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Winfried Süß. *Der „Volkskörper "im Krieg: Gesundheitspolitik, Gesundheitsverhältnisse und Krankenmord im nationalsozialistischen Deutschland 1939-1945.* München: Oldenbourg Wissenschaftsverlag, 2003. 513 S. EUR 69.80 (gebunden), ISBN 978-3-486-56719-9.

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Published on H-German (June, 2005)

National Socialist Wartime Health Policy

Health and healthcare occupied a central position in National Socialist ideology, and few aspects of personal and national life in Nazi Germany were more thoroughly politicized. They were also always integrally connected to war, whether framed in terms of the "war within" to purify and improve the "race," or whether in terms of preserving and enhancing the ability of soldiers and workers to perpetrate war against enemies outside Germany's borders. It is therefore perhaps surprising that so little of the recent outpouring of historical work on the related medical, racial, and eugenic aspects of the Third Reich has concentrated on the war years themselves. This is the gap Winfried SÃ¼Ã? addresses in the present volume, a condensed and slightly revised version of his 1999 doctoral dissertation. SÃ¼Ã? 's book approaches the relationship between war and health in two parts. Part one deals with the nature and development of the power structure that oversaw health policy; and part two handles the implementation and consequences of those policies.

True to the character of the Nazi regime, health administration in the Third Reich was polycentric, with overlapping competencies among various institutions and individuals. Power struggles between some of these agencies have been taken up in histories of specific actors, programs, or organizations. SÃ¼Ã? , however, undertakes the task of presenting a comprehensive overview of all the major organizations charged with caring for the *VolkskÃ¶rper* at the national level, identifying their main players, and describing their methods of interacting with each other. These include two departments under the Reich's Ministries of Interior and of Work, their counterparts in three different offices within the Nazi Party bureaucracy, and, beginning in 1942, the Department of Sanitation and Health, which was created by direct decree of Adolph Hitler and headed by one of his personal physicians, Reich Commissioner Karl Brandt. Of value both to researchers in the field and to readers attempting to follow the complex relationships between individuals and institutions involved in the administration of Nazi health policy are several charts that delineate not only official chains of command, but also spheres of influence and the flow of information. In another helpful appendix, SÃ¼Ã? provides biographical data on the education, career paths, political development, military, and Nationalsozialistische Deutsche Arbeiter Partei (NSDAP) activities of over 200 individuals.

After introducing the actors and interests involved, SÃ¼Ã? uses Hitler's decree to suspend the centralized killing of adult mental patients (the T-4 program), at the end of August 1941, as a case study of the process through which national health policy was made. He argues against GÃ¶tz Aly that the halt had little, if anything, to do with some general acknowledgment that the original goal of 70,000 eugenic murders had already been accomplished.[1] Even though critical information on which the decision was based (a public relations problem) was provided to the FÃ¼hrer by the T-4 leaders, it was a political and military decision that largely bypassed assessments of the program or ideological considerations of "racial health." Indeed, Karl Brandt himself, although intimately involved in the program from its beginning, acting as the contact point between Hitler and the "euthanasia" bureaucracy and present at the Fuhrer's headquarters, was apparently not consulted. SÃ¼Ã? 's evidence suggests instead that, in the context of the regime's late-summer "crisis of legitimacy," the decisive

factor for Hitler and propaganda minister Goebbels was their determination that a head-on confrontation with the Catholic Church would better wait until the war was over.[2] SÃ¼Ã? further demonstrates Hitler's relative disinterest in public health and the daily workings of its administrative apparatus by the length of time it took him to finally create the Department of Sanitation and Health in order to coordinate all the squabbling factions vying for control over health policy. This example also demonstrates, however, the decisive power attached to Hitler's nod to Brandt.

Despite real attempts on the part of medical practitioners to maintain established standards of care and treatment, the state of warfare after 1939 exacted a tremendous toll on German national health. This deterioration provides the focus for the second part of this book. The quality of medical attention available to specific population groups depended partly on the machinations of those fighting for control, but healthcare worsened noticeably everywhere as the war continued. Preparations had concentrated on caring for the troops, not for attending to the civilian population through a protracted conflict. Military demands had first claim on the insufficient stock of doctors, supplies, and hospital beds throughout the war. Diseases typical of emergency and war conditions such as typhus, dysentery, diphtheria, scarlet fever, tuberculosis, and stress induced conditions increased. These were exacerbated by poor nutrition. Furthermore, air- and land-war necessitated the wide-spread transport of hospital patients under precarious conditions. Shortages helped legitimize the differential care-giving based on hierarchies of human worth that the Nazis had already established before the war began. Under wartime conditions, individual rights to healthcare were subjugated to the interests of the *VolkskÃ¶rper*. The inhumane displacement of psychiatric patients by the physically ill, and ultimately the outright organized murder of the mentally ill, became easier to justify and to implement.

Der "VolkskÃ¶rper" im Krieg is a richly detailed study based on solid archival research. While scholars will inevitably disagree on various points of interpretation and emphasis, SÃ¼Ã? has made a substantial and welcome contribution to our understanding of health practice in the Third Reich.

Notes

[1]. GÃ¶tz Aly, "Medizin gegen Unbrauchbare," *BeitrÃ¤ge zur nationalsozialistichen Gesundheits- und Sozialpolitik* 1 (1985): pp. 39-47.

[2]. The crisis itself stemmed from two developments that jarred public expectations of a quick and relatively painless victory: the unexpected strength of Soviet resistance to the German invasion in June, and the beginning of the British bombing of civilian targets, which primarily affected the Catholic regions of western Germany.

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Citation: Lora Knight. Review of Süß, Winfried, *Der „Volkskörper "im Krieg: Gesundheitspolitik, Gesundheitsverhältnisse und Krankenmord im nationalsozialistischen Deutschland 1939-1945.* H-German, H-Net Reviews. June, 2005.

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