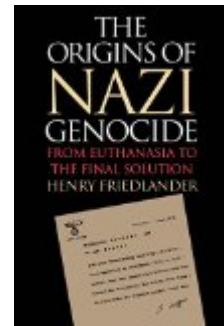


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Henry Friedlander. *The Origins of Nazi Genocide: From Euthanasia to the Final Solution*. Chapel Hill: University of North Carolina Press, 1995. xxiii + 421 pp. \$34.95 (cloth), ISBN 978-0-8078-2208-1.

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Mass Murder for the Sake of the *Volksgemeinschaft*

For a long time, historians have scrutinized Nazi Germany's policy of annihilation (*Vernichtungspolitik*) primarily with a focus on the mass murder of European Jews. Since the early 1980s, however, historical research has expanded our knowledge by taking a closer look at other victim groups which the Nazis targeted for decimation and extermination.[1] Henry Friedlander's award-winning monograph can be rightly considered the first thorough and systematic analysis of the origins of Nazi *Vernichtungspolitik* from a broader perspective. Whereas earlier works have viewed the mass murder of the handicapped, the so-called euthanasia program, and the mass murder of Jews as distinct and different phenomena, Friedlander argues that "euthanasia was not simply a prologue but the first chapter of Nazi genocide" (p.xii).

Friedlander places particular emphasis on linkages and similarities between the mass murder of the handicapped and the subsequent genocidal killings of Gypsies and Jews. "I realized that the Nazi regime systematically murdered only three groups of human beings: the handicapped, Jews and Gypsies" (p.xiii).

The ideological underpinnings of the annihilation of the handicapped, Jews and Gypsies as well as the mass killings of Slavic populations in German-occupied eastern Europe were based on widely accepted theories of the inequality of races. Ideas of racial purity and purification had already existed long before the Nazis came to power. Particularly in the Scandinavian countries but also in the United States, many members of the medical establish-

ments and scientific elites supported compulsory sterilization of those population groups deemed racially and socially inferior.

While the eugenic movement in the United States lost its impetus over time, representatives of racial hygiene (*Rassenhygiene*) in Germany ambitiously saw to it that their radical views of a biological-social utopia were to be fulfilled. Friedlander makes it clear that a political regime bent on eradicating undesirables of all sorts was a necessary precondition for genocide. The bureaucracy in Nazi Germany and scholarly exponents of racial hygiene entered an informal division of labor: the scientists provided the definitions and public officials, who formulated decrees and laws, based their definitions on the writings of these race experts (*Rassenkundler*).

The enthusiastic cooperation between scientists, scholars and Nazi officials began in earnest with the program of forced sterilization. From 1934 to 1945, German and Austrian physicians sterilized perhaps some 375,000 women and men against their will, because they had been allegedly diagnosed with a "hereditary disease" (*Erkrankheit*). In addition to the handicapped, many Austrian and German Gypsies, whom society had already marginalized before 1933, fell victim to compulsory sterilization. The Nazi regime would not stop here, however. Far more radical, in fact, deadly measures were soon to be taken to rid the *Volksgemeinschaft* of what was called "life unworthy of life" (*lebensunwertes Leben*).

As early as 1935, Adolf Hitler had contemplated the

realization of euthanasia once war broke out. The first group of human beings who became victims of organized mass killings were society's most vulnerable and defenseless members: handicapped children. The planning of this murder project originated in the summer of 1939, and the machinery of death consisted of three different agencies. The Reich Committee for the Scientific Registration of Severe Hereditary Ailments (*Reichsausschuss zur wissenschaftlichen Erfassung von erb- und anlagebedingten schweren Leiden*) was the preeminent body dealing with racial hygiene and population policy in Nazi Germany. Its members belonged to the *creme de la creme* of the medical establishment at the time. The Reich Committee planned, organized, and implemented the mass murder of handicapped children.

For administrative support the Reich Committee relied on the Subdepartment for Heredity and Race of the Reich Ministry's of the Interior Health Department (*Unterabteilung Erb- und Rassenpflege der Abteilung Volksgesundheit im Reichsministerium des Innern*) headed by Ministerialdirigent Dr. Herbert Linden. The Chancellery of the Fuehrer (*Kanzlei des Fuehrers*, or KdF) under Reichsleiter Philipp Bouhler assumed the political management of the Reich Committee. More importantly, Hitler named his personal physician (*Begleitarzt*) Dr. Karl Brandt and Bouhler plenipotentiaries for the forthcoming killing operation and gave them oral authorization (*Fuehrerermaechtigung*) to proceed.

In October 1939 the planned killings of handicapped children commenced. Between 1939 and 1945, some 5,000 infants, children and juveniles fell victim to Nazi Germany's first killing operation. In more than thirty children's wards of state hospitals and nursing homes (*Heil- und Pflegeanstalten*) in Austria and Germany the perpetrators murdered their victims by administering lethal doses of medication or by starvation. Tragically, the end of the Second World War in Europe did not put an end to the murder of handicapped children. "Twenty-one days after Germany's unconditional surrender, Richard Jenne, just four years old, became the last victim of the euthanasia killers" (p.163). This happened on 29 May 1945 in the children's ward of the Kaufbeuren-Irsee state hospital in Bavaria, more than three weeks after U.S. troops had taken the town!

In August 1939 Hitler also appointed Bouhler and Brandt plenipotentiaries for adult euthanasia. This time he furnished the go-ahead for the two in writing. Although dated 1 September 1939, the written expression of the Fuehrer's wish was actually signed by him in October

1939. In coordination between the KdF and the Health Department of the Reich Ministry of the Interior a killing organization was set up, supported by a staff of some one-hundred functionaries, including fifty physicians.

Since April 1940 the central agency for implementing adult euthanasia had been located in a mansion on Tiergartenstrasse 4 in Berlin-Charlottenburg. This address gave the killing operation its infamous code name: *Aktion T4*. To cover up registration, transportation, and killing of handicapped adults, T4 managers created an elaborate network of fronts (*Tarnorganisationen*, table 4.3, p.74). The actual killings took place in six state hospitals and nursing homes which had been specially-equipped with gas chambers: Grafeneck in Wuerttemberg, Brandenburg on the Havel near Berlin[2], Hartheim near Linz in Austria, Sonnenstein in Pirna in Saxony, Bernburg on the Saale in the Prussian province of Saxony, and Hadamar in Hessen.

From January 1940 to August 1941 the T4 perpetrators murdered some 70,000 handicapped persons from Austrian and German psychiatric institutions in the killing centers. Friedlander points out, however, that calculations by postwar German prosecutors arrived at a figure of at least 80,000 killed (p.110). On 24 August 1941 Hitler ordered the cancellation of further mass gassings in the framework of *Aktion T4*. According to Friedlander a combination of growing public knowledge of the killings and subsequent popular disquiet led to Hitler's decision (p.111; p.151).

Yet the mass killings of handicapped persons were far from over. On the contrary, they continued albeit by other means. In numerous hospitals and nursing homes all over Austria and Germany, physicians and nurses killed large numbers of patients by lethal medication or starving them to death. This rather decentralized and uncoordinated killing operation has become known as "wild" euthanasia. Here Friedlander is unable to give the reader exact figures or estimates of victims murdered during this phase. However, he points to the case of the Meseritz-Obrawalde hospital in the Prussian province of Pomerania. Postwar German judicial authorities estimated the number of persons killed there at perhaps 10,000 (p.161). We can only assume then that the total number of victims of "wild" euthanasia must be in the tens of thousands.[3]

Mass killings of the handicapped were not confined to the Reich proper. Friedlander shows how with the beginning of the Second World War the killing program gradually expanded eastward. In fact, mass killings

of the handicapped had already occurred before the *Aktion T4* killing centers became operational, namely in the newly-annexed Polish territories of the Reichsgaue Danzig-Westpreussen and Wartheland. Also, following the initiative of the Gauleiter of the Prussian province of Pomerania, transports of German handicapped were sent to killing sites in the east where a local SS battalion (*Wachsturmbann*) under the command of SS-Sturmbannfuehrer Kurt Eimann shot them.

Beginning in early 1940, a special unit, the *Sonderkommando Lange*, named after its commander SS-Hauptsturmfuehrer Herbert Lange, started evacuating state hospitals and nursing homes in Reichsgau Wartheland and dispatched the patients with specially-constructed gas vans. The first use of a stationary gas chamber is documented for late 1939 in Wartheland. Mass gassings took place in a hermetically sealed room in Fort VII at Poznan. In December 1939 Himmler and Brandt watched one of these mass killings there.[4] Thus the various killing methods associated with Nazi genocide had already been in use well before the onset of the final solution.

Nazi Germany's attack on the Soviet Union in June 1941 extended the zone of killing operations even farther east. Special units of the SS, the Security Police, and the Security Service (*Einsatzgruppen der Sicherheitspolizei und des SD, Einsatz- and Sonderkommandos*) not only massacred large numbers of Jews, but routinely included handicapped persons in open-air mass shootings. Friedlander writes that at the Kiev Pathological Institute alone, the staff and several SD men carried out a special operation (*Sonderaktion*), slaughtering some 100,000 people deemed "life unworthy of life" between September 1941 and March 1942 (p.142).

In the meantime, *Reichsfuehrer SS* Heinrich Himmler had ordered the killing of specific groups of concentration camp inmates. Designated *Aktion 14f13* in SS parlance, the Inspectorate of the Concentration Camps issued a directive whereupon those inmates unable to do hard physical labor or who suffered from incurable physical diseases were to be slated for "special treatment" (*Sonderbehandlung*) at one of the former T4 killing centers. In reality, the exact criteria for selecting inmates for elimination remain unknown, since the SS physicians seem to have ignored this directive and chose to pick their victims on an arbitrary basis. The death toll of *Aktion 14f13* is estimated as close to 20,000.

The handicapped victims of Nazi genocide have been by and large ignored in the secondary literature because

only few survived to come forward to testify or to write memoirs. Friedlander gives the reader a number of biographical sketches of handicapped victims. Quite a few realized what was in store for them when they arrived at one of the killing centers. Others did not display any pathological symptoms whatsoever but were murdered solely for some alleged deviant behavior that was not in accordance with the precepts of a pure *Volksgemeinschaft*.

In two chapters Friedlander deals with the perpetrators themselves, with managers and supervisors who made sure that the killing operations functioned smoothly and efficiently, and with physicians, nurses, and stokers who carried out the actual killings and disposed of the corpses. By looking at several biographies Friedlander is able to show that these perpetrators shared similarities in terms of mentalities, education, and careers. All these factors contributed in one way or another to turn ordinary men and women into killers. Friedlander wisely eschews facile generalizations based on a small sample. "When all is said and done, we are still unable to grasp the reasons that seemingly normal men and women were able to commit such extraordinary crimes. Neither ideology nor self-interest is a satisfactory explanation for such behavior. Those killers belonged to that time and place.... They could see how their actions affected real human beings. They understood the consequences of their deeds"(p.245).

The linkages between the euthanasia program and the genocide of Jews and Gypsies are evident in several ways. Jewish patients in hospitals and nursing homes became victims of the T4 program from the very beginning. Their systematic killing as a group, however, began in early summer of 1940. Friedlander avers that "the decision to kill handicapped Jewish patients as a group, made in the spring of 1940 at the highest level, foreshadowed, possibly foreordained the final solution of 1941" (p.282). *Aktion T4* had demonstrated to the Nazi regime the feasibility of killing large numbers of people because the German bureaucracy willingly cooperated and ordinary women and men acted as executioners.

The attitudes and behavior of German society made it no less easier for the Nazis to implement mass murder. Although protests against the euthanasia killings did occur, they were by no means widespread and intense. Moreover, under the conditions of war the *Volksgemeinschaft* did not care much about ostracized and much-maligned groups who had been already excluded from its ranks.

Preparations for the annihilation of the European

Jews began in the summer of 1941. Here the activities of KdF and SS went hand in hand. The killing expertise of the T4 perpetrators proved useful for the upcoming *Aktion Reinhard*, the mass murder of Jews in three extermination camps (Belzec, Sobibor, and Treblinka). Hence, more than ninety T4 men were eventually transferred to the east to carry out the final solution in the General Government.

Friedlander's book is not without a few shortcomings, though. For example, he argues that the persecution and mass murder of the Gypsies in German-occupied Europe paralleled the fate of the Jews. Recent scholarship disagrees here. According to Guenter Lewy, there were notable differences between the Nazis's treatment of Gypsies and Jews. Lewy argues that the Nazis never had the intention to kill all or even parts of Europe's Gypsies and only a minority of German Gypsies was deported to Auschwitz-Birkenau.[5]

Also, Friedlander makes no mention of the fate that befell the handicapped in the German-occupied territories of Scandinavia and western Europe. For example, in Norway the collaborationist government under Vidkun Quisling enacted a new, more radical sterilization law in June 1942 which allowed for compulsory sterilizations. In the wake of this law the annual number of sterilizations in Norway increased considerably. The eugenic movement there willingly supported Nazi population policy. Furthermore, the application of the new sterilization law did not meet with any resistance to speak of by Norwegian physicians. The question beckons: Did the German occupiers and their Norwegian collaborators make the quantum leap from sterilization to mass murder? [6]

These quibbles aside, Friedlander's book is an exemplary piece of historical scholarship. His grasp of a broad range of primary sources is impressive. His reasoned arguments rest on a solid evidentiary basis. He does not resort to conjectures if the sources are ambiguous or absent. And, last but not least, Friedlander's prose style is not only eminently readable but also refreshingly free of the sort of pretentious academic jargon that, for my taste, plagues quite a few other works dealing with the same subject. To cut a long story short, *The Origins of Nazi Genocide* is a fine achievement that will, perhaps, remain a standard work for years to come.

Notes

[1]. See Benno Mueller-Hill, *Toedliche Wissenschaft: Die Aussonderung von Juden, Zigeunern und Geisteskranken 1933-1945* (Hamburg: Rowohlt Verlag, 1984); Michael Burleigh and Wolfgang Wippermann, *The Racial State: Germany, 1933-1945* (Cambridge and New York: Cambridge University Press, 1991); Ulrich Herbert, ed., *Nationalsozialistische Vernichtungspolitik 1939-1945: Neue Forschungen und Kontroversen* (Frankfurt am Main: Fischer Taschenbuch-Verlag, 1998); Christian Gerlach, *Kalkulierte Morde: Die deutsche Wirtschafts- und Vernichtungspolitik in Weissrussland 1941 bis 1944* (Hamburg: Hamburger Edition, 1999). Unfortunately the Herbert edition contains next to nothing on the fate of the handicapped. Gerlach's superb case study, on the other hand, includes a chapter dealing with mass killings of the handicapped in German-occupied Belorussia.

[2]. Unlike the other killing centers, the facility at Brandenburg was originally a prison.

[3]. One author estimates a total of 50,000 killed during "wild" euthanasia. Compare Manfred Vasold, "Medizin," in *Zycklopaedie des Nationalsozialismus*, edited by Wolfgang Benz, Hermann Graml, and Hermann Weiss (Stuttgart: Klett-Cotta, 1997), p. 248.

[4]. See Volker Riess, *Die Anfaenge der Vernichtung "lebensunwerten Lebens" in den Reichsgauen Danzig-Westpreussen und Wartheland 1939/40* (Frankfurt am Main and New York: Peter Lang Verlag, 1995), pp. 290-311.

[5]. Compare now Guenter Lewy, "Gypsies and Jews Under the Nazis," *Holocaust and Genocide Studies* 13 (1999): pp. 383-404; and his *The Nazi Persecution of the Gypsies* (Oxford and New York: Oxford University Press, 2000).

[6]. See Nils Roll-Hansen, "Norwegian Eugenics: Sterilization as Social Reform," in *Eugenics and the Welfare State: Sterilization Policy in Denmark, Sweden, Norway, and Finland*, edited by Gunnar Broberg and Nils Roll-Hansen (East Lansing: Michigan State University Press, 1996), pp. 179-180. The author does not indicate a further radicalization resulting in the killing of the handicapped in wartime Norway.

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