

From 'Mercy Death' to Genocide

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In January 1939 Hitler made his famous Reichstag speech in which he blamed the Jews and the Bolsheviks for the coming war, a war that would mean their total destruction. Germany had begun her slow march down the twisted road to the death camps. Yet the first victims of the Nazi vision of creating a master race were not Jews but German citizens murdered as part of a euthanasia programme intended to destroy those unfit to become *volksgenossen* (racial comrades). It is the way in which the Nazi policy towards the mentally and physically handicapped dovetailed with their ever more radical racial policies that will be examined in this essay.

The Euthanasia Programme

At the end of the nineteenth century, throughout Europe and America but especially in Germany, ideas about the treatment of the handicapped and the carriers of genetic defects had become an area of grave concern. The term 'eugenics' was itself coined by the English naturalist and mathematician Francis Galton in 1881. It was left to an American, Charles B. Davenport, to take policy in a radical direction. In 1910 he proposed the sterilisation of all those who posed a threat to the genetic health of the nation, proposals that were actually implemented in a number of states. Furthermore, legislation in the 1920s attempted to block the entry into the USA of prospective immigrants with unwanted defects.

Yet it was in Germany that eugenics took its most radical turn. Richard J. Evans has recently argued that three factors made Germany different from other nations in this respect. First, there was the impact of medical professionals, who were closely associated with the penal and welfare system. As these professionals came into contact with patients whom they could do little to help, they came to believe that lives so tainted and degenerate posed a threat to the future of the German race. Secondly, there was a widely held Darwinist belief that the German nation would never be able to match its rivals due to demographic decline, homosexuality and 'dead-weight' patients with chronic complaints. Finally, these social outsiders were viewed as a threat to racial regeneration after 1918. As a consequence, increasingly radical schemes were proposed. By 1920 two German authorities, Karl Binding and Alfred Hoche, were already advocating that a 'mercy death' rather than simple sterilisation might be essential in order to save the nation's gene pool. It can therefore be argued that eugenics in Germany was already heading in an extreme direction before the coming to power of the Nazis.

It was the Hitler regime, however, that allowed some of these racist fantasies to become reality. In 1933 the government gave permission to allow the forced sterilisation of the mentally and physically handicapped, as well as people diagnosed as suffering from chronic illnesses (for instance alcoholics). Thanks to the help of teachers, doctors and health officials, 400 000 sterilisations were ordered by 'Hereditary Courts', frequently against the wishes of those concerned. The new emphasis on 'racial hygiene' was publicised in 50,000 public meetings and was placed on the regular school curriculum. That this was part of a broader strategy is illustrated by Hitler's comment to Reich Physician Gerhard Wagner in 1935 that he would only implement the killing of the handicapped under cover of the coming war. As the war approached, this policy took an even more deadly form.

Philip Bouhler, an SS officer in a department in the Chancellery building (KdF), made Hitler aware of a letter from the father of a badly handicapped child requesting permission to end its life. Hitler authorised the start of a secret programme of mercy killing not just for the 'Knauer baby' but for handicapped children throughout the Reich, with or without permission from their parents. The initiative, headed by Bouhler himself and a medical expert Dr Brandt (a KdF official), was given the code name 'Aktion T4' after the offices where they were based (a house seized from an unfortunate German Jew at 4 Tiergartenstrasse) in July-August 1939. The separate office and the recruitment of staff was all part of the elaborate measures taken to keep the euthanasia programme secret. The initiative soon expanded from killing children to the murder of adults using carbon monoxide gas in specially built 'killing facilities'

disguised as hospitals.

The authorisation to begin the murder of the handicapped has survived. Henry Friedlander believes it should be seen as an attempt to reassure collaborators and perpetrators that they would not be prosecuted. Written in October 1939 but dated 1 September, the date the World War began, it authorised a 'mercy death' for those 'considered incurable'. It had no real legal standing but it was enough to satisfy the grumbling consciences of those involved. A rare example of Hitler actually committing himself to paper, the original and one copy sent to the minister of justice, Franz Gurtner, survived the war. The text reads:

Berlin, 1 Sept. 1939: Reich Leader Bouhler and Dr. Brandt are charged with the responsibility of enlarging the competence of certain physicians, designated by name, so that patients who, on the basis of human judgement, are considered incurable, can be granted mercy death after discerning diagnosis.

In October 1939 Victor Brack calculated that for every thousand people one would have to be given a 'mercy death'. This meant that between 65,000 and 70,000 would have to be executed. In the end, the programme accounted for 70,273 people, described as 'unworthy of life', gassed with the help of prominent medical experts whose expertise was required only to turn the gas valves on and off. Bogus causes of death were sent to their relatives. During the war the programme was extended to include all 'unproductive consumers of food'. This led to a further 150,000 deaths. Once again it was the coming to power of the Nazis that provided the catalyst.

Recruitment and Motive

Recruitment of the killers tended to be on the recommendation of Party officials. This is hardly surprising, given the nature of their work. Personal or professional contact also helped to secure appointment. T4 required voluntary participation, and no one was forced to join the killing operation. Those who provided the labour for the programme required no specific skills other than to be dependable and discreet. The ancillary staff tended to be recruited using the same techniques as the physicians and bureaucrats, through Party and personal contact. For instance the long-standing T4 mason, Erwin Lambert, was recommended by the Labour Front (DAF). Sometimes more specialised staff were needed, so the Gestapo investigated and interviewed prospective candidates, for instance the electrician Herbert Kalisch. Those doing the most sensitive jobs, chiefly the stokers (expected to deal with the corpses and retrieve anything of worth), tended to be drawn from the ranks of the SS. The nature of the job was such that a daily ration of schnapps was provided. Here too no one was forced to work against his will. One Hartheim stoker complained about his work and was assigned to cleaning the yard and stables instead. Those unhappy with their posting could be discharged and drafted. The reality of what was going on was never very far away. The secretary at Hartheim worked with a box of victims' teeth on her desk.

Older physicians tended to be less ambitious and occasionally displayed moral scruples about what they were asked to do. Accordingly, the overwhelming majority of T4 staff tended to be young, ambitious and loyal. Despite postwar claims to the contrary, very little coercion was required to make these men murder. For instance, Kurt Borm's posting to the KdF from the SS was defined as 'leave' (Beurlaubung) and was not reclassified as 'a military assignment' (kommandierung) until July 1942 - 'thus underlining that acceptance of the job was voluntary' (Henry Friedlander). Equally, men who found the work distasteful could seek postings well away from the murder programme. One doctor, Ernst Baumhard, sought and received a military posting to avoid killing; but the great majority remained and made a career of murder. After the war ended, Brandt actually boasted to his US interviewer that he had pioneered the use of carbon monoxide gas.

Two physicians serve as typical examples. Rudolf Lonauer (born 1907) and Horst Schumann (born 1906) were around 30 years of age when they began their T4 careers. Schumann was a long-standing Nazi and continued to kill

after Hitler's 'stop' order, helping to select and murder concentration camp inmates during the 14f13 operation in Poland. He ended up in Auschwitz, conducting experiments with X-rays. Lonauer, an Austrian, followed his father into the Nazi movement and eventually joined the SS. Lonauer was based at the Hartheim 'hospital' and killed throughout the war. He was on excellent terms with the staff of Mauthausen concentration camp. His commitment to the Party led both him and his family to commit suicide at the end of the war.

Cold and uncaring as most of them were, few of these medical experts were motivated by blood lust. Above all, their involvement in the euthanasia programme presented them with an opportunity to further their careers. These young physicians would be working alongside esteemed academics. Additionally, front-line service would have been dangerous and lacked prestige within the Party. One doctor, Friedrich Mennecke, headed the Eichberg hospital. Young and ambitious, he owed his appointment to his Party credentials. He visited concentration camps, frequently in his SS uniform, and wrote excitedly to his wife outlining his pleasure at socialising with prominent KdF officials. Henry Friedlander comments that Mennecke enjoyed 'the travel, the attention, and the food and companionship and gave little thought to his victims'.

The behaviour of the staff who ran Hadamar fits in with this conclusion. To commemorate the gassing of their 10,000th victim, the physicians arranged for the entire staff to gather in the basement crematorium. A naked corpse was placed on a stretcher, covered with flowers. The supervisor, Bungler, made a speech, and a staff member dressed as a 'cleric' performed a mock funeral service. Every staff member received a bottle of beer. There was no real coercion to take part in the 'ritual' and they were surrounded with the reality of the camps, the agony and human suffering of the patients: 'They could see how their actions affected real human beings. They understood the consequences of their deeds'.

The Stop Order and Secret Murder

The Führer's authorisation was eventually replaced in the spring of 1940 with a Law on the Treatment of Community Aliens. Two helpful academics calculated that this might embrace one million Germans and set up a genetic card index to make accurate information available. On 24 August 1941 Hitler ordered a pause to the first wave of murders. This has frequently been attributed to the opposition of the Churches.

On 3 August 1941 Count Clemens von Galen, the Bishop of Munster, preached a sermon that condemned both euthanasia and the persecution of the Church. He denounced the killings, which, he had been told, 'are openly talked about in the Reich ministry of the Interior and the office of Reich Physician Leader Dr. Conti'. He closed his sermon with this warning: 'My brothers in Christ, I hope there is still time, but time is running out.' Henry Friedlander, however, believes that the pause came about for less noble reasons: 'The Protestant and Roman Catholic churches were, in any case, ambivalent toward Nazi health care policies, including sterilization and euthanasia, and their resistance could have been overcome.' The judiciary within Germany started to raise purely legal questions about the killings, so a pause was necessary to satisfy the needs of the law. Another reason for the halt was that the existence of the euthanasia programme had become more or less public knowledge. Heinrich Himmler ordered the closure of Grafeneck in December 1940 because 'what takes place there is secret, and yet is no longer a secret'. The existence of such killing centres, with their foul smelling chimneys, had therefore caused public outrage.

Yet despite the 'pause' the euthanasia programme did not stop. Patients were killed through lethal injection or overdose in what has been called the 'wild euthanasia' period. Additionally, in the newly occupied territories, away from the public gaze, the SS began to murder concentration camp inmates, using methods developed by Aktion T4. One contingent, the Lange Commando operating in the Wartheland (Poland), used specially developed mobile gas chambers. At least some of them had 'Kaisers Kaffee Geschäft' written on the side, to reassure potential victims that they worst they would suffer was poor quality coffee. Around 100 Aktion T4 experts and staff were eventually sent to the East as part of Operation Reinhard, where their expertise made a vital contribution to the extermination programme that was beginning to take shape there. The failure of ordinary Germans to provide broad and vocal opposition to these crimes against their own made the murder of other groups considerably easier. As Gotz Ali has

pointed out, 'If people did not protest when their relatives were murdered, they could hardly be expected to object to the murder of Jews, gypsies, Russians and Poles.'

The first victims of genocide from outside Poland were handicapped Jews from Germany. On 15 April 1940 Herbert Linden ordered the registration of all Jewish handicapped patients in the Reich and these individuals were eventually assembled at various pick-up points by Gekrat (the logistical arm of T4). At this time they were full Jews (Volljuden) rather than Mischlinge or foreign nationals. An elaborate pretence claimed that these victims were destined for separate hospitals in Germany, but they were in fact despatched to killing centres around the Lublin district of Poland. Death certificates were sent to relatives from the Chelm Post Office, Lublin. By the spring of 1941 365,000 people, mostly Jews, had been rounded up and sent to the General Gouernment under Hans Frank. A policy of ghettoisation began to take shape where the Jews were herded into sealed-off areas in Warsaw and Lodz where it was hoped, according to Himmler, that 'plague will creep in and they'll croak'.

The Dovetailing of Policy

After witnessing a mass shooting for himself in Minsk during the Russian campaign, Himmler saw that the early killing operations had been clumsy and inflicted too much stress on the perpetrators. He recognised that an equally effective but less taxing means of murdering Europe's Jews needed to be found. He had already learned about Herbert Lange's gas vans at Chelmno, so he therefore decided to exploit T4's knowledge and expertise. Around the same time, Himmler commissioned Odilo Globocnik to begin Operation Reinhard. Throughout 1942 killing facilities were constructed upon the advice of Aktion T4 experts at Auschwitz (January), Sobibor (April) and Treblinka (July) and Belzec. The same techniques that had been pioneered during the euthanasia programme (the gassing and cremation of victims) were adopted. The ever-ingenious T4 boffins came up with the idea of using an old tank engine to generate carbon monoxide gas to save the cost of transporting bottled gas from the Reich.

The only small difference in procedure came at the Auschwitz complex, a former Austro-Hungarian army barracks in Silesia. Here, at Birkenau (known as Auschwitz ii), the SS used hydrogen cyanide (Zyklon B), rather than carbon monoxide gas. The first trials with Zyklon B led to the gassing of 850 Russian POWs. In total 1.1 million people were murdered at the Auschwitz-Birkenau complex, all but 122,000 of them Jews. These facilities were regularly visited by Bouhler; and Christian Wirth (a particularly brutal, former Hamburg policeman and T4 official, who was nicknamed 'Savage Christian') ended up as the commandant of all three Operation Reinhard camps. By the end of 1942 four million Jews were dead.

Conclusion

It is clear that the decision to eliminate Germany's handicapped was taken separately to the regime's Jewish policy. Ideas about eugenics and euthanasia took shape well before the Nazis came to power but it was left to the new government to implement these wild schemes. This programme became more radical under the cover of the war. The way in which the decision emerged demonstrates the way in which both Hitler and the government apparatus operated. There was scope for innovation but there was also direction from above. The recruitment and motivation of the perpetrators would also be repeated as the regime moved to a 'final solution' of the Jewish question, a policy that had reached a cul de sac until T4 expertise drove it towards its terrible conclusion. We can speculate about the motives and attitudes of the perpetrators, but the voices that are heard most faintly are those of the innocent and vulnerable victims who were caught up in an initiative to win the favour of the Führer.