Coerced Sterilization of Romani Women in the Czech (Czechoslovak) and European Context: Past and Present. Report on the international workshop and public debate

Organizer:
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The event was organized as a workshop followed by a public discussion. The workshop was designed as an interdisciplinary encounter between scholars studying sterilization practices in communist and post-communist Czechoslovakia and in Scandinavia. The scholars set forth their critical views on the discourse and argumentation justifying coerced sterilizations of the Romani women in Czechoslovakia and the post-socialist successor states in the framework of eugenics and the welfare state. The public discussion hosting Romani and non-Romani scholars and activists took place at the Library of Václav Havel.

Workshop

In the context of her historical excursion into eugenic ideology, ANGÉLA KÓCZE, a Hungarian Romani activist and Romani Studies scholar based in Budapest, talked about racialization and dehumanization of the targeted groups as a prerequisite for their sterilizations. Reflecting on the scholarship pertaining to the health of Romani women, she identified an enduring trend since the 1970s: the scholarship dealing with the health of Romani women has been intimately connected with reproduction, particularly with juvenile pregnancies and birth rates. While she sees these phenomena as determined by structural inequalities, many studies continue to interpret them as part of a Romani lifestyle. Kócze further presented developments
concerning the legal mobilization for compensation to women sterilized without their consent in Hungary.

MAIJA RUNCIS, a Stockholm-based historian studying the Swedish welfare state and its minority policies, posed the question as to why sterilization became a scandal only twenty years after the sterilization law was abolished in 1975, and she attributed the cause to cracks in the system and the corruption of the reputation of the Swedish welfare model abroad. As a consequence, Sweden developed a new welfare state and made a point of redressing the citizens abused by the former state policy by compensating them. The interesting question arising in her research was the gender discrepancy in the number of victims (90 percent of them being female) and the differing gendered evaluations of their behavior. The explanation lies in the significance attributed to gender roles, as when authorities were deciding whom to sterilize, the criterion of compliance with the gender role had considerable weight. Moral misbehavior, understood as a reflection of innate characteristics, was seen predominantly as a female problem. Nonetheless, her analysis points to the intersectionality of gender and race with class, as it was primarily poor women who were sterilized on a mass scale. In no way should the women be regarded as merely passive victims: some of them strove to regulate their own reproduction and achieved that by abstaining from sex and marriage. The leading question, however, was to what extent eugenics influenced the welfare state’s policy. According Runcis, sterilizations were used as a preventive, cost-saving measure, “purifying” society of “undesired” participants in welfare. Racial biology legitimizing policy measures became a new moral ideology and crystalized as the church ceased to be entrusted with the moral authority to regulate the life of society and that authority came to be attributed to experts, in this case medical professionals. Yet, church dignitaries continued to police social order and were able to reconcile their doctrines with exclusionary welfare ideology nicely, as evidence by documented proposals submitted by priests to sterilize certain individuals.

CELIA DONERT, a British historian of the 20th century based in Liverpool, focused on the main aspects of the history of Czechoslovak state policy targeting Roma during the communist period which included the practice of sterilization. Donert commented on the fact that sterilizations are no longer a taboo in either scholarship or public discourse and have moved from the periphery of research interest to the center of attention. She sees this as a topic that is not just part of Czechoslovak history, but also of European history, as it can tell us something
about the ways in which European societies have functioned throughout the 20th century. In her view, it is important, in particular for historians, to study the question of sterilization from multiple perspectives, as it is something that concerns not just social and political history but also the history of science and medicine. Donert emphasized that the history of sterilizations is as much about top-down state power as it is about local-level actors, such as social and health workers and medical professionals. Importantly, the history of sterilizations is centrally about the bodies of the men and women who were affected by them. Pushing back against the notion that all cases of sterilization were coerced, Donert clarified that occasionally women requested the procedure as a conscious option for regulating their fertility. Thus, it is primarily a question of the power to make choices about one’s own body, power that is either given to or taken away from the individual involved. While current historiography on this topic (scholarly as well as non-academic production) focuses predominantly on the period from 1972 onwards, that is, the year of the adoption of the regulation on sterilization and its ensuing implementation, Donert pointed out that the question of how to possibly control the fertility of certain parts of the Romani population had been discussed in Czechoslovakia by various levels of the state administration going right up to the ministerial level already in the 1960s. This finding has opened up new avenues of research for how we think about these practices under various periods of socialist rule. Donert suggested that the question of sterilization and interventions into Romani family life is perhaps one of the areas where we can trace more elements of continuity over the course of the century. Situating the sterilizations of Romani women in Czechoslovakia into the wider history of eugenics, she argued that (racial) ideology was not the main motivating factor for implementing sterilization, but that it was a response to the failure of previous state social policies targeting Roma.

EDIT SZÉNNÁSY, a social anthropologist based in Prague, presented her field work research on ethnic segregation in the medical environment. The study was conducted in maternity wards in the Czech and Slovak Republics in 2016. Her aim was to study the process of decision-making by medical professionals in regard to their patients, and to Romani women specifically, their attitudes, opinions, and the quality and quantity of medical care provided to Roma women as compared to non-Roma. Szénnásy acknowledged that placing Roma and other women perceived as socially deviant or marginal (drug users and poor, uneducated women)
into a special room established a physical and social boundary between bodies that were Romani or otherwise “deviant” and bodies considered “normal”, and that to do so implied they should not share the same social space. Yet, she interprets the establishment of an ethnically-marked room (the so-called Romani room) not as an intentionally discriminatory practice, but rather as a logistical solution through which the medical staff sought to prevent social conflict and protect the Romani women. Szénásy argued that this ethnic and social segregation (as class was definitely an operating factor) should not be seen as a deliberate practice of particular medical personnel but rather as a reflection of the larger social distance between these two groups and their mutual distrust. She proposed viewing these types of spaces as a political arena where medical authorities should intervene in social healing.

**Conclusion of the workshop**

The papers and discussions brought up the very important question of dis/continuities in these practices across various political regimes in the 20th century and also in countries in various parts of Europe. The comparisons between the socialist and the Western European cases demonstrate that it is not possible to make a clear-cut East-West division. The comparison testifies to the fact that sterilization practices need to be properly historicized. As the comparison between the Swedish and Czechoslovak cases made evident, sterilizations targeted different groups of people under differing agendas. Thus, in the Swedish case, Runcis identifies the exclusionary model of social welfare as a significant factor that led to adoption of the sterilization policy, arguing that the 1930s generation of the eugenicists was excluded from designing the new policy and the state explicitly rejected any links with Nazi policies or any other utopian social engineering agenda, for that matter. In the Czechoslovak case, as was argued by Celia Donert, sterilizations were also intimately connected with welfare and with concerns about the “quality” of the population. Helena Sadílková, a historian and a Romani studies scholar, concluded that the history of sterilizations points to the underlying structural problems that have been persisting in the post-socialist era.

**Public Discussion**

Acting as a spokesperson for the Alliance of Women Harmed by Sterilization ELENA GOROLOVÁ has been a long-term advocate for compensation of involuntarily sterilized Romani women in the Czech Republic. Elena narrated how in 2005 she got involved in the
alliance and how the agenda of the group shifted from being a support group to an advocacy group seeking public acknowledgement of the harm inflicted upon them by the state and gradually getting involved in legal mobilization aiming at the establishing of a legal framework for the compensation of the victims. Further, she shared how sterilization impacted her life and the lives of other women in the alliance, and the negative responses they have faced, and the detrimental consequence sometimes arising from their involvement in this advocacy work.

GWENDOLYN ALBERT, an American pro-Roma activist based in the Czech Republic, presented the outcome of the last four-year effort, supported by advocacy on the European level, to achieve compensation for victims of forced sterilization in the Czech and Slovak Republics. Unfortunately, international human rights and medical experts have not yet succeeded in convincing decision-makers in the Czech Republic to design an accessible compensation process that would be direct and not involve the courts. Particularly as a result of the pressure from international human rights activists, previous Czech governments have designed compensation schemes but never adopted them, in Albert’s opinion, due to lack of political courage. In conclusion, she pointed out the missing political will and the lack of domestic allies for the harmed women’s cause.

CELIA DONERT primarily pondered historiographic issues related to the history of sterilizations as a eugenic measure. On the question of the compensation struggles, she reminded the audience that Romani activists’ efforts to gain compensation after WWII was incredibly difficult and that it took decades until the question of their persecution was recognized and addressed, particularly as concerns the idea that the Roma were persecuted during the war on the basis of race and not on the basis of some kind of perceived social criteria such as “asocial” behavior.

ANGÉLA KÓCZÉ reflected on the societal process of coming to terms with the sterilizations of Romani women and the stage at which we currently find ourselves. With the help of analytical categories developed by Paul Gilroy, she illustrated the path that contemporary post-socialist societies have been taking from denial to recognition of the harm inflicted upon Romani women by the state. In her view, our societies have slowly transitioned into the stage of recognition of their privileges, rooted in white hegemony, and of this malpractice. However, to really come to terms with its own past, society needs to take the final step and shift to
reparations for the harm. When it comes to sterilizations, the remedy would entail not just economic compensation, but also empathy, transformation of the very vocabulary that we use when talking about the infringement of the reproductive rights of Romani women, and more importantly, giving up our privileges and sharing public goods with all.

The ensuing discussion addressed, for example, the question of the reception of this topic in the NGO sector. ALBERT pointed out that many people, including larger women’s movements, shy away from this topic because they feel uncomfortable with some aspects. For instance, some of the Romani women were tremendously concerned with the fact that they did not have a chance to discuss the suggested sterilization with their partners or husbands before the decision was made. This goes, however, against the preferences of some people, especially in the reproductive rights movement, who desire women to speak in isolation from the men with whom they reproduce. Another question aimed at the strategies that could push forward the cause. The social anthropologist JAN GRILL sees the unification of various Romani interest groups as one such strategy.