"There is no holding anymore on this slippery slope". The "euthanasia" crimes of the National Socialists

The subject I want to talk about today is a crisis phenomenon of the modern age that has evolved from the materialistic, even economistic mindsets of the 19th century. The individual was no longer considered a priori as integrated in the human species, but instead was judged by his concrete usefulness for specific purposes. Respect for individuals and for the inviolability of their rights was sacrificed to the community – the National Socialists spoke of a "Volkskörper" (a healthy body of people) that had to be maintained as a healthy breed. A "new human being" was to be created – the individual no longer counted.

As far as I can see, there were above all two potentials for resistance to this in Germany – the Christian faith and family ties. While individual church representatives stood by the image of God in human beings, family members saw something of themselves in their relatives. Responsibility before God and brotherly love – these two aspects mobilised opposition to "euthanasia". In the occupied areas doctors and nurses even resisted vigorously. They saved patients by sending them home – driven mostly not by faith or by love, but instead by their medical conscience and human solidarity.

The question of using people as objects for a particular purpose still stands. We must decide whether we are going to succumb to this or whether we want to protect the unconditionality and sovereignty of human life.

1 From ideology to mass crimes: "racial hygiene", "forced sterilisation" and "euthanasia"

1.1 "Racial hygiene" – An ideology in the spirit of the times

Already at the end of the 19th century an ideology known as eugenics – designated as "racial hygiene" in German – began to spread in Europe and the USA. Its aim was to prevent hereditary diseases by making their carriers infertile. However, the differing evaluation of different "races" is discernible here too – in other words this was a matter of excluding all who spoiled the image of a "race" defined as "valuable".

Thus it was certainly in line with a certain zeitgeist that many physicians in Germany were followers of eugenics. Even before the National Socialists took over power in 1933, individual scientists, social policy specialists, doctors and teachers began to collect data concerning their clients. These surveys formed the basis for the "heredity files" and "heredity archives" subsequently created by the Nazis,

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1 Rosemarie Schlenz (*1930), grew up in Forst/Lausitz in the same house as my father. She was presumably murdered in Brandenburg in November 1940.

which in turn represented the conditions for forced sterilisations, commitment to concentration camps and mass murder.³

The efforts of the eugenicists coincided with the plans of Adolf Hitler, such as he explained for instance in 1929 – in other words before he came to power – at the Nuremberg Party Conference of the NSDAP: "If Germany were to have one million children every year and eliminate 700,000 to 800,000 of the weakest, then the end result would probably even be an improvement of strength and vigour."⁴ Systematic murder – "euthanasia" – could already be sensed here.

A word about the physicians: not only were many of them disciples of "racial hygiene" concepts and only waiting to be able to finally implement these while remaining exempt from punishment, but in addition they were the professional group that displayed higher than average membership of the NSDAP in relation to their share in the population.⁵ Accordingly two ideological motives meet here – eugenics and National Socialism – that reinforced one another and helped to explain why many physicians collaborated whole-heartedly first in forced sterilisations and then also in "euthanasia". In order to mainstream "racial hygiene" completely in the medical profession, it was made a teaching subject in medical training and as of 1936 an examination subject too.⁶

1.2 Radicalisation – Forced sterilisation

Under the National Socialists it was possible not just to realise the eugenic programme agenda, but also to radicalise it. While for example in the USA and Denmark sterilisations indicated on "racial hygiene" grounds were by law not to be carried out by force, in the ‘Law for Prevention of Offspring with Hereditary Diseases’ of 14 July 1933 the use of force was expressly allowed. The scope of sterilising operations in the German Reich was vast too. In 1934 alone, 32,268 people were rendered infertile – considerably more than in the USA in the same period.⁷

The sterilisations were carried out surgically or by radiation. Hereditary diseases in the meaning of the law were considered to be "congenital feeble mindedness", schizophrenia, "manic depressive insanity", hereditary falling sickness, hereditary St. Vitus’s dance (Huntington’s disease), hereditary blindness, hereditary deafness, severe hereditary physical deformations, severe alcoholism. Even pupils at special schools were observed to see whether they should not be sterilised as feeble-minded. In addition people stigmatised as "asocial psychopaths" who did not pursue any regular gainful occupation or who had a criminal record could be included in the forced sterilisations as "morally feeble-minded". Sex offenders were castrated.⁸ Sinti and Roma too, who were branded as "asocial" – simply because they were Sinti and Roma – and were assumed to have a pathologically criminal nature, became victims of the forced sterilisations. About one to two percent of the women

⁵ Schmuhl, Rassenhygiene, p. 131
⁶ Ibid., p. 144
⁸ Schmuhl, Rassenhygiene, p. 156f.
died in the intervention; the others had to cope with the consequences for the rest of their lives. By 1939 altogether 200,000 to 350,000 people within the German Reich and about 60,000 people in Austria had been sterilised. Other estimates assume up to half a million persons affected.  

In the Encyclopaedia of National Socialism it is noted that the scientific character of the National Socialist genetic health theory was already subject to contemporary doubts. "The seventh International Congress for Genetics held in Edinburgh in 1939 published a manifesto, the Edinburgh Charter, protesting against the 'unscientific doctrine that good or bad genes are the monopoly of particular peoples and persons with features of a given kind'. Furthermore, the hereditability of generally condemned behaviour such as anti-social conduct or delinquency and hence their elimination by preventing reproduction with reliable scientific methods had not even been examined yet, let alone ascertained."

1.3 The secret war – "Euthanasia"

After the Germans had invaded Poland on 1 September 1939 and thus started the Second World War in Europe, Hitler also declared a secret war against the Germany's own people. Backdated to 1 September 1939, he wrote on his private letterhead in October 1939: "Reichsleiter Bouhler and Dr. Brandt, M.D. are charged with the responsibility of enlarging the authority of certain physicians to be designated by name in such a manner that persons who, according to human judgment, are incurable can, upon a most careful diagnosis of their condition of sickness, be accorded a mercy death."

Hitler thus launched the transition from the prevention of so-called "unworthy to live" lives to their destruction. By contrast with forced sterilisation, there was no legal foundation for "euthanasia" – simply a further euphemism for "mercy killing" – up to the end of the Third Reich.

Already in July 1939 there had been a meeting in Berlin with twenty physicians and psychiatric hospital directors at which Hitler’s intentions had been reported and the most effective methods of killing had been discussed. It was left to the discretion of those present whether they wanted to collaborate in this programme. Public awareness of this "euthanasia" conference – held two and a half years before the conference on the "Final solution to the Jewish question" in Berlin-Wannsee – remains virtually nil to the present day, which may well be partly connected with the widespread suppression of the "euthanasia" crimes altogether.

The mass murder of patients in psychiatric facilities had been prepared since 1937 by relocating patients from nursing homes into other institutions. At the same time the National Socialist regime

9 Vasold, Medizin, S. 243  
10 Ibid  
12 Although there were corresponding efforts in the Ministry of Justice, Hitler rejected these. Weiß, Konrad, Lothar Kreyssig. Prophet der Versöhnung, Gerlingen 1998, p. 166f.  
13 Klee, Ernst, “Euthanasie” im Dritten Reich. Die "Vernichtung Lebensunwerten Lebens", Frankfurt am Main 2010, p. 83ff and p. 119
ousted church organisations from institutional care. The National Socialists had systematically withdrawn funds from the psychiatric hospitals and nursing homes already on taking over power in 1933. This scarcity of resources had a dramatic effect on food supplies for patients. For example in Hesse the daily allowance for meals for patients dropped to below 40 Pfennigs – adequate food supplies were thus no longer possible. Malnutrition and patient deaths were the consequence. This was accompanied by degrading propaganda that spoke of “useless eaters” and “ballast individuals”. Racial hygiene motives were linked with economic – and since the beginning of the war with military (the demand for military hospital beds) requirements – so that every National Socialist member of the national community would necessarily show understanding for one of these reasons.

2 “Euthanasia” in occupied Poland, in the German Reich and in the occupied Soviet Union

2.1 The first mass murders of psychiatric patients in occupied Poland

The first massacre of psychiatric patients was carried out in occupied Poland. The patients at the clinic in Wejherowo/Neustadt near Gdynia/Gdingen in West Prussia (which became part of Poland after the First World War) were murdered already before Poland capitulated on 27 September 1939. A German military hospital was subsequently established there. This action was followed by one at the Kocborowo/Konradstein Clinic – with 2,100 patients the largest in Poland. The patients and the psychiatrist Józef Kopicz were shot dead in the Forest of Szpegawsk by an SS unit. The same fate was suffered by the over 1,000 patients from Swiecie/Schwetz with their institute director Dr Józef Bednarz. The German self-defence league supported the SS; the Wehrmacht provided the means of transport.

That same autumn in 1939, patients were selected from clinics in Pomerania, in other words from the German Reich, by the institution directors and transported to German-occupied West Prussia where they were shot. In the Forest of Piasznicz in the district of Neustadt, the SS shot patients from Lauenburg, Obrawalde, Trepтов, Ückermünde, Stralsund and Kückenmühle near Stettin. The budget of the Province Association for 1940 states: "... after completing the Polish Campaign over 2,300 mentally ill from Pomeranian institutes accommodated outside the Province". "Accommodated" meant murdered. From 9 February to mid-March 1940 a further at least 1,200 patients from Lauenburg, Obrawalde, Trepтов and Ückermünde were murdered in the forests near Koscian in the Reich administrative district Wartheland (annexed Polish province of Poznan) – this time by gas.

In Fort VII in Poznan, which had been used as a concentration camp since October, the SS conducted the first gassing of psychiatric patients with carbon monoxide in autumn 1939. After this, patients were murdered in mobile gas vehicles. One vehicle bore the colourful lettering "Kaisers Kaffeegeschäft".

14 Weiß, Kreyssig, p. 159; Schmuhl, Rassenhygiene, p. 149
15 Schmuhl, Rassenhygiene, p. 149
16 see Vasold, Medizin, p. 239 and 242; Hohendorf, “Euthanasie”, p. 16; in 1941 thee was a pro-euthanasia propaganda film “Ich klage an” (English: “I accuse”). Vasold, Medizin, p. 248
17 Klee, “Euthanasie”, p. 94
18 quoted from Klee, “Euthanasie”, p. 95
In the Reich administrative district Wartheland established by the German occupiers the patients from the following clinics were recorded by the gassing murders:

- Owinska/Treskau: 1,000 patients, mid-October to mid-November 1939
- Dziekanka/Tiegenhof: 1,043 patients, December 1939 to January 1940
- Koscian/Kosten: 534 patients, January 1940
- Kochanowka near Łódź: 692 patients, March 1940
- Warta: 499 patients, 2 to 4 April 1940
- Gostynin and Srem

2.2 "Euthanasia" in the Reich

In the German Reich "euthanasia" was organised bureaucratically. A sub-division of the Führer’s Reich Chancellery was responsible. As of April 1940 it was located at Tiergartenstrasse 4 in Berlin, which is why "euthanasia" was also called "Action T4". In a first step all the psychiatric hospitals and nursing homes where "mentally ill" persons were permanently accommodated were recorded. As of October 1939 registration forms were sent to the hospitals and homes and often had to be completed for all patients within a period of just a few weeks. These registration forms were then sent to three out of altogether 42 appraisers who had to decide solely on the basis of these forms whether the patients were "worthy to live" or "unworthy to live". The final judgement on the relevant persons was then taken in Berlin after comparing the three "expert opinions". To camouflage the action the organisers of the patient murders adopted a letterhead as "Reich Working Group for Psychiatric Hospitals". In November 1939 the bogus company "Gemeinnützige Kranken-Transport-GmbH" ("public benefit ambulance company", known by its acronym Gekrat) was established. It operated the buses which came with painted windows so that nobody could look into or out of them. The "grey buses" were known and feared in the hospitals and homes right up to the end of the war.

In January 1940 the first gassings of patients were carried out in Brandenburg. August Becker, who had already been involved in gassings in Poznan, and the chemist Dr Albert Widmann, who subsequently collaborated in gassings in the occupied Soviet Union, took part. Altogether six psychiatric hospitals in the Reich were converted to murder centres by setting up gas chambers there. The mass killings began in January in Grafeneck in South-West Germany, in February in Brandenburg near Berlin, in May in Hartheim near Linz and in June in Pirna in Saxony. As of November 1940 patients in Bernburg in Thuringia and from January 1941 onwards in Hadamar in Hesse were murdered. In order to mask the routes taken by the patients to their death, starting in autumn 1940 they were first transferred to so-called intermediate institutions, from where they were then sent to the actual killing institutions. These intermediate institutions had first been cleared by murdering them empty.

The patients were killed immediately after arriving at the killing institute. After disembarking from the buses they had to disrobe in an antechamber. A brief inspection by a physician before they entered the gas chamber simply served two purposes: to identify patients with gold teeth, and to

19 Ibid., p. 99ff.
21 Ibid., p. 155ff. and 215ff.
invent natural cause of death that sounded as most plausible as possible. The physician who operated the gas tap looked through an inspection window until nobody was moving anymore. After this the chamber was ventilated, opened, the corpses removed, the gold teeth broken out and the corpses burned. Urns with any kind of ash were delivered to the families at cost. The cause of death, time of death and place of death were faked. For this purpose special registry offices were set up at each killing institute.\(^\text{22}\) The families of those murdered were sent a "letter of condolence" together with the death certificate: "We regret to have to inform you today that your daughter Anneliese K. died unexpectedly on 20 February 1941 as a consequence of toxic diphtheria. Her transfer to our hospital represents a war measure...". Immediate cremation was justified with the need to avoid contagious diseases.\(^\text{23}\)

Despite all the attempts at disguising it, the "Reich secret" soon became public – it was no longer secret already in February 1940. On the one hand of course, residents in the vicinity of the hospitals, especially of the murder hospitals, realised something of what was going on. But some relatives of the murder victims too made occasionally obstinate enquiries and soon found out that they had been lied to. On 24 July 1940 Minister of Justice Gürtner wrote to Minister of State Lammers: "The present process has become quickly and widely known, not least due to the attempts at masking it."\(^\text{24}\) A year later, on 3 August 1941, Bishop von Galen in Münster held a number of sermons that have become famous in which he condemned "euthanasia". "If we are allowed to eliminate unproductive people, then woe betide our brave soldiers who come back home having been seriously injured in the war, as cripples, as invalids! ... then we shall all be up against the wall when we are old and infirm and thus become unproductive."\(^\text{25}\)

Probably in order to avoid disquiet in the population, "Action T4" was discontinued in August 1941. However the murdering continued – decentrally in hospitals, clinics and homes – through food deprivation and medication. This murdering is generally described as wild "euthanasia".\(^\text{26}\)

As the Bishop of Münster had feared, badly injured soldiers returning home were indeed subjected to "euthanasia" – after all, wouldn't disturbed and dithering people be likely to demoralise the others? From time to time members of the SS and the special commandos were unable to bear their murderous deeds and became psychologically ill. They were excluded from the Waffen SS, transferred to the psychiatric section and murdered. In addition invalids from concentration camps were selected in what was known as "Action 14f13" (a reference to the file number) and murdered, as were forced labourers who were mentally confused and those suffering from tuberculosis.\(^\text{27}\)

At the same time as "Action T4", mentally or physically disabled children were murdered in 30 "children’s departments" established for this purpose. In a strictly confidential decree from the Reich Minister of the Interior dated 18 August 1939, all midwives and physicians were called upon to report

\(^\text{22}\) Ibid., p. 134ff.
\(^\text{23}\) Klee, Dokumente, p. 139ff
\(^\text{24}\) Nbg. Dok. PS-627, quoted after Klee, “Euthanasie”, p. 183
\(^\text{25}\) Klee, Dokumente, p. 193ff, here p. 197
\(^\text{26}\) Klee, “Euthanasie”, p. 263
\(^\text{27}\) Ibid., p. 450, p. 305ff, 280ff. and 299ff.
children with deformities and certain diseases or disabilities. At least 10,000 children fell victim to these murders.\textsuperscript{28}

Recent research assumes that more than 216,000 psychologically, mentally and physically sick people were murdered through "euthanasia" in the German Reich.\textsuperscript{29}

2.3 Mass murders of psychiatric hospital patients in the Soviet Union

Already shortly after the invasion of the Soviet Union, Wehrmacht and task force groups – often cooperating with each other – began murdering psychiatric patients. The first mass murder was carried out in the Army Group Centre zone as early as July 1941. Members of the Wehrmacht shot dead 464 psychiatric patients from Choroszcz (before World War II Poland, after that Soviet Belarus).\textsuperscript{30}

In August 1941 Reichsführer SS Heinrich Himmler attended an execution of prisoners in the prison of Minsk and suffered a nervous breakdown. When he visited the psychiatric colony Nowinki near Minsk, he issued the order "to liberate" the sick there "from their suffering".\textsuperscript{31} The Commissioner of the Reich Detective Police Office and Commander of task-force Einsatzgruppe B, Arthur Nebe, had 24 patients from Nowinki taken to a bunker in the forest and murdered there with explosives. Five or six people survived with severe injuries, and a second set of explosives was applied. The following day Jewish inmates had to gather up the pieces of corpses, some of which were hanging in the trees.\textsuperscript{32}

After this Nebe and his staff drove to Mogilev, where he wanted to carry out murdering of sick people with vehicle exhaust gases. For this purpose he had a room on the ground floor of the psychiatric clinic sealed off and equipped with pipes that could be connected to an Adler car. Albert Widmann played a major part here – he had already been involved in gassing in Brandenburg. Arthur Nebe had this experiment filmed. The film was found in his estate and was used as evidence for the prosecution in the Nuremberg trial of major war criminals. The clip lasting a few seconds shows emaciated people, naked or wrapped in blankets, who are carted in and led to the gassing room. They look unsuspectingly at the camera.\textsuperscript{33} The exhaust fumes of the Adler car were too weak. The people in the sealed room only died after a truck was connected.\textsuperscript{34} Already before 17 September 1941, a presumed 800 chronically sick and 60 Jewish patients were murdered in the gas chamber in

\textsuperscript{28} Schmuhl, Rassenhygiene, p. 183; Schneider, Frank, Cranach, Michael von, In Memoriam. Ausstellungskatalog, Berlin 2010, p. 8
\textsuperscript{30} Gerlach, Christian, Kalkulierte Morde. Die deutsche Wirtschafts- und Vernichtungspolitik in Weißrußland 1941 bis 1944, p. 1067
\textsuperscript{31} Ibid., p. 1068
\textsuperscript{32} Ebbinghaus, Angelika und Gerd Preisler, Die Ermordung psychisch kranker Menschen in der Sowjetunion. Dokumentation, in: Aussonderung und Tod. Die klinische Hinrichtung der Unbrauchbaren, Berlin 1985, p. 75-107, here p. 84ff
\textsuperscript{33} I wish to thank Gerrit Hohendorf for making this film available to me.
the presence of Nebe and Widmann. Between the end of November 1941 and the end of January 1942 the remaining over 250 patients in the clinic were murdered too, probably in gas vehicles.\textsuperscript{35}

Patients capable of insights suspected what was awaiting them, as for example the words handed down from a patient from Kiev show: "A young girl, the patient Ja., understood despite all the efforts of the doctor that death was awaiting her, came out of the room, embraced the doctor and asked quietly: 'Is this the end?' Sick, deathly pale, she turned to the vehicle and got in without accepting any help."\textsuperscript{36}

Psychiatric patients were murdered with gas for example in Stavropol’, Kiev and Simferopol’ too. Mobile gas vehicles were used for this purpose. \textbf{In many clinics there were two waves of murders, in others even more.} The first wave was death by starvation for many patients because the occupiers had rationed or completely confiscated food. This happened in Vinnicja, a well-equipped clinic with arable fields, garden, pigs and a dairy, as well as additional food supplies for six months. More than 1,800 patients lived there. The Germans confiscated everything and prescribed a bread ration of 100 grams per day. When Professor Gan thereupon requested that the ration be increased because the patients would otherwise die of starvation, District Commander Margenfeld replied: "For psychologically sick even 70 grams of bread are too much."\textsuperscript{37} Many patients starved to death; 800 patients were shot, 700 were poisoned through injections. The clinic was turned into a German sanatorium and the "Waldhof" officers’ mess for officers from Hitler’s unit.

This is just one further example out of many. \textbf{Often the first victims among the patients or the children in institutions were Jews,} as in the case of the Preslavl psychiatric clinic in the district of Zaporiže. In Igren’sk near Dnipropetrivsk, 200 patients were subjected to death by freezing in December 1941. This list could be continued over many pages.

\textbf{As in the Reich, the murdering of psychiatric patients in the Soviet Union married ideological and "utilitarian" considerations.} In the latter case the Wehrmacht confiscated food supplies wherever it could, for it had to feed itself on what the occupied country could offer and often set up military hospitals in clinics and homes that had been emptied by murdering. However, the ideology too frequently shone through. For example a doctor in Kiev who asked about the reason for the murder campaign received the reply: "hygienic race measure". In Kursk, Commander Flach and Garrison Physician Kern explained that under German law, psychiatric patients represented "ballast" for the community and had to be exterminated, and that as the Germans killed such sick persons back home in Germany, this applied all the more in occupied territory.\textsuperscript{38}

\textbf{The psychiatrist Heinz Faulstich assumes in his research that 20,000 psychiatric patients were murdered in Poland and 20,000 more in the Soviet Union. To these must be added 40,000 victims of "euthanasia" in occupied France.}\textsuperscript{39}

\begin{thebibliography}{99}
\bibitem{35}Gerlach, p. 1069f.
\bibitem{37}Fedotov, O gibeli, Sp. 455
\bibitem{38}Ibid., p. 452 and p. 447
\bibitem{39}Faulstich, Zahl, p. 228
\end{thebibliography}
3 Afterwards: Prosecution – Compensation? - Remembrance

In the Berlin "euthanasia" conference of July 1939 already mentioned, participants had been assured freedom from punishment – and even after 1945 former Nazis – whether physicians in the witness box or legal professionals – ensured that their comrades were not sentenced. **Most of the trials against "euthanasia" perpetrators were held in West and East Germany up to 1952;** and in the West as in the East, many of those sentenced were granted amnesty already in the mid-1950s. Altogether 90 persons were sentenced. In the Nuremberg doctors’ trial, which the Americans held from December 1947 to August 1948, Professor Karl Brandt and Viktor Brack were sentenced to death and executed for National Socialist "euthanasia".  

And the victims? How were they treated after the liberation? In a commentary on the Federal Compensation Act of 1965 it is stated: "The killing of mentally ill persons (known as euthanasia) is regularly not prosecuted for reasons stated in § 1 and therefore does not justify any claim for compensation by survivors. A hardship allowance can be granted if the survivors were maintained by the individual killed. This presupposes that the mental illness could be cured and the person killed would subsequently have been able to maintain his survivors by gainful occupation. Under medical aspects alone this evidence can hardly be presented." This commentary with its almost unrivalled cynicism still describes legal reality in Germany.

In the year 2010 the President of the German Society for Psychiatry, Psychotherapy and Neurology (DGPPN) apologised to the victims and their families: "In the name of the German Society for Psychiatry, Psychotherapy and Neurology I beg you, the victims and their families, for forgiveness for the suffering and injustice that was brought upon you in the National Socialist era in the name of German psychiatry and by German psychiatrists, and for the silence, trivialising and suppression by German psychiatry that went on for far too long in the period after this."  

And public remembrance? There are now memorial sites in all six former T4 hospitals. Where the villa Tiergartenstrasse 4 used to stand, in front of the Philharmonie in Berlin today, there is a memorial – so inconspicuous that it is only seen by those who know it or look for it. There is another memorial in Mogilev, which was inaugurated in 2009 with participation by the patients there. It goes back to the joint initiative of Belarusian and German psychiatrists who cooperate on specialist matters in a Mogilev-Heidelberg partnership and have not turned a blind eye to the history. And there is a memorial in Kharkiv – inaugurated in 1945. In Kiev there are several memorials in the grounds of the psychiatric clinic Pavlov Klinik in Frunse Street in remembrance of the murder of patients and clinic staff.

Allow me to close with the words of Tanja Muster, a lady suffering from spastic paralysis:

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41 Bundesentschädigungsgesetz (in der Fassung des 2. Änderungsgesetzes: BEG-Schlußgesetz), Kommentar von Walter Brunn und Richard Hebenstreit, Berlin 1965, p. 418  
43 Fedotov, O gibeli, S. 453  
44 Quoted after the unpublished greeting by Bernhard Conrads at the event “Psychiatrie im Nationalsozialismus” in Berlin on 30.09.2011
At the age of 15 I would have died without medical progress.
60 years ago I would have been gassed on the grounds of ideological progress.
In a few years I would not be born because of both of these.
How shall I live with this past in future?