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The »euthanasia« program of the Third Reich involving the systematic murder of nearly 100 000 patients with mental and physical disabilities, both adults and children, has received little attention in the first forty years after the war. Only by the mid-1980s, did it become a subject of historical research, as well as part of Germany's collective memory of Nazism, as exemplified by the erection of commemorative monuments. Based on both bio-political and economic reasons and with the collaboration of psychiatric and other institutions, individuals seen as »unworthy of life« were not only subjected to coercive sterilization, but also deliberately killed – be it through systematic gassing in the context of Aktion T4, in the years 1939–1941, and later on, after protests from the German population and the churches, through deliberate neglect, poor hygiene, malnutrition and starvation, or under- and overmedication.

There has hardly been any systematic research on the fate of these vulnerable and dependent patients in the countries and territories controlled by Nazi Germany, let alone that such research has become part of the collective memory of the Second World War in these locations. This volume, originating from a conference held in 2019, fills this gap through articles on Austria (included as Ostmark into the Third Reich), Sudetenland, Bohemia and Moravia, South Tyrol, Poland, the Baltic states, Ukraine and other occupied regions of the Soviet Union, as well as France and the Netherlands. In addition, Paul Weindling, in his concluding contribution, also offers concise information about Norway, Denmark, Finland, Slovakia, Hungary, Slovenia and Greece. Relying on existing and new research, the volume's twenty-one contributions address the scale and manner of killing, the perpetrators and their allies, the underlying motives, the connection with the genocide of the Jews, and similarities and differences in this respect between Germany and the occupied countries, as well as among the different occupied countries.

The general picture provided in this volume is complex, fragmented and varied. Although the systematic and rigorous eugenics practiced in the Third Reich was not copied in the occupied parts of Europe, this hardly meant that the mentally ill and the physically disabled were safe there. On the contrary, in particular in Poland and the conquered parts of the Soviet



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Union tens of thousands of patients fell prey to brute, more or less random mass executions, largely driven by racism (the assumed inferiority of the Slavic population) and war-related practical reasons (food saving and seizure of mental institutions for hospitalizing wounded soldiers). In these countries, the Holocaust and the ruthless murder of patients took place concurrently.

Such deliberate killing did not occur in occupied Western Europe, with the exception of Jewish patients, who primarily were victims of antisemitism. The large excess mortality in psychiatric institutions in the occupied countries of Western Europe was largely due to food and medicine shortages, poor hygienic and living conditions, contagious diseases, as well as forced evacuations leading to overpopulated shelters. Furthermore, these already stigmatized patients could not count on much help from the general population because of concerns tied to their own survival and prejudices about the mentally ill and disabled. The wide dissemination of views linked to eugenics within the medical world and beyond merely reinforced this stigma as well as a practice of turning a blind eye.

In her article about France, Isabelle von Bueltzingsloewen argues that the assumed deliberate starvation (or »soft killing«, 189) of French mental patients, based on collaboration between physicians and the Vichy-regime, is a myth created by the anti-psychiatry movement. The high mortality rate in France – where over 48 000 patients died – was in fact caused by the many material shortages resulting from the circumstances of war. In Norway, Denmark, Belgium and the Netherlands, too, the German occupier did not pursue the elimination of mental patients, except for Jewish ones. Yet this view is qualified by Cecile aan de Stegge in her contribution on the Netherlands. She refers to a practice of »active neglect« (206), with possible involvement of Dutch authorities and physicians, causing the death of nearly 17 000 psychiatric patients. Moreover, almost all Jewish patients from the Netherlands would die in extermination camps, which is not the case for Jewish patients from neighbouring occupied countries. Her analysis has meanwhile triggered discussion among Dutch historians and needs to be studied more.

Several of this volume's contributions are highly readable, including the articles by von Bueltzingsloewen and Aan de Stegge, the contextualizing introduction by the editors, Gerrit Hohendorf's account of the previous history of German eugenics, Walter Pehle's article about Ernst Klee, who as of the 1980s began to inform the German public about the National-Socialist euthanasia practices, and the concluding contribution by Weindling. Most other contributions have a largely inventorying or summing-up character. Such factual information is essential, but the vicissitudes of individual victims and the motivations of the perpetrators tend to remain hidden behind numbers and statistics in these contributions. Only sporadically will the reader learn more about individual patients and those who sealed their fate. This volume will therefore most likely serve primarily the needs of experts and researchers, for whom it is indispensable, while it will appeal less



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to a wider audience and, consequently, contribute little to shaping collective memory.

In his concluding reflection, Weindling proposes that the memory of these long-forgotten victims should be kept alive – following the example of the Holocaust victims – by reconstructing their life histories and publishing their names on the basis of internationally adopted standards. Aside from objections against publishing data from medical files, it is questionable, however, whether such an ambitious and noble objective can be realized, given that the available sources – as this volume shows – contain many gaps, in particular regarding the »Bloodlands« in Eastern Europe. Moreover, commemorating these victims will be a delicate matter particularly in these countries. National self-images might be at stake, not only because of the then prevalent indifference among the general population, but also because of the need to examine more closely the collaboration with the Nazis by the medical world and local authorities in these countries.

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