

## CONTENTS

|  |     |
|--|-----|
| Introduction                                 | 1   |
| 1 The Problem of Incurability                | 17  |
| 2 Love, Money, Murder                        | 46  |
| 3 How Does One Recognize a Crime?            | 78  |
| 4 The Fascism in the Heads                   | 110 |
| 5 Socialist Humanism Confronts Disabled Life | 155 |
| Afterword: The Legacy of Antipostfascism     | 197 |
| <i>Acknowledgments</i>                       | 217 |
| <i>Notes</i>                                 | 219 |
| <i>Index</i>                                 | 295 |

# Introduction

THE NAZI “euthanasia” murder program claimed, between 1939 and 1945, the lives of nearly 300,000 individuals, most of them carrying diagnoses of psychiatric illness or cognitive or behavioral deficiencies—an estimated 210,000 in the German Reich and another 80,000 in Nazi-occupied Poland and the Soviet Union. The killing was done by various means: in one of six carbon-monoxide-fueled gas chambers; by mass shootings; or by medication overdose, poisoning, or systematic starvation. Hitler would call a halt to the initial gas chamber (so-called T4) phase of “euthanasia” in the wake of Catholic bishop Clemens August von Galen’s internationally resonant sermon of August 1941 eloquently decrying the killings.<sup>1</sup> Yet 121 men who had gotten their training and practice in murdering people with disabilities would soon find themselves transferred to Nazi-occupied Poland to assemble the Operation Reinhardt death factories of Belzec, Sobibor, and Treblinka. There, with great energy and ingenuity, these men would accomplish a full quarter of that mammoth, six-million-victim crime now collectively referred to as the Holocaust.<sup>2</sup> It was not least by persistent reference to this key detail of sequential chronology and overlap in personnel between the murders of individuals with disabilities and the murders of European Jewry, though also by identifying further connective links between the two mass killing programs, that activists and engaged researchers eventually succeeded in cohering a scholarly and popular consensus that the National Socialist “euthanasia” murders deserved recognition as a genocide.<sup>3</sup>

For an English-language audience, strikingly, invoking this sequential link between “euthanasia” and the Judeocide remains to this day the main means by which the significance of the murders of people with disabilities has been articulated. The late historian and Auschwitz survivor Henry Friedlander at several occasions told the story of being recurrently accosted as he was researching the entanglements between “euthanasia” and the Holocaust, and informed that his was a mistaken approach. “How can you compare Jews with crazy people?” one top-level official within an American Jewish organization had indignantly inquired.<sup>4</sup> Friedlander’s own answer to the question that had been posed to him came in the form of his groundbreaking book, *The Origins of the Nazi Genocide: From Euthanasia to the Final Solution* (1995). In the preface, Friedlander explained how, based on his immersion in the primary sources—particularly the records of postwar perpetrator trials—he had come, over the course of the 1980s and early 1990s, to understand the murder of the disabled not merely as a “prologue” to the Holocaust, but indeed as its “first chapter.” For Friedlander, moreover, unusual among his scholarly peers for also paying close attention to the persecution and murder of Roma and Sinti, the killing of people with disabilities would come to serve as “the model for all Nazi killing operations.”<sup>5</sup> Friedlander’s framing of the issues has been broadly persuasive. The US Holocaust Memorial Museum, in its own efforts to integrate the history of “euthanasia” more adequately into its presentation of the history of the Holocaust, on a recently developed web page referred to the “euthanasia” murder program as “in itself a rehearsal for Nazi Germany’s broader genocidal policies.”<sup>6</sup> Relatedly, in 2020, memoirist Kenny Fries (Jewish, gay, endowed with a physical disability), wrote about the connection of the two mass murder programs in the *New York Times* under the headline: “Before the ‘Final Solution’ There Was a ‘Test Killing’. Too few know the history of the Nazi methodical mass murder of disabled people. That is why I write.”<sup>7</sup>

Within Germany, however, in the years around the end of the Cold War, highlighting the interrelationships between “euthanasia” and the Holocaust, no matter how asymmetrical their sizes and even as connections were initially made more by intuitive analogy than by specifying

literal links, had served a further crucial function. This was the indispensable assistance such references provided for advancing the—so long rebuffed—cause of disability rights.<sup>8</sup> For, with regard to the abuse and killing of people with disabilities, the more immediate post–World War II decades had seen a (in hindsight truly stunning, then simply crushing) breadth of popular support for the perpetrators, and ongoing shaming of the victims and their families.

While memory politics, care practices, and general public attitudes were complexly imbricated, progress on all fronts was excruciatingly slow, and efforts at advancing recognition of people with disabilities as deserving of equal rights and respect faced vicious pushback. Not just ex-Nazis, with their indefatigably inventive ability to rewrite the immediate past, but also non- or anti-Nazis had considerable difficulty in confronting what had occurred. Few of the physician perpetrators ever faced justice but instead had bright postwar careers, often continuing to function as experts adjudicating myriad issues relating to disability. Prejudice and contempt remained rampant. Well into the post–World War II era, people with all manner of disabilities—physical as well as mental or psychological—were not viewed by their fellow citizens as fully human, and their lives, bodies, and souls were not treated as of equal value. Eugenic thinking, in its quadruple dimensions—a pecking order of human worth, a conviction that intellectual disabilities in particular were primarily the result of heredity rather than random accident or environmental damage, an inflated sense of one’s own superiority, and a construal of those deemed inferior as dangerous and disgusting or at best pitiable—persisted largely unchallenged, even when expressed in more carefully modulated forms.

It took into the 1980s–1990s to get not just the “euthanasia” murders taken seriously as a mass crime, but also the approximately 400,000 coercive sterilizations—the majority enacted on individuals designated as “feeble-minded”—to be formally acknowledged as an injustice at all, and the tens of thousands of (often deeply traumatized) survivors offered even the most insultingly meager amount of recognition and recompense.<sup>9</sup> It was not until the post-reunification mid-1990s that a statement insisting that no one may be discriminated against on grounds of

disability was put into Germany's Basic Law.<sup>10</sup> And it took just about as long for a novel albeit still fragile agreement to be consolidated that saw as equally entitled also those with the most severe impairments, with all that such a reconceived understanding should entail for the necessary financial and infrastructural investments in educational and welfare-care policy and practices at all levels.<sup>11</sup> It would take into the twenty-first century for acknowledgment of all the crimes against the disabled to be integrated more fully into government declarations and legislation and into the national memorial landscape. Unlearning eugenics proved to be a very long postfascist process, and it remains unfinished. The battle for dignified and respectful treatment in the everyday, including high-quality pedagogical and assistive services, but also the right to be visibly “out” and participating fully in all aspects of communal life, remains ongoing.<sup>12</sup>

As noted, the disabled were not “forgotten” victims, but rather aggressively repudiated ones. Given the tenacious persistence of antidisability hostility into the postfascist decades, inducing identification with the plight of people with disabilities, especially cognitive impairments or psychiatric diagnoses, turned out to be enormously challenging. Activists' effort, in presenting the murders of people with disabilities as the “trial run for the Judeocide”—in the words of journalist Ernst Klee in the pages of the leading national weekly *Die Zeit* in 1990—was by no means just a summary finding based on his and others' meticulous recovery of a wealth of empirical evidence.<sup>13</sup> It was above all an ethically engaged, passionately pursued strategy for *un-dehumanizing the disabled*, for insisting that their suffering should matter.<sup>14</sup>

Yet however effective in that historic moment this strategic effort had been, it would seem important also to acknowledge that crimes against the disabled (or those labeled as disabled) were crimes that should not require being described as precursor to the Holocaust in order to be treated with due gravity. Moreover, the dynamics of antidisability hostility—the recent coinage “ableism” is too weak a word—then and now, were and are not fully comparable to those of other kinds of prejudice and animus. Disability, after all, as “crip” theorists have been at the forefront of pointing out, is quite unlike all other forms of “otherness.”<sup>15</sup>

This is in part due to disability's universal potential—it can happen to anyone—and, simultaneously, to the way it is associated with the most profound vulnerability and dependency and thus often experienced as especially threatening or despicable.<sup>16</sup>

For centuries, however, there have been ramifications particular to ascriptions of significant mental impairment or illness, both because these phenomena destabilize the idealized notion of the autonomous subject and, not least and most enduringly, because of the challenge that these impairments have raised for the expectation of being able to contribute labor to one's community, rather than requiring the labor of care and of support from others. Here especially, mental impairments' distinctive intersectionality with issues of class and the rise of industrial capitalism—including those components of class conflict that manifest as inequality, exploitation, and subjugation—become acutely apparent. For as it happens, the overwhelming majority of cases of intellectual disability, just as of psychological impairments, through the more than a century with which this book is concerned, were to be found among the very poor.

Welfare provision and remedial education, such as they existed, were thus, at all times, inseparable from poverty management, and the subjective experience and the corporeal materiality of intellectual disability alike were if not directly caused then at least exacerbated by such poverty-related dynamics as infectious diseases, insufficiencies of nutrition, environmental hazards, institutional contexts, and the violences of neglect and coercion. This meant that all the ensuing culture-wide controversies over attitudes toward and treatment of individuals with intellectual and psychological impairments would long remain inextricable from matters of economics. (The 10—or at most 15—percent of cognitive impairment that regularly did also appear among the more well-to-do was typically explained either as an unfortunate chance exception to the rule of good mental health in the family or as caused by childhood fevers or mishaps. Nonetheless, and notably, almost every large residential institution established in the later nineteenth century would also offer a *Pensionat*—a dormitory with better amenities—and not infrequently the income generated by taking in, for fees, the

disabled progeny of the more prosperous classes would help significantly to finance care for the overwhelming majority of residents from underprivileged backgrounds.) No matter the familial background, however, inadequately exploitable labor power or, worse, complete dependency on care, would always be perceived as a problem involving other people's money, effort, and time. And this in turn would prompt a recurrent obsession with justifying any charitable or state investment in care or education as only tolerable if the outcome was some improved "usefulness." The difficulties that were to ensue for any efforts to articulate the rights of people unable to become "useful" were inescapable—and devastating.

When I first began the research for this book, I had many questions. The scholarship on the three professions that saw the topic of intellectual disability as part of their respective remits—religious charity, remedial pedagogy, and psychiatric medicine—is vast, but the fields and their complex interactions are rarely analyzed in a unified way. And, oddly, not much attention has been paid specifically to the ways in which contemporaries, at each juncture, argued over the value of disabled lives.

Why, in the *postfascist* era, had it still been so agonizingly difficult to find compelling language and to enact concrete policies and practices to defend, or even to cherish, the positive value of disabled lives? Were there no *prefascist* traditions that could serve as orienting resources for *postfascist* rebuilding? How far back in history, or how far forward, did one have to go to find people who did not hierarchize human worth? What ways of thinking about human beings with the most severe disabilities had been inherited from the nineteenth century, and how did those inherited ideas come under pressure and need to be revised just as residential institutions and remedial schools alike were rapidly expanding in both number and size after the 1890s? When lawyer Karl Binding and psychiatrist Alfred Hoche, authors in 1920 of a book concerning "Permission to Annihilate Life Unworthy of Life" (*Die Freigabe der Vernichtung lebensunwerten Lebens*)—the text that would later serve as the main template for the Nazi "euthanasia" program—called openly for the murder of the "total idiots" in the population, what kinds of counterarguments had religious leaders or remedial educators tried to put

forward?<sup>17</sup> And when German eugenicists—even while conceding they could not be sure of the source of cognitive impairments and that their surmises about “recessive” genetic transmission were simply guesses and projections—debated frenetically in the 1920s–1930s whether it was 1 percent or 10 percent or even 20 percent or more of their fellow citizens who were so subpar they should be prevented from procreating, who (if anyone) in their time was audacious enough to point out that their math and their science alike were faulty?<sup>18</sup> Was it impossible in that moment to see not just how cruel but also how completely absurd were the so widely promoted eugenic fantasies that it could even be feasible to extirpate—by sterilization and / or by murder—imperfection in the body politic?<sup>19</sup> And how, eventually, would those fantasies come to be robbed of their power—if they ever have fully been?

Most immediately, the search for answers drew me into confrontation with a peculiarly durable problem: No matter how blurry the boundaries between ascribed classifications, and no matter how much the comorbidities, the proximate or presumed causes, and / or the applied nomenclature varied over time, people labeled by others as in some way cognitively deficient were continually being ranked along a multilevel scale. By the 1880s, a tripartite system had already been established in which those perceived as most severely disabled were referred to as solely “care-cases,” while those more mildly or moderately affected were being sorted into categories as either “educable” or merely “trainable”—capable of some, either independent or supervised, labor. Certainly, the diverse origins of impairments were reflected in divergent symptomologies and, inevitably, over the course of a century and a half, both the causes of impairments and the prospects for prevention and treatment evolved. The changes in how intellectual disability manifested proved to be both concretely material—at once biological and shaped by environmental factors—and conceptual. Unquestionably, there were substantive differences between cretinism, chromosomal anomalies, cerebral palsies incurred in the birth process, brain damage-inducing meningitis or encephalitis in the toddler years, cumulative brain impairments due to epileptic seizures, and more general health deficits caused by vitamin and protein deficiencies (many of which

resulted in physical impairments and “disfigurements” as well, leading to ample overlap between those called “cripples” and those deemed to have mental impairment). Yet no less consequential, as I was to discover, would be the epistemological reorientations as psychiatric professionals, after a half-century of disinterest, rushed into the domain of intellectual disability in the 1890s once that domain—because of reorganizations in institutional administration and funding—became a potential source of career and income enhancements. Ultimately, however, no single trend but a rather a concatenation of factors, including major demographic and socioeconomic upheavals, could help explain how the turn into the twentieth century found an abundance of individuals, previously unremarkable, being drawn first gradually and then swiftly into an ever-expanding portion of the populace being somehow deemed “abnormal” and increasingly tagged—not solely by men of medicine but also by religious and educational professionals—with such fresh terminological inventions as “psychopathological inferiority” or “moral feeble-mindedness.”

Nonetheless, and despite this welter of ever-evolving logics and new incoherencies, there were over the many decades, I learned as well, also recognizable continuities, and these showed up with regularity in ways both trivial and colossal. As a first baseline point: It matters enormously, for instance, that, as recent scholarship has shown, we grasp that, although there was some overlap between those individuals targeted for sterilization during the Third Reich and those chosen for murder, they largely belonged to different subgroups. Factors that strongly increased the likelihood of being chosen for death included incontinence, epilepsy, high care needs, and “incapacity for work” (or in the case of children, identification as “ineducable”). And while among those selected for coercive sterilization there were indeed individuals whose sensory impairments, such as blindness or deafness, had been identified as heritable, the second-largest category among the sterilized, after “feeble-mindedness,” was “schizophrenia” (like “feeble-mindedness,” a designation that was not just elastic, but very much based in the subjective impressions of the diagnostician and often assumed to overlap with forms of mental debility). With regard to sterilizations too, “educability” and “ability to work” mattered greatly.<sup>20</sup>

A second crucial point emerged as well. For throughout, recognizing the special challenges confronting those striving to make a case for the rights to life—and more, the rights to engaged attention, and to love, joy, and education—of those so significantly impaired that they would have been targeted for death in the Third Reich, I kept searching to recover whatever traces I could find of advocacy on behalf of people with the most significant intellectual disabilities, whether this advocacy was religiously or secularly inspired. Without preempting evidence and analyses that will be put forward in the chapters that follow, one short version of an answer to my many questions is that I did find, in every era, noteworthy individuals who made urgent and creative arguments in defense of the value also of the lives of those who were more severely or multiply disabled or who simply acted, whether in care provision, education, or advocacy, on those convictions. In other words, a genealogy of radical un-dehumanizers can be constructed. They were always anomalies, but they show what was imaginable and doable and they can be resources for us in the future as well. No less revelatory is how varied their motives and styles were. Some borrowed from the languages of the Enlightenment and antislavery movements; some drew from Jewish tradition, many from Christianity; others, in the postwar decades, drew from Marxism or from antiauthoritarian and countercultural secular humanism. Some deployed sentimentality, others irony or searing sarcasm, yet others earnest rationality. And while sincere faith was vital for some, others—in disgust at what they perceived as Christian paternalism, hypocrisy, or malice—adopted a deliberately sacrilegious vulgarity to get their moral message across. One of the purposes of this book is to honor them and restore to the historical record the arguments they made.

A third point, however, is that overall, it would take a full hundred years—from the 1870s, when the Protestant and Catholic “idiot-institutions” first proliferated across the German landscape, to the 1970s, when a new generation of professionals and activists revolted against what they perceived as an abhorrent preliminary postfascist settlement—before a comprehensive integrationist, antihierarchical, and egalitarian vision would be articulated and, in experimental oases in both East and West, put into lived practice. And a subsidiary, related point is

that, ultimately, it would be necessary for passionate *secular* defenses of the full and equal humanity of people with disabilities to be formulated before the mainstream of Protestant and Catholic church and charity spokespeople were provoked to rethink their conceptions of human dignity and worth—their “image of the human” (*Menschenbild*), to use the German term—and to reconceive their praxes accordingly. This was all the more sobering a discovery, given the reputation both churches so proudly promoted in the postwar of having been stalwart stewards of the vulnerable who had vigorously protested against the Nazi killings (even as substantial majorities of their residents met their deaths).

One measure of the enormity of the transformation that has been achieved, particularly over the last twenty years, can be found in the self-evidence with which *both* secular *and* religious advocacy and support organizations working with and for persons with disabilities and impairments have come to take as their bedrock premises the twinned ideals of individual self-determination and full social integration (now called inclusion). As the premier Catholic service organization Caritas assures visitors to its website: “As Caritas we have committed ourselves to enabling as much self-determined participation as possible.” Caritas advances the ideal of equal entitlement in all realms of life, including work, leisure, and residential setting; refers to individuals with impairments as “experts in their own right” whose wishes and preferences have consistent priority; strives to decentralize disability services so that full immersion in a multiplicity of ordinary life situations can be facilitated daily; and references as a mandatory touchstone the expansive catalogue of rights enumerated in the UN Convention on the Rights of Persons with Disabilities, ratified by Germany in 2009.<sup>21</sup> Relatedly, the Protestant Diakonie, too, proclaims the import of “self-determined participation in our society” for the “7.8 million people” in Germany living with some type of disability; advances the “adventure of inclusive living” in small-scale supported settings also for individuals with a variety of intellectual impairments; promotes “integrated kindergartens” as a boon for children with and without disabilities alike; regularly identifies inadequacies in extant legislation and proposes corrections that will enhance individual access and entitlements; and sees as among its main

tasks the elucidation of the UN Convention's foundational principles of "self-determination, non-discrimination, and acceptance of difference and diversity among people."<sup>22</sup> Meanwhile, the premier secular lobby association Aktion Mensch has proven itself in the past decade ever more imaginatively inventive, especially with clever ads on billboards and in social media, in marketing the beauties, for everyone, of a "barrier-free" society in which bodily and mental differences are celebrated, and in which encounters with, learning from, and social engagement on behalf of differently abled others are great sources of pleasure and meaning.<sup>23</sup> What in the 1970s and 1980s initially had been the demands of a tiny insurgent minority of dedicatedly integrationist radicals has at long last become the officially pronounced cultural consensus. But as will become clear, the path to get to this point was arduously long and filled with innumerable obstacles.<sup>24</sup>

Most Germany-focused disability history written these days is social history, and I too have taken social, political, and economic factors into account wherever they are relevant.<sup>25</sup> Nonetheless, this book is, unapologetically, an intellectual history. All through, I considered the methodological questions raised by battles over knowledge and meaning. In this sense, the book also addresses the problem of history-writing, of the relationship between evidence and interpretation. For in the case of animus and brutality toward people with disabilities, the facts themselves were generally neither unknown nor in dispute; the issue was always what the facts *meant*. One of the through lines of the book, therefore, involves the recurring question of how previously consolidated culture-wide terms of debate can finally tip, whether gradually or abruptly, and what constituencies, what constellation of arguments, and what historic contingencies it takes to redirect a national conversation in one direction or another.

How does the previously unthinkable become thinkable—or even come to seem like common sense? How can doubt finally grow about unquestioned, stubbornly held premises? How do originally unrelated agendas get woven into ongoing conflicts about other matters entirely? What new ways of imagining but also new misunderstandings can arise, and with what (perhaps unintended) consequences? In short, among

the distinctive features of this book is the way it centers battles over what counts as truth and considers how multiple pasts and presents are continually colliding, reciprocally reconfiguring each others' meanings. The controversies over intellectual disability, human vulnerability, and interdependence, I suggest, provide an instructive case study giving us insight into how ideological conflicts work more generally.

A further distinctive feature of this book is its particular interest in what the Marxist literary critic Raymond Williams once referred to as "structures of feeling." The issue, he argued, in making sense of any era, was that "we must go beyond formally held and systematic beliefs, though of course we have always to include them." The more difficult but important thing to get at, Williams urged, was "meanings and values as they are actively lived and felt. . . . elements of impulse, restraint, and tone; specifically affective elements of consciousness and relationships: not feeling against thought, but thought as felt and feeling as thought."<sup>26</sup> This meant, for me, always again reading the primary sources both with and against the grain, noticing tone and mood, metaphors chosen, passing references, scenes of sudden intensity, and seemingly odd asides.<sup>27</sup> It meant as well taking seriously, as pertinent historically, such diverse phenomena as: fierce rivalry between the professions concerned with disability; mystical assumptions about the relationship between the disabled and the divine; innumerable expressions of regret, frustration, disappointment, resentment, and defensiveness; fantasies about the sexuality of others; and an apparently obsessive preoccupation with parent-blaming. But also, and repeatedly: impressive instances of ardent partisanship and imaginative dedication. This book, in sum, can be read as an experiment in writing an intellectual history of intellectual disability—but one that attends throughout to how facts were framed as well as to how emotions were continually being stirred on all sides.

---

In a radio talk delivered in 1966, the Frankfurt School philosopher and sociologist Theodor Adorno made, in passing, a profound observation, and although he was referring to the Holocaust of European Jewry, the

insight remains relevant more broadly: “The inability to identify with others was unquestionably the most important psychological condition for the fact that something like Auschwitz could have occurred in the midst of more or less civilized and innocent people.” In this text which has since become iconic, although it is one of the most searching, least self-assured of all his writings, Adorno kept circling around the problem of human nature and the mechanisms that induce people to do harm. He struggled to find words to communicate what he experienced, in a postfascist nation to which he had returned from exile in the United States, as a persisting climate of aggressive competitiveness and chilly indifference to the fate of anyone perceived as “weak”—as he worried, too, that the immense sadistic cruelty that Nazism had unleashed with such apparent ease could all too easily erupt again. Adorno diagnosed a vehement disinterest among West Germans in the national past: a widespread tendency “to avoid confronting the horror . . . [and] even rebuke anyone who merely speaks of it.” Adorno urged, instead, that it was actually imperative to let the horror “draw near” (as he put it), to let oneself be affected by engagement with it, and to seek to better understand all that had made the Third Reich possible.<sup>28</sup>

One of Adorno’s insights was that the objects for humans’ tendency to cruelty were demonstrably displaceable and readily interchangeable, as the trouble lay within the perpetrator and their impulse to cause hurt, and not in any purported characteristic of the victims. “Tomorrow,” Adorno observed, “a group other than the Jews may come along, say the elderly, who indeed were still spared in the Third Reich, or the intellectuals, or simply deviant groups.” But Adorno was concerned as well that the so indispensable capacity “to identify with others” was apparently a rather limited resource, and it was in this context that he mentioned the importance of educating the public to the point that resistance to Nazism, while rare, had in fact been historically possible. Interestingly, this is the one text in all of Adorno’s large oeuvre that references the murders of people with disabilities. Adorno explained: “For instance, one should investigate the history of euthanasia murders, which in Germany, thanks to the resistance the program met, was not perpetrated to the full extent planned by the National Socialists.” Yet

then he segued immediately to remark that in this particular case, alas, “the resistance was limited to the group concerned” (*der Widerstand war auf die eigene Gruppe beschränkt*) and he went on to conclude, in pessimism and sorrow, that “precisely this is a particularly conspicuous, very common symptom of the universal coldness.”<sup>29</sup> Adorno assumed, in short, that in the Third Reich those targeted for killing in the “euthanasia” program had been predominantly non-Jewish members of the German Volk—and it was this belonging to the Volk that was the sole reason any objection at all to their murders had arisen.

Far from seeing “euthanasia” and the Holocaust, then, as sequentially or in any other way *connected*, as activists and scholars twenty years into the future would so strenuously underscore, Adorno assumed a sharp *contrast*. The Christian churches, and the German populace as a whole, had been dismayingly silent with regard to the persecution of Germany’s and all of Europe’s Jews. Jews were that “other” with whom non-Jewish Germans had manifestly failed to identify.

As it turns out, Adorno had it both right and wrong. Von Galen’s sermon and the nationwide commotion it caused had certainly seemed to signal broader identification in the citizenry with the plight of people with disabilities and had appeared to prompt Hitler’s halt at least to the first phase of “euthanasia” murders, even as the real motivation for Hitler’s formal stoppage of the T4 component of the “euthanasia” program was most likely because he needed the churches’ and the public’s support for the war on the Soviet Union he had launched only two months earlier. Furthermore, Adorno’s lack of awareness that, in the second, decentralized phase of “euthanasia,” the death toll would be twice that of the six T4 gas chambers was, as of the mid-1960s and for quite a long time thereafter, an ignorance that was widely shared.<sup>30</sup>

Adorno’s partial misunderstandings were, however, highly significant for another reason entirely, for his indecisiveness over whether people with disabilities were outsiders or insiders to the Volk was in itself extraordinarily telling. *Were* popular unrest about and Christian leaders’ protest against the “euthanasia” killings in fact examples of that vital ability to identify across group boundaries—to empathize with those marked as “other,” to imagine oneself in their place, and to care about

their fates—that was (and remains to this day) such a key desideratum for preventing another collapse into barbarism? Or were the disabled (as Adorno presumed) best understood as insiders to the then-dominant in-group, and that was (as Adorno, despondently, implied) the only reason anyone bothered formally to risk advocating on their behalf? To put the question in different terms: Were people with disabilities a rejected “them,” or did nondisabled Germans claim the disabled as their “own”—and, if the latter, was it with compassion or with revulsion?

My contention is that the *ambiguity* of the position of those victimized on grounds of cognitive or psychiatric impairment explains so much about the disdain and ferocity to which they were regularly subjected. One of the awful conundrums with which this book is concerned is that while individuals with intellectual disability were all too often demeaned and abjected as an expendable “them,” conditions for their education and care did not improve when they came to be perceived as a humiliatingly and infuriatingly large segment of “us.” It was, moreover, in this tense situation that the rise of eugenics would prove so multifunctional for its proponents, even as quite a few of those proponents were perfectly well aware of its incoherencies. Eugenics served beautifully as distraction from the extensive collateral damage in a nation undergoing rapid industrialization; it provided flattering, cost-free ego boosts for those lucky enough to be deemed nondeficient; and it offered crudely simplified explanations and readily available scapegoats to focus one’s anger when the world seemed unfair. Eugenics, as an explanatory framework legitimating the denigration of individuals deemed disabled, diverted attention from the unremediated socioeconomic inequities and then-untreatable ailments that were the actual causes of the vast majority of disabilities and blamed the victims instead, promoting the flawed premise that intellectual deficiency was biologically hereditary, when in fact it only looked that way because conditions of poverty had been replicating across generations. Fictions and fantasies are no less powerful for being rooted in falsehoods.

This, then, is a book that explores the evolution of historical debates over the value of disabled lives. It is a key argument of *The Question of Unworthy Life* that this topic has relevance for the histories of medicine

and psychiatry, theology and religion, welfare and pedagogy, but also for the histories of capitalism and labor and of sexuality and reproduction. Each chapter traces not so much a paradigm shift as a *paradigm struggle*: a conflict over the interpretive framing of facts, and the consequences to be drawn from those interpretations. In arguing with each other over how to think and to feel about—and, in practice, how to treat—fellow citizens with a diverse range of intellectual impairments and psychiatric diagnoses, Germans worked out, over the century and a half since the 1870s, a great deal about their self-understanding as a nation.

## INDEX

Note: Page numbers followed by an *f* refer to figures. Page numbers followed by an *n* refer to notes.

- Abendberg, 20, 21*f*, 22–23, 224–255*n8*,  
225*n13*–14
- ability to work. *See* work-capacity
- ableism (term), 4. *See also* antidisability  
hostility; hierarchization
- Adorno, Theodor, 12–15, 89, 96, 129–130,  
200–201, 203
- “affection-value” (*Affektionswert*), 241*n9*
- “Against the Division of the Disabled”  
(Bradl), 142
- Aktion Mensch (Action Human Being), 11,  
207–208
- Aktion Sorgenkind (Action Worry-Child),  
207
- alcohol abuse, 37–38, 57–58, 115, 235–236*n65*,  
239*n93*
- “Alles Kranke ist Last” (All that is sick is a  
burden) TV documentary, 258*n61*
- Allgemeiner Behindertenverband in  
Deutschland (General Association of  
Disabled People in Germany), 209
- Allport, Gordon, 115
- Alsterdorfer Anstalten, 17, 28, 51, 55, 59, 65*f*,  
169, 201*f*, 209, 211*f*, 246*n37*, 269*n75*,  
286*n24*
- Alternative für Deutschland (AfD) party,  
209, 212
- Althaus, Paul, 61–62, 239*n93*, 247*n44*
- Die Anstalt* TV program, 262*n60*
- antidisability hostility: Nazi propaganda  
and, 92–93, 112, 204–205; phenomenon  
of, 4–5, 15, 35–36, 45, 109, 131, 180, 198–201,  
204–205, 212, 283–284*n9*; post-Nazi, 4,  
78, 109, 110, 112, 114–116, 122, 142, 144*f*,  
147–148, 153, 154*f*, 169, 209, 263*n8*,  
288–289*n41*; pre-Nazi, 25, 38–45, 40*f*,  
50–51, 56–58, 66
- antifascism, 198
- antipostfascism, 137–138, 197–206, 282–283*n1*,  
284*n13*
- antisemitism, 63–64, 66, 70, 74, 76, 80,  
92–93, 99–100, 112, 199–200, 203–205,  
227–228*n19*, 238*n81*, 244*n24*, 260–261*n79*,  
263–264*n9*, 283–284*n9*
- antislavery, 21*f*, 22
- Arendt, Hannah, 130, 259*n71*
- Asbacher Hütte, 74*f*
- assisted suicide, 50–51
- Association of German Special Schools  
(*Verband deutscher Sonderschulen*) (VdS),  
118
- Association of Remedial Schools in  
Germany (*Verband der Hilfsschulen  
Deutschlands*), 69–70
- Asylums (Goffman), 142
- Aumühle* (Sagerer), 263*n9*
- Aviel, Hagai, 288*n36*
- Bad Kreuznach, 74*f*, 101, 251*n76*, 258*n64*
- Bank-Mikkelsen, Niels Erik, 194, 269*n75*
- Barth, Karl, 62
- Barthold, Karl, 229*n29*, 236*n70*
- Basaglia, Franco, 129, 138–139, 143
- Bauer, Fritz, 87–89, 96, 98, 109, 171
- Bauer, Karl-Adolf, 74*f*
- “Before the ‘Final Solution’ There Was a  
‘Test Killing.’ Too few know the history  
of the Nazi methodical mass murder of  
disabled people. That is why I write.”  
(Fries), 2

- Belzec, 1
- Benjamin, Walter, 130
- Berg, Karl-Heinz, 123
- Berkhan, Oswald, 229n29, 236n69
- Bernburg, 171, 178
- Bethel, 46, 52–53, 54f, 59, 61–62, 85–86, 112f–113f, 152, 239–241n1, 242–243n18, 243n20, 243n21, 246n38, 253n7, 257n47, 269n75, 281n77, 287n13
- Binding, Karl. *See Die Freigabe der Vernichtung lebensunwerten Lebens* (Binding and Hoche)
- Blasius, Dirk, 108
- Bleidick, Ulrich, 123, 131, 146
- Bock, Gisela, 78, 102–103f, 104–105, 107–109, 199, 200
- Bodenschwingh, Friedrich von (I), 46, 52–53, 54f, 239–240n1
- Bodenschwingh, Friedrich von (III), 86, 112f
- Bodenschwingh, Fritz von, 53, 54f, 59, 63–64, 243n21
- Bohne, Gerhard, 88
- Bonhoeffer, Karl, 55
- Borchardt, Martin, 244n24
- Bourdieu, Pierre, 130
- Bracken, Helmut von, 115–116, 119, 127
- Bradl, Christian, 142, 146
- Braune, Paul Gerhard, 246–247n39
- Brecht, Bertolt, 127
- Breitbarth, Martin, 41–44, 69, 238–239n91
- Brenke (jurist, Berlin), 252n6
- Bruckberg, 65f
- Buber, Martin, 126f, 129, 132–133
- Büchsel, Hermann, 241n11, 283n9
- Bundesarchiv, 208
- The Burden That You Don't Carry. *See Die Last, die Du nicht trägst*
- “Caged, Tormented, Forgotten” (König), 168–170
- Caritas, 10, 31, 169, 215, 248n55. *See also* Catholic church
- Carstens, Karl, 150
- Casti Connubii* (Pius XI), 66
- Catel, Werner, 86, 91
- Catholic church: challenges to “euthanasia,” 1, 66–67, 97, 112, 248–249n59, 250–251n73; human dignity and, 9–10, 209, 215; Klee on, 99–101; responses to Binding and Hoche, 66–68; sterilizations and, 48, 66–67, 102, 248n58; violence at Aumühle, 14, 114, 236–264n9, 283–284n9. *See also* residential institutions
- “chimerical” hostility, 203
- Christian Democrats, 80, 107–109, 118
- Christian M. (Bethel), 54f, 243n20
- Christians. *See* Catholic church; Protestant church
- Christoph, Franz, 150, 154, 154f
- class issues: intellectual disabilities and, 5–6, 32, 34, 116–117, 119–121, 128, 130, 178, 199, 201, 290–291n53; school system and, 32, 41–42, 120–121, 290–291n53. *See also* poverty
- “Committee on the Mentally Disabled” (*Fachausschuß geistig Behinderte*), 141–146, 143f, 144f
- complementarity thesis, 104, 200
- corporal punishment, 123, 126f, 127
- cretinism, 20, 225n14
- “cripple-movement” (*Krüppelbewegung*), 146–154, 149f, 169
- “Critique of Hegel's Philosophy of Right” (Marx), 130
- Damerow, Heinrich, 38, 237n75
- deferred action (*Nachträglichkeit*), 201–202
- Degener, Theresia, 212, 214
- Deine Gesundheit* (Your Health), 159, 161
- deinstitutionalization activists, 115, 135–146, 136f, 143f, 144f
- delinquency, 36–37, 50
- “Democratic Psychiatry” movement, 138–139
- “developmental care” (*Förderpflege*), 191–196, 281n77
- Diakonie, 10–11, 169, 215. *See also* Protestant church
- disability rights: cause of, 3–4, 9–11, 124–154, 156–157, 171, 177, 191–194, 204, 207–215; protests, 95f, 136f, 145, 148, 150, 152, 154f. *See also* “cripple-movement” (*Krüppelbewegung*)
- Dörner, Klaus, 102–106, 103f, 141, 173
- Dostoevsky, Fyodor, 128
- Down syndrome, 85, 94, 125, 153, 154f, 166, 179, 184–185, 287–288n33
- Dusel, Jürgen, 212

- Ecksberg, 251–252n82  
Egling-Haar, 89, 91, 92, 252n82  
Ehrhardt, Helmut, 84–85, 88–89, 105, 107  
Eichberg, 80, 81f  
Eos, 227n18  
epilepsy, 8, 42, 46, 52, 58, 66, 73, 77, 85, 119, 179, 181, 233–234n61, 233n60, 239n93, 242–243n18, 243n20  
Erlenmeyer, Adolf Albrecht, 22  
Ernst, Otto, 39, 40f, 237n77  
Eßbach, Sigmar, 163, 276n23  
eugenics, 3, 285n19; criticism of, 60–63, 91–92, 104, 159–160, 204, 221–222n19, 275n14; defense of, 66, 79, 84–85, 93, 237n76; function of, 15, 201–204; uncertainty of science and, 7, 221n18, 246n38. *See also* heredity  
“Euthanasia” in the NS-state. *See* “Euthanasie” im NS-Staat  
“euthanasia” murders, 1–3, 6, 13, 46, 70–77, 88, 91, 96–100, 107, 222–223n30, 251–252n82, 253–254n11; acknowledgment of, 102, 106, 109, 110, 157, 186, 208, 220–221n13, 265n23, 286n24; Holocaust and, 1–2, 14, 172, 200, 219n3, 220n7, 240n3; proposals in UK and United States, 241n8  
“Euthanasie” im NS-Staat (“Euthanasia” in the NS-state) (Klee), 94–101, 203  
Evangelische Stiftung Alsterdorf, 210f, 211f. *See also* Alsterdorfer Anstalten  
Evangelisches Hospital Lilienthal, 220n11  
*Fachausschuß geistig Behinderte. See* “Committee on the Mentally Disabled”  
Fahr, Heinz, 75f  
Falkenstein, Sigrid, 261–262n86  
Fanon, Frantz, 130  
fascism (term), 198  
“fascism in the heads,” 134, 137, 198  
Federation of Those Harmed by “Euthanasia” and Coercive Sterilization (*Bund der “Euthanasie”-Geschädigten und Zwangssterilisierten*), 106  
Feuser, Georg, 124, 127–133, 150, 268n67, 291–292n60  
Fläming-Grundschule, 135f  
folk mythology, 38  
Foucault, Michel, 130, 201, 244n27  
Fraas, Hermine, 164f  
*Frankfurter Allgemeine Zeitung*, 114  
Franz Sales Haus, 230n40, 236n70, 262–263n7  
*Die Freigabe der Vernichtung lebensunwerten Lebens* (Permission to Annihilate Life Unworthy of Life) (Binding and Hoche), 6, 46–47, 50–51, 80, 188, 241n9; Klee on, 98–99; responses to, 56–59, 61, 66, 244n24, 248–249n59, 249n60; Schmidt on, 91–92  
Freire, Paulo, 130  
Freud, Sigmund, 62, 201  
Friedlander, Henry, 2  
Fries, Kenny, 2  
Fritzchen (Bethel), 54f, 243n21  
Fuchs, Arno, 241n49  
Fühmann, Franz, 179–186, 189f, 280n61. *See also* *Was für eine Insel in was für einem Meer*  
“functional” hostility, 203  
*Für Dich* (For You), 160, 161f, 162f, 165–166  
Gabriele D. (Samariteranstalten), 185, 187f, 188f  
Galen, Clemens August von, 1, 14  
Geppert, Roswitha. *See* *Die Last, die Du nicht trägst*  
German Association for Psychiatry (*Deutscher Verein für Psychiatrie*), 55  
“German Association for Social Psychiatry” (*Deutsche Gesellschaft für Soziale Psychiatrie*), 141–142  
German Democratic Republic (GDR), 155–196, 198–199, 206–207, 277n26; as a workers’ state, 156–157, 164f, 165–166, 177. *See also* socialist humanism; Socialist Unity Party  
German Institute for Human Rights, 215  
Germany’s Basic Law, disability rights and, 4  
Goebbels, Joseph, 76  
Goethe, Johann Wolfgang, 158  
Goffman, Erving, 142  
“Golden Crutch” award, 169  
Grafeneck, 46, 71, 73–74, 96, 100, 186, 219n11  
Gramsci, Antonio, 130  
Green Party, 108, 109, 152, 207  
Griesinger, Albert, 68  
Gröber, Conrad, 250–251n73  
Großschweidnitz, 188  
Grotjahn, Alfred, 239n93

- Guggenbühl, Johann Jakob, 20–24, 21*f*, 132  
guilt and sin, 56–58, 60, 64, 99, 205  
Gürtler, Reinhold, 246*n*65, 249–250*n*65  
Gutheil, Jörn-Erik, 258*n*64
- Hadamar, 71, 72*f*, 73*f*, 178  
Haeckel, Ernst, 237*n*76  
Haiselden, Harry, 241*n*8  
Hans (Stetten), 46, 77  
Harmsen, Hans, 59, 246*n*38  
Hefelmann, Hans, 88  
Heike (Samariteranstalten), 180–181  
helper syndrome, 148  
heredity: doubt about role of, 62, 69, 84, 104, 121, 159–160, 221*n*18; intellectual disabilities and, 3, 7, 15, 35, 42, 44, 58, 60–64, 69, 84, 115, 119–121, 231*n*42, 235–236*n*65, 238*n*84, 248*n*53; Schmidt on, 91–92, 256*n*38; Schneider on, 246*n*38; Stoeve-sandt on, 62–63  
Heyde, Werner, 88  
Heymann, Lida Gustava, 39  
hierarchization, 6, 24–25, 28–32, 44, 48–49, 60, 104, 111, 119, 122, 148, 163, 167, 214; antihierarchical attitudes and, 9, 124, 138, 197. *See also* intellectual disabilities, ranking of  
*Die Hilfsschule*, 41, 68, 69  
history-writing, 11–12, 201–203  
Hitler, Adolf, 1, 14, 47, 61, 64, 70, 73*f*, 92–93, 107, 199–201, 222–223*n*30  
Hoche, Alfred. *See* *Die Freigabe der Vernichtung lebensunwerten Lebens*  
Hoffmann, Gerhard (Ernst Mann), 244*n*24, 284*n*9  
Holocaust, “euthanasia” murders and, 85, 92, 172, 178, 200, 240*n*3  
Honecker, Erich, 161–162  
Hürth, Franz, 66  
Huth, Albert, 286*n*24
- I and Thou* (Buber), 132–133  
idiocy. *See* intellectual disabilities  
*Idiotophilus* (Sengelmann), 52  
incest, 85, 115, 209, 284*n*9  
inclusion, 10, 138, 156, 192, 208, 212–215, 288–289*n*41, 291*n*56, 291–292*n*60  
Inner Mission, 25, 31, 47, 51, 53, 73–74, 164, 168; eugenics and, 55–61, 86, 204–205. *See also* Protestant church  
institutions. *See* residential institutions  
integration, 9–11, 136–138, 141–148, 149*f*, 192, 213–214, 270–271*n*91; of the school system, 94, 115, 122–124, 133–141, 135*f*, 197, 214, 266*n*39, 291–292*n*60. *See also* deinstitutionalization activists; inclusion  
intellectual disabilities: causes of, 3, 5, 7–8, 15, 20, 37–38, 42, 58, 63, 115, 119–121, 159–160, 199; meaning of, 18, 36–38, 44, 124, 130–133, 201, 239*n*93; ranking of, 7, 24–25, 28–29, 48–49, 118–119, 138, 163–164, 168, 175. *See also* rehabilitation pedagogy; remedial education; special education  
iodine deficiency, 20  
Isaiah, 130  
Italy, 138–139
- Jantzen, Wolfgang, 124–127, 126*f*, 127*f*, 130–133, 137, 150. *See also* *Sozialisation und Behinderung*  
Jaspers, Karl, 90*f*  
Jewish institutions, 17, 223*n*3, 240*n*4  
Jewish mental health, 227–228*n*19, 283–284*n*9. *See also* antisemitism  
Jewish traditions, 9, 129–133  
Jost, Adolf, 39  
Judaken, Jonathan, 203  
Jun, Gerda, 160, 163  
Just, Renate, 286*n*24
- Kalmenhof, 71  
Kanig, Georg, 194  
Katharinenhof, 56, 188–196, 193*f*, 195*f*  
Kaul, Friedrich Karl, 171–172  
Kaup, Ignaz, 69  
Keller, Helen, 241*n*8  
Kemp, Tage, 85, 255*n*18  
Kern, Ferdinand, 22  
Kielhorn, Heinrich, 32–33  
King, Martin Luther, Jr., 130  
Kirmsse, Max, 232*n*59  
Klaus, Udo, 271*n*86  
Klee, Ernst, 4, 81*f*, 89, 96–101, 168–170, 257*n*47. *See also* “*Euthanasie*” im NS-Staat  
Klessmann, Ernst, 64, 248*n*53  
Klevinghaus, Johannes, 263*n*8, 285*n*18  
Kneuker, Gerhard, 73*f*  
Koch, Julius Ludwig August, 235*n*65  
König, Uta, 168–169

- Köttgen, Charlotte, 152  
Kraemer, Rudolf, 221–222n19, 249n60  
Kraepelin, Emil, 234n63, 235n65, 238n84  
Krauthausen, Raúl, 289n46  
Krenberger, Salomon, 227n18  
*Kristall*, 112f–113f  
*Krumpelschläge* (Cripple-Strikes) (Christoph), 150  
*Krüppelzeitung* (Cripple-Paper), 149f, 150  
Kuhlbrodt, Dietrich, 286n24  
Künausche Gründung, 169  
Kunz, Elisabeth, 206
- Langmuir, Gavin, 203  
*Die Last, die Du nicht trägst* (The Burden That You Don't Carry) (Geppert), 175, 176f  
“Law for the Welfare-Care-Training of Minors” (*Gesetz für die Fürsorgeerziehung Minderjähriger*), 233n60  
“Law on the Implementation of the Federal Law on the Domicile of Assistance” (*Gesetz zur Ausführung des Bundesgesetzes über den Unterstützungswohnsitz*), 233n60  
Lebenshilfe (Life-Assistance), 110, 117–119, 125, 126f, 130, 137–138, 151–153, 168, 215, 268–269n73, 287–288n3, 290–291n53  
*Lebensunwert?* (Unworthy of Life?) (Schlaich), 76–77, 86  
Lehnkering, Anna, 262n86  
Lensch, Friedrich, 55, 59, 64, 210f, 246n37  
Leontiev, Alexei, 129, 132  
Lesemann, Gustav, 69–70  
Lewenstein, Hans, 84, 109  
Löther, Rolf, 155  
love, 9, 20–21, 21f, 24, 26, 46, 52, 54f, 60, 62, 76, 115, 127, 161f, 162f, 167, 177, 185, 187f  
Lüpke, Klaus von, 271–272n91, 272n94  
Luria, Alexander, 129  
Luther, Martin, 38
- malnutrition, 37, 53  
Mann, Ernst, 244n24, 284n9  
Margarete (Bethel), 54f, 243n20  
Mariechen (Bethel), 54f, 243n21  
Martin-Buber-Schule, 129  
Marx, Karl, 9, 129–131, 155, 158, 171, 179, 186  
Mayer, Josef, 66–67  
Mecklinger, Ludwig, 178  
Meltzer, Ewald, 56, 61, 64, 87, 88, 188, 231n42, 245n32, 247n40. See also *Das Problem der Abkürzung “lebensunwerten” Lebens*  
mental disability. See intellectual disabilities  
mental illness, 18, 66, 94, 199, 227n19, 235n65; mental disability and, 29, 36–37, 42, 136, 233–234n61, 234n63, 235–236n65, 238n84. See also “psychopathic inferiority”; schizophrenia  
Meseritz-Obrawalde, 71, 74f, 106–107  
Michel, Louise, 130  
migration and disability, 284n9, 290n53  
Milani Comparetti, Adriano, 139  
Miquel, Johannes, 25–26  
Monika (Samariteranstalten), 181, 183, 186, 189f  
*Monitor* TV program, 262n60  
Montessori, Maria, 285n19  
“moral feeble-mindedness,” 8, 37, 235n65  
Morel, Bénédict Augustin, 238n84  
Muckermann, Hermann, 66  
Muslim migrants, 209, 284n9, 290–291n53  
Muth, Jacob, 93–94, 122, 140, 214
- Nachträglichkeit*. See deferred action  
Nachtsheim, Hans, 85  
narcissism, 200–201  
Nathow, Rainer, 142–143, 144f  
National Socialist Teachers' League, 69  
*The Nature of Prejudice* (Allport), 115  
*Nazimordaktion T4* (Nazi Murder Program T4, 1973) (Kaul), 172  
Nazis and Nazism: fascism (term) and, 198; narcissism and, 200–201; propaganda and, 92–93, 112, 152, 201, 204–205, 285n22; racism, 104; reproductive politics, 104; resistance to, 13–14, 87, 99–100, 112, 173, 178; sexual politics, 201; weakness and, 134, 198  
Neill, A. S., 125  
Neuendettelsau, 65f, 258n61  
*New York Times*, 2  
Niemand, Fritz, 106–107, 260n74  
Niemöller, Martin, 78  
Nietzsche, Friedrich, 39  
Nirje, Bengt, 269n75  
normalization model, 146, 194, 269n75  
Nowak, Klara, 106–107, 259–260n74, 274n120  
Nuremberg Laws, 80, 92

- Oberlinhaus, 262n62
- Ochs, Hermann Josef, 229–230n35, 230–231n42, 236n70
- Operation Reinhardt, 1
- “Ordinance on the Further Improvement of Social Support for the Most Severely and the Severely Impaired Citizen of July 29, 1976,” 163
- The Origins of the Nazi Genocide* (Friedlander), 2
- “Our Walter” (Unser Walter) TV series, 94
- Panorama*, 151–152
- parents, 37, 86, 102, 127–128, 132, 151, 161f, 165–167, 176f, 190, 214, 221n14, 241n9, 254n11, 291n56; activism of, 93, 117–118, 129, 134, 151–152, 168; blame of, 12, 41–42, 57–58, 115–116, 119, 185, 236n65, 240n1; support for, 160, 190, 192, 268n67, 281n77
- Pensionate, 5
- Permission to Annihilate Life Unworthy of Life. See *Die Freigabe der Vernichtung lebensunwerten Lebens*
- Peter (Samariteranstalten), 184–185
- physicians, convictions of, 79–87
- Pirna-Sonnenstein, 188, 279n52
- Pius XI, Pope, 66
- Plötz, Alfred, 40, 238n81
- postfascism, 4, 6, 9, 13, 111, 128, 134, 137, 141–142, 151
- poverty, 5–6, 15, 20, 36–38, 41–43, 45, 69, 116, 121, 130, 199, 236n69, 290n53
- Presber, Wolfgang, 155
- Prichard, J. C., 235n65
- Das Problem der Abkürzung “lebensunwerten” Lebens* (The Problem of Abbreviating Life “Unworthy” of Life) (Meltzer), 56, 87
- The Problem of Abbreviating Life “Unworthy” of Life. See *Das Problem der Abkürzung “lebensunwerten” Lebens*
- Protestant church: confessions of guilt, 101; human dignity and, 9–10, 155, 192, 198, 215; Klee on, 99–101, 169; resistance to “euthanasia,” 76, 112; residential institutions, 17, 25, 27, 31, 55, 141, 164, 169, 263n7, 286n24; sterilizations and, 48, 60–66, 86, 99, 101–102, 151; theo-biopolitics / theo-bioeconomics, 56, 79, 204–205; theologians justifying “euthanasia,” 56, 87. See also *Diakonie*; *Inner Mission Psychiatrie-Enquête*, 94, 118, 141, 165, 265n24, 270–271n85
- psychiatry and psychiatrists, 6, 8, 17–18, 36–38, 84–85, 88–94, 101–102, 169–171, 233n61; “mis-location” of intellectually disabled and, 136, 141, 145, 165, 271n86. See also “Democratic Psychiatry”; Dörner, Klaus; Ehrhardt, Helmut; Kraepelin, Emil; *Psychiatrie-Enquête*; Schmidt, Gerhard; Schneider, Carl; Späte, Helmut F.; Wauschkuhn, Eugen “psychopathic inferiority,” 8, 37, 48, 58, 119, 235–236n65, 236n66
- race and racism, 35, 88, 91, 93, 209, 256n38, 290n53; definition of, 78, 84–85, 91, 93, 101–109, 199–201, 244–245n27, 259n66; “race-mixing” and, 66, 74, 238n81
- racial hygiene (*Rassenhygiene*), 17, 40–45, 49, 63, 68, 84, 204. See also eugenics
- Radtke, Nati, 150–151, 154, 154f
- “The Reciprocal Relationships Between Mental Inferiority and Social Misery” (Breitbarth), 41–44
- Recommendation of the Educational Commission for the Pedagogical Development of Children and Youth with Disabilities and at Risk of Becoming Disabled* (Muth), 94, 122–123, 266n39
- rehabilitation pedagogy (*Rehabilitationspädagogik*), 159, 276n23
- remedial education (*Hilfsschulpädagogik*), 5–6, 24, 128, 134, 202; competition with residential institutions and, 29, 31–33, 48, 231n49; condescension toward pupils, 32, 41–45, 112; early initiatives in, 22–23, 226–227n18, 232n59; eugenics and, 68–70; professionalization and expansion of, 32–37, 204; scholarship on, 17, 32. See also special education (*Sonderpädagogik*)
- reparations law, 80, 84–86, 101–102, 103f, 105–108, 199, 208
- residential institutions: administration and funding of, 20, 27, 36, 49–50, 141, 146, 233–234n61; Catholics and, 9–10, 16, 27–29, 31, 141, 169, 215, 228n26, 230n40, 233n61, 236n67, 236n70, 251–253n82,

- 252n83, 255–256n26, 262–263n7, 277n26;  
conditions in, 94, 115, 141–142, 147, 161f,  
164, 166, 168–170, 208–209, 220n11, 262n3,  
262–263n7, 286n24, 292–293n62; differential  
care within, 25, 28–31, 114; early initia-  
tives in, 22–23; expansion of, 6, 20, 30–31,  
35–37, 204; exploitation within, 29–30, 114;  
fictions of “welfare-luxury,” 49; inspira-  
tional examples of, 179–196; preoccupa-  
tion with “usefulness,” 24, 27–29; role of  
faith in, 26, 40f, 237n77; scholarship on,  
17. *See also* Abendberg; Alsterdorfer An-  
stalten; Asbacher Hütte; Bad Kreuznach;  
Bethel; Bruckberg; Ecksberg; Eglfing-  
Haar; Franz Sales Haus; Katharinenhof;  
Künausche Gründung; Neuendettel-  
sauer Anstalten; Samariteranstalten;  
Stetten; Wittekindshof
- “The Responsibility of Socialist Society”  
(Späte and Thom), 171–178
- Riemann, Dietmar, 179–186, 182f, 183f, 187f,  
188f, 189f. *See also* *Was für eine Insel in was  
für einem Meer*
- Rösch, Carl Heinrich, 22
- Roser, Ludwig Otto, 139–140
- Ruoff, Heinrich, 73f
- Saegert, Carl W., 22
- Sagerer, Alexej, 263n9
- Samariteranstalten, 179–186, 182f, 183f, 187f,  
188f, 189f
- Sartre, Jean-Paul, 130
- Schiller, Friedrich, 158
- schizophrenia, 8, 73f, 84, 105–106, 127, 177,  
286n24
- Schlaich, Ludwig, 73–74, 76–77, 86–87, 146,  
256n27. *See also* *Lebensunwert?*
- Schlaich, Peter, 146
- Schloßbauer, Sieglinde, 195f
- Schmidt, Gerhard, 89–93, 104, 109, 200,  
256n35, 256n39. *See also* *Selektion in der  
Heilanstalt*
- Schmidt, Hans-Georg, 286n24
- Schmidt, Walther, 80, 81f, 82f, 83f, 253–254n11,  
253n9
- Schneider, Carl, 246n38
- Schöler, Jutta, 214
- Schreiner, Helmuth, 245–246n33
- Schwäbische Illustrierte*, 81f, 82f, 253–254n11
- Schwan-Steglich, Brigitte, 75f
- Séguin, Édouard, 23, 227n18
- Seidel, Michael, 287n32
- Seifert, Ilja, 209, 212
- Seim, Jürgen, 258n64
- Selection in the Asylum. *See* *Selektion in der  
Heilanstalt*
- Selektion in der Heilanstalt* (Selection in the  
Asylum) (Schmidt), 89–93, 90f, 200
- Sengelmann, Heinrich Matthias, 17,  
51–52
- sequentiality thesis, 2, 4, 172, 200, 219n3
- sex: and erotic charge of eugenics, 40–41,  
201; of perpetrators, 98; sexual disorder  
of Weimar and, 57–58; sexual exploita-  
tion versus safety and, 30, 230–231n42,  
246n37; and sexuality of others, 12, 34, 47,  
55, 57–61, 86, 99, 151, 153, 193, 205, 230n40,  
236n66, 244n24, 246n37
- sex rights activists, 282–283n1, 283n9
- Shaw, George Bernard, 241n8
- Sichel, Max, 227n19
- Die 7 Tage*, 254n11
- Sierck, Udo, 150–152, 154, 154f
- Singer, Peter, 154, 207
- “Snake Pits in Our Land” (Just), 286n24
- Sobibor, 1
- socialist humanism, 158–159, 179
- Socialist United Party (*Sozialistische  
Einheitspartei Deutschlands*) (SED):  
antifascism and, 171, 178, 198; intellectual  
disabilities and, 155–168, 170, 178, 196.  
*See also* German Democratic Republic
- Socialization and Disability. *See* *Sozialisa-  
tion und Behinderung*
- Sozialisation und Behinderung* (Socialization  
and Disability) (Jantzen), 131
- Späte, Helmut F., 171–178, 198–199
- special education (*Sonderpädagogik*), 206,  
207; differentiation within and expansion  
of, 112, 117–121; radical activist movement  
within, 124–134, 135f, 139–140; segregation  
of disabled and, 94, 118–119, 122–124, 135,  
139, 146, 151, 213–214, 290n53, 291n56,  
291–292n60. *See also* rehabilitation peda-  
gogy; remedial education
- Der Spiegel*, 87, 114, 153, 154f
- Spinoza, Baruch, 130
- Spitz, René, 130

- St. Nicolaus Kirche, 211*f*  
Steglich, Wulf, 73*f*  
Steinbiss, Walter, 242–243*n*18  
Steiner, Gusti, 152, 257*n*47  
sterilizations: criticism of, 60–62, 106–107; defense of, 60, 80, 84–86, 105–106; Federation of Those Harmed by “Euthanasia” and Coercive Sterilization (*Bund der “Euthanasie”-Geschädigten und Zwangssterilisierten*), 106; Nazi program of, 3, 61–64, 67, 70, 74, 80, 84–86, 92, 99, 101–109, 103*f*, 159, 200; postwar years and, 102, 151–153; survivors of, 101–102, 103*f*, 106–107; United States and, 249*n*64. *See also* Catholic church: Protestant church  
*Stern*, 168  
Stetten, 46, 71, 73, 76–77, 86–87, 146  
Stiftung Anerkennung und Hilfe (Foundation for Recognition and Assistance), 208, 277*n*26  
Stoevesandt, Karl, 62–63  
Stoppenbrink-Buchholz, Frieda, 250*n*70  
Straßmann, Ferdinand, 249*n*60  
“structures of feeling,” 12  
Strümpell, Ludwig von, 235*n*65  
stumbling-stones, 208  
Stutte, Hermann, 264*n*19  
*Summerhill* (Neill), 125  
swastikas, 65*f*  
T4 gas chambers: overview, 219*n*1; Bernburg, 171, 178; Grafeneck, 46, 71, 73–74, 96, 100, 186, 219*n*1; Hadamar, 71, 72*f*, 73*f*, 178; halt of, 1, 14; Hartheim, 251–252*n*82; memorial center in Brandenburg, 208; Pirna-Sonnenstein, 188, 279*n*52  
Talkenberger, Wolf-Dieter, 173  
Thadden, Ernst-Dietrich von, 265*n*23  
Thadden, Franz-Lorenz von, 118, 265*n*23  
thalidomide, 147, 207–208  
“the idiot-question” (*die Idiotenfrage*), 18  
theo-biopolitics / theo-bioeconomics, 56, 204  
“Theses on Feuerbach” (Marx), 131  
Thom, Achim, 172–179, 198  
Tillmann, Friedrich, 88  
Tippelt, Winfried, 194  
Titius, Arthur, 56, 245*n*29, 252*n*6  
Treblinka, 1  
Treysa Resolution, 59–60  
Trogisch, Jürgen, 188–196  
Trogisch, Uta, 188–196  
Trüper, Johannes, 235*n*65  
Uckermark-Grundschule, 135*f*  
Ueckerkunde, 169  
Ulbrich, Martin, 245*n*31  
Ulli (Samariteranstalten), 184, 188*f*  
UN Convention on the Rights of Persons with Disabilities (UNCRPD), 10, 212–214  
UN Year of the Disabled, 150, 192  
Unworthy of Life? *See Lebensunwert?*  
U.S. Holocaust Memorial Museum, 2  
usefulness (*Nützlichkeit*), 6, 24, 27–29, 44–45, 49, 117, 156, 167, 226–227*n*18, 230*n*40, 249*n*59, 253*n*7. *See also* work-capacity  
Van de Put, Suzanne, 86  
Villinger, Werner, 85, 255*n*18, 264*n*19  
Vygotsky, Lev, 129, 132, 267*n*1  
Wahlmann, Adolf, 73*f*, 241*n*7  
Walter, Franz Xaver, 67–68, 248–249*n*59, 249*n*60  
Walter G. (Hadamar), 72*f*, 73*f*  
*Was für eine Insel in was für einem Meer* (What kind of island in what kind of sea) (Fühmann and Riemann), 179–186, 182*f*, 183*f*, 187*f*, 188*f*  
Wauschkuhn, Eugen, 249*n*60  
Weber, Mathilde, 80, 253*n*10  
What kind of island in what kind of sea. *See Was für eine Insel in was für einem Meer*  
Wilberforce, William, 21*f*  
Williams, Raymond, 12  
Willig, Karl, 73*f*  
Wittekindshof, 19*f*, 262*n*62  
Wittneben, Wilhelm, 248*n*54  
*Die WohlTÄTER-Mafia* (Radtke and Sierck), 151–153  
work-capacity, 8, 49–50, 70–71, 250–251*n*73, 279*n*54. *See also* usefulness (*Nützlichkeit*)  
World War I: malnutrition and, 53; national defeat and, 44, 49–50, 92, 204  
Zabel, Walter, 94  
*Die Zeit*, 4, 286*n*24  
*Zeitschrift für die Behandlung Schwachsinniger und Epileptischer*, 33