context, the notion of the healthy and numerically strong Hungarian family became linked to the cult of race — as much a reflection of the state's territorial and social transformation as of the general acceptance of eugenics.⁹

Neither nationalism nor eugenics had fixed definitions at the time; instead, they assumed their values within their usage in specific historical circumstances. The context under discussion here coincides with Pál Teleki's second premiership (1939-41), and it was his direct participation in policy making that assured the consolidation of Hungary's social welfare program. Teleki's eugenic ambition was to create a scientifically regulated society from which social and ethnic conflicts as well as economic poverty and poor health conditions would be significantly reduced. Appealing to this idealized Hungary added additional legitimacy to the laws that Teleki's government managed to pass through Parliament between February 16, 1939, and April 3, 1941. Among these, the so-called Jewish laws dominate the historiography.¹⁰ Undoubtedly, the need to take account of resurgent antisemitism in Hungary was one important reason why the government introduced discriminatory measures against the Jews. But it was not Teleki's antisemitism that offered Hungarians the prospect of a healthy and numerically strong nation, despite the significance of the economic overtones of the antisemitic legislation; it was his eugenic worldview.¹¹

Antisemitism lurked in the background of most discussions of social and biological engineering during the 1940s, often accompanied by the rhetoric of “racial defilement” (*fajgyalázás*).¹² Yet medical, social, and economic reforms adopted at the time were not just racial, directed against the Jews; they were also eugenic, aiming to protect the physical body of the Hungarian nation. Act VI of 1940 on the Prevention of Tuberculosis and Venereal Diseases and Act XXIII of 1940 on the National Fund for the Protection of Family and Nation provide illustrations of this duality; so does the oft-mentioned Act XV of 1941 prohibiting marriages between Gentiles and Jews. This latter act was as much eugenic, dealing with medical examinations before marriage and social welfare assistance, as it was antisemitic. Yet, with two notable exceptions, scholars have neglected the eugenic language embedded in these acts and their promises to promote the racial health of the Hungarian nation.¹³

By charging the state with the protection of the family and the nation, a new eugenic ethos was devised in Hungary, whereby ideas of social and biological improvement were combined in innovative ways. On the one hand, social hygiene, public health, and family

welfare were based on the broad concept of eugenics; on the other, political reform and economic development became synonymous with the preservation of the Hungarian race. In these respects, Teleki did more than just consolidate previous eugenic programs of social and biological engineering. He changed Hungarian society more than any other Hungarian prime minister before him. Politicians in Hungary, like those in Fascist Italy and Nazi Germany, experimented with a vision of the “racial state” based on a biological definition of national community, which owed much to eugenics, demography, statistics, and social welfare. Ultimately, Teleki’s aim was nothing less than a completely transformed state, and his vision of a “Greater Hungary” — one territorially similar to, but socially, culturally, demographically, and politically different from the one that had existed within the Habsburg Monarchy — became reality in the early 1940s.

Territory and Population

Strengthening the population’s biological quality was a central objective for all Hungarian governments between 1919 and 1945. But achieving this objective proved difficult, not least due to prolonged political instability.¹⁴ Teleki’s second premiership began with great hope and even greater promise: the prospect of regaining the territories lost after World War I.¹⁵ This is a story that has often been told. In November 1938, following the First Vienna Award, Hungary reincorporated the former Upper Country (*Felvidék*) — that is, southern Slovakia and southwestern Ruthenia (Carpatho-Ukraine); the annexation of the rest of Ruthenia followed in March 1939. In August 1940, as a result of the Second Vienna Award, northern Transylvania was returned to Hungary.¹⁶ Finally, when Nazi Germany invaded Yugoslavia in April 1941, Hungary received the former Southern Country, *Délvidék* — that is, Muraköz, Muravidék, and western Vojvodina.¹⁷

Of course, all was not perfect. Hungary did not obtain all of the territories that had once belonged to the Crown of St Stephen; nor did it manage to avoid having to incorporate ethnic minorities again. The return of Transylvania, for example, brought significant numbers of Romanians, Germans, and Jews with it. However, the Hungarian government was undeterred in its hopes of achieving an ethnically homogeneous state. To this end, two interrelated projects materialized in the period: a territorial project, with the aim of restoring Hungary’s former borders, and a welfare project, predicated upon enhancing the nation’s biological health. In this context, eugenics was promoted as the rationale for a vigorous new program of racial as well as moral national regeneration.

The transfer of populations after 1938 — albeit infrequent — provides a convincing example of how ideas of social and biological improvement intersected with official politics. The resettlement of “racially pure Hungarians” from outside Hungary was determined by both ideological and practical considerations.¹⁸ Compared to its neighbors, Hungary’s population was the least numerous: in 1931, Hungary had 8.7 million inhabitants compared to Yugoslavia’s nearly 14 million, Czechoslovakia’s almost 15 million, Romania’s 18 million, and Poland’s nearly 32 million.¹⁹ Even in 1941, having regained most of the territories lost after the First World War, Hungary’s population only counted around 14 million.²⁰ In response, politicians sought the help of demographers, eugenicists, and social reformers, whose expert knowledge attempted to apply pronatalist models developed in other countries (particularly Germany and Italy) to Hungary’s specific conditions.²¹ Various population policies were launched as a result, particularly in areas deemed “racially unstable” by Hungarian authorities.²²

Such was the impetus toward biological regeneration through population transfers that one finds instances of it in all regions of Hungary and at different cultural levels. To illustrate this point, consider the village of Börvely in northwestern Transylvania, whose Calvinist

pastor pleaded with Teleki in 1941 to allow Szeklers from Bukovina to resettle in his village. After the 1920 Trianon treaty, the pastor explained, this Hungarian village was cut off from the national body. Preserving Hungarian traditions kept the community alive, but since Swabians and Romanians surrounded them, the villagers had to resort to endogamy — the only strategy of racial survival available to them. After twenty years, however, this isolationist marriage practice had greatly affected the villagers' well being, both physical and moral; in other words, they had become "degenerate." Racial survival in Hungary's newly acquired territories was thus politicized. The transfer of populations orchestrated by the Hungarian government at the time provided the pastor with the solution for his village's biological deterioration. The resettlement of 100 Szekler families in Börvely, the priest believed, would reinforce the villagers' depleted racial vitality, providing the much-needed eugenic renewal.²³

In addition to providing evidence of the wide circulation of eugenic ideas in the rural regions of Hungary, this example from Börvely also reveals how some Hungarian villages in Transylvania during the interwar period may have felt threatened by ethnic isolationism and endogamy.²⁴ Both of these practices, so intimately identified with the territorial and political changes of the 1940s, find further confirmation in the controversy surrounding the "return" of the Hungarian communities lost after World War I (*határon túli magyarok*) to the "mother-nation."²⁵ As the number of Hungarians transferred from Romania increased in 1940, ethnographers and anthropologists alerted government institutions not only to the great social and political impact resulting from these demographic changes but also to their scientific significance.²⁶ In a memorandum addressed to the Institute of Hungarian Studies (*Magyarságtudományi Intézet*) on May 20, 1941, ethnographer Gyula Ortutay addressed this issue thus: "The resettlement of the Hungarians from Bukovina provides a unique opportunity which has never arisen before and is not likely to arise in the future."²⁷ As Ortutay was quick to point out, repopulating regained territories with "racial" Hungarians was more than simply a story of population transfer. Ortutay correspondingly highlighted the unique ethnic history provided by these migrating Hungarian communities, explaining the need for their thorough investigation by research teams consisting of "philologists, ethnographers, ethno-musicologists, an anthropologist and a sociologist."²⁸

As the 1940s unfolded, Hungarian politicians engaged directly with eugenic welfare strategies, embracing the notion that the nation can and must be eugenically improved by means of territorial enlargement and appropriate medical, social, and economic legislation. This proliferation of eugenic discourses resulted in the establishment of a number of societies and institutes as well as the intensification of state intervention designed to control and govern the population through a national system of public health and social welfare. The state defined a new nationalist mentality connecting fertility and reproduction with Hungarian racial values and began shaping society accordingly.²⁹ Through population transfers it increased efforts to strengthen the racial composition of contested regions; through measures to oppose birth control in urban and rural areas it planned demographic growth; and finally, through eugenic screening and social medicine it hoped to create a healthy nation. As we shall see in the following section, at the beginning of the 1940s these eugenic efforts became systematic and intense.

Health Promotion and Disease Prevention

The renewed struggle to bolster Hungary's recovery after Trianon demanded an elaborate system of social, economic, cultural, and political measures. Emphasis was laid on the need to nurture a shared scientific agenda as a necessary component of successful social and biological policies. The Museum of Public Health (*Népegészségügyi Múzeum*), for example, was reorganized into an Institute of Social Hygiene under the hygienist György Gortvay in

1926. Its Department of Public Health actively promoted eugenic work, with assistance from the Ministry of Public Welfare.³⁰ Similarly, the Sanitary Reform Bureau — established in 1925 with funding from the Rockefeller Foundation and chaired by the Secretary of State for Health, Kornél Scholtz — integrated eugenics within its broad agenda of public health.³¹ In addition to the timing of their origins, these state institutions also shared a thoroughly medicalized approach to social improvement, as illustrated by the international exhibition on human protection organized between May and August 1926 in Budapest.³² Some scientific and religious associations, however — such as the Hungarian Scientific Society of Race Protection (*Magyar Tudományos Fajvéd Egyesület*) and the Mission for the Saving of the Hungarian Race (*Magyar Fajmentés Misszió*) — translated the government's concern with the health quality of the population into the need to improve the biological quality of the "Hungarian race."³³ Along with professional groups, such as the National Association of Hungarian Physicians (*Magyar Orvosok Nemzeti Egyesülete*, MONE) and the St Luke Society of Catholic Physicians (*Magyar Katolikus Orvosok Szent Lukács Egyesülete*), these societies made a significant contribution to the dissemination of a eugenic discourse of social and biological improvement based on family, nation, and race.³⁴

Eugenic propaganda introduced the political establishment and the general public alike to new ideas of health and hygiene, which were seen as requirements not only for the biological regeneration of the national community but also for the establishment of a suitable social and economic environment that would enable future generations to prosper and expand numerically. Eugenicists claimed that the state ought to replace other public institutions as the only source for national rejuvenation, but they struggled as to how to harmonize the interests of the state and the nation with those of individuals and families.³⁵ Ideas of social and biological improvement served as a mechanism by which the state was able to implement its demographic policies in the name of a healthy nation, financially supporting large families while protecting Hungarian racial qualities. An important source for this new eugenic epistemology in Hungary was the increased acceptance by government officials and seasoned politicians of a new set of beliefs about, and practices involving, the scientific planning of society.³⁶ The vision of Greater Hungary materializing in the 1940s thus stemmed not only from territorial enlargement but equally from a vision of the future: one depicting a harmonious natural national community, enveloping all Hungarians and their surrounding environment.

Family was another crucial component of biopolitical mythopoeia. Eugenic narratives about the nation's biological health were inseparable from narratives about family and reproduction.³⁷ Child allowances, marriage loans, and family protectionism became the norm in most European countries during the interwar period.³⁸ In Hungary, this steadily increasing ideological emphasis on family protection, children's health and natalist welfare was given material form through legislative and policy initiatives.³⁹ Among the institutions that played a significant role in disseminating eugenic propaganda, and consequently in legitimizing eugenic policies, was the Hungarian Union for Family Protection (*Magyar Családvédelmi Szövetség*), established in 1937 with Miklós Horthy's wife as one of its patrons. The union established its own Marriage Counseling Institute (*A Családvédelmi Szövetség Házassági Tanácsadó Intézete*) in 1938, followed by a Eugenics Department (*Fajnevelési Szakosztály*) in 1939.

The Christian family ideal was one important quality that eugenicists working with the Union for Family Protection promoted widely. But this ideal was to be understood not only religiously but also biologically, as a worldview gradually guiding the individual and the nation toward a new eugenic harmony.⁴⁰ As the geneticist and university professor Gyula Darányi noted at the opening of the Eugenics Department, "the family is undoubtedly the place where we should strive to put the rules and principles of eugenics into practice."⁴¹

Premarital health examinations were deemed essential. “The reason,” Darányi continued, was “the opportunity provided by this method to identify, without employing any kind of coercion, the harmful genetic and infectious material in couples who plan to get married.”⁴²

Health experts did not perceive eugenic screening for hereditary and infectious diseases as a solely medical problem.⁴³ As politicians struggled to achieve national consensus, their program of social efficiency and rational planning intersected eugenic efforts to improve the health of the individuals and families. As Gortvay argued in a 1938 article on “Eugenics and Social Politics,” the nation’s health became conterminous with the nation’s future.⁴⁴ Endorsing this view, the physician and demographer János Hidvégi articulated the need for a new reproductive and family ethic, particularly in certain regions of Hungary, like the Ormánság.⁴⁵ On the other hand, Ede Neuber, the director of Clinic for Dermatological and Venereal Diseases at the University of Debrecen, suggested that medical problems must be controlled and managed by the state.⁴⁶ Within this protectionist rhetoric, the spread of tuberculosis (TB) and venereal diseases (VD) was highlighted as Hungary’s main medical problem, particularly as eugenicists and lobbying associations, like the Anti-Venereal Committee of the National Public Health Association (Országos Közegészségi Egyesület Antiveneriás Bizottsága), the National Association of Family Protection (Családvéd Országos Egyesület), and the National Association against Tuberculosis (Tuberkulózis Elleni Országos Szövetség), described the existing social problems and demographic crisis in strikingly negative terms.⁴⁷

Vital to this program of preventive welfare was Act VI on the Prevention of Tuberculosis and Venereal Diseases (Lex Veneris), introduced in early 1940.⁴⁸ This law was designed to protect the nation’s health by empowering the state to intervene directly in society’s biological life in order to encourage the political and social transformations advocated by eugenicists.⁴⁹ Concerns about the impact of tuberculosis and venereal diseases on the family’s future became enmeshed with broader concerns about racial degeneration and national protectionism. The contagious nature of these diseases strengthened arguments in favor of preventive eugenic measures. When discussing the proposal in the Lower House of Parliament on December 14, 1939, for example, the welfare advisor for the County Council of Baranya in southern Hungary, Ferenc Somogyi, objected to the fact that “compulsory medical examination before marriage” was not included, insisting that public health regulations should not neglect “racial protectionism.”⁵⁰

Poverty was widespread in Hungarian villages, as were poor hygienic conditions, malnutrition, social “diseases” (such as alcoholism), sexually transmitted diseases (syphilis in particular), and high levels of infant mortality. Public health interventions included the prevention and eradication of contagious diseases as well as improved sanitation and housing.⁵¹ Somogyi lauded in this respect the activities of the Green Cross Health Services (*Zöldkeresztes Egészségvédelmi Szolgálat*)⁵² and those of Béla Johan, the director of the National Institute of Public Health. It was to be expected, Somogyi concluded, that a law stipulating the creation of a fund for family protection would follow shortly. Positive health measures would not be sufficient to “heal the Hungarian village”;⁵³ widespread economic and financial support would be required as well.⁵⁴

The essential synthesis of individual and community welfare was also highlighted by a teacher, László Rapcsányi, on behalf of the Arrow Cross Party (*Nyilaskeresztes Párt*), together with the biologist and university professor Zoltán Szabó, the representative of the Party of Hungarian Life (*Magyar Élet Pártja*).⁵⁵ Szabó boldly asked the House to reflect on what public health meant to them. For him, it was not only about “individual, isolated health measures” but also encompassed a wide program including “racial and family protection [and] population policies.”⁵⁶ Indeed, this was no simple health law. The Minister of Interior

and former prefect of Baranya County, Ferenc Keresztes-Fischer, assured the House that this Act on the Prevention of Tuberculosis and Venereal Diseases was only the beginning of a broader governmental program of social and biological improvement.⁵⁷

Act VI empowered the Ministry of Interior to coordinate a sociomedical network that included welfare centers, anti-venereal disease control agencies, sexual health experts, hospitals, and clinics. The state, municipalities, and townships as well as insurance companies could establish venereal disease centers.⁵⁸ On the one hand, the act facilitated social management and widespread screening for these diseases in Hungary, resulting in men and women alike being subjected to regular legal and medical surveillance; on the other, it validated and reinforced the state's control of the health of the family.⁵⁹ Not surprisingly, Act VI was greeted with enthusiasm by eugenicists and social reformers, as it gave them increased powers to demand marriage restrictions for those suffering from tuberculosis and venereal diseases, while mobilizing the public, welfare organizations, and state officials.⁶⁰

In terms of the themes discussed here, the introduction of Act VI established a clear connection between preventive medicine and ideas of population renewal.⁶¹ It was deemed crucial that health experts prevent the infection of the spouse-to-be and the birth of children of inferior eugenic quality. Social, medical, and eugenic interests coalesced, thus preparing the ground for the introduction of compulsory medical examinations prior to marriage. To this end, the medical gaze over the body politic was essential in construing the ideal of a healthy Hungarian nation in relation to ethnicity, pathology, and disease. The state was perceived by eugenicists to have finally taken seriously its duty to promote their long-desired goal of defending the nation against biological and social degeneration. However, this eugenic interpretation of the nation, alongside the legislation and promotion of ideas of health and preventive medicine, should be understood not only within the context of Hungary's territorial expansion but also within a wider social context. As we shall see in the next section, eugenic ideas of biological improvement also had significant social and economic ramifications.

Social Welfare and Rural Communities

In the climate of heightened nationalism that characterized the early 1940s, Hungarian elites were called to action by the need to consolidate the newly enlarged state and strengthen its foundations.⁶² Identification with a racial definition of the nation was encouraged through the promotion of new pronatalist and population policies as well as economic and social protectionism.⁶³ This led to the introduction of Act XXIII in 1940, stipulating the creation of the National Fund for the Protection of Family and Nation (Országos Nép- és Családvédelmi Alap, or ONCSA).⁶⁴

Ferenc Keresztes-Fischer submitted the proposal to Parliament on June 19, 1940.⁶⁵ When discussing it in the Lower House, he and others stressed Hungary's long tradition of family protection; yet it is also clear that Italy's fascist welfare program served as the model, in particular its National Organization for the Protection of Motherhood and Infancy (Opera Nazionale per la Protezione della Maternità e dell'Infanzia, or ONMI).⁶⁶ Maria Sophia Quine's description of ONMI as an institution embarking "upon a therapeutic mission to cure the race of its moral and physical decadence" can convincingly be applied to ONCSA as well.⁶⁷ One shared characteristic — as State Secretary Miklós Bonczos acknowledged — was both countries' emphasis on positive incentives to increase the quantity and quality of their populations; another one was the development of rural welfare.⁶⁸ Hungarian reformers combined maternal and child welfare with rural development schemes. Like ONMI in Italy, ONCSA was a nationwide program of social and biological engineering, one aimed at

addressing poverty and improving the peasantry's living and health conditions.⁶⁹ It was, to reiterate, concerned with strengthening Hungarian rural communities by offering them a comprehensive eugenic code based on a broad notion of a healthy and productive life for the benefit of the community and the nation.⁷⁰

Act XXIII placed a heavy emphasis on improved medical conditions, modern sanitation, and Christian morality, reaffirming the association between the health of the family, child welfare, and social and economic improvement. Furthermore, the act united state, municipal, and county health services, again under the supervision of the Ministry of Interior. Medical officers were responsible for issuing health certificates and for compiling comprehensive health charts of families selected for ONCSA's financial support. As for other countries in Europe, it was hoped that Hungary's population growth and economic progress could be achieved by introducing financial incentives for large families and improved medical and socioeconomic conditions for young families.⁷¹

Political economy and national efficiency were at the heart of ONCSA's system, alongside quantitative and qualitative eugenics. Act XXIII and its institutional corollaries included provisions for social assistance related to the protection of mothers and infants and correction of patterns of population fertility such as the "one-child" (*egykezés*) practice.⁷² It was also a rural settlement program.⁷³ Of course, those to whom these new houses and farms were allotted had to meet certain economic, social, and racial requirements. The aim was simply to reduce rural unemployment and increase economic growth while simultaneously encouraging healthy marriages and births. The peasantry was thus valued as the embodiment of racial fertility and national strength.⁷⁴

ONCSA was located at the intersection of three major domains: social, economic, and medical. It endeavored to: a) offer institutional support to families with many children; b) assure the necessary means for child and infant protection; and c) secure the welfare of poor families through distribution of land and houses and thorough resettlement in areas that were more developed economically and had better welfare infrastructure.⁷⁵ According to the vice-director of the National Social Insurance Agency, Dénes Bikkal, "the goal [was] to offer institutional assistance primarily to families of agricultural workers with many children who live in difficult conditions, as well as [to increase] their involvement in the national economy."⁷⁶ This was a social engineering program tailored to Hungarian rural realities and demographic specificities. The above-mentioned Ferenc Somogyi argued that ONCSA was not something to be copied from elsewhere, but the synthesis of indigenous eugenic and social welfare traditions.⁷⁷ His opinion had the weight of officialdom behind it, since he was appointed in 1940 as Assistant to ONCSA's Executive President and then Director of the Social Welfare Section of the Ministry of Interior. In this way, ONCSA brought together existing social and biological welfare initiatives, including state projects and social insurance companies, thus facilitating collaboration with local municipal officials and partnership with private institutions and agencies.

Positive eugenic thinking was central to this new social welfare system. Reproduction was deemed indispensable to womanhood, while demographic growth was encouraged in practical terms by providing financial incentives and the distribution of land to fathers of large families. Underlying this emphasis on quantitative eugenics was a nationalist ethos, also displayed in the government's racial paternalism. ONCSA's stipulations were designed simultaneously to signify not just the value of the Hungarian race and the country's healthy rural origins but also the emergence of a new national solidarity based on social welfare, modern ideas of hygiene, eugenics, and public health.

Elevated above divisive political alliances and defined in terms of national interest, ONCSA's social program immediately drew broad support from across the cultural, scientific, and political spectrum. The success of this welfare agenda merged two diverse yet equally important domains — the social and the medical — and their corresponding eugenic epistemologies. It is particularly illuminating that for many politicians, their interest in and support for eugenics sprang from their interest in social welfare. Eugenics always had a strong social component, and eugenicists were always involved with programs of social improvement, combining theory and practice. Moreover, eugenicists had long claimed direct access to society's most private corners and were among the first to concern themselves with biological improvement.

This wide medical, social, and economic program illustrates how scientific and social planning became integral to government thinking in 1940s Hungary.⁷⁸ As noted earlier, this was as a period of convergence, in which a number of biopolitical and eugenic initiatives developed during the interwar years caused many social reformers, public health activists, and eugenicists to yearn for direct state regulation of the nation's biological life. The so-called productive social policy (*produktív szociálpolitika*), developed most successfully by the mayor of Pécs, Lajos Esztergár, during the early 1930s, was one such modern idea of social engineering that the government applied nationally in the 1940s.⁷⁹ The widening reaction against the decline in fertility rates and the "one-child" practice also contributed significantly to introducing the political parties and public opinion to eugenic ideas of social and biological improvement. Esztergár made this connection explicit when he described his welfare activities as policies directed at "stopping the practice of *egykezés* and increasing fertility rates in the parts of the country that were especially affected by a decline in birth rates."⁸⁰ Grounded in the concept of productive social policy, economic efficiency and social integration were to be measured through the interaction between the biological life of the individual and the community.

Esztergár's goal of adopting demographic strategies to encourage population growth as an integral part of an efficient socioeconomic policy illustrates the link between a "productive social policy" based on eugenic welfare and rural pronatalism. Fears about declining birth rates, combined with the continuous criticism of the "one-child" practice in rural regions, were recurrent in medical and social discourses in interwar Hungary.⁸¹ The glorification of the peasantry as the embodiment of Hungarian racial values notwithstanding, there were voices who interpreted the "one-child" practice and the spread of contraceptives as examples of Hungarian peasant women's lack of patriotism, combined with their self-centeredness in not wanting to be mothers.⁸²

During the early 1940s these eugenic anxieties gained political significance as they were increasingly depicted as symptoms of a broader trend in demographic and racial decline.⁸³ Based on that perception, eugenicists urged the state to intervene and regulate reproduction, much as they used ideas of health to moralize and justify state control of the nation's biological body. They expressed not so much a shared conviction in race as a belief in the eugenic desirability of social and biological improvement. Integral to this vision of a resurrected Hungary was the centralization of health and welfare programs so that eugenic ideas of social and biological improvement could be applied uniformly.⁸⁴ This comprehensive system of state intervention to promote the nation's biological welfare led to the creation of the Inspectorate of Social Welfare (Országos Szociális Felügyelőség)⁸⁵ within the Ministry of Interior and, ultimately, to the foundation of the National Association for Health Protection (Országos Egészségvédelmi Szövetség) under Béla Johan in 1941.⁸⁶

As illustrated by Acts VI and XXIII, a healthy and eugenic way of life for the individual and the family was the prevailing consensus in 1940s Hungary. Eugenicists and their supporters

among the political elites believed in the transformative power of science, repeatedly stressing a modern conception of society based on rational planning. By providing the government with the ideological justifications needed to endorse Hungary's claims for regional importance, eugenicists in fact performed a dual function. On the one hand, they offered a vision of a healthy Hungarian nation, a task they believed required eugenic reforms. On the other, they adorned this vision of a eugenically renewed national community with racial arguments about Hungary's historical destiny in the region. A ruinous outcome of this duality was official antisemitism and the widespread acceptance in Hungary of the argument that the Jews were the racial "Other."

Race and Applied Eugenics

Race was not a factor only in the realm of eugenic representation; it also played an active role in practical politics. By the beginning of 1940, antisemitism, biopolitics, and eugenics were fast transforming Hungarian life. Anthropological, demographic, and eugenic theories were recast as ideological arguments in partisan disputes over the regained — but continually contested — territories.⁸⁷ But this was not a sudden acceptance of eugenics among Hungarian political elites, nor was it without strong international encouragement. Both Fascist Italy and Nazi Germany provided powerful eugenic models to emulate, contributing expertise and guidance to Hungarian policy makers concerned with population control and management.⁸⁸ Leading Hungarian politicians and religious authorities advocated positive eugenics either directly through legislation or indirectly by promoting public projects.⁸⁹ These included eugenic exhibitions, such as the Exhibition on Health Protection (*Egészségvédelmi Kiállítás*) held in 1932 at the Museum of Public Health, the Exhibition on Heredity and Eugenics (*Eugenikai és Örökl. déstani Kiállítás*) organized in 1934 by the Hungarian Society of Psychology together with the Museum of Public Health, and the Health Exhibition (*Egészségügyi Kiállítás*) sponsored by the Turul Association in 1935. Equally important, in 1940 an Institute for Anthropology and Racial Biology (*Embertani és Fajbiológia Intézet*) was established at the Horthy Miklós University in Szeged under the leadership of the renowned Hungarian anthropologist Lajos Bartucz. Moreover, when the Királyi Ferenc József University reopened in Kolozsvár (Cluj) in 1940, it created one chair in anthropology and another in racial biology and heredity.

Eugenics was deemed essential to the demographic, social, and welfare policies of the Hungarian state during the 1940s.⁹⁰ Of crucial importance here is the Society for Biopolitics (*Egészségpolitikai Társaság*, or EPOL)⁹¹ established in 1935.⁹² Concerns with reproduction and natalism were essential to EPOL's eugenic philosophy, as illustrated by the Fund for Population Growth (established in 1938) and the Section on Large Families (*Sokgyermekes Családok Osztálya*) headed by the statistician Alajos Kovács. Promoting quantitative eugenics would, it was believed, help to remedy the persistent problems of low fertility rates and the "one-child" practice, and at the same time encourage the state to invest in human economy.⁹³

Various eugenic idioms were invoked by EPOL to justify the need to redefine the biological relationship of the individual to the state. EPOL's president, Lajos Antal, offered his own interpretation of racial welfare and biopolitics.⁹⁴ The only way to achieve the "biological fullness" of the individual and of the national community was through "biologism," Antal claimed in 1940. Biologism provided the overarching biopolitical philosophy that could unite disparate strands of Hungarian eugenics. Correspondingly, Hungarian biopolitics was based on "the maintenance, care, and increase of the biological values of Hungarianness." Complementing this biological ideal, Antal also displayed new attitudes toward "the qualitative and quantitative development of the biological values of the Hungarians," as these values were to determine "the future of our nation in the Danube basin." Biopolitics,

he emphasized, was too important to be neglected further; it must be employed to “promote the biological value of Hungarianness,” to increase the “vitality and biological breeding” of the Hungarian nation. Antal summoned state leadership to contribute to “the biological future of the Hungarian nation” by introducing economic, social, medical, and eugenic policies, thus creating a biologically powerful national body.⁹⁵

The medical profession’s intense politicization was reflected in EPOL’s ambition to create a nationwide infrastructure of biological and eugenic research. This aim was achieved on May 31, 1940, with the creation of the Hungarian Institute of National Biology (Magyar Nemzetbiológiai Intézet).⁹⁶ This was the moment when the government became directly involved in biopolitics and when “national biology” (*nemzetbiológia*) emerged as the synthetic discipline to set the new ideological parameters for social, anthropological, demographic, and eugenic research in Hungary. The idea of a national institute was a long-standing aim of Hungarian eugenicists.⁹⁷ It was not to become an “ivory tower” academic institution, detached from Hungarian realities, but one that appealed to the population’s sense of eugenic responsibility. The aim was to create a new Hungary that was “strong, biologically homogeneous and capable of expansion.”⁹⁸ One member of the institute, András Korponay, outlined this program of quantitative eugenics clearly: “The foundation of our rebirth and our future is not a population policy based on the chimera of assimilation but one based on the demographic growth of racially pure Hungarians.” These measures, which were justified by arguments stressing the demographic situation in neighboring countries, social solidarity, and eugenic concerns, should set the stage for the introduction of “biopolitics as state politics in Hungary.”⁹⁹

Hungarian nationalist tradition and biopolitics became closely intertwined. Heredity, racial biology, and eugenics were underlined simultaneously as “the most nationalist [and] the most modern” branches of biological sciences.¹⁰⁰ Hungary was to become a healthy nation, qualitatively and quantitatively; in short, a country of 20 million Hungarians.¹⁰¹ Underpinned by Antal’s concept of biologism, the institute endeavored to restore Hungary’s former demographic and political position in the region by promoting hereditary, racial, and serological research, population genetics and transfers, and natalist policies.

The institute consisted of ten departments, each with its own director, dealing with a particular areas of research: new perspectives on national life (Lajos Antal); statistics (Alajos Kovács); biology and Hungarian history (Miklós Asztalos); national education (Géza Féja); population growth (János Hidvégi); the biology of large families (János Néveri); heredity, racial biology, and eugenics (János Gáspár); national nutrition (Harald Tangl); science of labor (György Gortvay); and national psychology and public opinion research (Ferenc Rajniss). By associating figures of high scientific status like Kovács and Gortvay with those who were politically active like Antal and Rajniss,¹⁰² the institute was able to maintain its privileged links with the government and other state-sponsored institutes, universities, and research centers.¹⁰³ A significant number of Hungarian politicians were now willing to assert — as eugenicists had already begun to do with measures of social selection, preventive medicine, and marriage counseling — control over the body of the nation.¹⁰⁴ Like other similar institutions at the time, including the Kaiser Wilhelm Institute of Anthropology, Human Heredity, and Eugenics (established in 1927) and the French Foundation for the Study of Human Problems (founded in 1941), the Hungarian Institute of National Biology offered a holistic vision of society based on a correlation between social and racial science.¹⁰⁵

The anthropologist János Gáspár, director of the Department of Heredity, Racial Biology, and Eugenics, expressed this vision clearly. While the institute as a whole dealt with understanding the nation’s external conditions — be they social, economic, national, or

cultural — his department, Gáspár remarked, concentrated on “*internal* biological factors.” The strategic purpose of this activity was to understand “which national elements were harmful, and thus subject to elimination, and which useful to Hungarians.” Eugenics focused simultaneously on the individual’s genetic worth and the racial quality of the collective body. To ignore the complex interplay of hereditary factors shaping the national body was to misconceive its complicated biological existence and endanger not only its physical but also its intellectual future. “Ultimately,” Gáspár insisted, “a deeper understanding of heredity and racial biology was meant to enhance eugenically the national spirit.”¹⁰⁶ Far from being concerned with just the biological transformation of society, eugenics mediated the emergence of a new national ontology and a corresponding epistemology of national belonging, one that expressed and reinforced the normative qualities of the Hungarian race.

Complementing these efforts aimed at qualitative and quantitative racial improvement were specific attempts to unify what the psychiatrist László Benedek termed in his 1941 lecture to the Institute of National Biology as “empirical hereditary prognoses.” His suggestion was to create a Central Institute of Hereditary Biology and Population Policy (Központi Öröklésbiológiai és Népesedéspolitikai Intézet).¹⁰⁷ It was yet another example of how the growth of research on heredity endorsed the eugenicists’ ambition to control welfare institutions in Hungary, in a period when the evaluation of the population according to racial categories became central to public health programs.

The eugenic concern with the health of the nation took several forms. In 1941, for example, the physician Gábor Doros, president of the Eugenics Section of the Hungarian Union for Family Protection, outlined the practical tasks of eugenics in Hungary in a lecture to the Hungarian Society for Hygiene (Magyar Hygiénikus Társaság) in Kassa (Košice). After briefly discussing positive eugenics, Doros turned to a detailed discussion of negative eugenics. He identified seven negative eugenic practices: euthanasia, contraception, abortion, segregation, castration, sterilization, and finally “marriage selection.”¹⁰⁸ The aim of marriage selection was to control and prevent the spread of “hereditary and infectious diseases,” which Doros ordered into the following six groups: a) hereditary mental disorders; b) hereditary internal diseases; c) hereditary blindness; d) hereditary physical degeneration; e) venereal diseases and f) tuberculosis.¹⁰⁹ By extending this eugenic inventory to include congenital maladies, Doros suggested in fact a synthesis between hereditarianism and environmentalism.

To many Hungarian eugenicists the two perspectives on social and biological improvement were not fundamentally separated, for they considered biological knowledge an arena in which they could achieve political authority and social legitimacy. Too strong an emphasis on heredity and racial determinism would have alarmed politicians unfamiliar with eugenics, while a sensitive approach to improving the nation’s environment would help gain the government’s trust, all predicated upon the eugenicists’ knowledge and expertise as well as their ability to undertake such a vast program of social and biological engineering.¹¹⁰ It was in Pál Teleki’s second premiership that eugenicists placed their hopes of a nationwide mobilization of welfare ideals.

Teleki’s Eugenic Worldview and Act XV of 1941

By the early 1940s, Hungarian eugenicists advocated a national welfare program that they believed was not only necessary but also realistic. Pál Teleki was the providential prime minister who ensured that this program became reality. Hungarian scholarship has offered valuable interpretations of Teleki’s scientific and nationalist thinking, but his preoccupation with eugenics has been discussed superficially, if at all.¹¹¹ Teleki’s racial ideas, on the other hand, are highlighted regularly, particularly when discussing his contribution to the anti-

Jewish legislation. Undoubtedly Teleki believed in the existence of biological races, but his ideas on social and eugenic improvement seriously questioned the epistemological authority of racism.¹¹² In his view, race (*faj*) — often conflated with nation (*nemzet*) and people (*nép*) — was a biological entity, a national organism that could be eugenically enhanced and strengthened in a social Darwinist world of international competition.

The eugenic narratives of social and biological improvement produced in the 1940s were linked intellectually with earlier narratives, and no one offers a better example of such continuity than Pál Teleki. An avid reader of scientific literature on evolution and biology, Teleki was directly involved in the eugenic movement before 1918. In fact, he is the only known president of a eugenics society ever to have become prime minister.¹¹³ He was president of both the first eugenic committee (Egyesületközi Fajegészségügyi Bizottság), formed in 1914, and its successor, the Society for Eugenics and Population Policy (Magyar Fajegészségügyi és Népesedéspolitikai Társaság), established in 1917.¹¹⁴ This period is the beginning of Teleki's long-standing interest in eugenic concepts of social and biological improvement. He never abandoned that interest, as illustrated by his devotion to the Boy Scout Association (Magyar Cserkész Szövetség)¹¹⁵ and the Hungarian Youth (Fiatal Magyarország) movement.¹¹⁶ For him, physical culture was not only a way to organize the nation's youth but also, and perhaps more important, a source of eugenic strength.

The training of youths was part of Teleki's vision of a Greater Hungary based on a eugenically regenerated nation.¹¹⁷ During the 1920s and 1930s, he worked incessantly toward a new Hungarian nationalism grounded in social and biological welfare.¹¹⁸ Some of the most prestigious institutes and scientific associations established in the interwar period in Hungary, including the Sociographic Institute (Magyar Szociográfiai Intézet) and the Political Science Institute (Államtudományi Intézet), devoted considerable funds and time to social work and national surveys under Teleki's direct supervision.¹¹⁹ Omnipresent in Hungarian academic life, Teleki was as active in the Revisionist League (Magyar Revíziós Liga) as in the Geographical Society (Magyar Földrajzi Társaság). Less well known, however, is that he was also a member of the governing body of the International Centre of Fascist Studies, an institution created in 1927 for the purpose of "objectively researching fascism and disseminating the acquired information to anyone interested in the topic."¹²⁰ Equally important, in 1933, Teleki — together with the Professor of Dermatology at the University of Budapest, Lajos Nékám — also tried to revive the defunct Society for Eugenics and Population Policy.¹²¹

Reworking a broad set of eugenic discourses on the quality and quantity of the population, Teleki ultimately integrated the concepts of national community (quantitative population policy), race (quality), and gender (men: productive; women: reproductive) into his eugenic worldview. As he declared on April 15, 1939, when presenting his view on the "second Jewish law" (whose preamble he wrote) to the Upper House, "for the past 20 years" he had been "scientifically and socially" in the position "to write about racial belonging, race relations and racial groups."¹²²

Teleki was a fervent believer in his nation's historical destiny in central and eastern Europe, a destiny attached not only to regaining Hungary's lost territories but also to rebuilding its body politic, purportedly damaged during the revolutions of 1918 and 1919 and by the unprecedented humiliation experienced at Trianon.¹²³ Yet few of his contemporaries were as methodical and unswerving in their political and social philosophies. In most of his public lectures and publications, Teleki promoted a scientific pedagogy grounded in a number of academic disciplines, most prominently geography, anthropology, and biology. Repeatedly weaving progressive thoughts on national education with eugenic theories, Teleki was explicit about the practical measures that the government ought to take to improve the racial

quality of the nation. Crucially, any project of practical eugenics was linked to political processes and state policies. Seen from this perspective, we can better appreciate Teleki's eugenic worldview and how it influenced his involvement in drafting Act IV of 1939 and Act XV of 1941 (the second and third "Jewish laws," respectively).

Act XV of 1941 combined two separate sources, one narrowly ideological and programmatic (antisemitism),¹²⁴ the other broadly medical, social, and eugenic.¹²⁵ Both sources, however, merged to form a new narrative of national belonging.¹²⁶ The debates in the Lower and Upper Houses of Parliament prove unmistakably that the members of parliament regarded Act XV as Hungary's proper eugenic law.¹²⁷ In his speech to the Lower House on July 1, 1941, the statistician and demographer Károly Balás, for example, was unhesitatingly supportive of the law. Summarizing the draft legislation, he began by noting that the proposal "addresses three issues: medical examination before marriage; marriage loans; and a ban on marriages between Jews and non-Jews."¹²⁸ He then divided population policy into qualitative and quantitative, noting that "medical examination before marriage is a long-standing application of qualitative population policy."¹²⁹

As a form of detection and protection against tuberculosis and venereal diseases, medical examinations before marriages would medically and eugenically safeguard the national community, not least in ethnically mixed areas.¹³⁰ Criticisms notwithstanding, there was no doubt, Balás insisted, that the proposed law was crucial to the "biological destiny of the Hungarian nation."¹³¹ When asking "What is the protection of the race?" he did not hesitate to declare, in a reference to the Law for the Protection of German Blood and Honor (the so-called *Blutschutzgesetz*, introduced on September 15, 1935), that one ought "to defend the race biologically and reproductively, and where possible eliminate those who are Mullatoes and bastards."¹³² Further, he added that "the mixing of blood was not a legal but a biological issue."¹³³

In contrast, Zoltán Szabó hoped that, if introduced, the law would augment "eugenic morality" and contribute to "programs of health and national education." He particularly bemoaned the "biological and characterological deterioration" of the Hungarian villages, not least due to the "one-child" practice and endogamy, the latter being understood as a sign of physical and mental degeneracy.¹³⁴ Improving the nation's health was an extremely important eugenic component of the proposed act, and one that would enable the emergence of a new social, economic, and biological order. It was critical in these "historical times," Szabó concluded, that the government counteract the "ethical and biological dilution of the [Hungarian] race and its racial character."¹³⁵

Similar arguments were offered in the Upper House. On July 18, 1941, the Speaker of the House, Count Bertalan Széchényi, for instance, praised MONE for its enduring campaign for the "protection of the Hungarian race and the purity of the Hungarian nation." As in Fascist Italy and Nazi Germany, the time had now come, Széchényi continued, for the Hungarian race to "assert its own racial quality and objectives."¹³⁶ What these objectives added up to was this proposal for a eugenic law aimed at "quantity and quality [racial] improvement, from the point of view of family and health protectionism. Compulsory medical examination before marriage was the most important element of this proposal."¹³⁷ Protection against tuberculosis and venereal diseases (Act VI of 1940) was deemed insufficient; in order to assure healthy descendants, Széchényi suggested also considering those suffering from "chronic insanity, ... mental and nervous illnesses and conditions, including epilepsy, Huntington's chorea, hereditary blindness and deafness."¹³⁸

Having voiced his support for eugenics, it is not entirely surprising that Széchényi should have addressed the issue of sterilization. He recommended compulsory sterilization for those

suffering from “mental illnesses,” hoping that this method would be introduced in Hungary in the near future.¹³⁹ Furthermore, while praising the effort to strengthen “eugenically the Hungarian nation,” Széchenyi was not satisfied that the proposal did not prohibit “the sexual contact between Jews and non-Jews.”¹⁴⁰ To argue that both parents must be healthy, and members of the same “race,” was no longer mere eugenic or racial rhetoric; these were now the national duties one had as a recognized member of the Hungarian biological community.

Bishop László Ravasz of the Hungarian Reformed Church did not endorse the antisemitic arguments of the proposal, but he too agreed that the “protection of the Hungarian race” was essential. Racial protection was commensurate with family protection, and Ravasz approved of the fact that the “eugenic and population policy” measures described by the proposal would be accompanied by financial and economic support for healthy Hungarian families. “Marriage loans,” Ravasz hoped, “will be paid in rearing children.”¹⁴¹ Equally commendable, in his view, was the aim to “prevent racial miscegenation” which — he argued — could only further protect “the Hungarian race and serve the cause of Christianity in Hungary.”¹⁴² The stronger the country was numerically and biologically, Ravasz believed, the greater the moral betterment of its population. Christianity was invoked here to restore Hungary’s racial strength.

These same individuals missed no opportunity to emphasize the proposal’s integrative nature, as medicoeugenic, socioeconomic, and racial arguments were crafted together. In its final version, Act XV of 1941 was divided into six sections and sixteen articles: the first section outlined the medical examinations before marriage; the second specified the marriage loans; the third charted the divorce arrangements; the fourth prohibited marriages between Jews and non-Jews; the fifth listed penalties; and the sixth enumerated final provisions. Different traditions of eugenic welfare, social engineering, and racial antisemitism informed this law: first, campaigns for human and agricultural reclamation (*bonifica umana* and *bonifica agricola*) similar to those enacted by Fascist Italy, and, second, Nazi racial ideas of biological renewal.¹⁴³ Together with Hungarian traditions of eugenic protectionism, biopolitics, and population policies, these external models contributed to the creation of a comprehensive eugenic and racial program, one that was designed to complement two interrelated national projects discussed here: territorial expansion and social engineering.

As elsewhere in Europe at the time, protecting the nation’s hereditary health became central to Hungarian national politics. Act XV of 1941 restricted marriage to healthy partners. Those suffering from tuberculosis, venereal diseases, and various genetic diseases were refused permission to marry. ONCSA was similarly included. According to the fifth article: “The Fund for the Protection of the Nation and Families can provide loans for the couple to be married only if they prove by a certificate from the municipal health officer that their marriage is not objectionable from the point of view of their own and their future children’s health.”¹⁴⁴ Medical examinations, discouraging people with hereditary diseases from getting married and having children, were accompanied by positive eugenic measures like marriage loans, intended to promote demographic growth, public health, national education, and social welfare. Within the newly formed Greater Hungary, the political goal of the act was to increase economic productivity and social integration, ultimately sustaining local and regional programs of eugenic betterment.¹⁴⁵ A new society was thus emerging, one that wanted to preserve the idealized values and heritage of the Hungarian race while simultaneously offering the eugenic promise of scientific management of the population.

Act XV of 1941 must, therefore, be understood not only within the context of growing antisemitism in Hungary but also within that of an all-encompassing national vision of eugenic renewal proposed by Hungarian politicians like Teleki. This was both a biological

and a political project. It should be acknowledged, as argued here, that Hungarian biopolitics, as it emerged during the 1940s, envisioned a dual function for the newly enlarged state: on the one hand, to unify existing social engineering programs within a eugenic ethos about biological strength, and on the other, to remove the Jews from the body politic. As well as bringing the nation and the state together — indeed, synthesizing them — Act XV also justified eugenics as a philosophy of social and biological regeneration. Increasingly, as in other European countries, eugenicists in Hungary hoping for racial betterment, social protection, and a modern welfare state viewed the Hungarian race less as a cultural and spiritual entity based on common history, language, and tradition and more as a community of blood. Moreover, they racialized the future of the national community, a future they deemed unsuitable not only for those deemed eugenically unworthy but also for those labeled as internal enemies: the Jews.

At the beginning of the 1940s, Hungary was progressively becoming a racial state. As a result, eugenics — together with a biologized form of nationalism and antisemitism — amplified mainstream Hungarian culture and politics in defining certain ethnic, social, and gender groups as “inferior” and ultimately dangerous to the body of the nation. In the name of Greater Hungary, political elites fused hereditarian and cultural determinism with eugenic visions of a “new society” and a “new man.” Reflecting this desire, Teleki and others aimed to rearrange the very nature of the Hungarian society, according to a set of political principles based on the laws of heredity as well as scientific knowledge of the social and biological foundations of the state. Theirs was a vision of a homogeneous national community empowered by racial strength, eugenic pronatalism, and the remarkable personal experience of witnessing the reunification with territories lost after World War I.

Conclusion

Debates over the historical destiny of the Hungarian nation during the early 1940s came to rely not only on arguments about language and culture¹⁴⁶ but increasingly on assumptions about race, racial types, and specific racial characteristics.¹⁴⁷ It was within this troubled historical context that biopolitics was assigned a new mission: to provide Hungary’s territorial expansion with corresponding racial and eugenic narratives about a strong and healthy nation. Ultimately, the nationalization of eugenics and its corollary, the biologization of national belonging, produced a new type of ideologue: the health expert who wished not only to control the life of the individual but also to shape the physical body of the nation.¹⁴⁸

The sources from which Hungarian political culture drew its sustenance in the crucial years of 1940 and 1941 need to be studied more rigorously. By unveiling the eugenic dimension of these three laws — Acts VI and XXIII of 1940 and Act XV of 1941, respectively — we can finally see how the forces that contributed to the vision of Greater Hungary that was elaborated during this period were more intricately rooted within a native biopolitical culture than is currently recognized by current scholarship on twentieth-century Hungary.

These acts constitute Hungary’s first major national welfare program, one that brought with it great promise: acting on eugenic ideas of social and biological improvement would lead to the total reorganization of society. Eugenic measures, such as premarital certification and compulsory health screening, shaped the national environment in which ideas of social and biological improvement could generate a new vision of Greater Hungary. Defining the nation in eugenic terms was therefore not just a form of racism; it was the expression of a larger attempt to create a healthy Hungarian society.

During the Second World War, Hungary fought to preserve its newly acquired territories. But Hungarian political elites also had to forge social, economic, cultural, and biological strategies while confronting the twin threats of world war and domestic political radicalization. Despite shifts in political life and the profound transformation of international politics between 1939 and 1941, there was a consensus among most political groups that Hungary's social and eugenic engineering could define a new and more effective loyalty to the state and nation.

Politicians and eugenicists, as well as research institutes and medical and political associations, devoted their public life and activities to Hungary's social and biological improvement by exerting influence through broad-based professional, academic, religious, and public health networks. New agendas of individual and collective regeneration were articulated as a means of conveying national unity and political aspirations. The deployment of eugenic discourses and practices was shaped both directly by the political and social objectives of Hungarian nationalism and indirectly by a selective imitation of Nazi and fascist models of eugenic renewal. As the war progressed, Hungary — like other European countries — would gradually collapse into its own national phantasms, committed not to national harmony but to illusions of racial purification that ultimately facilitated the political elite's complicity in the Holocaust.¹⁴⁹

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11. See: Kádár, Gábor; Vági, Zoltán. Self-Financing Genocide: The Gold Train, the Becher Case, and the Wealth of Hungarian Jews. Budapest: 2004.
12. For example, Josefovits, László. "Fajgyalázás". Az 1941: 15.t.-c.15.-ának büntet bírósági joggyakorlata. Budapest: 1944.
13. See: Szikra, Dorottya. A szociálpolitika másik arca. Fajvédelem és produktív szociálpolitika az 1940-es évek Magyarországon. Századvég. 2008; 48:39–79. ; idem, Hauss, Gisela; Schulte, Dagmar, editors. Amid Social Contradictions: Towards a History of Social Work in Europe. Opladen & Farmington Hills, MI: 2009. Social Policy and Anti-Semitic Exclusion before and during World War II in Hungary: The Case of the Productive Social Policy; p. 111–30. and Ungváry, Krisztián. A Horthy-rendszer mérlege: Diszkrimináció, szociálpolitika és antiszemitizmus Magyarországon. Budapest: 2012.
14. Macartney, CA. October Fifteenth: A History of Modern Hungary, 1919–1945. 2nd. ed. Edinburgh: 1961. (esp. ch. 13–19)
15. See: Juhász, Gyula. Magyarország külpolitikája, 1919–1945. Budapest: 1969. ; Pritz, Pál. A fajvéd k külpolitikai nézetei (1918–1936). Századok. 1990; 124:617–69. ; and Romsics, Ignác, editor. Trianon és a magyar politikai gondolkodás, 1920–1953: Tanulmányok. Budapest: 1998. More recent discussions in Frank, Tibor. Treaty Revision and Doublespeak: Hungarian Neutrality, 1939–1941. In: Wylie, Neville, editor. European Neutrals and Non-Belligerents during the Second World War. Cambridge: 2002. p. 150–73. and especially Zeidler, Miklós. Ideas on Territorial Revision in Hungary: 1920–1945. Boulder, CO: 2007.
16. For a recent analysis, see: Case, Holly. Between States: The Transylvanian Question and the European Idea during World War II. Stanford, CA: 2009.
17. The issues raised by these political events have spanned a literature far too extensive to be covered here. See, for example, Sajti, Enikő. A Délvidék 1941–1944: A magyar kormányok délszláv politikája. Budapest: 1987.

18. For a more general trend in Central Europe dictated by Nazi Germany, see: Koehl, Robert L. RKFDV: German Resettlement and Population Policy, 1939-1945: A History of the Reich Commission for the Strengthening of Germandom. Cambridge, MA: 1957.
19. Information provided in Rothschild, Joseph. East Central Europe between the Two World Wars. Seattle: 1974. p. 36p. 89p. 192p. 283
20. Ibid. p. 195 Suffice it to compare Hungary's population in 1941 with that of its other neighbors — e.g., 40 million Italians, 90 million Germans, and 200 million Slavs — to understand the demographic battlefield at the time. It would take me far afield to embark here on even a cursory presentation of this line of demographic thought in Hungarian political culture. For an excellent overview, see: Nagy, Ildikó. Jen Rákosi and the Hungarian Empire of 30 Million People. In: Gereben, Ferenc, editor. Hungarian Minorities and Central Europe: Regionalism, National, and Religious Identity. Piliscsaba: 2002. p. 203-19.
21. See, for example, Teleki's 1940 Papp, Antal, editor. Gróf Teleki Pál országgyűlési beszédei. Vol. vol. 2. Budapest: 1938-1941. 1942. A korporatív alkotmányreform terve; p. 443-63.
22. Vincze, Gábor. A bukovinai székelyek és kisebb moldvai csángó-magyar csoportok áttelepedése Magyarországra (1940-1944). Pro Minoritate. 2001; 3:141-87. ; Davis, R. Chris Restocking the Ethnic Homeland: Ideological and Strategic Motives behind Hungary's 'Hazatelepítés' Schemes during WWII (and the Unintended Consequences. Regio: Minorities, Politics, Society. 2007; 1:155-74. and, more recently, Horváth, Franz Sz. Ethnic Policies, Social Compensation, and Economic Reparations: The Holocaust in Northern Transylvania. East Central Europe. 2012; 39:101-36.
23. Magyar Országos Levéltár (hereafter MOL). Sándor Peleskey's letter to Pál Teleki, March 3, 1941. Department K 28, ME, 163. csomó 271 (Bukovinai magyarok támogatási és Magyarországra történő áttelepítésének ügyei) 1941-44 (Bundle 1), 5-6.
24. German religious leaders in Transylvania expressed similar fears. See: Georgescu, Tudor. Ethnic Minorities and the Eugenic Promise: The Transylvanian Saxon Experiment with National Renewal in Inter-War Romania. European Review of History. 2010; 17:861-80.
25. See the special issues devoted to each regained territory by the *Magyar Statisztikai Szemle*. For example vol. 7, no. 3 (1939) was devoted to sub-Carpathian Ruthenia and vol. 8, nos. 8-9 (1940) to northern Transylvania. The extensive coverage included overviews of the public administration, territory and population, movement of population, public health, social welfare, labor market, agriculture, forestry, and industry. Serological research was also commissioned to establish whether Hungarians' racial qualities had been altered by two decades of "foreign rule." See for example: Csík, Lajos; Kállay, Ernő. Vércsoport vizsgálatok kalotaszegi községekben. Kolozsvár: 1942.
26. The agreement between Romania and Hungary was signed on May 11, 1940. As Serb settlers were expelled from the Bácska County, ca. 14,000 Szeklers from Bukovina were moved there. The number eventually rose to ca. 18,000 by 1942. Some Moldavian Csángós and Hungarians from Bessarabia were also "repatriated" in 1941 and 1942. See: Schechtman, Joseph B. European Population Transfers, 1939-1945. New York: 1946. , particularly Hungarian Repatriation Policy; p. 434-39. See also: Oszkó-Oberding, József. A bukovinai székelyek letelepítése a Dunántúlon. Agrártörténeti Szemle. 1967; 1-2:183-94. and Sajti, Enikő. A Székely telepítés és nemzetiségpolitika a Bácskában, 1941. Budapest: 1984.
27. Ortutay, Gyula; Ortutay, Gyula. Hungarian Folklore. Essays. Budapest: 1972. Recent Internal Migrations in Hungary and Ethnographical Research (1947); p. 113 See also his: Napló 1: 1938-1954. Budapest: 2009.
28. Ortutay. Recent Internal Migrations; p. 114 See also: Apor, László. A bácskai székelyek. Egészség. 1942; 56(1):13-16.
29. Elekes, Dezső. Népszaporodás és fajvédelem. Kisebbségvédelem. 1941; 4(3-4):8-22.
30. "Institute of Social Hygiene and Museum," 1926, folder 43, box 5, series 1.1, RG 1.1, Rockefeller Foundation Archive, RAC and "Sanitary Reform Bureau in the Hungarian Ministry of Public Health," 1927, folder 43, box 5, series 1.1, RG 1.1, Rockefeller Foundation Archive, RAC. See also: The Rockefeller Foundation: Annual Report. New York: 1926.
31. "Sanitary Reform Bureau, Hungary, 1929," folder 42, box 5, RG 1.1, Rockefeller Foundation Archive, RAC. For more on the activities sponsored by the Rockefeller Foundation in Hungary,

- see: Palló, Gábor. Make a Peak on the Plain: The Rockefeller Foundation's Szeged Project. In: Schneider, William H., editor. *Rockefeller Philanthropy and Modern Medicine: International Initiatives from World War I to the Cold War*. Bloomington, IN: 2002. p. 87-105.
32. Gortvay, György. A budapesti Nemzetközi Embervédelmi kiállítás. *Népegészségügy*. 1926; 7(13-14):737-44.
 33. *Magyar Tudományos Fajvéd Egyesület* functioned as a scientific committee for MOVE (Hungarian National Defense Association); *Magyar Fajmentés Misszió* was established by the Protestant pastor Sándor Széles.
 34. For MONE, see: Avarffy, Elek. A MONE története, 1918-1938. Budapest: 1938. and Andreas v. Csillery. *Die Wege und Ziele der MONE*. Budapest: 1940. ; for the activities of St Luke Society of Catholic Physicians see: A Magyar Katolikus Orvosok Szent Lukács Egyesületének tudósítója. 1935-1944.
 35. Kunczi, József. *Egy fajhigienikus gondolatai*. Budapest: 1932.
 36. As illustrated by the articles collected by Károly Mártonffy in his *A mai magyar szociálpolitika*. Budapest: 1939.
 37. See, for example, Bikkal, Dénes. *Ungarische sozialpolitik*. Budapest: 1943. p. 87-91.
 38. See: Glass, DV. *Population Policies and Movements in Europe*. London: 1967. (with a new introduction; first published in 1940) [first published in 1940]
 39. Monitoring children's health and child-care centers was regulated in 1891 by the so-called Kindergarten Act (*Kisdedővő törvény*), to which new provisions were added in 1936. Another law strengthening the family's national importance was Act XI of 1936 on primogeniture. For a general discussion of these policies, see: Pik, Katalin. *A szociális munka története Magyarországon, 1817-1990*. Budapest: 2001. and Gergely, Ferenc. *A magyar gyermekvédelem története, 1867-1991*. Budapest: 1997.
 40. Testimony is abundant, particularly in the literature on Christian political activism. See, for example, *Magyar fajvédelem: A keresztyén nemzeti gondolat érvényesülésének programja*. Debrecen: 1923.
 41. Darányi, Gyula. A Családvédelmi Szövetség feladata és a Házassági Tanácsadó Intézetek megszervezése. *Nemzeti családvédelem*. 1939; 2:3-5. 3.
 42. Ibid. p. 4
 43. As argued by the minister of internal affairs and president of the National Stefania Association (*Országos Stefánia Szövetség*), in his Ugron, Gábor. *Az orvos és a szociális egészségügyi prevenció*. Budapest: 1936.
 44. Gortvay, György. *Eugenika és szociálpolitika*. Búvár. 1938; 4(1):3-4.
 45. As discussed in Hidvégi, János. *Hulló magyarság*. Budapest: 1938.
 46. Neuber wrote extensively on these topics. See, for example, his *A b-r- és nemibetegségek eugenikai vonatkozásairól*. Budapest: 1938.
 47. Neuber, Ede, et al., editors. *Az Országos Közegészségi Egyesület Antiveneriás Bizottságának ünnepi kötete, 1925-1935*. Budapest: 1935. Darányi, Gyula. *Fertőző népbetegségek (járványtan)*. Budapest: 1940. de Luca Barruse, Virginie. *Pro-Natalism and Hygienism in France, 1900-1940: The Example of the Fight against Venereal Disease*. *Population*. 2009; 64:477-506.
 48. 1940. évi VI. törvénycikk a gümőkór és a nemibetegségek elleni védekezésről, valamint a közegészségügyi törvények egyes rendelkezéseinek módosításáról. Budapest: 1940.
 49. See: Somogyi, Zsigmond. Az új magyar törvény a népbetegségek leküzdésére. *Egészség*. 1941; 55(2):59-65. Steiger-Kazal, Dezső. A magyar Lex Veneris (nemibeteg-törvény). *Egészség*. 1942; 56(9-10):299-301.
 50. *Az Országgyűlési Képviselőházának Naplója*. Vol. vol. 4. Budapest: 1940. p. 91
 51. From a wide range of studies devoted to social and medical conditions in Hungarian villages, see especially: Kerbolt, László. *A beteg falu: A magyar falu szociális és közegészségügyi rajza*. Pécs: 1934. See also: Bíró, Judit, editor. *Hivatalos falukutatók: A vidéki Magyarország leírása 1930 és 1940 között*. Budapest: 2006.
 52. For the work of the Green Cross movement, for example, see: Gayer, Gyuláné. A Zöldkereszt a 'produktív' szociálpolitikai koncepció része. In: Török, Tivadarné, editor. *Család és alkohol*. Budapest: 1991. p. 11-38.

53. See: Johan, Béla. *Gyógyul a magyar falu*. Budapest: 1939.
54. *Az Országgyűlés Képviselőházának Naplója*. vol. 4:95.
55. The Party of Hungarian Life obtained a parliamentary majority in the May 1939 elections. The Arrow Cross Party also did well. The growth in popularity of the various Hungarian right-wing parties became clear when in 1940 Ferenc Szálasi's Arrow Cross Party emerged as the strongest opposition party and Béla Imrédy formed the Party of Hungarian Regeneration. The names of these political parties in themselves embody a new vision of Hungarian politics, one that was simultaneously demographically and territorially expanding and biologically regenerative.
56. *Az Országgyűlés Képviselőházának Naplója*. vol. 4:99.
57. *Ibid.* p. 126
58. For a full description of the statutes, see: *Az 1940. évi VI. törvénycikk. Anya- és csecsemő védelem*. 1940; 13:205–25.
59. As argued by Somogyi, Zsigmond. *A nemibetegségek elleni küzdelem és az anya- és csecsemő védelem kapcsolatai Magyarországon*. Kalocsa: 1939. and Szénási, József. *Fajvédelmi törekvések az anya- és gyermekvédelemben*. Anya- és csecsemő védelem. 1939; 12:565–78.
60. See: Petres, Antal. *A güm kór és nemibetegségek elleni védekezés mai helyzete és az új törvényjavaslat*. Budapest: 1940. and Szép, Jenő. *Bőr- és nemibetegségek*. Budapest: 1941.
61. To celebrate the introduction of Act VI, the National Association for Health Protection (*Országos Egészségvédelmi Szövetség*), for example, organized a “National Tuberculosis Week” between February 16 and 23, 1941. See: Baitz, Géza. *Az Országos Tuberkulózis Hét*. *Egészség*. 1941; 55(2):66–68.
62. Still unsurpassed, albeit slightly outdated, is Tilkovszky, Loránt. *Revízió és nemzetiségpolitika Magyarországon, 1938-1941*. Budapest: 1967.
63. See, e.g., Boróczy, Kálmán. *A magyar házassági törvény kiegészítése fajnemesítő és fajvéd rendelkezésekkel*. *A Cél*. 1938; 28:247–50. and Szabó, Zoltán. *Fajegészség és fajvédelem*. *Egyedül Vagyunk*. 1939; 2:1–7.
64. See [B.Z.]: *Országos Nép- és Családvédelmi Alap*. *A Cél*. 1940; 30:12–14. and Somogyi, Ferenc. *Intézményes nép- és családvédelem*. *Nép- és Családvédelem*. 1941; 1:2–10. For historiographic treatments see: Berey, Katalin. *Szociálpolitikai kísérlet Magyarországon a 40-es évek elején (Az Országos Nép- és Családvédelmi Alap munkássága)*. Budapest: 1981. and Hámori, Péter. *ONCSA (Az Országos Nép- és Családvédelmi Alap)*. *Országépítő*. 2004; 15:5–11.
65. See MOL, Archives of the Ministry of Interior (Belügyminisztériumi Levéltár), 1867-1945. Fonds K 150 (1940).
66. *Országgyűlés Képviselőházának Naplója*. Vol. vol. 6. Budapest: 1940. p. 369-70. The same support for the fascist institutions for assistance and protection of motherhood and infancy was expressed in the Upper House of Parliament when the proposal was discussed on July 13, 1940. The future prime minister Miklós Kállay (1942-44) was one such supporter. See: *Az Országgyűlés Felsőházának Naplója*. Vol. vol. 1. Budapest: 1940. p. 396
67. Quine. *Italy's Social Revolution*. p. 130 See also: Ipsen, Carl. *Dictating Demography: The Problem of Population in Fascist Italy*. Cambridge: 1996. and Cassata, Francesco. *Building the New Man: Eugenics, Racial Science, and Genetics in Twentieth Century Italy*. Budapest: 2011. For the influence of Italian fascism in Eastern Europe, see: Borejsza, Jerzy W. *East European Perceptions of Italian Fascism*. In: Larsen, Stein Ugelvik, et al., editors. *Who were the Fascists: Social Roots of European Fascism*. Bergen: 1980. p. 354-66.
68. Bonczos, Nikolaus. *Produktive Volksfürsorge in Ungarn*. *Donaueuropa*. 1941; 1(2):68–79.
69. In 1940 the peasantry amounted to about 60 percent of the total population. For one of the most captivating discussions of peasant life and customs in interwar Hungary, see: Erdei, Ferenc. *Magyar falu*. Budapest: 1940.
70. In this respect, ONCSA built on previous legislation aimed at improving the working and living conditions of the peasantry, such as Act XII of 1938, which introduced compulsory insurance for agricultural laborers, and Act XVI of 1939, which extended welfare benefits to the widows of agricultural laborers. Similar legislation was introduced to protect and improve the health conditions of those working in the industry (particularly miners).

71. For the Italian case, see: Glass DV. Italian Attempts to Encourage Population Growth. *The Review of Economic Studies*. 1936; 3(2):106–19.
72. The one-child practice had become popular among the Hungarian Calvinist peasants as early as the nineteenth century. The region of Transdanubia was particularly affected. Not surprisingly, the subject has generated an enormous literature. See, e.g., Buday, Dezső. *Az egyke*. Budapest: 1909. ; Kádár, Mihály. *Az egyke és a népegészségügy*. Árpád ny; Kalocsa: 1934. ; Simontsits, Elemér. *Az egyke demológiája*. Budapest: 1936. ; Veres, Péter. *Kollektív világnézet és faji felelősség a szaporodás kérdésében*. Kecskemét: 1939. ; and Szabó, Dezső. *Az egyke*. Budapest: 1942.
73. In 1941, for example, almost 5,000 homes were built. See: Rácz, György. *Ötezer ONCSA-ház*. Budapest: 1941.
74. In both medical and social scientific discourse, the countryside was objectified as the existential locus of the nation. In this respect, eugenicists agreed with other categories of intellectuals in interwar Hungary debating the racial value of the peasantry, such as the populists and the sociographers. For a discussion of the latter groups, see: Borbándi, Gyula. *A magyar népi mozgalom: A harmadik reformnemzedék*. New York: 1983. and Némédi, Dénes. *A népi szociográfia, 1930-1938*. Budapest: 1985.
75. See: Bikkal. *Ungarische sozialpolitik*. p. 87-88. and Berey. *Szociálpolitikai kísérlet Magyarországon*. p. 13 ONCSA's yearly budget was 60 million peng (approx. 12 million dollars in 1941).
76. Bikkal. *Ungarische sozialpolitik*. p. 88
77. Somogyi, Ferenc. *A nép- és családvédelmi munka, mint különleges magyar hivatás*. Kassa: 1941.
78. See: Faluhelyi, Franz. *Ungarische Institute für Volkstumsforschung. Donaueuropa*. 1941; 1(1):40–48.
79. See: Esztergár, Lajos. *Gyakorlati szociálpolitika*. Pécs: 1933. and idem, *A szociálpolitika tételes jogi alapjai*. Pécs: 1936. Other social experiments oriented toward housing, eradication of poverty, medical welfare, and the protection of the family included the “Egri Norma” and “Komáromi Norma,” from the names of the cities (Eger and Komárom) where these policies were successfully applied. See: Csepely, György; Oslay, Oswald. *Szegénygondozás. Az Egri Norma*. Budapest: 1931. and Faragó, Ede, editor. *Szociális Magyarország*. Budapest: 1943. See, also, Csizmadia, Andor. *The Development of Social Politics in Hungary during the Interwar Era*. In: Várdy, Steven B.; Várdy, Ágnes H., editors. *Triumph in Adversity: Studies in Hungarian Civilization in Honor of Professor Ferenc Somogyi on the Occasion of his Eightieth Birthday*. Boulder, CO: 1988. p. 411-34. and Csöppös, István. *Komáromi Norma - egy szociálpolitikai kísérlet*. Századok. 1992; 126:259–83.
80. Quoted in: Szikra. *Social Policy and Anti-Semitic Exclusion*; p. 119
81. Examples include Ambrus, Tibor. *Az egyke erkölcsi betegség*. Budapest: 1935. ; Radványi, Sándor. *Az egyke és a népszaporodás csökkenésének egyéb okai*. Budapest: 1936. ; and Kovács, Ferenc. *Az egyke kérdésér*. I. Budapest: 1937.
82. For a penetrating analysis of reproductive practices, particularly in the Ormánság region, see Vásáry, Ildikó. ‘The Sin of Transdanubia’: The One-Child System in Rural Hungary. *Continuity and Change*. 1989; 4:429–68. A good overview is also provided in Bodó, Béla. *Progress or National Suicide: The Single-Child Family in Hungarian Political Thought, 1840-1945*. *Hungarian Studies Review*. 2001; 28(1-2):185–208. [PubMed: 18166000]
83. In the 1930s the annual population growth was 0.7 percent compared to 0.9 percent in the 1920s. This decline fueled fears of a demographic crisis, alongside the lower fertility rate and widespread practices of birth control. See Hoóz, István. *Népesedéspolitika és népességfejlődés Magyarországon a két világháború között*. Budapest: 1970. and Gyáni, Gábor. *Magyarország népesedése a Horthykorban*. In: Nagy, Mariann, editor. *Híd a századok felett: Tanulmányok Katus László 70. születésnapjára*. Pécs: 1997. p. 385-95.
84. ONCSA's income derived from the following sources: 1) 27 percent of all national duties (in 1940, for example, this amounted to over 28 million peng); 2) a specific surtax for family protection resulting from relief aid; 3) donations and bequests to the foundation. See: Somogyi, Sarolta B. *Social Work in Hungary between 1940 and 1945*. In: Várdy, Várdy, editors. *Triumph in Adversity*. p. 445

85. Details to be found in the MOL, Archives of the Ministry of Interior (Belügyminisztériumi Levéltár), 1867-1945. Fonds K 564-66 (1940).
86. This centralization of public health brought together the most important institutions devoted to urban and rural health care and to the protection of mothers and infants and nursing care in Hungary, including the National Stefánia Association (*Országos Stefánia Szövetség*), created in 1915, and the Green Cross Health Services, established in 1927. See: Keller, Lajos. A magyar anya- és csecsemő védelem. Budapest: 1927. and Johan, Béla. Die leitgedanken des ungarischen Volksgesundheitsdienst. Donaueuropa. 1941; 1(5):308–17. For a recent discussion, see: Ingebrigtsen, Erik. 'National Models' and Reforms of Public Health in Interwar Hungary. In: Péteri, György, editor. *Imagining the West in Eastern Europe and the Soviet Union*. Pittsburgh: 2010. p. 36-58.
87. See Turda, Marius. *Entangled Traditions of Race: Physical Anthropology in Hungary and Romania, 1900-1940*. Focaal. 2010; 58:32–46.
88. From an extensive bibliography, see: Pine, Lisa. *Nazi Family Policy, 1933-1945*. Oxford: 1997. ; Quine, Maria Sophia. *Population Politics in Twentieth-Century Europe*. London: 1996. ; Mouton, Michelle. *From Nurturing the Nation to Purifying the Volk: Weimar and Nazi Family Policy, 1918-1945*. New York: 2007. ; and Cassata, Francesco. *Building a New Man*.
89. One such example is the Habsburg prince Ferenc József (1895-1957), the patron of the Hungarian Association for Family Protection (*Magyar Családvédelmi Szövetség*), himself a prolific author of books on racial protectionism. See, for example, József, Ferenc. *Fajvédelmi gondolatok: A társadalmi válságok okai és gyógyítása*. Budapest: 1942.
90. Both Gyula Gömbös, prime minister between 1932 and 1936, and Béla Imrédy, prime minister between 1938 and 1939, were keen to link social and biological improvement to Hungary's political future. See: *The National Program of the Hungarian Gömbös Government*. Budapest: 1932. and Imrédy, Béla. *Nemzeti eszme, népi egység, szociális gondolat*. Budapest: 1938. For a very good analysis of Gömbös' and Imrédy's political ideas, see: Vonyó, József. *Gömbös kormánypártjának ideológiája és programja*. Századok. 2011; 145:3–38. and Sipos, Péter. *Imrédy Béla: politikai életrajz*. Budapest: 2001.
91. There are various English translations of the *Egészségpolitikai Társaság*. It is clear, however, that the members of the society and its president, Lajos Antal, in particular viewed their movement as biopolitical. See: Nagy, Kálmán. *Az Egészségpolitikai Társaság első esztendeje* (1935. április 4-1936. április 4: a magyar biopolitikai mozgalom első éve). Budapest: 1936. See also: Szállási, Árpád. Antal Lajos (1902-1973), a demográfus és orvostörténész. *Orvosi Hetilap*. 2011; 152:2027–29. [PubMed: 22112377]
92. EPOL (Gesellschaft für Biopolitik): *Ziel und Organisation ihrer Institutionen*. Budapest: 1940.
93. See, e.g., the public debate on "the biological and social problems of large Hungarian families" organized by EPOL on January 26 and 27, 1939. Speakers included Alajos Kovács ("The Large Family in the Nation's Life"); György Farkas and Lajos Harsányi ("The Future of Large Families in Germany, France and Italy") and Lajos Antal ("Biological Protection")
94. Antal, Lajos. *A hygiénizmus mint új életszemlélet*. Kecskemét: 1934.
95. Antal, Lajos. *A biológizmus mint új életszemlélet: A magyar biopolitika*. Budapest: 1940. p. 8
96. *A Magyar Nemzetbiológiai Intézet megalapítása: Az Intézet programja*. Budapest: 1940. See also: Szénási, József. *A Magyar Nemzetbiológiai Intézet*. Budapest: 1940. and Antal, Lajos. *A Magyar Nemzetbiológiai Intézet megalapítása: az életszemléleti osztály programja*. Budapest: 1940.
97. The antisemitic biologist Lajos Méhely had already outlined such an institute in 1927 in his *Állítsunk fel magyar fajbiológiai intézetet*. Budapest: 1927. See also: Turda, Marius. 'If Our Race Did Not Exist, It Would Have to Be Created': Racial Sciences in Hungary, 1940-1944. In: Weiss-Wendt, Anton; Yeomans, Rory, editors. *Racial Sciences in Hitler's Europe, 1939-1945*. Lincoln, NE: 2013. p. 237-58.
98. *A Magyar Nemzetbiológiai Intézet megalapítása*. p. 8-9.
99. Korponay, András. *Hús millió magyart*. Budapest: 1941. p. 38
100. *A Magyar Nemzetbiológiai Intézet megalapítása*. p. 9-10.

101. Ibid. p. 20 This is the number of inhabitants Hungary had in 1910. See also A húszmillió magyarért: A Magyar Nemzetbiológiai Intézet programja. Budapest: 1940.
102. Ferenc Rajniss (1893-1946), editor of *Esti Újság* and the Minister of Religion and Education in the Arrow Cross government (1944-45), was clearly the most politically involved of the institute's directors. In the 1930s, however, Rajniss was actively engaged with social welfare. In this capacity, he was invited to give one of the public addresses to the Third International Conference on Social Work held in London in 1936. This was also a good opportunity for the Hungarian participants to present their innovative welfare "norms" to an international audience. See Conference Report: Third International Conference on Social Work; London. 1938;
103. More radical racial antisemites, like the group associated with the journal *A Cél* (The Target), criticized the institute for its inconsistent usage of "Hungarian racism." According to the latter, what was needed next was the creation of a proper Hungarian Institute for Racial Biology (*Magyar Fajbiológiai Intézet*). See [B.Z.]: Nemzetbiológiai Intézet. *A Cél*. 1940; 30:15–16.
104. See the wide range of views expressed in: Mártonffy, Károly, editor. *A mai magyar egészségügyi közszolgálat*. Budapest: 1942.
105. See: Schmuhl, Hans-Walter. *The Kaiser Wilhelm Institute for Anthropology, Human Heredity, and Eugenics, 1927-1945: Crossing Boundaries*. Dordrecht: 2008. and Drouard, Alain. *Les trois ages de la Fondation française pour l'étude des problèmes humains*. Population. 1983; 38(6): 1017–47. The French Foundation, for example, consisted of six departments dealing with the biology of population, the biology of infancy and adolescence, biotypology, labor, economic productivity and rural economy, and biosociology.
106. Gáspár, János. *A Magyar Nemzetbiológiai Intézet Öröklési, Fajbiológiai és Eugenikai Osztályának programja*. Budapest: 1940. p. 1-3. [italics in the original].
107. Benedek, László. *Állásfoglalás a házassági törvény kiegészítéséről és módosításáról szóló törvényjavaslat tárgyában*. Budapest: 1941.
108. Doros, Gábor. *Az eugenika gyakorlati feladatai*. Budapest: 1942. p. 2-3.
109. Ibid. p. 3
110. The case of Béla Johan is illustrative in this respect. Johan was State Secretary in the Ministry of the Interior and one of the coauthors of Act XV of 1941. Another example is the former secretary of the Hungarian Society for Eugenics and Population Policy, Dezső Laky, who became Minister of Public Services (without portfolio) in Teleki's government.
111. Balázs Ablonczy, for example, considers that "apparently [Teleki] did not pursue his pre-war ideas about the doctrine of racial hygiene." In Ablonczy, Balázs. *Pál Teleki (1874-1941): The Life of a Controversial Hungarian Politician*. Boulder, CO: 2006. p. 92 See also his: *Az eugenika vonzásában: A társadalom biológiai tervezése*. Rubicon. 2004; 15(no. 2):15–18.
112. Frank, for example, unhesitatingly describes Teleki as "a dedicated champion of racism." In Frank. *Treaty Revision and Doublespeak: Hungarian Neutrality, 1939-1941*; p. 157
113. To be sure, Teleki was not the only eugenicist in central Europe to achieve political prominence. The Viennese economist and eugenicist Michael Hainisch became Austria's first president in 1920. See: Weindling, Paul. *A City Regenerated: Eugenics, Race, and Welfare in Interwar Vienna*. In: Holmes, Deborah; Silverman, Lisa, editors. *Interwar Vienna: Culture between Tradition and Modernity*. Rochester, NY: 2009. p. 81-113. ; McEwen, Britta I. *Welfare and Eugenics: Julius Tandler's Rassenhygienische Vision for Interwar Vienna*. *Austrian History Yearbook*. 2010; 41:170–90.
114. See Turda, Marius. *Protecting the Nation: Eugenic Ideals in Early Twentieth-Century Hungary*. 2014. (forthcoming)
115. See: Gergely, Ferenc. *A magyar cserkészlet története*. Budapest: 1989.
116. See the articles published in the journal *Fiatal Magyarság* in the 1930s.
117. See: Ablonczy, Balázs. *Bethlen István és Teleki Pál konzervatívizmusa*. In: Romsics, editor. *A magyar jobboldali hagyomány*. p. 167-85.
118. A good example is Teleki's article *Nemzeti szellem, nemzeti kultúra*. *Budapesti Szemle*. 1928; 209:118–31.
119. See: Ablonczy, Pál Teleki. p. 204-6.

120. A Survey of Fascism: The Yearbook of the International Centre of Fascist Studies. Vol. vol. 1. London: 1928. p. 5-7.
121. As reported by two Jewish newspapers, *Hétf i Napló* and *Az Est*. See: Fajkutató és fajegészségi társaság alakul: Gróf Teleki Pál lesz az elnöke, Nékám Lajos az igazgatója. *Hétf i Napló*. Sep 11.1933 34(37):3. and A fajnemesítés és sterilizáció magyar tudós társaságáról beszél gróf Teleki Pál és Nékám professzor. *Az Est*. Sep 13.1933 24(207):11.
122. Papp, Antal, editor. Gróf Teleki Pál országgy lési beszédei. Vol. vol 2 (1938-1941). Budapest: 1942. p. 122
123. See Dreisziger NF. Count Istvan Bethlen's Secret Plan for the Restoration of the Empire of Transylvania. *East European Quarterly*. 1974; 8:413-23. and Várdy, Steven Béla. The Impact of Trianon upon the Hungarian Mind: Irredentism and Hungary's Path to War. In: Dreisziger, Nándor, editor. *Hungary in the Age of Total War (1938-1948)*. Boulder, CO: 1998. p. 27-48.
124. There were some who demanded that more radical eugenic measures be included in Act XV. On November 5, 1940, for example, László Endre (1895-1946), the deputy governor of the county of Pest and one of Adolf Eichmann's main collaborators in 1944, requested in a memorandum to the prime minister, Pál Teleki, that Jews who committed public offences be sterilized. The Prime Minister's office sent the memorandum to the Ministry of Justice, adding the comment that Endre's proposal should be included in the statutes of Act XV. The memorandum is reproduced in Karsai, Elek, editor. *Fegyvertelen álltak az aknamez kön...": Dokumentumok a munkaszolgálat történetéhez Magyarországon*. Vol. vol. 2. Budapest: 1962. p. 237-39.
125. Szikra too acknowledges that "this Act was clearly eugenic and broadened further the racist definition of Jews." In: Szikra. *Social Policy and Anti-Semitic Exclusion*. 117(n. 9)
126. See, e.g., *Az EPOL ankétja a fajvédelmi törvényjavaslatról*. Budapest: 1941.
127. Speakers included Baron Albert Radvánszky, vice-president of the Upper House; Jusztinián Serédi, Cardinal Archbishop of Esztergom and Primate of Hungary; Bishop László Ravasz of the Hungarian Reformed Church; Ferenc Orsós, the representative of the Medical Association in Parliament; and László Radocsay, the Minister of Justice. See: *Az Országgy lés Fels házának Naplója*. Vol. vol. 2. Budapest: 1942. p. 271-304. Here I am offering only samples of these debates, and only samples reflecting on the topic discussed in this essay. There were of course many members of parliament who did not endorse the law, but their arguments were against its antisemitic statutes, not its eugenic content.
128. *Az Országgy lés Képvisel házának Naplója*. Vol. vol. 10. Budapest: 1941. p. 364
129. Ibid.
130. Romanian-inhabited areas were targeted, as "Romanians were infected with syphilis. Also Székely maids, who served many years in Bucharest, return home infected." Ibid. p. 365
131. Ibid. p. 367
132. Ibid. The *Blutschutzgesetz* refers to "Negroes, Gypsies and bastards." See: Gütt, Arthur; Linden, Herbert; Massfeller, Franz. *Blutchutz- und Ehegesundheitsgesetz*. Munich: 1937. p. 1
133. *Az Országgy lés Képvisel házának Naplója*. vol. 10:368.
134. Ibid. p. 393
135. Ibid. p. 395
136. *Az Országgy lés Fels házának Naplója*. vol. 2:279.
137. Ibid. p. 280
138. Ibid. p. 281
139. Ibid.
140. Ibid. p. 282 Like so many at the time, Széchenyi may have been influenced by the *Blutschutzgesetz*, which not only prohibited marriages between the healthy and the hereditarily ill but also outlawed marriages between Jews and non-Jews and forbade sexual relations between them.
141. Ibid. p. 289
142. Ibid.
143. On October 18, 1935, new marriage requirements were instituted under the Law for the Protection of Hereditary Health of the German People. All prospective marriage partners were required to

obtain a medical certificate from the public health authorities in order to marry. Such certificates were refused to those suffering from “hereditary illnesses” and contagious diseases. Finally, new regulations concerning divorce were stipulated in the Marriage Law introduced on July 6, 1938, which became the Marriage Law for Greater Germany (*Großdeutsches Ehegesetz*) in August 1938.

144. The full text of the law is in Csiky, János. A fajvédelmi törvény és végrehajtási rendeletei. Budapest: 1941. p. 1-6.p. 3
145. For a discussion of ONCSA’s programs in the newly acquired territories after 1939, see Hámori, Péter. “A magyar kormány szociálpolitikája a visszacsatolt Felvidéken és Észak-Erdélyben,” part 1. Magyar Szemle. 2006; 15:167–85. and idem, “‘Produktív szociálpolitika’ a visszacsatolt északi és keleti területeken,” part 2. Magyar Szemle. 2006; 15:98–106. See also: Tóth-Baros, András. Szociális gondozás Háromszéken 1940-1944 között. Acta Siculica. 2007:515–26.
146. A very good discussion of interwar debates on the nation is provided in Szabó, Ildikó. Nemzeti szocializáció a két világháború között Magyarországon. Iskolakultúra. 2007; 2:50–70. ; Paksa, Rudolf. Széls jobboldali mozgalmak az 1930-as években. In: Romsics, Gergely. *Magyar Szemle* and the Conservative Mobilization against *Völkisch* Ideology and German *Volksgeschichte* in 1930s Hungary. Hungarian Studies. 2010; 24:81–97. ; and Trencsényi, Balázs. The Politics of “National Character”: A Study in Interwar East European Thought. London: 2012. For other countries in the region, see Baloutzova, Svetla. Demography and Nation: Social Legislation and Population Policy in Bulgaria, 1918-1944. Budapest: 2010.
147. Turda, Marius. Imagined Geographies of Race: Hungary and Romania, 1900-1940. In: Blomqvist, Anders; Iordachi, Constantin; Trencsényi, Balázs, editors. Hungary and Romania Beyond National Narratives: Comparisons and Entanglements. Peter Lang: 2013. p. 293-312.
148. See Turda, Marius. Modernism and Eugenics. Basingstoke: 2010.
149. See: Frojimovics, Kinga. The Special Characteristics of the Holocaust in Hungary, 1938-1945. In: Friedman, Jonathan C., editor. The Routledge History of the Holocaust. London: 2011. p. 56-66. and L wy, Dániel. Von der Ziegelfabrik bis zum Viehwaggon. Der Untergang einer jüdischen Gemeinde im siebenbürgischen Klausenburg. Herne: 2011. For a general discussion see: Deák, István. Essays on Hitler’s Europe. Lincoln, NE: 2001. ; Weitz, Eric D. A Century of Genocide: Utopias of Race and Nation. Princeton, NJ: 2003. ; Mazower, Mark. Hitler’s Empire: Nazi Rule in Occupied Europe. London: 2009. ; and Snyder, Timothy. Bloodlands: Europe between Hitler and Stalin. New York: 2010.