

“The incurably sick will be pitilessly segregated”:

**The Delayed Memorialization of
the Deaf and Disabled in Postwar Germany**

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Introduction

The demand that defective people be prevented from propagating equally defective offspring is a demand of the clearest reason and if systematically executed represents the most humane act of mankind. It will spare millions of unfortunates undeserved sufferings, and consequently will lead to a rising in the improvement of health as a whole. The determination to proceed in this direction will oppose a dam to the further spread of venereal diseases. For, if necessary, the incurably sick will be pitilessly segregated.¹ Adolf Hitler, *Mein Kampf*, 1925

This demand put forward by Adolf Hitler, in his autobiography *Mein Kampf*, for segregating and persecuting “defective people”, was echoed by some Germans during the Weimar Republic, but became a reality within Nazi Germany. From 1933 to 1945, it is estimated that more than 375,000 “hereditarily ill” Germans and citizens of occupied countries were sterilized; and an additional 300,000 children and adults were murdered because of their disabilities, primarily at six “euthanasia” centres within Germany.² Despite their suffering, deaf and disabled victims of National Socialism have been absent from, and on the periphery of, memory of those who were persecuted in Nazi Germany. As a result, disabled victims have faced a delay in memorialization in Germany.³

Memorialization can materialize through a multitude of mediums including self-reflection, community dialogue, art, literature and physical memorials. Although these are all important mediums of memorialization, this thesis will be using the term memorial in reference

¹ Adolf Hitler, *Mein Kampf*, trans. Ralph Manheim (New York: Houghton Mifflin Company, 1999), 255.

² Henry Friedlander, *The Origins of Nazi Genocide: From Euthanasia to the Final Solution* (Chapel Hill: University of North Carolina Press, 1995), 30; Henry Friedlander, “Step by Step: The Expansion of Murder, 1939-1941,” *German Studies Review* 17, no.3 (October 1994): 496. <http://www.jstor.org.ezproxy.library.uvic.ca/stable/1431896>. The term “euthanasia” is a euphemism for “mercy death” or “good death”. It will continue to appear in quotations throughout this thesis to address the problematic nature of the term – the murders committed under “euthanasia” were not merciful.

³ The term “disabled” is problematic because it ignores individual agency and personal identification with or disassociation from this term. However, because it is impossible to include every individual’s personal stance on the term throughout this thesis, it will continue to be used.

to physical memorials. Additionally, it will argue that the necessary precursors to memorialization are increased education about victim experiences through the dissemination of information, access to primary source material and inclusion of survivor voices/the victim community, as well as overall respect and acknowledgement of victims. Chapter One will analyze memorials at former sites of murder and in public spaces within West Germany and reunified Germany.⁴ This chapter addresses the current memorials for disabled victims and it compares their timeline of establishment with those of other victim groups, which highlights chronological differences and the delay in memorialization. This chapter cites the following works to explore Germany's memorialization process: James Young's *The Texture of Memory: Holocaust Memorials and Meaning*, Bill Niven and Chloe Paver's edited work *Memorialization in Germany Since 1945* and Susanne Knittel's publication, *The Historical Uncanny: Disability, Ethnicity, and the Politics of Holocaust Memory*. Chapter Two provides an overview of the treatment of deaf and disabled Germans throughout Germany's history and focuses on social, legal and academic factors that have contributed to the void in their memorialization. Influential secondary sources for this chapter include *Disability in Twentieth Century German Culture* by Carol Poore, *Death and Deliverance: 'Euthanasia' in Germany 1900-1945* by Michael Burleigh, and *Forgotten Crimes: The Holocaust and People with Disabilities* by Susanne Evans. Primary sources referenced in this chapter include *Doctors of Infamy: The Story of the Nazi Medical Crimes* by Alexander Mitscherlich and Fred Mielke, who attended the Nuremberg Medical Trials as young representatives of the German Medical Association, and an image produced by the Reich

⁴ Mark Wolfram, "Getting History Right": *East and West German Collective Memories of the Holocaust and War* (Lewisburg: Bucknell University Press, 2010), 16. The parameters for this thesis exclude East Germany due to the drastically different political and cultural developments that occurred during Germany's division from 1949 to 1990. East German society never really came to terms with the Nazi past, and the majority of the memorialization that took place in the former Democratic Republic was centered on communism's triumph over fascism or presented victims of National Socialism as victims of fascism. Additionally, scholarship focusing on West Germany's engagement with their Nazi past is currently more readily available.

Propaganda Office in 1936 that negatively presents disabled individuals as a financial burden on the country. These two primary sources help this thesis to comprehend the treatment and perception of disabled Germans during the respective times of their publications.

The third chapter of this thesis is a case study focusing on the experiences of deaf Germans. The individuals who became victims of discrimination, sterilization, and “euthanasia” because of their perceived disabilities were classified under a variety of labels: “feebleminded”, epileptic, deaf, blind, manic-depressive, schizophrenic, severe alcoholism or physical deformities.⁵ Although they share the commonality of their victimization, this victim group needs to be disentangled and explored further to understand the varying experiences of these individuals. By focusing on the experiences of deaf Germans, Chapter Three will contribute to the much needed dialogue on each individual victim group.⁶ This case study draws upon Donna Ryan and John Schuchman’s edited work *Deaf People in Hitler’s Europe* and Horst Biesold’s influential publication *Crying Hands: Eugenics and Deaf People in Nazi Germany*, to provide insight into Germany’s Deaf community throughout the twentieth century and the impact Nazi Germany had on this community. The work of Mark Zaurov, a Deaf Ph.D. candidate at the University of Hamburg, “Deaf Holocaust: Deaf Jews and their ‘True’ Communication in the Nazi Concentration Camps” and “Making a Case for a Deaf Holocaust Memorial”, is also included to ensure the works of Deaf scholars are included within the exploration of their

⁵ Henry Friedlander, “Registering the Handicapped in Nazi Germany: A Case Study,” *Jewish History* 11, no.2 (1997): 90. <http://www.jstor.org.ezproxy.library.uvic.ca/stable/20101303>.

⁶ Mark Zaurov, “Deaf Holocaust: Deaf Jews and Their ‘True’ Communication in the Nazi Concentration Camps,” in *Interpreting in Nazi Concentration Camps*, edited by Michaela Wolf (New York: Bloomsbury Press, 2016), 135. Deaf people do not consider themselves to be disabled, and some instead prefer to identify as a cultural and linguistic minority. “Deaf” is used to address the language, culture and history of the Deaf community or individual who self-identifies as being a member of the Deaf community; whereas “deaf” is used when addressing someone who does not primarily identify as a member of the Deaf community. “deaf” is also used when discussing the physical condition of being deaf, when it is not referring to a specific individual. Moreover, it is a personal decision for each deaf individual.

community's history. Interviews with Helga Gross and David Bloch, two deaf Germans, serve as primary sources for this chapter, as well as opportunities for deaf voices and survivor testimonies to be included in academic work discussing Deaf history. Additional works such as *Postwar Germany and the Holocaust* by Caroline Sharples and *The Origins of Nazi Genocide: From Euthanasia to the Final Solution* and "Registering the Handicapped in Nazi Germany: A Case Study," both by Henry Friedlander, are referenced across multiple chapters, or aid in emphasizing social, legal or academic factors that contributed to the segregation and delay in the memorialization of disabled victims in postwar Germany.

Chapter One: The Memorials

Within his exploration and evaluation of memorials, which were established in the aftermath of National Socialism, James Young states that: “no one takes their memorials more seriously than the Germans” and that “competitions are held almost monthly across the “Fatherland” for new memorials against war and fascism, or for peace; or to mark a site of destruction, [or] deportation.”⁷ Young’s assessment still holds true today in Germany and is reiterated by Donna Stonecipher, who refers specifically to Berlin as “the memorial city” and argues that Berlin has the highest concentration of memorials to commemorate National Socialist atrocities, with thousands of memorials throughout the city.⁸ Additionally, in 2007 *Der Spiegel*, a German magazine, published the article “Can Berlin Handle Any More Memorials?” and addressed the city’s inundation of memorials, especially those created for victims of National Socialism.⁹ It is unquestionable that German memorialization of the Nazi past is extensive and ongoing. Susanne Knittel, in her analysis of the wave of memorialization that has grown since 1945, stresses the inequality it has created through “the promotion of some memories and the

⁷ James Young, *The Texture of Memory: Holocaust Memorials and Meaning* (New Haven: Yale University Press, 1993), 18, 20.

⁸ Donna Stonecipher, “The Moment’s Monument: Poetry and Berlin Memorials,” *Raritan* 30, no.3 (Winter 2011): 1, 3.

<http://ezproxy.library.uvic.ca/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=31h&AN=59970566&site=ehost-live&scope=site>; Bill Niven and Chloe Paver, “Introduction,” in *Memorialization in Germany Since 1945*, eds Bill Niven and Chloe Paver (New York: Palgrave Macmillan, 2010), 1.

<http://ezproxy.library.uvic.ca/login?url=http://www.palgraveconnect.com/doi/10.1057/9780230248502>; Ulrike Puvogel, *Gedenkstätten für die Opfer des Nationalsozialismus: Eine Dokumentation*, 2 vols. (Bonn, 1995), quoted in Marcuse, “Holocaust Memorials: The Emergence of a Genre,” *The American History Review* 115, no.1 (February 2010): 53. <http://www.jstor.org.ezproxy.library.uvic.ca/stable/23302761>.

Bill Niven and Chloe Paver also emphasize “the very high number of memorials and memorial sites throughout the country.” Harold Marcuse references the work of Ulrike Puvogel, who states that by 1995, Germany had more than 3,000 memorials dedicated to the victims of National Socialism.

⁹ Petra Bornhöft, “Commemoration Saturation: Can Berlin Handle Any More Memorials?” *Der Spiegel*, November 3, 2007, <http://www.spiegel.de/international/germany/commemoration-saturation-can-berlin-handle-any-more-memorials-a-515733.html>.

suppression of others.”¹⁰ Within Germany’s memorial landscape, Knittel argues that disabled victims “must constantly assert themselves in the face of suppression and marginalization at the hands of the dominant memory culture.”¹¹ Overall, prior to the 1960s, memorialization in West Germany tended to address victims as a collective; they were “united in their experience of suffering”.¹² Then, between the 1960s and 1980s, memorialization began to focus primarily on the plight of Jewish victims, as the mass extermination of the Jews became widely disseminated knowledge.¹³ It was not until the 1980s that other victim groups, such as the Sinti and Roma, Jehovah’s Witnesses, homosexuals, and victims of Nazi “euthanasia”, began to be widely memorialized in West Germany, and later reunified Germany.¹⁴

The marginalized treatment of disabled victims will be discussed in three different memorial spaces within West Germany and reunified Germany: public memorial spaces, former sites of murder, and geographically dispersed memorials, both in Berlin and throughout the country. The Tiergarten is examined as a public memorial space due to its central location within Berlin and concentration of memorials to victims of National Socialism. The Tiergarten’s extremely close proximity to Tiergartenstrasse No. 4, the former address of the “euthanasia” program headquarters, is also worth noting.¹⁵ Former “euthanasia” centres and former concentration camps in West Germany are analyzed as former sites of murder, and the geographically dispersed memorial spaces include the Grey Bus memorial, the “Trains to Life –

¹⁰ Susanne Knittel, *The Historical Uncanny: Disability, Ethnicity, and the Politics of Holocaust Memory* (New York: Fordham University Press, 2015), 11.

¹¹ *Ibid.*, 7.

¹² Caroline Sharples, *Postwar Germany and the Holocaust* (New York: Bloomsbury Academic, 2016), 108, 120. <http://ezproxy.library.uvic.ca/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=1105847&site=ehost-live&scope=site>.

¹³ Harold Marcuse, “Holocaust Memorials: The Emergence of a Genre,” 57; Evans, *Forgotten Crimes*, 47. In an attempt to keep the “euthanasia” program a secret, the Nazi officials referred to the operation with an abbreviation of its address, T4.

¹⁴ Sharples, *Postwar Germany and the Holocaust*, 10, 121; Marcus, “Holocaust Memorials,” 53.

¹⁵ Friedlander, “Step by Step,” 497-498.

Trains to Death” memorial and the Stumbling Stones (*Stolpersteine*) commemoration project. Within these spaces, the timeline of memorial dedications will be compared between disabled victims and other victim groups, which will highlight chronological differences in their timeline of establishment and contribute to the overall argument of this thesis: disabled victims have faced a void and delay in their memorialization as victims of National Socialism.

The Tiergarten is located in central Berlin and is the city’s oldest urban park.¹⁶ The Tiergarten’s history extends back to the 16th century, when the park area was originally used as hunting grounds for Prussian monarchs.¹⁷ Since the 19th century the Tiergarten has gone through multiple phases of development, expansion and destruction. Today, the Tiergarten covers 210 hectares, is a popular attraction for both locals and tourists and is brimming with memorials.¹⁸ *Der Spiegel* claims that among some German officials “there are growing concerns that one day the woods in Berlin’s Tiergarten Park could disappear from view behind all the memorials.”¹⁹ Memorialization within the Tiergarten began in 1945, with the Soviet War Memorial, which was built on the orders of Soviet officials to remember their fallen comrades in World War II and to emphasize their role as a liberating force against fascism.²⁰ It was not until German reunification that the next memorial to victims of National Socialism appeared in the Tiergarten. In 1988

¹⁶ Senate Department for the Environment, Transport and Climate Protection, “Großer Tiergarten,” https://www.berlin.de/senuvk/berlin_tipps/grosser_tiergarten/index_en.shtml (accessed 12 November 2018).

¹⁷ Senate Department for the Environment, Transport and Climate Protection. “Großer Tiergarten: History,” https://www.berlin.de/senuvk/berlin_tipps/grosser_tiergarten/en/geschichte/index.shtml (accessed 12 November 2018).

¹⁸ Visit Berlin, “Tiergarten,” <https://www.visitberlin.de/en/tiergarten> (accessed 12 November 2017); Sylvia Fraser, “Berlin: A City Transformed by Art and Remembrance,” *Queen’s Quarterly* 120, no.2 (Summer 2013): 227, <http://search.proquest.com.ezproxy.library.uvic.ca/docview/1400180492?accountid=14846>.

¹⁹ Bornhöft, “Commemoration Saturation: Can Berlin Handle Any More Memorials?”

²⁰ Seth Bernstein, “Burying the Alliance: Interment, Repatriation and the Politics of the Sacred in Occupied Germany,” *Journal of Contemporary History* 52, no.3 (July 2016): 717, <https://doi-org.ezproxy.library.uvic.ca/10.1177/0022009416644665>; Senate Department for the Environment, Transport and Climate Protection, “Soviet Memorial,” https://www.berlin.de/senuvk/berlin_tipps/grosser_tiergarten/en/sehenswertes/mahnmale/sowjetisches_ehrenmal.shtml (accessed 12 November 2018).

discussions about memorializing Jewish victims within central Berlin began, which resulted in the unveiling of the Memorial to the Murdered Jews of Europe in 2005.²¹ In 1992, deliberations about memorials for both homosexual and Sinti and Roma victims began, and these memorials came to fruition in the Tiergarten with the establishment of the Memorial to the Homosexuals Persecuted under the National Socialist Regime in 2008, and in 2012 with the unveiling of the Memorial to the Sinti and Roma of Europe Murdered under the National Socialist Regime.²² By contrast, the first permanent memorial for “euthanasia” victims within the Tiergarten did not appear until 2014, when the Memorial and Information Point for the Victims of National Socialist “Euthanasia” Killings was unveiled to the public.²³ The German Parliament voted to create this memorial in 2011; however, this decision was made *after* the establishment of memorials for other victim groups in the Tiergarten.²⁴

The Tiergarten is a central space within Berlin, which has become a focal point in Germany’s memorial landscape. The delay in the memorialization for “euthanasia” victims within this space is emblematic of Germany’s memorialization process, which has largely

²¹ Sharples, *Postwar Germany and the Holocaust*, 107, 111; The Foundation Memorial to the Murdered Jews of Europe, “History of the Memorial to the Murdered Jews of Europe,” <https://www.stiftung-denkmal.de/en/memorials/the-memorial-to-the-murdered-jews-of-europe/history.html> (accessed 2 October 2017).

²² Sharples, *Postwar Germany and the Holocaust*, 1, 112; The Foundation Memorial to the Murdered Jews of Europe, “History of the Memorial to the Homosexuals,” <https://www.stiftung-denkmal.de/en/memorials/memorial-to-the-homosexuals-persecuted-under-the-national-socialist-regime/history-of-the-memorial-to-the-homosexuals.html> (accessed 2 October 2017); The Foundation Memorial to the Murdered Jews of Europe, “Memorial to the Sinti and Roma of Europe Murdered under the National Socialist Regime,” <https://www.stiftung-denkmal.de/en/memorials/sinti-and-roma-memorial.html>.

²³ Sharples, *Postwar Germany and the Holocaust*, 114; The Foundation Memorial to the Murdered Jews of Europe, “Memorial and Information Point for the Victims of National Socialist ‘Euthanasia’ Killings.” <https://www.stiftung-denkmal.de/en/memorials/memorial-and-information-point-for-the-victims-of-national-socialist-euthanasia-killings.html>. The memorial consists of two outdoor exhibits that run parallel to each other. One component is a twenty-four meter long wall of transparent blue glass, and the other is a concrete display with information about the “euthanasia” program, its victims and the impact this program has had on the present.

²⁴ The Foundation Memorial to the Murdered Jews of Europe, “‘Victims of National Socialist ‘Euthanasia’ Killings,’” Melissa Eddy, “Monument Seeks to End Silence on Killings of the Disabled by the Nazis,” *New York Times*, September 2, 2014, <https://www.nytimes.com/2014/09/03/world/europe/monument-seeks-to-end-silence-on-killings-of-the-disabled-by-the-nazis.html>.

ignored the disabled as victims of National Socialism. Prior to the establishment of the 2014 memorial to “euthanasia” victims, Meaghan Hepburn suggested that the absence of an information centre within the Tiergarten for this victim group was representative of an avoidance of the history surrounding the Nazis’ “euthanasia” campaign, its victims and images of disability.²⁵ Additionally, *Der Spiegel* claims that this “discover[y]” of new victim groups is a result of the country’s “excessive sense of guilt” and subsequent “mania for commemoration.”²⁶ Recent acknowledgment and inclusion of disabled victims within the Tiergarten represents Germany’s increasing acceptance of all victims of Nazi crimes; however, the delay in establishing a memorial to disabled victims cannot go unnoticed.

While the Memorial and Information Point for the Victims of National Socialist “Euthanasia” Killings is the first government sponsored memorial to commemorate “euthanasia” victims within the Tiergarten, a separate, unintentional memorial preceded it. In 1986, Richard Serra’s sculpture *Berlin Junction*, also referred to as *Berlin Curves*, became the first memorial for “euthanasia” victims to appear within the Tiergarten.²⁷ *Berlin Junction* was originally created for *The Fresh View (Der unverbrauchte Blick)*, an 1987 exhibit at the Martin-Gropius-Bau, a museum and art exhibition space in Berlin, for the atrium of the building.²⁸ However, Serra’s completed work was too large for the interior space and was relocated outside beside the front entrance.²⁹ After the exhibit the Berlin Senate purchased the sculpture and in 1988 it was moved

²⁵ Meaghan Hepburn, “Lives Worthy of Life and Remembrance: Memorialization of the National Socialist Aktion T4 Euthanasia Programme,” (DPhil thesis, University of Toronto, 2014), 184.

<https://tspace.library.utoronto.ca/handle/1807/72506>. This work was published prior to the unveiling of the Memorial and Information Point for the Victims of National Socialist “Euthanasia” Killing.

²⁶ Bornhöft, “Commemoration Saturation: Can Berlin Handle Any More Memorials?”.

²⁷ Bettina Springer, “Site-Specificity and Urban Icons in the Light of the Creative City marketing,” in *Brand-building: The Creative City: A Critical Look at Current Concepts and Practices*, eds Serena Vicari Haddock (Firenze: Firenze University Press, 2010), 69.

²⁸ Ibid.

²⁹ Ibid.

to the grounds of the Berliner Philharmonic Hall, the home of a Berlin based orchestra.³⁰ The Berliner Philharmonic Hall is also located on the former grounds of the “euthanasia” program headquarters, at Tiergartenstrasse 4. It is imperative to note that *Berlin Curves* was not created with the intent of becoming a memorial and it does not explicitly acknowledge Nazi “euthanasia” or the T4 program – it was created to be a piece of art. A plaque which provided context for the memorial and recognizes “euthanasia” victims was not added to this space until 1989.³¹ The evolution of *Berlin Junction* thus invites discussion regarding its role as a memorial for “euthanasia” victims. Knittel believes that *Berlin Junction* is “almost too abstract” and that because of this it is frequently “misinterpreted as ‘Kunst am Bau’ [Architectural Art], a sculpture belonging to the Philharmonic.”³² Knittel also notes that “the memorial plaque on the ground at its side is easily overlooked.”³³ Overall, it is evident that in comparison to other victim groups, disabled victims have faced a delay in memorialization within the Tiergarten. Victims who were persecuted under National Socialism as a result of being Jewish, Sinti, Roma, or homosexual all received memorials before the German Parliament even approved of the creation of a memorial for “euthanasia” victims.

In addition to the delayed memorialization in public spaces, “euthanasia” victims have also experienced a delay in memorialization, in comparison to other victim groups, at former sites of murder. Within West Germany, concentration camp victims were memorialized before victims of “euthanasia” centres. During World War II, there were seven major concentration camps located in Germany: Ravensbrück, Sachsenhausen, Buchenwald, Neuengamme,

³⁰ Hepburn, “Lives Worthy of Life and Remembrance,” 184.

³¹ Ibid.

³² Susanne Knittel, “Remembering Euthanasia: Grafeneck in the Past, Present, and Future,” in *Memorialization in Germany Since 1945*, ed. Bill Niven and Chloe Paver (New York: Palgrave Macmillan, 2010), 133, <http://ezproxy.library.uvic.ca/login?url=http://www.palgraveconnect.com/doi/10.1057/9780230248502>.

³³ Ibid.

Flossenbürg, Bergen-Belsen and Dachau.³⁴ Following the end of the war, Bergen-Belsen, Flossenbürg, Neuengamme, and Dachau fell within West German territory.³⁵ Caroline Sharples argues that the general timeline of memorialization within Germany was also evident at former concentration camps: victims were addressed as a collective group from 1945 until the 1960s, and then Jewish suffering was the primary focus between the 1960s and 1980s, until other victim groups began to be more readily acknowledged during, and after, the 1980s.³⁶

The first memorials at former concentration camps appeared shortly after the end of the war. Bergen-Belsen received its first memorial in 1946, Flossenbürg in 1947, Dachau in 1949 and Neuengamme in 1953.³⁷ These initial memorials were created by survivors, or their communities, for those who were murdered. The 1960s brought “a radical shift in Jewish commemorative practices in West Germany”, and Jewish victims began to solidify their position in Germany’s memorial landscape.³⁸ One of these memorials was the Jewish Memorial Temple, which was built at the Dachau memorial site in 1967.³⁹ Other victim groups were not well represented at concentration camps until the 1980s, and did not receive significant memorialization until reunification.⁴⁰ An obelisk at Bergen-Belsen, which was created to commemorate Jewish victims at the camp, received an additional inscription in 1982 to

³⁴ Sharples, *Postwar Germany and the Holocaust*, 116.

³⁵ Harold Marcuse, “Memorializing Persecuted Jews in Dachau and Other West German Concentration Camp Memorial Sites,” in *Memorialization in Germany Since 1945*, ed. Bill Niven and Chloe Paver (New York: Palgrave Macmillan, 2010), 192-193, <http://ezproxy.library.uvic.ca/login?url=http://www.palgraveconnect.com/doi/10.1057/9780230248502>.

³⁶ Sharples, *Postwar Germany and the Holocaust* 108, 120, 121; Marcuse, “Holocaust Memorials: The Emergence of a Genre,” 53.

³⁷ Harold Marcuse, “The Afterlife of the Camps,” in *Concentration Camps in Nazi Germany: The New Histories* ed. Jane Caplan and Nikolaus Wachsmann (New York: Routledge, 2010), 196, 198; Sharples, *Postwar Germany and the Holocaust*, 120; Bill Niven, *Facing the Nazi Past: United Germany and the Legacy of the Third Reich* (New York: Routledge, 2002), 18. Dachau and Neuengamme officially became memorial sites in 1965.

³⁸ Marcuse, “Memorializing Persecuted Jews in Dachau and Other West German Concentration Camp Memorial Sites,” 199.

³⁹ Niven, *Facing the Nazi Past*, 17.

⁴⁰ *Ibid.*, 3.

acknowledge and commemorate Sinti and Roma victims, and in 1985, Dachau established its first memorial to homosexual victims.⁴¹ In addition to memorials, educational exhibits were opened at former concentration camps to educate the public about the horrors experienced during the Third Reich. Dachau opened a permanent exhibit in 1965, Bergen-Belsen in 1966, and Neuengamme in 1981.⁴² It was not until 1995, when Neuengamme opened a new main exhibit, that a wider variety of camp victims were represented: women, Jews, homosexuals, Soviet POW's, criminal prisoners, hostages, resistance fighters, Jehovah's Witnesses, forced labourers, and Roma and Sinti.⁴³

Although Flossenbürg established its first memorial in 1947, this former site of murder has been referred to as Germany's "forgotten concentration camp", because the establishment of memorials and educational exhibits at Flossenbürg has been significantly neglected.⁴⁴ It was not until 1995 that Flossenbürg established a memorial for Jewish victims. The Jewish Memorial Centre, and a historical, more inclusive exhibit about the former concentration camp was not built until 2007, when Flossenbürg opened a memorial museum.⁴⁵ Niven argues that Flossenbürg was not established as a "fully-fledged memorial site and documentation center [sic]" until after reunification because Soviet and Polish prisoners, who constituted a majority of Flossenbürg's inmates, have only "recently been able to add their voices to calls for such a development."⁴⁶

⁴¹ Ibid., 17; Sharples, *Postwar Germany and the Holocaust*, 120; Thomas Haakenson, "(In)Visible Trauma: Michael Elmgreen and Ignar Dragset's Memorial to the Homosexuals Persecuted Under the National Socialist Regime," in *Memorialization in Germany Since 1945*, ed. Bill Niven and Chloe Paver (New York: Palgrave Macmillan, 2010.), 150.

⁴² Niven, *Facing the Nazi Past*, 17.

⁴³ Ibid., 37.

⁴⁴ Stefan Dietrich, "Exhibition Dedicated to 'Forgotten' Concentration Camp Opens," *Deutsche Welle*, July 23, 2007. <http://www.dw.com/en/exhibition-dedicated-to-forgotten-concentration-camp-opens/a-2702730>.

⁴⁵ Niven, *Facing the Nazi Past*, 26; Press Office of Ukraine's President, "Yushchenko Visits Flossenburg [sic] Complex," *Ukrainian Weekly*, July 29, 2007, News Briefs section, 14.

⁴⁶ Niven, *Facing the Nazi Past*, 25-26.

This highlights the important role of survivor and victim communities, and the impact they have on the memorialization process.

Although the Jews were the first victim group to be widely recognized and memorialized, they also faced challenges in establishing their position as victims of National Socialism and how to properly memorialize their community's insurmountable loss.⁴⁷ Harold Marcuse states that in West Germany in the 1950s, there was a "public silence surrounding all concentration camp victims",⁴⁸ and he argues that the intense discussions about memorializing Jewish victims at Dachau concentration camp "can serve as a case study for the country as a whole," by exemplifying the complexities in postwar memorialization.⁴⁹ It is important to note that all victim groups faced challenges with recognition and memorialization; however, the difficulties posed to disabled victims persisted much longer, which contributed to their delayed memorialization.⁵⁰

As this thesis will explore, it is impossible to know how many disabled Germans were murdered at Nazi concentration camps because of the arbitrary categorization they were subjected to, such as "asocial", and the expansiveness of the category of disabilities across the German population. "Asocial", was used to describe a variety of individuals who were perceived to have "unfit" genes responsible for criminal activity or degeneracy – it was a subjective label at times.⁵¹ It is possible individuals were imprisoned or murdered for a separate "crime", without

⁴⁷ Marcuse, "Memorializing Persecuted Jews in Dachau and Other West German Concentration Camp Memorial Sites," See this work for more detailed information.

⁴⁸ Ibid., 197.

⁴⁹ Ibid., 192.

⁵⁰ These challenges are addressed in Chapter Two and Chapter Three.

⁵¹ Michael Burleigh, *Death and Deliverance: 'Euthanasia' in Germany 1900-1945* (New York: Cambridge University Press, 1994), 220, 21; Susanne Evans, *Forgotten Crimes: the Holocaust and People with Disabilities* (Chicago: Ivan R. Dee Publisher, 2004), 74; Carol Poore, *Disability in Twentieth Century German Culture* (Michigan: University of Michigan Press, 2007), 67; Michael Bryant, *Confronting the "Good Death": Nazi Euthanasia on Trial, 1945-1953*

their disability being noted. For example, David Bloch, a deaf German Jew, who will be discussed more in Chapter Three, was interned at Dachau concentration camp because he was Jewish, not because he was deaf. Furthermore, during *Aktion* “14f13”, the second phase of “euthanasia” killings, those from Dachau, Neuengamme and Flossenbürg who were too sick to work, were Jewish, were labeled “asocial”, or were political prisoners were murdered in the gas chambers at former “T4” “euthanasia” centres.⁵² It is estimated that 20,000-40,000 victims were murdered during “14f13”.⁵³ Not all victims of “14f13” were disabled, but it is very likely that they were included in the fatalities. These victims had previously been interned at Nazi concentration camps, and are worthy of memorialization within these spaces.

In addition to being persecuted at concentration camps, disabled Germans were murdered at Nazi “euthanasia” centres. Although this victim group deserves to be memorialized at both former sites of murder, comparing the establishment of memorials at former concentration camps with former “euthanasia” centres is important because it highlights the delay in memorialization at sites of murder that were established specifically for people with disabilities. The Nazi T4 “euthanasia” program operated out of six main centres: Brandenburg, Sonnenstein, Bernburg, Grafeneck, Hadamar and Hartheim. The memorialization process at these former sites of murder unfolded at different paces, but highlights a delay in memorialization nonetheless. Hadamar established its first memorial in 1953, Grafeneck and Brandenburg in 1962, and Hartheim in 1969.⁵⁴ At Sonnenstein, a small plaque was mounted at the entrance to the castle in 1973,

(Boulder: University Press of Colorado, 2005), 53. These individuals included beggars, prostitutes, previously convicted criminals, the unemployed, the homeless, and anyone who didn’t conform to societal norms.

⁵² Burleigh *Death and Deliverance*, 21, 220; Evans, *Forgotten Crimes*, 74; Poore, *Disability in Twentieth Century German Culture*, 67; Bryant, *Confronting the “Good Death”*, 53.

⁵³ Evans, *Forgotten Crimes*, 93.

⁵⁴ Knittel, “Remembering Euthanasia,” 127; Hepburn, “Lives Worthy of Life and Remembrance,” 100.

although local awareness and memorialization of Sonnenstein did not fully develop until 1989.⁵⁵ Bernburg also established a larger memorial in 1989, which replaced a smaller, staff-driven memorial that was created in 1976.⁵⁶ This chapter will focus predominantly on Hadamar and Grafeneck and their memorialization process due to their location in former West Germany. Sonnenstein, Bernburg and Brandenburg are located in former East Germany, and although Hartheim was under American occupation in 1945, it is located near Linz, Austria and is therefore beyond the territorial parameters of this thesis.

From 1929-1939 Castle Grafeneck was run by the Lutheran Samaritan Foundation (Samariterstift) and was home to disabled patients.⁵⁷ In 1939 the property was seized by the National Socialist government and it became the first institution to murder those who were deemed to be suffering from a “hereditary illness”.⁵⁸ Grafeneck was only in operation from January 18th to December 13th of 1940, but during this time 10,654 people were gassed and cremated here.⁵⁹ After 1940, Grafeneck was used to house children from cities that were at risk of being bombed by the Allied Forces, and in 1947 the property was returned to the Samariterstift.⁶⁰ In 1962, the Samariterstift erected the first memorial to the victims of Grafeneck: a large stone cross beside two graves, which hold 250 urns of victim ashes.⁶¹ In 1982, a memorial plaque inscribed with “In memory of the victims of inhumanity – Grafeneck 1940” was placed on one of these urns.⁶² An additional plaque was added in 1985, to provide historical context to the memorial. These plaques at Grafeneck follow the wider trend of memorialization

⁵⁵ Hepburn, “Lives Worthy of Life and Remembrance,” 95, 96.

⁵⁶ *Ibid.*, 100.

⁵⁷ Knittel, “Remembering Euthanasia,” 124.

⁵⁸ *Ibid.*

⁵⁹ *Ibid.*

⁶⁰ Knittel, *The Historical Uncanny*, 50.

⁶¹ *Ibid.*

⁶² *Ibid.*, 50, 51.

within Germany: victim homogenization prior to the 1960s, and acknowledgement of “other” victim groups during the 1980s. Knittel argues that “while the inscriptions [on the initial plaque] remained abstract, they marked the beginning of a slow process of public acknowledgment.”⁶³ Following reunification, memorialization efforts at Grafeneck grew. In 1989, a memorial chapel was built and a memorial book, which lists the names of the known victims, was also unveiled.⁶⁴ Following the memorial chapel, three additional memorials were installed at Grafeneck: The Alphabet Garden (1998), a cornerstone (2005) and a documentation centre (2005).⁶⁵ Although the victims of Grafeneck received their first memorial in 1962, this is noticeably later than the first memorials to victims of concentration camps. Furthermore, significant memorialization and knowledge about Grafeneck did not develop until the 1980s and after reunification.

By the end of 1940, the Hadamar Institute, which was previously a care home for psychiatric patients, was converted into the sixth, and final, centre for the “euthanasia” program.⁶⁶ It is estimated that from January to August of 1941 about 10,072 individuals were murdered at Hadamar through starvation, lethal injections, or in the facility’s gas chamber.⁶⁷ During the second phase of killing, from August 1942 to March 1945, under the code name “14f13”, an additional 4,420 victims were murdered at Hadamar.⁶⁸ The bodies from the second phase of killing were disposed of in a mass grave, which later became the site of Hadamar’s

⁶³ Knittel, “Remembering Euthanasia,” 128.

⁶⁴ Knittel, *The Historical Uncanny*, 51. An annual memorial service is held at the chapel to remember the victims of Nazi “euthanasia”.

⁶⁵ Knittel, “Remembering Euthanasia,” 127, 128, 130. The Alphabet Garden encourages visitors to use letters, which are engraved onto cubes that are slightly sunken into the earth, to spell out the names of the victims. The cornerstone was erected on the former location of the gas chamber and is inscribed with “Here once stood the building in which 10,654 people were gassed to death in 1940”. The documentation centre serves as a space for education and research.

⁶⁶ Gedenkstätte Hadamar, “First Period of Euthanasia,” http://en.gedenkstaette-hadamar.de/webcom/show_article.php/_c-1076/_nr-1/_p-1/i.html (accessed 2 October 2017).

⁶⁷ Hepburn, “Lives Worthy of Life and Remembrance,” 43; Evans *Forgotten Crimes*, 48, 62.

⁶⁸ Gedenkstätte Hadamar, “Second Period of Euthanasia,” http://en.gedenkstaette-hadamar.de/webcom/show_article.php/_c-1076/_nr-2/_lkm-1070/i.html (accessed 2 October 2017).

second memorial in 1964.⁶⁹ The first memorial was placed at the Institute's main building in 1953.⁷⁰ Hadamar has also incorporated a preserved cellar (1983), a reconstructed garage for grey buses (2003), and exhibitions, the first of which was unveiled in 1991, as part of its memorial landscape for victims of Nazi "euthanasia".⁷¹ Additionally, in 1990, a memorial bell was built and in 2006 a memorial book, which lists the names of almost all of Hadamar's victims, was completed to serve as a victim database for Hadamar.⁷² Memorialization at Hadamar began in 1953, but similar to Grafaneck, substantial commemoration efforts or understanding about Hadamar's history did not happen until the 1980s and after reunification.⁷³

Through a comparison of the establishment of memorials at former concentration camps and "euthanasia" centres it is evident that, overall, physical memorialization began at concentration camps before "euthanasia" centres, and Jewish victims were memorialized before "other" victim groups. However, these former sites of murder did begin their memorialization process within a similar timeframe, which invites the question of why "other" victim groups, such as disabled victims, have experienced a significant delay in memorialization in postwar Germany. This question will be answered and addressed in further detail in Chapter Two and Three.

⁶⁹ Gedenkstätte Hadamar, "Hadamar Memorial," http://en.gedenkstaette-hadamar.de/webcom/show_article.php/_c-1077/_nr-1/_lkm-1065/i.html (accessed 2 October 2017).

⁷⁰ Ibid.

⁷¹ Ibid; Gedenkstätte Hadamar, "'T4' – Busgarage," http://www.gedenkstaette-hadamar.de/webcom/show_article.php/_c-862/_lkm-1374/i.html (accessed 2 October 2017); Gedenkstätte Hadamar, "Dauerausstellung," http://www.gedenkstaette-hadamar.de/webcom/show_article.php/_c-622/_lkm-1364/i.html (accessed 2 October 2017); Knittel, *The Historical Uncanny*, 54. The grey buses were one of the primary methods of transporting victims to "euthanasia" centres. They are addressed in detail in Chapter One and Chapter Two.

⁷² Gedenkstätte Hadamar, "Historischer Abriss," http://www.gedenkstaette-hadamar.de/webcom/show_article.php/_c-618/_nr-1/_p-1/i.html (accessed 2 October 2017); Gedenkstätte Hadamar, "Opferdatenbank/Gedenkbuch," http://www.gedenkstaette-hadamar.de/webcom/show_article.php/_c-623/_lkm-1372/i.html (accessed 2 October 2017).

⁷³ Additionally, substantial literature about memorialization at Hadamar, in English, is extremely limited.

There is a third form of memorials to the victims of National Socialism: those that exist in multiple public spaces and symbolize artistic approaches to memorialization. The focus here is on three of them: the Grey Bus Memorial, the “Trains to Life – Trains to Death” memorial and the Stumbling Stone (*Stolpersteine*) commemoration project. This third form of memorialization differs from the previous two, because in this form memorials for disabled victims and other victim groups were established within the same timeframe. However, it is arguable that this has occurred because of the artistic approach to these memorials and their establishment after reunification. As this chapter has addressed, memorialization within Germany for all victim groups developed substantially after 1990, as knowledge about the numerous victim groups increased and a new generation of Germans was able to address the Nazi past. Therefore, disabled victims do not face a delay in their memorialization in this third form, but rather a lack of representation within it, because Germany has yet to fully address this victim group.

In 2008, Frank Meisler’s memorial sculpture “Trains to Life – Trains to Death” was unveiled in front of the Friedrichstraße train station and subway in Berlin.⁷⁴ The sculpture memorializes the approximately 10,000 children who escaped from Nazi Germany by means of the Kindertransport, a rescue operation transporting primarily Jewish children to Great Britain.⁷⁵ The sculpture consists of seven bronze statues of children. Two are composed of a shinier bronze and are depicted walking towards safety, while the other five are made with a tarnished bronze and are waiting for a deportation train.⁷⁶ Meisler’s contrasting representations of the two groups

⁷⁴ “Sculptor of Monuments to the Kindertransports in Europe; Frank Meisler,” *Daily Telegraph* March 29, 2018, News section, 29 [http://www.lexisnexis-com.ezproxy.library.uvic.ca/hottopics/Inacademic/?shr=t&csi=8109&sr=HLEAD\(%22Sculptor+of+monuments+to+the+Kindertransports+in+Europe+Frank+Meisler%22\)+and+d ate+is+2018](http://www.lexisnexis-com.ezproxy.library.uvic.ca/hottopics/Inacademic/?shr=t&csi=8109&sr=HLEAD(%22Sculptor+of+monuments+to+the+Kindertransports+in+Europe+Frank+Meisler%22)+and+d ate+is+2018).

⁷⁵ “Sculptor of Monuments to the Kindertransports in Europe; Frank Meisler,” *Daily Telegraph*.

⁷⁶ Frank Meisler, “Kindertransport,” <http://frank-meisler.com/kindertransport/> (accessed 12 November 2017). Four other European communities have installed similar sculptures by Meisler to memorialize the Kindertransport. “Kindertransport – The Departure” was unveiled at the Gdańsk Railway Station in Gdańsk, Poland in May 2009;

of children also commemorates the children who did not escape Nazi Germany and were murdered. Although “Trains to Life – Trains to Death” is stationary, it approaches memorialization of the victims of National Socialism in an artistic way, and is located in a public space.

In 2005, three years prior to the unveiling of “Trains to Life – Trains to Death”, Horst Hoheisel and Andreas Knitz designed the Grey Bus Memorial, which commemorates the victims who were transported to “euthanasia” centres in grey buses during the Nazi “euthanasia” program.⁷⁷ The grey buses were one of the primary methods of transporting victims and they had opaque windows, in an attempt to keep the transportations of victims a secret.⁷⁸ Hoheisel and Knitz’s memorial consists of two life-size, concrete buses: one permanently established outside the gates to the Weißenau Psychiatric Centre in Ravensburg, a facility that housed disabled patients before they were transported to Grafeneck or Hadamar; and the second is a traveling memorial that visits various sites connected to the “euthanasia” program, as well as other locations within German communities.⁷⁹ Each bus is divided lengthwise into two halves to form a walkway. For the bus located at the Weißenau Psychiatric Centre in Ravensburg, this pathway is the main entry way for both visitors and staff members at the clinic and is inscribed with a quote from a former victim: “Where are you taking us to?”⁸⁰ Plaques accompany both buses to provide context and explain the history behind these memorials. According to Knittel, “the Grey

“Kindertransport – The Arrival” in London at Liverpool Street Station in 2006; “Channel Crossing to Life” the Hook of Holland in Rotterdam in 2011; and “The Final Parting” at the Hamburg-Dammtor Station in Hamburg in 2015.

⁷⁷ Knittel, *The Historical Uncanny*, 61.

⁷⁸ Evans, *Forgotten Crimes*, 26.

⁷⁹ Knittel, *The Historical Uncanny*, 63; Knittel, “Remembering Euthanasia,” 130. From January 2008 to January 2009, the Grey Bus Memorial was situated within the Tiergarten. It was placed in front of the Berlin Philharmonic. The bus leaves an empty concrete base when it is relocated, which prompts the public to reflect on the absence of the space, but it does not provide any historical context or information for the public to learn more.

⁸⁰ Knittel, *The Historical Uncanny*, 62.

Bus Memorial presents an unavoidable obstacle in the midst of people's daily routine" by reminding passers-by of what they signify, just as the grey buses did during the Third Reich.⁸¹

Both the Grey Bus Memorial and "Trains to Life – Trains to Death" sculpture represent modes of transportation and are artistic approaches to memorialization. The Grey Bus Memorial was created three years before "Trains to Life – Trains to Death", which goes against the precedent of delay. As mentioned prior, it is arguable that the adjacent creation dates for these memorials is the result of German reunification and the subsequent demand for memorialization and increased awareness it resulted in.

The third dispersed memorial this chapter focuses on is Gunter Demnig's *Stolpersteine* commemoration project. It too began after reunification, in 1995.⁸² Demnig handcrafts each stone before setting them into the pavement in front of the victim's last known residence.⁸³ The stones are small, measuring ten centimeters square, and are covered with an engraved brass plate.⁸⁴ The brass plate states the victim's name, birth date, the date(s) of their deportation and the date and location of their death, if this information is known.⁸⁵ The number of Stumbling Stones in Germany is growing, with over 7,000 in the country as of 2016.⁸⁶ Presently, stumbling

⁸¹ Knittel, "Remembering Euthanasia," 130.

⁸² Sharples, *Postwar Germany and the Holocaust*, 125.

⁸³ Ibid; Knittel, *The Historical Uncanny*, 5.

⁸⁴ Sharples, *Postwar Germany and the Holocaust*, 124.

⁸⁵ Ibid; Knittel, *The Historical Uncanny*, 64.

⁸⁶ Sharples, *Postwar Germany and the Holocaust*, 125; Hamburg Stumbling Stone Initiators, "Stolpersteine Hamburg," http://www.stolpersteine-hamburg.de/en.php?MAIN_ID=7 (accessed 12 January 2018); Initiative Stolpersteine in Frankfurt am Main, "Stolpersteine in Frankfurt am Main," http://www.stolpersteine-frankfurt.de/frankfurt_en.html (accessed 12 January 2018); Atika Shubert and Nadine Schmidt, "Germany's Holocaust Mini-Memorials Go Missing Amid Far-Right Backlash," *CNN* March 29, 2018. <https://edition.cnn.com/2018/03/29/europe/germany-holocaust-stumbling-stones-far-right-intl/index.html>; Anne Thomas, "20 Years of 'Stolpersteine,'" *Deutsche Welle*, May 12, 2016 <http://www.dw.com/en/20-years-of-stolpersteine/a-19252785>. As of 2018, Hamburg had installed 5,318 and Bochum has 236. As of 2015, Frankfurt has installed 1,000. As of 2008 Cologne installed 1,500. Hamburg, Munich, Berlin and Bochum all have apps that the public can download to discover *Stolpersteine* located within their respective states. As of March 2018, there are over 67,000 stones in twenty-two countries.

stones have been laid for multiple victim groups: Jews, Sinti and Roma, “euthanasia” victims, homosexuals, Jehovah’s Witnesses, those labeled “asocial” and those who were persecuted because of political or religious resistance against the Nazis.⁸⁷ Within the state of Berlin, there are currently 7543 Stumbling Stones. Of these: 7039 have been dedicated to Jewish victims, 306 to those who resisted against the Nazi regime, 119 to “euthanasia” victims, 37 to homosexuals victims, 22 to persecuted Jehovah’s Witnesses, 11 to “asocial” victims, and 1 to a Sinti and Roma victim.⁸⁸ Given the difference in the size of their victim groups (an estimated six million Jews and an estimated 300,000 “euthanasia” victims), it is understandable that Jews will have a substantially larger percentage of Stumbling Stones. However, with only 119 stones for “euthanasia” victims, the chances of a Stumbling Stone for a disabled victim being discovered are lower than other victim groups, such as the Jews or religious and political resisters.⁸⁹

The stones invite their own discussion about their role as a memorial, but each stone provides individual stories amidst a history of mass genocide.⁹⁰ Furthermore, they disrupt daily life, more so than a memorial at a former site of murder would, due to their prominent public location.⁹¹ However, support for the stones is not unanimous across Germany. The city of Munich has continually prohibited Stumbling Stones from being installed within its jurisdiction, and the far-right party, Alternative for Germany (AfD), argues that “the stumbling stone initiators impose a culture of remembrance” by controlling who is memorialized, when, and

⁸⁷ Knittel, *The Historical Uncanny*, 64.

⁸⁸ Stolpersteine in Berlin, “Finding Stolpersteine,” <https://www.stolpersteine-berlin.de/en/finding-stolpersteine/extended> (accessed 12 January 2018).

⁸⁹ It is even less likely for passers-by to engage with a stone for homosexual, Sinti and Roma, Jehovah’s Witness, or “asocial” victims.

⁹⁰ Sharples, *Postwar Germany and the Holocaust*, 124. For more see: <https://edition.cnn.com/2018/03/29/europe/germany-holocaust-stumbling-stones-far-right-intl/index.html>

⁹¹ Sharples, *Postwar Germany and the Holocaust*, 124.

how.⁹² Within reunified Germany memorialization for all victim groups has grown, but the resistance to the *Stolpersteine* commemoration project highlights the tensions and difficulties around contemporary memorialization, which impacts the memorialization of all victim groups.

Following the timelines of establishment for the different memorial spaces, it is arguable that Germany's memorialization of the victims of Nazi genocide followed a ripple effect: it began at sites of murder, radiated out to public spaces of commemoration, and finally extended to artistic expressions of memorialization. From the evidence provided, it is clear that disabled victims have faced a delay in memorialization, in comparison to other victim groups, at former sites of murder and in public spaces within Germany. Memorialization at former "euthanasia" centres began after memorialization at former concentration camps, and disabled victims, along with "other" marginalized victim groups, were omitted or left on the periphery of Germany's memorial landscape until the 1980s. Since reunification, all victim groups have experienced an increase in memorialization at former sites of murder, in public spaces, and through artistic representations of memorials. However, as this thesis has exhibited, disabled victims have experience a void and delay in their memorialization, but now the question is: Why?

⁹² Ibid., 125; Atika Shubert and Nadine Schmidt, "Germany's Holocaust Mini-Memorials Go Missing,"

Chapter Two: The Inhibitors to Memorialization

The Nazis' eventual "euthanasia" program established itself on long term pejorative beliefs about the disabled, and through increasingly systematic encroachments on the respect given to, and rights of, disabled Germans. In parallel, the perception of Germany's disabled garnered more influence through state issued actions, which culminated with the "euthanasia" program. As this thesis has argued, disabled victims of the "euthanasia" program have received a delayed recognition within narratives memorializing victims of National Socialism. Establishing an overview of the treatment of the disabled by focusing on social, medical and legal factors throughout Germany's twentieth century history helps explain why the memorialization of disabled victims was delayed in post-World War II Germany.

The discourse of eugenics, "the science of improvement of the human race by better breeding", grew out of the larger late nineteenth century concept of Darwinism, an evolutionary theory that is based on natural selection and the success of 'stronger' genes.⁹³ The concept of eugenics acquired increasing popularity in the early twentieth century both within Germany and beyond its borders as medical professionals sought to categorize and rank humans within different 'races' based on superficial features.⁹⁴ In Germany, the concept of Darwinism was exacerbated by the political turbulence that surrounded the end of World War I and the argument that "healthy" Germans had died in the conflict, while the "unfit and unproductive" had survived and would pass on their "weak" genes to the next generation through a process of "negative

⁹³ Poore, *Disability in Twentieth Century German Culture*, 44.

⁹⁴ Ibid; Evans, *Forgotten Crimes*, 107; Hepburn, "Lives Worthy of Life and Remembrance," 25. It is imperative to note that Weimar Germany was not alone in its adoption of eugenic ideology. Countries including Great Britain, Switzerland and the United States also prescribed to the belief of 'improving the human race' through genetic measures.

selection”.⁹⁵ As the concept of a nation as a “race” gained momentum within the newly established Weimar Republic, and as the country reeled from the losses of World War I, support for sterilizing the “unfit” grew, in order to protect the German “race” (“*Volk*”). However, the practice was illegal in the Weimar Republic and proponents for legalizing sterilization were divided between those in favor of voluntary sterilization, and those in favor of coercive sterilization.⁹⁶

Also during this time, advocates for “euthanasia” entered the discussion and vocalized their opinions on how to “deal with” disabled Germans. In 1920, Karl Binding, a lawyer, and Alfred Hoche, a German psychologist, published *Permission for the Destruction of Life Unworthy of Life*, which argues for an individual’s right to end their lives, and to permit “euthanasia” as a legitimate method for relieving patients of their ailments.⁹⁷ Within their work, Binding and Hoche also arbitrarily refer to the disabled collectively as “incurable idiots...who are a terrible, heavy burden upon their relatives and society as a whole.”⁹⁸ Burleigh outlines three groups of individuals who would be impacted by the rhetoric Binding and Hoche promoted: the terminally ill or mortally wounded, the developmentally disabled and healthy individuals who have become unresponsive due to an accident.⁹⁹ With regards to the developmentally disabled,

⁹⁵ Poore, *Disability in Twentieth Century German Culture*, 45; Eric Weitz, *Weimar Germany: Promise and Tragedy* (Princeton: Princeton University Press, 2007), 98; Philipp, Osten, “Photographing Disabled Children in Imperial and Weimar Germany,” *Cultural and Social History: The Journal of the Social History Society* 7, no.4 (May 2010): 523, <https://doi-org.ezproxy.library.uvic.ca/10.2752/147800410X12797967061082>.

⁹⁶ Robert Proctor, *Racial Hygiene: Medicine Under the Nazis* (Cambridge: Harvard University Press, 1988), 101; Michelle Mouton, *From Nurturing the Nation to Purifying the Volk: Weimar and Nazi Family Policy, 1918-1945* (New York: Cambridge University Press, 2007), 40. Although the practice was illegal, sterilizations did nevertheless occur in Germany. Dr. Gerhart Boeters, a district physician in Saxony and advocate of coercive sterilization, openly boasted about the sixty-three sterilizations he had performed.

⁹⁷ Burleigh, *Death and Deliverance*, 17; Hepburn, “Lives Worthy of Life and Remembrance,” 27.

⁹⁸ Burleigh, *Death and Deliverance*, 17.

⁹⁹ *Ibid.*, 18.

“there was little concern [for] precise categories”.¹⁰⁰ Burleigh argues that Binding and Hoche’s work was “the most influential contribution to the debate on euthanasia”, and it is plausible that their arbitrary categorization of disabled individuals contributed to the establishment of the precedent of apathy towards the diversity of disabilities, which impacted both the treatment of disabled Germans and their subsequent memorialization.¹⁰¹

However, Binding and Hoche do acknowledge that “in the case of feeble-minded persons who appear to be enjoying their lives...such measures [“euthanasia”] would have to be consensual, or would be prohibited.”¹⁰² Therefore it is evident that Binding and Hoche were not demanding immediate, widespread extermination of all disabled Germans. Nevertheless, the disabled were still perceived to be “not merely worthless, but actually existences of negative value.”¹⁰³ Binding and Hoche claimed that the annual cost for each institutionalized patient was 1,300 Reichsmarks (RM), which equated to “a massive capital in the form of foodstuffs, clothing and heating, which is being subtracted from the national product for entirely unproductive purposes.”¹⁰⁴ Although the statistics in their report are questionable, by evaluating disabled individuals based on their productivity and use of resources, Binding and Hoche aided in the expansion of the discussion about the role disabled Germans held in the state, beyond the medical community and into German society.

Overall, disabled and non-disabled Germans co-existed within their communities, but as the health of the German “race” developed a new urgency after World War I, disability “became

¹⁰⁰ Ibid., 17.

¹⁰¹ Ibid., 15; Knittel, *The Historical Uncanny*, 38; Bryant, *Confronting the “Good Death”*, 22. Binding and Hoche’s work was widely circulated and cited by those involved in *Aktion T4*.

¹⁰² Burleigh, *Death and Deliverance*, 17.

¹⁰³ Ibid.

¹⁰⁴ Burleigh, *Death and Deliverance*, 19. Binding and Hoche’s work was published in 1920, only two years after the end of World War I, a time when Germany had faced rations, political upheaval and insurmountable loss.

a focal point for sociopolitical and cultural controversies in newly intense ways.”¹⁰⁵ As Germany sought to rebuild itself, establishing the roles disabled people would hold in society became a means for German citizens to evaluate the success of the new democracy.¹⁰⁶ The 1919 Weimar Constitution, the governing document for the newly created democratic regime, promoted, amongst other things, equality, free speech and freedom to participate in one’s community; however, in practice, the disabled were not granted equal access to this right.¹⁰⁷ While “many remained objects of charity or social outcasts” and “appeared in freak shows,” others were “hidden away by their ashamed families,” perceived to be “crippled beggars” on the streets, or became the focal point for malicious jokes.¹⁰⁸ Of course, non-disabled Germans undervaluing or preferring to avoid disabled communities does not equate to supporting “euthanasia” practices; however, it does highlight a preference for their removal and exclusion.

Under Nazi rule, the racial hygiene movement became increasingly aggressive and radicalized. Less than six months after taking control of Germany in 1933, Hitler enacted the first eugenic regulation of Nazi rule, the Law for the Prevention of Offspring with Hereditary Diseases.¹⁰⁹ This law decreed anyone who was “suffering from a hereditary disease” was to be sterilized; therefore it was commonly known as the “sterilization law”.¹¹⁰ This group of “hereditary sufferers” included those who were “feebleminded”, epileptic, deaf, blind, manic-

¹⁰⁵ Poore, *Disability in Twentieth Century German Culture*, 1; Osten, “Photographing Disabled Children,” 525. It should also be noted that within Weimar Germany, like their non-disabled compatriots, many disabled people held jobs in their communities, they had relationships, were educated in regular schools or institutions, and they received medical treatment or rehabilitation. Not all disabled Germans faced constant oppression.

¹⁰⁶ Poore, *Disability in Twentieth Century German Culture*, 1; Osten, “Photographing Disabled Children,” 525.

¹⁰⁷ Weitz, *Weimar Germany*, 32.

¹⁰⁸ Poore, *Disability in Twentieth Century German Culture*, 1.

¹⁰⁹ Burleigh, *Death and Deliverance*, 11; Henry Friedlander, “Registering the Handicapped,” 90. The law was issued in on July 24th, 1933, and came into effect on January 1st, 1934.

¹¹⁰ Friedlander, “Registering the Handicapped,” 90.

depressive, schizophrenic, or who suffered from severe alcoholism or physical deformities.¹¹¹ Sterilization operations involved a vasectomy for men and ligation of the fallopian tubes for women.¹¹² Friedlander argues that the 1933 sterilization law served as a model for all future Nazi eugenic legislation, and that the process of identifying those who were genetically “unfit” defined who did and did not belong to German society.¹¹³ The sterilization law also created a system of Hereditary Health Courts, which operated through magistrate courts and were instructed to evaluate applications for potential sterilizations.¹¹⁴ 220 Health Courts were in operation during the Third Reich, and each court panel consisted of two doctors and a judge.¹¹⁵ These panels made their decisions without examining the individuals named in the application. Instead, the panels consulted the medical notes provided to them and the individual’s family trees to determine if they possessed any “hereditary diseases” or disabilities.¹¹⁶ Poore emphasizes that it is important to take the limits of diagnostic precision at the time into account, as well as the influence of the panelists’ ideological biases on these medical decisions.¹¹⁷ The category of “feeble-mindedness” was determined based on bias and opinion, instead of medical criteria.¹¹⁸ To be diagnosed with “hereditary feeble-mindedness”, the individual in question had to take an orally administered “test” and their score, which was subjectively determined by the examiner,

¹¹¹ Ibid.

¹¹² Henry Friedlander, *The Origins of Nazi Genocide*, 29-30; Burleigh, *Death and Deliverance*, 56; Robert Proctor, “Eugenics in Hitler’s Germany,” in *Deaf People in Hitler’s Europe*. ed Donna Ryan and John Schuchman (Washington: Gallaudet University Press, 2002), 37. Older women were sometimes sterilized with radium and X-rays as of 1936, due to an amendment to the original 1933 sterilization law, and by 1943 women could be sterilized with an injection of cooled carbon dioxide to scar and damage their fallopian tubes.

¹¹³ Friedlander, *The Origins of Nazi Genocide*, 23.

¹¹⁴ Poore, *Disability in Twentieth Century German Culture*, 77; Henry Friedlander, “Holocaust Studies and the Deaf Community,” in *Deaf People in Hitler’s Europe*. Ed. Donna Ryan and John Schuchman (Washington: Gallaudet University Press, 2002), 21.

¹¹⁵ Burleigh, *Death and Deliverance*, 56.

¹¹⁶ Ibid; Poore, *Disability in Twentieth Century German Culture*, 77.

¹¹⁷ Poore, *Disability in Twentieth Century German Culture*, 76.

¹¹⁸ Friedlander, *The Origins of Nazi Genocide*, 31; Proctor, “Eugenics in Hitler’s Germany,” 37.

determined whether or not they would be sterilized.¹¹⁹ Friedlander argues that “the test measured learning far more than innate ability”, which is exemplified in the test’s section on “acquired knowledge”.¹²⁰ In this section individuals were asked about the name of their hometown, the capitals of Germany and France, Germany’s form of government, who Luther and Bismarck were, who discovered America, when Christmas is and the meaning of the holiday, how many days are in a week and how many months are in a year.¹²¹

Once an application was submitted it was very likely it would be approved and the sterilization would be carried out. For example, in 1934, 93% of applications were approved, 89% in 1935 and 85% in 1936.¹²² It is estimated that 375,000-400,000 individuals were sterilized from 1933-1945, with 300,000 of these occurring prior to the beginning of World War II.¹²³ The official number of sterilization victims will never be known because sterilization statistics were only documented until 1937.¹²⁴ Although sterilizations were not intended to kill the victims, the surgeries did result in fatalities. Of the 169,862 sterilizations that occurred from 1934-1936, 437 of them resulted in patient deaths due to surgical complications.¹²⁵

Within Nazi Germany, propaganda was a prominent medium for the government to disseminate their messages and racial goals to the public.¹²⁶ In 1936, the Reich Propaganda Office produced an image that negatively portrayed disabled people by presenting the costs of

¹¹⁹ Friedlander, *The Origins of Nazi Genocide*, 31.

¹²⁰ Ibid.

¹²¹ Ibid., 32.

¹²² Poore, *Disability in Twentieth Century German Culture*, 78.

¹²³ Ibid; Friedlander, *The Origins of Nazi Genocide*, 30. An estimated 75,000 were sterilized from 1939 to 1945 in German occupied territories.

¹²⁴ Friedlander, *The Origins of Nazi Genocide*, 28.

¹²⁵ Ibid; Evans, *Forgotten Crimes*, 111. Due to the invasive nature of their sterilization procedure, more women died as a result of surgical complications in comparison to male sterilization victims. In 1935, 35,340 women were coercively sterilized, and 173 died as a result of the procedure. In comparison, 37,834 men were sterilized in 1935, and 35 died due to the procedure.

¹²⁶ Poore, *Disability in Twentieth Century German Culture*, 67.

caring for disabled Germans as an extreme expense, in comparison to the cost of government administration.¹²⁷ The caption claims that the cost of caring for 880,000 people with “hereditary diseases” is \$1200 million Reichsmarks, whereas the cost of the government administration at the national, state and local levels is \$713 million Reichsmarks.¹²⁸



This image was produced in 1936, a time when the memories of the Great Depression remained at the forefront of the minds of citizens, and the Nazis used these pervasive memories to their advantage by bombarding the German population with propaganda, such as Figure 1, that emphasized, and arguably exaggerated, the cost of caring for disabled Germans.¹²⁹ This resulted in a drastic reexamination of the expansion of the welfare state and the increased interest in

¹²⁷ United States Holocaust Memorial Museum, Propaganda slide featuring a chart produced by the Reich Propaganda Office showing that in 1936 the total cost of caring for 880,000 people ill with hereditary disease was 1200 million Reichsmarks, which was almost double the 713 million RM spent on the administration of the national, state, and local government. Photograph Number 07672, 1936. <https://collections.ushmm.org/search/catalog/pa1072059> (accessed 14 February 2018).

¹²⁸ Ibid.

¹²⁹ Hepburn, “Lives Worthy of Life and Remembrance,” 51.

eugenics amongst the German population as a method to protect the German “race”.¹³⁰

Therefore, disabled Germans were methodically excluded and attacked during the early years of the Third Reich through discriminatory laws, propaganda, and increased public discourse about eugenics. However, relations between the disabled and the Nazis entered a new, deadly phase in 1939.

Hitler used the outbreak of World War II on September 1st, 1939 as an opportunity to radicalize the oppression of disabled Germans by moving from sterilization practices to systematic murder.¹³¹ On August 18th, 1939 the Reich Ministry of the Interior announced compulsory registration of all “malformed” newborn children.¹³² Under this decree, all doctors, nurses and midwives were required to submit reports about these children to the Reich Committee in Berlin, where public health officials decided whether the child should live or die.¹³³ Based on these recommendations, the children would then be transferred to pediatric killing wards. From 1939 to 1945, 5,000-25,000 disabled children were murdered in Germany, and German occupied territories.¹³⁴ In October of 1939, Hitler secretly authorized the establishment of the adult “euthanasia” program, which he backdated to September 1st, 1939 to make the order appear to be a wartime measure.¹³⁵ The headquarters for the newly expanded “euthanasia” program operated out of Tiergartenstrasse No.4 in Berlin, which resulted in the “euthanasia” program being referred to as the “T4” program, or *Aktion T4*, in an attempt to keep the operation a secret.¹³⁶ The “euthanasia” program was carried out in six main centres within

¹³⁰ Sheila Weiss, “The Race Hygiene Movement in Germany,” *Osiris* 3 (1987): 222, <http://www.jstor.org.ezproxy.library.uvic.ca/stable/301759222>.

¹³¹ Burleigh, *Death and Deliverance*, 112.

¹³² *Ibid.*, 99.

¹³³ Evans, *Forgotten Crimes*, 26; Burleigh, *Death and Deliverance*, 100.

¹³⁴ Evans, *Forgotten Crimes*, 26; Burleigh, *Death and Deliverance*, 111. Burleigh states 6,000.

¹³⁵ Evans, *Forgotten Crimes*, 42.

¹³⁶ *Ibid.*, 47.

Germany: Grafeneck, Hadamar, Sonnenstien, Bernburg, Hartheim, and Brandenburg. It is estimated that 70,000 Germans were murdered at these facilities from 1940 to 1941.¹³⁷ At “euthanasia” centres victims were murdered through starvation, lethal injections, or in the facilities’ gas chambers.¹³⁸

As mentioned in Chapter One, one of the primary methods of transporting victims to “euthanasia” centres was on large grey buses, which had opaque windows, in an attempt to keep the transportations of victims a secret.¹³⁹ However, despite the efforts of officials, neither the buses nor the “euthanasia” program stayed a secret. The staff and victims of the hospitals, care homes and institutions where the victims were collected, knew what the grey buses represented.¹⁴⁰ Villagers who lived close to the “euthanasia” centers knew as well. Residents living in the town of Hadamar are reported to have said “here comes the murder crate again” upon seeing the grey buses.¹⁴¹ As knowledge about the killings at the “euthanasia” facilities spread, so too did public discontent, which contributed to the end to the initial adult “euthanasia”

¹³⁷ Henry Friedlander, “Step by Step,” 498; Burleigh, *Death and Deliverance*, 150; Evans, *Forgotten Crimes*, 48; Hepburn, “Lives Worthy of Life and Remembrance,” 64; Alexander Mitscherlich and Fred Mielke, *Doctors of Infamy: the Story of the Nazi Medical Crimes*, trans. Heinz Norden (New York: H. Schuman, 1949), 103. Grafeneck was the first “euthanasia” center to open and was in operation from January to December of 1940. Brandenburg was the next centre to open, which was in operation from February to September of 1940. This was followed by Hartheim (May 1940 to August 1941), Sonnenstein (June 1940 to August 1941), Hadamar (January to August, 1941) and Bernberg (January to September, 1941).

After a victim had been murdered, a notice was sent to their next of kin to inform them of the victim’s passing. However, the causes of death were falsified to conceal the “euthanasia” program. Common causes of death that were used included: strokes, pneumonia, appendicitis, and meningitis. Furthermore, the death reports also lied about the location of a victim’s death. For example, if an individual was murdered at Hadamar, the notice sent to their family would state a different “euthanasia” centre as their place of death. These false death reports also complicate the memorialization process. They could have been used as primary source evidence to identify how many Germans were murdered, as well as their accompanying disabilities.

¹³⁸ Evans, *Forgotten Crimes*, 48, 62; Burleigh, *Death and Deliverance*, 149.

¹³⁹ Evans, *Forgotten Crimes*, 26.

¹⁴⁰ *Ibid.*, 28.

¹⁴¹ Poore, *Disability in Twentieth Century German Culture*, 88; Mitscherlich and Meilke, *Doctors of Infamy*, 108. Children were also aware of what was happening at the “euthanasia” center and would say “you’re not very smart. You’re going to the oven in Hadamar.”

program; however, the disabled Germans continued to be murdered.¹⁴² Gas chambers and crematoria at Hadamar, Brandenburg, Grafeneck and Sonnenstein were dismantled, but at Hartheim and Bernberg victims continued to be gassed and cremated.¹⁴³ Following 1941, killings continued at Nazi “euthanasia” centres, with the exception of Grafeneck, and in state hospitals with lethal injections or starvation until 1945.¹⁴⁴ Also in 1941, the second phase of “euthanasia” killings began with the *Aktion* “14f13” program.¹⁴⁵ *Aktion* “14f13” resulted from the continued use of “T4 program” gas chambers to kill inmates at pre-existing concentration camps, including Sachsenhausen, Buchenwald, Mauthausen, Neuengamme, Flossenbürg, Dachau and Ravensbrück, as well as the extermination camp, Auschwitz-Birkenau.¹⁴⁶ Those who were too sick to work, were Jewish, were labeled “asocial”, or were political prisoners all became victims under “14f13”.¹⁴⁷ Due to the somewhat arbitrary selection of victims by Nazi officials, and extensive lack of medical criteria, “14f13” was also referred to as “wild euthanasia”.¹⁴⁸ It is estimated that 20,000-40,000 victims were murdered during “14f13”.¹⁴⁹ Collectively, from 1939 to 1945 it is estimated that 300,000 individuals were murdered as a result of the Nazi “euthanasia” program.¹⁵⁰

¹⁴² Poore, *Disability in Twentieth Century German Culture*, 88; Friedlander, “Step by Step,” 498; Evans, *Forgotten Crimes*, 31, 67; Mitscherlich and Meilke, *Doctors of Infamy*, 96; *Historical Uncanny*, 50. After 1940, Grafeneck was used to house children from cities that were at risk of being bombed by the Allied Forces.

¹⁴³ Mattias Meush, “Hadamard: A German Psychiatric Treatment Center in WWII,” *Bimolecular Engineering* 17 no.2 (January 2001): 66, [https://doi.org/10.1016/S1389-0344\(00\)00067-8](https://doi.org/10.1016/S1389-0344(00)00067-8); Hepburn, “Lives Worthy of Life and Remembrance,” 93.

¹⁴⁴ Burleigh, *Death and Deliverance*, 238.

¹⁴⁵ Hepburn, “Lives Worthy of Life and Remembrance,” 44.

¹⁴⁶ Burleigh *Death and Deliverance*, 220; Knittel, *The Historical Uncanny*, 50.

¹⁴⁷ Burleigh, *Death and Deliverance*, 221.

¹⁴⁸ Ibid; Evans, *Forgotten Crimes*, 68.

¹⁴⁹ Evans, *Forgotten Crimes*, 93.

¹⁵⁰ Susanne Knittel, “Beyond Testimony: Nazi-Euthanasia and the Field of Memory Studies” *The Holocaust in History and Memory*, 5 (April 2013): 88, http://www.academia.edu/3195617/Beyond_Testimony_Nazi_Euthanasia_and_the_Field_of_Memory_Studies.

Despite the suffering disabled Germans endured during the Weimar Republic and Third Reich, their experiences failed to be readily acknowledged or respected in both West Germany and reunified Germany. Here, it is important to remember that all memorialization is impacted not only by public memory, but also by scholarship, and the political, cultural, institutional, and psychological motivations within a state.¹⁵¹ The culmination of these factors in Germany resulted in “the promotion of some memories and the suppression of others”, including the memories of disabled victims.¹⁵²

In West Germany, the history of National Socialism was first treated with a “collective amnesia” during the 1940s and 1950s, where “postwar Germans suffered from an incapacity to ‘work through’ the traumas of the era [the Third Reich].”¹⁵³ It was during this period that Nazi perpetrators of “euthanasia” were tried at the Nuremberg Medical Trials from 1946 to 1947 (NMT) and at smaller West German courts.¹⁵⁴ Although Germans supported the larger trials, which convicted a handful of major war criminals, the successor trials, which included the NMT and proceedings in West German courts, involved moving beyond top Nazi officials and confronting the complicity to Nazi crimes, which permeated multiple levels of German society, and made it difficult for civilians to separate ‘Nazis’ from ‘Germans’.¹⁵⁵ Because of this, Hepburn argues that “the German public was simply not interested in the trial[s]” and Bryant claims they “were highly critical” of them.¹⁵⁶ Thus, the court proceedings failed to convey the seriousness of the atrocities committed against disabled Germans, an act that had ramifications on their postwar memorialization. The majority of the perpetrators of “euthanasia” crimes were

¹⁵¹ Knittel, *The Historical Uncanny*, 11.

¹⁵² *Ibid.*

¹⁵³ Bryant, *Confronting the “Good Death”*, 8; Sharples, *Postwar Germany and the Holocaust*, 6.

¹⁵⁴ Bryant, *Confronting the “Good Death”*, 5, 108; Hepburn, “Lives Worthy of Life and Remembrance,” 47-48.

¹⁵⁵ Bryant, *Confronting the “Good Death”*, 108.

¹⁵⁶ *Ibid.*, 5, 108; Hepburn, “Lives Worthy of Life and Remembrance,” 47-48.

never convicted, or served minimal sentences, and prejudiced perceptions of disabled victims were evident during German court proceedings.¹⁵⁷ During the 1951 to 1953 proceedings for Dr. Alfred Leu, who was called to trial for murdering disabled children, he was acquitted of his charges because the court agreed that Dr. Leu had “not acted maliciously ‘because the children or the mentally ill were guideless or defenseless in the first place’” and that those he had killed were “low forms of existence with no perceptible emotional life”.¹⁵⁸ Even after medical professionals were brought to trial, and the horror of the “euthanasia” program was uncovered, many Nazi perpetrators of “euthanasia” did not believe they had committed crimes against disabled Germans.¹⁵⁹ This resulted in an extensive portion of the medical community from Nazi Germany continuing to practice in postwar Germany and perpetuate their perceptions of disabled Germans.¹⁶⁰ Therefore, the cumulative treatment of “euthanasia” crimes in postwar Germany contributed to the delayed memorialization of disabled Germans because it established a precedent that they were not victims of National Socialism.

However, there were members of the German medical community that spoke out against Nazi “euthanasia”. Two early reports, written by Germans about the “euthanasia” program,

¹⁵⁷ Bryant, *Confronting the “Good Death”*, 5; Evans, *Forgotten Crimes*, 146; Hepburn, “Lives Worthy of Life and Remembrance,” 47-48. During the NMT, twenty-three defendants, consisting primarily of physicians, were charged for their involvement in monstrous experiments on concentration camp prisoners and execution of the “euthanasia” program. Of these twenty-three, only four were found guilty for their involvement in the murderous “euthanasia” program: Waldemar Hoven, Kurt Blome, Karl Brandt and Viktor Brack. Hoven, Brandt and Brack were convicted then executed. Blome was acquitted, but was later sentenced to twenty years in prison by French authorities. Additionally, in 1946, Dr. Hilde Werneicke and Nurse Helene Wiczorek, former medical staff at a hospital in Obrawalde, were sentenced to death for their involvement in the “euthanasia” program; however, they were the only defendants in a West German court to receive this conviction.

¹⁵⁸ Poore, *Disability in Twentieth Century German Culture*, 188; Evans, *Forgotten Crimes*, 81; Hepburn, “Lives Worthy of Life and Remembrance,” 48. Additional examples of disabled victims not being respected or recognized: 1) While concentration camp victims were being buried and memorialized, the remains of disabled victims who had been murdered and used for scientific “experiments”, continued to be used for research until the mid-1960s. 2) Many of the doctors and nurses who were charged for their involvement in sterilizing Germans were brought to trial for the sterilizations they committed at concentration camps during the war, not for the sterilizations that occurred under the 1933 sterilization law.

¹⁵⁹ *Ibid.*, 148, 149.

¹⁶⁰ Evans, *Forgotten Crimes*, 148.

include Alice Platen-Hallermund's *The Killing of the Mentally Ill in Germany: From the German Medical Commission at the American Military Court, 1948* (*Die Tötung Geisteskranker in Deutschland: Aus der deutschen Ärztekommision beim amerikanischen Militärgericht*) and Alexander Mitscherlich and Fred Mielke's *The Dictate of Contempt for Humanity* (*Das Diktat der Menschenverachtung*), which was originally printed in 1947 and later reprinted in 1960 as *Medicine without Humanity: Documents of the Nuremberg Medical Trial* (*Medizin ohne Menschlichkeit: Dokumente der Nürnberger Ärzteprozess*).¹⁶¹ However, neither work was reviewed in German medical journals because no German publisher was willing to distribute works discussing Nazi "euthanasia" until the 1960s.¹⁶² The early works of Platen-Hallermund, Mitscherlich and Mielke indicate that the crimes committed against disabled victims were not entirely disregarded, but the resistance they faced from the German medical community suggests their viewpoint was a minority. This enforced silence about Nazi "euthanasia" contributed to the delay in memorialization because it inhibited Germans from engaging with this area of the Nazi past.

During the 1960s, West Germany began to move past its "collective amnesia" and Germans began to openly discuss the past, particularly the extensive suffering of the Jews.¹⁶³ It

¹⁶¹ Poore, *Disability in Twentieth Century German Culture*, 187; Burleigh, *Death and Deliverance*, 291; Jürgen Peiffer, "Phases in the Postwar German Reception of the 'Euthanasia Program' (1939-1945) Involving the Killing of the Mentally Disabled and its Exploitation by Neuroscientists," *Journal of the History of Neurosciences* 15 no.3 (June 2010): 212, <https://doi.org/10.1080/09647040500503954>.

Mitscherlich and Mielke's work was also published in the 1949 work *Doctors of Infamy: The Story of the Nazi Medical Crimes*. Platen-Hallermund, Mitscherlich and Mielke all attended the Nuremberg Medical Trials as young representatives of the German Medical Association.

¹⁶² Poore, *Disability in Twentieth Century German Culture*, 186, 187; Peiffer, "Phases in the Postwar German Reception of the 'Euthanasia Program'," 213. Additionally, reputable doctors, such as pharmacologist Wolfgang Heuber from Berlin, pathologist Franz Büchner from Freiburg and physiologist Freidrich Rein from Göttingen took legal action against Mitscherlich because they claimed they were wrongfully associated with the "euthanasia" program. They created a controversy around Mitscherlich and Mielke's work and ensured it was not widely reviewed.

¹⁶³ Sharples, *Postwar Germany and the Holocaust*, 6.

was not until the 1980s that Nazi “euthanasia” was associated with the history and crimes of Nazi Germany.¹⁶⁴ The 1980s was a pivotal decade with numerous shifts in the treatment and perception of disabled victims of National Socialism. In 1986, the first full-scale study of the “euthanasia” program was published: Ernst Klee’s *“Euthanasia” in the Nazi State: The Extermination of Life Not Worth Living (“Euthanasie” im NS-Staat: die Vernichtung lebensunwerten Lebens)*.¹⁶⁵ Prior to the 1980s, there was a long period of uncertainty, amongst German historians, regarding who exactly was responsible for writing the history of the Nazi crimes and “euthanasia” victims. Klee credits his work to a shift amongst a new generation of medical professionals who began to “probe the past of their respective professions”, as they were able to openly analyze and criticize the roles of their predecessors in Nazi Germany.¹⁶⁶ The 1980s also witnessed the beginning of disability studies and the use of disability as an analytical lens with which to examine the Nazi past.¹⁶⁷ During this time disability also became equated with “gender and race as an analytical construct used to define what it means to be human”.¹⁶⁸ These changes re-established people with disabilities as individuals worthy of scholarly exploration and aided in the recognition of disabled Germans as victims of Nazi policies. This assisted in their eventual memorialization within Germany, but this process was delayed due to continued discrimination towards disabled Germans.

The end of World War II did not bring about an immediate shift in societal perceptions of disabilities, even though West German society included a variety of disabled individuals: veterans, coercive sterilization survivors, those who had managed to evade death at a

¹⁶⁴ Evans, *Forgotten Crimes*, 96.

¹⁶⁵ Burleigh, *Death and Deliverance*, 293.

¹⁶⁶ *Ibid.*, 292.

¹⁶⁷ Jill Mitchell Nielson, “‘Ballast Existence’: The Disabled, Jews and Nazi Genocide,” MA thesis, University of British Columbia, 2012, 9, <https://open.library.ubc.ca/cIRcle/collections/ubctheses/24/items/1.0073504>.

¹⁶⁸ Nielson, “Ballast Existence,” 9.

“euthanasia” centre, and those who developed a disability due to malnourishment or disease immediately following 1945.¹⁶⁹ Within West Germany, medical professionals deliberated how best to care for and integrate disabled veterans and those who had a disability due to illness into society; however, “in all these discussions there was almost never any reflection on the fate of disabled people under National Socialism or the involvement of professionals and special education teachers in carrying out the policies of racial hygiene.”¹⁷⁰ These debates also defined who was labeled as disabled, which further excluded disabled survivors. In the Federal Ministry for Labor and Social Affairs’s commissioned work *The Disabled and Physically Handicapped in the Struggle for Existence in Former Times and Today*, 1956, the term disabled was reserved for “war or workplace victims whose health had been harmed in the service of society,” and those who failed to meet these requirements were deemed “physically handicapped.”¹⁷¹ Although some survivors of Nazi sterilization and “euthanasia” may have rejected both terms, disabled and physically handicapped, their segregation from the German government’s definition of disabled impacted their ability to receive financial support and government services. Those who matched the Labor Ministry’s definition of disabled were eligible for pensions and the protection of welfare laws. Those whom the Labor Ministry deemed “physically handicapped” were also labeled as “non-genuine disabled” and were expected to be cared for by their family, the church or a charity.¹⁷² Therefore, the German government aided in the segregation of disabled victims of Nazi crimes from Germany’s disabled community; an act that contributed to their delayed

¹⁶⁹ Poore, *Disability in Twentieth Century German Culture*, 176. Diagnoses of tuberculosis and spinal tuberculosis increased within younger segments of the population during this time, and polio plagued the country during an epidemic in the late 1940s and throughout the 1950s.

¹⁷⁰ *Ibid.*, 177.

¹⁷¹ *Ibid.*, 178.

¹⁷² *Ibid.*

memorialization because segregation and discrimination does not foster an environment for memorialization.

Furthermore, the notion that sterilization and “euthanasia” were medically sound actions permeated beyond Germany’s Nazi medical community, and influenced government legislation in both West Germany and reunified Germany. In 1953, the West German government issued the Federal Law for the Compensation of the Victims of National Socialist Persecution (*Entschädigungsgesetz*), which further segregated the more than 370,000 victims of sterilization and 300,000 “euthanasia” victims by denying them financial compensation for their suffering and official recognition as a victim group.¹⁷³ They were excluded because they were not viewed as victims of racial, religious, or political persecution.¹⁷⁴ Although Nazi crimes of sterilization and “euthanasia” were considered crimes against humanity, Germans who were sterilized under the 1933 sterilization law were viewed as having received genuine medical treatment.¹⁷⁵ It was not until 2007 that the 1933 Nazi sterilization law was officially declared unconstitutional.¹⁷⁶ However, victims of coercive sterilization still did not receive compensation under *Entschädigungsgesetz*, because their persecution was still not considered to have been racially or politically motivated.¹⁷⁷ This finally changed in 2011 when “euthanasia” victims were officially granted “equal status to those of other Nazi crimes” (eg. the Jews) by the German government.¹⁷⁸ However, it was not until 2017 that “euthanasia” victims were included in the German Parliament’s annual remembrance of victims of National Socialism, which takes place on

¹⁷³ Knittel, “Beyond Testimony,” 88.

¹⁷⁴ Ibid.

¹⁷⁵ Ibid.

¹⁷⁶ Ibid. Additionally, the German Society for Psychiatry, Psychotherapy and Neurology “refused to officially acknowledge the responsibility of German psychiatrists for the crimes committed in the name of Nazi medicine until 2010.”

¹⁷⁷ Ibid.

¹⁷⁸ Knittel, “Beyond Testimony,” 88.

January 27th.¹⁷⁹ Although disabled victims are now officially recognized as victims of Nazi crimes, it is evident that it took time for that to be socially accepted and expressed, which impacted and delayed the memorialization process.

It is arguable that one of the most significant factors in the marginalization of disabled victims from postwar memorialization in Germany is the lack of survivors and those who can lobby to promote the interests of the victims of Nazi euthanasia and coercive sterilization.¹⁸⁰ There were very few disabled survivors of the “euthanasia” program, and victims of sterilization have continued to face discrimination and ostracism, as this chapter has discussed and will explore further in Chapter Three within the context of deaf survivors.¹⁸¹ Overall, disabled Germans may not have been able to share their experiences because of their marginalized positions. “Marginalized groups can only contribute to the national memory ‘if they command the means to express their visions and if their vision [is] compatible [with] social or political objectives and inclinations.’”¹⁸² Furthermore, arbitrary categories such as “feble-minded” and “deaf and dumb”, which developed credibility during the Weimar Republic and Third Reich, continued into the postwar years and perpetuated prejudiced categorization and discrimination of disabled Germans. Therefore, disabled Germans were hindered in their ability to advocate for themselves because there were a limited number of survivors and their voices were suppressed by a society that was unwilling to include the plight of disabled Germans in the narrative of Nazi

¹⁷⁹ Jefferson Chase, “Bundestag Remembers Nazi 'Euthanasia' Victims,” *Deutsche Welle*, January 27, 2017. <http://www.dw.com/en/bundestag-remembers-nazi-euthanasia-victims/a-37295422>.

¹⁸⁰ Knittel, “Beyond Testimony,” 88.

¹⁸¹ Wulf Kansteiner, *In Pursuit of German Memory: History, Television, and Politics after Auschwitz* (Athens: Ohio University Press, 2006), 18, quoted in Knittel, “Beyond Testimony,” 89.

¹⁸² *Ibid.*, 88.

crimes.¹⁸³ This directly impacts the memorialization process, because, once again, disabled Germans were recognized as victims of National Socialism.

Knittel argues that German reunification in 1990 motivated debates about the need to acknowledge, compensate and memorialize all Germans who were persecuted under National Socialism, but that “these public debates still largely exclude the victims of the euthanasia [sic] program.”¹⁸⁴ Therefore, the marginalization of disabled Germans, which developed credibility during the Weimar Republic and Third Reich, has extended into post-war German society. Through the legal exclusion of disabled Germans from compensation and recognition, the prevailing opinion that sterilizations and “euthanasia” were medical procedures, not acts of genocide, and pervasive prejudiced perceptions of disabilities, disabled Germans have struggled to establish themselves as victims of Nazi crimes. This struggle has directly contributed to their delayed memorialization within West Germany and reunified Germany.

¹⁸³ Poore, *Disability in Twentieth Century German Culture*, 273; Knittel, “Beyond Testimony,” 88-89. It should be noted that disabled Germans were not passive victims to their post-war treatment in Germany. In West Germany in the 1970s, many disabled people have “increasingly insisted on self-determination” and “rejected the out-dated view of disabled people as only needy and helpless”. In 1987 the Federation of Victims of Euthanasia [sic] and Forced Sterilization was founded to assist victims and family members of victims. As of 2013, it is the only national organization dedicated to the victims of Nazi “euthanasia and has been an influential body in advocating for victims and survivors. Although the Federation is an advocate for disabled victims, it is unclear to what extent the Federation has impacted the memorialization process in Germany.

¹⁸⁴ Knittel, *The Historical Uncanny*, 14.

Chapter Three: The Deaf Experience

From 1933 to 1945, the Nazis implemented policies that directly attacked Germans who they believed to be “unfit” and “suffering” from hereditary ailments.¹⁸⁵ These individuals, who became victims of discrimination, sterilization, and “euthanasia” were those labeled as “feeble-minded”, epileptic, deaf, blind, manic-depressive, schizophrenic, or who suffered from severe alcoholism or physical deformities.¹⁸⁶ Although these individuals share the commonality of their victimization, this victim groups needs to be disentangled and explored further to understand the experiences of the victims and their varying disabilities.¹⁸⁷ This disentanglement is also essential to understanding their role within the postwar memorialization process in Germany. There has been a particularly loud call for increased research and awareness about the deaf victims of National Socialism, and this chapter will focus on this victim group to contribute to the much needed dialogue on the suffering of the deaf in Germany.¹⁸⁸ However, it is imperative to note that deafness extends past the boundaries of gender, class, race and religion. The expansive nature of deafness across the German population challenges the ability of historians to investigate the experiences of deaf victims to determine if their suffering was due to

¹⁸⁵ Henry Friedlander, “Registering the Handicapped in Nazi Germany: A Case Study,” *Jewish History* 11 no. 2 (1997): 90.

¹⁸⁶ Ibid.

¹⁸⁷ It is essential to note that Deaf people do not consider themselves to be disabled, and some prefer to identify as a cultural and linguistic minority. Due to the encompassing nature of the Nazis’ 1933 sterilization law, the term “disabled” became an umbrella term, which encompassed a number of Germans with varying abilities, despite their own association with, or disassociation from the term. Zaurov, “Deaf Holocaust,” 135.

¹⁸⁸ Peter Black, “A Call for More Research,” in *Deaf People in Hitler’s Europe*, ed. Donna Ryan and John Schuchman (Washington: Gallaudet University Press, 2002), 215; Horst Biesold, “Preface to German Edition,” Introduction to *Crying Hands: Eugenics and Deaf People in Nazi Germany*, trans. William Sayers (Washington: Gallaudet University Press, 1999), xii; Friedlander, “Holocaust Studies and the Deaf Community,” 15; Grace Renwand, “The Experience of the Deaf during the Holocaust,” essay submitted for the Cohodas Literary Prize (University of Northern Michigan, 2012), 7 <http://www.nmu.edu/english/sites/DrupalEnglish/files/UserFiles//Files/Renwand.pdf>; Zaurov, “Deaf Holocaust,” 135.

their deafness, or other factors, such as Jewishness.¹⁸⁹ This chapter will address the experiences of deaf Germans, both Jewish and non-Jewish, throughout the twentieth century, explore how the German Deaf community was impacted by the Nazi regime and address the delay in memorialization of the non-Jewish deaf in postwar Germany.

Discussions about deafness as a hereditary trait in Germany did not begin in the Weimar Republic. The first records on hereditary deafness in Germany date back to 1836. The first volume of the *Journal for Deaf Education* was published in 1888 and featured discussions about hereditary deafness, and in 1902 Friedrich Bezold, an ear doctor and professor of otolaryngology at the University of Munich, collected the first statistics about hereditary deafness.¹⁹⁰ These three evaluations concluded that hereditary deafness was a rarity.¹⁹¹ Similar findings were also published in Weimar Germany. A study conducted in 1924 stated that “the genetic transmission of deafness in a direct line from parents or grandparents is very infrequent, and even in the case of deafness in both parents it occurs only exceptionally.”¹⁹² Yet, despite previous evidence that showed deafness could not be transmitted genetically, the growing eugenics movement in Imperial and Weimar Germany entrenched the concept of hereditary deafness in the Weimar Republic, and medical professionals continued to perpetuate the belief that deafness was hereditary. A 1925 census claimed that 25,000 “deaf –mutes” lived in Germany, and roughly one third of them were hereditarily deaf.¹⁹³ Later in 1933, the director of the Kaiser Wilhelm Institute

¹⁸⁹ A substantial amount of the primary and secondary source material that focuses on deaf Germans is given by, or written about the experience of, deaf German Jews. Although this material provides insight into the experience of deaf Germans, the implications of their religion, and perceived “race” by the Nazis, cannot be overlooked.

¹⁹⁰ Horst Biesold, *Crying Hands Eugenics and Deaf People in Nazi Germany*, trans. William Sayers (Washington: Gallaudet University Press, 1999), 28.

¹⁹¹ *Ibid.*

¹⁹² H. Gutzmann, *Sprachheilkunde*, 3d ed. (Berlin, 1924), quoted in Biesold, *Crying Hands*, 28.

¹⁹³ Biesold, *Crying Hands*, 29. The term “deaf-mute” is offensive and incorrect. The use of speech is the choice of the deaf individual. Their inability to hear does not equate to an inability to speak.

for Anthropology in Berlin, Eugene Fischer, argued that of the 45,000 deaf Germans, “about 10,000 to 13,000” were hereditarily deaf.¹⁹⁴ Also during the Weimar Republic, support for racial hygiene and sterilization was growing amongst German teachers for deaf children, as they often connected eugenics with their professional responsibilities.¹⁹⁵ In a 1923 publication of *Journal for Deaf Education*, the executive committee of the Union of German Teachers of the Deaf demanded “that deafness be seen in the light of the modern science of genetics” and posed the question “should deaf-mutes marry?” to the readers of the journal.¹⁹⁶ Deaf Germans were also subjected to the same developing discussions about the financial “benefit” of sterilization procedures. In 1932, Rainer Fetscher, a medical doctor and leading eugenicist, argued “while it would cost a mere 120-150RMs to perform the [sterilization], it would cost 10-12,000RMs to educate a deaf and dumb child”.¹⁹⁷

Despite the ongoing negative discourse that connected eugenics and deafness within Weimar Germany, the Deaf community was thriving with social organizations, sports teams and schools.¹⁹⁸ In 1932, Berlin alone had 25 societies and political groups for deaf Germans; including The Reich Union of the Deaf of Germany (REGEDE), which was founded in 1927 and held an influential position in the lives of deaf Germans.¹⁹⁹ However, following Hitler’s rise to power in 1933, the Deaf community in Germany was heavily impacted. Discussions surrounding hereditary deafness within Weimar Germany had been inconsistent and inconclusive, but “Nazi race hygienists distorted what little evidence there was about the frequency of hereditary

¹⁹⁴ Ibid.

¹⁹⁵ Ibid., 19.

¹⁹⁶ G. Neuert, “Beruf und Fortbildung der Taubstummen in Baden,” *Blätter für Taubstummenbildung* 36, no. 5 (1923): 11, quoted in Biesold, *Crying Hands*, 199.

¹⁹⁷ Michael Burleigh, *Death and Deliverance: Reflections on Nazi Genocide* (New York: Cambridge University Press, 1997), 41.

¹⁹⁸ Jochen Muhs, “Deaf People as Eyewitnesses of National Socialism,” in *Deaf People in Hitler’s Europe*, ed. Donna Ryan and John Schuchman (Washington: Gallaudet University Press, 2002), 80.

¹⁹⁹ Muhs, “Deaf People as Eyewitnesses of National Socialism,” 80.

deafness...to fit their ideological goals and preconceived beliefs.”²⁰⁰ Deaf Germans became victims of the 1933 sterilization law, and it is estimated that 15,000 deaf people were sterilized in Nazi Germany.²⁰¹

One of these victims was Helga Gross, a deaf woman who lived in Hamburg. Helga was born in 1923 and was deaf since childhood.²⁰² She first learned about sterilization at the age of eleven or twelve, when a government official informed Helga and her deaf classmates that they all had to be sterilized, so that they could not have children in adulthood. Helga explains that she and her classmates were young; they didn't understand what it meant to be sterilized.²⁰³ It wasn't until 1939 when she was sixteen that Helga was selected for sterilization.²⁰⁴ Helga's parents were very upset, but Helga remained composed. She was unaware of the procedure's impact because sterilization had not been discussed at home, or at school, and because her other classmates, who had been sterilized, appeared to be fine.²⁰⁵ It wasn't until many years later, when she was thirty-five years old, that Helga realized the implications of her procedure.²⁰⁶ In 1959, when she saw her infant niece, Helga realized the loss she felt in her infertility.²⁰⁷ As she aged, Helga tried to suppress her feelings of loss and the memory of her sterilization.²⁰⁸

Helga's experience of being sterilized addresses the impact sterilization itself had on the postwar memorialization process. As a survivor, Helga is a vital component of this process.

²⁰⁰ Biesold, *Crying Hands*, 28.

²⁰¹ *Ibid.*, 36, 150; Friedlander, "Holocaust Studies and the Deaf Community," 22. It is unclear if this figure refers only to deaf Germans, or if it includes the deaf populations of Nazi occupied territories as well.

²⁰² Helga Gross, interview by Stephen Stept, January 22, 2003, interview, United States Holocaust Memorial Museum, Accession Number: 2003.485.3. <https://collections.ushmm.org/search/catalog/irn60511>.

²⁰³ Gross, 18:00.

²⁰⁴ *Ibid.*, 21:58.

²⁰⁵ *Ibid.*, 19:34, 4:35, second clip 22:21.

²⁰⁶ *Ibid.*, 22:49.

²⁰⁷ *Ibid.*, 22:39.

²⁰⁸ *Ibid.*, 23:47.

Before a memorial can be established for deaf victims of sterilization, awareness of the procedure's impacts needs to be elevated. Survivor testimony is vital to achieving this, but the survivors need to be emotionally ready to share their experiences, and the trauma of being sterilized is a memory survivors may prefer to suppress. Helga does not represent every deaf German who underwent sterilization, but her response to her procedure highlights a delay in the transfer of information from survivors to a larger community where it could contribute to the establishment of a memorial.

In addition to sterilizations, the German Deaf community was impacted by the loss of their community groups, and by the support some deaf Germans expressed for the Nazi Party. After 1933, Deaf support agencies, advocacy groups and self-help organizations all lost their independence and were absorbed into the National Socialists' public welfare program.²⁰⁹ As a result, REGEDE became NS-REGEDE (National Socialist-Reich Union of the Deaf of Germany), the official Nazi organization for deaf Germans, and its members involuntarily became members of the Nazi party and Deaf Jewish members were excluded.²¹⁰ Fritz Albrechts, the head of NS-REGEDE and a deaf and devout Nazi, denounced members for sterilization, and allowed NS-REGEDE to implement Nazi policies, which segregated deaf Jews.²¹¹ For example, non-Jewish deaf Germans were forbidden to sign with their deaf Jewish community members.²¹² Other deaf Germans who supported Nazi rule included Heinrich Siepmann, the head of the Deaf Union for Physical Training, a German deaf athletic club. He envisioned training deaf German youth in sports, particularly in gymnastics and team sports, as a great undertaking "in the spirit of

²⁰⁹ Biesold, *Crying Hands*, 91.

²¹⁰ Poore, *Disability in Twentieth Century German Culture*, 126; Biesold, *Crying Hands*, 91.

²¹¹ Poore, *Disability in Twentieth Century German Culture*, 126; Biesold, *Crying Hands*, 91.

²¹² Poore, *Disability in Twentieth Century German Culture*, 126.

our Führer, Adolf Hitler.”²¹³ To Siepmann, rigorously practicing sports was simply “doing one’s duty” for Germany, and he went so far as to compare athletes to Stormtroopers (*Sturmabteilung*), who are all competing for the Third Reich.²¹⁴

Werner Thomas, the president of the Berlin Deaf Athletic Association, also supported the Nazi party. In 1937, Thomas begged for the inclusion of deaf children in the Hitler Youth.²¹⁵ Although they were not fully accepted into the Hitler Youth, there were units of deaf children known as the Unit Deaf (*Bann Gehörlose*).²¹⁶ Deaf Germans recall Thomas as a fanatical Nazi, who defended Nazi race ideology and harassed deaf couples because they were “hereditarily unfit”.²¹⁷ Thomas was so enveloped in Nazi ideology that he even introduced new vocabulary into German Sign Language (GSL) to discuss National Socialist policies.²¹⁸ In addition to specific individuals, churches and schools for the Deaf also supported and complied with National Socialist policies.²¹⁹

The involvement of deaf Germans in the persecution of both Jewish and non-Jewish Deaf community members is a taboo subject within many deaf circles, especially amongst the older generation.²²⁰ Jochen Muhs argues that “virtually no deaf Germans have yet come to terms with their own National Socialist past.”²²¹ Like hearing Germans, deaf Germans were compliant or supported Nazi rule, and their denial or self-justification impacted their relationship with the

²¹³ H. Siepmann, “Neue grosse Aufgaben für uns Gehörlose,” *Blätter für die Wohlfahrt der Gehörlosen* 3/4 (1933): 38ff, quoted in Biesold, *Crying Hands*, 92.

²¹⁴ Biesold, *Crying Hands*, 92.

²¹⁵ *Ibid.*, 93.

²¹⁶ Poore, *Disability in Twentieth Century German Culture*, 127.

²¹⁷ Biesold, *Crying Hands*, 95.

²¹⁸ *Ibid.*

²¹⁹ Renwand, “The Experience of the Deaf during the Holocaust,” 8.

²²⁰ Muhs, “Deaf People as Eyewitnesses,” 78.

²²¹ *Ibid.*, 93.

past.²²² Subsequently, this has impacted the memorialization process. For example, Alfred Reifke, a deaf German, was the secretary for the NS-REGEDE, but after the war he dedicated himself to social services for deaf people.²²³ When it was proposed that Reifke should receive the National Service Cross for his philanthropy, Reifke firmly rejected the proposal because “he could not and would not forget his National Socialist past.”²²⁴ This highlights an internal struggle within the German Deaf community to acknowledge the actions of their community members during the Nazi era. Although Reifke was not a victim, who are more readily memorialized than perpetrators, his discomfort with honoring his postwar achievements because of his past indicates a deterrent towards recognition. Furthermore, the existence of victims and perpetrators within the Deaf community hinders the memorialization process.

The relationship between deaf Germans and Nazism became increasingly complicated during the deadliest phase of Nazi rule, 1939 to 1945. During these years, deaf Germans underwent a variety of experiences. Instead of enlisting, deaf Germans were expected to relinquish their fertility as their “sacrifice” for their country.²²⁵ Those who were interned at concentration camps, and were considered physically fit enough for work, were exploited for their labor because deaf inmates were considered valuable workers, due to their ability to work in loud environments.²²⁶ Deaf inmates were kept alive for other skills as well. Fred Fedrid, a tailor,

²²² Ibid.

²²³ Muhs, “Deaf People as Eyewitnesses,” 94.

²²⁴ Ibid. It is unclear which year the proposal for the award took place. Muhs acquired this information through an interview with Alfred Reifke.

²²⁵ Mark Zaurov, “Deaf Holocaust,” 138. They were not expected to join the Wehrmacht, but there were some deaf soldiers who volunteered to join “Organisation Todt”. Additionally, this demand and expectation for sterilization was enforced by the Nazis, but deaf Germans were also “not immune to ideologies of oppression” and supported National Socialist sterilization policies and were willingly sterilized or promoted sterilization as a “sacrifice for the fatherland”.

²²⁶ Evans, *Forgotten Crimes*, 84.

altered the uniforms of dead Nazis, so they could be used for new recruits. His expertise helped him survive both Auschwitz extermination camp and Dachau concentration camp.²²⁷

During their imprisonment at Nazi concentration and extermination camps, deaf inmates could not sign openly and had to respond to roll call in the same manner as their hearing inmates.²²⁸ Mark Zaurov shares the story of a Deaf Jew who wrote his number in the dirt in front of him and had his neighbor indicate to him when his number was called.²²⁹ Although this inmate was most likely interned for being Jewish, his deafness would have been an additional obstacle to ensuring his survival. Two other deaf Jews, who were prisoners at Mauthausen and Ravensbrück, also sought to keep their deafness a secret from Nazi officials. When asked in an interview if they informed the camp officials of their deafness they responded “No! Good heavens, no. They weren’t to know that we were deaf.”²³⁰ In an attempt to keep their deafness a secret, deaf inmates at concentration camps relied on a variety of different skills to aid in their survival. Some used lip-reading, if they learned how, while others used family members as interpreters or relied on the help and generosity from fellow inmates.²³¹ Deaf prisoners knew they could have been shot or sent to the gas chambers if they were caught signing and Morris Field, a deaf prisoner, who learned to avoid inmates who openly signed, survived five different concentration camps.²³² To distinguish them from other prisoners, deaf inmates were forced to wear a small metal pin in the shape of an inverted red triangle, which was inscribed with “Taubstummen”, meaning “deaf and dumb”.²³³ Other prisoners wore large signs around their

²²⁷ Ibid.

²²⁸ Zaurov, “Deaf Holocaust,” 136.

²²⁹ Ibid.

²³⁰ Stanislaw Sila-Nowicki, interview by Jochen Muhs, quoted in Muhs, “Deaf People as Eyewitnesses,” 92.

²³¹ Zaurov, “Deaf Holocaust,” 137, 139. Morris Field, a deaf prisoner, noticed a group of deaf inmates signing to each other, and then their disappearance from the camp.

²³² Ibid., 139.

²³³ Evans, *Forgotten Crimes*, 74.

necks with “I am a Moron!” written on them.²³⁴ The deaf German Jews who suffered at a Nazi concentration or extermination camp complicate the exploration of the history of deaf Germans, because they were persecuted as Jews, which drastically altered their experiences during the Third Reich. As a result, the process of memorializing deaf Germans is impacted since it is possible deaf German Jews could have died at a camp without their deafness being noted.

The wartime development of the Nazi “euthanasia” program naturally impacted deaf Germans. Deaf children were amongst those who were murdered during the child “euthanasia” program, which began in 1939.²³⁵ Hermann Pfannmüller, director of the Eglfing-Harr state hospital and head physician of the children’s ward, admitted at the Nuremberg Medical Trials that children who were hereditarily blind and “deaf and dumb” had been brought to his ward to be murdered.²³⁶ This statement was later corroborated by surviving case histories, which state that ten deaf children from Ursberg, a town in Bavaria, were murdered at Eglfing-Harr.²³⁷ With the development of the T4 “euthanasia” program, deaf adults also became targets and victims of Nazi “euthanasia”. Along with the other individuals, who were deemed “unfit”, some deaf Germans were murdered in the gas chambers of the T4 “euthanasia” killing centres from 1940 to 1941, or through an overdose of medication during the decentralized “wild euthanasia” from 1941 to 1945.²³⁸ For example, during the “wild euthanasia” phase, the staff of the Pomeranian state hospital, Meseritz-Obrawalde, murdered those “who increased the workload of the nurses”, who were “deafmute [sic], sick, or disobedient”.²³⁹ Although it is estimated that 300,000 individuals were murdered from 1939 to 1945 and 375,000 were sterilized under Nazi rule, it is

²³⁴ Ibid.

²³⁵ Burleigh, *Death and Deliverance*, 99.

²³⁶ Friedlander, “Holocaust Studies and the Deaf Community,” 25.

²³⁷ Ibid.

²³⁸ Ibid., 28.

²³⁹ Ibid., 25.

impossible to know exactly how many of those victims were deaf.²⁴⁰ It is estimated that 15,000 deaf people were sterilized from 1933 to 1945, but it is unclear if this figure refers only to deaf Germans or if it includes the deaf populations of Nazi occupied territories.²⁴¹ It is also impossible to know how many deaf Germans died as a result of complications from their sterilizations.²⁴² From 1934 to 1936, 437 patients, out of 169,862 sterilizations, were recorded as having died due to surgical complications.²⁴³ It is unclear how many of those 437 victims were sterilized for hereditary deafness, but it is possible some of them were. Furthermore, records of sterilizations were only kept until 1937 and a patient's death may not have been noted, or was incorrectly documented, which hinders the ability of historians to determine the number of deaf sterilization victims. This margin for error impacts the memorialization process because German communities would not know who the victims are, or how many there were.

The categories used under the sterilization law of 1933 were later used to classify "euthanasia" victims. From 1933 to 1936, the largest victim group to be sterilized were those who were categorized as "feeble-minded".²⁴⁴ However, "feeble-minded" was a subjective designation that lacked scientific criteria, which meant it often encompassed deaf people. At the Eglfin-Harr state hospital, the successor to Hermann Pfannmüller stated that 10 deaf children were brought to the hospital and were diagnosed and murdered under the label "feeble-minded".²⁴⁵ He went on to explain that the diagnosis "was not reliable because it was probably due to their hearing and speaking impairments" and they in fact "possessed normal

²⁴⁰ Black, "A Call for More Research," 220; Friedlander, *The Origins of Nazi Genocide*, 30.

²⁴¹ Biesold, *Crying Hands*, 150.

²⁴² Friedlander, *The Origins of Nazi Genocide*, 28. From 1934 to 1936, 437 patients, out of 169,862 sterilizations, were recorded as having died due to surgical complications. It is unclear how many of those 437 victims were sterilized for hereditary deafness, but it is possible some of them were. Records of sterilizations were only kept until 1937, but Helga Gross, a deaf German stated she was sterilized in 1939.

²⁴³ *Ibid.*

²⁴⁴ *Ibid.*, 29.

²⁴⁵ Friedlander, "Holocaust Studies and the Deaf Community," 25.

intelligence.”²⁴⁶ Although this is only one example, it highlights the potential for incorrectly “diagnosing” a deaf individual and it exemplifies the challenge to accurately determine the number of deaf victims of Nazi policies. This misdiagnosis impacts memorialization because it makes it difficult to conceptualize the size of the victim group and how extensive their suffering was. Although the number of victims does not determine the worthiness of their remembrance, it does aid in the understanding of their history, which contributes to a broader awareness of their persecution and an increased need to memorialize them.

Following the end of World War II, the experiences of deaf survivors were swept up in the “collective amnesia” that Germany experienced. Furthermore, the end of the war did not result in a dramatic shift in the perception of deaf individuals.²⁴⁷ David Bloch, a deaf German Jew, states that “nobody ever dared to talk about it. They just kept their mouths shut. Nobody ever discussed it.”²⁴⁸ Bloch himself didn’t even start sharing his own experiences until the 1950s, and the Third Reich was a taboo topic within Deaf circles in Germany even during the 1990s.²⁴⁹ Horst Biesold, author of the influential work, *Crying Hands: Eugenics and Deaf People in Nazi Germany*, collected deaf German survivor testimonies. One survivor, a former male student of the Institution for the Deaf in Heidelberg, and victim of sterilization, shared his experience exchanging letters with Edwin Singer, his former school director who is hearing, and who had supported the sterilization.²⁵⁰ The survivor expressed his immense grief and outrage at his sterilization and stated “a great deal has been lost from my life, because there can never be any happy love... You are guilty of a crime toward me. You abused me. You had me sterilized, killed

²⁴⁶ Gerhard Schmidt, *Selektion in der Heilanstalt, 1939–1945*, 2d ed. (Frankfurt: Edition Suhrkamp, 1983), 67, quoted in Friedlander, “Holocaust Studies and the Deaf Community,” 25.

²⁴⁷ Sharples, *Postwar Germany and the Holocaust*, 6.

²⁴⁸ David Bloch, interview by Ina Friedman, October, 1987, interview, United States Holocaust Memorial Museum, Accession Number: 2005.394.6. <https://collections.ushmm.org/search/catalog/irn90058>, 9:27.

²⁴⁹ Bloch, 9:35; Muhs, “Deaf People as Eyewitnesses,” 78.

²⁵⁰ Biesold, *Crying Hands*, 54.

and destroyed”.²⁵¹ In his response Singer opens by commenting that he “will be more informal” so that the victim can “understand [him] better.”²⁵² This statement clearly emphasizes Singer’s opinion that deaf individuals are unintelligent. Throughout the letter Singer references the deaf as “hereditarily diseased” and is “hardly surprised” that the victim was sterilized.²⁵³ Singer refused to apologize or accept his role in the victim’s sterilization, and stated that it was the government who was responsible for the sterilization laws and the doctors who “had to obey and carry out the law”.²⁵⁴ Additionally, Singer asks the victim to be thankful he is alive and that he has no children, because it is “better to have no children than one who is blind, deaf or epileptic.”²⁵⁵ Singer’s disrespectful response to the victim’s letter indicates that in the 1960s, deaf victims of sterilization were not treated with sympathy or respect.²⁵⁶

Even once deaf survivors began to share their stories, and more importantly, once historians and hearing communities began to listen to them, the survivors continued to face prejudicial treatment and challenges while giving their testimonies. It can be difficult to acquire deaf survivor testimonies due to a number of factors: the need to translate the testimony multiple times, the use of an interpreter, and the issue of audism, which is defined as “the hearing way of dominating, restructuring, and exercising authority over the Deaf community.”²⁵⁷ There are a multitude of different Sign languages throughout the world, and each language has regional dialects, slang and is expressed slightly differently by each signer, just as those who

²⁵¹ Letter from a Sterilization Victim to Edwin Singer, August 15, 1960, quoted in Biesold, *Crying Hands*, 57.

²⁵² Letter from E. Singer, January 1, 1951 quoted in Biesold, *Crying Hands*, 58.

²⁵³ Ibid.

²⁵⁴ Ibid

²⁵⁵ Ibid.

²⁵⁶ Biesold, *Crying Hands*, 56. Earlier, in 1946, Singer also stated “there was no reason after the collapse of the Third Reich to reflect on and analyze the failures of German deaf education” and he expressed no sympathy for the deaf students who had suffered under the Nazis. Singer also argued that educators of the deaf should not dwell on the past, and instead “teach [the deaf] to speak, and warm their hearts so they too become human beings.”

²⁵⁷ Mark Zaurov, “Against Audism in Interviews with Deaf Holocaust Survivors,” European Holocaust Research Infrastructure. <https://ehri-project.eu/against-audism> (accessed 26 February 2018).

communicate through spoken languages have varied voice tones.²⁵⁸ Due to the multitude of languages and variables in expression, the experiences of the deaf survivor may have to be translated multiple times. This can lead to survivor statements being misconstrued or misinterpreted. The potential for a survivor's testimony to be lost in translation is highlighted in John Schuchman and Donna Ryan's interviews with deaf Hungarian survivors, all of whom suffered under the Nazi regime. All twelve testimonies were translated from Hungarian Sign Language, to spoken Hungarian, to spoken English.²⁵⁹ For this work to be accessed by Deaf communities, who do not read English or use Hungarian Sign Language, the testimonies would require further translations. These translations are possible, and essential to providing Deaf communities with access to their own history, but each translation provides an additional opportunity for error.

Translating survivor testimonies during the interview process itself is also challenging. If an interpreter is required they are tasked with ensuring smooth communication, which can be difficult and hinder the flow of an interview, and subsequently impact the testimony given by the survivor.²⁶⁰ This is exemplified in Ina Friedman's interview with David Bloch, a deaf German Jew.²⁶¹ In 1938, during *Kristallnacht*, Bloch was arrested and interned at Dachau concentration camp because he was Jewish.²⁶² After being imprisoned for one month, Bloch was released.²⁶³

²⁵⁸ "Sign" is intentionally capitalized, just as other official languages would be capitalized. Eg. English.

²⁵⁹ John Schuchman and Donna Ryan, "Deaf Survivors' Testimony: An Edited Transcript," in *Deaf People in Hitler's Europe*, ed. Donna Ryan and John Schuchman (Washington: Gallaudet University Press, 2002), 202.

²⁶⁰ An interpreter may not be required if the interviewer is fluent in a signed language or the survivor prefers to communicate through speech and lip-reading.

²⁶¹ David Bloch was persecuted because he was Jewish; however his testimony still provides valuable insight into his experience as a deaf man in Germany. Bloch's testimony also highlights the challenges survivors face when sharing their experiences with hearing historians.

²⁶² Vivian Alpert Thompson, "David Bloch", in *A Mission in Art: Recent Holocaust Works in America* (Macon, GA: Mercer University Press, 1988), 21; Bloch, 23:53.

²⁶³ Bloch, 24:41; Thompson, "David Bloch," 21. With the help of an American cousin, Bloch was able to emigrate to Shanghai, where he lived from 1940 to 1949. He later immigrated to the United States with his wife.

The interview consists of Bloch, who communicates through signing, speech, and lip-reading; Ina Friedman, who conducts the interview; an unnamed man who contributes very little to the conversation; and an unnamed interpreter. Throughout the interview, the interpreter struggles to provide smooth communication between Friedman and Bloch. She repeatedly makes comments expressing the difficulty of her task: “I’m not catching what he is saying”²⁶⁴, “it is hard to translate”²⁶⁵ and “I don’t understand what he is saying because it isn’t in ASL [American Sign Language]”.²⁶⁶ The interpreter also finds it difficult when a mixture of German Sign Language (GSL), GSL slang and ASL are used.²⁶⁷

In addition to the challenge of requiring a multitude of translations, or use of an interpreter, Deaf survivors also face the challenge of audism when providing their testimony. Evidence of audism can be heard throughout the Bloch interview. Both Friedman and the interpreter repeatedly sound frustrated with Bloch for not directly answering or immediately understanding the questions. At one point, Friedman asks Bloch to “talk about [his] school in Germany where [he] learned to make sounds”.²⁶⁸ Friedman’s use of the phrase ‘make sounds’, not ‘talk’, places Bloch’s communication below hers; his speech is not equal to Friedman’s, therefore it is reduced to ‘sounds’. It is arguable that Friedman did not mean to discredit Bloch’s speech; however, the subtlety in her comment about Bloch’s speech suggests an ingrained, systemic opinion about the intellectual capability of deaf individuals. Mark Zaurov argues that “in some cases, Deaf persons have been interviewed as if they were hearing, disregarding critical difference between Deaf and hearing cultures.”²⁶⁹ Also during the Bloch interview, the

²⁶⁴ Bloch, 16:52.

²⁶⁵ *Ibid.*, 32:08.

²⁶⁶ *Ibid.*, 8:51.

²⁶⁷ *Ibid.*, 6:32.

²⁶⁸ *Ibid.*, 38:02.

²⁶⁹ Zaurov, “Against Audism in Interviews with Deaf Holocaust Survivors”.

interpreter interjects and tells Friedman “I think he really hadn’t finished understanding exactly what your role is, what you want. I think.”²⁷⁰ Here, the interpreter is assuming Bloch doesn’t understand that Friedman is interviewing him as research for a children’s book about Nazi crimes. Although the interpreter may have made this comment to ensure the discussion was focused and clear, she should have talked *to* Bloch to clarify her confusion, not *about* him with Friedman. In response to this, Bloch states “she wants to know about me...she is a writer. She writes children’s books. I understand that.”²⁷¹ Even though having an interpreter to channel information through can result in miscommunication, an incorrect translation, or an uncomfortable situation, they are essential at times to acquiring deaf survivor testimonies. The methodology may be challenging, but survivor testimonies are valuable primary sources; they aid in the preservation of the history of deaf survivors, an area that has been neglected within the larger history of Nazi Germany. Furthermore, testimonies provide the survivors with a voice, which can impact the memorialization process.

Primary sources help increase education around deaf experiences, which is a necessary precursor to memorialization efforts; however difficulties in accessing this source material complicates this process. During his research for *Crying Hands: Eugenics and Deaf People in Nazi Germany*, Horst Biesold encountered difficulties accessing primary source material. After being granted permission to access the archives of one of the largest former German schools for the deaf, which was located in West Germany, Biesold was informed by the principal at the time that his research was “too hot an issue” and the school administration “could get skinned” if the media learned of Biesold’s research project.²⁷² Eight days after Biesold’s conversation with the

²⁷⁰ Bloch, 15:25.

²⁷¹ *Ibid.*, 15:45.

²⁷² Biesold, “Preface to German Edition,” xiv.

principal, all student files were moved to the Westphalian Central Archives at the Westphalia-Lippe Regional Union in Münster, where Biesold was once again denied access to the records of deaf students who attended the school between 1933 and 1945.²⁷³ At a school for the deaf in northern Germany, Biesold was initially granted permission to view the school's registry; however, eight days later when Biesold requested access to the files of students who attended the school during Nazi rule, he was informed that all former student records had been destroyed a few days earlier.²⁷⁴ Biesold describes other encounters with deaf schools, where he was "kindly asked to cancel [his] visit" to the archives or simply denied access when he requested documents between the years of 1933 to 1945.²⁷⁵ Additionally, throughout the 1980s, government parties within West Germany "discouraged research into, and discussion of, the persecution and extermination of deaf persons under National Socialist rule."²⁷⁶ This response by the West German government directly impacted the ability of West Germans, deaf and hearing, to explore this area of history, and contributed to the lack of attention that was given to deaf Germans and their past. The restricted access to material, imposed by both German schools for the deaf and the German government, directly hinder the memorialization process. Knowledge cannot be shared if it cannot be accessed. Furthermore, the limited access to the documents indicates that German bureaucrats were aware of aspects of the dark nature of the history of deaf Germans and did not want the information disseminated to the public.

The German government further impacted the memorialization of deaf Germans because they excluded deaf victims from the larger community of victims who suffered in the Third

²⁷³ Ibid., xiv.

²⁷⁴ Ibid., xiii. The director of the school had ordered the destruction of the files, and told Biesold, with the "deepest regret" that the files had been shredded and thrown away due to lack of storage space at the school.

²⁷⁵ Ibid., xiii-xv.

²⁷⁶ Biesold, *Crying Hands*, 36.

Reich. Grace Renwand states that the Federal Republic “did not see sterilization as a form of racial persecution; rather the law of compulsory sterilization had followed legal procedure”.²⁷⁷ Furthermore, it was not until 1981 that the Federal Republic financially compensated victims of coercive sterilization, and it was not until 1989 that the West German government recognized the deaf as victims of National Socialism.²⁷⁸ By 1995, Berlin was the first state to recognize deaf victims of forced sterilization as victims of the Nazis, subsequently deeming them eligible for further government compensation.²⁷⁹ The treatment of the history of deaf Germans by the German state has directly impacted the scholarship written on the history of this victim group.²⁸⁰ Because deaf victims were largely ignored within the discourse of Nazi persecution, many scholars “ignored their experiences”, an act which “perpetuat[ed] the treatment of the deaf as second class.”²⁸¹ Scholarship has also been limited due to difficulties, such as Biesold’s, in accessing research materials.

The expansive nature of deafness across the German population has also hindered and fractured the memorialization of deaf Germans. Because the deaf were not viewed as victims of Nazi crimes, they were not initially included in the memorialization of the victims of National Socialism. However, deaf victims who were also persecuted as a result of their connections to other victim groups, who were recognized as “genuine” victims, were memorialized long before their solely Deaf community members. For example, deaf Jews were memorialized before the non-Jewish deaf due to their association with Jewish victims. As Chapter One highlights, overall, Jewish victims were the first victim group to be memorialized, and other victim groups did not

²⁷⁷ Renwand “The Experience of the Deaf During the Holocaust,” 3.

²⁷⁸ Ibid; Muhs, “Deaf People as Eyewitnesses,” 95. They received 5,000 DM as compensation.

²⁷⁹ Muhs, “Deaf People as Eyewitnesses,” 95.

²⁸⁰ Renwand, “The Experience of the Deaf During the Holocaust,” 3.

²⁸¹ Ibid.

enter Germany's memorial landscape until the 1980s. This "partial" remembrance through different victim groups may have eased the German Deaf community's desire for a memorial, but it has also reinforced their desire to be memorialized specifically as deaf victims.

Mark Zaurov, a Deaf Ph.D. candidate at the University of Hamburg, has been working towards establishing a memorial for the non-Jewish deaf, but has been unsuccessful. Zaurov believes that because there is limited material that focuses on the persecution of the deaf, a memorial would help alleviate this academic void and raise awareness about both the Jewish and non-Jewish deaf during the Third Reich.²⁸² However, when Zaurov proposed the idea of a memorial for deaf Jews to the Jewish Holocaust Memorial Association, he was told it was not a worthwhile venture and that deaf victims should "join the T4" victims and be memorialized under the umbrella of victims of "euthanasia".²⁸³ Additionally, Zaurov spoke with a historian at the United States Holocaust Memorial Museum (USHMM), who did not support the idea of separating deaf Jewish victims from non-Jewish victims.²⁸⁴ Although there were deaf victims of "euthanasia" and deaf Jews who were murdered, Zaurov supports the establishment of a memorial to deaf victims because the Deaf community is a cultural and linguistic minority that was persecuted under the Nazi regime and deserves individual recognition. Zaurov argues that there are numerous memorials for other victim groups and now it is time for the deaf to be memorialized.²⁸⁵ It is evident that within the German deaf community, there is a desire for a

²⁸² Mark Zaurov, "History and Background" in "Making a Case for a Deaf Holocaust Memorial," *Deaf Studies Digital Journal* 3 (Spring 2013): 1:55. http://dsdj.gallaudet.edu/index.php?issue=4§ion_id=3&entry_id=124

²⁸³ *Ibid.*, 2:28. Zaurov did not state the year this communication took place. His research began in 1996, so presumably after this.

²⁸⁴ Zaurov, "History and Background" in "Making a Case for a Deaf Holocaust Memorial," 2:48. Zaurov also did not state the year this meeting took place.

²⁸⁵ Zaurov, "Three Pressing Issues" in "Making a Case for a Deaf Holocaust Memorial," 3:09.

memorial specifically for deaf victims, but they are not being recognized and supported as a group worthy of memorialization.²⁸⁶

Zaurov acknowledges that the process of memorializing the deaf victims of National Socialism is complicated, because of German deaf perpetrators and supporters of National Socialist ideology, but supports the idea nonetheless.²⁸⁷ In 2006 and 2010, Zaurov continued to advocate for the establishment of a memorial for deaf victims.²⁸⁸ He was keen on having a memorial in Berlin, due to the city's popularity and extensive memorial landscape, but he also wants deaf victims to be acknowledged in other locations, such as former sites of murder.²⁸⁹ Zaurov believes that establishing memorials specifically for deaf victims at former sites of perpetration (i.e. "euthanasia" centres, concentration camps, hospitals, etc.) would help educate the public and inform them about the persecution of the deaf.²⁹⁰

Currently, there are no memorials within Germany that explicitly acknowledge non-Jewish deaf victims, but Jewish deaf victims have received some memorialization. The Museum Blindenwerkstatt Otto Weidt in Berlin, which was established in 1999, acknowledges the suffering faced by deaf Jews under the Nazis, who were employed at Otto Weidt's brush and broom factory.²⁹¹ Weidt predominantly employed blind or deaf Jews, and had up to thirty-three

²⁸⁶ Zaurov, "History and Background" in "Making a Case for a Deaf Holocaust Memorial," 3:05.

²⁸⁷ Zaurov, "Three Pressing Issues" in "Making a Case for a Deaf Holocaust Memorial," 1:35.

²⁸⁸ Zaurov, "The Memorial" in "Making a Case for a Deaf Holocaust Memorial," 0:10. Zaurov proposed the idea of a memorial for deaf victims during both years, but he does not indicate whom he spoke with; however the memorial was positively received in both meetings.

²⁸⁹ *Ibid.*, 0:17.

²⁹⁰ *Ibid.*, 0:31.

²⁹¹ Paul Bartrop, *Resisting the Holocaust: Upstanders, Partisans, and Survivors* (Santa Barbara: Library of Congress Cataloging-in-Publication Data, 2016), 311, <http://ezproxy.library.uvic.ca/login?url=http://search.ebscohost.com/login.aspx?direct=true&scope=site&db=nlebk&db=nlabk&AN=1237007>.

employees at any one point between 1941 and 1945, which was strictly forbidden.²⁹² To protect his workers, Weidt falsified documents and bribed authorities, but he also hid employees in the back of the factory and rescued others who had been arrested and selected for deportation.²⁹³ Only seven of Weidt's employees lived to see the end of the war.²⁹⁴ Although deaf victims are acknowledged at the Museum Blindenwerkstatt Otto Weidt, it is predominantly addressed as a site of remembrance for blind Jews, a perception that fails to incorporate equal memorialization for deaf Jews. Another memorial space within Germany that addresses deaf victims is the Memorial and Information Point for the Victims of National Socialist "Euthanasia" Killings in the Tiergarten in Berlin, but it is designed to address all victims of sterilization and "euthanasia", not just deaf victims. This is not a critique of the Museum Blindenwerkstatt Otto Weidt or the Memorial and Information Point for the Victims of National Socialist "Euthanasia" Killings; these memorial spaces are essential to remembering disabled victims, but it highlights the lack of memorials for individual victim groups of National Socialism. As the memorialization process within reunified Germany continues, acknowledging the deaf as victims of National Socialism will be a new area for memorial development. If, and when, Germany establishes its first memorial to deaf victims, it will be essential to include the deaf community, which has already voiced their support for a memorial, in the discussion and planning process. Memorialization cannot be forced upon a victim group, it has to be initiated or supported by them.

The disabled were some of the first Germans to be persecuted in Nazi Germany, and they have been one of the last groups to be memorialized. This includes deaf Germans, who were persecuted under National Socialism and continue to face a delay in memorialization in reunified

²⁹² Ibid. 310; Museum Blindenwerkstatt Otto Weidt, "Employees in the Workshop," <https://www.museum-blindenwerkstatt.de/en/ausstellung/themen/employees-in-the-workshop/> (accessed 1 March 2018).

²⁹³ Bartrop, *Resisting the Holocaust*, 310.

²⁹⁴ Museum Blindenwerkstatt Otto Weidt, "Employees in the Workshop".

Germany. This delay is the result of the exclusion of deaf Germans from the collective group of victims of Nazi persecution, the absence of the experiences of deaf Germans during the Third Reich within academia, the expansive nature of deafness across multiple victim groups, and the perpetuated, prejudiced perceptions of the Deaf community. Despite these challenges, the experiences of Deaf Germans are beginning to enter the narrative of crimes committed under National Socialism and deaf victims are providing a new lens with which to view the history of the Third Reich.

Conclusion

Deaf and disabled victims of National Socialism have faced a delay in memorialization within West Germany and reunified Germany due to perpetual discrimination, which developed during the Weimar Republic and Third Reich, and has prevented postwar German society from fully acknowledging disabled Germans as victims. This perception contributed to a positive feedback loop, where the segregation of disabled victims resulted in a failure to convict perpetrators of “euthanasia”, to support disabled victims through government services, and to academically explore “euthanasia” as a Nazi crime. These factors directly impacted the postwar memorialization process because respect, education, representation and acknowledgement are all necessary precursors to memorialization. Although the treatment of deaf and disabled victims, and subsequent void in memorialization is a dark mark on Germany’s memorial landscape, it provides Germany with an opportunity to address, engage with, and learn from, this area of the country’s past.

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