
The role and significance of the Act of 28 March 1933 on social insurance, the so-called Unification Act

After regaining independence, the Second Polish Republic faced the problem of the legal systems inherited from the three partitioning powers. This situation was also reflected in social insurance and more broadly in social security. The most developed insurance system existed on the lands of the former Prussian partition. This was due to the fact that Germany was the birthplace of social insurance. A developed system operated in the former Austrian partition, while almost no such system existed in the former Russian partition. Centralised sickness insurance was the first to be introduced in the Second Polish Republic. In January 1919 the Decree on sickness insurance came into force, later replaced by the Act of 1920. The work on social insurance unification was carried out between 1917 and 1934. One of its results was the proposal of a uniform social insurance system for white-collar workers. In 1924, the post-Austrian accident insurance legislation was extended to the territory of the former Russian partition. The Act on social insurance, the so-called Unification Act [*ustawa scaleniowa*], was passed on 28 March 1933. Its biggest achievement was the introduction of workers' old-age pension insurance, although this was done at the expense of sickness insurance. The risk of three occupational diseases was introduced to the accident insurance. As regards invalidity pensions, the Act did not provide for a distinction between partial and total invalidity. Social insurance legislation in the Second Polish Republic had to be unified and sometimes created from scratch – before the Second World War over 100 legal acts were created for this purpose.

Key words: (old-age) pension insurance, social insurance, the Second Polish Republic, the Unification Act

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First attempts to unify social insurance in Poland

The social insurance situation in the territory of the reborn Second Polish Republic was most diverse as a result of the merger of the three post-partition territories. The post-German legislation represented the highest level, followed by former Austrian legislation. In the lands under Russian partition there was almost no social insurance system.¹ Work on social insurance unification burdened the Ministry of Labour and Social Welfare.²

Work on the consolidation and unification of the social insurance system in independent Poland was ongoing from 1918 (and even since 1917, *i.e.*, from the activities of the Department of Labour of the Provisional Council of State, and the proposal – in the draft Act on sickness insurance – to merge all types of insurance). Edmund Lipiński proposed to include all types of social insurance in a uniform law. This would contribute to their transparency as well as to cheapness and accessibility of administration.³

At the earliest, two months after regaining independence, a Decree on compulsory sickness insurance⁴ was adopted, later replaced by the Act of 19 May 1920.⁵ The rapid introduction of this type of insurance was because the concept had been prepared already during the period of the Regency Council [Rada Regencyjna] by the Polish labour administration bodies then established.⁶

Sickness insurance was compulsory and covered also agricultural and forestry workers. The top earners were exempt from this insurance (persons whose regular annual income exceeded 30,000 marks, and after 6 November 1920 – 60,000 marks – a Regulation of the Minister of Labour and Social Welfare of 6 November 1920 on increasing

1 S. Płaza, *Historia prawa w Polsce na tle porównawczym. Część 3. Okres międzywojenny*, Kraków 2001, pp. 301–304.

2 Many sources and studies refer to the establishment and development of social insurance in Poland: K. Chylak, *Organizacja systemu ubezpieczeń od wypadków przy pracy w Drugiej Rzeczypospolitej* [in:] *Od kwestii robotniczej do nowoczesnej kwestii socjalnej. Studia z polskiej polityki społecznej XX i XXI wieku*, Vol. 2, ed. P. Grata, Rzeszów 2014; P. Grata, *Polityka społeczna Drugiej Rzeczypospolitej. Uwarunkowania – instytucje – działania*, Rzeszów 2013; I. Jędrasik-Jankowska, *Ubezpieczenie społeczne*, Vol. 1, *Część ogólna*, Warszawa 2003; I. Jędrasik-Jankowska, *Ubezpieczenie społeczne*, Vol. 2, *Ubezpieczenie rentowe, ubezpieczenie emerytalne*, Warszawa 2003; P. Makarzec, *Ubezpieczenia Społeczne w II Rzeczypospolitej*, “Zeszyty Naukowe WSEI seria: Administracja” 2012, Vol. 2, No. 1; *Rozwój Ubezpieczeń Społecznych w Polsce*, ed. C. Jackowiak, Z. Landau, Warszawa 1991; *Studia i materiały z historii ubezpieczeń społecznych w Polsce*, Warszawa 1983–1993, 2017, as well as W. Szubert, *Ubezpieczenie społeczne. Zarys systemu*, Warszawa 1987.

3 Cf. K. Kąkol, *Ubezpieczenia społeczne w Polsce*, Łódź 1950, p. 101.

4 Decree of the Head of the State of 11 January 1919 on compulsory sickness insurance (Journal of Laws the Polish State of 1919 No. 9, item 122).

5 Act of 19 May 1920 on compulsory sickness insurance (Journal of Laws No. 44, item 272).

6 W. Muszalski, *Ubezpieczenia społeczne*, Warszawa 2004, p. 52; H. Szurgacz, *Uwagi na temat powstania i rozwoju ubezpieczeń w Polsce*, “Acta Universitatis Wratislaviensis” 2004, No. 2616, Prawo CCLXXXVIII, p. 209 *et seq.*, as well as M.E. Przystalski, E. Lis, *Ubezpieczenia chorobowe i macierzyńskie* [in:] *Rozwój ubezpieczeń społecznych w Polsce*, Wrocław 1991, p. 91 *et seq.*

the maximum statutory wage for persons insured with sickness insurance funds [*kasy chorych*]).⁷ This was based on the principles of territoriality and self-government. This insurance was governed by sickness insurance funds. The funds were managed by councils composed in one third of employer representatives and in two thirds by the representatives of employees. The contribution amounted to 6.5% of earnings. It was paid in 3/5 by employers and in 2/5 by employees. Medical assistance was provided under the insurance, a cash allowance was payable for 26 weeks, and in the case of sickness caused by an occupational accident – until recovery. Other benefits under the insurance included free medicines and dressings (ordered by the doctor employed by the sickness insurance fund and issued in pharmacies or pharmacy depots with which the sickness insurance fund has concluded a relevant agreement) and so-called auxiliary means [*środki pomocnicze*], e.g., dentures, used to maintain earning capacity (Art. 15 of the above-mentioned Act). The sickness insurance funds also provided full dental assistance free of charge. Dentures were also free (decisions to grant them were made by medical boards).⁸

An hospitalised employee was entitled to so-called home allowance [*zasilek domowy*] amounting to 40% of his/her earnings. The normal sickness allowance was equal to 60% of earnings. And female employees were entitled to a sickness allowance equal to 100% of their earnings for eight weeks after the birth of a child. The patient had the right to choose their doctor, and in emergency situations it was of no matter whether the doctor had a contract with the sickness insurance fund or not. The family of the employee was also covered by medical assistance. A funeral grant was also introduced. By the end of 1922, the unified system covered as many as 135 sickness insurance funds (excluding Upper Silesia), with four funds in the central voivodships and yet still no funds in the eastern voivodships. The sickness insurance funds organised their own medical surgeries and outpatient clinics, functioning independently of local government hospitals. In 1928, as many as 243 sickness insurance funds operated in Poland.

The adopted solutions met with great criticism from right-wing parties. Their influence meant that sickness insurance was limited shortly after the Act was passed. Agricultural workers in the former Russian partition and workers of farms under 75 ha in the former Austrian partition were excluded from this insurance. Sickness insurance for forest workers was also limited.

In 1930, commenced was the process of sickness insurance funds reorganisation, including mainly the rules for their control by special commissioners.⁹ As part of a more general trend to centralise the management and reduce the self-government of public institutions, the sickness insurance funds were merged into larger, and thus financially and organisationally

⁷ Journal of Laws 1920 No. 109, item 724.

⁸ Cf. a paper by Marian Stawiński, General Doctor of the Social Insurance Institution [Zakład Ubezpieczeń Społecznych, ZUS], delivered on 8 April 1946 at the first convention of temporary boards of mutual benefit societies, published in “Studia i materiały z historii ubezpieczeń społecznych w Polsce” 1987, Issue 5.

⁹ W. Organiściak, *Prawo ubezpieczeń społecznych II Rzeczypospolitej (Szkielet dla celów dydaktycznych)*, „Z Dziejów Prawa” 2010, Vol. 3, p. 143.

stronger, institutions. 61 new sickness insurance funds were established, gathered within the Central Association of Sickness Insurance Funds [Centralny Związek Kas Chorych].¹⁰

Two changes introduced in 1924 by Władysław Grabski's cabinet should be also noted. Accident insurance was introduced in the former Russian partition on the example of the post-Austrian system in force in Galicia.¹¹ Insurance contributions were here paid by employers only. However, this insurance did not cover agricultural workers employed on farms below 30 ha. At the same time, unemployment insurance started to operate nationwide.¹² In 1925, this insurance, earlier covering only blue-collar workers, was extended to white-collar employees.¹³

The initial work on the consolidation of social insurance in the Second Polish Republic began in the Ministry of Labour and Social Welfare. A draft Act on uniform social insurance had been prepared already in 1920. This Act had intended to merge all risks relating to hazards arising from paid employment but, unfortunately, the Polish-Bolshevik war meant this draft Act was not implemented.

However, the problem of benefits for war invalids¹⁴ and the families of fallen soldiers,¹⁵ most important given the context of the end of World War I and the struggle against the Bolsheviks, was resolved. In May 1920, the Act on temporary military pensions¹⁶ was adopted. In March 1921, the Act on pension provision for war invalids and their families and for the families of the fallen and dead, and whose death was causally linked to military service,¹⁷ was passed. On 5 August 1922, the Act on pension provision for military personnel and their families¹⁸ was adopted. As far as state employees were concerned, they were covered by the Pension Act of 28 July 1921,¹⁹ while the Act of 11 December 1923 on pension provision for state officials and professional military personnel merged both pension schemes.²⁰ At the same time, work began on the introduction of a pension scheme for blue-collar workers in the former Austrian

10 On the organisation of sickness insurance funds *cf.* P. Makarzec, *op. cit.*, p. 204.

11 Act of 30 January 1924 on the extension of the Acts on compulsory insurance of workers against accidents applicable in the following voivodships (provinces): Krakow, Lviv, Stanisławów, Tarnopol and Cieszyn to the following voivodships (provinces): Warsaw, Lodz, Kielce, Lublin, Białystok, Volhynia, Polesie and Nowogródek and the Vilnius Lands (Journal of Laws No. 16, item 148).

12 Act of 18 July 1924 on unemployment security (Journal of Laws No. 67, item 650).

13 Act of 28 October 1925 amending some provisions of the Act of 18 July 1924 on unemployment security (Journal of Laws No. 120, item 863).

14 *Cf.* A. Jarosz-Nojszewska, *Świadczenia rentowe dla inwalidów wojennych w II RP w latach 1918–1926* [in:] *Gospodarka i społeczeństwo a wojskowość na ziemiach polskich*, ed. T. Głowiński, K. Popiński, Wrocław 2010, pp. 203–214.

15 *Cf.* A. Jarosz-Nojszewska, *Emerytury zawodowych wojskowych w Drugiej Rzeczypospolitej* [in:] *W garnizonie i na kwaterze... Wojskowi i cywile – gospodarcza relacja na ziemiach polskich na przestrzeni wieków*, ed. R. Klementowski, M. Zawadka, Wrocław 2017.

16 Act of 29 May 1920 on temporary military pensions (Journal of Laws 1920 No. 47, item 286).

17 Act of 18 March 1921 on pension provision for war invalids and their families and for the families of the fallen and dead, whose death is causally linked with military service (Journal of Laws of 1921 No. 32, item 296).

18 Act of 5 August 1922 on pension provision for military personnel and their families (Journal of Laws 1922 No. 68, item 616).

19 Act of 28 July 1921 – the retirement act for state officials (Journal of Laws 1921 No. 70, item 466).

20 Act of 11 December 1923 on pension provision for state officials and professional military personnel (Journal of Laws 1924 No. 6, item 46).

and Russian partitions,²¹ where such had not existed before. Further work on the unification of social insurance was carried out in the years 1922–1923.

In 1923, work began on the merger of sickness insurance with the invalidity, old age and death insurance. Work on the new Act lasted for three years. A new draft Act on insurance unification, which included insurance against accidents at work and occupational diseases, was published in 1927.²² It was submitted to the Sejm [the lower house of the Polish parliament] in 1929, but Aleksander Prystor's cabinet decided to withdraw it. This draft Act was again submitted to the Sejm only in March 1932. The work in Sejm committees lasted almost a year – analyses, mathematical calculations were made, the draft Act was consulted with experts in insurance law. The resulting document was based on sound and solid foundations.

Work on the unification of the social insurance system, carried out in 1927, resulted in a proposal for a uniform social insurance scheme for white-collar workers.²³ This covered all white-collar workers (except those from Upper Silesia).²⁴ State officials were excluded from the insurance: their rights were regulated by the Act of 11 December 1923. The category of a white-collar worker itself was not yet defined.

However, the operations and activities to be carried out by someone to be qualified for this group were already stipulated. These employees were subject to a so-called waiting period [*okres wyczekiwania*] of 60 months. This concerned old-age pension benefits (except for one-off severance pay). The waiting period did not apply if the incapacity for work was the result of an accident at work – in such a situation it did not matter how long the contributions had been paid for. The regulation covered not only pension insurance but also insurance of other risks, such as loss of work, sickness or accidents at work. The waiting periods for these types of insurance were different, *e.g.*, in order to acquire the right to unemployment benefits, contributions had to be paid for at least six contributory months during the final year before loss of employment.

Compared to the old-age pension insurance for blue-collar workers, the so-called continuity of insurance [*ciągłość ubezpieczenia*] necessary to maintain the rights was regulated in a different way. The entitlement was maintained when the period from the cessation of insurance to the date of a random event giving rise to the entitlement to the insurance benefit was less than 18 months. The concept of so-called occupational invalidity [*inwalidztwo zawodowe*] was also adopted, recognising as an invalid an employee with a physical or mental disability, whose ability to perform their professional duties had fallen below 50% of the level of those deemed healthy and with similar skills and responsibilities.

21 D. Jakubiec, *Pierwsze polskie instytucje ubezpieczeń społecznych. Zarys historii i ustroju*, Warszawa 2007, p. 8.

22 Cf. J. Łazowski, *Zagadnienie scalenia ubezpieczeń społecznych a polskie projekty ustawodawcze*, "Praca i Opieka Społeczna" 1927, Issue 1, pp. 46–50.

23 Ordinance of the President of the Republic of 24 November 1927 on the insurance of white-collar workers (Journal of Laws No. 106, item 911).

24 Cf. A. Jarosz-Nojszewska, *Ubezpieczenie emerytalne pracowników umysłowych w Drugiej Rzeczypospolitej [in:] Od kwestii robotniczej do nowoczesnej kwestii socjalnej. Studia z polskiej polityki społecznej XX i XXI wieku*, Vol. 5, ed. P. Grata, Rzeszów 2017, pp. 34–50.

Other benefits (as defined in Art. 15) to which white-collar workers were entitled in certain cases were: an invalidity pension [*renta inwalidzka*], old age pension [*renta starcza*], a widow's or widower's pension [*renta wdowia* or *renta wdowca*], an orphan's pension [*renta sieroca*], allowances to pensions and one-off severance pay as well as benefits in kind (related to medical care). Benefits in the event of unemployment included unemployment benefit, payment of sickness insurance contributions for the unemployed and travel aid. The old-age pension was payable to white-collar workers after reaching the age of 65 (both to men and women). Full old-age pension rights could be also acquired by men who had reached the age of 60 years and had been paying contributions for 480 months (40 years) and by women who had reached the age of 55 years of age and had been paying contributions for 420 months (35 years). The invalidity pension was equal to 40–100% of earnings. The insurance was financed by contributions and it also covered the risk of unemployment. This benefit was available to insured persons who had completed the required waiting period and were unable to practise their profession. The invalidity pension was composed of the basic amount and the so-called increase [*kwota wzrostu*]. The basic amount was equal to 40% of the assessment basis. And the amount of the increase depended on the insurance period. After 40 years of insurance, it reached 60% of the assessment basis, which gave a total of up to 100% of the assessment basis. The allowance for one child was 10% of the basic amount. Reference should also be made to the so-called sickness pension [*renta chorobowa*] for persons insured who were still incapable of work and who did not meet the invalidity condition after 26 weeks of receiving sickness allowance.

The Regulation of 1927 also provided for the so-called allowance for vulnerable persons [*dodatek dla bezradnych*]. This amounted to 50% of the pension, although in total a maximum of 100% of the old-age pension could be paid. The right to the allowance was granted to those who were incapable of practising their profession and whose health condition required the constant care and assistance of others. The benefits also included a provision for old-age [the so-called *zaopatrzenie starcze*]. It was granted to persons with a completed employment period, who were, however, not able to acquire the right to a pension because they had not been covered by insurance before the entry into force of the pension legislation.

A one-off severance pay was granted to those who had not met the requirements for receiving an old-age pension and were permanently unable to practise their profession. Its amount was dependant on the number of monthly contribution. The system of benefits in kind was similar to that established for blue-collar workers.

The death of a white-collar worker or a former worker who was entitled to an old-age or invalidity pension, entitled the family to a widow's or widower's pension, an orphan's pension, survivor's aid and a one-off severance pay.²⁵

The described scheme was serviced by three insurance institutions established during the period of existence of the German and Austrian states and by the newly established

25 T. Dyboski, *Ubezpieczenie społeczne w Polsce w ostatnich latach. Podstawy ustawodawcze i organizacyjne*, Warszawa 1939, p. 29.

White-Collar Workers' Insurance Institution [Zakład Ubezpieczeń Pracowników Umysłowych] in Warsaw.

Despite these positive changes, there were still several types of insurance in operation, each with its own organisation and based on separate legal regulations. This posed problems in the orientation of insured persons, because different institutions provided benefits in respect of different risks. Competence disputes between insurance institutions were frequent. Institutions operating in one insurance section were in a different financial situation. The maintenance of such a large number of institutions brought about high administrative costs and hindered state supervision of insurance system operations.²⁶

Social insurance system unification under the Act of 28 March 1933

The prolonged stage of social insurance development in the Second Polish Republic ended with the adoption of the Act of 28 March 1933 on social insurance, the so-called Unification Act [*ustawa scaleniowa*].²⁷ Its adoption was preceded by years of work and discussion on the social insurance model to be adopted. The draft Act was submitted to the Sejm in March 1932. Work in parliamentary committees lasted one year. The Act, consisting of 320 articles, covered all types of insurance: sickness and maternity, accidents at work and occupational diseases, old-age pension insurance for blue-collar workers and old-age pension insurance for white-collar workers.

Social insurance companies and four social insurance institutions were established to properly “provide insurance”: the Sickness Insurance Institution [Zakład Ubezpieczenia na Wypadek Choroby], the Accident Insurance Institution [Zakład Ubezpieczenia od Wypadków], the Old-Age Pension Insurance Institution for Blue-Collar Workers [Zakład Ubezpieczenia Emerytalnego Robotników] and the White-Collar Workers' Insurance Institution [Zakład Ubezpieczeń Pracowników Umysłowych]. All these institutions were members of the Social Insurance Chamber [Izba Ubezpieczeń Społecznych], they had legal personality and were institutions of public law.²⁸ These institutions formed a three-level organisational structure within the social insurance system. The lowest level was made up of social insurance companies, the higher of the four social insurance institutions, with the Social Insurance Chamber being the coordinating institution. In addition to the supervision of social insurance companies, the Chamber also carried out therapeutic and preventive activities. It was overseen by the Ministry of Social Welfare.

26 A. Jarosz, *Ustawa scaleniowa 1933. Próba ujednoczenia systemu ubezpieczeń społecznych w II RP* [in:] *Między zacofaniem a modernizacją. Społeczno-gospodarcze problemy ziem polskich na przestrzeni wieków*, ed. E. Kościak, T. Głowiński, Wrocław 2009, p. 173.

27 Journal of Laws No. 51, item 396.

28 Cf. M. Lewandowska, *Rzeczpospolita ubezpieczonych. Historia ubezpieczeń społecznych w Polsce*, Warszawa 2017, p. 67.

The income of social insurance companies consisted of revenues from contributions, income from the company's assets and facilities, interest on invested capital, donations, bequests and subsidies and, if necessary, State Treasury [Skarb Państwa] subsidies. The appropriate level of contributions was to ensure a strong financial basis for insurance itself. The contributions were obligatorily paid in 2/3 by the employer and in 1/3 by employees.

The resolutions of the Act concerning accident insurance and the introduction of old-age pension insurance for blue-collar workers were advantageous for employees.²⁹ On the other hand, the insurance guaranteed modest benefits at a very high contribution rate. One contribution was introduced, there was one place to pay it and one place to register for insurance, which significantly simplified the administration. However, the introduction of this benefit was of crucial importance. The risk of occupational diseases was included in the accident insurance³⁰ and the amount of the accident pension depended on the percentage of health loss. It was assumed that the insurance would cover accidents in employment and occupational diseases.³¹ The concept of "accidents in employment" [*wypadek w zatrudnieniu*] was broader than the existing concept of "accidents at work" [*wypadek przy pracy*]. Due to the fact that the term "employment" is broader than the term "work", the catalogue of events recognised as accident at work was considerably extended, for example by including accidents on the way to or from work. The insurance covered almost all employees with an employment relationship, *i.e.*, trainees, apprentices, volunteers, and even the relatives and in-laws of the employer. Separate regulations covered state employees, the Polish State Railways [Polskie Koleje Państwowe], the army and the clergy.

The Unification Act entrusted the Accident Insurance Institution with the management of insurance against accidents in employment and occupational diseases. It was a public-law person acting as self-governing. The Institution was subordinate to the Social Insurance Chamber, and overall supervision was exercised by the Minister of Labour and Social Welfare. Benefits in cash and in kind from accident insurance were granted to employees who had lost, completely or partly, their earning capacity or to the families of employees who had died as a result of an accident in employment or due to an occupational disease. The waiting period was not applied here. However, the causal link between the accident and employment and between the accident and the damage to health suffered by the employee was important when the benefit was being granted.

The monthly invalidity pension was the most important benefit under this insurance. In the case of a complete incapacity for work it amounted to 66% of the average earnings

29 Cf. A. Jarosz-Nojszewska, *Ubezpieczenia robotnicze w Polsce w latach 1918–1939* [in:] *Od kwestii robotniczej do nowoczesnej kwestii socjalnej: studia z polskiej polityki społecznej XX i XXI wieku*, ed. P. Grata, Rzeszów 2013, pp. 26–40.

30 The definition of "occupational disease" [*choroba zawodowa*] was included in the Regulation of the President of the Republic of Poland of 23 August 1927 on the prevention and elimination of occupational diseases (Journal of Laws No. 78, item 676), which described occupational disease as an acute or chronic disease arising from practising a certain profession and the nature of a given work or from the conditions under which it is performed.

31 Three occupational diseases were distinguished: lead poisoning, mercury poisoning and anthrax infection in the case of contact with infected animals.

plus 10% for each child, but could not exceed the amount of any previous earnings. Partial incapacity for work above 10% gave the right to a proportional pension. The Unification Act provided for benefits in kind, *i.e.*, medical supplies and medical care provided as long as there was a possibility of effective treatment. Benefits from accident insurance included also a widow's or widower's pension paid in the amount of 30% and an orphan's pension paid in the amount of 20% of the deceased person's basis for pension assessment. The Unification Act also provided for the possibility of paying one-off survivor's aid in the amount of monthly remunerations.

Payment of compensation in respect of an accident in employment under the Unification Act did not preclude the claim for compensation on general principles, *i.e.*, in accordance with the provisions of the Code of Obligations [Kodeks zobowiązań] (Articles 153 and 154).³² The Code of Obligations provided for the possibility to claim liability from the employer only on the basis of a wilful misconduct (intentional action or negligence of obligations to protect the life and health of employees) and only in the amount constituting the difference between the actual damage and the compensation paid under the insurance itself.³³

On the other hand, changes introduced by the Act in sickness insurance were unfavourable. The resolutions adopted in the Act changed the provisions of the Act on compulsory sickness insurance of May 1920, amended in 1923. They were intended to provide resources from contributions to finance the old-age pension scheme for blue-collar workers. To accumulate these funds, employers' sickness insurance contributions were reduced and the contributions paid by insured persons were increased. This resulted in the reduction in the amount and duration of sickness allowances. The amount of sickness allowances was reduced from 60% to a maximum of 50% of earnings. Their payment period was reduced from 39 to 26 weeks. The contribution rate amounted to 4.6% of earnings of a white-collar employee and 5% for other employees. The newly applied rules for benefit calculation were unfavourable for employees (*e.g.*, the first four days of sickness were not paid for) and the waiting period for the benefit payment was as long as four weeks. All days of the week were included in allowance calculations. Taking into account not only working days resulted in the actual reduction of the allowance to 42% of earnings. The previous amount of sickness allowance was not to be restored until 1937.

Employers were obliged to register their employees for insurance with a territorially applicable insurance company within seven days. They were also required to report any changes in employment and earnings. Applications could be also submitted by the employees themselves.

It is important that even after the adoption of the Unification Act, the right of employees to remuneration during sickness was regulated differently for particular groups of employees. Persons employed under the conditions laid down in the Code of Obligations,

32 Ordinance of the President of the Republic of Poland of 27 October 1933 – the Code of Civil Procedure (Journal of Laws No. 82, item 582).

33 W. Organiściak, *op. cit.*, p. 152.

and who were not subject to compulsory social insurance under the Act of 28 March 1933 or the provisions of a collective agreement, and whose relationship was their main source of subsistence, retained their right to remuneration in the event of sickness, accident or for other important reasons, provided that the Act or a contract did not contain more favourable regulations – for a period of two weeks – and provided that the employment relationship had lasted for at least six months before their incapacity for work. In turn, employees who were subject to the legal regime of the Code of Obligations and were covered by compulsory social insurance, as well as being possibly covered by a collective agreement, were not entitled to remuneration for the period of non-performance of work in the case of sickness or incapacity for work due to accident. On the other hand, the remuneration for the period of sickness or incapacity for work as a result of an accident was due, as a rule, to white-collar workers employed under an employment contract for three months, unless the contract had expired earlier.³⁴

Blue-collar workers employed on the basis of an employment contract could not expect similar entitlement. The sickness insurance for agricultural workers had been abolished in areas where this insurance was applicable under the laws of the partitioning powers. Landowners were obliged to provide care for their agricultural workers. The situation of this group of workers was therefore very unfavourable because they were deprived of insurance. The year 1936 may be mentioned as an example, when only 34% of agricultural employers entered into appropriate contracts with doctors aimed at providing their workers with medical assistance, however in this case, too, the assistance was merely illusory because workers were afraid to use it in fear of dismissal.³⁵

The scope and level of medical services was also reduced. Surcharges paid by the insured persons for medical advice and for free medicines were introduced. Persons insured paid a surcharge of: 20 groszy for medical advice, 10 groszy for medical treatment, 10 groszy for each medicine prescribed and for medical supplies. The insured person had to pay an additional 30 groszy for each medicament bought at a pharmacy.³⁶ Pursuant to special legislation, a part of the medical services, especially for persons who had sustained accidents in employment, persons suffering from occupational and chronic or infectious diseases, children under three years of age, were either exempt from charge or were free of charge *ex officio*. Sera and vaccines as well as insulin for diabetics were also free of charge.

In addition, it should be noted that the family members of the insured person were entitled to assistance in the event of sickness to a very similar extent, but only for 13 weeks. As an exception, in the case of severe diseases, benefits could be extended for a maximum period of a further 13 weeks.

Cash allowances paid under this insurance included sickness allowance or home and hospital allowance. The sickness allowance amounted to 50% of the average weekly

³⁴ *Ibid.*, p. 145.

³⁵ W. Muszalski, *op. cit.*, p. 55.

³⁶ Regulation of the Minister of Social Welfare of 28 December 1933 on surcharges for medical advice, medicines, medical supplies and medical treatment (Journal of Laws No. 103, item 815).

earnings for the last 13 weeks before sickness (for people with children, with the addition of 5% for the third and each subsequent child, subject to a maximum of 65%). A hospitalised employee was entitled to either home or hospital allowance. The former was due for the duration of hospital treatment when the insured person lived with at least one dependent. Its amount was half of the sickness allowance. The part of the allowance for children was paid in full. Persons who did not meet the requirements for receiving the home allowance were granted a hospital allowance equal to 10% of their average weekly earnings.³⁷

Including the invalidity, old age and death insurance in the Act constituted a favourable solution. The Act on accidents at work also brought effective solutions. The amount of the accident pension was made dependent on the percentage of health loss. These solutions corresponded to the highest world standards of the day.

However, the childbirth allowance was reduced, because instead of 100%, only 50% of the insured woman's earnings were paid (the state stopped subsidising 50% of the benefit). In the case of this allowance, half of the contribution for sickness and maternity insurance was paid by the employer and half by the worker. This allowance was granted to insured female employees who gave birth to a child, for a period of eight weeks (including at least six weeks after delivery), but only when they refrained from work. Breastfeeding mothers were entitled to an allowance in kind, in the form of one litre of milk or cash equivalent, for 12 weeks.³⁸

A new solution was the introduction of old-age pension insurance for blue-collar workers,³⁹ but the territory of Upper Silesia was excluded from the system. This was due to the fact that in this area, the post-German insurance system was much more favourable in its benefits to workers. For example, miners had fraternal pension funds, such as the Pension Fund of the Fraternal Company [Spółka Bracka] in Tarnowskie Góry and the Pszczyzna Mining Brotherhood [Pszczynskie Bractwo Górnicze], which were their additional form of security. Different social insurance and labour law regulations for the Upper Silesian part of the then Silesian Voivodship resulted from the Treaty of Versailles and subsequent international treaties imposed by the governments of the victorious powers. Social insurance was regulated by the Polish-German Upper Silesian Convention of 1922 concluded in Geneva. This held sway until 1937 and included, *inter alia*, insurance settlements resulting from the division of Upper Silesia. Paradoxically, the level of social insurance in the Silesia region belonging to Poland was higher than in Germany.⁴⁰

Other groups of employees who also had more favourable insurance regulations, *e.g.*, military personnel, state and public employees, as well as miners, metallurgists and white-collar workers, were left on the same terms as before. Under the Act, the highest paid white-collar workers who opposed sickness insurance were exempt from this insurance.

37 W. Organiściak, *op. cit.*, pp. 145–146.

38 *Ibid.*, p. 146.

39 Cf. A. Jarosz-Nojszewska, *Ubezpieczenia robotników przemysłowych w II RP* [in:] *Z dziejów przemysłu przed 1945 rokiem*, ed. J. Chumiński, M. Zawadka, Wrocław 2012, pp. 271–279.

40 W. Muszalski, *op. cit.*, p. 56.

This reduced their income from this insurance. On the other hand, the Unification Act covered homeworkers.

Institutions administering social insurance did not have any influence on the newly established Unemployment Fund [Fundusz Bezrobocia] (later transformed into the Labour Fund [Fundusz Pracy]⁴¹), from which unemployment benefits were paid and public works were financed.⁴²

The Act granted the right to:

- cash benefits, *i.e.*, the old-age pension, invalidity pension, pension supplements as well as one-off severance pay and a funeral grant;
- benefits in kind, *i.e.*, medical care, medicines and dressings, medical aids and aids against deformity and disability.

The invalidity pension was the main benefit from the old-age pension insurance for blue-collar workers. It was granted under the principle of the so-called presumption of permanent invalidity [*domniemanie powstania trwałego inwalidztwa*] after the age of 65. Invalids were described as workers, irrespective of gender, who were over 60 years of age and had been insured for 750 contributory weeks, *i.e.*, about 14.5 years. The Act did not provide for a distinction between partial and total invalidity. The invalidity pension consisted of two elements: a basic amount (determined annually by the Council of Ministers at the same level for all pensioners) and an individual amount which depended on the insurance period over which the contributions had been paid and on the earnings of the particular insured person. This pension was calculated as a progressive percentage of the average monthly earnings of the insured worker for the entire insurance period. It could not exceed 80% of the earnings constituting the basis for its calculation. The person entitled to the invalidity pension was also entitled to child allowance. He was also entitled to benefits in kind in the form of medical care and medical supplies. And his/her survivors were entitled to a cash benefit in the form of a post-invalidity widow's or widower's pension (50% of the invalidity pension) and a post-invalidity orphan's pension (20% for each child). The total amount of individual pensions could not exceed the invalidity pension to which the insured person was entitled.⁴³

And the old-age pension was the basic benefit for white-collar workers. To obtain it, one had to complete a 60-month contribution period and reach the age of 60 years for women and 65 years for men. The provisions of the Regulation of the President of the Republic of Poland of 1934 allowed for the possibility of granting the above pension at an age lower by five years, on condition of completing an insurance period of: 35 years for women and 40 years for men. It is also worth noting that the amount of the pension

41 Regulation of the President of the Republic of Poland of 24 October 1934 on the merger of the Unemployment Fund with the Labour Fund (Journal of Laws No. 94, item 849).

42 Cf. A. Jarosz-Nojszewska, *Ubezpieczenie od bezrobocia w Drugiej Rzeczypospolitej* [in:] *Ekonomia, społeczeństwo, polityka. Studia ofiarowane prof. dr. hab. Januszowi Kalińskiemu w 70. rocznicę urodzin*, ed. A. Zawistowski, Warszawa 2012, pp. 211–225.

43 L. Frankowska, E. Modliński, *Ustawa o ubezpieczeniu społecznym*, Kraków 1933, p. 149.

for white-collar employees was on average five times higher than the pension for blue-collar workers.

In the event of a worker's death, his/her family members (usually the spouse, children born in marriage, legitimate, adopted and illegitimate children, grandchildren up to the age of 16 years, in the case of students up to the age of 24 years) were entitled to a funeral grant in the amount of three-week earnings of the insured person. The grant could be also paid to another person from the family or even from outside the family circle, after the meeting of certain conditions.⁴⁴

The benefits from the blue-collar workers' pension insurance were practically not paid until the outbreak of World War II (a small number of benefits started to be paid from 1938). This was due to the fact that the system was based on capitalisation, which required the prior accumulation of financial resources.

Shortly after the Act was adopted, work began on its amendment. The Regulation amending the Act of 28 March 1933 was signed by President Ignacy Mościcki on 24 October 1934 – this was the culmination of the insurance merger and centralisation process.⁴⁵ At the same time, a new insurance institution was established, *i.e.*, the Social Insurance Institution [Zakład Ubezpieczeń Społecznych, ZUS] with its headquarters in Warsaw.⁴⁶ It took over the powers of the liquidated four insurance institutions and the Social Insurance Chamber. Pursuant to Art. 17 of the amended Unification Act, the status of social insurance operators, beside ZUS, was left to the social insurance companies [*ubezpieczalnie społeczne*]. They had been equipped with legal personality under public law: these were a kind of compulsory corporation of insured persons and of employers. These persons, as parties to the insurance relationship, took part in their management.⁴⁷

Thus, the Social Insurance Institution operated centrally. It had its headquarters in Warsaw and regional branches in Chorzow, Cracow, Lviv, Lodz and Poznan. The branches had no legal personality and their role was to maintain direct contacts with insured persons and employers. Pursuant to Art. 56 of the Unification Act, ZUS performed all activities except for those transferred to the social insurance companies. ZUS was also entrusted with the task of administering five insurance funds, each covering different risks. It was a public law entity, with separate assets and its own sources of finance.⁴⁸ The most important ZUS tasks also included: establishing entitlements to long-term benefits and their payment, administering pension and accident insurance assets, taking actions

44 W. Organiściak, *op. cit.*, p. 146.

45 M. Lewandowska, *op. cit.*, p. 69.

46 Cf. A. Krupski, *Proces scalania ubezpieczeń społecznych w okresie II Rzeczypospolitej – utworzenie Zakładu Ubezpieczeń Społecznych*, "Ubezpieczenia Społeczne. Teoria i praktyka" 2012, No. 10, p. 12.

47 Cf. P. Makarzec, *op. cit.*, p. 207.

48 They were the following: the General Insurance Fund for Sickness and Maternity [Ogólny Fundusz Ubezpieczenia na Wypadek Choroby i Macierzyństwa], the Fund for Insurance against Accidents and Occupational Diseases [Fundusz Ubezpieczenia od Wypadków i Chorób Zawodowych], the Blue-Collar Workers' Old-Age Pension Fund [Fundusz Ubezpieczenia Emerytalnego Robotników], the White-Collar Workers' Old-Age Pension Fund [Fundusz Ubezpieczenia Emerytalnego Pracowników Umysłowych] and the Fund for the White-Collar Workers' Insurance in the Event of Lack of Work [Fundusz Ubezpieczenia na Wypadek Braku Pracy Pracowników Umysłowych].

to prevent accidents in employment and occupational diseases and conducting medical and preventive activities, representing social insurance institutions at conventions and conferences and concluding agreements provided for in international conventions and agreements. Its tasks also included standardising, coordinating, improving and supplementing the activities of the social insurance companies. ZUS was to provide the social insurance companies with instructions, keep statistics of all types of insurance, prepare and publish reports, establish uniform rules for granting and paying benefits, define general rules and conditions for concluding agreements by the social insurance companies, regulate their investment activities, grant them subsidies or short-term loans, establish administration and office rules, as well as the rules for financial and material management, provide explanations and professional assistance, and carry out inspections and surveys of the organisation and activity of the social insurance companies (Art. 11[1] of the ZUS statute).⁴⁹

In addition to fundamental changes in the organisation and structure of social insurance institutions, changes were also made in the technology of conducting insurance activity, including the system of settling insurance contributions by means of accounts.

The solutions adopted in the Unification Act and in the Regulation of the President of the Republic of Poland of 24 October 1934 amending the Act of 28 March 1933 on social insurance,⁵⁰ shaped a coherent, centralised system of social insurance organisation and management. In the newly established system, the functions and tasks of all institutions connected with these types of insurance were clearly divided. It should be stressed that the social insurance companies carried out operational tasks for all areas of insurance and managerial tasks in the field of sickness insurance, while the remaining tasks, of a managerial and decision-making nature, were concentrated on the central level, first in the four insurance institutions and the Chamber, and then in the Social Insurance Institution itself.

The problem of dispute resolution in social insurance cases

The Unification Act did not contain any detailed regulations concerning the settlement of disputes on social insurance benefits. These cases were decided by courts and other institutions specially designated for this purpose. These bodies were designated by regulations issued by different authorities and at different times. As many as five of them took decisions as the last resort. In the lands of the former Russian partition, disputes concerning social insurance were resolved by civil courts, in the former Austrian partition – by general administrative bodies and single-instance special courts, and in the lands of the former Prussian partition – by district and higher insurance authorities and two-instance social insurance courts.

⁴⁹ Cf. P. Makarzec, *op. cit.*, p. 208.

⁵⁰ Journal of Laws No. 95, item 855.

In the lands of the former Austrian partition, disputes relating to compulsory insurance and contributions were first dealt with in administrative proceedings, with the possibility of a complaint to an administrative court. The jurisdiction of the single-instance special courts, which, however, operated within the common courts of law, and here applying the civil procedure, covered only cases concerning disputes over benefits.

Dispute resolution procedure in the lands of the former Prussian partition started before special insurance authorities, *i.e.*, conciliation or arbitration boards. These were a part of insurance institutions (for example, conciliation boards operated within their self-government bodies) and most often played the role of internal control or were part of the general administration (for example, insurance authorities operating within the district administration, as well as the Higher Insurance Authority [Wyższe Urzędy Ubezpieczeń] with headquarters in Katowice, Poznan and Torun) and performed mainly so-called external control [*kontrola zewnętrzna*]. After the end of this administrative procedure, the parties could appeal against any final decisions to the administrative court.⁵¹

By virtue of the Unification Act, the conciliation boards were established at the social insurance companies. These boards resolved appeals against the decision of the director of the social insurance company regarding sickness insurance benefits. A six-member board consisted of three representatives of employees and employers, each appointed by the Insurance Company's Council. The chairman and the deputy of the arbitration board were appointed by the State Insurance Authority [Państwowy Urząd Ubezpieczeń]. Decisions in those one-instance proceedings were taken after the hearing. Initially, they were final, although it was stipulated that in the future, the decisions of the conciliation boards could be appealed against to the special bodies for social insurance jurisprudence. The conciliation boards did not deal with contributions and with disputes concerning the insurance obligation itself.⁵² A host of institutions continued to rule on remaining cases.

The uniform system of dispute resolution in social insurance cases was not adopted until 1939,⁵³ this was to cover the whole country. Due to the outbreak of war, this Act did not come into force (the date of its entry into force was to have been 1 April 1940). It is only after the amendment of the above Act in 1946 that the social insurance judiciary was established.⁵⁴ At that time, the regional social insurance courts were established as the first instance. Initially, there were six of them. The second and last instance was the Social Insurance Tribunal [Trybunał Ubezpieczeń Społecznych], which became operational in 1947.⁵⁵

51 K. Kolański, *Postępowanie w sprawach ubezpieczeniowych* [in:] *Rozwój ubezpieczeń społecznych w Polsce*, Wrocław 1991, pp. 159–162.

52 *Ibid.*, pp. 162–164.

53 Act of 28 July 1939 – the Law on Social Insurance Courts (Journal of Laws 1939 No. 71, item 476).

54 Decree of 1 March 1946 on the amendment of the Law on Social Insurance Courts (Journal of Laws No. 12, item 76).

55 The interwar solutions in the social insurance judiciary, as well as the construction of the insurance judiciary at the beginning of the People's Republic of Poland have been relatively extensively discussed in: M. Nowakowski, *Okręgowe sądy ubezpieczeń społecznych*, Kraków 2017.

Summary

The Social Insurance Act adopted on 28 March 1933 played a very important role and was of great significance for social insurance in the Second Polish Republic. That Act was called the Unification Act because it was supposed to unify, in legal, material and organisational terms, the post-partitioning social insurance systems functioning at that time. The Act was to lead, in terms of social insurance, to the integration of lands regained after 123 years of partition. A situation where employees in different regions of Poland were covered by social insurance on different terms or were deprived of insurance cover, was no longer acceptable. This hindered, for example, labour migration. The solutions adopted in the Act were also intended to level the contribution charges, which distorted the freedom of competition, due to the significant differences between, for example, the lands of the former Prussian and Russian partition.

The solutions adopted in the Act radically changed the organisation of insurance institutions, abolishing the model of their decentralised structure. The government sought to create an organisationally uniform insurance system, dependent on state authorities. Therefore, the sickness insurance funds were replaced by the social insurance companies, which were to calculate and collect contributions, keep records of the insured persons and accept claims from enterprises. The Social Insurance Chamber coordinated social insurance. It could audit the social insurance companies and other insurance institutions as well as examine and give opinions on the budgets of all insurance institutions. The swift amendment of the Act resulted in the establishment of a single, central and universal insurance institution – the Social Insurance Institution – by virtue of the Regulation of 24 October 1934. In this way a state insurance monopoly was created. A coherent and transparent system of social insurance organisation was developed, which was the basis for effective, and at the same time efficient, insurance management on a national scale.

It should not be forgotten that the draft Act was developed in a specific geopolitical situation. The adopted solutions were ultimately affected by Poland's economic situation, and this was a period of economic collapse after the great crisis on world markets. One of the assumptions for the Act was to seek savings. The government sought to reduce insurance costs in order to be able to invest in economic projects. It should be noted that the financial situation was becoming increasingly difficult as a result of numerous bankruptcies, rising unemployment and, consequently, a significant deterioration in insurance contributions collection. A profound reform of the entire insurance system, integrating insurance in organisational and financial terms, was considered an opportunity to maintain the financial capacity of the whole system.

When establishing the Social Insurance Institution, five insurance funds with legal personality were created, to be managed by ZUS.

The Act was aimed to consolidate social insurance throughout the country and to level the burden between different districts of the former partitions. Unfortunately, its

adoption and entry into force took place at the very peak of the economic crisis,⁵⁶ so it could not contradict the government's economic recovery programme. To some extent, it was a concession to industrialists and landowners. Apart from the changes adopted in the Act, a number of modifications were also introduced to the technique of conducting insurance business, *e.g.*, the common system of settling insurance contributions by means of accounts.

The assumptions of the Act provoked a lively discussion in the press.⁵⁷ The most frequent objections were the excess of social insurance and overly high charges for insurance itself. The solutions introduced by the Act also did not satisfy the worker milieu. There were protests by left-wing parties and trade unions.

The introduction of a uniform old-age pension insurance for blue-collar workers was certainly a great success. However, it was not fully favourable for them. A significant cost of old-age pension insurance was borne by the insured person. At the same time the sickness insurance contribution was reduced, and the insured person was deprived of influence on the management of insurance institutions. Besides, the benefits were provided at a low level, involving a long waiting period.⁵⁸

Unfortunately, it proved not possible to merge the insurance system for blue- and white-collar workers. Sickness insurance benefits were also reduced.

The 1933 Act played a positive role in the process of unifying social insurance into a single system in terms of contributions and risks.⁵⁹ However, this did not fully integrate the entire insurance system and did not eliminate all the differences between the regulations in force in various districts of the former areas of partition.⁶⁰ Most of those differences were only to be eliminated following the Second World War. It should be noted, however, that considering the scale of the changes introduced, the Act herein described was an important stage in the development of social insurance in the Second Polish Republic.

It should also be stressed that this Act was in force throughout the entire period of People's Poland. The role of this document and its significance were enormous, in particular in the context of the expansion of the social insurance system, which was reflected, *inter alia*, in subsequent amendments to the Act. The social insurance doctrine also referred to its solutions and structures throughout this period.

56 Cf. Z. Landau, *Ubezpieczenia społeczne w Polsce w latach kryzysu gospodarczego 1930–1935*, "Praca i Zabezpieczenie Społeczne" 1968, No. 10–11, p. 43.

57 Cf. *Ubezpieczenia społeczne. Chwiejne i niepewne kroki B.B.W.R. na drogach "sanacyjnej" ustawy scaleniowej*, "Robotnik" 27 January 1933, No. 38; *Przeciwko sanacyjnemu projektowi organizacji ubezpieczeń*, "Robotnik" 2 February 1933, No. 45; L. Landau, *W sprawie reformy ubezpieczeń społecznych i nadmiernego obciążania składkami ubezpieczeniowymi*, "Przegląd Ubezpieczeń Społecznych" 1934, Issue 10, pp. 592–599, and A. Jarosz, *Dyskusja ubezpieczeniowa na łamach "Gospodarki Narodowej" w latach 1931–1939*, "Gospodarka Narodowa" 2001, No. 11–12, pp. 1–14.

58 Z. Landau, *op. cit.*, p. 43.

59 Cf. P. Makarzec, *op. cit.*, p. 207.

60 Cf. T. Zieliński, *Ubezpieczenia społeczne pracowników. Zarys systemu prawnego – część ogólna*, Warszawa–Kraków 1964, p. 43.

At the end of the 1940s and in the beginning of the 1950s, the provisions of the Act largely lost their normative value due to the shift in the model of employee social protection from an insurance system to a system socially protective in nature. This was reflected in the liquidation of insurance funds, contribution integration, the integration of insurance finances into the state budget, the integration of healthcare sector into the state administrative section and the granting of benefits based on social protection principles.

References to the legal and organisational structure of this Act, if only of an ideological nature, can be observed from the mid-1980s onwards. At that time, there was a return to insurance finances being separated from the state budget, and in 1986 the Social Insurance Fund [Fundusz Ubezpieczeń Społecznych] was established.

The impact of the solutions of the Unification Act can also be seen in the regulations/proposals of the social insurance reform of 1999, such as, for example, the division of insurance into sections, contribution division according to risks, and the division of the contribution charges between the employee and the employer, or differentiation of the contribution for accident insurance.⁶¹

The Unification Act was derogated only on 1 January 1999, under Art. 171(1) of the Act of 6 February 1997 on general health insurance.⁶²

61 I. Jędrasik-Jankowska, *Ubezpieczenie społeczne*, Vol. 2, *op. cit.*, pp. 105 and 144.

62 Journal of Laws No. 28, item 153, as amended.

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Rola i znaczenie ustawy z 28 marca 1933 r. o ubezpieczeniu społecznym, tzw. ustawy scaleniowej

Po odzyskaniu niepodległości II Rzeczpospolita stanęła przed problemem istnienia na jej terytorium porządku prawnego odziedziczonego po trzech zaborcach. Sytuacja taka miała odzwierciedlenie również w ubezpieczeniach społecznych, a szerzej w zabezpieczeniu społecznym. Najbardziej rozwinięty system ubezpieczeń istniał na ziemiach byłego zaboru pruskiego. Wiązało się to z tym, że Niemcy były ojczyzną ubezpieczeń społecznych. Mniej rozwinięty system funkcjonował na ziemiach byłego zaboru austriackiego, a prawie wcale nie istniał na ziemiach byłego zaboru rosyjskiego. W II Rzeczypospolitej najwcześniej wprowadzono zcentralizowane ubezpieczenie chorobowe. W styczniu 1919 r. zaczął obowiązywać dekret o ubezpieczeniu chorobowym, zastąpiony następnie ustawą z 1920 r. Prace nad ujednoczeniem ubezpieczeń społecznych toczyły się w latach 1917–1934. Jednym z wyników tych prac było przygotowanie projektu jednolitego ubezpieczenia społecznego dla pracowników umysłowych. W 1924 r. ustawodawstwo poaustriackie dotyczące ubezpieczenia wypadkowego rozciągnięto na ziemie byłego zaboru rosyjskiego. Natomiast z 28 marca 1933 r. pochodzi ustawa o ubezpieczeniu społecznym, tzw. ustawa scaleniowa. Jej największym osiągnięciem było wprowadzenie ubezpieczenia emerytalnego robotników – wprowadzenie go odbyło się jednak kosztem ubezpieczenia chorobowego. Do ubezpieczenia wypadkowego zakwalifikowano ryzyko trzech chorób zawodowych. Ustawa nie przewidywała w stosunku do rent inwalidzkich rozróżnienia na inwalidztwo częściowe i całkowite. Przepisy dotyczące ubezpieczeń społecznych w II Rzeczypospolitej należało scalić, a niekiedy tworzyć na nowo – przed II wojną światową powstało w Polsce w tym celu ponad 100 aktów prawnych.

Słowa kluczowe: ubezpieczenie emerytalne, ubezpieczenia społeczne, II Rzeczpospolita, ustawa scaleniowa