

## Hitler's Unwanted Children

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*Half a century old, the Holocaust still mocks the idea of civilization and threatens our sense of ourselves as spiritual creatures. Its undiminished impact on human memory leaves wide open the unsettled and unsettling question of why this should be so.*

(Langer, 1994 p. 184)

*The years of disaster have enmeshed all of us in guilt deeply enough, as it is, and the task of the day is to find bridges that will lead us to deeper insight.*

(Mitscherlich and Mielke, 1947, p.151)

Childhood in Nazi Germany was cast in the mythic illusion of a super race. Children who did not meet the social or biological criteria of "perfect" children were removed from their homes and communities, isolated in institutions, hospitals, work and concentration camps, and many thousands were murdered (Aly, 1993; Burleigh, 1994; Friedlander, 1994; Peukert, 1987). It is a myth that only children with severe disabilities were killed or that the killings stopped in 1941; the last child was killed almost a month after the war was over. Unwanted children were orphans, children in care because of emotional or behavior problems, adolescent non-conformists as well as children with physical disabilities or mental handicaps (in addition to Jewish, Gypsy and non-white children). The campaign to remove unwanted children from the community was not only the result of Nazi racial biology and eugenics, it was part and parcel of the effort to impose control and conformity on the entire German population. In a climate of social chaos, economic depression and poverty, the Nazis created an economy of privilege and conflicting spheres of jurisdiction. By persecuting selected groups of people, they were able to establish a system of thought control that reached deeply into family life (Peukert, 1987). Terrorist tactics were used against German families, secret police and the SS were involved in isolating and transporting children to their deaths in psychiatric hospitals and institutions.

The Nazis were expert at the creation of power groups that robbed their opposition of public voice or power. A small tightly knit group of university medical scientists and psychiatrists, who planned and administered the euthanasia killings, dominated university departments, wrote and reviewed articles for one another's journals and never bothered to consult their colleagues. Fewer than 200 physicians participated directly in medical crimes, but several hundreds more were aware of what happening. Under conditions of absolute power, careerism, greed, and arrogance, vulnerable children become victims and once venerable institutions became slaughter houses. Well known schools, hospitals and institutions were changed from places of learning, healing and rehabilitation into work camps, prisons and execution chambers. The claim that German parents approved of the murders of their disabled children is challenged by the hundreds of cases that were brought to courts accusing hospitals and institutions of negligence and causing the deaths of their children. Even during the war, there was so much unrest and so many appeals that in 1941, Hitler intervened with an edict that prohibited parents from bringing charges against hospitals and asylums. In the process of persecuting people with disabilities, one of the finest and most comprehensive system of rehabilitative education in the world was destroyed.

### **Rehabilitative Education in Pre-Hitler Germany**

During the Weimar years, children with a variety of learning and developmental problems were being integrated into community schools long before it became standard policy in North America. When children with mild mental handicaps were routinely being isolated in closed institutions in Britain, the U.S. and Canada, German educators believed that they should be kept with their families, exposed to the world and live and work in the community (Safford & Safford, 1996). Only children with severe and debilitating conditions were sent to institutions in Germany.

Children were kept in their homes and communities by organizing special classes in community schools. These classes were considered transitional and whenever possible children were returned to regular classes (Safford & Safford, 1996). In 1922, there were 1,670 special classes serving 34,300 students in 305 German towns (Becker, 1982). Children who were too weak or too ill to go to school were visited by teachers in their homes.

Community day schools (Hilfschule) served children with more severe developmental disabilities and learning problems. Their purpose was to help them "lead rewarding lives" and not become "a burden on the community" (Becker, 1985, p. 91). In 1927, there were 1,027 Hilfschule located in German cities. The Hilfschule organization (Verband der Hilfschulen Deutschlands), provided one of the first European teacher training programs for special education teachers.

The belief that social deprivation was the cause of delinquency and behavior problems led to the development of community-based guidance centers and treatment programs. August Aichorn, a pioneer educator shared Anna Freud's belief that family life is far superior to life in an institution. Aichorn provided treatment to troubled youth in community settings. He established "Das Rauch Hause" in Hamburg where young people lived in small groups with a counselor. Aichorn's treatment model was copied by other European countries as well as North America (Safford and Safford, 1996).

Education for children with blindness or deafness in Germany existed for more than a century. The first school for deaf children was established in Leipsig in 1778; (Institute for the Mute and other Speech Disordered Persons). In 1806, the first school for blind children was established at Steglitz, near Berlin by Dr. August Zeune. By the 1920's there were schools for blind or deaf children in each of the German states (Lander). Children were usually admitted to residential schools at seven years of age, but many residential schools offered kindergarten programs.

Early childhood education for blind children was established in Germany in 1862, when William Riemer, established the Preschool for the Blind in Hubertsburg, Saxony. Riemer spoke of the importance of early childhood education at the first congress of teachers of the blind in 1873. Germany was one of the first countries in Europe to provide government sponsored public education for very young blind instead of relying upon charities (Lowenfeld, 1981). The government also supported a comprehensive academic secondary that became a gateway to university education for blinded young people. The Carl Strehl School was established in Marburg and had its own braille printing center and braille library (Britz, 1983).

"Open Air Recovery" schools were opened in the 1920s for children recovering from polio (an all too common illness at the time). These schools were built in the mountainous regions and other rural settings (Safford & Safford, 1996). Religious schools, Catholic, Protestant, and Jewish that served children with a variety of disabilities were supported by the government and received state funding.

Educational reform in the Weimar era may not have achieved all that the educational reformers had hoped, but it made significant contributions towards ensuring that all children received an education and emphasized the importance of child development in the preparation of teachers. Under Nazi jurisdiction and leadership comprehensive and inclusive schools disappeared. Teachers who had been proponents of inclusive education were blamed for the social problems that were evident in many German schools.

*"These so-called institutional practitioners" are also wont to say that this comprehensive form of education will cause lower elements to be pulled up by the better elements. Our response to that is to cite the simple fact that one rotten apple can infect all the sound ones around it."* (Nazi official cited by Peukert, 1987, p.231).

## **The Campaign Against The Vulnerable: The Scientific Excuse**

Nazi policy sought justification in a science that was shaped by political priorities and pseudo racial and genetic beliefs (Peukert, 1987). Nazi bioscience and racialism were woven into all aspects of the social, health, and educational policies. Cloaked in the terminology of Social Darwinism and eugenics, the persecution of vulnerable people was justified on the grounds that they threatened the health of the German nation. Social Darwinism and eugenics and its claim that social problems could be solved by preventing people with mental handicaps or psychiatric illnesses from having children had advocates in Europe and North America and led to the involuntary sterilization of people with mental handicaps in 27 states in the U.S. and several Canadian provinces and European countries. In Nazi Germany, eugenics became state policy and a means of population control. Nazi biogenetic concepts also included social usefulness, (the ability to work) and conformity as measures of the worth of a human life and led to the division of entire German population was into two groups, "those who had genetic value" and those "who did not" (Peukert, 1987). The claims of being scientific gave justification to terroristic policies.

*The results of our science had earlier attracted much attention (both support and opposition) in national and international circles. Nevertheless, it will always remain the undying, historic achievement of Adolf Hitler and his followers that they dared to take the first trail blazing and decisive steps towards such brilliant race-hygienic achievement in and for the German people. In so doing, they went beyond the boundaries of purely scientific knowledge. He and his followers were concerned with putting into practice the theories and advances of Nordic race conceptions...the fight against parasitic alien races such as Jews and Gypsies...and preventing the breeding of those with hereditary diseases and those of inferior stock"*

(Ernst Rudin, 1934, The archive of Racial and Social Biology cited in Frei, 1993, p. 122).

Laws and decrees were issued to ensure that only people who could prove their genetic value could marry and produce children. The Law for the Prevention of Progeny of the Genetically Unhealthy (1933) legislated mandatory sterilization of persons with mental handicaps or mental illnesses and the Marriage Law of 1935 prohibited persons

with "hereditary illnesses" to marry. Blindness, deafness, physical disabilities and mental handicaps were designated hereditary illnesses. Social non-conformity, delinquency, and emotional problems were attributed to "inferior genes" Arbitrary criteria such as suspected mental handicap, poor work habits, and delinquency were also used in the system of social selection (Peukert, 1987). Nazi biogenetics served as a powerful means of enforcing conformist social behavior.

### **The Campaign Against the Vulnerable**

In 1934, 181 Genetic Health courts and appellate Genetic Health Courts were created for the sole purpose of enforcing Nazi health laws and decrees (Peukert, 1987). These courts were attached to local civil courts and presided over by two physicians and a lawyer. All physicians were required to register every case of genetic pathology with the courts and failure to do so was punishable. The reports were filed in specially created data banks (Burleigh, 1994).

Public health officials, teachers, and social workers were also required to report children suspected of having a disability or emotional problem. The search for people with hereditary illnesses was relentless; every large institution became a regional catchment area and sent officials to the homes of every person reported to have a hereditary illness (Burleigh, 1994). When no genetic cause for a condition could be found, the term "congenital" was substituted for "hereditary."

Consistent with all other forms of Nazi persecution, the campaign to eliminate everyone with a mental handicap or physical disability was intense. Hitler himself was deeply involved in the plan that culminated in the murder of children and adults with disabilities. Hitler ordered the making of propaganda films to persuade the public of the necessity of eliminating people with genetic defects. The film "*Victims of the Past*" was made on Hitler's explicit orders and he made sure the film was shown in Germany's 5,300 cinemas. Special lighting effects distorted features so that people with disabilities were

portrayed as grotesque and could only survive at the expense of healthy people (Doino, 1995). Propaganda films reveal how much the Nazis condemned those who they regarded as socially or politically unacceptable.

### **The Economics of Exclusion**

The destruction of schools and the impoverishment of residential facilities, institutions and asylums diverted money to new children's hospitals, free summer camps and other benefits that helped to convince the German public that the Nazis had their best interests at heart (Aly, 1993). Generous family allowances and public health care was provided from monies taken from special schools and institutions, welfare agencies, health insurance, guardianship courts, municipalities, private charities, and from families with children who had any type of disability (Aly, 1993). Beginning in 1941, families with children with disabilities were denied family allowances and often had to pay the funeral expenses of their murdered children (Burleigh, 1994).

Dr. Ernst Wentzler, one of the chief architects of the children's killing program, built a modern children's clinic in Berlin with funds appropriated from Catholic Sisters who looked after children with mental handicaps (Aly, 1993). Wentzler was not ignorant about the emotional needs of children and planned his clinic in consultation with pre-school teachers and decorated the rooms in pastel colors. Wentzler, one of the key architects of child murder, killed unwanted children in his Berlin clinic (Aly, 1993).

*"Expropriation from 'enemies of the state and destruction of unusable people were both preconditions and complementary elements of the new, cheery, reformed German children's hospital" (Aly, 1993, p. 186).*

## **Community Aliens**

Non-conformist behavior was an important criterion for exclusion and removal from the community. Considerable sections of young people held themselves aloof from what National Socialism had to offer. At the very moment when the Hitler Youth established itself as a compulsory service, it came up against the apathy and rejection by many young people who were persistent in passive or active insubordination. The greater the demand for conformity, the more attractive alternative social groups became. Rebellious youth groups offered meaningful social identities and cultural expressions to young people between the ages of 14 and 18 years of both working and middle class backgrounds (Peukert, 1987). By the end of the 1930s, thousands of young people were refusing to participate in Nazi youth groups. The largest groups were the "Edelweiss Pirates" and the "Swing Movement".

The Edelweiss Pirates were adolescent boys from working class families, who refused to submit to the massive pressure of the Hitler Youth and created their own cultural forms and modes of action which made it possible for them to create a meaningful attitude to everyday life and repudiate National Socialist society. Through their dress and demeanor they emphasized their differences and even provoked public fights with Nazi youth gangs. An armory of repressive measures were brought against them, they were imprisoned or placed in reform schools, labor and youth concentration camps (Peukert, 1987).

The "Swing Movement", appealed to adolescents from wealthy or middle class homes. The swing boys and girls were apolitical; they had money to spend on clothes and nightclubs where they indulged their love of "jitterbugging" and American Jazz. The swing movement was informal and Swing Clubs sprang up in the bigger cities. Members preferred casual dress and let their hair grow, they admitted Jewish youth and refused to join Nazi youth activities. The swing groups outraged Himmler, who ordered them to be rounded up and sent to the Moeringen concentration camp near Goettingen (Peukert,



1987). In 1944, there were 1,231 adolescents in the Moeringen Youth Protection Camp and very few were released. Those who reached their 18th birthday in the camp were sent to psychiatric hospitals and many were victims of "euthanasia" (Peukert, 1987).

In addition to non-conformist youth, troubled children and young people who posed problems to the authorities by running away, or committing delinquent acts were designated "Community Aliens". The "Law on the Treatment of Community Aliens" was put into effect in 1940 and authorized keeping young people under surveillance, putting them in prison or sending them to work camps. (Peukert, 1987).

*"In a self accelerating process in which morality was progressively discarded, the scholars followed the direction of their ideas with fatal consequences: from the approximately 360,000 compulsory sterilizations...to the mass murders of an ever widening euthanasia programme, behind which the monstrous contours of a Final Solution of the social question were beginning to emerge" (Frei, p. 122.).*

The laws and regulations governing the treatment of "unwanted" children were enforced by all- powerful special authorities appointed by and responsible only to Hitler. These authorities replaced and circumvented traditional local government agencies. As a result there was constant conflict between administrative agencies and increasing chaos and rivalry which led to a growing reliance on extreme measures (Peukert, 1987). Control over the educational system was given high priority as a way of controlling and bringing young people into conformity with the aspirations of the Reich.

## Schools Under the Nazis

Schools were a primary target for control and their administration was placed in the hands of the party faithful. By 1938, the German school system was brought under the total control of the central government and removed from the jurisdiction of the individual states or Lander (Huebner, 1962). Bernard Rust, an unemployed school teacher, was appointed Minister of Education. (Mayer, 1966). Rust had been dismissed from the school system for unprofessional conduct during the Weimar period (Mayer, 1966). The entire educational system was politicized, but primary and special schools received the most attention, secondary schools reached only about a quarter of German students and were more difficult to change (Mayer, 1966).

New textbooks and curriculum guides were full of Nazi propaganda, hateful racist stereotypes and myths of Aryan superiority (Mosse, 1966). Fuehrer worship was encouraged and even traditional fairy tales were rewritten to portray Hitler as the hero-rescuer. In "Sleeping Beauty" it was Hitler, not the prince, who awakened the princess. The works of the poet Heinrich Heine were banned, except for his classic poem "The Lorelei" which appeared with the note "author unknown" (Mosse, 1966).

Almost every single reform made during the Weimar Republic was abolished along with provisions for educational opportunities for disadvantaged and disabled children (Peukert, 1991). Comprehensive schools that included classes for children with learning problems were closed, parent-teacher associations were made powerless, corporal punishment was reintroduced and progressive teaching methods were discouraged. Early childhood and kindergarten systems were also brought under government control and church and privately sponsored kindergartens were banned. The Froebel Association which pioneered early childhood education in Germany was forced to disband (Tietze, Rossback and Ufemann, 1989). It was a common sight to see three year olds marching and waving flags in a military parade.

Famous private schools, like the Waldorf School, known for humanist and progressive policies were closed. The first Waldorf School was established in Stuttgart in 1919 and the many Waldorf schools established in other European countries and North America were modeled after the school in Stuttgart. The school was closed in 1935 (Murphy, 1991).

*"Always a thorn in the side of the Nazis, the Waldorf school was harassed and plagued by constant injunctions. Soon the existence of the first grade was forbidden, in an attempt to throttle the school from below. When this proved too slow, the authorities closed down the school completely" (Murphy, 1991, p.166).*

Church schools were taken over by the state despite the protests of Catholic parents who fought against making all schools non-denominational. Public meetings were held to give the appearance of consultation, but dissent and protest were ignored. Parents who did not attend the meetings were counted as supporters (Huebner,1962; Miklem,1939; Mosse,1966; Peukert, 1987).

*"In the years of its rise the movement little by little brought the community's attitude toward the teacher around from respect and envy to resentment, from trust to suspicion. The development seems to have been inherent; it needed no planning and had none. As the Nazi emphasis on nonintellectual virtues (patriotism, loyalty, duty, purity, labor, simplicity, "blood", "folkishness") seeped through Germany, elevating the self esteem of the "little man", the academic profession was pushed from the very center to the very periphery of society. (Mayer, p.112, 1955).*

Teaching, once a highly respected profession in Germany had little status in Hitler's Germany. Educators who were pioneers in rehabilitative education were carefully screened to ensure they followed the new policies. Traditional teacher organizations (including special education teachers) were disbanded and replaced by Nazi associations. Teachers were employees of the state, civil servants, who like other state employees had to prove they were "Aryans" and submit a table of their ancestors Miklem, ). The secret police made sure that teachers obeyed the new regulations and did not express criticism or

personal opinions on public policies. They were ready and willing to listen to children's reports and many teachers found themselves at the mercy of children's spitefulness and misunderstanding (Bollnow,1987). In some jurisdictions all teachers were required to join the Nazi party in order to maintain their positions. Another blow to the teaching profession was the abolition of professional chairs of education at the universities. During the Nazi era there was little educational research (Bollnow,1987). For many years after the war, young people avoided the teaching profession because they believed that acts of intellectual autonomy lead to conflict with school administrators and government (Bollnow, 1987).

Schools began to face a severe shortage of qualified teachers with the military draft and beginning of the war. Untrained helpers were brought in to substitute for qualified teachers; school helpers ( as they were called) were only required to have completed intermediate schools; most were not graduates of secondary schools (Samuel and Thomas, 1949).

Social control was exercised through the free recreational afterschool programs and Nazi youth groups. Reverence for the Fuehrer and Fatherland, obedience and conformity were enforced and many parents were uncomfortable with the way their children were being indoctrinated. Many parents considered that Nazi youth activities undermined their authority and encouraged defiance. Youth activities were given preference over family and church activities. Disagreements, conflict, misunderstanding and even open enmity between children and parents were not uncommon (Mosse,1966).

By 1938, public protest was punishable and parents who opposed the new order had to resign themselves to their children's participation (Oestreich, 1947; Miklem, 1939). Membership in a Nazi youth group was necessary to qualify for apprenticeships or admission to universities and technical schools (Mosse, 1966). No child with a disability was able to participate in a recreational programs. As schools were reorganized, special

classes were eliminated and the comprehensive system of rehabilitative education that was far in advance of that in most other countries was shattered.

### **Rehabilitative Education Under the Nazis**

Comprehensive schools, special classes, and treatment programs were viewed by the new educational authorities as the "debris of the past." "a waste of money" (Peukert, 1987). Almost as soon as the Nazis came to power, the number of day and residential schools were reduced and special classes in community schools were disbanded. By 1941, the day schools for children with learning problems and mental handicaps had almost disappeared entirely and those that remained had become training centers for streetsweepers, domestic workers and garbage collectors (Becker, 1985). The remaining special schools were deprived of funds at the same time as they had to register an increasing number of students (Mochel, 1981).

Standards of care in residential schools and institutions rapidly deteriorated, state inspections became perfunctory or suspended entirely and Jewish children were expelled (Burleigh, 1994; Friedlander, 1994). Gustaf Leeman, an unemployed school teacher ( and a "party reliable"), was appointed leader of the newly formed association of special education teachers. Leeman relentlessly carried out state biogenetic policies. Special education teachers were required to deliver their students for sterilization procedures. No one with a mental handicap was allowed to live or work in the community without first submitting to sterilization (Burleigh, 1994).

Teachers and administrators were required to write detailed reports on each of their students and describe their work abilities. Students who could not or would not perform the arduous and physically demanding labor were expelled from day schools. Teachers who disagreed with the new policies left the profession (Becker, 1985)

In order to remain in a day school, students were required to pass state intelligence tests which were tests of acquired knowledge, not innate ability (Burleigh, 1994;

Friedlander,1994). The tests measured knowledge of geography and history, which many students in regular schools could not answer. In addition, to ensure that as few children as possible could pass the tests, they were made increasingly difficult for those who were able to provide correct answers to standard questions ( Burleigh, 1994). Several of the psychiatrists who were involved in the planning and administering of the euthanasia (killing) programs admitted that many normal children would not be able to provide correct answers to the questions on the revised tests (Aly, 1994; Burleigh, 1994). Some teachers tried to protect their students by teaching them the answers to test questions (Burleigh, 1994).

Children who did not pass the tests were classified as "severely mentally handicapped" or "feebleminded" and were transferred to designated state institutions or psychiatric hospitals. The nurses and attendants at the state institutions observed newly arriving children who spoke fluently, talked about their lives and their family members. These observations did not prevent them from being described as "hopeless cases" despite the fact that many children were capable of reading and writing. Reports on expelled students contained comments such as "child does not know his arithmetic, he can only add", or "child can only read simple sentences" (Aly, 1993).

### **Residential Schools For Children who were Blind or Deaf**

Blindness and deafness were regarded as "hereditary illnesses" whether or not they were caused by a genetic condition. Children who were under five years of age when the Nazis came to power were sent directly to state institutions. Deafness is more difficult to detect at birth, but as soon as it became apparent, the child was registered by the genetic health court and reported to the authorities. Pre-school programs for blind or deaf children were eliminated.

Long established residential schools faced an increasing number of social and economic restraints and like .other residential schools, schools for blind or deaf students

faced sharply reduced budgets and increased populations. Many residential schools were closed, Jewish students were expelled and Jewish teachers were discharged. (Some of the schools had been established by Jewish educators). The institute for the deaf in Camberg and the school for the blind in Wiesbaden were the first to be closed. In some jurisdictions blind or deaf students were subject to sterilization procedures and vocational training was stressed.

Most teachers at residential schools for blind or deaf students were men who were obliged to serve in the military, resulting in an acute teacher shortage and school closures. When schools were closed, their buildings were sold or leased to youth organizations (Burleigh, 1994). As the war progressed, almost all residential schools located in the bigger cities were closed. A teacher for the deaf brought his students to his home, where they worked with him on a farm for the duration of the war (Loewe, 1996).

### **Schools for Children with Mental Handicaps**

No group of children were as vulnerable to abuse as children with mental handicaps. Gregor Ziemer, the American director of the international school for children of diplomats, described a school for mentally handicapped boys. The "Erbhof", a hereditary estate, near Leipsig was a residential school for boys with mental handicaps and was guarded by a stormtrooper.

*"Inside the wall I saw buildings in an open square, but no agricultural activities, and no animals. It was noon; all noise seemed to come from one building. We entered it. At long tables, clean but without tablecloths, sat about a hundred boys from seven to ten, dressed in blue slacks and loose jackets."*  
(Ziemer, 1941 p.78)

The grim atmosphere of the school made a deep impression on Ziemer. As he sat watching the sad faced boys, Abels, a Nazi public health official, explained that the boys were kept alive until they were ten years old. Those who could become street cleaners or do other jobs were put to work. The others were killed in the Hitler Kammer (Hitler

Chamber), a small detached hut on the school grounds that contained a single bed and a medicine chest (Ziemer, 1941).

Most of the residential schools that were administered by Catholic orders or Protestant church groups were closed and their students transferred to state institutions. The only religious schools that remained in operation were located in rural areas.

*"As in all other phases of life, so in the sphere of charitable activity, all true love, all reverence, even the awe of death, was ground to dust under the heels of SA and SS boots. (Paul Oestreich, 1947, pp. 92-94).*

### **Juvenile Homes and Treatment Centers**

Nazi biogenetic theory encouraged social welfare workers to attribute everything that went wrong with their programs to the "genetic" faults of the children in their care (Peukert, 1987). Disturbed, delinquent or defiant behavior and all the failures of the social welfare system were blamed on the untreatability of child clients. Child welfare administrators separated the "successful" from the unsuccessful" welfare cases and moved lonely and rejected children out of the welfare system into state institutions and work camps (Peukert, 1987). Most of these children were wards of agencies and wardship courts were often not informed about the transfers of children from orphan homes or treatment facilities, causing a multitude of legal problems, confusion and chaos. Children who were wards of social welfare agencies, like children with physical disabilities or mental handicaps, had no effective protection.

*The halfhearted, even indifferent attitude which at the best was expressed with ineffectual contradiction, constitutes one of the lowest depths to which the judiciary has sink, which demonstrates that it no longer had any independent status in the Nazi state and had finally degenerated to the level of a branch of the NSDAP, as it was then formulated" (Majer, 1994, p.26).*

### **Forced Institutionalization**



It was important to the Nazi state that unwanted children were placed in controlled institutions, where they could be used as slave labor and/or murdered. The murder of mental patients and other people with disabilities served to free hospital beds for wounded soldiers and keep the costs of welfare programs as low as possible. Parents (including those who were members of the Nazi party) were coerced, cajoled and finally forced to institutionalize their children (Burleigh, 1994). Lies and deception combined with regulations and decrees served to ensure that parents committed their children to designated institutions. Other factors were also at work to ensure institutionalization of children. Because families with children with disabilities were deprived of family allowances, many families could not afford to provide the care their children required. Fearing loss of all services, parents committed their children in the belief that they would be better served in an institution than at home without treatment. In addition, the regulation that banned children with any type of disability from treatment in ordinary pediatric hospitals (even for ordinary illnesses) effectively forced parents to institutionalize their children. Public health officials, responsible for enforcing the institutionalization of children with disabilities, persuaded dubious parents with promises that their children would receive the most advanced and expert therapy on open wards ((Heimansberg and Schmidt, 1993).

Parents who refused to put their children into institutions were accused by these same officials of neglecting and depriving their children of needed treatment. Persistent refusal often resulted in threats; parents were told that if they did not institutionalize their children they would lose their guardianship rights (Burleigh, 1994). Single mothers who refused to part with their children found themselves assigned to contractual labor, which in the end, forced them to surrender their children (Freidlander, 1994).

As the war progressed, the numbers of children needing social and welfare services increased and directors of welfare facilities, orphanages and other treatment centers were

strongly advised to transfer children to designated state institutions and psychiatric hospitals, where they were assured the children would receive proper treatment, education and healthy recreational activities (Gallagher, 1990). As soon as children were transferred, they were assigned to work in the kitchens, laundries, and to cleaning and maintenance staff. Children as young as 12 and 13 worked full time for long hours with no pay.

Institutions that had been known for their successful rehabilitation programs like Kalmenof -at -Idstein (in Saxony), an institution founded by enlightened clerics and philanthropic Jewish businessmen, were taken over by the state and transformed into work camps and killing centers. Kalmenof established to serve children with psychiatric illnesses, neurological disabilities or mental handicaps became one of the main child killing centers (Aly, 1993). The director, Dr. Spornhauer was ejected from the grounds by a squad of SS men, while the new director, Dr. Miller, looked on holding a revolver. Jewish doctors and nurses were dismissed and the staff were obliged to belong to Nazi organizations and participate in Nazi celebrations and parades (Burleigh, 1994). Miller immediately increased the numbers of patients and sharply reduced the staff and Kalmenof became nothing more than a work camp. Children who tried to escape were severely punished (Gallagher, 1990).

In most state institutions, the sharply reduced budgets combined with overcrowding created unhealthy and unhygienic conditions. In 1938, Professor Kleist of the University of Frankfurt protested the fact that one physician was responsible for 400 to 500 patients. This meant that children were rarely examined or given therapy or treatment (Burleigh, 1994).

### **Daily Life in State Institutions**

Forced institutionalization and transfer of children from religious and private schools, orphan homes and treatment centers caused massive overcrowding. By 1940, child populations in institutions had doubled or tripled. There were 600 children at

Hadamar on children's wards built for 300 (Burleigh, 1994). The institutions were not prepared for the numbers of children crowding the wards. There were not enough beds and newly admitted children had to sleep on unhygienic straw mattresses. There were not enough wheelchairs or mobility aids and children who were unable to walk were kept in their beds or highchairs or lay on mats on the floor (Friedlander, 1994).

Many of the new nurses and attendants were unsuitable people with little child-care experience. Professional nurses who were active trade union members were dismissed and their places taken by former domestic or farm workers, recruited from the ranks of unemployed members of the SA, Nazi women groups or the League of German Maidens. They had little understanding of the children in their care and grateful for employment, they simply followed orders (Burleigh, 1994). The new staff were assigned to look after so many children that it was impossible to give more than cursory attention to individual children. If a child became ill, he or she was often not treated (Burleigh, 1994).

Malnutrition and hunger were common, the standard diet consisted of turnips, potatoes and a few slices of bread. There was so little food in some institutions that kitchen workers brought food from their homes (Burleigh, 1994). After the war, newly appointed directors found children looking like half corpses (Friedlander, 1994).

Life in the asylums took on a military character, ecclesiastical asylums as well as state institutions reflected the "Führer" and the politicization of institutional life (Burleigh, 1994).

*"At Marieberg on summer evenings, the handicapped pupils marched in neat order through the asylum courtyard and out into the grounds. From there one Hitler song after another rang out until the onset of night put an end to the singing" (Burleigh, 1994, p.51)*

The emotional toll on children was enormous; fear, resistance and rebellion were silenced with drugs, electric shocks, and beatings. Letters from children to their parents have been discovered and tell of their anguish, loneliness and despair.

*Dear Mother,*

*They have brought me here.. Dear Mommy. I do not want to stay with these people. I want to go free. I do not stay here. Please come and get me.*

(translated from German records cited in 30.9.1988 "Frankfurter Allgemeine Zeitung").

The lives of institutionalized children were further brutalized by visits from members of the SA, SS, Hitler Youth and League of German Maidens who were taken on tours of institutions. These visitors regarded these tours as "freak shows" and there were many instances of nasty and brutal behavior towards the children who lived in the institutions (Aly, 1993; Burleigh, 1994). More than 20,000 visitors came to the Eglfing - Haar institution. Dr. Pfanmuller, the director, took his visitors to the wards and lectured them ( in front of the children) about the necessity of killing disabled for the "good of the nation". Pfanmuller advocated killing children long before the child euthanasia program was put into effect and used starvation as his preferred method (Burleigh, 1994).

### **Parents Were Also Victims**

After the children were committed, parents discovered how little control or influence they had over their children's lives. They had no choice about which institution or hospital their child was sent, many children were sent so far from their homes, that parental visits were difficult. Several institutions discouraged parent visits altogether.

Many parents became suspicious when they received official reports which exaggerated the degree of their child's disability or were contrary to their knowledge about their child and were contradicted reports they had been given by family doctors. Children who were speaking and playing independently at home were described as incapable of speech and "severely feeble-minded" (Burleigh, 1994). An eleven year old boy whose parents were persuaded to commit him because his mother could no longer pick him up to bathe him, was an avid reader and spoke fluently. He was able to feed himself, but the reports his parents received described him as totally helpless and severely feeble-minded

(Burleigh, 1994). It was mainly in the case of children who were severely disabled that reports were consistent with parents information. Many, many parents questioned the reports the reports they received. Suspicion heightened when parents who managed to visit their children. When they saw the thin emaciated bodies of children who only a few weeks earlier had been chubby and robust or noticed the bruises on arms and legs they complained loudly to the nurses, attendants and directors. Heartbroken parents were told that their child was refusing to eat or was hurting him or herself (Friedlander, 1994).

Desperate parents were frustrated in their efforts to bring their children home. When they arrived at the institution to take their child home, they were told that their child had been moved to another place (Burleigh, 1994). Parents who thought they were placing their children for temporary care or treatment were also unable to get their children released. Persistent parents were stonewalled and threatened with legal actions. Very few children were released.

Children who were transferred to state institutions from religious homes and schools were moved from place to place without informing their families where they were located. Parents simply received official form letters telling them their child was in transit and would be sent to another unnamed institution (Burleigh, 1994). Many parents could not keep track of their children. The real purpose of forced institutionalization became evident after 1939, with the initiation of the killing programs.

### **The Euthanasia Programs in Hospitals and Institutions**

Murdering children was a high priority on Hitler's agenda. In 1939 a few days after war was declared, Hitler issued the decree which gave physicians the authority to murder children. The decree was issued in war time to minimize the effects of public and church protest (Kogen, et al, 1993). The killing program was referred to as the Euthanasia Program or "mercy death" the Nazi euphemism for murder. Other terms such as "disinfection" and "special handling" (Sonderbehandlung) were also used (Aly, 1993). The

child program was planned first, but it was soon followed by the adult program which also included children.

The Chancellory of the Fuhrer ( the Kdf, the Kanzlei des Fuhrer) appointed the physicians who operated the child program under the name of a fictitious organization, the "Reich committee for the Scientific Registration of Severe Hereditary Ailments". (Burleigh, 1994; Friedlander,1994).

*Thus, from the very beginning, the true aims of these powers to kill-which furthered racial and political goals and the protection of the domestic and wartime economy by the extermination of 'inferior races' and 'human ballast' unfit for work-were hidden behind the justification of a "mercy death". (Kogon, Langbein and Rueckerl, 1993, p.16).*

Despite the claim that the German population supported the killing "useless" people, a heavy curtain of secrecy surrounded the euthanasia programs. Everyone involved was sworn to secrecy and was required to sign an oath of loyalty and promise not to talk about the killing programs. Employees who talked about the killing "action" were reported to the Gestapo and were punished with imprisonment (Kogon, Langbein and Rueckerl, 1993). The Euthanasia programs claimed more than a quarter of a million lives of children and adults who lived in Germany's hospitals, institutions and asylums (Aly, 1993).

### **Pediatric Killing Wards**

The university professors, scientists and physicians who planned the euthanasia murders were handsomely rewarded with generous research grants, university appointments and unlimited authority (Burleigh, 1994; Friedlander, 1994). Young newly graduated physicians did the killing on the children's wards, but they were encouraged and supported by psychiatrists like Dr. Werner Villinger who was a well known professor of Psychiatry at the University of Breslau. Villinger was known for his work on the psychological and social problems of children and youth and his . participation on the

Reich committee persuaded the young doctors that there was nothing wrong with killing children. Dr. Hans Heinze, psychiatrist and chief administrator of Brandenburg- Goerden, opened the first children's killing ward in 1940. The physicians who did the killing were trained at Goerden and learned how to administer injections of poisons. Twenty-one additional pediatric killing wards were opened in other hospitals and institutions. Jewish and Gypsy children were killed in many of the same institutions, notably Hadamar (Mitscherlich and Mielke, 1947).

The physicians who supervised the killing wards were rewarded with career advancement, university posts and extra bonuses of 250 Reichsmarks (RMs). Their duties enabled them to avoid military service. Nurses also received monthly supplementary payments (25 RM). (Burleigh, 1994). The 400 physicians and nurses who administered death were the backbone of the killing programs (.Burleigh,1994; Kogon et al,1993; Gallagher, 1990).

The physicians on the killing wards were for the most part young and ambitious and had little experience or knowledge of the children in their care. Nevertheless they had almost complete authority over the selection of child victims. They were so eager to meet quotas that they ignored their own guidelines and made random arbitrary choices.(Burleigh, 1994; Aly, 1993). Children with cerebral palsy, Downs' syndrome, or blindness were singled out for "mercy killing". If Helen Keller had lived in Germany she would not have survived. Parents were never informed that their child was dying until death was imminent and too late for them to visit (Burleigh, 1994).

In some jurisdictions, officials from the institutions drove around the countryside to the smaller homes and picked out frail children and those with mental handicaps for transfer to the killing institutions. Dr. Leonard Glassner from the Austrian institute at Valduna jokingly referred to this procedure as "taking up a collection on the street" (Kogon et al, 1993, p.33). Infants were routinely murdered despite the advice of the older psychiatrists who cautioned that diagnoses of severity made in infancy were questionable

(Burleigh,1994). Ernst Wentzler murdered hundreds of babies in his Berlin clinic. Children as young as three years of age were killed in gas chambers at Eichberg and Hadamar (Aly 1993).

Children who lived in the hospitals and institutions knew about the killings. A nurse at Kalmenof-Idstein testified to the awareness of the ten year old children on her ward.

*"Everyone talked about it, even the children talked about it. They were all afraid to go to the hospital. They were fearful that they would not come back. It was a general rumor. The children played a coffin game. We were astonished that the children understood."* (Friedlander,1994, p.170)

The "mercy deaths" were neither quick nor merciful; they were long, drawn- out and painful. Child victims suffered pneumonia and other debilitating illnesses before they died (Burleigh, 1994).

### **Experiments on Children**

Children with cerebral palsy and other neurological conditions or Downs syndrome were used as subjects of "scientific" experiments by physicians and their students. Many a doctoral dissertation was based on the experiments performed on living conscious children. Their blood and spinal fluids were drawn and replaced with air so that clear x-rays could be taken of their brains. Children were injected with drugs, sugar and other chemicals to test their reactions. Generous research grants were given to support this kind of research. Dr. Heinze, one of the planners of child euthanasia, performed experiments on many children before he killed them (Friedlander, 1994).

After the experiments were completed, the children were "disinfected" (killed) (Burleigh, 1994). Brains and other body organs were removed and sent to university research laboratories. Dr. Julius Hallevorden, a neuropathologist, collected brains and boasted of the wonderful material he had obtained from "defectives." (Aly, 1994). (His collection of children's brains was used until 1990, when the samples were buried in the Munich



cemetery). Parent permission was never obtained for these experiments and parents were not informed of the real cause of their children's deaths.

### **Children and Young People In The Adult Euthanasia Program**

The "experts" on the Adult Euthanasia Reich committee were in a hurry to complete the process of extermination. They selected their victims from the questionnaires that directors of hospitals and institutions were required to file on every patient (Burleigh, 1994). A few directors attempted to protect patients by not filling out the forms. These efforts were futile. When the Reich committee did not receive the completed questionnaires, they sent a commission of medical students and secretaries to the institution to complete and collect the questionnaires. Dr. Rudolph Boeck, chief physician of the Neuenettslau institution protested that the commission carried out its duties in a manner "contradictory to all accepted medical practice" and did not examine even one of the 1800 patients (Kogon et al, 1993, p.22).

Patients selected for the adult program (including children) were taken by bus to transit institutions for temporary stays before being transported to the killing institutions. A few directors at the transit institutions attempted to prevent further transfer by claiming the patients were good workers. A few public health physicians tried to prevent transfers to killing wards. Professor Walter Creutz, Health official in the Rhineland resisted Nazi policies with other colleagues and called a secret meeting to work out a strategy of sabotage. They saved lives by labeling their patients fit for work, releasing them, calling their relatives to take their family members home and even hid them in the woods on days that the transport buses were scheduled (Gallagher, 1990). After the war, a court in Dusseldorf found that 3,000 to 4,000 lives were saved by physicians who gave false reports on their patients. (Kogon et al, 1993). A number of judges in the courts responsible for legal guardianship attempted to countermand orders to transfer children under their legal guardianship without success (Burleigh, 1994). A few directors of

special schools also refused to comply. Heinrich Hermann, a Swiss citizen who was director of an institute for the deaf refused to comply with Nazi policies.

Children were transferred from religious homes and asylums to the killing wards in gray buses with darkened windows. Those who lived near the institutions with killing wards were aware of what was taking place. The sisters who lived and taught at the Ursberg Home for children with mental handicaps stood by with tears in their eyes as they stood by helplessly while the SS men hustled children onto the transport buses that would take them to Grafeneck and Hadamar. A sister of the Ursberg Home wrote,

*Some of the patients hung on to the nuns for dear life. It was terrible. They felt what was happening. It was especially terrible with the girls. They knew instinctively that there was something bad going on. They cried and screamed. Even the helpers and the doctors cried. It was heartbreaking.* (Gallagher, 1990, pp. 109-110).

Government officials claimed that parents willingly consented to the euthanasia of their children, but parental consent was rarely obtained (Klee, 1986). When parents received the official letters informing them of their children's deaths they accused the hospitals and institutions of neglect or deliberately causing death. The death notices were form letters.

*As you have certainly already been informed your daughter, \_\_\_\_\_ was transferred to our establishment by ministerial order. It is our painful duty to inform you that your daughter died here on \_\_\_\_\_ of influenza, with an abscess on the lung. Unfortunately all efforts made by the medical staff to keep the patient alive proved in vain.*

*We wish to express our sincere condolences at your loss. You will find consolation in the thought that the death of your daughter relieved her from her terrible and incurable suffering.*

*According to instructions from the police, we were obliged to proceed immediately with the cremation of the body. This measure is intended to protect the country from the spread of infectious diseases, which in time of war pose a considerable danger. The regulations must, therefore be strictly adhered to.*

*Should you wish the urn to be sent to you-at no charge-kindly inform us and send us the written consent of the cemetery authorities. If we do not receive a reply from you within a fortnight, we shall make arrangements for the burial of*

*the urn. Please find enclosed two copies of the death certificate to be presented to the authorities. We suggest that you keep them in a safe place.*

*Heil Hitler* (Kogen et al, p. 29)

The letters of condolence were signed by the physicians at the euthanasia facilities using pseudonyms to avoid contact with grieving parents. The cause of death that was listed was false and sometimes a false date were noted in the file. All files were kept at the T4 headquarters, but towards the end of the war, they were sent to the Hartheim institution to be destroyed by a shredder.

Hundreds of grieving parents accused the hospitals and institutions of neglect. Many went to the institution to find out the real cause of their child's death. At Grafeneck, the old castle was guarded by black-coated SS men who refused to let relatives enter. Newly painted signs had warnings to "Keep Away" "Danger of Pestilence" (Aly, 1993). Grief-stricken and frustrated, parents appealed to the courts and tried to bring legal actions against the hospitals and institutions. In response, Hitler issued a legal decree 1941 preventing parents from bringing legal actions against institutions (Majer,1994).

Parents found another way of protesting and placed obituary notices in local papers to attract public attention.

AFTER THE CREMATION HAD TAKEN PLACE WE RECEIVED FROM GRAFENECK THE SAD NEWS OF THE SUDDEN DEATH OF OUR BELOVED SON AND BROTHER, OSKAR REID, INTERNMENT OF THE URN WILL TAKE PLACE PRIVATELY AT X CEMETARY UPON ITS ARRIVAL (Shirer, 1947, p. 572).

AFTER WEEKS OF ANXIOUS UNCERTAINTY WE RECEIVED THE SHOCKING NEWS ON SEPTEMBER 18 THAT OUR BELOVED MARIANNE DIED OF GRIPPE ON SEPTEMBER 15 AT PIRNA. NOW THAT

THE URBAN HAS BEEN RECEIVED, THE BURIAL WILL TAKE PLACE PRIVATELY ON HOME SOIL (SHIRER, P.572).

Shirer drew attention to the wording of these notices, "After " the cremation had taken place, we received the sad news....and noted that the Germans had become used to reading between the lines in their heavily censored newspapers. Relatives were warned not to talk publicly about the deaths of their children. It took courage to publish these death notices in the hopes of attracting public attention to the murder of their relatives (Shirer, 1946)

After the war thousands of cases were brought before the German courts (Burleigh, 1994). Parents of children who were sent to institutions because of delinquency or rebellious behavior were most in shock. Their children had no physical illnesses or disabilities. The mother of a teen-aged boy who was murdered in Kalmenof-Idstein testified before the court in 1947.

*"One day my son took his savings and ran away to Frankfurt, where the police arrested him. Just After that, he was sent to Mulheim for observation. Four weeks later I was informed he was to be sent to Idstein for an examination of his mental state. Then I said that he was not insane. Three or four weeks afterwards perhaps, the child was released and sent home. In two weeks they came back to get him and send him to Mulheim for observation, and then eight days later to Idstein. Perhaps eight days later I received a telegram telling my son had died on the 11th of December at 4:30 in the afternoon" (Aziz, p.128).*

## The End of Secrecy

People who lived near the institutions and hospitals knew that people were being murdered inside. In spite of extensive efforts to maintain strict secrecy, rumors and suspicion spread rapidly. The gray buses with their curtained or painted windows and the smoking chimneys did not go unnoticed by the local populations. In the small town of Apsberg, the people of the town stood and wept as they watched people the buses carry away people they knew (Gallagher, 1990).

Every few days the buses arrived at the gates of Hadamar, an institution named after the small town in which the institution was located. Children who lived near Hadamar were overheard to tease one another with the words. "You're not quite bright, they'll put you in the oven at Hadamar". (Mitscherlich and Mielke, p. 108). The children referred to the buses as "killing crates" (Kogon et al, 1993). The people of Hadamar saw the steady arrival of the buses and the smoke pouring out of the chimneys; they could smell the strange odors in the air. Friends and neighbors sympathized with parents and joined the protest. Peasant women refused to sell fruit to staff who worked in the institutions (Freidlander, 1994). Protests were written by representatives of the churches, public administrators and private persons (Kogon et al 1993). The Nazi government responded by attempting to tighten secrecy and punish protesters. Pastor Paul Gerhard Braune (director of the Hoffnungstaler hospitals and vice president of the Central Committee of the Protestant Home Mission) protested that the "mass methods used so far have quite evidently taken in many people, who are to a considerable degree of sound mind." (Mitscherlich and Mielke p. 107). Braune was arrested by the Gestapo. The head of the institution at Stetten, Dr. Schlaich, called for a law that would give families the right to voice their opinions concerning the fate of their loved ones (Mitscherlich and Mielke, p.111). He was ignored. Protests continued to mount. Prominent religious leaders who protested were removed from their positions and some like Bernard Lichtenberg, Provost of St. Hednig's Cathedral in Berlin were arrested. Lichtenberg was persistent in his

protests and sent copies of his letters to the Chancellory. The elderly priest was arrested and sentenced to two years in prison and was transferred to Dachau 1943. He died of heart failure on the train to Dachau. Dr. Meltzer, director of the church run institution in Saxony ( property of the church's Inner Mission) was removed from his position (Nuremburg documents, NO 3817). In a famous sermon, the Bishop of Munster, Clemens Count von Galen protested the "mercy killings." and hundreds of copies of his sermon were dropped by British airplanes flying over Germany.

By 1941, the killings had caused so much unrest that Herr Schlegelberger, Secretary of State in the Reich Ministry of Justice warned that "Confidence in the German medical profession, especially the administration of mental institutions, is being severely shaken" (Peukert, 1987, p.113). Even .Heinrich Himmler, referring to the institution at Grafeneck, acknowledged the public unrest and said, "The public temper is ugly and in my opinion there is nothing to do but to stop using this particular institution" (Peukert, 1987, p. 113).

Hitler made a show of yielding to public pressure and ordered Karl Brandt to "stall" the adult euthanasia" program. The gas chambers were dismantled and reassembled at Belze, Maidenek and Treblinka. Overall however, the protests simply drove the killing operations into deeper secrecy and the killings continued as "wild euthanasia" (Burleigh, 1994). Child euthanasia was never interrupted. The last child was killed on May 29, 1945, 21 days after Germany lost the war. The equipment for the gas chambers was moved to the death camps in 1941, but the killings continued with starvation, poisons and shootings. After 1941, the killing operations were less centralized and killings took place in residential schools and smaller facilities. Many killing ward physicians were later sent to administer the slaughter in the death camps (Friedlander, 1994).

The Nazis extended their extermination policies to the countries they occupied. Children in Austria, Poland and other conquered nations did not escape the euthanasia programs. One of the largest euthanasia centers outside of Germany was the Steinhof

children's wing at the Spiegelgrund hospital in Austria. The wartime staff of the hospital were almost all Nazi Party members and the case histories in the hospital vault reflect the variety of child victims, children who stuttered or had a harelip or any other minor deformity were killed. They were killed by starvation or poison or left outdoors to freeze. . Only in Holland did physicians as a group refuse to cooperate. Dutch physicians had the foresight to resist before one step was taken and they acted unanimously (Cranford,1992)

Jewish children living in hospitals and institutions were all murdered. Older Jewish children and young adults were sent to Theirientstadt. At one point there were over a thousand Jewish blind people living there. Jewish blind ex-servicemen were not allowed to keep their guide dogs. Leo Hass painted a chronicle of their lives in Therienstadt and smuggled his drawings out of the camp with the help of Czech policemen.

### **Commentary**

After the war virtual silence surrounded the slaughter of unwanted children. There were very few published accounts of child murders. Most of the physicians and nurses who played major roles in the euthanasia programs continued in their positions as if nothing unusual had taken place. Although many records had been destroyed, sufficient evidence remained and the facts cannot be denied. Court records, and accounts of parents and guardians fill in the blanks. Unwanted children were victims of Nazi prejudice and racism and exterminating them was one of Hitler's priorities. Chaos and confusion were everywhere and parents were helpless to protect their children. As control was increasingly centralized, even the guardianship courts responsible for children's welfare were robbed of jurisdiction or influence. Bit by bit the full story coming to light and proving once again, that vulnerability is not caused by disability; it is nurtured by every act whereby a human life is devalued.

Dependence on government funding and failure of professional groups to resist Nazi policies made schools and institutions vulnerable to Nazi policies. The refusal to fund

schools and programs developed during the Weimar years combined with the corruption of educational leadership that destroyed humane schools and progressive educational and treatment programs. The total infiltration of educational and social institutions made total social control possible. No child or family was safe from intrusion. Leadership of educational institutions was placed in the hands of ambitious fanatics, Nazi bureaucrats, chosen for their faithfulness to the party line, rather than their competence as educators. Bernard Rust was a failure as a teacher and was dismissed from a secondary school in Hanover for a serious offence in 1930. It is noteworthy that the pattern of corruption of schools and destruction of Christian schools were far less successful in rural districts, where people knew and trusted one another (Samuels and Thompson, 1949).

Among the 250,000 to 350,000 people who were murdered in the Nazi euthanasia programs, at least one fourth were children and young adults. More than 5,000 infants and young children were murdered in pediatric wards. This number does not include the children who were murdered in smaller residential facilities and treatment homes and those who were included in the adult euthanasia program.

The rebuilding of rehabilitative education in Germany has been a long process and Germany never regained its prominence or its leadership in the field. Although today services have been restored, German children and young people with disabilities continue to struggle for community acceptance. There are echoes of the Nazi past taking place in Germany, where people in wheelchairs have been abused by neo-Nazi bully boys. "Under Hitler, you would have been gassed." they were told (The Boston Globe, 1993) More than 1,000 German citizens with disabilities have reported harassment, physical and verbal abuse. Group homes have been attacked and children attending a church camp at a seaside resort were made to leave the beach (Gallagher, 1990). Parents continue to protest discrimination against their children in the schools. In most European countries advocacy groups and associations have been organized by people with disabilities, but these



organizations are not as activist in Germany as they are in other countries. The Catholic and Protestant churches have set up many monuments in remembrance of children who lost their lives. Nevertheless, this chapter of Nazi inhumanity has largely been neglected. Friedlander (1994) traced the continuity between the euthanasia programs and the Holocaust. Nazi victimization of vulnerable people was unique in its organization, its mercilessness and its bureaucratic efficiency and serves as a lasting reminder of the perils of making value judgments on human life and of separating science from humanity.

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