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The Nazi ‘Euthanasia’ Killings: The Long Shadow of History

A collaborative text production

Rainer Schulze

Introduction

The victims of the Nazi Euthanasia killings are arguably the most forgotten or overlooked victims of Nazi racial and population policies. Very few of those targeted survived, and those who did left no testimonies: With the all-pervading view that disability and mental illness was something to be ashamed of, families hid the fate of those murdered just as much as they hid those disabled people who survived the Nazi Euthanasia killings.

In his 1995 study on the origins of the Holocaust, Henry Friedlander sets out clearly in the foreword that his research had led him to understand that the Euthanasia killing programme was “not simply a prologue but the first chapter of Nazi genocide”. The motivation behind the mass murder of disabled people was “an ideological obsession to create a homogeneous and robust nation based on race”: The killers “wanted to purge the handicapped from the national gene pool.” The ‘euthanasia’ killing programme “served as the model for all Nazi killing operations.” (Friedlander, 1995, pp. xii & xiii) However, for a long time Friedlander’s findings, based on meticulous and rigorous archival research, were all but ignored in Holocaust discourse, and disabled people hardly featured at all when the Holocaust was discussed – and this still holds true today.

On 10-12 June 2016, the Gedenkstätte Haus der Wannsee-Konferenz in Berlin hosted an international symposium which aimed to change this. Taking its cue from volume 5 of *The Holocaust in History and Memory* (Schulze, 2012) which focused on the Nazi ‘euthanasia’ killings with contributions by disabled and non-disabled scholars and activists, the Berlin symposium brought together scholars from a wide range of disciplines, Holocaust educators as well as some disability activists to discuss the linkages between the ‘euthanasia’ killings and the Holocaust. However, even Hans-Christian Jasch, the then director of the Gedenkstätte and official host of the symposium, admitted that the symposium was only partially successful in achieving one of its main goals: the inclusion of the disability community (Jasch, 2016, p. 8).

The symposium featured a special panel discussion with representatives of the German disability community about the ‘Long Shadow of the Nazi Euthanasia Killings’, but it turned out to be much too short to discuss all

the points that needed to be raised. Moreover, the panel had been scheduled for Sunday morning, the last day of the conference, when a number of the main academic discussants of the previous two days had already left, and it took place in Brandenburg an der Havel, some 90 kilometres away from Berlin. Brandenburg was the site of one of the Nazi 'euthanasia' killing centres, but it is not easily accessible, especially not for disabled people.

The symposium showed that we are still on a learning curve: both in terms of the subject matter, but also in terms of collaboration on an equal footing between mainstream academia and the disability community—auf Augenhöhe, as the German saying goes, and this is meant quite literally, too: step-free access, enough space for wheelchairs, signers, hearing loops or closed captioning. All of these should have been a matter of course if the conference wanted to include the disability community. The symposium's organising committee should have included at least one member of the disability community, preferably more. Despite best intentions, unconscious (or not so unconscious) marginalisation did happen – both in organisation and implementation of the symposium and, even more worrying, in the main narratives that were presented. It was too much talking about disabled people, in some instances without ever having met one, than talking with disabled people. We all need to do better.

In the following, participants of the Sunday panel discussion on the 'Long Shadow of the Euthanasia Killings' summarise their statements. Originally, this article was written for the journal *The Holocaust in History and Memory* but due to funding cuts this journal had to cease publication.

It took almost nine years until we found a new opportunity to publish the article, and we are grateful that the *Zeitschrift für Disabilities Studies* agreed that the main arguments which we had set out had lost nothing of their relevance – if anything, they have become even more relevant in the light of recent developments in Germany, the United States and other countries. The authors updated their texts where necessary.

The only author who was not part of the conference was Liz Crow. However, we screened her film *Resistance* at the symposium's public event at the Charité - Universitätsmedizin Berlin on Saturday evening as part of Berlin's 'Long Night of Sciences', and this screening showed that it required more contextualisation for a Berlin audience to fully appreciate the importance of this film.

We want to combine these statements with a look ahead: what needs to be done to include disability into mainstream history, and here in particular into the narrative of Nazi racial and population policies? We need to know our history in order to act responsibly and effectively in the present whenever and wherever rights for disabled people are challenged or threatened. The history of all groups of the population are interrelated, no group stands on its own. Or to quote Henry Friedlander (1995, p. 302) once more:

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

Swantje Köbsell

The (West-)German Disability Rights Movement and the 'Euthanasia' Killings

Since its early days, history has played a crucial role in the (West-)German Disability Rights Movement¹. In the 1970s, when disabled people in Germany started founding groups to fight paternalism, medicalisation

and heteronomy, the Nazi crimes against disabled and sick people were still covered up in silence. While some of the perpetrators were tried in court, the majority were still at large, some with, some without knowledge of the authorities. Some of them lived and worked under the cover of new names, others unabashedly continued their careers in post-war Germany.

One prominent example is the paediatrician Werner Catel (1894-1981) who was one of the three T4 'experts' of the Reich Committee for the Scientific Recording of Hereditary and Congenital Severe Diseases (Reichsausschuss zur wissenschaftlichen Erfassung erb- und anlagebedingter schwerer Leiden). Catel did not only decide on the life or death of disabled children, but killed these children himself (Topp, 2012). After the war he did not deny his role in the killings but in fact justified them (Topp, 2012). In 1949, the district court in Hamburg refused to open court procedures against him because the ending of 'lives not worth living' was – in the court's view – not opposed to general moral law. Subsequently Catel became director of the University of Kiel's children's hospital. He never renounced his conviction that certain children should be 'euthanised', and he died in 1981 an honoured citizen (Sierck & Radtke, 1984, p. 98-99).

The societal discourse about the crimes committed against disabled people started only in the early 1980s, triggered by Ernst Klee's book on the Nazi crimes against disabled people (Klee, 1983) which was soon followed by the publication of 'Die Wohltätermafia' ('The Mafia of Benefactors' Sierck & Radtke, 1984). Written by two members of the Hamburg Krüppelgruppe (cripples' group), a nucleus of the German disability movement, this book dealt with the historical continuities in eugenic thinking and acting towards disabled people from the beginning of the nineteenth century. Analysing the careers of post-war doctors and other disability 'experts', the authors could show that and how Nazi eugenicists ('racial hygienists'), some of whom had actively been involved in the crimes, survived the Denazification process without any problems, continued their careers and even became 'benefactors' of disabled people like Werner Villinger (Sierck & Radtke, 1984, p. 85-86). A few became involved with organisations for disabled people, while others lectured at universities or became very influential in establishing human genetic counselling for the German population – eugenics in a new guise.

Human genetics, founded as a new discipline in 1965, for a long time did not challenge its ancestry and its founding fathers but continued to promote eugenic thinking in so far, as their scientific activities were aimed at preventing what was now defined as an individual condition and not as a threat to the Volkskörper. In times where genetic testing was still in its infancy genetic counselling aimed to reduce disabled offspring by identifying the exact risk factor of certain couples to produce disabled children. Though officially introduced to support female reproductive self-determination, the offer was still aiming at the eugenic goal of avoiding the birth of 'defective' children who eventually would – through the achievements of modern medicine – be able to pass on their 'defective' genes. Cost-benefit analysis also played an important role in the establishing process (Degener & Köbsell, 1992).

The continuity of eugenic thinking was also evident in the practice of sterilising young disabled people, mostly girls, even though it was illegal (Köbsell, 1987, p.7). But as none of the persons involved – neither parents, nor doctors, nor the staff of institutions for disabled people – was interested in making this practice public it continued unchallenged well into the 1980s. In 1984, some activists from the disability movement played an instrumental role in disclosing this scandal and the scandalous practice of some human geneticists who wrote expert reports recommending the sterilisation of very young cognitively impaired girls (Köbsell, 1987, p.7). Once the practice was in the open it became evident that a legal regulation was needed. The disability movement together with survivors of Nazi eugenics and their supporters strongly opposed any legalisation of sterilisation based on disability. The law which was passed in 1992 prohibited the sterilisation of persons underage but allowed it under certain conditions for 'persons unable to consent' aged older than 18.

On the backdrop of German history, the disability movement has been very vigilant regarding eugenic practices in any guise – be it prenatal testing, the allocation of medical services according to quality adjusted life years (QALYs) or medically assisted suicide. Many activities were organised on this background, for example a 'die-in', challenging a popular promoter of assisted suicide who used disabled people for his advertising. In 1989, the Australian ethicist Peter Singer, who claims that killing cognitively impaired people

is not a crime because they are no persons (Singer, 1979), was invited by the biggest German organisation for cognitively impaired people (Lebenshilfe) to deliver a paper on the right to life for severely impaired infants. Once this invitation was made public, the disability movement and their allies set up a public campaign against him speaking publicly on this topic. The campaign succeeded and Singer was disinvited.

However, not every campaign against Singer talking publicly about his life threatening 'philosophy' was as successful. In May 2015, the 'Association for the Promotion of the Peter Singer Prize for Strategies to Reduce the Suffering of Animals' strangely made Singer himself the first awardee in honour of his contributions to the advancement of animal rights. The worrying aspects of these 'achievements' were hardly mentioned: Singer divides humanity into persons and non-persons, and only persons have human rights. The final consequence of this kind of thinking, the negation of the human rights of so-called non-persons, is that the killing of non-persons does not constitute a crime.

A coalition of members of the disability movement and their allies was quickly formed, demanding the cancellation of the event. In the end, Singer received his award, but the intended orator retracted after Singer had given an interview to the renowned *Neue Zürcher Zeitung*, during which he openly talked about his position regarding the human rights of disabled infants and old people who become a 'burden' to others (Streeck, 2015). Subsequently, he was also disinvited from an influential philosophers' congress.

The German disability movement has a strong record fighting the division of humanity into persons and non-persons. In 1997, the Council of Europe issued their Bioethics convention which allowed non-beneficial research on persons unable to consent as well as them donating 'expendable' body parts. Here again, the disability movement was a central part of a coalition of a range of organisations which opposed this convention. They were successful insofar as Germany never signed, let alone ratified it. But nevertheless, on 18 November 2016 the German parliament passed – against a rather muted protest – legislation that allows for non-beneficial research on persons living with dementia.

It took a long time for post-war German politics and society to recognise disabled people as victims of Nazi persecution. It was only in 2007, 62 years after the end of WW II, that the German parliament declared the Law for the Prevention of Progeny with Hereditary Diseases (*Gesetz zur Verhütung erbkranken Nachwuchses*) of 14 July 1933 as inherent Nazi injustice. Nevertheless, the victims of this injustice were not officially recognised as victims of Nazi persecution and are not entitled to any compensation, even though the *Arbeitsgemeinschaft Bund der "Euthanasie"-Geschädigten und Zwangssterilisierten* (Association of 'euthanasia' victims and forced sterilised persons) fought for this for more than 40 years (BEZ, 2024). The national Gedenkort T4 (Memorial and Information Point for the Victims of National Socialist 'Euthanasia' Killings) in Berlin was only opened as late as 2 September 2014, the last of the four memorials to the victims of the Nazis' racial and extermination policies in the German capital². And it was only in 2016 that for the first time a motion picture, which dealt explicitly with the issue of 'euthanasia', was launched and shown in mainstream cinemas (*Nebel im August – Mists in August*, for more see Susanne Knittel's text). But even here, the thirteen-year-old protagonist is not a disabled person, thus he is 'wrongly' killed. All this, as well as still occurring comments like 'someone like this would have been killed under Hitler' – and very recently stones thrown at an institution for disabled persons with the message 'euthanasia would be the solution' – show a deep-rooted everyday eugenic thinking which still sees disabled people, and especially mentally or intellectually impaired people, as lesser humans or even non-persons whose life is not worth living.

Recent developments show that vigilance on the movement's part concerning life-denying developments for disabled people is more than necessary. We live in times where paradoxically disabled people have more legal rights than ever before, but at the same time the results of genetic research and the discourse on the right to a self-determined death are threatening the very existence of disabled people. In public discourse, 'inclusion' is the dominant topic, but the average person's view of disability is still very much informed by ableism which leads to negative, neo-eugenic attitudes.

Here, two very recent developments must be mentioned in particular: The financing of prenatal blood tests by the statutory health insurance funds since June 2022, and the repeal of the ban on medically assisted

suicide by the Federal Constitutional Law in 2020, calling for legal regulations that have not yet been implemented. Both decisions have the potential to reinforce ableist thinking and work to the disadvantage of people with impairments – before birth and during the life course. With the funding of the prenatal blood test by the health insurances at an early stage of pregnancy, disabled people fear that the termination of pregnancies with supposedly 'defective' fetuses become more and more the rule. This curtails the freedom of choice of expectant parents and reinforces the ableist assumption that 'such a thing' is no longer necessary today. And in a situation of tightening economic conditions, which, among other things, lead to a reduction in assistance services, medically assisted suicide may be promoted as the best solution as compared to a life without adequate support, thus saving a lot of money in the health and social sector, as we can already observe in Canada (Fuchs, 2024).

On the backdrop of the German disability movement's history, it would have been expected that there would also be resistance to these two measures. Unfortunately, there were only a few critical voices – none of the self-representation organisations issued a critical statement or protested publicly against these political decisions. We can only speculate as to why this is the case - perhaps over the years we have lost the belief that we can do anything to counteract the effects of this deep-seated ableism. Nevertheless, there are a few stalwarts who continue to be active here and whose activities will hopefully inspire others to combat the dangers that arise here for disabled people.

Matthias Vernaldi³

The Invisibility of the 'Euthanasia' Killings in the German Democratic Republic

I was born in what was then the German Democratic Republic (GDR), or East Germany, 14 years after the end of the Second World War. A decade later, when I was beginning to develop an interest in the world, the Nazi period had been over for a quarter of a century. In official GDR speak, the term 'National Socialism' was rarely used, at best – if at all – the abbreviation 'Nazi'. Instead, the official term was Fascism, or more likely, Hitler Fascism.

Throughout my childhood there were plenty of pictures from that time. They were broadcast on Saturday afternoons, and the cinema of the state-run home where I spent my first seven school years showed them in colour. In addition, our relatives and neighbours as well as the home's nurses and educators accompanied this with their stories.

Gradually, I understood that the pictures in the films and in the history books told the same stories as the people around me. Also, I realised rather late that the day of liberation was identical with the day of the so called 'collapse', and that the 'glorious Soviet Army' was identical with the Russian soldiers.

We watched the Polish TV series 'Vier Panzersoldaten und ein Hund'⁴ on GDR TV as enthusiastically as the US series 'The Virginian'⁵ which was broadcast on West German TV. But we liked films set in concentration camps best. 'Nackt unter Wölfen' (Naked Among Wolves)⁶ had more to do with us than soldiers, partisans or members of the resistance.

However, nowhere were any disabled people: not among the masses hailing Goebbels, and not on the narrow staircase leading into the shelter during an air raid warning either. For the most part, we did not even notice. And if we had, we did not ask. And in any event, asking generally was not welcomed.

The GDR defined itself as anti-fascist. This definition was the state-defining credo which served to locate the crimes and those responsible for them as well as the continuity of the underlying attitudes in the Federal

Republic of Germany (FRG), while the GDR took possession of the resistance and the victims. It went without saying that these were first and foremost the communist resistance and communist victims. That there had also been resistance from the churches was not even mentioned. The Jewish victims at least were mentioned in our history lessons, but neither were Sinti and Roma and much less homosexuals, 'the work-shy' or prostitutes. The same happened with disabled and mentally ill people.

I spent my last school years in an ecclesiastic institution, the Marienstift in Arnstadt, Thuringia. It was less secluded than the state-run institution of my early schooling – on the one hand because it was in the middle of the town and on the other because their perception of human beings differed considerably from that of the Socialists.

The socialist body ideal was – albeit less strong towards the end – informed by the image of the revolutionary hero who became a highly motivated and powerful worker in Socialist society, where revolution was not needed anymore. Once in the mid-1960s the 'Eye Witness', the GDR's newsreel, came to Marienstift to shoot a feature – at least an attempt towards the visibility of disabled people. When the shooting was about to start, the responsible reporter asked the director to send the disabled children to bed and to make sure that they were covered with blankets up to their shoulders. The director in return asked why they would not film the children outside in the afternoon, talking and laughing and playing crutch football? 'These bodies do not fit the picture of socialist optimism', was the reporter's answer. The feature was never made.

The director deserves the credit that at the age of 14 I knew what the elderly worker meant when he patted my cheek and said, 'Something like you would have been sent into the gas by our Führer.' This director had seen to the mounting of a brass plaque in the newly built institution's foyer which showed at the top 'Friedrich Behr', below that in small script the dates of his birth and death and below that in medium sized letters: 'Father of the Physically Disabled'. This in itself was no reference to the Nazi 'euthanasia' programme. Initially, it led staff to modify the joke about the 'great lovers': The 'Father of the Disabled' was added to Napoleon who spent 6 years on Helena, and Stalin who was the father of all working-class people. It took us some time to understand this joke, but once we had realised that being a father meant having had sex with the respective mothers, we smirked a lot.

In our confirmation classes the director explained why he had mounted this honorary plaque for his father, from whom he had inherited his post. We then heard about the mass murder committed on people like us. 'Only over my dead body', his father had said when the fascists demanded to have children from the Marienstift assessed as 'not worth living', classified and handed over to them.

At the time, Heinrich Behr perfectly conformed to the image of a director of an institution: He appeared to be distinguished as well as reserved. He was committed to his boarding pupils while being distant at the same time. Something like loving fatherly closeness was unknown to him. Only with Rudi things were different. Rudi was approximately the same age as the director and had been living in the institution from early childhood on. While the director's face with the gold-rimmed spectacles gave a very intellectual impression, Rudi never left any doubt about being intellectually less gifted. When performing guided tours or showing a slide show the director loved to use Rudi as focus of jokes. After having called him to his side, he put his suit-clad arm around the sweater-clad shoulder of the distinctly smaller Rudi, telling the audience that Rudi was the person who had lived longest in the institution and joked with him. This attention always led to heavy laughing, leaps of joy and loud, mostly undiscernible mumbling on Rudi's part. Only much later did I learn that Rudi had been castrated as an adolescent.

Still later, I learned, from Western sources, about the state-sanctioned sterilisation programme in the run-up to the 'euthanasia' killings, as well as about the fact that since the turn of the century disabled men had been castrated in church-run institutions.

More and more often our gaze wandered towards the West. More and more we were seeking contact after realising that the 'cripples' movement there had triggered a societal discourse on disability which opened our horizons as well and led to a new assessment of our situation. There, the Nazi mass murders of disabled

people were not just viewed as a historically singular failure of the welfare system but as the disastrous consequence of the degradation, exclusion and internment of disabled people by the welfare principle.

Even later, only in the new millennium, did I get to know about the initiative of Helmut Späthe, the former head physician of the psychiatric hospital in Bernburg (Saale) which had been used in the early 1940s as a killing centre for the 'euthanasia' programme. On Späthe's initiative an exhibition about this crime had been set up in the hospital's basement in the late 1970s, followed ten years later by a commemorative plaque. This came as close to public commemoration in the GDR as one would get – but both exhibition and commemorative plaque literally led a cellar life. In 2012, in an interview for Mondkalb, a disability magazine, Späthe talked about how he had once been invited by the local group of the Nazi survivor's organisation VVN⁷ only to be accused of having defiled the memory of the murdered comrades by linking them with patients with mental disabilities.

Liz Crow

A View from Britain

I am a British artist, working with film, audio, text and performance, and an activist, as well as a disabled woman. Through my work, I explore and represent the world around me, using story and symbol as tools for change.

Some 30 years ago, I read *By Trust Betrayed*, a book by Hugh Gallagher that told of the events of Aktion T4, the Nazi programme of mass murder that was targeted at disabled people (Gallagher, 1995)⁸. The first thing to strike me was, how in all my years of involvement in the disabled people's movement had I never come across this history before?

Two things especially stayed with me from reading that book. The first is that the values that permitted Aktion T4 to happen feel eerily familiar and alarmingly contemporary. From one of the darkest episodes of history, these values still reverberate through disabled people's lives today. The second is that a brief, yet very powerful, section of the book spoke of people, including disabled people, who resisted. Imagine being in an institution and made dependent on staff for your every need, whilst knowing those same staff are pivotal in your survival or demise. To resist in those conditions inspires awe.

I knew I needed to do something with what I had read, to take the history and its relevance out to a wider public. Though it took time to find its form, over several years the Resistance project emerged. The final work comprised a film-based installation, incorporating historical drama and contemporary documentary, that toured to 11 galleries in the UK and internationally, as well as a high-profile performance piece that challenged historical values and their echoes⁹.

During the research phase of Resistance, I visited institutions in Germany where the Nazi 'euthanasia' killings took place, in order to try to reach some understanding of the how and why of it all. What was it about this history – which happened in another country and some generations ago – that made it imperative to invest so much time and energy in the project? What did – and do – I hope to achieve?

First, I wanted to draw attention to a hidden and overlooked history and to commemorate the people who struggled and died through it. Equally important, and more urgently, I wanted to make apparent the long shadow that connects this extreme, stark episode of some 70 to 80 years ago with today.

Resistance is based on extensive research, drawing on key historical texts, archives, artefacts and transcripts as well as the visit to killing centres. To look more closely at the events of the past is to realise that they were not specifically of Germany or the German people. Germany was, notably, a pioneer in disabled people's rehabilitation and self-advocacy in the aftermath of the First World War (Poore, 2007). However, an international eugenics movement was gathering pace the 1920s and 1930s, particularly in Europe and the US (Snyder & Mitchell, 2006), where population control laws were passed rooted in the notion that certain human characteristics – and, ultimately, certain human beings – are of greater or lesser value than others.

The simultaneous global economic crisis opened vulnerabilities amongst populations that were readily exploited for political gain. It was Germany, particularly hard-hit in this crisis, that, through the rise of Nazism, turned eugenic ideology into systematic and state-sanctioned mass-murder. The values underpinning it, however, and indeed aspects of the practices, were widespread and established internationally. Turning to current times, while there are risks in making absolute comparisons with historical events, to look at the values that preceded and permitted the Holocaust, is to note their similarity. The universality of values, and the 'ordinariness' of so many swept up in events – victims, perpetrators and bystanders – makes the Holocaust relevant to us all, then and now.

In making Resistance, I set out to create a starting point for audiences, a moment for them to connect through the work to consider what this history means for them and ask of themselves how they might be a contemporary resistance.

Towards this, I set out to move audiences beyond notions of victims and statistics to flesh and blood people that they – we – can relate to and feel for. The walls of the killing centres were lined with portraits of those who were killed there, and these were reflected in Resistance. To look at the portraits was to look at all of us: all ages, different ethnicities, different classes, women and men. To look round at other disabled people working with me on the project was to realise with a chill that we, too, would have been there.

In taking Resistance to the public, more than with any other work I have made, I realised it is this emotional investment – this visceral connection from individual story to larger political events – that forms the core of an audience's commitment to being a part of change. In representing disabled people's lives, I wanted us, as disabled people, to recognise our selves and find solidarity and momentum in that, and I wanted others to witness our lives and gain direction for change.

As Resistance toured, it made that connection with audiences from 11-year-olds and into old age, people a lifetime away from the events it describes and others who survived the larger Holocaust, people for whom the experience is far from their own and others who profoundly recognise their own lives in the work. When Resistance audiences articulated their response to the work, they typically use the language of cognition ('I never knew...'), yet it is quickly clear that it is feeling that drives their connection to the issues raised and their realisation of personal responsibility in seeking solutions.

Working with other disabled people throughout Resistance made its contemporary relevance utterly clear: that the values underpinning the Nazi programme are still very much present. Day after day, in working on Resistance, those of us who made or encountered the work would point to events in our own lives or in the public sphere that underlined the necessity of its message, ranging from the refusal of disabled people on public transport (Perraudin, 2017) to widespread abuse at a care home for people with learning difficulties (Pring, 2021).

In the years that have passed since I began work on Resistance, abuses have become more systemic and its relevance only magnified. The worst global economic crisis since the Second World War has intensified existing social divides. In the UK, alongside immigrants and other marginalised groups, disabled people have become scapegoats for a nation's instability. The Conservative-led coalition government of 2010 introduced a policy of austerity, alongside which government and much of the media portrayed unemployed and disabled people as 'scroungers' and 'shirkers' (Walker, 2012). Hate crime has risen dramatically in the intervening years, heavily reflecting that message (Riley-Smith, 2012), whilst thousands of disabled people

in need of state support have died in connection with austerity (Ryan, 2015). Basic rights to independent living are eroded: Increasing numbers of disabled people with higher care needs facing allocation to residential institutions (Brown, 2017) at the same time as repeated attempts are being made to bring in assisted suicide legislation (BBC News, 2024). With the UK leaving the European Union, human rights protections have become more precarious (Taylor, 2016). The urgency to react, respond, resist, has grown larger.

In making *Resistance*, I have frequently been asked, often with scepticism, whether I really think the Holocaust could happen again. To read *The Ten Stages of Genocide* (Holocaust Memorial Day Trust, 2025) is to understand the Holocaust not as an event, but a process. The German phrase, *Wehret den Anfängen* (Beware the Beginning) underlines that even such magnitude and horror as the Holocaust is built through multiple, accumulated slippages that serve to acclimatise us. It urges us to attend to them. The single offering of the Holocaust is hindsight, which is ours to use. The point is not whether it could happen again, but that failing to heed this warning from history is the most dangerous of all.

Rebecca Maskos

Current Manifestations of Eugenics and Discourses on 'Euthanasia'

In Germany's societal consciousness there is a pervasive notion of a division between the time before the 'Third Reich', and after. The year 1945 marked, allegedly, a zero hour, 'die Stunde Null', something like a tabula rasa starting point: The Nazis had crushed German civilisation, and after that there had been a would-be complete reconstruction, including a new society, an entirely new political awareness and revised ethical values. We have learned our history's lessons, we will never repeat past mistakes – this is the notion that not only politicians and officials, but also the majority of people were and still are convinced of. This belief is at the heart of Germany's national self-image: Supposedly being the 'world champion of overcoming history' ('Vergangenheitsbewältigung') as Hungarian writer Péter Esterházy has put it ironically, Germany's culture of remembrance allegedly has done the job of restoring our international reputation and patriotic pride (Bodemann, 1996).

However, the current political climate in Germany shows that we have never been fully done with the Nazi's ideologies. They always had a history of their own and could never be switched off by new governments. In fact, key ideologies of the national socialist project weren't something its protagonists invented, rather, they picked up on scientific theories that were state of the art by the turn of the century and in the following decades. British anthropologist Francis Galton invented the term 'eugenics' in 1869, meaning a scientific set of beliefs and practices aiming at the improvement of the population's genetic quality and value. He closely linked his theories to the works on evolution of Charles Darwin, explaining societal problems with naturalistic and biologicistic arguments. This 'social Darwinist' idea that 'human stock' could be bred like animal stock was welcomed and promoted by the scientific and political community worldwide. Practical implications suggested a twofold strategy: negative eugenics, which aims at keeping the population of a supposedly lesser genetic value from reproducing, and positive eugenics, aiming at the procreation of the ones of an alleged higher genetic value. German scholars like Wilhelm Schallmayer or Alfred Ploetz, who coined the German term 'Rassenhygiene' ('racial hygiene'), took up ideas like that as well, making way for its realization by Nazi policies. Like in most countries following eugenicist ideas, they were focussing on negative eugenics. Additionally, in 1920, the work of psychiatrist Alfred Hoche and criminal lawyer Karl Binding started an open debate about 'euthanasia' in Germany.

Even though eugenic thinking had a significant impact on policies worldwide, such as sterilisation programs for the alleged 'hereditary weak' and 'sick' parts of the population in the US and Sweden, only Hitler's

Germany put it into practice in a most rigorous way. Starting with the nationwide registration and sterilisation of 'hereditary ill', 'feeble minded', 'antisocial' and alcoholic persons, it moved on to the 'euthanasia' programme Aktion T4, during which 70,000 psychiatric patients were killed in 1940/41 by gas. It ended up in murdering a number of 300,000 people with disabilities and psychiatric diagnoses in total up to the end of World War II. While the sterilisation programme was legitimised by a law passed by the Nazis, the mass killings were officially illegal, having only a specific written order of Hitler from 1939 as its foundation. Even though this led the ones in charge trying to cover up their murderous practice, they were never quite successful – most of the population knew what was going on.

After the Nazi defeat, their racist and biologist ideologies were as present as before. Among them, the eugenic thinking was probably the least questioned or challenged one. This is not surprising, as during the 'Third Reich' the discourse of 'Rassenhygiene' had been unquestioned and ubiquitous – in school books, in cinemas, on the radio. Trials against medical professionals that executed the mass sterilisation and 'euthanasia', mostly ended with mild sentences or acquittals. In a number of trials, experts chosen by the judges were former 'euthanasia' or sterilisation physicians themselves. The public took little interest in the trials, and there was no significant public outcry about the mild sentences. Eugenic principles and ideas went on guiding medical, psychiatric and biological research, questioned only as late as in the 1980s, when activists and experts associated with the antipsychiatry and the disability rights movement started clearing up Germany's past treatment of disabled people and people with psychiatric diagnoses.

It was only then when present patterns of eugenic thinking and practices, all under the auspices of a 'modern' and 'enlightened' medicine, were first questioned and scandalised. Sterilization of cognitively disabled girls and women, often without their consent, went on well into the 1990s, until in 1992 a new legislation banned this practice (even though a lot of disabled women are still talked into sterilization by their physicians, guardians and relatives).

New practices of genetic research and counselling were installed and welcomed by the mainstream public. Practices of prenatal testing, invented in the late 1970s, then only for a very small number of 'high risk pregnancies', were expanded and refined rapidly. Today, every pregnant woman over the age of 35, is cast as having a 'high risk pregnancy'. Almost no pregnancy in Germany is going uncontrolled by medical 'prevention' measures, and a whole arsenal of tests is offered to ensure the mother's and the baby's 'safety'. Non-invasive prenatal tests (NIPT) are able to sequence the foetus' genes out of a small maternal blood sample. They are the latest addition to those prognostic techniques. The ones currently in use are basically searching for chromosomal anomalies, such as Down Syndrome, but blood tests on many other impairments are waiting to be released. Since July 2022, public health insurances in Germany are covering NIPT, which conveys the message that this is more or less a standard procedure in pregnancy care and that it would be a failure, as well as a sign of parental irresponsibility, not to use it. Consequently, since then every second to every third pregnant woman is currently taking the blood test, even though it bears a high risk of false results when the pregnant person is still young. The 'danger' to be prevented with prenatal diagnostic techniques such as the NIPT is the birth of a disabled child, and the only 'solution' is the abortion of the foetus, in case a 'defect' is found. For NIPT, it is yet to be researched if this already leads to a significant higher number of abortions, for instance of foetuses with Down Syndrome, as it is the case in other countries where NIPT has been a standard practice for a longer time than in Germany. Prenatal testing such as NIPT yields no potential for healing or curing the 'defect', even though this impression is usually conveyed. It is almost exclusively about a process of sorting out foetuses of 'lower quality'.

In present Germany of course, this is not phrased that way. Physicians rarely talk about the 'quality' of a child, but rather about a 'quality of life' that a disabled child might not have. Health professionals' common rhetoric is about preventing pain and suffering and 'lives not worth living', for the unborn children and their parents. But unlike during the 'Third Reich', in which the rhetoric of 'acts of mercy' was joined with an imperative of saving society from a burden, in the current version of eugenic ideology, the purpose of testing and controlling is meant to be for the benefit of the individual. It should support them in executing their right to self-determination, to be able to make 'informed decisions'. This though only poorly masks that preventing a societal and economical 'burden' is on officials' and medical professionals' agenda as well.

It is also a similar rhetoric of preventing 'suffering' and ensuring a 'happy' life that is used by advocates for infanticide and assisted suicide. Among the prominent ones is Australian philosopher and Princeton professor Peter Singer (Singer, 1979). His utilitarian ethics is most popular among animal rights activists, but among present advocates of 'euthanasia' as well. His main argument is to replace the ethical division of humans and animals with an ethical division of persons and non-persons. To Singer, only a subject that is conscious about him- or herself counts as a person. Thus, newborns, cognitively impaired and unconscious humans such as comatose individuals can only be judged as non-persons and therefore have a lesser right to life. Parents, in Singer's view, should have a right to end their child's life, if they think its disability is too much of a strain on them. Relatives or guardians of comatose people should also be enabled to exercise a right to end their charges' lives.

Despite widespread criticism of Peter Singer's and his followers' views by disability rights groups, antifascist activists and by the church, Singer still enjoys a huge popularity and is a well-read author in philosophy and ethics classes at universities and colleges worldwide. This might be due to the fact that his work is so easily aligned with widespread assumptions about disability and disabled people's quality of life that is seen as less valuable, less happy, less active. It might also be in line with a notion of disability being fundamentally alien to their own life and to humanity in general. The presence of disabled people, cast so profoundly as 'the other' over the centuries, as the antidote to an autonomous, sovereign civil subject, causes alarm and anxiety, and is best endured if disabled people are either fully able, almost non-disabled, or just absent.

In Germany, this results in various practices of distancing and segregation, such as special schooling or the placement of disabled people in sheltered workshops and residential homes. During the coronavirus pandemic, these facilities became a trap for disabled and elderly people, who were exposed to a high risk of infection, for instance in nursing homes. On a discursive level, the construction of a fixed 'high risk group' or 'the vulnerable' provided a relief for supposedly 'healthy' people 'without pre-existing conditions': 'The vulnerable' primarily included old and disabled people - individuals that are supposedly easy to isolate and 'protect'. Although around 85 percent of people in need of care were living in their own homes during the pandemic, the rhetoric of 'the vulnerable' localized them primarily in nursing and care homes, whose residents were in turn isolated from the outside world – even though no human being can be fully isolated from the 'outside', as we are all in constant exchange with the social world, and be it just a carer at a nursing home that goes home after their shift. But the idea of an isolation idea helped to legitimize the continued operation of the economy and society, on which 'the vulnerable' should no longer be a burden. By declaring disabled and elderly people as the 'real' victims of COVID, especially in the first year of the pandemic, a dichotomy was created between the supposedly 'strong' and 'weak' - despite the fact that it was no less than a fifth of the world's population that was at risk of contracting severe COVID. The myth that COVID was a harmless disease for everyone else and that regular life did not need to stop because of it could therefore be perpetuated. The danger of COVID for everyone and the fear-inducing scenario of infection with a potentially fatal disease could be projected onto 'the vulnerable' alone.

A new version of the social Darwinist argument appeared, in which the 'survival of the fittest' is natural and ideal, while 'the weak' consequently must be left behind. Triage protocols in the medical profession also gave preference to the alleged promising patients over supposedly 'hopeless' ones in times of a lack of medical resources. For instance, the German Interdisciplinary Association for Intensive Care and Emergency Medicine (DIVI) used the 'Clinical Frailty Scale' as a basis for their triage protocol, in which the use of aids such as walkers and wheelchairs is considered as indicator of poor prospects of treatment success (DIVI, 2020; DGG, 2020). Although a lawsuit before the Federal Constitutional Court in 2021, initiated by a group of disabled activists, forced the German Parliament to address the triage regulations, the resulting law has no less social Darwinist implications. Decisions are still to be made on the basis of a 'long term probability of survival', and to whom this is attributed still lies solely in the decision-making power of doctors, who, like most people, might have the same stereotypical and ableist images about the supposedly poor quality of life of disabled people in mind as the general population.

It should therefore come as no surprise that, according to a recent study, many people turn those judgements against themselves and would like to receive 'euthanasia' should they suffer unbearable pain or

feel that they are a 'burden' to society or their loved ones: over half of Germans are in favour of assisted suicide by medical staff or 'euthanasia' organizations (Ipsos, 2023). While the ending of unbearable pain is an understandable reason for wanting to die, the notion of the need of care and medical help as an individualised problem rather than a question of access and social justice is in line with old and new ableist views of disability. The practice of assisted suicide, currently legal in an increasing number of countries and used more and more frequently (Laureck, 2023), was long controversial and prohibited in Germany. With reference to German history between 1933 and 1945, forms of assisted suicide and 'euthanasia' were long considered ethically unacceptable, until the German Federal Constitutional Court lifted the ban on assisted suicide in 2020. Since then, practically any doctor in Germany can issue an expert opinion that allows a lethal drug to be prescribed and administered by medical staff. All legislative proposals to legally regulate assisted suicide, for example through prescribed reflection times and mandatory counselling, didn't find a majority in the German Parliament in 2023 (Fuchs, 2024). There is currently hardly any critical debate about the possible dangers of normalizing assisted suicide as a form of 'euthanasia' in Germany, which is becoming even more problematic in times of care shortages, poverty and social inequality among elderly and disabled people. This type of 'self-determined euthanasia' can already be observed in countries such as Canada, where assisted suicide is sometimes even suggested to people in need of care by healthcare staff (Fuchs, 2024; Keller, 2024), and this might soon be the case in Germany, especially with right wing parties such as the AfD ('Alternative für Deutschland') on the rise.

Eugenic and Social Darwinist thinking therefore are alive and kicking today, sometimes openly, sometimes subtle. It aims at controlling the uncontrollable, taming the alarming, and eradicating the unbearable. In this medical gaze, as Foucault (1973) puts it, the roots of the Nazis' medical murder and today's ableist stances on disability, enter a close alliance.

Marianne Hirschberg

Disability Rights as Human Rights

Considering the long shadow of history with regard to the participation of disabled people in German society, especially the shadow of the Nazi 'euthanasia' killings, the Convention on the Rights of Persons with Disabilities (CRPD) ¹⁰ by the United Nations (2006) is an important tool against the discrimination of disabled people. Before, disability was not recognized as a Human Rights topic in its own right, but among other issues by the United Nations ¹¹. With the convention as international and national law crimes like the systematic murder of disabled people by the national socialist regime have to be prevented.

After the ratification by the German parliament in 2008, the Convention became German law on March 26, 2009. This means that the German state is obliged to 'ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability' (Art. 4:1). A lot of different measures are linked with the duty to implement the Convention, including legislation, and 'to refrain from inconsistent practices with the [...] Convention and to ensure that public authorities and institutions act in conformity with [it]' (Art. 4:1d) as well as to take appropriate measures to eliminate discrimination on the basis of disability by any person, organisation or private enterprise (Art. 4:1e). Article 4 is the core, the heart of the Convention, explicitly entitling the obligations of the signatory states – nevertheless Germany as a signatory state does not fulfil its obligations¹².

Considering the importance of these obligations against the background of the long shadow of historical neglect, ignorance and the Nazi 'euthanasia' killings, the meaning of the state's duties are very clear: 'to promote, protect and to ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with [all; M.H.] disabilities' (Art. 1). Hereby, it is unambiguously stated that all disabled persons,

without distinction, have the same rights. There is no differentiation between persons with minor or severe impairments, nor any exclusion of persons regarding the intersection with other categories of difference as race, class, gender, sexual orientation, religion, age or any other status (Preamble p). Thus, regarding the debate about whether all people with all kinds of disabilities can be included in the German regular school system or whether distinctions shall be made according to severity of impairment, there is neither a juridical fundament in the CRPD, nor in any other human rights treaty. Nevertheless, the discussion concerning individual capacity, productivity or effectiveness is not new, and it is necessary to be alert and vigilant that no one is judged or excluded due to lower capabilities. In practice it is decisive to focus on the dismantling of barriers, the increase of accessibility and the provision of individual reasonable accommodations with the aim not only to have but to enjoy human rights.

Similar to the establishment of a memorial to the mass murder of disabled people by the National Socialists in Berlin, opened as late as 2014, the CRPD was developed very late compared to other human rights treaties, like the treaties to prevent discrimination against women or children, or to prevent racial discrimination. Disabled people were and maybe still are a forgotten group, often not being regarded as part of human diversity. Without the international disability rights movement, the convention would not have been developed, and disabled persons would still not be acknowledged as subjects with legal rights but as objects of welfare and charity as they were before (Degener, 2006; Degener, 2016; Sabatello, 2014). This paradigm shift is backed by human rights principles, especially focusing on non-discrimination, equality of opportunity, and explicitly the "respect for difference and acceptance of persons with disabilities as part of human diversity and humanity" (Art. 3d).

Now, with the convention there is a clear outline of state obligations and societal responsibility, but still the challenges of how to change respectively improve the living conditions of disabled people with the implementation of the convention have to be faced. With the CRPD, the rights of disabled people can be claimed but it will be a long way before disabled people may enjoy the rights in everyday life without any discrimination. This difficulty can be traced back to the negligence to deal with the mass murder, the crimes committed against disabled people in NS-Germany, in an appropriate way. Therefore, it is necessary to acknowledge this historical mass violence against disabled people as violating and ignoring the 'right to life' (Art. 10) first and foremost. Today, having the convention and its explicit rights of disabled persons it is necessary to learn from the German history to prevent the same from happening in any conceivable way again (cf. Maskos in this journal). In this context – and this is especially relevant regarding institutions for living, work and education today, as well as the right to "freedom from torture, or cruel, inhuman or degrading treatment or punishment" (Art. 15), the right to be not "deprived of their liberty [...] arbitrarily" (Art. 14:1b), the right to "the freedom from exploitation, violence and abuse" (Art. 16) and crucially the right to "integrity of the person" (Art. 17) have to be protected. From today's perspective, it must be recognised that all these rights, and in particular the right to life, were violated by the Nazis – and often in the decades that followed.

Against the background of changed data protection regulations (Koerting, 2014), in early November 2016, the board of the Gedenkstätte at Hadamar, one of the six 'euthanasia' killing centres, decided to mention the full names of the victims and not only the first names with the surname abbreviated (Landeswohlfahrtverband Hessen, 2016 a & b). This is a late, but important step towards a dignified, adequate remembrance of the disabled and mentally ill people killed in the Nazi 'euthanasia' programme. Publishing the full names of the victims of NS-'euthanasia', this acknowledgement of the inhuman mass murder is very relevant for the federal republic of Germany, as the then (and mostly still) existing institutions have taken part in the mass violence against disabled and severely ill people and many families have lost members there. By stating the full names, an opportunity for individual, family and national remembrance is provided¹³. Also, a discussion of the public, economic, cultural, and social conditions which supported this lethal ideology is connected to this publication of the names.

A broader discussion of the involved actors from different professions, institutions as well as a public political discourse on the NS-mass murder of disabled and mentally ill people and the continuation of the ableist societal discourses and practices to the present day, is more than necessary. This would be an important

measure to support the perception of disability rights as human rights. In the light of the current political situation, this is the only way to prevent history from repeating itself, especially regarding the current debate on physician assisted suicide/dying in Canada, several other countries and Germany (Fuchs 2024).

Susanne Knittel

Representations of the 'Euthanasia' Killings in Recent Popular Culture

In September 2016, with the release in German cinemas of the film *Nebel im August* (Fog in August)¹⁴, the victims of the Nazi 'euthanasia' programme were, for the first time, the subject of a mainstream feature film. This can be seen as an indication that this hitherto marginalised aspect of the Nazi past has begun to gain more importance in German memory culture. The inauguration, in 2014, of the national T4 Memorial in Berlin, which brought this memory literally to the centre of the commemorative landscape in the German capital, was another important step in this process.

This official acknowledgement took a long time. Until recently, the victims of the 'euthanasia' killings were not considered victims of Nazi persecution because, it was implied, the 'euthanasia' programme was a medical issue rather than an act of persecution based on race, religion, sexual orientation or politics, and the implication of this view was that these deaths were somehow justifiable¹⁵. With regard to the academic discourse, especially in Holocaust and memory studies, the lack of survivor and witness testimony has been a major contributing factor to the invisibility of these victims. Furthermore, despite the enormous number of representations in film, literature and in other media of the Holocaust and of Nazi atrocities more generally, the 'euthanasia' programme has only extremely rarely been depicted in mainstream culture. This is compounded by mainstream culture's ambivalent relationship to disability.

The lack of representation of these victims in the legal discourse, in scholarship, in mainstream culture, and in public commemoration has been the product of a mutually reinforcing dynamic or vicious circle. The fact that this has begun to change is due in large part to the efforts of artists such as Horst Hoheisel and Andreas Knitz, whose *Denkmal der Grauen Busse* has been displayed around Germany since 2006, and writers such as Sigrid Falkenstein, Robert Domes and Rainer Gross, who have written victim biographies, family memoirs or even crime novels that have reached large audiences, including school children¹⁶.

Until *Nebel im August*, however, the topic was largely ignored or avoided in feature films, a fact which may be attributed on the one hand to a pervasive uneasiness with regard to the visual representation of disability on the part of filmmakers and/or the public, and on the other hand may have just as much to do with the generic conventions of Holocaust films. The stock figures around whom their narrative is usually constructed, be it the saviour, the survivor, the resistance fighter, etc. all rely on a brand of individual agency which is difficult to transpose onto the victims of the Nazi 'euthanasia' killings who, for the most part, were not able to resist, may not have had a clear understanding of what was happening to them, or did not live to tell the tale¹⁷. How, then, does one tell the story of the 'euthanasia' programme within the relatively narrow generic confines of Holocaust cinema? And, moreover, how does one tell it without replicating the dehumanising imagery and rhetoric of the Nazis themselves? *Nebel im August* is instructive in this regard.

The film is based on the novel by Robert Domes, a fictionalised biography of Ernst Lossa, a Yenish boy¹⁸, who was born in 1929 in Augsburg and killed in 1944, aged 14, in the psychiatric institution Irsee in southern Germany (Domes, 2008). Lossa's family was persecuted by the Nazi regime, classified as 'gypsies'. From the age of 4, Ernst was placed in various orphanages and reform schools, where he repeatedly got into trouble, and he was deemed difficult and recalcitrant (*schwererziehbar*), a thief and a liar. In the end he was declared an 'antisocial psychopath', transferred to Irsee, and killed during the decentralised phase of the 'euthanasia'

programme. The film was widely acclaimed in Germany for bringing this forgotten aspect of the Nazi past to a wider audience, but otherwise it is an utterly conventional film.

It follows the classic trajectory of the newcomer's arrival and disorientation to gradual acceptance, integration, and solidarity with the other inmates against the authorities, to resistance and, eventually, death. Ernst's antagonist is the institute's director, Dr. Walter Veithausen, who initially seems compassionate and dedicated to his patients, but is gradually revealed to be a fervent and duplicitous ideologue going out of his way to facilitate decentralised 'euthanasia'. He is assisted by Paul Hechtle, a good-natured young man with a physical disability, who repeatedly tries to question Veithausen's methods, but ultimately resigns himself to following his orders, which include killing Ernst. There are two female carer figures, sister Sophia, a nun who objects to the killings and tries to save patients, and nurse Kiefer, a beautiful 'angel of death' brought in from Hadamar, one of the six 'euthanasia' killing centres, to be in charge of the killings. The other main character among the inmates is Nandl, a pretty blond girl with epilepsy. Her burgeoning friendship with Ernst forms the emotional and romantic centre of the narrative.

The choice of these two main characters, Ernst and Nandl, is engineered to help audiences, especially young audiences, identify and thereby relate to the fate of the 'euthanasia' victims. It is a time-honoured trope, particularly in representations of the Nazi 'euthanasia' programme, to have as a protagonist a character who is not disabled or mentally impaired and whose death is therefore perceived to be especially tragic and illegitimate. The obvious and unfortunate corollary to this is that it implicitly endorses the view that some of the victims were in fact legitimately killed. This hierarchy of victims has tended to be exacerbated by the representational strategies employed by previous filmmakers, most notably, perhaps, in the US TV-miniseries *Holocaust* in which a member of the Jewish Weiss family is sent to Hadamar, ostensibly to recover after she was left traumatised and in a state of shock following her rape by Nazis. Upon arrival, she is immediately ushered into a gas chamber along with the other new arrivals, all of whom exhibit visible traits of mental or physical disability, and who utter inarticulate moans as they shuffle to their deaths. Once all victims are inside, the door is bolted and the camera pans to reveal a diesel engine whose exhaust pipe leads into the gas chamber¹⁹. A near identical scene is included in Costa-Gavras's 2002 film *Amen*, based on Rolf Hochhuth's 1963 play *Der Stellvertreter* (The Representative)²⁰.

In both films, these scenes only serve as harbinger of the extermination of the Jews, thus relegating the 'euthanasia' programme to a marginal position. Much more problematic, however, is that in both cases the victims are depicted as an anonymous mass of stereotypically disabled figures, deprived of all individuality and agency. The viewer may feel pity for them, particularly since they seem not to comprehend what is happening to them, but there is little room for empathy or identification with them as human beings. In more ways than one they serve purely as the backdrop to the 'main' event, the extermination of the Jews.

Compared to these representations, *Nebel im August* is a significant improvement in that it goes to great lengths to humanise and individualise the victims. Ernst's first impression of the institution corresponds quite closely to the stereotypical depictions: Through his eyes, the other inmates are initially depicted as a sprawling mass of deformed bodies. Ernst repeatedly insists that he does not belong there because he is not 'an idiot'. Gradually, however, he gets to know the other children, and with him the audience comes to see them as individuals with their own names, stories, personal preferences, desires, dreams, and abilities. While Ernst is learning to understand and relate to the other children, the figure of Nandl in turn serves also to normalise Ernst, whom she initially regards with suspicion as a 'thieving gypsy', but gradually comes to accept and even love.

Although artistically the film has significant shortcomings and relies heavily on clichés to tell its story, its highly didactic approach may nevertheless work well with younger audiences and as an educational tool for adolescents²¹. That being said, this is a singularly anodyne depiction: the institution is almost idyllic, clean and largely harmonious. Any internal conflicts are quickly resolved and/or simply evaporate. Ernst steals Paul's pocket watch, but there are no consequences to this, and he tells lies only to protect his friends. In an early scene, it seems that his confrontational nature will get him into trouble with one of the older boys, but this is never developed. Evidently, the filmmakers were taking great care to downplay some of Ernst's less

admirable characteristics, perhaps for fear of succumbing to stereotypes about 'gypsies'. However, what emerges instead is a no less stereotypically romanticised depiction of Yenish culture.

The film's director has emphasised that inclusivity was not only a theme of the film but also informed the filmmaking process itself, specifically with regard to casting young actors with disabilities to play the patients (Selg, 2016). Nevertheless, the target audience is quite obviously able-bodied and able-minded, hence the reliance on a non-disabled protagonist as a point of identification. If this device actually contributes to increased tolerance and empathy, particularly among young people, then it is perhaps not a problem. Indeed, raising awareness about the continuing marginalisation of people with disabilities and mental illnesses in today's society is a major driving force behind the campaign to bring the memory of the Nazi 'euthanasia' killings to the public. One can only hope that *Nebel im August* is merely the first of many affirming depictions of the Nazi 'euthanasia' victims.

Petra Fuchs

Inclusive commemoration of the Nazi murder of patients – educational offers by people with learning difficulties in the 'Euthanasia' Memorial in Brandenburg/Havel

Research into the crimes committed against 'undesirables' in National Socialist Germany between 1933 and 1945 has meanwhile led to a comprehensive and differentiated knowledge of victims, perpetrators and followers, of the individual crime complexes and sequences as well as their spatial dimensions. German society has been sensitized to the topic of the Holocaust in particular through the intensive, decades-long public discourse. The broad public debate is reflected in the national memorial sites as well as in the numerous regional and local initiatives and memorials. However, not only the Jewish population, but also other groups of victims such as the politically persecuted, forced labourers, homosexuals, Jehovah's Witnesses as well as Sinti and Roma are remembered, their fates of life and suffering are also being reconstructed and brought closer to the general public.

In the years following the collapse of the GDR in 1989/90, the victims of the Nazi patient murder of the years 1939 to 1945 have increasingly become the focus of academic and public attention. With the accidental discovery of more than 30,000 medical files of the centrally controlled 'Euthanasia Action T4' (Roelcke & Hohendorf, 1993; Sandner, 1999) in a special archive of the former Ministry of State Security in 1991, it had become possible for the first time to include the victims of the Nazi patient murders in research as individuals, to reconstruct their life stories and to analyse the motives for their murder.

Nazi 'euthanasia' and forced sterilization as topics of commemoration and remembrance

In the 20th century, the term 'euthanasia' was associated with the idea of the 'destruction of life unworthy of life'²². This was put into practice during the Second World War as part of the Nazi extermination policy against socially, racially and hereditarily undesirable groups of people: At least 300,000 mentally ill, (mentally) disabled and 'socially undesirable' people were murdered in the German sphere of influence between 1939 and 1945 (Baader, 2009, p. 16). A further 400,000 young people, women and men, had to undergo forced sterilisation under the 'Law for the Prevention of Hereditarily Diseased Offspring' of 1933 (Doetz, 2009, p. 34).

About 70,000 children, women and men were selected by doctors to be killed and died in the six gas murder centers of the centrally controlled 'Aktion T4', named after the administrative headquarters at Tiergartenstrasse 4 in Berlin (²³; Schmuhl, 2006, p. 3). After the termination of this secret program (geheime Reichssache) in August 1941, psychiatric institutions used overdoses of medication and targeted food deprivation to kill patients. In addition, up to 10,000 children and adolescents were murdered out of scientific interest in special 'children's departments' and their brains were used for medical research.

Until 2006, the Heidelberg research project on the 'Scientific Cataloguing and Evaluation of the Medical Records of the National Socialist 'Euthanasia' Action 'T4' contributed to "giving the victims of Nazi 'euthanasia' a face" (Schmuhl, 2011, p. 223; Transl. Fuchs) through biographical research. A few years later, the newly gained knowledge about those killed, the organization of the central phase of the murder of the sick and the selection practice was incorporated into the presentation of historical information at the national memorial and information site for the victims of the Nazi 'euthanasia' murders, which was opened in Berlin on September 2, 2014. The central concern of the 'knowledge transfer project'²⁴ was to make this information as accessible as possible to those visitors who would have been potential victims of forced sterilization and 'euthanasia' during the National Socialist era – persons with mental illnesses, mental disabilities, or learning difficulties.

Inclusion and barrier-free commemoration of National Socialist medical crimes

Despite intensive research into the history of these crimes and the 'culture of remembrance from below'²⁵ that has developed since the 1980s, these victims had not yet received appropriate recognition in official commemoration.

In view of the fact that even today people with the same traits as those who were exposed to the danger of forced sterilization and 'euthanasia' under the Nazi regime are discriminated against, confronted with prejudice and socially excluded, this is not surprising. Exclusionary mechanisms were also found in exhibitions and public events that addressed National Socialist medical crimes, but did not provide barrier-free access or special educational programmes. Until a few years ago, the memorials to National Socialist medicine crimes were also reluctant to perceive people with 'mental illnesses' and 'mental disabilities', as well as those deemed to be 'educationally disadvantaged' or 'distant from politics' and people who were considered socially marginal for other reasons as target groups²⁶.

A breakthrough, then, was marked by a concept of knowledge transfer that was developed in cooperation with the self-advocacy organization Mensch zuerst – Netzwerk People First Deutschland e.V. for the 'euthanasia' memorial in Hadamar, a programme which for the first time was explicitly aimed at people with learning difficulties²⁷. It became part of the long-standing goal of historical-political education in Germany, which is to enable all visitors to memorial sites to acquire knowledge and form their own judgements.

The Nazi 'Euthanasia' Memorial in Brandenburg/Havel

The concern to focus in particular on people with mental illnesses and (mental) disabilities as target groups of educational work is also taken into account by the Nazi 'Euthanasia' Memorial in Brandenburg/Havel. It opened in October 2012 as the last of the six memorial and educational institutions in Germany and Austria that exist on the authentic sites of the former killing centres. They commemorate the Nazi murders of patients and have developed a wide range of educational programmes²⁸.

The Brandenburg Memorial opened its barrier-free permanent exhibition with a catalogue in easy language (George, Göbel & Göthling, 2012). Since 2014, the memorial has been offering career-specific seminars for nursing trainees and students of medicine, students of social work and curative education. The educational offer is supplemented by educational units for pupils from general education schools and for tourists visiting the city.

From the very beginning, the Brandenburg Memorial has registered an interest in its learning offers from people with learning difficulties. Interested persons were able to find out more about the inclusive offer via the websites of the sheltered workshop and the 'euthanasia' memorial²⁹. The inquirers included the employees of an institution in Frankfurt/Main who wanted a guided tour of the permanent exhibition in plain language. Other visitors included self-help groups of people with mental illnesses and learning difficulties as well as inclusion school classes of the 10th grade. The demand for offers for people who had previously had no or only limited opportunities for self-determined information and the acquisition of knowledge at the historical site increased steadily.

The project 'Opening the Nazi 'Euthanasia' memorial in Brandenburg an der Havel for people with learning difficulties' (2016) in the context of the UN Convention on the Rights of Persons with Disabilities

With this project, the memorial aimed to incorporate the perspectives and perceptions of people with learning difficulties into the memorial's educational work and to develop offers for this target group. The aim was to empower people with learning difficulties in terms of content and methodology to become mediators of historical education teamed up with the memorial's educators. After the training, they were to become experts in their own right and to be able to conduct study days, introductory workshops, guided tours of the site and the permanent exhibition, and to prepare and conduct in-depth documentary work and evaluation talks.

This, in turn, is the prerequisite for the continuous practice of inclusive forms of communication and mediation that meet the needs and wishes of people with learning difficulties. With this project, which aims to advance the process of inclusion and enable political and cultural participation, the Brandenburg Memorial is breaking new ground. The project takes up one of the fundamental goals formulated in the 'Balance Sheet on the Disability Policy Package of the State Government of Brandenburg' of April 2015 (Land Brandenburg, 2015), namely the implementation of "accessibility of information" (Land Brandenburg, 2015, p. 76) by taking into account the needs of people with sensory and learning impairments. As part of the implementation of the UN Convention on the Rights of Persons with Disabilities, which the Federal Republic of Germany ratified in 2009, the state of Brandenburg in 2011 had already developed a "package of measures for persons with disabilities" (Land Brandenburg, 2011) that was intended to implement the right to participation in society for people with disabilities as formulated in the Convention.

Preparing for the first visit to the 'euthanasia' memorial site

The project of the Brandenburg Memorials Foundation was funded as part of the 'Youth remembers' program and ran for nine months (April 1, to December 31, 2016). It took place in close cooperation with a sheltered workshop in Brandenburg/Havel³⁰. After presenting the project to the workshop's disabled employees, some signalled their interest in participating in the planned working group as part of their working hours. The intensive preparation for the first three-hour guided tour of the memorial was carried out by the executive board of the sheltered workshop on the basis of information from the memorial³¹. Afterwards, the participants should be able to roughly inform visitors about the National Socialist medical crimes committed in Brandenburg/Havel as well as to explain that the former gas chamber no longer exists, but the memorial is now located on its site. Particular importance was given to respond to the visitors' own ideas and questions as well as to arising fears and anxieties related to the historical events. Accompanying persons should be aware of this possibility and support the participants emotionally if necessary.

Working as a group

The programme started with ten employees from the sheltered workshop. Together with the head of the memorial's educational department and a workshop's pedagogical employee, they met regularly over a

period of six months to develop an educational programme for persons with learning difficulties on the topic of 'Murder of the Sick in Brandenburg/ Havel'. The members of the group, who communicated in simple, not easy, language, designed a pedagogical offer with various formats for the target group of people with learning difficulties. This final concept was to be offered to all memorial visitors from January 2017 onward.

The workshop employees took the principle of voluntary participation seriously. For example, after a third of the time, one participant made the conscious decision not to deal with the topic of Nazi 'euthanasia' anymore, because it became too emotionally stressing for him. Voluntaryness also applies to all aspects of working with the group, no one is forced to express themselves, and the request for a break or to break off is possible at any time.

"I can explain to people or guests from my point of view why disabled people were murdered back then"³² - on the effects of inclusive remembrance work

First of all, it should be noted that generally there are only a few working groups in historical-political education that deal with the topic of Nazi 'euthanasia' with such intensive and lasting interest as the members of this inclusive group do. The guides with learning difficulties, who started their work in 2017, have now acquired a profound knowledge of the criminal processes, the perpetrators and the victims in the former Brandenburg/Havel killing centre.

Contrary to what is commonly assumed, the trainee guides came to the memorial with previous knowledge of the National Socialist era, which they had acquired in their family environment and through the media. Some of the participants were already familiar with the memorial, as two people with learning difficulties had taken part in public events there.

An emotional and/or cognitive overload of people with learning difficulties is not noticeable in the guide work, but there is an intense emotional involvement in the sense of partisanship. The strongest motive for the continued interest in engaging in the group is "because we can learn so much here." (<https://geschichte-inklusive-sbg.de/heute/>; Transl. Fuchs) This statement indirectly refers to the existing desire to learn and to acquire knowledge; an opportunity which is not fulfilled, or not sufficiently, in the everyday lives of people with learning difficulties.

Also, in the process some of the participants remarkably developed individually, acquiring new skills and transferring them into their everyday lives. For example, a workshop employee who had never taken part in discussions and had always attended the working meetings at the memorial in silence, began to communicate and actively sought dialogue with his instructor in the sheltered workshop. A preliminary conclusion would be that the opportunity to participate and experience participation, to experience to be taken seriously and to be respected as an individual, opens up people whose lives have so far been characterized by social exclusion, personal contempt and devaluation.

"[...] you can soon say that I also do a bit of politics, I talk about history" – Kerstin Latzke, guide with learning difficulties

The term 'guides with learning difficulties' was deliberately chosen to describe those who guide visitors through the memorial. "A guide is a kind of leader, we don't want to use the word 'Führer', so we used the English word 'guide'," explains Alf Düsterhoft (<https://geschichte-inklusive-sbg.de/heute/>; Transl. Fuchs). After seven years of the guides working at the Brandenburg 'euthanasia' memorial site, the demand for the inclusive guided tours and workshops is growing. On their initiative, the initially planned concept of tandem tours was rejected, as was the idea of providing the inclusive programme solely for guests with learning difficulties. Instead, at the express request of the guides, all visitor groups, with and without learning difficulties, with and without disabilities, are welcomed and provided with the necessary historical information. The guides work together as group members and each takes on a defined role in passing on

facts about the historical events, the perpetrators and the victims of the National Socialist medical crimes by referring to individual biographies.

In 2024, the guides had a total of more than 70 assignments, with several conference participations, excursions and consultations for other memorial sites as well as award ceremonies included in this figure. These honours and public recognition were preceded by the awarding of the Federal Cross of Merit to Kerstin Latzke in 2022. She accepted the award, which was presented to her by Federal Minister Hubertus Heil at a ceremony, on behalf of her colleagues.

Working with the memorial's visitor groups as part of guided tours and workshops has contributed significantly to the empowerment of the guides. As Kerstin Latzke says in the memorial's video: And I've really grown with it, I've [...] gained self-confidence." (<https://geschichte-inklusive-sbg.de/heute/>; Transl. Fuchs) Addressing the memorial's visitor groups, she emphasizes how important information, remembrance and commemoration work is for the present and what role she plays as a guide with learning difficulties: We have to fight to ensure that such euthanasia murders never happen again and that's why I speak to people. You can soon say I'm also doing a bit of politics, I'm talking about history." (<https://geschichte-inklusive-sbg.de/heute/>; Transl. Fuchs)³³

Rainer Schulze

Looking Forward: Concluding Remarks

On 13 December 2006, the United Nations General Assembly adopted the Convention on the Rights of Persons with Disabilities (CRPD). One of the remarkable and often overlooked aspects of this Convention is the fact that disabled people and their organisations played an integral part in the drafting, ratification and implementation, exemplifying the often voiced but rarely observed motto of the disability rights movement: 'Nothing About Us Without Us'.

Unfortunately, the CRPD is a rare exception in this respect. Usually, disabled people are marginalised, objectified and perhaps – in the best of cases – treated with sympathy, but not given agency. It is pretty obvious that today's attitudes towards disability and disabled people cannot be understood or addressed without taking into account and acknowledging the long shadow of history. As long as it is seen as acceptable to undertake research on the history of disability and the treatment of disabled people without talking with and including disabled people and given them agency, the marginalisation and objectification of disabled people will continue.

Even the best research on, for example, the mass sterilisations of disabled people, both during the Nazi regime and before and after elsewhere, or the Nazi 'euthanasia' killings, remains deficient if disabled people are not part in this work on an equal footing and take part in setting the framework and including their questions for such work. Undertaking research on disabled people without undertaking this research together with disabled people will at best leave disabled people as objects of pity, at worst as freaks – but always leave them on the margin, unable to disseminate and interpret the narrative of their own past and their present situation, or in short, of their lives.

The conclusion is both simple and immensely difficult: Disabled people have to be visible, have to be present, have to be heard – they have to be at the centre and part of the integral thinking of the majority society. It cannot be that there are no disabled members of parliament when it is parliaments which decide on all issues affecting disabled people; that there are no disabled people in committees organising or overlooking research on disability questions; that disabled people are perhaps invited to panel discussions, but serve as

little more than 'decoration'. Having successful Paralympic Games every four years when disabled athletes are cheered by their nations is no indication that disability has moved to the centre of society. In fact, the opposite is true: As long as the Paralympic Games are not an integral part of the Olympic Games but are scheduled afterwards, the separation continues even here. Moreover, British Paralympian Sophie Christiansen, member of the British equestrian team, who has cerebral palsy and won three gold medals for dressage in London 2012, is in no doubt: "There's a gap between the way people view Paralympians and other disabled people."³⁴ (Williams, 2013) Whilst the wider public is perhaps ready to cheer disabled athletes when they collect gold medals for their country, they are at the same time happy to deny recognition and benefits to 'ordinary' disabled people.

I can hear the argument: but what about the scientist Stephen Hawking or the singer-songwriter Stevie Wonder? And there are of course a few other disabled people who have a high public profile, but the fact remains that it is only a few disabled people who are visible because of their achievements.

The victims of the Nazi 'euthanasia' killings remained largely invisible as well for more than two generations. On 27 January 2017, Holocaust Memorial Day, the annual commemoration in the German Bundestag focused for the first time on the victims of the Nazi 'Euthanasia' killings, with Hartmut Traub talking to parliamentarians about his uncle Benjamin Traub, murdered in 1941, and Sigrid Falkenstein about her aunt Anna Lehnkering, murdered in 1940³⁵. Some two years earlier, in September 2014, the Memorial and Information Point for the Victims of National Socialist Euthanasia Killings was opened in Berlin, as the fourth memorial to victims of the Holocaust and Nazi persecution in the German capital – another very important signal³⁶.

These were historical and moving occasions and marked a turning point in the official remembrance of the Nazi 'euthanasia' killings. However, it took scandalously long to get to this point, and it required the persistent work and engagement of disability activists and a range of civil society organisations as well as historians of medicine and some Holocaust historians (most importantly, Burleigh, 1994 and Friedlander, 1995) over several decades.

Moreover, the question has to be asked how far such commemorations, crucial as they are in order to rescue the disabled victims of the murderous Nazi eugenic policies from oblivion and create an inclusive Holocaust memory, actually impact upon the standing and acceptance of disabled people in our present-day society. It is one thing commemorating victims of the past, but all too often quite another showing the political will to foster an inclusive society in our present time.

History matters, and a knowledge of history is crucial in order to understand and evaluate what is happening around us today.

There can be no doubt that the Nazi 'euthanasia' killings continue to cast a long shadow, especially for those who could have been their victims had they lived at the time in the Nazi realm, and who in today's world continue to experience marginalisation and othering: The old prejudices are rearing their head again, even though sometimes in a slightly different guise.

In the current neoliberal times with the relentless policy of austerity, the opportunities of disabled people to participate in and contribute to civil society on an equal footing are getting increasingly and often drastically restricted. Instead of walls coming down, new walls are being set up, increasing marginalisation.

One only has to look across the Channel to Great Britain where the Labour government is currently considering significant changes to disability benefits (Caygill, 2025; Mackley, Hobson & Kennedy, 2025). Even though some aspects were paused due to a threatening rebellion by a significant number of their own members of parliament, nothing is off the table for now. The underlying argument for these changes was the need to make budgetary savings to balance the books, and the implication is, of course, that disabled people are living a much too easy life at the expense of the general public and enjoying benefits that non-disabled people do not have access to.

In the US, the second Trump administration is accused of being engaged in “an all-out war against disabled people” (CAP, 2025), and US disability experts predict that the inevitable result will be “creating new barriers for disabled people to being hired at a job, getting a quality education and providing for basic needs, including health insurance.” (Borus, 2025)

In other countries, including Germany, cuts to disability benefits are currently not (yet?) discussed, but the language used is getting rougher: right-wing rhetoric against disabled people is seeping into the mainstream discourse and are slowly being usualised.

The words and images used against disabled people might not always be quite as crass and aggressive as during the Nazi period, but they are, at their core, still very much the same and address the same kind of prejudices of the majority society, in some cases frighteningly so.

At the same time, this long shadow of the 'euthanasia' killings does seem to be fading away. For a long time, discussions about legalising 'voluntary euthanasia', assisted suicide or assisted dying (and there are still a few other terms used) were impacted by the crimes committed during the Nazi period under the term 'euthanasia', and in Germany they were all but shut down because of this. This restraint is now more and more abandoned everywhere.

In recent years, a number of countries and US states have legalised assisted dying under certain defined circumstances. However, the question remains whether these criteria, no matter how strict, will actually be able to prevent any abuse, and this centres on the question of what the medical profession, or society, or the majority opinion defines as 'terminally ill'. The Nazi period showed how quickly this can swing and include various forms of disabilities, even though only a minute minority of them were actually terminally ill. Disabled people then were regarded as 'unnecessary eaters' (unnütze Esser); in the ableist view they were not much more than 'human shells', unable to feel much and not contributing anything to society whilst society still needed provide for them (Hohendorf, 2010, pp. 323–324). We should not fool ourselves by believing that we live in much more enlightened times now and that surely it could not happen again. If nothing else, watching what is currently happening in Trump's America should make us all very afraid.

The humanity of a society is shown by the way it protects its weakest members. There cannot be any doubt that terminally ill and disabled people belong to the weakest groups, and it is not always easy to reconcile their respective wishes and fears. The terminally ill put forward their right to die, i.e., their right to choose when, where and how they die. Disabled people fear that the right to die might ultimately endanger their right to live, by being talked into 'choosing' voluntary euthanasia, as Rebecca Maskos highlights in her contribution. It requires a careful and often painful process of discussions which include all groups of society and which ensure that everyone, including terminally ill and disabled people, have the opportunity to contribute without being shouted down, to find ways forward which work for all affected.

The way society defines, treats and talks about disabled people inevitably affects how the majority of disabled people see themselves. The mainstream discourse all too often usualises the ableist views that the lives and contributions of disabled people have less value than those of non-disabled people.

Affecting change will require allies – non-disabled allies. It will be necessary to forge new alliances, but also to remember and re-forge old alliances of the 1970s and 1980s. There are other groups of society who have battled and are battling similar marginalisations from the ruling narrative, some more successfully, others less so, among them women, ethnic minorities and the LGBTIQ+ community. Activism is not about competition: competition only helps the adversary; activism is about solidarity and support without losing one's own identity – values that need to be re-discovered, more now than ever.

Why is this so important for the disabled people as well as for society at large? Liz Crow provides some fitting closing words. In her Resistance installation, a (disabled) voice says:

"I cannot be silent. We can't afford to be silent. We need to fill our space. We need people to know we're here because if we begin to disappear as we've done in the past, we need people to notice that we're missing. We need non-disabled people to be our allies. This isn't an issue about disabled people for just disabled people. This is an issue about society." (Crow, 2009)

Endnotes

¹ In contrast to West Germany, neither parents of disabled children nor disabled people themselves were allowed to form self-representative organisations and become politically involved. Party and state claimed to take the best possible care of everyone, including disabled people, so that an association for the self-representation of the interests of disabled people was not considered necessary and was also not tolerated. There was no open repression, persecution or threat of punishment, but all free organisations were regarded suspiciously as hotbeds of oppositional activity.

² The memorials in question are the Memorial to the Murdered Jews of Europe from 2005, the Memorial to the Homosexuals Persecuted under National Socialism from 2008 and the Memorial to the Sinti and Roma of Europe Murdered under National Socialism, which was opened in 2012 (<https://www.stiftung-denkmal.de/denkmaeler/>).

³ Matthias Vernaldi (1959-2020) was a German disability rights activist. Born with a severe impairment in Thuringia (GDR), he received his education in institutions which were classical total institution. The experiences he had there formed the basis of his autobiographical novel *Dezemberfahrt* (1995). He was involved in the civil rights movement that brought down the GDR. As a disability rights activist, he campaigned for the provision of personal assistance and was involved, among other issues, in the establishment of the memorial to the victims of Nazi 'euthanasia' and against current advocates of 'euthanasia' such as the bioethicist Peter Singer.

⁴ *Czterej pancerni i pies* (English: *Four Tankers and A Dog*). Polish produced war adventure TV series after the novel by Janusz Przymanowski by the same title; 21 episodes, 1966-1970. It follows the adventures of a tank crew and their T-34 tank in the 1st Polish Army in the USSR during the Second World War, taking part in the liberation of Poland as well as the last battles of Berlin. In the GDR broadcast from 1972 under the title *Vier Panzersoldaten und ein Hund*.

⁵ *The Virginian* (in its final year also known as *The Men from Shiloh*). US produced western TV series; 249 episodes, 1962-1971. In West Germany broadcast from 1970 under the title 'Die Leute von der Shiloh Ranch'.

⁶ *Nackt unter Wölfen*. German Democratic Republic 1963. Directed by Frank Beyer; starring Erwin Geschonneck, Armin Mueller-Stahl, Krystyn Wójcik.

⁷ Vereinigung der Verfolgten des Nazi-Regimes (Association of Victims of the Nazi Regime).

⁸ Aktion (Operation) T4 derived its name from the address Tiergartenstraße 4 in Berlin, which was the address of the villa where the Nazi 'euthanasia' programme was planned and administratively handled.

⁹ For more information on the Resistance project, see Crow's website: <http://www.roaring-girl.com/work/resistance/>

¹⁰ Convention on the Rights of Persons with Disabilities and Optional Protocol. <http://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

¹¹ For further insight cf. Degener & Begg, 2019.

¹² For further insight cf. Degener & Begg, 2019.

¹³ For more detail, see <https://www.bundesregierung.de/breg-de/aktuelles/rede-von-staatsministerin-gruetters-auf-der-konferenz-den-opfern-einen-namen-geben--435754>

¹⁴ *Nebel im August*. Germany 2016. Directed by Kai Wessel; starring Ivo Pietzcker, Sebastian Koch, Thomas Schubert, Jule Hermann.

¹⁵ This changed only in 2011, when the German parliament decided to grant the victims of the Euthanasia killings equal status with those of other Nazi victims. See Knittel, 2015.

¹⁶ For more detail, see Knittel, 2013, 2014, 2016.

¹⁷ There are a handful of testimonies and texts by survivors and witnesses of the 'euthanasia' programme (see Knittel, 2016), but they do not necessarily lend themselves to adaptation for the big screen.

¹⁸ The Yenish are a nomadic people in Western Europe, particularly in Germany, Austria, Switzerland, and France.

¹⁹ *Holocaust: The Story of the Family Weiss*. TV mini-series, USA 1978. Directed by Marvin J. Chomsky, starring Meryl Streep, James Woods, Michael Moriarty, Fritz Weaver, Rosemary Harris. For a more in-depth analysis of the representation of the Nazi Euthanasia killings in Holocaust see Knittel, 2015, pp. 72–83.

²⁰ *Amen*, France/Germany/Romania 2002. Directed by Costa-Gavras; starring Ulrich Tukur, Mathieu Kassovitz, Ulrich Muehe.

²¹ Indeed, a range of pedagogical materials were made available via an official website (www.nebelimaugust.de) to coincide with the release of the film. These provide background on the historical Ernst Lossa, the 'euthanasia' programme, and make suggestions for discussion and other learning activities. The website is now down, but the materials are available via Vision Kino, a network promoting media literacy among school children. See: <https://www.visionkino.de/unterrichtsmaterial/filmhefte/filmheft-zu-nebel-im-august>

²² On the history of ideas of National Socialist 'euthanasia' cf. Hohendorf, G. (2015). Ideen- und Realgeschichte der nationalsozialistischen 'Euthanasie' im Überblick, in P. Fuchs, M. Rotzoll, U. Müller, P. Richter & G. Hohendorf (Hrsg.), „Das Vergessen der Vernichtung ist Teil der Vernichtung selbst“. *Lebensgeschichten von Opfern der nationalsozialistischen 'Euthanasie'* (S. 36–52), (3. Aufl.). Wallstein; Hohendorf, G. (2013). *Der Tod als Erlösung vom Leiden. Geschichte und Ethik der Sterbehilfe seit dem Ende des 19. Jahrhunderts in Deutschland*, (S. 27–71). Wallstein.

²³ For more detail, see <https://www.t4-denkmal.de/Weitere-Mordaktionen>

²⁴ Remembering means remembering and informing: National Socialist 'euthanasia' and the historical site of Berlin's Tiergartenstraße 4 - A knowledge transfer project (2013-2015), funded by the German Research Foundation/Deutsche Forschungsgemeinschaft (DFG) (Transl. Fuchs).

²⁵ Cf. the articles in the anthology Westermann, S., Kühl, R. & Ohnhäuser, T. (Hrsg.). (2011). *NS-'Euthanasie' und Erinnerung. Vergangenheitsaufarbeitung, Gedenkformen, Betroffenenperspektiven*. LIT.

²⁶ Mental illness', 'disability', 'educational and political distance' are understood here in the sense of dis/ability studies as constructions that are historically, socially and culturally shaped and therefore changeable. Cf. George, U. & Winter, B. (2005). Wir erobern uns unsere Geschichte. Menschen mit Behinderungen arbeiten in der Gedenkstätte Hadamar zum Thema NS-'Euthanasie'-Verbrechen, *Zeitschrift für Heilpädagogik* 56(2), 55–62; George, U. (2008). *Kollektive Erinnerung bei Menschen mit geistiger Behinderung. Das kulturelle Gedächtnis nationalsozialistischer Behinderten- und Krankenmorde in Hadamar*.

Eine erinnerungssoziologische Studie. Klinkhardt; George, U. & Müller-Wendt, S. (2010). *Historisch-politische Bildung mit Angehörigen so genannter bildungsferner Milieus. Ein Praxisbericht* (Gedenkstättenrundbrief 161, S. 25–33). <https://www.gedenkstaettenforum.de/aktivitaeten/gedenkstaettenrundbrief/detail/historisch-politische-bildung-mit-angehoerigen-so-genannter-bildungsferner-milieus>. The concept anticipates the considerations of the UN Convention on the Rights of Persons with Disabilities. Dieser Satz steht exakt so im Text – hier raus oder im Text?

²⁷ These are the memorials in Hadamar near Koblenz/Hessen, Grafeneck on the Swabian Alb/Baden-Wuerttemberg, Bernburg a.d. Saale/Saxony-Anhalt, Pirna-Sonnenstein near Dresden/Saxony and Hartheim near Linz/Upper Austria.

²⁸ Cf. http://www.masf.brandenburg.de/sixcms/media.php/4055/Behindertenpolitisches-Ma%C3%9Fnahmenpaket_schwer_bfPDF_ab A7.pdf, S. 53.

²⁹ For more detail, see <https://www.lebenshilfe-brb.de/angebote/werkstatt/gedenkstaette>; & <https://www.brandenburg-euthanasie-sbg.de/bildung/inklusiv/>

³⁰ This was the Lebenshilfe Brandenburg - Potsdam e.V. in Brandenburg/Havel. <https://www.lebenshilfe-brb.de/>

³¹ A flyer was prepared for this purpose. 'Inclusive memorial site': Information on the guided tour in Brandenburg an der Havel. Flyer for preparing a visit to the memorial. ('Inklusive Gedenkstätte': Informationen zur Führung in Brandenburg an der Havel. Flyer zur Vorbereitung eines Gedenkstätten-Besuchs).

³² Lutz Albrecht, Guide with learning difficulties. (<https://geschichte-inklusiv-sbg.de/heute/>; Transl. Fuchs).

³³ In the meantime, further employees from the sheltered workshop have been trained as memorial site guides for the Brandenburg-Görden prison memorial where they offer guided tours of the prison's National Socialist history for anyone who is interested. Detailed information on both projects can be found in the brochure "Inklusive Bildungsarbeit an den Gedenkstätten Brandenburg an der Havel. Ein Handbuch". It can be downloaded free of charge here: <https://www.brandenburg-euthanasie-sbg.de/publikationen/inklusive-bildungsarbeit-in-den-gedenkstaetten-brandenburg-an-der-havel/>

³⁴ Williams, R. (2013, 2 April). 'Disability benefit reforms: "It's about more than the cuts, and more than the Paralympics"', The Guardian. <http://www.guardian.co.uk/society/2013/apr/02/disability-benefit-welfare-reforms-cuts?INTCMP=SRCH>

³⁵ Deutscher Bundestag (2017, 27 January). Remembrance for the Victims of National Socialism. <http://www.bundestag.de/en/kw04-remembrance/490686>

³⁶ Memorial and Information Point for the Victims of National Socialist 'Euthanasia' Killings (2014). <http://www.stiftung-denkmal.de/en/memorials/memorial-and-information-point-for-the-victims-of-national-socialist-euthanasia-killings.html>; see also The Holocaust in History and Memory, 7, 198–200. https://www1.essex.ac.uk/history/journal_thhm/volume_7.html

Literatur

Baader, G. (2009). Die Aktion T4. Der Gasmord an Psychiatriepatienten in den Jahren 1940 und 1941. In Jüdisches Museum Berlin (Hrsg.), *Tödliche Medizin. Rassenwahn im Nationalsozialismus* (pp. 56–65). Wallstein.

BBC News. (2024, 29 November). 'What is assisted dying and how could the law change?'. <https://www.bbc.co.uk/news/uk-47158287>

Bund der „Euthanasie“-Geschädigten und Zwangssterilisierten (BEZ) (2024, 16. Juli). *Kommentar zum Bundestag-Antrag „Opfer von NS-„Euthanasie“ und Zwangssterilisation – Aufarbeitung intensivieren“*. <https://www.euthanasiegeschaedigte-zwangssterilisierte.de/neues/aktuell-2024/16-07-24-kommentar-ag-bez-bundestagsantrag-aufarbeitung-euthanasie-und-der-zwangssterilisationen-waehrend-der-nationalsozialistischen-diktatur-intensivieren/>

Binding, K., & Hoche, A. (2006). *Die Freigabe der Vernichtung lebensunwerten Lebens: Ihr Maß und ihre Form* (W. Naucke, Hrsg.; Reprint der Ausgabe von 1920). Berliner Wissenschafts-Verlag. (Original veröffentlicht 1920 bei Felix Meiner Verlag).

Bodemann, Y. M. (1996). *Gedächtnistheater: Die jüdische Gemeinschaft und ihre deutsche Erfindung*. Rotbuch.

Borus, M. (2025, 26 February). *Cutting Medicaid and federal programs are among 4 key Trump administration policy changes that could make life harder for disabled people*. *The Conversation*. <https://theconversation.com/cutting-medicaid-and-federal-programs-are-among-4-key-trump-administration-policy-changes-that-could-make-life-harder-for-disabled-people-244458>

Brown, M. (2017, 25 January). Disabled people are to be “warehoused”: We should be livid. *The Guardian*. <https://www.theguardian.com/commentisfree/2017/jan/25/disabled-people-disabilities-health-care-homes>

Burleigh, M. (1994). *Death and Deliverance: Euthanasia' in Germany 1900-1945*. Cambridge University Press.

The Center for American Progress (CAP). (2025, 28 July). *The Trump Administration's War on Disability*. <https://www.americanprogress.org/article/the-trump-administrations-war-on-disability/>

Caygill, T. (2025, 2 July). The mistakes Keir Starmer made over disability cuts – and how he can avoid future embarrassment. *The Conversation*. <https://theconversation.com/the-mistakes-keir-starmer-made-over-disability-cuts-and-how-he-can-avoid-future-embarrassment-260254>

Crow, L. (2008). Resist the Status Quo. *Success & Ability: India's Cross-Disability Magazine*, October–December, 11–15.

Crow, L. (2011). Resistance on the Plinth: The why of it. *Journal of Literary and Cultural Disability Studies*, 5(1), 113–19.

Crow, L. (2012). Resistance: The Art of Change. *The Holocaust in History and Memory*, 5, 29–50.

Crow, L. (2015). The Man on the Hill: Working for Social and Political Change. *Liminalities: A Journal of Performance Studies*, 11(5), 1–6. <http://liminalities.net/11-5/hill.pdf>

Degener, T. & Begg, A. (2019). Disability Policy in the United Nations, The Road to the Convention on the Rights of Persons with Disabilities. In T. Degener & M. Miguel (Hrsg.), *Aufbrüche und Barrieren. Behindertenpolitik und Behindertenrecht in Deutschland und Europa seit den 1970er Jahren* (pp. 43–77). transcript.

Degener, T. (2006). Menschenrechtsschutz für behinderte Menschen. Vom Entstehen einer neuen Menschenrechtskonvention der Vereinten Nationen. *Vereinte Nationen* 54(3), 104–110.

Degener, T. (2016). Challenges and Compliance of the UN CRPD. In D. Estrada-Track (Ed.), *Human Rights of Persons with Disabilities in International and EU Law* (pp. 7–45). European University Institute, Academy of European Law. (EUI Working Papers, AEL 2016/01).

Degener, T. & Köbsell, S. (1992). „Hauptsache, es ist gesund“? *Weibliche Selbstbestimmung unter humangenetischer Kontrolle*. Konkret Literatur Verlag.

Deutsche Gesellschaft für Geriatrie (DGG) (2020). *Clinical Frailty Scale (CFS)*. https://www.dggeriatrie.de/images/Bilder/PosterDownload/200331_DGG_Platat_A2_Clinical_Frailty_Scale_CFS.pdf

Deutsche Interdisziplinäre Vereinigung für Intensiv- und Notfallmedizin (DIVI) (2020). *Intensiv- und Notfallmediziner aktualisieren klinisch-ethische Empfehlungen zur Priorisierung und Triage bei COVID-19*. <https://www.divi.de/pressemeldungen/>

Doetz, S. (2009). Zwangssterilisation. Das Gesetz zur Verhütung erbkranken Nachwuchses und seine praktische Anwendung. In Jüdisches Museum Berlin (Hrsg.), *Tödliche Medizin. Rassenwahn im Nationalsozialismus* (pp. 34–43). Wallstein.

Domes, R. (2008). *Nebel im August. Die Lebensgeschichte des Ernst Lossa*. cbj Verlag.

Ehmann, A., Kaiser, W., Lutz, T., Rathenow, H.-F., Stein, C. & Weber, N. W. (Hrsg.). (1995). *Praxis der Gedenkstättenpädagogik. Erfahrungen und Perspektiven*. Leske + Budrich.

Foucault, M. (1973). *The Birth of the Clinic*. Routledge.

Foucault, M. (1973). *The Birth of the Clinic: An Archaeology of Medical Perception*. Pantheon.

Friedlander, H. (1995). *The Origins of Nazi Genocide: From Euthanasia to the Final Solution*. University of North Carolina Press.

Fuchs, P. (2024). „Suizidprävention stärken“ statt gesetzlicher „Neuregelung der Suizidassistent“ – Zur Entscheidung des deutschen Bundestages vom 6. Juli 2023. *Zeitschrift für Disability Studies / Journal of Disability Studies* 1. 1–14. https://zds-online.org/wp-content/uploads/2024/04/ZDS_2024_1_5_Fuchs.pdf, https://doi.org/10.15203/ZDS_24_1.06

Fuchs, P., Rotzoll, M., Müller, U., Richter, P. & Hohendorf, G. (Hrsg.). (2015). *„Das Vergessen der Vernichtung ist Teil der Vernichtung selbst“. Lebensgeschichten von Opfern der nationalsozialistischen ‚Euthanasie‘* (3. Aufl.). Wallstein.

Gallagher, H. (1995). *By Trust Betrayed: Patients, Physicians, and the License to Kill in the Third Reich*. Vandamere Press.

Galton, F. (1869). *Hereditary Genius: An Inquiry into its Laws and Consequences*. Macmillan.

Gedenkort T4. (n. d.). *Weitere Mordaktionen. Die nationalsozialistischen „Euthanasie“-Morde*. <https://t4-denkmal.de/Weitere-Mordaktionen>

George, U. & Winter, B. (2005). Wir erobern uns unsere Geschichte. Menschen mit Behinderungen arbeiten in der Gedenkstätte Hadamar zum Thema NS-‚Euthanasie‘-Verbrechen. *Zeitschrift für Heilpädagogik* 56(2), 55–62.

George, U., Göbel, S., & Göthling, S. (Hrsg.). (2012). *Die Tötungsanstalt Brandenburg 1940. Behinderte Menschen wurden ermordet. Texte in Leichter Sprache* (Schriftenreihe der Stiftung Brandenburgische Gedenkstätten, Band 36). Stiftung Brandenburgische Gedenkstätten.

Hohendorf, G. (2010). Die Selektion der Opfer zwischen rassenhygienischer „Ausmerze“, ökonomischer Brauchbarkeit und medizinischem Erlösungsideal. In M. Rotzoll et al. (Hrsg.), *Die nationalsozialistische „Euthanasie“-Aktion „T4“ und ihre Opfer. Geschichte und ethische Konsequenzen für die Gegenwart* (pp. 310–324). Ferdinand Schöningh.

Hohendorf, G. (2013). *Der Tod als Erlösung vom Leiden. Geschichte und Ethik der Sterbehilfe seit dem Ende des 19. Jahrhunderts in Deutschland*. Wallstein.

Holocaust Memorial Day Trust. (2025). *The Ten Stages of Genocide*. <https://hmd.org.uk/learn-about-the-holocaust-and-genocides/what-is-genocide/the-ten-stages-of-genocide/>

Ipsos (2023). *Mehrheit der Deutschen für Suizidassistenten durch Ärzte*. <https://www.ipsos.com/de-de/sterbehilfe-mehrheit-der-deutschen-fur-suizidassistenten-durch-aerzte>

Jasch, H. (2016). 'Verbindungslinien zwischen den Euthanasie-Morden und den Holocaustverbrechen: Tagungsbericht'. *Newsletter Haus der Wannsee-Konferenz, Beilage*, 3–8.

Keller, M. (2024, Dezember). Alarmierende Entwicklung. Menschen in Not wird in Kanada mitunter Suizidhilfe angeboten. *BioSkop – Zeitschrift zur Beobachtung der Biowissenschaften*, Nr. 108, 4–5.

Klee, E. (1983). „Euthanasie“ im NS-Staat. *Die „Vernichtung lebensunwerten Lebens“*. Fischer.

Knittel, S. (2013). Beyond Testimony: Nazi-Euthanasia and the Field of Memory Studies. *The Holocaust in History and Memory*, 5, 85–101.

Knittel, S. (2014). Case histories: The legacy of Nazi euthanasia in recent German Heimatkriminalis. In T. Herzog & L. Kutch (Eds.), *Tatort Germany: The curious case of German-language crime fiction* (pp. 120–138). Camden House.

Knittel, S. (2015). *The Historical Uncanny: Disability, Ethnicity, and the Politics of Holocaust Memory*. Fordham University Press.

Knittel, S. (2016). Autobiography, moral witnessing, and the disturbing memory of Nazi euthanasia. In S. Bird, M. Fullbrook, J. Wagner, & C. Wienand (Eds.), *Reverberations of Nazi violence in Germany and beyond: Disturbing pasts* (pp. 65–81). Bloomsbury.

Köbsell, S. (1987). *Eingriffe. Zwangssterilisation geistig behinderter Frauen*. AG SPAK.

Koerting, E. (2014). *Namensnennung von Opfern der NS-Euthanasie von 1939 bis 1945*. https://gedenkort-t4.eu/sites/default/files/media/file/gutachten_namensnennung_copyright_erhart_koerting.pdf

Land Brandenburg (2011). *Behindertenpolitisches Maßnahmenpaket für das Land Brandenburg. Auf dem Weg zur Umsetzung des Übereinkommens der Vereinten Nationen über die Rechte von Menschen mit Behinderungen*.

https://www.potsdam.de/system/files/documents/behindertenpolitisches_massnahmenpaket_schwer_bfp_df_aba7.pdf

Land Brandenburg (2015). *Die Umsetzung der UN-Behindertenrechtskonvention in Brandenburg Eine Bilanz zum Behindertenpolitischen Maßnahmenpaket der Landesregierung*. https://www.stadt-brandenburg.de/fileadmin/pdf/00/Behinderten/Teilhabe/UN_Broschuere.pdf

Landeswohlfahrtsverband Hessen (LWV Hessen) (2016a). 'Euthanasie'-Verbrechen. LWV will Opfernamen künftig nennen. <https://www.lwv-hessen.de/lwv-politik/aktuelles/detailansicht.html>

Landeswohlfahrtsverband Hessen (LWV Hessen) (2016b). *Gedenkstätte nennt vollständige Namen*. <https://www.lwv-hessen.de/lwv-politik/aktuelles/detailansicht/datum/2016/11/10/gedenkstaette-nennt-vollstaendige-namen.html>

Laureck, L. (2023). Sterbehilfe in Kanada. Fremdbestimmt Sterben. *Katapult Magazin*, 31, 26–33.

- Mackley, A., Hobson, Frank & Kennedy, St. (2025, 13 June). *Research Briefing: Changes to benefits for disabled people*. UK Parliament, House of Commons Library No 10283. <https://commonslibrary.parliament.uk/research-briefings/cbp-10283/>
- Mitscherlich, A. & Mielke, F. (1947). *Das Diktat der Menschenverachtung: Der Nürnberger Ärzteprozeß und seine Quellen*. Lambert Schneider Verlag.
- Perraudin, F. (2017, 31 January). Wheelchair user refused space on bus days after supreme court ruling. *The Guardian*. <https://www.theguardian.com/society/2017/jan/31/wheelchair-user-refused-space-on-bus-days-after-supreme-court-ruling>
- Poore, C. (2007). *Disability in Twentieth-Century German Culture*. University of Michigan Press.
- Pring, J. (2021, 27 May). Ten years on from Winterbourne View scandal, activists ask: Why has so little changed? *Disability News Service*. <https://www.disabilitynewsservice.com/ten-years-on-from-winterbourne-view-scandal-activists-ask-why-has-so-little-changed/>
- Riley-Smith, B. (2012, 19 June). Hate crimes against disabled people soar to a record level. *The Independent*. <http://www.independent.co.uk/news/uk/crime/hate-crimes-against-disabled-people-soar-to-a-record-level-7858841.html>
- Roelcke, V. & Hohendorf, G. (1993). Akten der ‚Euthanasie‘-Aktion T4 gefunden. *Vierteljahreshefte für Zeitgeschichte* 41, 479–481.
- Ryan, F. (2015, 27 August). Death has become a part of Britain's benefits system. *The Guardian*. <https://www.theguardian.com/commentisfree/2015/aug/27/death-britains-benefits-system-fit-for-work-safety-net>
- Sabatello, M. (2014). A short history of the International Disability Rights Movement. In M. Sabatello & M. Schulze (Eds.), *Human Rights and Disability Advocacy* (pp. 13–24), University of Pennsylvania Press.
- Schmuhl, H.-W. (2005/2006). ‚Euthanasie‘ im Nationalsozialismus – ein Überblick. In T. Vormbaum (Hrsg.), *Jahrbuch der juristischen Zeitgeschichte* 7, 3–15.
- Schmuhl, H.-W. (2011). ‚Euthanasie‘ und Krankenmord. In R. Jütte (in Verbindung mit W. U. Eckart, H.-W. Schmuhl, W. Süß), *Medizin und Nationalsozialismus. Bilanz und Perspektiven der Forschung* (S. 214–255). Wallstein.
- Schulze, R. (Ed.). (2011). *The Holocaust in History and Memory* (Vol. 5, 2012), *Euthanasia killings. The treatment of disabled people in Nazi Germany and disability since 1945*. University of Essex.
- Selg, O. (2016). *Nebel im August. Filmheft mit Materialien für die schulische und außerschulische Bildung*. Studiocanal.
- Sierck, U. & Radtke, N. (1984). *Die Wohltätermafia. Vom Erbgesundheitsgericht zur Humangenetischen Beratung*. Selbstverlag.
- Singer, P. (1979). *Practical Ethics*. Cambridge University Press.
- Snyder, S. & Mitchell, D. T. (2006). *Cultural Locations of Disability*. University of Chicago Press.
- Streeck, N. (2015). „Ein Embryo hat kein Recht auf Leben“. *Neue Zürcher Zeitung*. <https://www.nzz.ch/nzzas/nzz-am-sonntag/philosoph-peter-singer-ein-embryo-hat-kein-recht-auf-leben-ld.902280>

Taylor, R. (2016). Britain must hold fast to the European Convention on Human Rights as it leaves the EU. *LSE Brexit Blog*. <http://blogs.lse.ac.uk/brexit/2016/11/24/britain-must-hold-fast-to-the-european-convention-on-human-rights-as-it-leaves-the-eu/>

Topp, S. (2012). Die Tötung behinderter Kinder und Jugendlicher im Reichsausschuss-Verfahren (1939-1945) – The murder of handicapped children and youth in the Reich Committee Procedure (1939-1945). In Th. Beddies (Hrsg.), *Im Gedenken der Kinder. Die Kinderärzte und die Verbrechen an Kindern in der NS-Zeit – In memory of the children. Pediatricians and crimes against children in the Nazi period* (pp. 13–19). Deutsche Gesellschaft für Kinder- und Jugendmedizin e.V. (DGKJ).

United Nations (2006). *Convention on the rights of persons with disabilities*. <https://www.ohchr.org/>

Walker, P. (2012). Benefit cuts are fuelling abuse of disabled people, say charities. *The Guardian*. <http://www.guardian.co.uk/society/2012/feb/05/benefit-cuts-fuelling-abuse-disabled-people>

Westermann, S., Kühl, R. & Ohnhäuser, T. (Hrsg.). (2011). *NS-,Euthanasie' und Erinnerung. Vergangenheitsaufarbeitung, Gedenkformen, Betroffenenperspektiven*. LIT.

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