



Germany and Active Euthanasia

Pre-Hitler Germany

Useless Eaters video and slideshow <http://www.regent.edu/acad/schedu/uselesseaters/>

In 1920, the concept of living beings not worthy of the life they embodied gained impetus with a tract published by two university professors, Karl Binding and Alfred Hoche. *Permission for the Destruction of Life Unworthy of Life* articulated key implications for people with disabilities.

Binding and Hoche called for the killing of people with disabilities, whom they viewed as "incurable idiots" having no will or sense of living. Killing them, therefore, was hardly involuntary euthanasia, that is, the imposition of others' will upon them. This shifted the burden of human existence from simply being alive to requiring an explicit justification for living.

For Binding and Hoche, therefore, the right to live was to be earned, not assumed. One earned the right to live by being a useful economic contributor to society. Chief among the individuals they saw as being useless were those who seemed to have little or no human feeling, or in their terms, "empty human husks" whose only societal function was the consuming of precious resources while contributing nothing to society in return.

In Binding and Hoche's terms, they were "useless eaters" whose lives could be tossed overboard to better balance the economic ship of state.

Binding and Hoche's polemic was furiously debated across Germany. One strident critic of the Binding and Hoche position was Weald Meltzer, the director of an asylum in Saxony, who held that many of his charges did indeed have the ability to enjoy life inasmuch as their disabilities would allow. In an attempt to support his belief, Meltzer surveyed the parents of his patients to ascertain their perceptions of disability and euthanasia.

To Meltzer's astonishment, the survey results showed a widely held contradiction among the parents that although they had strong emotional ties to their children, they simultaneously expressed, with varying degrees of qualification, a "positive" attitude toward killing them.

Meltzer's survey was later used as a major rationale for the killing of thousands of people with disabilities under the National Socialists, whose long-held social perceptions of difference coupled with official state prejudice delineated a series of genocidal markers that doomed significant numbers of people with disabilities during the Nazi era.

The outbreak of war in 1914 precipitated significant changes for people with disabilities across Germany. For asylum inmates the most debilitating outcome was the wartime rationing of food. Medicine was also relatively scarce for those in custodial care.

During and after World War I, attempts were made to distinguish those who could at least be partially rehabilitated - "the curable" - from those who could not - "the incurable".

One propaganda poster, entitled "The Fearful Legacy of an Alcoholic", alleged that an alcoholic will have 894 descendants, 40 of whom will live in extreme poverty, 67 will be hardened criminals, 7 murderers, 181 prostitutes, and 142 beggars, the cost of which would be 5 million Reich Marks.

The juxtaposition of severe economic constraints, crowded asylums, the attachment of levels of economic viability to human worth, and the sense that people with disabilities formed a burdensome and often criminal element in society all significantly added fuel to ethical debates concerning euthanasia and sterilization.

By the late 1930s, there was open discussion among many asylum administrators about actually killing inmates.

Social Darwinism

Scientific research of the late 19th century was overshadowed by Darwin's ideas of biological determinism, including its most radical form, eugenics, which had begun to establish genetic markers predictive of physiological characteristics.

Eugenics was described by its leading American proponent, Charles Davenport, as ". . . the science of the improvement of the human race by better breeding." It is basically improving heredity through selective breeding.

Darwin emphasized species' struggle for survival where only the strongest and most able would survive to breed superior future generations, thereby safeguarding the long term survival of that species. These ideas as applied to humans were dubbed "Social Darwinism" which held that in humans both biological and social traits were passed from one generation to the next.

Darwin's ideas gained widespread acceptance in Germany long before Hitler's National Socialist party swept to power in 1933.

Social Darwinism appeared to have immediate and effective application for a number of societal problems, including hereditary physical and intellectual traits (e.g., cerebral palsy, mental retardation) as well as "hereditary" social traits (e.g., socially inappropriate or criminal behavior). Here the rationale was simple: All visible traits of human difference, including behavioral traits, were genetically determined. Thus, just as eye or

hair color were genetically determined, so was drunkenness, sexual promiscuity, and any other socially inappropriate behavior.

It was a simple extension of these perceptions to the idea that an effective way of controlling or eliminating these problems was by sterilization, incarceration, or death.

Similar rankings of desirability were soon applied to entire groups of people, including grouping people by class. That is, the more "inferior" (i.e., lower class) the person, the more likely it would be that they would engage in undesirable (e.g., sexual promiscuity) and often criminal behavior (e.g., prostitution). This logic was then extrapolated to show that because many individuals from impoverished backgrounds committed undesirable social and criminal acts, versus far fewer among the wealthy, it was assumed that the entire lower class was characterized by criminality.

People with disabilities, many of whom displayed inappropriate behavior or abnormal physical appearance, were among the groups of people thus classified. Based on these perceptions of difference, the next logical step was to control and eventually eradicate undesirable biological and social differences through eugenics.

Hitler's Ideas

Discussions of eugenic sterilization in Germany were common in the early 1920s although sterilization was illegal in Germany until Hitler became Chancellor. One of the Nazis' first official acts was to enact the sterilization law of 1933.

In July 1933, the Nazi government passed the "Law for the Protection of Hereditarily Sick Offspring." This law called for the compulsory sterilization of all people with diseases that the Nazis thought of as hereditary, i.e. mental illness, learning disabilities, physical disabilities, epilepsy, blindness, deafness, schizophrenia, and depression. Even alcoholism was covered by the law.

People suffering from these diseases or afflictions were known as "useless eaters" who led "unworthy lives," which was meant to highlight their burden on society.

This was used until 1940 and over 360,000 sterilizations were carried out.

The sterilization law reached many categories of the "hereditary sick," including the sterilization of persons with mental retardation (200,000), schizophrenia (80,000), Huntington's chorea (600), epilepsy (60,000), blindness (4,000), hereditary deafness (16,000), grave bodily malformation (20,000), hereditary alcoholism (10,000), and other specified groups.

Also in 1933, the Nazis enacted the "Law Against Dangerous Habitual Criminals," a law that further blurred the distinction between bona fide criminal behavior and inappropriate behavior that characterized many people with disabilities. The law stipulated that these

criminal asocials could be committed to state asylums, could be held in indeterminate protective custody, and, in the case of sex offenders, officially castrated.

The 1935 Nuremberg Laws, while directed primarily at Jews, also regulated marriage among people with disabilities. For example, the Marriage Health Law prohibited marriage between two people when either party suffered from some form of mental disability, had a "hereditary disease" as previously defined by law, or when one or both partners suffered from a contagious disease, particularly tuberculosis or venereal disease.

War, Hitler reasoned, would provide both a distraction and an excuse for officially killing those deemed undesirable. One such factor was the use of propaganda to convince the public of the desirability of some lives over others.

German literature and art soon celebrated lives unworthy of living in a host of propagandistic projects. A 1937 propaganda film, "Opfer der Vergangenheit" (The Victim of the Past) compared healthy, ideal German citizens with institutionalized people with severe disabilities and adding that Jewish mental patients were creations in violation of natural law. The film proposed the solution of compulsory sterilization.

Propaganda was not limited to film, however, but also appeared in German literature. An example of this work was the novel "Sendung und Gewissen" (Mission and Conscience) which was turned into a very popular film, "Ich Klage An!" (I Accuse). In the story, a young beautiful woman suffering from multiple sclerosis decides that her life is no longer worthy of living and requests a "merciful death" at the hand of her husband, a physician. In a grim death scene climax, he administers the fatal injection to his wife. At his trial, the doctor heroically refuses to allow his colleagues to invent an alibi for the murder, challenging the court by asking: "Would you, if you were a cripple, want to vegetate forever?" Predictably, the court acquits the physician because his actions were merciful, not murderous, a notion reinforced in the closing scenes where the words of the Renaissance physician Paracelsus are recalled, that "medicine is love".

By 1938 requests for "mercy" killing were increasingly being received by Nazi officials, including requests from a woman ill with terminal cancer and from a man who had been severely injured and blinded in a construction accident. The state was also receiving similar requests from parents of newborns and young infants with severe physical and intellectual disabilities.

Two cases are most often cited with the public believing in "mercy killings." In 1938, a father justified shooting his son to death in his sleep by suggesting that his son's emotional disabilities made the son "mentally ill in a manner that threatened society". At trial, the father argued forcefully that the son had been an unnecessary heavy financial burden on the family. The father was sentenced to only three years in prison, of which he served one.

The second case was that of the Knauer child. The Knauer child was a frail child with several severe disabilities. The young girl was blind, without one leg and part of an arm,

severely mentally retarded, and suffered from chronic convulsions. Her father petitioned the Nazi authorities to grant her a "merciful death" but received no official response.

In the winter of 1938-1939, the Knauer child was admitted to the University of Leipzig's Pediatric Clinic after attending physicians discussed her plight with her persistent father. Aside from the child's obvious physical and intellectual disabilities the father asserted that the child, by remaining at home, was causing his wife significant psychological and emotional stress. He requested the physicians proceed by "putting it to sleep."

Initially, the doctors refused. Undaunted, the father petitioned Hitler directly to sanction the child's death. Hitler's personal physician, Karl Brandt, was dispatched to Leipzig to examine the child and to evaluate the extent of the child's disability. Brandt, with the understanding of Hitler, instructed the attending physicians, in the name of the state, to "carry out euthanasia" via lethal injection.

In May 1939, Hitler ordered the creation of an advisory committee that would pave the way for the widespread killing of children with disabilities.

The children's killing program was to report directly to Hitler's Chancellery through a front organization under the pseudoscientific moniker of the Committee for the Scientific Treatment of Severe, Genetically Diseased Illnesses.

On August 18, 1939, this committee produced a secret report which was disseminated to all state governments requiring that all midwives and physicians who delivered infants with obvious congenital disabilities were to register these children and the nature of the disability. This directive applied to children up to the age of three.

Across Germany, these new requirements were officially added to other information routinely required by the state at the birth of any child such as evidence of venereal or other contagious diseases. As added incentives, midwives were paid for every infant with disabilities so referred. Failure to report these cases resulted in substantial fines. Later this directive would also require teachers to report these disabilities among their students in schools.

Information on the registered children was returned to the Reich Health Ministry in Berlin where a panel of three "medical experts," either physicians, psychiatrists or a disparate array of related professionals sorted the children's records into three groups.

Children were to be killed if they were identified for "treatment," "disinfection," "cleaning," "therapy," or "selection," all Nazi euphemisms for extermination. Unanimous votes were required for each child. Decisions were made exclusively on the basis of the information on the registration form, thereby transforming life and death decisions by the state into an administrative exercise.

Those designated for extermination were transferred to one of 28 facilities where they were housed in specially designated killing wards.

The methods of killing at the institutions varied. In some instances, children were simply starved to death although it was not considered ideal because it took too long. However, starvation did allow these murders less chance of detection.

Other methods included allowing children to die of exposure in the cold German winters by turning off all heat in the institution. At several asylums children perished after being administered chemical warfare agents. A more grisly approach involved a method reserved for children who were resistant to other poisons or, because of their disability, were unable to swallow the poison in pill form: fatal cardiac injections directly into the heart.

As the condition of the child deteriorated, the parents would be informed that their child was seriously ill, with a quick follow-up via a standardized letter announcing the child's death before parents could arrange to visit their sick child. This letter always noted that the child had died suddenly and unexpectedly of one of a number of diseases. Popular choices included brain edema and appendicitis. The favorite cause of death, however, proved to be communicable disease which necessitated immediate cremation.

Not all children were immediately cremated in spite of this assurance already having been relayed to their families. Instead, they were autopsied in the interests of "science" by Nazi scientists attempting to find obtuse causes for the child's disability.

By December 1940, it was officially permissible to include children older than 3 for killing, and by late 1941, children and adolescents up to 17 years of age were also ensnared.

Initially, Jewish children were excluded from this program because they did not deserve this "merciful act." By 1943, however, just before the program was discontinued, it was extended to include healthy children of "unwanted races."

The T-4 Euthanasia Program

The Nazi euthanasia program quickly expanded to include adults.

A letter from Hitler, dated September 1, 1939, the day of the outbreak of the Second World War, was actually written a month later and backdated to imply that it was part of the war effort instead of the culmination of years of prejudice against people with disabilities. The letter said, "...those suffering from illnesses deemed to be incurable may be granted a mercy death."

The German government established, under the Reich Chancellery, the Euthanasia Program. The headquarters of the operation were at Tiergartenstrasse 4, Berlin and the code name for the program was derived from that address -- T-4.

Initially, efforts to establish the adult killing program included augmenting the three-man panels that had decided the fate of so many children. Swiftly, high level officials agreed

the need to free up hospital beds and nursing staff for war casualties was urgent, though, and the adult program took on a different tone.

This program was first put to the test in north eastern Germany and in occupied Poland in early January, 1940. Field officers reported to Himmler, for example, that there had been "the elimination of approximately 4,400 incurably mentally ill from Polish insane asylums." In this action, patients from several asylums were rounded up, taken to nearby woods and individually shot to the back of the head. Between 1939 and 1944 almost 13,000 Polish psychiatric patients were killed in this way.

However, in such instances, it quickly became evident that the perpetrators' close proximity to the resulting gore exacted a heavy psychological toll that could only be ameliorated by less grisly murder methods.

The logistical necessities of killing large numbers of asylum inmates was also problematic within Germany itself. It was decided that carbon monoxide gas would be the most effective. The choice of gas was reinforced after attempts to destroy groups of Polish asylum inmates by tying several of them together and blowing them up with dynamite proved too unsavory.

A human experiment on the effectiveness of the gas occurred in January, 1940. A number of high level officials gathered at Brandenburg, a defunct prison near Berlin. Approximately 20 naked asylum inmates were herded into a prototypical gas chamber by psychiatric nurses. The enthusiastic onlookers watched closely as the inmates died from carbon monoxide poisoning.

This gassing process was then repeated several times to refine its efficacy. Soon thereafter, gas cylinders were delivered to six regional killing centers across Germany. The first center to engage in experimental gassing and which quickly got the adult program underway occurred at an isolated castle at Grafeneck, which for many years after its purchase by a religious order had served as an asylum for persons with mental retardation.

The euphemistically named Community Foundation for the Care of Asylums was the official unit responsible for employing the killing and building staffs, acquiring the gas, and thereafter for recycling gold teeth and selling jewelry from the dead.

Upon arrival at one of the six killing centers, patients were unloaded and led into examining rooms and were examined, naked. Patients were then weighed, photographed, stamped with a number, and given a piece of cardboard with a similar number for retrieving their clothes later. Those who possessed gold dental work were further marked with an X on their backs. Others were also carefully marked if they were deemed appropriate for "scientific" autopsy after death.

Sixty at a time, the inmates were locked in the "showers" to await their deaths. A physician then opened a valve allowing the gas into the chamber.

Within five minutes, the victims were unconscious and within 10 to 15 minutes all were dead. After a wait of approximately one hour, the chamber was ventilated and the marked bodies were transferred either to the autopsy room or to the crematorium for incineration. Prior to cremation, however, the bodies were plundered. Gold-filled teeth and dental bridges were broken from the corpses' mouths and were delivered to the business office.

Organs, especially fresh brains, and sometimes skeletons, were harvested at autopsy. Carefully packed and shipped, they made their way to research laboratories of Germany's most distinguished universities.

In one specific case, in order to study hereditary retardation, 56 inmates with mental retardation, epilepsy, and several displaying evidence of significant brain injury were delivered to a research institute where they were observed, examined, and then killed. Their brains were quickly removed and studied by making comparisons between the autopsied brains and the data collected prior to the patients' demise.

At the killing centers the logistical problems of burning the bodies far outweighed the relatively skilled method of killing them. Between two and eight bodies were cremated at a time. This protracted process resulted in a backlog of bodies that were often putrefying by the time they were cremated.

Ashes dug from an ever growing pile were collected in urns and the nonspecific remains were returned to those next of kin who requested them, at the kin's expense. In these cases, each killing center maintained a tracking map so that not too many urns arrived simultaneously in the same geographical area. This system also ensured that causes of death to families in close proximity were markedly different, thereby allaying suspicion. In addition, orderlies were careful not to overfill urns that were supposed to contain the ashes of a child.

Concocted causes of death included the now familiar list: communicable diseases such as meningitis, which was possible in people of all ages; pneumonia, a common cause of death secondary to other serious diseases, and cases of stroke, a favored sham diagnosis among the elderly.

During the life of the T-4 Program, between 80,000-100,000 people with disabilities were killed. These atrocities had been carried out at over 100 hospitals, asylums, and medical facilities across Germany.

T-4 statisticians had also recorded the economic triumph of murdering those with disabilities; that the tens of thousands of official "disinfections" had saved the country 885,439,980 Reich Marks (RMs) including 13,490,440 RMs' savings on meat and sausage, 70,8350 RMs on jam, 1,054,080 RMs on cheese, and 20,857,026 RMs on bread.

By the summer of 1941 there was enough public knowledge to exert pressure on the authorities to discontinue the killing programs.

On August 3, 1941, a German Catholic Bishop, Clemens von Galen, delivered a sermon in Münster Cathedral attacking the Nazi euthanasia program calling it "plain murder." The sermon sent a shockwave through the Nazi leadership by publicly condemning the program and urged German Catholics to "withdraw ourselves and our faithful from their (Nazi) influence so that we may not be contaminated by their thinking and their ungodly behavior."

As a result, on August 23, Hitler suspended Action T4.

The Nazis retaliated against the Bishop by beheading three parish priests who had distributed his sermon, but left the Bishop unharmed to avoid making him into a martyr.

However, the Nazi euthanasia program secretly continued until 1945, but without the widespread gassings. The task of euthanasia reverted to hospitals and other institutions across Germany that housed people with disabilities. The preferred methods of killing once again became lethal injection, starvation, and intentional exposure.