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Abstract

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Keywords

Aktion T4, Nazis, euthanasia, Irmfried Eberl, sterilization, eugenics

Disciplines

Bioethics and Medical Ethics | Disability Studies | History of Science, Technology, and Medicine | Holocaust and Genocide Studies

Comments

Written for HIST 418: Nazism.

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“Life Unworthy of Life”

Aktion T4:

The First Nazi Genocide

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History 418 Nazism

Dr. Bowman

April 21, 2023

Abstract: Though usually viewed as a prelude to the Holocaust, the T4 euthanasia program was a distinct genocide carried out by the Third Reich’s doctors. Allowing themselves to be corrupted by eugenics and Nazi policy, the perpetrators of the Nazi euthanasia killings transformed themselves from healers to murderers. Despite public resistance led by Bishop Clemens von Galen which resulted in the cancellation of the T4 program, Nazi doctors took it upon themselves to continue euthanizing patients until the end of the war, emphasizing the legitimacy that euthanasia had acquired. The history of the T4 program, its perpetrators, and resisters is critical to understanding the crimes committed against disabled people by Nazi Germany.

Before Treblinka, Sobibor, or Chelmno were ever built, over 70,000 physically and mentally handicapped men, women, and children were gassed as part of the Nazi T4 euthanasia¹ program.² While euthanasia, based on eugenic ideas of racial hygiene, was not a distinctly German invention, the Nazis incorporated it into their policies with a brutality and lethality never before seen. The systematic mass murder of disabled and supposedly “unfit” people marked the first, and little remembered, genocide committed by the Nazis. This paper will cover the history of that genocide, evaluate the resistance of the Catholic Church, led by Bishop Clemens von Galen, and ultimately discuss the impact of that resistance on the program itself. Though often presented as a prelude to the Holocaust, Aktion T4 in particular and Nazi euthanasia in general was a genocide in its own right. The T4 program developed policies that allowed doctors to corrupt their own ethics and ideals, created methods of killing and selection that would be used during the Holocaust, and despite substantial public resistance, was so engrained in the medical field that euthanasia continued until the end of the war.

There is some controversy over designating Nazi euthanasia as a genocide. The United Nations defines genocide as:

Any of the following acts committed with the intent to destroy, in whole or in part, a national, ethnic, racial or religious group, as such: a. Killing members of the group; b. Causing serious bodily harm or mental harm to members of the group; c. Deliberately inflicting on the group conditions of life calculated to bring about its physical

¹ The term “euthanasia,” meaning “good death,” is controversial in and of itself due to its euphemistic usage by the Nazis. It is critical that while the Nazi regime viewed these medical killings as “Gnadentode” (mercy killings), we understand that there was nothing necessary nor merciful about these killings. This paper will utilize the word euthanasia with the understanding that it was used as a veneer to legitimize and excuse murder.

² Colin A. Holmes, Margaret McAllister, and Andrew Crowther, “Nurses Writing about Psychiatric Nurses’ Involvement in Killings during the Nazi Era: A Preliminary Discourse Analysis,” *Health and History* 18, no. 2 (2016): 63.
<https://doi.org/10.5401/healthhist.18.2.0063>.

destruction in whole or in part; d. Imposing measures intended to prevent births within the group; e. Forcibly transferring children of the group to another group.³

It is true that the victims of T4 and Nazi euthanasia did not constitute one national, ethnic, racial or religious group. However, people with hereditary mental and physical disabilities were subjected to the same persecution and execution that befell other groups like Jews, Roma and Sinti, and Slavs. Of the five potential acts that qualify as genocide, all but the transfer of children to another group apply to T4 and Nazi euthanasia. In addition to the obvious intent of the Nazi regime to eliminate disabled people as a method of “purifying the Aryan race”, it is clear that Nazi euthanasia can only be excluded from the category of genocide through the narrowest interpretation of the word. Therefore, this paper will argue that the T4 program and Nazi euthanasia deserve to be called the first Nazi genocide.

Aktion T4, named after Tiergartenstrasse 4, the address of its headquarters in Berlin, was a large scale, systematic, and secret euthanasia program in Nazi Germany.⁴ Under the T4 program alone, over 70,000 psychiatric patients from state and private hospitals and asylums were taken to killing centers and murdered.⁵ T4 has come to represent the eugenic policies created by the Nazi regime and though it was technically suspended, later euthanasia killings can be understood as a continuation of T4. This study focuses on the Nazi euthanasia program as a whole, though the discussion on resistance will focus on the T4 program in particular. The historiography of T4 and Nazi euthanasia is embedded in the debates over the designation of euthanasia as a genocide, the corruption and inversion of medical practice, and the character and success of the resistance against it.

³ “Genocide,” United Nations Office on Genocide Prevention and the Responsibility to Protect, accessed April 25, 2023, <https://www.un.org/en/genocideprevention/genocide.shtml>.

⁴ Roderick Stackelberg and Sally Anne Winkle, eds. *The Nazi Germany Sourcebook: an Anthology of Texts* (London: Routledge, 2002), 331.

⁵ Holmes, McAllister, and Crowther, “Nurses Writing about Psychiatric Nurses,” 63.

One of the first historians to tackle T4 and Nazi euthanasia was Robert Lifton who, in his 1986 book, *The Nazi Doctors: Medical Killing and the Psychology of Genocide*, investigated the role doctors played in fulfilling Nazi policy and the psychological transition of the medical field from healing to killing. His concept of “doubling” is central to his work and Lifton argued that doctors created and possessed two contradictory mindsets to allow themselves to both heal people from injury and also commit mass murder.⁶ Lifton identified Auschwitz as the end result of this transition and argued that mass euthanasia was a steppingstone to the Holocaust. By asserting that euthanasia should be acknowledged as part of a larger Nazi genocide, Lifton’s work became foundational to the modern perspective of T4.

In his book, *The Origins of Nazi Genocide from Euthanasia to the Final Solution*, Henry Friedlander revived scholarly interest in the Nazi euthanasia programs by following Lifton’s lead and refocusing it as, “not simply a prologue but the first chapter of Nazi Genocide.”⁷ Building off Lifton, Friedlander powerfully argued that the Nazi euthanasia program deserves to be studied in its own right, rather than as a footnote to the Holocaust. Friedlander’s recommendation has been taken and dozens of books and articles on T4 and the euthanasia program have followed.

Michael Robertson, Astrid Ley, and Edwina Light have supported and strengthened Friedlander’s arguments in their book, *The First into the Dark: The Nazi Persecution of the Disabled*. They assert that “Krankenmorde,” or euthanasia, served as the testing grounds for many of the methods eventually used in the Holocaust. Their work uses the account of Elvira

⁶ Robert Jay Lifton, *The Nazi Doctors: Medical Killing and the Psychology of Genocide* (New York: Basic Books, 1986).

⁷ Henry Friedlander, *The Origins of Nazi Genocide from Euthanasia to the Final Solution*, (Chapel Hill, N.C: University of North Carolina Press, 1995), 10.

Hempel, an eight-year-old “feeble-minded” girl, in particular, who survived selection for the T4 program as a framework to examine the program more in depth.⁸

In addition to telling the stories of the victims of Nazi euthanasia, scholars have also focused on the key actors of the program. Karl Brandt, one of Hitler’s personal doctors and the leader of the T4 program, for example, is a key figure to understanding the warped ethics of euthanasia. Ulf Schmidt argued, in *Karl Brandt The Nazi Doctor: Medicine and Power in the Third Reich*, that Brandt represented an ambitious and educated young elite who rose to prominence with the rise of Nazi party.⁹ However, Schmidt challenged the previous idea that Karl Brandt and the Nazi medical elite were “decent Nazis” who whole heartedly believed that what they were doing was right.¹⁰ Michael Bryant goes even further, dedicating his work to studying how international power politics influenced the way that the perpetrators of the euthanasia programs were punished, or rather escaped punishment.¹¹ Bryant’s work provides crucial context to the history of T4 by showing how the doctors defended the program and exposing how they rationalized their crimes.

Karl Kessler, Lee Hudson, Florian Steger, and Gerrit Hohendorf also built upon Schmidt’s arguments, arguing that the Nazi medical field had allowed itself to be perverted by pseudoscientific methods and practices.¹² While these scholars acknowledge that the field

⁸ Michael Robertson, Astrid Ley, and Edwina Light, *The First into the Dark: The Nazi Persecution of the Disabled* (Sydney, AU: UTS ePRESS, 2019), <http://www.jstor.org/stable/j.ctv1w36p9p>.

⁹ Ulf Schmidt, *Karl Brandt: The Nazi Doctor: Medicine and Power in the Third Reich* (London: Hambledon Continuum, 2007), 4.

¹⁰ Schmidt, *Karl Brandt: The Nazi Doctor*, 6.

¹¹ Michael S. Bryant, *Confronting the “Good Death” Nazi Euthanasia on Trial, 1945-1953* (Boulder, CO: University Press of Colorado, 2005).

¹² Karl Kessler, “Physicians and the Nazi Euthanasia Program,” *International Journal of Mental Health* 36, no. 1 (2007): 4–16. <http://www.jstor.org/stable/41345197>.; Lee Hudson, “From Small Beginnings: The Euthanasia of Children with Disabilities in Nazi Germany: Nazi Euthanasia of Children,” *Journal of Paediatrics and Child Health* 47, no. 8 (2011): 508–11. <https://doi.org/10.1111/j.1440-1754.2010.01977.x>.; Florian Steger, “Günzburg State Hospital and the ‘Aktion T4’—A Systematic Review,” *Neurology, Psychiatry, and Brain*

of eugenics was popular in Europe at the time, they also assert that the Nazi medical field used it to justify their crimes and ignore the Hippocratic oath. Steger mirrors Lifton's earlier arguments too and described this phenomenon as "deindividualization." He argued that Nazi doctors paradoxically viewed euthanasia as beneficial to the community, even though it was actively doing harm.¹³

While the scholarly debates surrounding the role of doctors in the euthanasia programs are in relative agreement, the discussion surrounding the resistance mounted against T4 by Bishop Clemens von Galen is more divided. Bishop von Galen and the Catholic Church's status as resisters against the Nazis has become contested ground. Though Protestant clergy played a part in resistance against T4, the resistance mounted by the Catholic Church has been documented far better and was ultimately more influential, thus the discussion on resistance will be focused on the actions of Catholic figures.

Guenter Lewy's 1964 book, *The Catholic Church and Nazi Germany* presents a balanced, yet uncritical approach to von Galen, claiming that his sermons forced Hitler to "abandon the euthanasia program."¹⁴ While it is true that the T4 program was officially suspended as a result of von Galen's sermons, euthanasia killings continued in secret until the end of the war.¹⁵ Lewy does not, however, shy away from critiquing the inaction of the Catholic Church during the Second World War, stating "that German public opinion and the Church were a force to be reckoned with in principle and could have played a role in the Jewish disaster as well – that is the lesson to be derived from the fate of Hitler's euthanasia

Research 22, no. 2 (2016): 40–45. <https://doi.org/10.1016/j.npbr.2016.01.004>.; Gerrit Hohendorf, "'Death as a Release from suffering'—The History and Ethics of Assisted Dying in Germany Since the End of the 19th Century," *Neurology, Psychiatry, and Brain Research* 22, no. 2 (2016): 56–62. <https://doi.org/10.1016/j.npbr.2016.01.003>.

¹³ Steger, "Günzburg State Hospital," 40.

¹⁴ Guenter Lewy, *The Catholic Church and Nazi Germany*, 1st ed. (New York: McGraw-Hill, 1964).

¹⁵ Hohendorf, "'Death as a Release from suffering'", 59.

program.”¹⁶ Lewy’s objective and detached approach to analyzing the Catholic Church has been challenged by several other scholars in recent years who have sought to either defend the Church or criticize it further.

Michael Burleigh forcefully argued in his book, *Sacred Causes: The Clash of Religion and Politics from the Great War to the War on Terror*, that separation between politics and religion is not only impossible, but immoral.¹⁷ Instead of acknowledging the failures of the Catholic Church and their lackluster resistance against the Nazis’ murderous policies, Burleigh stubbornly defended them. He applauded Bishop von Galen for his fiery sermons against euthanasia and presented him as a heroic figure fighting a battle he could not win, stating, “No protest, no matter how forceful, and no matter how widely known, deflected the Nazis from their self-appointed mission to redeem ‘Aryan’ mankind through the elimination of racial pathogens.”¹⁸ Burleigh’s unapologetic defense of Bishop von Galen constitutes an important perspective to consider, and is undoubtedly a response to other scholars who have sought to reevaluate Bishop von Galen’s position as a major opponent of the Nazi regime.

Beth Griech-Polelle challenged the traditional view of Bishop von Galen as a serious Nazi resister, noting that, “von Galen opposed certain Nazi policies [T4] vehemently, yet he remained in an overall sense loyal to the Nazi state.”¹⁹ Griech-Polelle’s criticism of the legendary status of Bishop von Galen is sharp and questions the effectiveness and character

¹⁶ Lewy, *The Catholic Church and Nazi Germany*, 267.

¹⁷ Michael Burleigh, *Sacred Causes: The Clash of Religion and Politics from the Great War to the War on Terror* (New York, NY: HarperCollins, 2007).

¹⁸ Burleigh, *Sacred Causes*, 229.

¹⁹ Beth A. Griech-Polelle, *Bishop von Galen: German Catholicism and National Socialism*, (New Haven, CT: Yale University Press, 2002), 4-5.; Beth Griech-Polelle, “Image of a Churchman-Resister: Bishop von Galen, the Euthanasia Project and the Sermons of Summer 1941,” *Journal of Contemporary History* 36, no. 1 (2001): 41–57.
<https://doi.org/10.1177/002200940103600102>.

of his resistance. While not denying the important role that Bishop von Galen had in exposing and halting the T4 program, she argued that von Galen acted in order to defend the Catholic Church's position, rather than T4 victims in general.

Friedlander also commented on Catholic resistance and argued that it was not instrumental to the cancelation of T4, stating that "Public knowledge and popular disquiet were thus the principal reasons for Hitler's decision [to end T4]."²⁰ However, some credit must be given to the Catholic Church, and Bishop von Galen in particular, for making the atrocities of T4 more publicly known. Through all four of these perspectives, a clearer image of Bishop von Galen emerges: a man that, like much of the Catholic Church, opposed euthanasia as a point of religious doctrine but otherwise supported the Nazi government. While his sermons railing against T4 were commendable, his selectivity on what he protested prevents Bishop von Galen from being able to fully claim the title of resister.

The present study builds upon Friedlander and Lifton's arguments to form a foundational understanding of the euthanasia program and T4 as the first Nazi genocide. It also adopts aspects of Schmidt and Kessler's perspectives of Karl Brandt and Nazi physicians to understand how medical science was misused to further pseudoscientific and racial goals. This work will also endeavor to uncover how the perpetrators of T4 rationalized and defended their actions through firsthand testimony and accounts. Finally, using Griech-Poelle, Lewy, and Friedlander as models, this paper will investigate the degree to which Bishop von Galen and the Catholic Church resisted T4, and how that resistance impacted the euthanasia programs as a whole.

During the existence of the Nazi regime, euthanasia took place in many forms at many different times. Steger identifies the five main euthanasia programs as such: euthanasia

²⁰ Friedlander, *The Origins of Nazi Genocide*, 111.

of children, the killing of psychiatric patients by the SS in East and West Prussia, the T4 campaign, the gassing of prisoners unable to work referred to as Aktion 14f13, and the intentional killing by malnutrition and injections in occupied eastern regions from 1942 to the end of the war.²¹ There is considerable overlap between each of these programs, but this paper will primarily examine the T4 program while also touching on the euthanasia of children and “wild euthanasia” that took place from the end of T4 to the conclusion of the war.

The complete history of eugenics in Germany is beyond the scope of this paper, though a basic understanding is necessary to understand how Aktion T4 came into existence. Based on eugenics, a pseudoscientific movement focused on “improving” future generations of humans through selective breeding, a system of involuntary sterilizations was put into place by the Nazis in 1933 which would ultimately sterilize around 300,000 physically and mentally “unfit” people.²² This law was intentionally vague, listing “mental deficiency from birth,” and “serious hereditary physical deformation,”²³ as acceptable reasons for sterilization. Once people were sentenced to be sterilized by the doctors and court, the law made it clear that, “sterilization... must be carried out even against the will of the person to be sterilized.”²⁴ The law even gave physicians the power to request police assistance and employ “direct force” when necessary.²⁵ These involuntary sterilization policies were not unique to Germany, as they were utilized throughout the western world, especially in the

²¹ Steger, “Günzburg State Hospital,” 41.

²² Lifton, *The Nazi Doctors*, 27.

²³ “Law for the Prevention of Genetically Diseased Offspring, 14 July 1933,” in *The Nazi Germany Sourcebook: An Anthology of Texts*, eds. Roderick Stackelberg and Sally Anne Winkle (London: Routledge, 2002), 154.

²⁴ “Law for the Prevention of Genetically Diseased Offspring, 14 July 1933,” 155.

²⁵ “Law for the Prevention of Genetically Diseased Offspring, 14 July 1933,” 155.

United States.²⁶ This policy of forced sterilization, however, helped acclimate the German medical field to eugenic beliefs and would ultimately make the transition to euthanasia easier. As Lifton states, “only in Nazi Germany was sterilization a forerunner of mass murder.”²⁷

During the winter of 1938-1939, a request for euthanasia arrived on Adolf Hitler’s desk, sent by a father asking for permission to euthanize his disabled newborn. Hitler dispatched Karl Brandt, his trusted doctor, to evaluate the condition of the child and report back. Brandt inspected the child and concurred with the other doctors present that the child should be euthanized. Hitler approved Brandt’s decision and the unnamed child was killed, becoming the first victim of a euthanasia movement that would kill hundreds of thousands.²⁸ A few months later, Aktion T4 was officially created. The order, backdated to September 1, 1939, and signed by Hitler himself, was astonishingly short:

Reichsleiter [Philipp] Bouhler and Dr. [Karl] Brandt, M.D. are charged with the responsibility of enlarging the authority of certain physicians to be designated by name in such a manner that persons who, according to human judgement, are incurable can, upon a most careful diagnosis of their condition, be accorded a mercy death.²⁹

The language of the order is purposefully vague, giving immense authority to Reichsleiter Bouhler and Karl Brandt to carry out euthanasia. Compared to the earlier sterilization campaign, the T4 program had no guidelines, few restrictions, and little oversight on who was killed. It simply gave doctors the authority to order a “mercy death” based on their own

²⁶ For further information on the history of sterilization and eugenics in the United States, consult *Breeding Contempt: The History of Coerced Sterilization in the United States* by Mark Largent (New Brunswick, N.J: Rutgers University Press, 2008).

²⁷ Lifton, *The Nazi Doctors*, 22.

²⁸ Susan Benedict, Linda Shields, and Alison J. O’Donnell, “Children’s ‘Euthanasia’ in Nazi Germany,” *Journal of Pediatric Nursing* 24, no. 6 (2009): 507–508.

<https://doi.org/10.1016/j.pedn.2008.07.012>.

²⁹ “Hitler’s authorization of the killing of the incurably ill,” in *The Nazi Germany Sourcebook: An Anthology of Texts*, ed. Roderick Stackelberg and Sally Anne Winkle (London: Routledge, 2002), 332.

judgment. Unlike the Holocaust, which infamously lacks a document showing a direct order from Hitler to commit it, Aktion T4 was not only known to Hitler, but directly ordered and authorized by him.³⁰

Even before the T4 program took place, the German medical field was generally supportive of euthanasia. During Brandt's investigation into the child who would become the first victim of Nazi euthanasia, the local doctors "seem to have agreed to kill the child, although they knew that Brandt's instructions were illegal."³¹ This is significant, because these doctors knew that what Brandt was advocating for was against the law, yet not only did they not oppose him, they also agreed with him. Kessler argues this willingness to believe in eugenics was because it coincided with the idea of the "racial state" that Hitler sought to create.³² The Nazis presented euthanasia as a way to purify the "Volk" by culling those with disabilities, putting the community above the individual. This "deindividualization" resulted in the dehumanization of patients and helped T4 doctors decide whether to kill or spare them based on economic factors.³³ In the years preceding the T4 program, Karl Binding and Alfred Hoche published an influential paper, "Permitting the destruction of life unworthy of life" which argued that incurable patients were "mentally dead" and should be killed.³⁴ The arguments made in the paper were persuasive to many doctors of the time, and were unofficially adopted by the Nazi government as the justification for euthanasia. When the

³⁰ It is important to note that the lack of a document explicitly ordering the Holocaust does not mean that it was not ordered, or that Hitler was unaware of it. The historiographical debate over the absence of this document is vast and heavily contested. Lucy Dawidowicz provides several compelling arguments on this topic in her book, *The War Against the Jews* (New York, 1975), 150-166.

³¹ Schmidt, *Karl Brandt: The Nazi Doctor*, 120.

³² Karl Kessler, "Physicians and the Nazi Euthanasia Program," 9.

³³ Steger, "Günzburg State Hospital," 40.

³⁴ Hohendorf, "Death as a Release from suffering," 57.

Nazi regime began to assert their control over German society, the medical field fell into line with a surprising amount of zeal, with many embracing the eugenic policies of the Nazis.

During the “Gleichschaltung” or “coordination” that the Nazi government undertook to assert control in all professions “there was widespread ‘voluntary *Gleichschaltung*,’”³⁵ in the medical field. Forty-five percent of all physicians were card-carrying Nazis, the highest percentage out of any profession, and seven percent of all physicians became members of the SS.³⁶ While some coercion had occurred during the “Gleichschaltung,” all the doctors and staff recruited for T4 joined voluntarily and with the knowledge of what the program sought to achieve.³⁷ The candidates for the T4 program were vetted thoroughly and only dependable Nazi doctors were invited to join the program, ensuring that few, if any would refuse to participate. Not every physician who joined was young and impressionable, and many respectable professors, institutional directors, physicians, and psychiatrists willingly took part in the killing, bringing a veneer of legitimacy to the program.³⁸ Even those in the medical field who disagreed with the killing program did little to oppose it. Gottfried Ewald, the chair of psychiatry at Göttingen and the head of the Göttingen University Clinic and local hospital pragmatically opposed the T4 program on the grounds that it was “unnecessary and potentially divisive,” but he did nothing to prevent his own patients from being taken and killed.³⁹

Unlike the sterilization program that predated it, Aktion T4 was meant to be a secret initiative. Like concentration and death camps, each T4 killing center was designed for secrecy and each had its own police force and kept its own statistics. The entire staff was also

³⁵ Lifton, *The Nazi Doctors*, 34.

³⁶ Karl Kessler, “Physicians and the Nazi Euthanasia Program,” 4.

³⁷ Friedlander, *The Origins of Nazi Genocide*, 69.

³⁸ Friedlander, *The Origins of Nazi Genocide*, 77-78.

³⁹ Friedlander, *The Origins of Nazi Genocide*, 78.

forced to give an oath of secrecy.⁴⁰ Aktion T4, along with the accompanying child euthanasia program, were not merely an initiative undertaken by zealous doctors, but incorporated the state bureaucracy, police, Gestapo, SS, and Hitler himself. In fact, the system was so intertwined with the police that “the Kripo [Criminal Police] would provide the medication that would be used by physicians in the killing wards as a poison to kill handicapped children and later also handicapped adults.”⁴¹

In addition, the killing procedure was disguised on many levels. Victims would be taken to killing centers in fake ambulances and busses before being herded into gas chambers disguised as showers. Once the patients had succumbed to the gas, they would be cremated and a fake death notice with a falsified cause of death was created. The notice and an urn of random ashes taken from the crematorium was then sent to the family of the victim.⁴² This web of deception and concealment was horribly ineffective, and the families of victims began asking questions almost as soon as the T4 program had begun, though it would take some time for a concerted resistance effort to emerge.

⁴⁰ Friedlander, *The Origins of Nazi Genocide*, 99.

⁴¹ Friedlander, *The Origins of Nazi Genocide*, 54.

⁴² Robertson, Ley, and Light, *The First into the Dark*, 42.



FIGURE 10 The *Aktion T4* killing centres in Nazi Germany and Austria 1939–1941 in their present day locations

Figure 1: Map of Aktion T4 Killing Centers in Robertson, Ley, and Light, *The First into the Dark*, 44. This map shows the locations of the six largest killing centers used during Aktion T4, of which only four were operational at any given time. However, other facilities were used to kill patients during and after T4's existence.

The doctors, nurses, and other personnel involved in the T4 program may not seem any different than the Nazis who perpetrated the Holocaust, yet there is a fundamental difference. The medical personnel who took part in the selection and killing of disabled people were supposed to be healers and caretakers, but they allowed themselves to be corrupted and transformed into mass murderers. Karl Brandt serves as a potent example of this inversion of medical practice and though he was often viewed as a “true believer” of euthanasia as a treatment for the incurable, his actions speak otherwise.

One of the most controversial and complex figures of the T4 program was one of the plenipotentiaries of the program, Karl Brandt himself. Brandt was a young, yet well qualified and experienced surgeon when Hitler came to power and had trained extensively with advocates of euthanasia.⁴³ After becoming Hitler's escort physician in June 1934, Brandt steadily rose in Hitler's entourage before being assigned as one of the two leaders of the T4 program, alongside Reichsleiter Bouhler. Brandt represents the ideology of euthanasia and can be used as a case study in how euthanasia doctors managed to invert their role as healers.

Turning away from the idea that doctors were meant to do everything possible to keep their patients alive, Brandt believed that "delivering the patient from pain at all costs was the doctor's task, even if it resulted in the patient's death."⁴⁴ Brandt used the excuse that he was "delivering" patients from suffering as justification for killing them. In his final statement at the Nuremberg Trials Brandt stated:

I am fully conscious that when I said 'Yes' to euthanasia I did so with the deepest conviction, just as it is my conviction today, that it was right. Death can mean deliverance. Death is life - just as much as birth. It was never meant to be murder. I bear a burden, but it is not the burden of crime.⁴⁵

Brandt's language is unapologetic and clear, he claims to have viewed euthanasia as the right thing to do. However, there is an inherent contradiction present in his reasoning, exemplified by his phrase: "Death is life." Brandt argued that euthanasia was a valid treatment for disabled people that would make their life better by ending it. Brandt elaborated on the "burden" he referenced in his final statement in earlier interrogations claiming, "Even these physicians had approached this matter [choosing which patients to kill] for oneself and I can

⁴³ Schmidt, *Karl Brandt: The Nazi Doctor*, 38.

⁴⁴ Schmidt, *Karl Brandt: The Nazi Doctor*, 7.

⁴⁵ Nuernberg Military Tribunals, *Trials of War Criminals Before the Nuernberg Military Tribunals Under Control Council Law No. 10*, vol. 2 (Washington D.C.: U.S. Government Printing Office, 1950), 140, HathiTrust.

say that it is a huge burden for everybody, and every physician can be happy who has been spared this burden.”⁴⁶ Not only does Brandt frame euthanasia as a cure, but he claims that the ones who had to suffer from it were the doctors who carried it out, not their victims. Once again, Brandt displayed the backwards ethics characteristic of euthanasia doctors by implying that doctors were the real victims of the program.



Figure 2: *Neues Volk*, “60000RM kostet dieser Erbkrankte die Volksgemeinschaft auf Lebenszeit,” United States Holocaust Memorial Museum Holocaust Encyclopedia, accessed March 26, 2023, <https://encyclopedia.ushmm.org/content/en/photo/poster-promoting-the-nazi-monthly-publication-neues-volk>. This cover translates roughly to: “This hereditary sick man will cost the national community 60,000 RM (Reichsmarks) over his lifetime. Comrade,

⁴⁶ “Testimony of Karl Brandt,” Karl Brandt, *Interrogator's Summary, Interrogation Records Prepared for War Crimes Proceedings at Nuernberg, 1945-1947, Interrogations, Summaries of Interrogations, and Related Records, 1945-1946* Microfilm Roll 2. National Archives Collection of World War II War Crimes Records, Record Group 238. National Archives at College Park, MD. <https://www.fold3.com/image/231902039>, 87.

that is also your money. Read Neues Volk, the monthly booklet of the NSDAP's Racial Policy Office.”

During his interrogation at the Nuremberg Trials, Brandt answered the question of why he had decided to support euthanasia by explaining, “I took the clearly human point of view, and that is the point of view that here the life of an incurable person should be shortened.”⁴⁷ Despite his implication that only incurable people should be killed, Brandt's actions during the T4 program do not reflect this mindset. At a meeting in March 1941, Brandt and Bouhler expanded the pool of patients eligible for euthanasia to include all patients who were incapable of working, not just ones who were considered “mentally dead.” Despite Brandt's assertions that the T4 program was meant to relieve the suffering of the incurable, it is clear that T4 was focused more on eliminating “useless eaters” and burdens on society.⁴⁸

Florian Steger, in his investigation into Günzburg State Hospital's involvement in the T4 program, also argues that the economic potential of a patient was the defining factor of whether they were killed or spared. Steger states, “Other important criteria were the labor ability or labor willingness, the physical strength and the patient's behavior. The labor ability was documented for 168 patients... 80.4% were considered unable to work.”⁴⁹ Naturally the patients who were unable to work were prime targets for T4 and were killed first, revealing the underlying economic reasoning for the program.

Aktion T4 targeted disabled people housed not only in state hospitals and asylums, but also religiously affiliated ones. Both the Catholic Church and several Protestant Churches opposed euthanasia as a point of religious doctrine and several religious officials opposed the

⁴⁷ “Testimony of Karl Brandt,” Karl Brandt, *Interrogator's Summary*, 69.

⁴⁸ Schmidt, *Karl Brandt: The Nazi Doctor*, 155-156.

⁴⁹ Steger, “Günzburg State Hospital,” 42.

transfer of their patients to T4 killing centers, often with little success.⁵⁰ When Catholic resistance finally gathered steam in the summer of 1941, they opposed euthanasia on three main grounds: moral, legal, and religious. These three arguments are central to the famous sermon delivered by Bishop von Galen and the letter written by Bishop Antonius Hilfrich to the Reich Minister of Justice, Franz Gürtner, on August 13, 1941. However, despite the ferocity of their resistance, they never crossed the line into outright opposition of the Nazi state and “never once incited Catholics to do more than remain selectively steadfast in their Catholic beliefs.”⁵¹

In the summer of 1941 the Bishop of Münster, Clemens August Graf von Galen, became the face of resistance to Aktion T4. He delivered three public sermons attacking Nazi actions, culminating with his sermon on August 3, 1941 where he denounced Aktion T4 claiming that it was created to “kill innocent people if one considered their lives no longer of any value for the nation and the state.”⁵² Bishop von Galen quickly honed in on and criticized the economic justification for killing, directly questioning its ethics: “Have you, have I, the right to live only as long as we are recognized by others as productive?”⁵³ While the Nazis claimed that those with physical and mental disabilities were an unnecessary economic burden upon the Reich, Bishop von Galen made the moral case that they deserve to be alive, even if they were not productive.

Bishop von Galen bent nationalism to his purposes, lamenting, “If one may forcibly eliminate unproductive humans, then woe to our brave soldiers who return home seriously

⁵⁰ Peter Hoffman, *Behind Valkyrie: German Resistance to Hitler, Documents* (Montreal: McGill-Queen's University Press, 2011), 212.

⁵¹ Griech-Poelle, *Bishop von Galen*, 60.

⁵² Clemens August Graf von Galen, “Sermon by Bishop Clemens August Graf von Galen in St Lambert’s Church, Münster, 3 August 1941,” in *Behind Valkyrie: German Resistance to Hitler, Documents*, ed. Peter Hoffman (Montreal: McGill-Queen’s University Press, 2011), 216.

⁵³ Galen, “Sermon by Bishop,” 218.

wounded in war, as cripples, as invalids!”⁵⁴ Bishop von Galen’s inference that veterans of the German army could become victims to the German state after they had fought hard on its behalf was powerful and was one of his most salient points. Lewy remarks that Bishop von Galen’s warning about the threat of death to seriously wounded soldiers “spread like wildfire” and copies of Bishop von Galen’s sermons were sent out to the soldiers at the front.⁵⁵ This contributed to the outrage at the moral implications of euthanasia, but also confirmed Bishop von Galen’s loyalties and patriotic feelings.

Bishop Hilfrich also leaned into the moral argument against euthanasia in his letter and recalled how the citizens of Hadamar would watch buses full of soon-to-be euthanasia victims drive to the killing center there. He then described how the program was impacting the local people, emphasizing how children were being influenced by writing, “School children of the vicinity know this vehicle and say: ‘There comes the murder-box again,’” and “Children call each other names and say, ‘You’re crazy; you’ll be sent to the baking oven in Hadamar.’”⁵⁶ Bishop Hilfrich implied that the euthanasia program was exposing children to the horrors of mass murder and instilling in them a callous disregard for human life.

In addition to laying out the moral case against euthanasia Bishop von Galen brought up the legal case against it, citing paragraph 211 of the Reich Penal Code which declared that anyone guilty of intentional murder would be punished by death.⁵⁷ This law, also brought up by Bishop Hilfrich, served as the backbone of the Church’s argument that euthanasia was not only morally wrong, but illegal. Bishop Hilfrich stated, “The population cannot grasp that systematic actions are carried out which in accordance with Par. 211 of the German criminal

⁵⁴ Galen, “Sermon by Bishop,” 218.

⁵⁵ Lewy, *The Catholic Church and Nazi Germany*, 265.

⁵⁶ Antonius Hilfrich, “Letter from Bishop of Limberg to the Reich Minister of Justice, 13 August 1941,” in *The Nazi Germany Sourcebook: an Anthology of Texts*, ed. Roderick Stackelberg and Sally Anne Winkle (London: Routledge, 2002), 333.

⁵⁷ Galen, “Sermon by Bishop,” 216.

code are punishable with death!”⁵⁸ Though the Nazis had sidestepped the law before, their claim that euthanasia did not constitute murder was flimsy and both von Galen and Hilfrich exploited that weakness.

Bishop von Galen’s last argument against euthanasia was a religious one. He proclaimed, “Now the fifth commandment: ‘You shall not kill’ is also being set aside and violated under the very eyes of the authorities who are obliged to protect the judicial order of life.”⁵⁹ This is also echoed in the ending of Bishop Hilfrich’s letter where he begged the Reich Minister of Justice to, “prevent further transgressions of the Fifth Commandment of God.”⁶⁰ By accusing the state of breaking God’s commandments as well as their own laws, von Galen and Hilfrich unequivocally denounced the T4 program and demanded it be ended.

However, neither von Galen nor Hilfrich incited their followers to take meaningful action against the T4 program. Instead, Bishop von Galen asked his listeners to “pray for the poor patients who are threatened with death, for our exiled members of orders, for all the destitute, for our soldiers, for our nation, and fatherland and its Führer.”⁶¹ His refusal to oppose the T4 program with more than words is conspicuous, though understandable, and it recontextualizes his resistance. Rather than view Bishop von Galen as a Nazi resister standing up for human rights, he is more accurately described as a defender of the Catholic Church and its institutions. After all, it was not until people from the Provincial Nursing Home Marienthal, in his diocese, were taken that he spoke out against the program, despite that the euthanasia killings were known to Catholic and Lutheran Bishops a year earlier in July of 1940.⁶² Griech-Polelle also points out, “The first two famous sermons had nothing to with

⁵⁸ Hilfrich, “Letter from Bishop of Limberg,” 333.

⁵⁹ Galen, “Sermon by Bishop,” 221.

⁶⁰ Hilfrich, “Letter from Bishop of Limberg,” 333.

⁶¹ Galen, “Sermon by Bishop,” 223.

⁶² Hoffman, *Behind Valkyrie*, 212.

protesting euthanasia,”⁶³ rather von Galen protested the seizure of ecclesiastical property, suggesting that euthanasia was not the central issue to him, but one of many infringements on the Catholic Church’s authority.

It is difficult to determine the exact effect that Bishop von Galen’s sermons and Bishop Hilfrich’s letter, along with the actions of other clergy members, had on the T4 program. In August 1941 Hitler officially suspended the program but the reasons why are contested. Friedlander believes that the Catholic Church was inconsequential to the cancellation of T4, arguing that it was the public unrest caused by the sudden and suspicious deaths of so many people that tipped the scales.⁶⁴ However, Bishop von Galen’s sermons were influential and encouraged many others, like Bishop Hilfrich to speak out, exposing the T4 the program to a wider portion of the public. Thus, while the Catholic Church cannot claim to be solely responsible for ending the T4 program, it deserves credit for accelerating its official suspension. Though Bishop von Galen and Bishop Hilfrich should be applauded for their staunch resistance against Aktion T4, they were still generally supportive of the Nazi regime. Perhaps their greatest failing was, despite proving how influential they were, they did nothing to resist the treatment of the Jews or the Holocaust which followed.

Though the killing centers were shut down in the wake of von Galen’s sermons and public unease, the killing did not end. Instead, doctors sympathetic to the T4 program began to kill patients on their own until the end of the war. As Burleigh states, “However laudable Galen’s intervention... it did not ‘stop’ euthanasia killings.”⁶⁵ Called “wild euthanasia,” hundreds of thousands more were discreetly murdered in facilities across Germany and occupied zones.⁶⁶ Berta Netz, a nurse at the Meseritz-Obrawalde institution for the mentally

⁶³ Griech-Poelle, *Bishop von Galen*, 60.

⁶⁴ Friedlander, *The Origins of Nazi Genocide*, 111.

⁶⁵ Burleigh, *Sacred Causes*, 230.

⁶⁶ Friedlander, *The Origins of Nazi Genocide*, 136.

disabled, located in Posen, Poland, recalled that around the fall of 1942 she first became aware of, and participated in, euthanasia killings.⁶⁷ The date of 1942 here is key, as the T4 program was officially ended in August of 1941. In the Meseritz-Obrwalde facility Netz clearly recalls how disabled children were killed using the same methods used while Aktion T4 was active:

But when the girl receiving this treatment [morphine-scopolamine injections] died after 14 days, of course I came to the conclusion that her death had been caused solely by the injections given to her. Starting in that fall of 1942, adult patients and also children were often moved to the so-called isolation room. Of course in the meantime I realized the purpose of these transfers.⁶⁸

This procedure of gradually killing children with repeated overdoses of morphine-scopolamine was identical to the practices of other T4 and child euthanasia centers all around the Reich.⁶⁹ The small-scale, yet constant killings performed by Netz and her colleagues long after T4 was officially ended implies that the resistance had only succeeded in stopping large scale T4 killing centers.

Netz's testimony also speaks to the degree to which support for euthanasia had become engrained in even lower-ranking medical professionals. When confronted with the question of why she participated in the killings Netz gave the boilerplate excuse that she was simply following orders out of fear of "being sent to a concentration camp or some similar place."⁷⁰ However, Netz was not completely apologetic about her actions and stated:

As a nurse in mental institutions for many years I really did see it [euthanasia] in some respects as a relief that the most seriously ill patients were released from their

⁶⁷ Berta Netz, "Testimony of Nurse Berta Netz, Munich, 1962," in *The Nazi Germany Sourcebook: An Anthology of Texts*, ed. Roderick Stackelberg and Sally Anne Winkle (London: Routledge, 2002), 334.

⁶⁸ Berta Netz, "Testimony of Nurse Berta Netz, Munich, 1962," in *The Nazi Germany Sourcebook*, 334.

⁶⁹ Friedlander, *The Origins of Nazi Genocide*, 54.

⁷⁰ Berta Netz, "Testimony of Nurse Berta Netz, Munich, 1962," in *The Nazi Germany Sourcebook*, 336.

suffering by inducing their deaths. I can also say with a clear conscience that only very seriously ill patients on our station were killed.⁷¹

Netz's attempt to excuse herself of wrongdoing by claiming that only very ill patients were killed contradicts her earlier statements and reveals her surprisingly supportive view towards euthanasia. Though she claimed that it was fear and obedience that motivated her to do her job, Netz's own words hint that she participated partially because she believed in the benefits of euthanasia. This is supported by the work of Holmes, McAllister, and Crowther who identified several commonalities between the post war accounts of nurses who participated in euthanasia. They note that fear of punishment, an expectation of obedience, and belief that they were relieving patients' suffering were common excuses given by nurses as to why they participated.⁷² However, none of these excuses fully answer why nurses continued to perform euthanasia without question long after the T4 program was ended.

The genocidal killings of Nazi euthanasia were atrocities in their own right, but their impact did not end with T4. There was a considerable continuity between T4 and the Holocaust, exemplified by the large overlap of personnel and killing methods between them. It is conspicuous that the first deathcamps were created just months after the cancellation and suspension of the T4 program. With hundreds of euthanasia doctors experienced with operating gas chambers suddenly unable to continue their work, the architects of the Holocaust sought to utilize their skills.

⁷¹ Berta Netz, "Testimony of Nurse Berta Netz, Munich, 1962," in *The Nazi Germany Sourcebook*, 336.

⁷² Holmes, McAllister, and Crowther, "Nurses Writing about Psychiatric Nurses," 69-70.

While describing Operation Reinhard and the creation of the death camps of Belzec, Sobibor, Treblinka, and Chelmno in early 1942, Timothy Snyder remarks that many doctors who had worked under Aktion T4 were brought in to assist. He writes:

The suspension of the ‘euthanasia’ program left a group of policeman and doctors with certain skills but without employment. In October 1941, Globocnik summoned a group of them to the Lublin district to run his planned death facilities for Jews. Some 92 out of the 450 or so men who would serve Globocnik in the task of gassing the Polish Jews had prior experience in the ‘euthanasia’ program.⁷³

Dozens, if not hundreds, of doctors who had previously participated in the T4 program and were experienced with operating the gas chambers that were going to be used on Jews actively chose to continue their participation in mass murder. This suggests, that while some doctors, like Brandt saw themselves as healers and “true believers” in the medical legitimacy of euthanasia, many others fully bought into the racial aspects of Nazism and utilized their medical knowledge to commit horrible crimes. Euthanasia doctors were not only brought in as workers in death camps, but some also actually ran them, as was the case of Irmfried Eberl.

Irmfried Eberl was a trained physician and psychiatrist originally from Austria and, like Brandt, his rise to power was largely due to his connections to the Nazi party. A strong proponent of euthanasia, Eberl became the medical director of the T4 killing center at Brandenburg an der Havel in 1940 and the killing center at Bernburg in 1941,⁷⁴ overseeing the deaths of over 18,000 people.⁷⁵ Experienced in using gas chambers, Eberl was assigned to oversee the construction and operation of Treblinka, finished in July 1942. Snyder remarks

⁷³ Timothy Snyder, “The Nazi Death Factories,” in *Bloodlands: Europe Between Hitler and Stalin*, (New York: Basic Books, 2010), 257.

⁷⁴ Paul Robert Bartrop and Eve Grimm, *Perpetrating the Holocaust: Leaders, Enablers, and Collaborators*, (Santa Barbara, CA: ABC-CLIO, 2019) 79.

⁷⁵ Ciaran Somers, “Irmfried Eberl: Psychiatry and the Third Reich,” *British Journal of Psychiatry* 206, no. 4 (2015): 315, <https://doi.org/10.1192/bjp.bp.114.148783>.

that, “Eberl seemed delighted at his latest assignment. ‘It’s going very well for me,’ he wrote to his wife.”⁷⁶ Eberl’s unmasked enthusiasm for exterminating people is clear and reveals the disturbing nature of some of the former T4 doctors.

Unlike Brandt, who at least claimed that euthanasia was a medical necessity, Eberl had no qualms operating a death camp that killed perfectly healthy people. Eberl was so enthusiastic to kill Jews that he overworked Treblinka’s facilities in order to exceed the death rates of other death camps. Eberl’s men had to resort to shooting Jews on the grounds outside the gas chamber to try to keep up with the stream of victims arriving, and by August 1942 Eberl was removed from his post for incompetence.⁷⁷ While Eberl might be the most egregious example of an overzealous T4 doctor using his skills to participate in the Holocaust, he was not alone. His actions at Treblinka illustrate how the T4 program prepared doctors to make the jump from ostensible medical professionals to unequivocal mass murderers.

The T4 program and Nazi euthanasia left a large impact on Germany after the war. Hundreds of thousands of disabled people had been shot, gassed, poisoned, or starved in the name of improving the national community. Karl Brandt was arrested after the war and stood trial at Nuremberg, continuing to argue that euthanasia had been the right thing to do. He was found guilty of crimes against humanity and was hanged. Irmfried Eberl also faced trial after the war, but hanged himself before he could be convicted.⁷⁸ However, after the Nuremberg Trials, punishments for the perpetrators of Nazi euthanasia and the T4 program were often light or nonexistent.⁷⁹ Bryant begins his book with the 1953 trial of Dr. Alfred Leu, a

⁷⁶ Snyder, “The Nazi Death Factories,” 261.

⁷⁷ Snyder, “The Nazi Death Factories,” 267-268.

⁷⁸ Somers, “Irmfried Eberl: Psychiatry and the Third Reich,” 315.

⁷⁹ Nuernberg Military Tribunals, *Trials of War Criminals*, 198.

participant in the T4 program and “the proven killer of patients at the Sachsenberg mental hospital,” who was acquitted by the court and walked away without punishment.⁸⁰

While the T4 program had been exposed to the public and officially ended in 1941, the euthanasia of children was never halted and continued until the end of the war, resulting in over 5000 deaths.⁸¹ The doctors, nurses, and bureaucrats involved were discreet about their implementation of this unjustified mass murder and the true number of victims is impossible to know. Like other doctors who administered euthanasia in their own clinics “many of those responsible went unpunished and practiced as doctors after the war, some continuing to speak openly in defense of the principles they had practiced.”⁸² Euthanasia had become ingrained in the minds and practices of hundreds of doctors who had taken part in the Nazi program, and one must wonder how many T4 doctors remained at their posts after the war.

In conclusion, Aktion T4 and the broader Nazi euthanasia programs constituted the first Nazi genocide and paved the way for the Holocaust. That many doctors who took part in euthanasia killings during the T4 program later continued their work independently or participated in the Holocaust speaks to the incredible degree to which euthanasia had become accepted in the German medical field. The resistance led by Bishop von Galen had won the battle, but not the war, as they had failed to convince the medical field to abandon the practice of euthanasia. Their opposition against T4 was admirable but did not take the leap into outright resistance against the Nazi state, rather von Galen and the Church fought to retain their autonomy and to assert their religious beliefs.

Nazi euthanasia is a fertile topic for further research and future studies should focus on the postwar stories of the perpetrators. Not only is this an overlooked area in the literature,

⁸⁰ Bryant, *Confronting the “Good Death,”* 2.

⁸¹ Hohendorf, ““Death as a Release from suffering,”” 59.

⁸² Lee Hudson, “From Small Beginnings,” 508.

but it is important to study how the former T4 doctors shaped the fields of medicine and psychiatry post-war. Equally important is the study of survivors of the program, whose perspectives and stories have been neglected and lost. Future scholars should dedicate more time into collecting these first-hand accounts and bringing Nazi euthanasia back into public discourse and awareness. In 2014, a large blue glass wall and information panel were constructed on the former site of T4 in Berlin. This monument, known as the Memorial to the Victims of National Socialist Euthanasia Killings, represents the growing interest and attention that Nazi euthanasia has gained in the past decade, and is a step in the right direction in terms of bringing the victims of euthanasia back into public memory.

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