

Henry Friedlander

From Euthanasia to the Final Solution

The ideology of German National Socialism was not as intellectually rigorous as Marxism. It belonged to that group of twentieth century movements known as Fascism, and shared the Fascist ideology, which included one-man dictatorial rule, nationalism, militarism, reliance on plebiscites, and rejection of representative government. Like most Fascist movements, German Fascism did not have a specific ideological position on economics; it retained a capitalist economy, but favored monopolies and added government regulation. In one respect, however, the Nazis differed from most other Fascists by placing racism at the center of their ideology. Nazi racial ideology centered on the Germanic people, the *Volk*, as the wellspring of the national community, the *Volksgemeinschaft*. All those who did not belong to the so-called nordic race, regardless of their citizenship, were to be excluded from the national community.

The Nazis did not invent their racial ideology; they simply adopted it from already existing and pervasive popular beliefs. Following the period of the American and French revolutions, who championed, in word if not always in deed, the idea of the "equality of man," popular beliefs continued during the nineteenth and early twentieth centuries to contradict these lofty ideas. At the same time, scientific opinion adopted as scientific truth the idea of the inequality of human beings. Scientists in Europe and America legitimized the popular beliefs that women were inferior to men and that members of all other races were inferior to white Christian Europeans.

The great fear of the European people was a dilution of their "superior" racial stock. For this reason they saw miscegenation as a threat to their survival. In the United States, laws against the miscegenation of whites and blacks were found in many states, especially those of the south. A German anthropologist, the Freiburg Professor Eugen Fischer, provided a scientific basis for this prejudice. In 1908, one year after the destruction of the Hereros by the German colonial government in Southwest Africa, Fischer studied -- that is, measured and observed -- the Rehoboth Bastards, offspring of "legally recognized and religiously consecrated unions between Dutch men and Hottentot women," who spoke Dutch and had Dutch names. In 1913 Fischer published his results in *The Rehoboth Bastards and the Problem of Miscegenation Among Humans*. This study not only established his reputation but also influenced all subsequent

German racial legislation, including the Nuremberg racial laws. In his study, Fischer concluded: "We still do not know a great deal about the mingling of the races. But we certainly do know this: Without exception, every European nation that has accepted the blood of inferior races -- and only romantics can deny that Negroes, Hottentots, and many others are inferior -- has paid for its acceptance of inferior elements with spiritual and cultural degeneration." Thereupon Fischer proposed the following: "Consequently, one should grant them the amount of protection that an inferior race confronting us requires to survive, no more, and no less and only for so long as they are of use to us -- otherwise free competition, that is, in my opinion, destruction." Fischer not only rejected marriages between whites and blacks but also objected to "colored, Jewish, and Gypsy hybrids," the so-called *Mischlinge*.

Miscegenation was not the only fear of those Europeans who wanted to maintain the purity and vitality of their national community. They were also afraid that disabled members of their own community would, if permitted to procreate, dilute the purity of the national gene pool. Persons suffering from mental illness or retardation, which also was believed to include epileptics, formed the core of this undesirable group. In addition, they believed that so-called degenerate behavior was also hereditary, and included, for example, alcoholism, homosexuality, and prostitution. Moreover, following Cesare Lombroso, scientific opinion judged both the disabled and the degenerate as criminals. In general, the classification of degeneracy applied to members of the underclass, whose hereditary disabilities were to be eradicated from the gene pool of respectable bourgeois society.

The movement designed to retain the purity of the gene pool was called eugenics, a term coined in 1881 by the British naturalist and mathematician Francis Galton and described by the leading American eugenicist, Charles B. Davenport, as "the science of the improvement of the human race by better breeding." Its members were scientists from the biological and social sciences, or what today may be called the life sciences. The eugenics movement was international; it was particularly influential in the United States, which served as a model for eugenicists in Germany and other countries.

Eugenicists attacked the problem of how to improve the gene pool on two fronts. One was "positive" eugenics, and attempt to increase the numbers of the desirable population. This was an effort to persuade those judged to have the best pedigree to marry each other and to bear a large number of children; this approach was later applied in fascist countries, where medals and benefits were offered to the mothers of many children. But positive eugenics was never very successful, since the wealthier classes simply did not have enough children.

The second front was "negative" eugenics. This was an effort to prevent the undesirable masses to increase in numbers. The eugenicists viewed the lower classes as a danger to the purity of the race. Using the newly introduced IQ tests to judge inherited intelligence, they argued that low intelligence determined social status. Thus the Stanford psychologist Lewis M. Terman, creator of the Stanford-Binet test, argued that "class boundaries had been set by innate intelligence"; his analysis of test scores led him to jump to the conclusion that "the children of successful and cultured parents test higher than children from wretched and ignorant homes for the simple reason that their heredity is better." Eugenicists saw the cause of the social problems of their time, such as alcoholism and prostitution, as inherited feeble-mindedness and viewed the manifestations of poverty, such as intermittent unemployment and chronic illness, as a hereditary degeneracy. Terman thus concluded: "Not all criminals are feeble-minded, but all feeble-minded persons are at least potential criminals. That every feeble-minded woman is a potential prostitute would hardly be disputed by anyone." The psychologist Henry H. Goddard believed that "democracy means that the people rule by selecting the wisest, most intelligent and most human to tell them what to do to be happy" adding "how can there be such a thing as social equality with this wide range of mental capacity?" And Harry Hamilton Laughlin, director of the Eugenics Record Office (ERO) at Cold Spring Harbor in Long Island, which was financed with Carnegie, Harriman, and Rockefeller money, believed that "democracy means that the people rule by selecting the wisest, most intelligent and most human to tell them what to do to be happy.

The eugenicists ascribed degeneracy not only to class but also to race and ethnic group. Harvard psychologist Robert M. Yerkes argued that test scores proved that the "darker peoples of southern Europe and the Slavs of Eastern Europe are less intelligent than the fair peoples of western and northern Europe" and that the "Negro lies at the bottom of the scale" of intelligence. The use of scores from tests administered to recent immigrants still unfamiliar with the language and culture of the United States were obviously misleading when judging intelligence; such scientific data, "no matter how numerically sophisticated, have recorded little more than social prejudice." Confronted with low test scores of Jewish immigrants examined at Ellis Island and in the U.S. Army on the one hand and the achievements of Jewish intellectuals on the other, Princeton psychologist Carl C. Brigham thus theorized that "the able Jew is popularly recognized not only because of his ability, but because he is able and a Jew," concluding that "our figures, then, would rather tend to disprove the popular belief that the Jew is highly intelligent."

In the United States "negative" eugenics were applied on two fronts. Viewing immigrants from southern and eastern Europe as inferior, the eugenicists campaigned to restrict the immigration of members of those ethnic groups. Their lobbying assured passage of the 1924 Johnson Act

(Immigration Restriction Act), which imposed quotas that severely limited immigration from countries whose inhabitants were identified as unfit. To deal with the unfit who were citizens, the eugenicists campaigned to prevent them from procreating. In 1910 Davenport, the founder of the ERO, thus advocated compulsory sterilization "to dry up the springs that feed the torrent of defective and degenerate protoplasm." In 1907 Indiana enacted the first sterilization law, and by the middle of the 1930s, more than half of the states had passed laws that authorized the sterilization of "inmates of mental institutions, persons convicted more than once of sex crimes, those deemed to be feeble-minded by IQ tests, 'moral degenerate persons,' and epileptics."

A national consensus thus supported negative eugenic measures as, for example, the immigration restriction that would later make it difficult for refugees from Nazi Germany to enter the United States. The support for sterilization manifested itself in 1927, when a Virginia sterilization case reached the Supreme Court. Chief Justice Oliver Wendell Holmes, speaking for a united court that included Louis Brandeis and William Howard Taft, used the arguments of the eugenicists to uphold the Virginia law, and thereby presaged the arguments used later to justify eugenic killings in Nazi Germany:

We have seen more than once that the public welfare may call upon the best citizens for their lives. It would be strange if it could not call upon those who already sap the strength of the State for these lesser sacrifices, often not felt to be such by those concerned, in order to prevent our being swamped with incompetence. It is better for all the world, if instead of waiting to execute degenerate offspring for crime, or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing their kind. The principle that sustains compulsory vaccination is broad enough to cover cutting the Fallopian tubes. Three generations of imbeciles are enough.

In the United States, eugenics eventually lost scientific acceptance and public support. New scientific discoveries led to the rejection of eugenic research results. Moreover, events in Nazi Germany during the 1930s, and the close cooperation between American and German eugenicists, seriously damaged the standing of the American eugenics movement, and the revelation of Nazi crimes in the 1940s totally discredited eugenic theories.

German eugenics paralleled the eugenics movement in the United States. They also studied family genealogies and problems of degeneration, dividing populations into superior (*hochwertig*) and inferior (*minderwertig*) individuals; they hoped to safeguard the nation's "genetic heritage" (*Erbgut*) and viewed degeneration (*Entartung*) as a threat. Until the defeat of Germany in World War I, the Germans focused on positive eugenics, in part because they did not believe that they could win support for sterilization. Similarly, whereas in the United States race and ethnicity

played an important role in the eugenic program, before World War I German eugenics focused on class and therefore race did not at first occupy a central role.

This changed after the German defeat. During the Weimar Republic, sterilization became a part of the eugenic agenda. In 1932 the Weimar bureaucracy drafted a sterilization law, which was however never passed. It was still voluntary; the Nazi regime later made it compulsory.

The same change applied to racism, as two diverging approaches appeared within the eugenic movement: the Nordic and the anti-Nordic, with Munich the center of the Nordic and Berlin of the anti-Nordic faction. The two founders of the movement split. Alfred Ploetz subscribed to the belief in the superior qualities of the Nordic or Germanic peoples, while Wilhelm Schallmayer did not share this enthusiasm for the so-called Aryan race. This division was perpetuated in the next generation of eugenicists, in which Fritz Lenz, Ernst Rüdin, Eugen Fischer, and Hans F. K. Günther supported the theory of Aryan supremacy, while Hermann Muckermann, Arthur Ostermann, and Alfred Grotjahn opposed it. This split was also reflected in the name given to eugenics; the anti-Nordic faction adopted "Eugenik," while the Nordic faction opted for "Race Hygiene." After the Nazi assumption of power, when the eugenic society embraced racial antisemitism and expelled Jewish members, race hygiene was the only term used, and thereafter it became the appropriate term to designate eugenics in Germany.

Racial antisemitism had played no role in the early years of German eugenics, but this changed during the Weimar Republic. Already in 1924 von Verschuer told students that "the German, *völkisch* struggle is primarily directed against the Jews, because alien Jewish penetration is a special threat to the German race." After the Nazi assumption of power in January 1933, the scientific practitioners of racial hygiene embraced the party's ideology, and provided the scientific legitimacy the regime desired. Already in 1931, two years before Hitler's assumption of power, Lenz provided the Nazi leader with the following testimonial: "Hitler is the first politician with truly wide influence who has recognized that the central mission of all politics is race hygiene and who will actively support this mission."

Upon assuming power, the Nazi regime moved rapidly to enact laws that would exclude from the national community three groups of outsiders: the disabled, Jews, and Gypsies. Against the disabled, the regime enacted into law the program long advocated by race scientists to control a population considered degenerate and inferior. The sterilization law, issued on 14 July 1933 with the cumbersome name of Law for the Prevention of Offspring with Hereditary Diseases, opened the attack upon the disabled and served as the cornerstone of the regime's eugenic and racial legislation. This legislation was followed in October 1935 by the Marriage Health Law, which mandated screening the entire population to prevent marriages of persons considered carriers of

hereditary degeneracy. As race hygiene had always linked the disabled to criminal and antisocial behavior, the bureaucrats drafting this legislation believed that their eugenic laws should also cover "inherited criminal traits." To accomplish this, the regime enacted in November 1933 the Law against Dangerous Habitual Criminals and the Law on Measures of Security and Reform. The new provisions of the penal code gave the courts substantial new powers to confine and punish persons considered habitual criminals. The courts were authorized to commit antisocial individuals to state hospitals, to impose protective custody or longer prison terms on habitual criminals, to mandate castration for sexual offenders, and to prohibit defendants from practicing their professions or occupations.

The sterilization law was designed to deal with hereditary diseases and persons carrying such diseases. The opening of the law proclaimed its content: "Any person suffering from a hereditary disease can be sterilized if medical knowledge indicates that his offspring will suffer from severe hereditary physical or mental damage." The legislation listed the disabilities covered by the law, including most mental and psychological disorders, epilepsy, blindness, deafness, physical deformity, severe alcoholism, and especially feeble-mindedness. A special legal system of hereditary health courts, staffed by one judge and two physicians, was created to handle the large number of sterilization cases. The law also created appellate courts of hereditary health, also staffed by one judge and two physicians; its decision was final. About 375,000 German nationals were sterilized under this law. This is a very high figure, since it representing about 5 percent of the German population. Amendments to the law widened its reach. The most important of these was issued on 26 June 1935, permitting, by special orders of the Führer, abortions performed to prevent births of children with hereditary taints; this would apply not only if the mother was diseased but also if the mother was healthy but the father suffered from a hereditary disease. At the same time, the amendment restated the prohibition under heavy penalties of sterilization and abortion for persons judged healthy.

Feeble-mindedness had been the favorite target of eugenicists on both sides of the Atlantic, and this category also accounted for the largest number of persons affected by the German eugenic legislation. This category was most flexible; inclusion was determined more by social than by medical criteria. Just as the IQ number had been used to define the feeble-minded in the United States at the beginning of the century, the diagnosis for hereditary feeble-mindedness under the German sterilization law was based almost exclusively on a specially constructed intelligence test.

To exclude the Jews, the regime promulgated a large number of laws and amplified them with innumerable ordinances. A listing of these laws and decrees, with brief summaries, occupies a book of over 400 pages. The first major legislation directed at least in part against Jews was the

Law for the Restoration of the Professional Civil Service, enacted in April 1933. Breaching civil service law to permit the regime to fire political opponents from the civil service, the law also included provisions for the removal of so-called non-Aryan, mostly Jewish, civil servants. 36 A vast number of regulations followed on both the national and local levels to drive Jews from all positions in government, education, the media, the arts, and later the free professions of law and medicine. After 1937 laws and regulations also began to curb the economic activities of Jews, to limit their participation in the social and cultural life of the nation, and to restrict their freedom of movement.

The centerpiece of the anti-Jewish legislation was enacted in September 1935 as the Reich Citizenship Law and the Law for the Protection of German Blood and German Honor, together known as the Nuremberg racial Laws. 38 The drafters of these laws rejected the use of the terms "Aryan" and "non-Aryan," probably because they were imprecise, although these terms continued to be used in numerous other regulations; instead, the laws defined so-called Aryans as persons with "German or related blood. „39 The Blood Protection Law, which was not retroactive, excluded Jews from the German national family by prohibiting marriages, and also sexual relations outside marriage, between Jews and citizens with German or related blood. The Reich Citizenship Law was an afterthought ordered by Hitler and drafted by the bureaucracy in a few hours. The law did not alter the status of Jews as citizens (*Staatsangehörige*), conceding citizenship to all German nationals, including Jews, and thus retaining for Jews the rights and protections traditional citizenship conferred. Instead, the law stigmatized Jews as citizens of lesser worth by creating the elevated position of Reich citizen (*Reichsbürger*), which only those with German or related blood could hold. Reich citizens were to be the sole bearers of political rights, but those rights were not defined and, considering the centralization of dictatorial political power, were basically meaningless. In fact, the required Reich citizenship warrants were never issued.

Although the Nuremberg racial laws were primarily directed against Jews as the minority considered most dangerous to German society and the German gene pool, the provisions of the laws were also applied to other minorities. The Reich minister of interior, Wilhelm Frick, who administered the laws, defined "alien blood" as follows: "No Jew can become a Reich citizen, because German blood is a prerequisite in the Reich citizenship code. But the same also applies to members of other races whose blood is not related to German blood, as, for example, Gypsies and Negroes." The Blood Protection Law mentioned only Jews, but the official commentaries prohibited marriage if offspring from such a union would endanger the purity of German blood; the commentators demanded the exclusion of "other racially alien blood," particularly that of "Negroes and Gypsies."

An exact definition of who belonged to the excluded groups was essential for the administration of the eugenic and racial laws. But while the eugenic legislation included a precise definition in the law itself, the racial laws did not, leaving precise definition to the implementation decrees and regulations. The First Decree to the Reich Citizenship Law thus defined the meaning of the term "Jew," including the various levels of German-Jewish hybrids (*Mischlinge*). The scientists provided the definitions. The civil servants drafting the laws and compiling the commentaries based their definitions on the writings of the race scientists; they quoted Eugen Fischer and Hans F. K. Günther and sat on committees with Fischer, Fritz Lenz, Ernst Rüdin, and Otmar von Verschuer."

The Nazi regime did not incarcerate the excluded and impoverished Jewish minority in Germany and incorporated Austria; the concentration camps were not established for that purpose. Instead they pressured them to emigrate, and about half of the German and Austrian Jewish communities did leave the country prior to the war. In 1938, the persecution of Jews intensified. In October all Jews with Polish citizenship, including children born on German soil, were deported across the Polish border. In early November, the regime staged the popular pogrom known as *Kristallnacht*. Thereafter the desire of the remaining Jews to emigrate increased, but most countries had by that time closed their door for refugees from Nazi Germany.

Against Gypsies, the authorities increased the powers of repression traditionally imposed by the police. In 1936 Reich Leader SS Heinrich Himmler issued detailed regulations concerning ways in which the police should restrict the freedom of Gypsies to travel and trade, and in 1937 the Reich Ministry of Interior authorized the police to use preventive arrests to incarcerate Gypsies. And throughout Germany the local authorities established Gipsy camps to restrict large numbers of Gipsy families. Although these regulations, which increased in number in the late 1930s and early 1940s, categorized Gypsies as antisocial elements that had to be contained by the police, their persecution was based on race. Gypsies as a group were defined as criminal and antisocial, obviously a categorization based on race or ethnicity, and thus individual Gypsies, as members of that racially defined group, were automatically classified as antisocial criminals. The provisions of the Nuremberg racial laws were applied to them as much as to Jews. Thus the Reich Ministry of Interior, charged with the enforcement of the racial laws, decided that "in Europe only Jews and Gypsies are considered alien races."

As war approached in 1939, the Nazi regime moved to adopt more radical methods of exclusion. As early as 1920, two eminent Freiburg scholars had proposed the most radical solution to the problem posed by the institutionalized disabled in Germany. In that year, Karl Binding and Alfred Hoche, the former a law professor and the latter a psychiatrist, published a polemical

work entitled *Authorization for the Destruction of Life Unworthy of Life*. Binding, who died just before the book appeared, and Hoche argued that the law should permit the killing of "incurable feeble-minded" individuals. Although implementation of this radical solution was not possible during the period of the democratic Weimar Republic, the book launched a lively debate in scientific circles concerning the killing of the disabled, which was usually euphemistically called euthanasia. Among eugenic circles in the Anglo-American world, however, this solution was never seriously considered. In Germany, however, the Nazi assumption of power removed some of the restraints that had still operated during the Weimar years. Still, while eugenicists and Nazi party activists supported the Binding-Hoche solution, popular opinion was not yet prepared to accept it. But in 1935 Adolf Hitler told Gerhard Wagner, the Reich physician leader, that once war should begin he would implement euthanasia.

First came the murder of disabled children. Unwilling to involve the government bureaucracy, Hitler assigned the job of killing disabled infants and young children to the Chancellery of the Führer, his private chancellery as Nazi party leader. He appointed Karl Brandt, his escorting physician, and Philipp Bouhler, chief of the Chancellery, as plenipotentiaries for this so-called children's euthanasia program. Bouhler assigned the job of organizing the killings to the Chancellery's Office II and thus appointed its head, the thirty-four-year-old Viktor Brack, as the day-to-day manager of the euthanasia killing program.

The planning and implementation of the euthanasia killings was classified "top secret," since the role of the Chancellery had to remain hidden. The planners thus fabricated a fictitious organization as camouflage; they chose the imaginative title Reich Committee for the Scientific Registration of Severe Hereditary Ailments. This fictitious agency existed only on paper; its mailing address was a post office box. During the spring of 1939, a small group of physicians and Chancellery managers devised the system for the killings. They decided that the process of selection would be based on registration forms. They further agreed that the data thus collected would be evaluated by so-called experts, who would decide whether the child under review should be killed. The names of the children would be collected through instructions sent to hospitals, physicians, and midwives. But such instructions could not officially be mailed by the "private" Reich Committee. For this task, and similar ones to follow, the Chancellery turned to the Reich Ministry of Interior. Its State Secretary for Health, Leonardo Conti, who was also Wagner's successor as Reich Physician Leader, referred this to the department for national health, headed by Dr. Arthur Gütt, who, in turn, assigned it to the section for state institutions, headed by Dr. Herbert Linden. Since only a government agency could enforce compliance, thereafter the ministry, represented by Linden, issued, circulated, and collected all official papers needed for the success of all euthanasia operations.

For the murder of the children, the Reich Committee established so-called children's wards in various state hospitals throughout the country, where specially selected physicians and nurses killed the children. Some of the most notorious killing wards were Eichberg, Kalmenhof-Idstein, Kaufbeuren, and Am Steinhof in Vienna. The children could not be automatically sent to one of the killing wards; the parents had to agree to the commitment. For this purpose the Reich Committee lied to the parents by claiming that in the wards new procedures would cure the child. If this did not work, pressure was applied by the ministry. The ministry threatened the parents with loss of custody, because retaining the child at home would adversely affect the healthy children. The threat of denying parents' custodial rights usually worked. S6 Even greater pressure could be applied against mothers when fathers were absent as soldiers during the war. In such cases, the Reich Committee requested the local labor office to assign the recalcitrant mother to contractual labor; at that point, the mother had little choice but to commit the child. Obviously, such coercive measures were effective only against working-class mothers, unable to finance child care, especially after subsidies for children were denied those not certified to be a "useful, racial compatriot." Similar tactics were employed against parents who attempted to remove their children from the killing wards. In theory, removal of a child was an option, just as commitment was supposedly voluntary; in fact, it was virtually impossible. The physicians in the killing wards did everything in their power to prevent parents from removing their children. Some parents petitioned the institution, some denounced it to the courts, and some used subterfuge to get their children back. Few succeeded.

The managers from the Chancellery of the Führer did not care how the children were killed; they depended on the expert knowledge of the physicians they had selected. The means were left to the discretion of the physicians. One simple method was to let the children starve to death; the favored method was, however, the use of medication. They used morphine-scopolamine, luminal, veronal, or bromide. Since the killing wards required large amounts of medication, not usually available in hospitals in such large quantities, the Chancellery obtained them through the Criminal Technical Institute (KTI) of the security police. Usually the deadly medication was given in tablet form, sometimes in liquid form; on rare occasions, when the patient could not or would not swallow, it was given as an injection. The tablets were usually dissolved in a liquid such as tea so that the child would ingest the medicine with regular food. The advantage of this method for a secret killing operation was obvious. These medicines were regularly administered in all medical facilities; they became lethal only in increased dosages. The children were therefore killed not as a result of the ingestion of alien poisons but through an overdose of a common medicine. Further, overdoses of barbiturates and similar forms of medication did not result in immediate death. Instead, they led to medical complications, especially pneumonia, that eventually -- usually in two

or three days -- resulted in death. The physicians could then report a "natural death." Thus Hermann Pfannmüller, the director of Eglfing-Haar, testified to this fiction before the U.S. Military Tribunal: "I must emphasize this is not a matter of poisoning. The child simply dies of a certain congestion in the lungs, it does not die of poisoning."

The killings of the children continued throughout the war; the best estimate is the total number of at least 5,000 murdered children. Eventually, the scope of children's euthanasia was expanded. At first, it included only infants and small children, none above the age of three. But later older children were also included, and eventually even teens were killed in the children's wards. Hitler, who reserved for himself the authority to resolve problems, made the decision to include the older children.

After planning for children's euthanasia had been completed, Hitler decided to expand the killing operation to include adults. The killing of disabled adults involved a much larger enterprise. The American postwar indictment in the Nuremberg Medical Case concisely described this so-called euthanasia program: "This program involved the systematic and secret execution of the aged, insane, incurably ill, or deformed children and other persons by gas, lethal injections, and diverse other means in nursing homes, hospitals, and asylums."

Hitler first appointed Leonardo Conti to direct adult euthanasia. The Führer met with Conti, Hans Heinrich Lammers, the chief of the Reich Chancellery, and Martin Bormann, the chief of the Nazi Party Chancellery, and told them "that he considered it appropriate that life unfit for living of severely insane patients should be ended by intervention that would result in death. 11 70 Conti accepted the assignment, but he did not remain in charge long; within a few weeks, Hitler replaced him. 71 Once again he appointed Brandt and Bouhler plenipotentiaries, so that Brack and the Chancellery of the Führer could administer adult euthanasia alongside that for children. For this kind of operation Hitler "desired a non-bureaucratic solution." The office therefore moved from the Chancellery into a confiscated Jewish villa at number 4 on Tiergarten Strasse; because of this Tiergarten Strasse number 4 address, adult euthanasia was soon known as Operation T4, or simply as T4.

As in children's euthanasia, T4 created several front organizations to hide the involvement of the Chancellery. The Reich Cooperative for State Hospitals and Nursing Homes served as front for the T4 medical office. It was first headed by Werner Heyde, who had advanced to the chair of psychiatry at Würzburg after his senior Jewish colleagues had been fired. Through his connection with Himmler and the SS, Heyde also served as psychiatrist for the concentration camps.

Although he remained part of T4, he had to step down as department head because of accusations that he was a homosexual. He was succeeded by his deputy, Paul Nitsche, longtime

director, with the title of professor, of the Sonnenstein state hospital in Saxony. The other front organizations were headed by managers from the Chancellery: the Charitable Foundation for Institutional Care, which served as front for the T4 business office; the Charitable Foundation for the Transport of Patients (Gekrat), which transported the disabled to the killing centers; the Central Accounting Office for State Hospitals and Nursing Homes, which dealt with the finances of the operation.

To select the victims, the Reich Ministry of Interior sent questionnaires to all institutions, both public and private, requesting information about the institution and its disabled patients. For each patient they also had to complete a questionnaire providing personal information, diagnosis and prognosis, and ability to do productive work. It also required information on race; a footnote explained the racial categories that should be listed: "Jew, Jewish hybrid of the first or second degree, Negro, Negro hybrid, Gypsy, Gypsy hybrid, etc." The completed forms were submitted to so-called medical experts for evaluation. After the experts had evaluated the questionnaire and had made their decision, they were reviewed by three senior medical experts: Heyde, Nitsche, and Linden. The impressive medical edifice constructed by T4 to safeguard against unprofessional evaluations was a facade. In fact, these evaluations, which determined whether a patient would be killed and which were supposedly based only on medical criteria, were made by these medical experts in a hasty and unprofessional manner. The three senior experts could not possibly review the many forms submitted by a large group of junior experts. And even those junior experts could not evaluate all the forms carefully. For example, Hermann Pfannmüller, who did his evaluations in the spare time left to him after performing his duties as director of the large Eglfing-Haar state hospital, processed the forms with unbelievable speed. He regularly received stacks of reporting forms -- usually 200 to 300 at a time -- and shortly thereafter returned them to Berlin with his evaluations. At Nuremberg, the American prosecutor confronted Pfannmüller with evidence that he evaluated 2,058 patients between 12 November and 1 December 1940, which meant that he made 121 decisions a day about the life and death of patients or one decision every five minutes in a ten hour day. Pfannmüller, who described himself as "a medical expert just as any medical expert appearing in a case before a court," could only reply that "here I am a doctor confronted with a lawyer and our points of view are completely divergent." And Pfannmüller was not the only expert who rapidly evaluated thousands of patients.

In their 1920 book, Binding and Hoche had argued that euthanasia could only function if the act of this kind of mercy death would be decriminalized, so that physicians would not have to fear prosecution under the murder statute, paragraph 212 of the German penal code. Paragraph 212 remained in force throughout the Nazi period. Physicians therefore feared possible prosecution. They therefore asked for a law that would legalize euthanasia, but Hitler absolutely refused to

consider such a law during wartime. Although almost everyone accepted the principle that the Führer's word was law, the Chancellery managers had difficulty convincing physicians and civil servants that they would not be criminally liable for murder in the absence of a duly enacted law clearly authorizing the killing of disabled patients. To convince their collaborators, they decided to ask Hitler for written orders. In October 1939, Hitler finally signed a document, more an authorization than an order, that had been prepared by the Chancellery. But to emphasize that war would not only alter the international status of the Reich but also herald "domestic purification," he predated it to 1 September 1939, the day World War II began. Prepared on Hitler's personal stationery, as if mass murder was his "private affair," but never promulgated or published in any legal gazette, this authorization did not actually have the force of law. It was to serve, however, as the legal basis for the killing operation, and it was used to convince physicians to collaborate in the killings.

Typed on white stationery, with the German eagle and swastika as well as the name "Adolf Hitler" printed on the top left, the authorization read as follows:

Berlin, 1 Sept. 1939

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

(signed) A. Hitler

The original was kept in a safe at the Chancellery; copies were shown to various prospective collaborators. One copy was later sent to the Reich minister of justice, Franz Gürtner. The original and all but one copy were destroyed when the war ended. The photocopy sent to Gürtner survived, with a handwritten notation:

Transmitted to me by Bouhler on 27.8.40

(signed) Dr. Gürtner.

The physicians had used medication to kill the disabled children, but they had to search for a better method for the far larger group of disabled adults. For them, the T4 technicians established killing centers, thus creating the unprecedented institution that would symbolize Nazi Germany and the early twentieth century. The term "killing center" best describes the places where human beings were killed in a process that copied assembly line factory production. After experimenting with a variety of killing methods, the T4 managers settled on gas as the killing agent. Karl Brandt discussed the various killing methods with the Führer, and when Hitler supposedly asked him "which is the more humane way," Brandt recommended the use of gas.

Thereupon they agreed on this agent for the mass killings. After giving this account at his trial at Nuremberg, Brandt proudly told his American interrogator: "This is just one case where in medical history major jumps are being made." This bizarre comment was not an isolated statement but only an extreme example of the fascination with technology exhibited by the managers of killing operations. Thus, when the engineer Walter Heess, who headed the KTI, was asked how one could justify using gas to kill human beings, he replied: "What are you talking about; after all, it works."

T4 established six killing centers -- Brandenburg, Grafeneck, Hartheim, Sonnenstein, Bernburg, and Hadamar -- only four were operational at the same time. The killing center was usually one building; two were castles, three were hospital, one was a jail. The disabled patients usually arrived at the killing center by a Gekrat bus, but sometimes also by train. In the reception of the center, made to look like a hospital, the patients were undressed. The naked patients were then taken one at a time into the examination room, where a physician briefly examined each patient. This was not a regular medical examination. The physician only established the identity of the patient on the basis of his or her medical records, and with "relative speed," he "gained a general impression from those people." At this point, another mark was made on the naked bodies of the patients; those possessing gold teeth or gold bridges were identified with a cross on their backs or their shoulders. This mark later served to identify corpses with valuable dental work. After examination by the physician, the patients were each assigned a number, which was stamped onto their bodies or attached with adhesive tape and was about 1 1/2 inches high; then they entered an adjacent room to be photographed "sitting, from the front, from the side, and standing." These final pictures, identified by the stamped or attached numbers, were designed to complete the record and to show the physical inferiority of the murdered patients "for scientific reasons"; they were eventually collected and cataloged at T4 headquarters in Berlin. After all examinations and other formalities were completed, the patients, still naked, were assembled so that they could be led into the gas chamber.

Once all patients had entered the gas chamber, the staff closed the steel door and made sure that the door and the ventilation shafts were hermetically sealed. The physician in the adjacent room then opened the valve of the compressed carbon monoxide gas canister -- obtained by the killing centers through the KT1 chemist August Becker from BASF, the I.G. Farben factory at Ludwigshafen -- and the lethal gas entered the chamber. Usually the gas valve was opened for about ten minutes. After about five minutes, all patients were unconscious, and in about ten minutes, they were all dead. 94 The staff waited for one to two hours before ventilating the chamber. 9J Observers differed on the effects of the gas. Although at Brandenburg one observer reported that "I myself was once a witness of how rapidly gas caused death. It is my opinion that

they did not feel any pain, „% the comments of an observer at Hadamar were probably more accurate:

Did I ever watch a gassing? Dear God, unfortunately, yes. And it was all due to my curiosity. ... Downstairs on the left was a short pathway, and there I looked through the window. ... In the chamber there were patients, naked people, some semi-collapsed, others with their mouths terribly wide open, their chests heaving. I saw that, I have never seen anything more gruesome. I turned away, went up the steps, upstairs was a toilet. I vomited everything I had eaten. This pursued me days on end. ... Looking into the chamber, I could not imagine that this was completely without pain. Of course, I am a layman and this is just my opinion. A few were lying on the ground. The spines of all the naked people protruded. Some sat on the bench with their mouth wide open, their eyes wide open, and breathing with difficulty.

After the ventilation of the gas chamber through the use of fans had been completed, the physicians pronounced death and the bodies were removed. They were dragged, not carried, from the chamber by staff members charged with the task of burning them; these staff members were known as stokers. They had to disentangle the corpses and drag them from the gas chamber to the room, usually known as the death room, where they were piled up prior to cremation.

At this point, prior to cremation, the staff proceeded to loot and mutilate the corpses to enrich the killing program. Specially selected corpses, usually identified by the physicians prior to the gassing, underwent autopsies. This served two purposes: it provided young killing center physicians with training and academic credit toward their specialization, and it recovered organs, especially brains, for scientific study at medical institutes. Furthermore, all patients with dental work containing gold had been identified with a cross on their backs. The corpses with such crosses were collected after death, and the stokers broke out all gold teeth. These gold teeth were delivered to the killing center office. Ingeborg Seidel, a secretary at Hadamar, described the process during her postwar interrogation: "Gold teeth? They were handed to us in the office, whenever there was someone who had gold teeth. Many handed to us? No. They were brought to me in a bowl by one of the stokers. He had a book and I had a book, and we thus confirmed accuracy. We had a little carton, and that is where we kept them until we had accumulated a sufficiently large amount, and we then sent them by courier to Berlin." This gold, together with that later collected by similar means elsewhere, eventually found its way into the coffers of the German Reich, but T4 no doubt received, as did other agencies involved in this type of pillage, an equivalent credit to its budget.

At the end the stokers placed the corpses into the crematorium. Although they usually cremated two to eight bodies at one time, far more time was required to burn the bodies than to kill the patients; the disposal of corpses proved technically far more difficult than the murder of people. The stokers worked in shifts, and frequently they had to work through the night to cremate the murdered patients from one transport.

The killing center thus "processed" living human beings into ashes in less than twenty-four hours; in the language of T4, this was called "disinfection." After cremation, the stokers used a mill to grind into a powder the human bones not totally pulverized by the fire. Ashes were placed into urns for burial, about seven pounds for every human being. The relatives of the murdered patients could obtain such an urn, but they were not told that the ashes did not belong to the person whose name was stamped on the urn; the stokers simply took ashes from a "large pile" to fill the urns.

The work of the killing centers was shrouded in secrecy. To maintain secrecy, the office staff of the centers had to leave a paper trail to hide the killings. The physicians issued fraudulent death certificates. The office sent condolence letters to the relatives. Dates of death and other details were changed. Nevertheless, the truth leaked out. Too many errors were made; too many patients suddenly died. This created unrest, something the regime could not permit in the middle of the war. In August 1941, Hitler ordered a stop to the gassings of the disabled at the killing centers; it had become just too public. That did not mean that the killings stopped. The disabled were thereafter killed in various institutions and hospitals throughout the country through medication or starvation. It was less noticeable, but just as effective.

A statistician employed by T4 compiled a summary of the numbers of patients killed. In his report, found after the war at Hartheim, he provided monthly figures for each killing center, arriving at a total of 70,273 persons "disinfected." Of these, 35,224 were killed in 1940 and 35,049 in 1941. Postwar German prosecutors believed, however, that these figures were too small. Basing their calculations on all available documents and interrogations, they argued that T4 probably distributed the number of patients equally between the killing centers. They counted about 20,000 victims each for Hartheim and Sonnenstein, and also 20,000 each for Brandenburg combined with Bernburg and for Grafeneck combined with Hadamar. This provided a total of 80,000 patients killed, although they believed it probable that the actual figure was even higher.

The bizarre T4 statistics found at Hartheim also provided an exact account of future expenditures saved by killing the disabled. The T4 statistician figured that 70,273 "disinfections" saved the German Reich 885,439,980 RM over a period of ten years. Computing future savings of food, he argued, for example, that 70,273 murdered patients saved Germany 13,492,440

kilograms of meat and wurst -- a macabre utilitarianism designed to rationalize the eugenic and racial ideology that created the killing centers.

Hitler's stop order applied only to the gassing of the disabled; the T4 killing centers could still be put to other use. In 1940 German concentration camps were growing in number and size, but they did not yet possess the facilities to kill large numbers of inmates at one time. Methods used to kill individual inmates during the prewar years -- such as forced labor, harsh living conditions, beatings, and executions -- were too slow to reduce the growing camp population. The SS therefore turned to the KdF to determine how to utilize T4's killing capabilities. Early in 1941, Reich Leader SS Himmler conferred with KdF chief Philipp Bouhler concerning "whether and how the personnel and the facilities of T4 can be utilized for the concentration camps." Soon thereafter, in the spring of 1941, a new killing operation commenced, aimed at inmates in the German concentration camps. The killing of selected concentration camp inmates in the gas chambers of the T4 killing centers was designated "Special Treatment 14f13." The selection of the victims was based on a collaboration between the SS camp physicians and T4 physicians. Teams of T4 physicians visited the camps where they selected the victims from lists already prepared by the SS. Thus the Bernburg and Sonnenstein killing centers continued to operate until 1943, when the growing need for concentration camp labor ended operation 14f13. Only Hartheim outside Linz in Austria remained operational. Located near the Mauthausen concentration camp, it had a special relationship with that concentration camp, and was used to gass Mauthausen inmates until December 1944.

At Nuremberg, Viktor Brack swore under oath that no disabled Jewish patient died in the euthanasia killing centers. He lied. Karl Brandt also lied at Nuremberg, claiming that he knew nothing about the fate of disabled Jews. Physicians involved in the killing of disabled Jews also lied when asked about their Jewish patients. All these lies were part of an elaborate scheme to falsify the record. And the liars succeeded, at Nuremberg and thereafter, in deceiving prosecutors, judges, and historians.

The argument advanced by the T4 perpetrators was that euthanasia was a form of deliverance, and that Jews did not deserve this benefit. It was of course true that positive eugenic measures never applied to Jews. But euthanasia was in fact a negative eugenic measure, and this always applied to Jews. We thus have evidence that Jews were not exempted from the sterilization law. And this applied also to the T4 killings. Jews appeared on the lists of the earliest transports to the T4 killing centers. Thus the first name on the transport list from Eglfing-Haar to Grafeneck of 18 January 1940 was Ludwig "Israel" Alexander. But the regular killing process, including individual medical evaluations, was too slow and too uncertain for the T4 managers when applied to Jews,

and they therefore decided to transfer and kill Jews as a group, not on the basis of evaluated questionnaires but simply because they were Jews .

The decision systematically to murder disabled Jewish patients still in German hospitals was apparently made in March or April 1940. At that time, the Gestapo as well as T4 started to collect statistics on institutionalized Jewish patients. In late March or early April, local offices of the Gestapo began to demand that Jewish communities provide them monthly reports on the number of Jewish patients and soon thereafter also requested that all monthly changes be reported. On 15 April 1940, Herbert Linden of the Reich Ministry of Interior asked all local authorities to report the numbers of Jewish disabled patients. His letter to state and provincial agencies administering state hospitals and nursing homes required them to submit within three weeks lists of Jewish patients "suffering from mental illness or feeble-mindedness." The purpose of Linden's circular soon became apparent. Jewish patients in various hospitals and homes were transferred to a small number of institutions serving as assembly centers. From there, they were collected by T4's Gekrat and transported to the killing centers.

The disabled Jewish patients who had been assigned to these Jewish transports had been chosen not on the basis of their questionnaires but solely on the basis of lists compiled by institutions in response to the Reich Ministry of Interior circular. Unlike all other murdered disabled patients, the killing centers did not send out death certificates or letters of condolence. The disabled Jews were simply to disappear. But this changed as paperwork began to accumulate. Soon relatives, welfare offices, insurance companies, and the courts inquired about the Jewish patients who had disappeared. At first, the institutions stonewalled, replying only that on orders of the ministry the patient had been transferred to another institution with a Jewish transport, adding, "The name of that institution is not known." Thereupon T4 invented the Cholm/Chelm deception.

Eventually, relatives and public agencies received death notices, as had the relatives of murdered German patients. But these notices did not come from killing centers inside Germany. They arrived from the General Government in occupied Poland on stationery with the heading, "Mental Asylum Chelm, Post Office Lublin." Further correspondence was usually answered by "Local Police Office, Chelm II." The stationery was not, however, always exactly the same. Sometimes the name was "Cholm" and not "Chelm"; however, other words, print, placement, and looks were identical. Chelm death notices were sent not only to relatives but also to various public agencies, especially those with financial responsibility for the patients. 126 Unlike the condolence letters sent to murdered German patients, those from Chelm were brief and to the point. They noted only that the person had died, providing the date and cause of death. Two copies of the death certificate, certified by the registry officer at Chelm II or Cholm II, were

enclosed. The death notices were spread out from November 1940 to March 1941. Obviously, T4 collected payment for patient expenses during the time between transfer and death notification. With true Germanic thoroughness, death notices were entered by local registry offices on the permanent birth records of the murdered Jewish patients. Thus the notice "died Chelm II" or "died Cholm II" with the date was 4 -19 entered on nineteenth-century birth records, usually just below the 1939 notice that the person had added "Israel" or "Sara" to his or her name.

The entire Chelm enterprise, designed to enrich T4's coffers, was completely amateurish. The letterhead was simple and did not have the normal appearance of a German institutional letterhead. In any event, it was not clear why a Polish institution near Lublin would use a German letterhead. Further, the confusion over the name, sometimes spelled Chelm and sometimes Cholm, indicated that as far as forgery was concerned, the T4 people were dilettantes. Still, no one, including German government agencies, seemed to notice these discrepancies. The same was true about the way payment was collected. The Chelm institution near Lublin asked that monies due be paid into "Post Office Account Berlin No. 17050," without explaining why a Polish institution would have an account in Berlin.

The fraudulent letters were actually written in Berlin. They were the responsibility of T4's liquidation office, located at the Columbus Haus. The liquidation office took care of the paperwork left over from killing operations. One of its departments, designated XY, dealt with the Chelm notices. T4 probably had an agreement with the German post office to redirect letters sent to Chelm post office box 822 in Lublin but did not mail Chelm letters directly from Berlin. A T4 courier took them to Lublin for mailing so that the Lublin post office cancellation would appear on the letter.

One exchange of correspondence can serve as an example. On 7 November 1940, Chelm notified Flora Tauber in Vienna that her son had died the previous day: "We must inform you, that your son, Alfred Israel Tauber, who had been here for some time, has died here. For possible use, we are enclosing two certified copies of the death certificate." Tauber was no doubt a Jewish patient transferred from Am Steinhof in late August 1940. We do not know when the mother actually received the Chelm letter, but on 2 December, she wrote to the Lublin post office box number listed on the Chelm stationery -- a box number that undoubtedly was a cover for T4 in Berlin -- concerning her son's burial. The Chelm II police replied on 7 April 1941 that her letter had not arrived until 12 December, which failed to explain why the reply took an extra three months. In any event, the letter informed the mother that the urn containing her son's ashes had already been buried in the institution's cemetery "on orders from higher offices." Flora

Tauber persisted. On 16 April 1941, she again wrote to Chelm, this time about her son's grave, requesting a memorial plaque. The Chelm II police answered on 14 May that they could not accommodate her wishes. Since the institution cared for the grave at no cost to her, she was advised to wait until the end of the war when there might be a possibility of erecting such a plaque. This was the last of the surviving letters, thus ending this bizarre correspondence.

The Chelm enterprise demonstrates how secret government activities can get out of hand. T4 had orders to kill the Jewish patients, but its decision to manufacture the Chelm notices to make money was probably not specifically sanctioned from above. Considering the phobia about secrecy and the fear that the KdF would be exposed, the amateurish forgery enterprise presented serious dangers to such a secret project. The decision to proceed with the scheme shows not only how greed operated but also that T4 felt immune from normal bureaucratic constraints.

After the war, the Chelm/Cholm deception long continued to obscure the fate of disabled Jews. But the evidence is clear and incontrovertible that all disabled Jews were murdered in T4 killing centers on German soil. The murder of disabled Jews transported from the assembly center at Berlin-Buch to the T4 killing center Brandenburg can serve as an example.

An eyewitness account comes from Herbert Kalisch, the T4 electrician, who was interrogated in 1960 and 1961 by German prosecutors. On one occasion, he accompanied a transport of patients, and he testified that "as far as I remember, it was still in June 1940." The T4 people wore either white coats to look like hospital staff or green uniforms to resemble the police.

We drove in six large buses of the Reich railroads to the mental hospital Buch near Berlin, and there collected about 100 women with children and about 100 men, all members of the Jewish race. ... The transport went to the city of Brandenburg on the Havel, to the old prison in the center of the city, which, being empty, had been remodeled into a crematorium. After arrival at the prison, the persons were put in cells, separated by gender. Still on the same day, immediately after arrival, about twenty persons at a time were taken from the cells. The persons were undressed completely, as they were told that they would be taken to another building for bathing and delousing. First they took women and children for gassing. To pacify these patients, physicians gave them a cursory examination. Thereafter, they were placed in a room with wooden benches, which looked, more or less, like a shower room. But before they entered the room, they were marked with consecutive numbers. The doors were locked as soon as the prescribed number of persons had entered the "shower room." At the ceiling were shower heads through which gas entered the room. The gas was ventilated after fifteen to twenty minutes, as soon as one had discovered by looking through the peep-hole that all people inside were no

longer alive. As the earlier examination had noted which persons had gold teeth, these persons could now be discovered by their marked number. The gold teeth were pulled from the dead people. Thereupon SS men stationed at the prison carried the dead people from the "shower room" and took them to the crematorium. On that very day, the entire transport was eliminated in this fashion.

At a later interrogation, Kalisch enlarged on his testimony: "The transport that was gassed in the gas chamber of the former prison in Brandenburg on the Havel in about June 1940 contained only Jews, who I would estimate were men and women between the ages of eighteen and fifty-five."

Kalisch's eyewitness testimony is not the only evidence we possess that Jewish patients were gassed in Brandenburg. The 1940 pocket diary of Irmfried Eberl survived the war. As physician-in-charge at Brandenburg, Eberl noted the arrival of transports for gassing, often listing the number of victims and usually indicating the composition by using the capital letter "M" for men (*Männer*), "F" for women (*Frauen*), and "J" for Jews (*Juden*). The diary contains a relatively large number of "J" entries, and some match exactly the schedule of transfers known to us.

The murder of disabled Jewish patients -- which began about a year before the mass murder of Jews commenced in the occupied Soviet Union -- formed an important link between euthanasia and the final solution. The 1940 decision, made at the highest level to kill disabled Jews as a group, regardless of their condition, pointed the way to the 1941 decision to kill all Jews.

On 22 June 1941, the German Wehrmacht invaded the Soviet Union, and the Nazi regime embarked on its second, and far more ambitious, killing operation. Mobile operational units of the SS, the so-called *Einsatzgruppen*, crossed the Soviet border immediately after the battle troops. In the occupied territory of the Soviet Union, these units shot large numbers of civilians in mass executions. Their primary task was the murder of all Jews on Soviet soil. The Germans labeled the murder of Soviet Jews, and the subsequent murder of all Jews within their jurisdiction, as the final solution of the European Jewish question. But they also murdered the Gypsies. In addition, they also murdered the disabled, showing the link to the euthanasia program. The quartermaster of the German army, General Eduard Wagner, thus recorded in September 1941: "Russians consider the feeble-minded holy. Nevertheless, killing necessary."

It seems eminently reasonable to assume that the decision to kill the Jews followed the same pattern as the one to kill the disabled. As in the case of the policy against the disabled, the agencies charged with implementing Jewish policy continuously searched for new approaches, competing with each other for the most radical solution. Some have argued that this competition

produced a decision that did not require the Führer's participation. 142 But the evidence for such a scenario is not convincing. Instead, as in the case of T4, the argument is far more compelling that Hitler set the agenda, permitted his agents to prepare the ground, but reserved for himself the final decision. The date of the decision, which has consumed a great deal of debate, is less important.

Most likely, Hitler gave a verbal order -- or authorization - to kill the Jews, and appointed Heinrich Himmler as his agent. However, unlike T4, he did not provide a written authorization. The reasons for this are not difficult to fathom. Too many people had read Hitler's earlier euthanasia authorization, and such widespread knowledge could have implicated him in the killings; obviously, he refused to sign another such document. In addition, Himmler, his loyal paladin, could hardly insist that his Führer put his verbal order on paper. Still, Reinhard Heydrich, whose Central Office for Reich Security (RSHA) had to implement the order Hitler gave to Himmler, needed some written commission to compel the cooperation of other government agencies. Hermann Göring therefore supplied a retroactive sanction in his letter of 31 July 1941. Just as Hitler did not write but only signed the letter to Brandt and Bouhler prepared by the Chancellery of the Führer, Göring did not initiate but only signed the authorization prepared and submitted by Heydrich.

The murder of the disabled preceded the murder of Jews and Gypsies, and it is therefore reasonable to conclude that T4's killing operation served as a model for the final solution. The success of the euthanasia policy convinced the Nazi leadership that mass murder was technically feasible, that ordinary men and women were willing to kill large numbers of innocent human beings, and that the bureaucracy would cooperate in such an unprecedented enterprise. But the regime had also realized that mass murder on German soil posed problems, because public opinion seemed uneasy about such radical violation of the law. The mass murder of Jews and Gypsies was therefore moved to the East, into Poland and the occupied territories of the Soviet Union.

Mass murder by execution as at first practiced in the East proved far too public, and the perpetrators had to search for a better method. Himmler's men eventually realized, just as the T4 killers had discovered earlier, that it was more efficient, and also less public, to bring the victims to a central killing place. It was only logical that these places would be modeled on the T4 centers. To what degree the perpetrators of the final solution copied the T4 system is revealed by the use of the term Brack's devises, referring to the T4 administrator, when discussing the use of gas chambers.

The first killing center of the final solution began functioning in December 1941 at Chelmno (Kulmhof in German) in the Wartheland, a Polish territory annexed to Germany. Although it was a stationary killing center, it used the gas vans that circulated exhaust fumes into the van to kill the victims. To make use of previous T4 experience, Herbert Lange, who had used vans to kill the disabled in the Wartheland and East Prussia, to operate Chelmno.

At the same time, Himmler commissioned Odilo Globocnik, the SS and Police Leader in Lublin, to kill the Jews of Poland, an undertaking later named Operation Reinhard in honor of the assassinated Heydrich. To accomplish his mission, Globocnik established three killing centers in the Lublin region -- Belzec, Sobibor, and Treblinka -- which started to operate, one after the other, in the spring and summer of 1942. Unlike Chelmno, the camps of Operation Reinhard used stationary gas chambers, in which a diesel motor propelled gas fumes into the chambers.

To accomplish this task, Globocnik turned to the Chancellery of the Führer to gain the support of T4 for his enterprise. In September 1941, Philipp Bouhler and Viktor Brack visited Globocnik in Lublin, where they probably discussed their future collaboration. During the winter of 1941-42, a number of T4 men visited Lublin, and there can be no doubt that their sojourns there were connected with the construction of killing centers. The T4 chemist Helmut Kallmeyer visited Lublin in January or February 1942. Christian Wirth, a Stuttgart police officer who had served as troubleshooter at Hartheim and other T4 killing centers, was also in Lublin in late fall or early winter 1941. Erwin Lambert, the master mason of T4, visited the Lublin region three times to construct gas chambers in Treblinka and Sobibor, and he also directed construction work in several forced labor camps nearby.

Expert advice on the design and construction of killing centers was not the only contribution of the Chancellery. Globocnik needed staff to run his killing centers. He therefore subcontracted to T4 the running of the killing centers of Operation Reinhard. In the second half of April, Globocnik conferred with Bouhler and Brack in Berlin, and they probably settled all remaining questions about the Chancellery's role in Operation Reinhard. Eventually, T4 men composed almost the entire personnel of the extermination camps of Operation Reinhard. The first group left in April, and further staff members were posted east in June 1942. Altogether, at least ninety T4 men were assigned to Belzec, Sobibor, and Treblinka. Irmfried Eberl, physician-in-charge at Brandenburg and later Bernburg, briefly served as the first commandant of Treblinka, and Christian Wirth served as inspector of all three killing centers of Operation Reinhard.

The killing centers the T4 men ran in the Lublin region were modeled on those they had left in the Reich. But the much larger enterprise created conditions far worse than had existed in Germany. Of course, brutalization and corruption of staff members had also been a by-product

of the euthanasia killing enterprise inside Germany. But at home some restraints upon the killers still operated. Such restraints no longer applied in the East, especially as the sheer numbers of victims overwhelmed the machine of destruction. Sadism, torture, and corruption reached previously unimaginable proportions in Belzec, Sobibor, and Treblinka. An American judge would years later describe one of these camps as a "human abattoir." Even Bouhler worried that "the absolute degradation and brutalization of the people involved" would make the T4 staff assigned to Lublin no longer fit for the job of euthanasia inside the borders of the Reich.

Because the killing task was so massive, Himmler also selected some of his concentration camps to serve as killing centers. He chose the newly established camp at Auschwitz in Upper Silesia and the so-called POW camp at Majdanek, a suburb of Lublin, to perform the killing function. Operating under the authority of the Inspectorate of the Concentration Camps, Auschwitz and Majdanek remained concentration camps while also running a killing center as part of their operation. At Auschwitz, the killing center was located at Birkenau, also known as Auschwitz II. The agent used to kill the victims differed slightly at Auschwitz, where the SS replaced carbon monoxide with hydrogen cyanide, known under the trade name Zyklon B, which was already in use as a pesticide in all concentration camps to fumigate barracks.

In Birkenau, the killing center at Auschwitz, the SS staff improved upon the extermination technique first used in the euthanasia killings. They introduced Zyklon B, which acted faster, and constructed a killing plant combining gas chambers and stationary crematoria in one building. They also identified and selected those still able to work so that they could exploit their labor before killing them.

At Auschwitz-Birkenau, and also at Majdanek, the SS did not need the help of T4 specialists. The T4 technique was a basically simple German invention, one that any organization could learn to use. The concentration camps possessed both the organization and the manpower, as well as a commitment to savage brutality, to execute the killing task. What had started on a relatively [...] ¹

In the postwar world, Auschwitz has come to symbolize genocide in the twentieth century. But Auschwitz was only the last, most perfect Nazi killing center. The entire killing enterprise had started in January 1940 with the murder of the most helpless human beings, institutionalized handicapped patients, had expanded in 1941 to include Jews and Gypsies, and had by 1945 cost the lives of at least 6 million men, women, and children.

¹ Hier bricht der Satz unvermittelt ab → muss ergänzt werden!

BRIEF BIBLIOGRAPHY

Henry Friedlander, *The Origins of Nazi Genocide: From Euthanasia to the Final Solution*, 1995
(In German as *Der Weg zum NS-Genozid*)

Gisela Bock, *Zwangssterilisation im Nationalsozialismus*, 1986

Stephen Jay Gould, *The Mismeasure of Man*, 1981

Raul Hilberg, *The Destruction of the European Jews*, 1961

Michael Kater, *Doctors under Hitler*, 1989

Ernst Klee, *Euthanasie im NS-Staat*, 1983

Sybil Milton, "Gypsies and the Holocaust," *History Teacher*, 1991

Benno Müller-Hill, *Tödliche Wissenschaft*, 1984

