

Article

Child Murder in Nazi Germany: The Memory of Nazi Medical Crimes and Commemoration of “Children’s Euthanasia” Victims at Two Facilities (Eichberg, Kalmenhof)

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Abstract: Nazi Germany’s “children’s euthanasia” was a unique program in the history of mankind, seeking to realize a social Darwinist vision of a society by means of the systematic murder of disabled children and youths. Perpetrators extinguished “unworthy life” during childhood and adolescence by establishing killing stations, misleadingly labeled *Kinderfachabteilungen* (“special children’s wards”), in existing medical or other care facilities. Part of a research project on Nazi “euthanasia” crimes and their victims, this paper uses a comparative historical perspective to trace memories of the crimes and the memorialization of their victims at the sites of two of these wards (Eichberg and Kalmenhof in Hesse, Germany). It also discusses the implications of the findings for theorizing mnemonic practices and analyzing ways in which memorials and other sites of memory deal with past trauma and atrocity.

Keywords: National Socialism; medical crimes; euthanasia; children; memory; commemoration; Germany; trauma; atrocity

1. Introduction [1]

Targeting infants, children, and youths, the National Socialist “children’s euthanasia” program was a unique phenomenon in the history of humankind, as the systematic murder of disabled children was the means for realizing a social Darwinist utopia. About 30 killing centers were established, termed “special children’s wards” (*Kinderfachabteilungen*). The term’s literal meaning is “pediatric specialty care units”; one of its functions was to mislead parents of children with a disability into believing that

excellent care was made available to their children in this way. In the wards, perpetrators destroyed life they considered “unworthy” of existence. Children with disabilities, congenital illnesses, and malformations were to be reported to local public health offices, which then passed on this information to a fictitious “Reich Committee for the Scientific Registration of Severe Hereditary Ailments” (*Reichsausschuss zur wissenschaftlichen Erfassung von erb- und anlagebedingten schweren Leiden*) actually located in a branch office of the Chancellery of the Führer in Berlin. There, after an administrative screening of the reports, three medical evaluators were commissioned to determine the fate of the children, with a “positive” result being the children’s admission to a “special children’s ward” either for “treatment,” *i.e.*, authorized murder [2], or further observation. Informed of the decision, local health authorities contacted the children’s parents and told them that their children would receive expert treatment in these wards to entice the parents to consent to the children’s admission; threats or financial incentives were provided if they did not comply. The children, termed *Reichsausschusskinder* (Reich Committee children), were killed by physicians or nurses, and their parents notified of the “sudden unexpected” death of their child. The physicians’ participation was always both voluntary and deliberate, as they retained ultimate authority to order or decline a killing once authorized from Berlin. The total number of casualties of this bio-political procedure, termed *Reichsausschussverfahren* (Reich Committee procedure), was at least 5,000, though the exact cause of the victims’ death was often impossible to determine. Some children died of overdoses of barbiturates or narcotics; others of starvation, neglect, exposure to unsanitary conditions or cold temperatures, or the withholding of medical treatment [3]. Appendix 1 contains a short case study detailing the sequence of these events. On the basis of administrative and medical records of a patient who became a victim at three years old (see supplementary file A), it describes step by step how the “Reich Committee” procedure worked, from the reporting of the child’s disability on a form to the admission to a “special children’s ward,” and ultimately his death and the notification of his parents. Appendix 2 illustrates the administrative side of this procedure, describing a series of unique documents (see supplementary file B) not previously discussed in the scholarly literature.

For a long time the total number and locations of the “special children’s wards” remained somewhat speculative. It took historians of medicine until around the year 2000 to establish that about thirty “special children’s wards” existed, how long there were in operation individually, and who the main perpetrators were at each location. Four wards were located in Poland (using current geographical boundaries), two in Austria, one in the Czech Republic, and slightly more than twenty in Germany [4]. Their function fits in with what Zygmunt Bauman [5] has identified as one of the conditions of mass destruction of human life in modernity, namely the extensive division of labor that not only lends itself to the diffusion and displacement of responsibility among the perpetrators, but also characterizes the interplay of social Darwinist health measures in Nazi Germany as a whole. For according to National Socialist ideology, beyond the removal of racially, ethnically, and socially undesirable groups (Jews, Sinti and Roma, and “antisocials”) such health measures included the sterilization of individuals termed “defectives” lest they pass on their alleged deficiencies to offspring; the killing of mental health patients who were seen as a drag on the nation in the so-called “T4” (gas murder) action in 1940–1941; the “decentralized euthanasia” actions in individual health care facilities until the end of the war; and, as an integral part, the killing of disabled children and youths to prevent them from being an economic

burden and having a deleterious impact on the health of the “body of the people” as inferiors in adulthood [6].

As part of a research project conducted by the author to study the memory of the Nazi “euthanasia” crimes and the commemoration of their victims, this paper analyses how two facilities that housed “special children’s wards,” the Kalmenhof and the Eichberg facilities, have come to terms with these aspects of their past. Both facilities are located in Hesse-Nassau (today part of the state of Hesse, Germany). Perpetrators at these locations became defendants in some of the earliest trials after World War II covering “children’s euthanasia” crimes, which left historians and legal scholars some of the most ample source materials available to work with for decades. The “T4” gassing facility Hadamar, also located in Hesse-Nassau, was not far from either place. Beyond an estimated minimum of 750 deaths that occurred among Kalmenhof residents between 1939 and 1945, over 200 residents were compulsorily sterilized, about the same number were sent to Hadamar and gassed there, and the Kalmenhof also served as a transfer station housing patients from other facilities on their way to Hadamar [7]. In the Eichberg asylum, a larger facility with a nominal capacity of 900 beds, over 300 patients were compulsorily sterilized, more than 2,000 patients, including patients brought there as transfer patients, were sent to their death at Hadamar, and the annual death toll was at least 600 on site during the later war years, including foreign forced laborers who had become sick [8,9]. It was a facility with conditions that were particularly atrocious for the patients who resided there [10].

Using a comparative historical perspective, this paper describes and analyzes the history of mnemonic practices concerning the dead children as victims, and mnemonic engagement with and on the sites of perpetration. One of the core findings is that while the existence of some basic historical evidence about the fate of the victims, the crimes perpetrated against them, and culpability for the crimes might well be a *conditio sine qua non* for commemoration—*how can something be remembered if victims, perpetrators, crimes, geographical location, and the activities that link them remain unknown?*—the existence of such evidence is by no means sufficient for commemoration, nor does it preclude processes of swift and deliberate forgetting. The paper also addresses general implications of this research for theorizing memorialization and for ways in which memorial sites and similar facilities can effectively present information about such or similar past events and engage their audiences [11].

2. “Children’s Euthanasia” at the Eichberg Facility

2.1. The “Special Children’s Ward” at the State Psychiatric Facility Eichberg

The “special children’s ward” at the State Hospital Eichberg, near the town of Eltville (in the vicinity of Wiesbaden) was established in March or early April 1941 and existed until March 1945, when American troops came to occupy the region. The director of the hospital was Dr. Friedrich Mennecke, who also worked for the “T4” program (the gas murder of hospitalized, mostly adult psychiatric patients) as an evaluator of registration forms on the basis of which patients were selected for murder. His deputy, Dr. Walter Schmidt, was in charge of the “special children’s ward.” When in January 1943 Dr. Mennecke was drafted into the German army, he remained the nominal head of the institution, but Dr. Schmidt de facto led it from then on [12–14].

More than 500 children and youths died at the Eichberg institution during the time the “special children’s ward” existed. Even by conservative estimates, the vast majority of them were murdered, with the number of victims estimated to have been at least 430 [15,16]. In addition, children who had been previously subjected to examination by Professor Carl Schneider in the Psychiatric Clinic at Heidelberg University were sent to the Eichberg to be killed there, and their brains were then returned to Prof. Schneider for research [17,18]. Moreover, the Eichberg facility was a training site for “euthanasia” physicians such as Dr. Magdalene Schütte, who as the head of the “special children’s ward” in Stuttgart was instructed in the methods of killing patients there. To accommodate the ward an existing building was repurposed as a barrack for children. It housed younger children, while children who were more than nine years old were placed among adult patients in other stations [19]. Located on the perimeter of the state hospital, the barrack was later razed and no physical remnants of it remain.

2.2. Public Memory of the Crimes and History of Commemoration

The murder of patients at the Eichberg facility resulted in a first trial at Frankfurt/Main in December 1946. Earlier a German court in Berlin had convicted the medical director of the care facility and asylum Meseritz-Obrawalde (Miedzyrzecz-Obrzyca), Dr. Hilde Wernicke, and the nurse Helene Wiczorek of “euthanasia” killings on over 100 counts of murder in the context of a death toll of approximate 10,000 patients there. Both were executed in January 1947 [20,21]. In Hesse, in October 1945 a U.S. military court, commissioned to deal with crimes during the war by Germans against foreigners but not against other Germans, had previously sentenced the chief administrator of the medical and nursing facility Hadamar and two nurses to death as well other staff to prison sentences for the murder of foreign laborers. This led to further investigations by the German prosecutor’s office in Frankfurt concerning killings of Germans committed in institutions in the district of Nassau. Soon after the end of the war citizens had begun to report such killings to state agencies [22].

In the Eichberg trial Dr. Mennecke was convicted of his involvement in the “T4” program, the transfer of Eichberg patients to the killing center Hadamar, and the murder of adult patients on site, but also expressis verbis for his role in “children’s euthanasia.” Dr. Mennecke had claimed that he had opposed the establishment of a “special children’s ward” and participated in its operation reluctantly. He also alleged that it was Dr. Schmidt who decided which children should be killed and who carried out the killings. The court affirmed the prosecution’s positions and rejected Dr. Mennecke’s arguments in toto. It noted that he had been an active supporter of “children’s euthanasia” and participated in the program eagerly. He was in charge of the correspondence with the “Reich Committee” and kept the “authorizations for treatment” from Berlin in his office. The court further found that while it could not be established that he had killed personally or given the order to kill in specific cases, he had acted from base motives, one of the conditions in German criminal law for murder. Dr. Mennecke was convicted of murder and sentenced to death but died of tuberculosis in 1947 before the verdict could be carried out [23].

In contrast to Dr. Mennecke, Dr. Schmidt admitted to having killed at least 30 children personally and ordering head nurse Helene Schürg, who reported directly to him, to kill 30–40 more. The court rejected his line of defense that he had merely shortened the life of children who were so ill that they would have died painfully shortly anyway. However, while it found that he had acted maliciously in

killing 70 children and in his role of sending patients to Hadamar's gas chamber, it also found that he had not acted from base motives. The court considered a mitigating factor that he had energetically treated patients he considered curable and sought to introduce new medical treatments at the Eichberg. It also conceded his position that he had not killed except in cases in which the "authorization for treatment" had been granted from Berlin, that he had inwardly condemned the killings, and that he acted under a false notion of obligation and duty to authority he was raised with. Nurse Schürg for her part admitted to having killed 30 to 40 children while acting under Dr. Schmidt's orders. She declared that over 500 children had been admitted to the "special children's ward," of whom 200 had been actively killed. Nurse Andreas Senft admitted to having assisted in the killing of children. For all of the defendants, the court noted that they had all participated voluntarily, without been forced to or under the threat of negative sanctions. They could not claim that Hitler's signed "euthanasia" decree had the force of the law, that they had no awareness of the illegality of their actions, or that they had acted under orders to participate or kill.

The court initially sentenced Dr. Schmidt to a life sentence for being a co-perpetrator in the murder of at least 70 children in "children's euthanasia," but his sentence was commuted to a death sentence on appeal. His sentence was further commuted in 1949 to a life sentence, then in 1951 to 10 years imprisonment before he was finally pardoned in 1953, after his supporters had exerted political pressure and in a clemency petition even claimed that he had found a cure for Multiple Sclerosis. In spite of the fact that Dr. Schmidt had lost his medical license he reportedly continued practicing medicine in the area of Hattenheim (located close to Eltville). Since Schürg and Senft, who had been sentenced to eight and four years of prison, respectively, for being accessories to murder, were also granted an early release, by the mid-1950s none of the main culprits of the child murder at Eichberg remained in prison.

The detailed depiction of child murder in the context of the "Reich Committee procedure" in the trial in 1946 meant that from now on sufficient information was available to scholars and observers to identify the Eichberg facility and refer to it as a confirmed site of "children's euthanasia." Alexander Mitscherlich and Fred Mielke, medical observers at the doctors' trial at Nuremberg, in 1947 mentioned it briefly in their documentation [24], whereas another observer, Alice Platen-Hallermund, in her book *The Killing of the Mentally Ill in Germany* in 1948 gave the medicalized murder of children at the Eichberg facility a far more prominent place [25]. Public support for clemency for the main perpetrator of crimes against children, Dr. Schmidt, might well be understood as a reaction to publications such as Platen-Hallermund's, which gave the institution a bad name [26]. For many in the local population the depiction of the Eichberg as a murder site may have proved incongruent with their self-image as citizens and victims of war themselves. Prevalent in the post-war era in West Germany at large, this image held that many had merely been "misled" by the Nazis and led to an eagerness to exculpate "lesser" perpetrators [27].

Even though on occasion of the 100th anniversary of the psychiatric clinic in 1949 its medical director and the commissioner for state care facilities, Friedrich Stöffler, addressed the "euthanasia" murders at the Eichberg (which were then also mentioned in regional newspapers) [28], the recognition of these atrocities appears to have quickly faded from public memory. The process of oblivion occurred in spite of a continual accounting of the child murders in the press and in scholarly publications in the 1950s and 1960s; for example, in the context of the pardoning of the "T4" gassing

physician Hans Bodo Gorgass, whose pardon was related in public discourse to that for the “child euthanasia” murderer Schmidt [29]. A significant event was Rüter–Ehlermann and Rüter’s publication of trial verdicts concerning Nazi crimes, which commenced in 1968 and included in its first volume the verdicts for the Eichberg trial [30,31].

That this publication had done little to forestall collective amnesia came to light when a group of local high school students and their teacher took on the topic of “euthanasia” at the Eichberg as part of a school project and then in an entry for a history essay competition sponsored by the President of West Germany, “Youths Conduct Local Research” (*Jugendliche forschen vor Ort*) in the early 1980s. Hospital administrators told the students that they know nothing about the publication of the Eichberg verdicts in the aforementioned collection [32]. Based on its oral interviews of about 50 residents in the Eichberg region between the ages of 55 and 80, the group uncovered similar manifestations of forgetting among those older residents, who generally reported to know that Eichberg was a transfer institution for Hadamar but purportedly had no knowledge of the murder of patients at Eichberg during “wild euthanasia” after Hitler had stopped the “T4” action in August 1941. No one claimed to have any knowledge or memory of child murder in the “special children’s ward.” Many residents appeared to be generally uncomfortable with the group’s inquiries about events in the region during the Nazi period [33].

One might want to regard with skepticism the representations of these citizens of knowing little to nothing about murder. Markus Kreitmair, a historian of the Eichberg who grew up in the region, has noted that the arrival of so many small children at the tiny train station at Hattenheim could not have gone unnoticed and rumors had likely spread quickly. He reports that villagers issued ominous warnings to parents with small children in the region about children being experimented on at the Eichberg facility after their admission [34].

The students’ inquiries and publications by their teacher, Horst Dickel [35,36], heralded a series of further research on “euthanasia” in the “special children’s ward” in the form of books, dissertations, articles, and theses, which yielded a number of scholarly publications that was likely without parallel for any of the other wards at the time [37]. Beyond that, at the beginning of the 1990s researchers conducted a first analysis of extant medical records [38], about which the hospital administration had previously declared to Horst Dickel’s students that they no longer existed [39]. An indication of the existence of such records emerged when in preparation for a permanent exhibit the Hadamar memorial began looking for specific information about children who had died at the Eichberg [40] and subsequently incorporated such information into its travel exhibit. The clinic’s 150th anniversary prompted the Communal Welfare Association of Hesse to publish as part of its historical studies series a book entitled *Knowledge and Error: The History of Psychiatry over Two Centuries at Eberbach and the Eichberg* in 1999 [41] and to commission a travel exhibit with the same title. Both addressed the “Reich Committee procedure” in great detail. One year later the historian Markus Kreitmair published his master’s thesis in history on the murder of children at the Eichberg, which can be accessed on the Internet and constitutes a rare case study on a “special children’s ward” in English [42].

These attempts to shed light on the atrocities committed at the Eichberg may have done little to change the regional population’s lack of interest in this topic, however. At least that is the conclusion one might draw from the reaction to a series of articles on the history of the Eichberg facility published by the well-known journalist Hans Dieter Schreeb in the regional newspaper *Wiesbadener Tageblatt* in

2006, which included references to the murders that had been committed at the facility during the Nazi period. Regional historical accounts by this journalist have typically resulted in some public interest and letters to the editors being written as a response, but not this time: the thematization of murders at the Eichberg was greeted with dead silence [43].

2.3. Commemorative Vehicles [44]

On the premises of the Eichberg facility the first memorial object was established in the form of a cross in the facility's cemetery in 1985. An inscription on a plaque at the bottom included a reference to the victims of "euthanasia" but not to child victims. In 1988 a memorial plaque with such a reference was placed at the chapel of the old cemetery of the Eichberg, located in close proximity to a small meadow believed to be the location of a mass grave for the children. Its inscription reads as follows: "In memory of the helpless children who fell victim to the 'euthanasia'-crimes at the Eichberg during the time of National Socialism and lie buried here. Their death must be a warning to us." The plaque was initially complemented by a bed of roses located on the mass grave itself, but students from a regional high school that had been responsible for its upkeep no longer tend to it.

In 1993, after a discussion on whether to abandon the old cemetery entirely, the Communal Welfare Association of Hesse commissioned the creation of a commemorative stone in the form of a sarcophagus, to be placed next to the chapel. The sculpture was dedicated in 1993. Created by the sculptor Uwe Kunze, it has the following inscription: "In memory of the many people who at the Eichberg fell victim to Nationalist Socialist compulsory sterilization and 'euthanasia' crimes; we commemorate—the 301 women and men who were compulsorily sterilized between 1935 and 1939;—the 2,019 patients, who in 1940/41 were transferred from the transfer facility to the killing center Hadamar, among whom were 660 patients of the Eichberg;—the 476 children with disabilities, who between 1941 and 1945 in a so-called special children's ward were observed 'for scientific purposes' and then murdered;—the many male and female patients who between 1942 and 1945 were killed through exposing them to malnutrition and the provision of overdosed medications. Their lives and deaths are a warning to us, and an obligation for the present and future." A teddy bear and wooden horse protrude from the sculpture but appear to be slowly sinking into it at the same time. This spatial arrangement is meant to represent a process of falling into oblivion, of the children themselves and the childhood of so many destroyed on the Eichberg. This sculpture may well rank among the most memorable of this genre. Since its dedication regular religious services at the chapel on the Sunday before Advent and a number of youth camps and similar activities in memory of the murdered children have taken place there.

While various memorial objects have thus come into existence, visitors have not found it easy to locate them on the premises. While the Communal Welfare Association of Hesse on the Internet provides a veritable list of existing memorial objects related to victims of National Socialism and the crimes against them at the various facilities toward which the association has a responsibility, it does not provide a history of the Eichberg facility. Recently, the Internet page of the clinic, which nowadays is part of the "Vitos Rheingau" medical group, provides a chronicle of the facility that includes the time during National Socialism and even includes a web page dedicated to the memorial [45], but this a very recent phenomenon. Prior to 2010 there were no references to these issues on the clinic's web

pages anywhere, and a visitor might have looked in vain (as this author once did) for a prominently displayed geographical map on site. To address such shortcomings, since about 2005 two Protestant clinic chaplains offer guided tours of the memorials on the premise, which are geared toward patients, staff, and visitors.

Concerned citizens and staff constituted the association “Memorial Eichberg” with the purpose of both exploring the clinic’s history further and making it public. The association’s activities resulted in the commission of a permanent exhibit, for which the temporary exhibit of 1999 was repurposed and slightly changed. The exhibit consists of nine large panels. The first panel depicts ideological-philosophical developments spanning the time from the Enlightenment to Social Darwinism and “racial hygiene” in Germany. The second panel addresses the spread of notions of “racial hygiene” in German culture and politics until 1933. Compulsory sterilizations in the Third Reich, including of patients at the Eichberg facility, are thematized on panel three. The fourth panel relates to National Socialist policies toward mental asylums and similar institutions of care, noting among its foremost goals the reduction of costs. Panel five displays several documents describing the Nazification of the Eichberg facility up to 1939. The next panel displays the involvement of the facility in the “T4” gas murder action. Panel seven addresses “children’s euthanasia” using documents to show the children’s fate as well as the perpetrator’s deeds. It also refers to the collaboration between the Eichberg facility and the Carl Schneider at the Psychiatric Clinic of the University of Heidelberg regarding his medical research on brains of children killed at the Eichberg. The eighth panel shows various groups of victims and how they died at the Eichberg facility. The last panel documents the difficult material circumstances of this facility in the immediate post-war period as well as citizens’ advocacy of judicial clemency for “euthanasia” perpetrator Dr. Schmidt [46].

The permanent exhibit was opened to the public on 1 September 2009. This day marks the seventieth anniversary of Hitler’s “euthanasia decree,” which was signed in October 1939 but backdated to 1 September. Annual commemorative events are scheduled to take place on this day from here on.

3. “Children’s Euthanasia” at the Kalmenhof

3.1. The “Special Children’s Ward” at the Kalmenhof

Located in the town of Idstein, the Kalmenhof has been both a school and a hospice (*Heilerziehungsanstalt*), and like the Eichberg hospital, it was located in the province Hesse-Nassau. Jewish and Christian liberal philanthropists in Frankfurt helped found this privately operated institution, termed at first “Facility for Idiots” (*Idiotenanstalt*) and later “Facility for the Care and Education of the Feeble-Minded” (*Heilerziehungsanstalt für Schwachsinnige*). Studies on the history of this institution note that the Kalmenhof was “a ‘model institution’ that was well endowed and operated efficiently” and ranked “among the leaders in providing care” until 1933 [47,48]. Thereafter, the facility lost its independent status and turned into a state-controlled institution put in line with Nazi biopolitical goals.

Scholars have indicated different dates for the establishment of the “special children’s ward,” which existed until Allied forces occupied Idstein in March 1945: at the end of 1941 at the latest (U.

Benzenhöfer) [49], in August 1941 or shortly thereafter (A. Berger and T. Oelschläger) [50], no later than in September 1941 (S. Topp) [51]; or at the turn of 1941–1942 (D. Sick, P. Sandner; based on Kalmenhof trial records) [52–54]. However, mortality at the Kalmenhof had already begun to rise significantly in October 1939 [55]. Between January and July 1941 235 of the 600 institutionalized residents were sent off to be gassed at Hadamar, including 85 born after 1 January 1920 [56]. At the beginning of 1941, that is, before the “special children’s ward” had formally been established, the physician Mathilde Weber, who later became its director, was asked by the “Reich Committee” to furnish a report about children on a list that had been sent to her [57]. The Idstein Protestant Rev. Boecker, a member of the oppositional Confessing Church, kept a register of deaths (among Protestants), which for the period between 1 May 1941 and 31 August 1941 contains 35 entries of children, to which the reverent added the letter “E” or the word “euthanasia” [58]. These entries are likely indicative of killings that occurred outside the “Reich Committee procedure.” Such killings have been documented at other sites of “special children’s wards.”

Unlike the Eichberg facility, the Kalmenhof was not under medical but administrative directorship [59]. From 1937 on, after having been appointed administrative chief of Hesse-Nassau’s state care facilities and becoming chairman of the Kalmenhof foundation (which helped provide for the Kalmenhof financially), the rabid Nazi Otto Friedrich (“Fritz”) Bernotat played an important role in the implementation of Nazi policies for such facilities in the region, and the Kalmenhof in particular. Having been instituted by the Nazi party in 1933, Ernst Müller remained the Kalmenhof’s director until being drafted into the German armed forces in June 1941, after which time Wilhelm Grossmann became deputy head and remained in this position until 1945. Between 1938 and 1945 Dr. Bodo Gorgass was the institution’s medically director, but he was drafted into the German army in 1939 and then served the “T4” organization, including as a gassing physician at Hadamar, and no longer played an active role at the Kalmenhof.

The physician Mathilde Weber was his replacement. Until her resignation due to illness at the end of June 1944 she was responsible for the “special children’s ward.” She contracted tuberculosis from a child in 1942, as did nurse Müller, who worked in this ward. When Weber took part in a seminar at the University Psychiatric Clinic at Heidelberg led by professor Carl Schneider (likely a training course in “euthanasia”) and was absent from the Kalmenhof in the summer of 1942, there was not a single death among the children in May, June, and July of that year, and there was none a year later during a period when her tuberculosis prevented her from working [60,61]. Among the nurses the Kalmenhof nurse Frieda Windmüller worked in the “special children’s ward” until the end of October 1942; since mid-May 1942, the nurse Maria Müller [62]. In May 1944 Weber was replaced by the physician Hermann Wesse. Wesse had gained extensive experience with child murder in the “special children’s wards” at Görden, Waldniel, Leipzig, and Uchtspringe [63,64]. Besides Müller, nurse Anne Wrona, who had previously worked in other “special children’s wards” before, was on duty in Kalmenhof’s ward after June 1944 [65].

The “special children’s ward” was located in the institution’s hospital building, which had been built in 1927. Since the German Army occupied all buildings at the Kalmenhof in 1941 except for the externally located seniors’ home, including the ground and first floors of the hospital building, and the second floor was used to treat residents of the Kalmenhof, solely the expanded third floor under the roof of the building was available to house the “special children’s ward.” For lack of space some

“Reich Committee children” were placed in the seniors’ home [66,67], where a teacher hostile to the killing program, Loni Franz, succeeded in her attempts to save at least some of the children. She kept track of their fate and provided evidence about it to the prosecution after the war. The hospital building still exists as of summer 2012, but it is in very poor condition and would require extensive renovation to make it habitable again.

The number of children who died in Kalmenhof’s “special children’s ward” was likely almost as high as at the Eichberg. Vital records kept in Idstein indicate the occurrence of over 600 deaths in the Kalmenhof between 1941 and 1945, among them at least 369 deaths of children and youths between the beginning of 1942 and 1945. Including those who died beginning in about August 1941 as part of the “Reich Committee procedure,” the number of victims can be conservatively estimated to have been at least 300 to 350 [68–70], and there is evidence of a division of labor with Hadamar’s *Mischlingsabteilung* in the transfer and killing of two Jewish *Mischling* children there in 1943 [71]. In the process of broadening the groups of children targeted, Hadamar between 1943 and 1945 also functioned as a death facility for children considered deviant (“alien to the community,” “uneducable,” “useless”) but without disabilities, including at least one child from the Kalmenhof [72].

3.2. Public Memory of the Crimes and History of Commemoration

In early April 1945, that is, almost immediately after Allied troops had occupied Idstein, the American military government commenced investigations regarding crimes committed on the Eichberg and had Grossmann, Wesse, Wrona, Müller, and another nurse arrested on suspicion of murder. All these individuals were subsequently released, however. In March 1946 jurisdiction over criminal cases was transferred to German courts, and the state prosecutor’s office in Frankfurt concluded its investigations in September 1946 [73,74]. Director Grossmann, physicians Weber and Wesse, and nurse Wrona and another nurse were arrested. Nurse Müller was also charged with murder but state authorities were unable to locate her. The former administrative head of the Hesse-Nassau care facilities, Bernotat, who was never charged, also escaped persecution. Until his death in 1951 he is reported to have lived under an assumed name [75].

The verdicts in the Kalmenhof trial in January 1947 followed shortly after those in the Eichberg trial in the previous month. In his defense Grossmann claimed having performed merely administrative functions during the war without becoming involved in the operation of the hospital or other medical issues, and that he had no knowledge of the killings in the hospital building. The court rejected these positions by noting that Grossmann provided crucial administrative support for the “euthanasia” killings at the highest level, committed on behalf of the “Reich Committee” to secrecy all persons involved, kept in his office paperwork for the “Reich Committee,” and ordered those files destroyed when American troops were drawing near at the end of the war. Wesse portrayed himself as a “simple soldier” used to obeying orders, and claimed having been threatened with being placed in a concentration camp had he declined to become involved in “Reich Committee” affairs initially. He further claimed having considered the “authorizations” as orders to kill, and he admitted to having made use of such authorizations in 25 cases, killing two children in person. The court found that one victim he killed personally was killed solely because she was half-Jewish (*i.e.*, considered a *Mischling*) and strongly suspected that the other victim’s killing was motivated by the concern that as a maid in

the hospital ward she could live to tell her experiences there to post-war prosecutors. While the court did not have enough evidence to conclude that he had participated in more killings, it rejected the notion that Wesse had acted under orders for the 25 killings. In fact, the prosecution had entered into evidence a letter written by Wesse to the “Reich Committee” upon taking over the “special children’s ward” from Weber in which he requested that new children be sent to the ward because there weren’t any there at the time. Weber, in turn, admitted to even less than Grossmann or Wesse, claiming that she had already been in charge of the hospital before the “special children’s ward” was established in 1942; that she had merely continued her professional activities there but had not been a “Reich Committee” physician nor carried out any killings; and that she had not known of such. In fact, she claimed to have sabotaged any untoward activities toward these children. Whereas the court did not establish that Weber had killed on her own, it found that she had known that children were killed by nurse Müller and failed to intervene; that she had issued death certificates with fake causes of death; that she participated in a seminar at the University of Heidelberg under “euthanasia” supporter Carl Schneider—which Weber had claimed was for fun and entertainment; that she had not, as she claimed, left the Kalmenhof because of her superiors’ dissatisfaction with her “performance” (*i.e.*, lack of adherence to “euthanasia” policies) but because she had requested it (her request was based on her ill health); and that during her illness-related leave from the Kalmenhof in 1943 not a single child had died there.

The court found base motives behind the crimes of the three accused, and malice in their involvement in the killings as well. It sentenced to death Grossmann, Weber, and Wesse for murder, and nurse Wrona to an eight-year prison sentence for being an accessory to murder [76,77]. Yet in the sentence for the physician Mathilde Weber in particular, the court opened the door for a momentous change in the application of the law that enabled processes of minimizing culpability of the perpetrators and the ultimately forgetting of their victims, in two ways. First, while it noted in its sentence that Weber had been known to the “Reich Committee” as the head of “special children’s ward,” in spite of her claims of not being one, that she had been granted special compensation from the “Reich Committee” as well as had kept records for it, and that she had received training that the court suspected had to do with “euthanasia,” the court failed to establish conclusively that she had indeed *been* the head of the special children’s ward. No medical historian today would doubt that the pivotal role of the head of a “special children’s ward”—who typically reported directly to the “Reich Committee”; fully identified with the purpose and goals of the “Reich Committee procedure”; as the chief functionary on the ground was responsible for seeing to it that the killing authorizations were implemented and for reporting back the results; and received a specific supplementary compensation for it—could have been carried out without the person in charge making the cause of the deed, *i.e.*, killing disabled and sick children in knowing violation of existing law, fully his or her own. It was also utterly plausible to assume, as the court did, that Weber could have been truthful in stating that she was inwardly opposed to such killing of children. Second, by not establishing these conditions, in its verdict the court failed to demonstrate that nurse Müller could not possibly have been a rampant murderer acting on her own, of whose actions Weber merely knew but failed to intervene, but must have always, or almost always, been acting under the direction of the head of the “special children’s ward,” as was uniformly the case at other such notorious wards. These failures would prove consequential in the appeals process.

On appeal the State Superior court in Frankfurt/Main in April 1948 affirmed the verdict for Wesse but vacated the verdicts for Grossmann, Weber, and Wrona and remanded the cases to the lower court. A subsequent new trial in February 1949 resulted in a not-guilty verdict for Wrona and sentences of four-and-a-half years for Grossmann and three-and-a-half years for Weber for being accessories to murder, as the court found that under the subjective theory of perpetration in German jurisprudence [78], neither Grossmann nor Weber had made the cause of “euthanasia” killings his or her own and found the defendants guilty merely on the lesser charge of aiding and abetting murder. In particular, the court now held that Weber abetted nurse Müller, who could have received her instructions from someone else (such as Fritz Bernotat), in murder. It also found that Weber did not provide indications that she inwardly identified with these deeds, and could not be shown to have acted from base motives. The head of a “special children’s ward” was thus legally deemed an accomplice as a doctor to a nurse. Legal historian Michael Bryant sees in this verdict a “seachange in judicial attitudes” by which the West German judiciary “became an auxiliary to the nation’s willed amnesia” toward the perpetration of Nazi crimes and “tools of German criminal law like the distinction between perpetration and complicity and the statutory definition of murder were used to further this act of collective forgetting” [79].

For health reasons Grossmann did not serve out his remaining prison sentence; he died in 1951. Weber was also released due to ill health at the time. Her subsequent appeal of the verdict was rejected in June 1949, whereas the superior court vacated the verdict for Wrona and remanded the case to the lower court, which subsequently convicted Wrona on charges of murder to a prison sentence of three years, which the Federal Court of Justice then vacated in September 1953 and found Wrona not guilty once more. Mathilde Weber meanwhile was still free, and even though she began serving her remaining sentence in October 1954, she was released after only one additional month in prison after having served two thirds of her sentence—which amounted to about three days per child or youth who died as a likely victim while she was head of the “special children’s ward.” The longest-serving “euthanasia” murderer in West Germany was Hermann Wesse, who had been convicted of murder at Waldniel (also the site of a “special children’s ward”) by a court in Dusseldorf in 1948 and served a life sentence until his release for health reasons in 1966 [80].

In spite of the subsequent legal relativizations of guilt that followed in its wake, the Kalmenhof trial in 1947 was important in that it provided a relatively detailed account of the crimes in the “special children’s ward” that was among the earliest such accounts in post-World War II history, just as the Eichberg trial had done for the Eichberg facility. Later that year Mitscherlich and Mielke mentioned the Kalmenhof briefly in their documentation for the Nuremberg doctors’ trial (though they mislabeled it “Kantenhof”) [81], and Alice Platen-Hallermund’s book provided more details a year later [82]. Mitscherlich and Mielke addressed the topic again briefly in 1949 in their final report composed for the West German physicians’ associations, which was republished and made much more widely available in 1960 [83]. The protracted trials and repeated attempts to rehabilitate the perpetrators meant that the crimes were also covered extensively in the local and regional press, as a number of studies have shown. According to these studies, reports and editorials existed in the *Frankfurter Rundschau*, the *Wiesbadener Kurier*, and later also in the *Frankfurter Neue Presse*, the (Frankfurt) *Abendpost*, and the *Idsteiner Zeitung* until well in the 1960s [84,85]. At the end of the 1960s the collection of

West-German sentences in trials of Nazi criminals published by Rüter-Ehlermann and Rüter included the Kalmenhof trials and made the sentences accessible [86].

The availability of information about “children’s euthanasia” crimes did not prevent local support for their perpetrators, while public events disregarded the crimes. In hindsight Mathilde Weber’s misrepresentations about her role in “children’s euthanasia” and how she deliberately and repeatedly sought to mislead the court seem particularly brazen, so much so that she joins some of the worst perpetrators in this regard. Her untruths did not stop there: as late as in 1960 she continued to portray herself as the real victim, namely, as a physician who had courageously tried to sabotage and undermine the killing actions and was later unduly punished for it [87,88]. In Idstein within days after the initial death sentence for Mathilde Weber at the end of January 1947 a signature list emerged in support of her, noting her “sense of duty” as well as her “love” for her patients. The text accompanying the list noted that she enjoyed the complete trust of the entire (local) population, which was “stunned by the verdict, as no one believes Dr. Weber to be guilty,” and a local clergyman wrote in a note that a “valuable person” like her should not be treated like a common criminal. In 1948 over 600 signatures were on a petition advocating that the appeals court review her sentence, including those of Idstein’s notables: the mayor, the school principal, the local clergyman, the public notary, the book store owner, and the town pharmacist [61,89].

The town’s citizens continued to support petitions for clemency for her and Grossmann: the petition for Grossmann was supported by the mayor and town council in a resolution and a letter. For some citizens it may have seemed impossible that Weber in particular, having been married to a prominent Idstein physician at the time the “special children’s ward” existed, could have carried out the gruesome acts she was accused of. Just as had happened in the Eichberg region, the region surrounding the Kalmenhof showed little interest in confronting its Nazi past. Dissonant voices existed but had no forum beyond the court: when in June 1948 the Frankfurt court in preparation for Grossmann’s, Weber’s, and Wrona’s new trial searched for and deposed parents of children who had died in the Kalmenhof, parents entered ample and detailed testimony into the record, about horrendously starved children, from whom personnel even withheld the food their parents had sent them, about the blatant deceit of parents regarding their children’s cause of death, and about perpetrators such as Weber, who asked the mother of a severely disabled child verbatim to be “reasonable...and tell [Weber], ‘Frau Doctor, bring my son’s suffering to an end’” [90]. These parents did not sway the court as to finding Weber a murderer who had acted maliciously and from base motive, and they did not seem to have found a willing ear among Idstein’s citizens.

At official functions and public events the murders equally fell into oblivion. When the administrative district Wiesbaden, which assumed responsibility for the Kalmenhof through its Communal Association (*Kommunalverband*) in 1948, issued a commemorative publication on occasion of its 80th anniversary that year, the chapter addressing the Kalmenhof made no mention of the “euthanasia” crimes there. A speech on occasion of the 75th anniversary of the Kalmenhof’s establishment in 1963 and a publication with text and pictures about the history of the town of Idstein in 1971 marginalized or omitted them entirely. In 1978, at the celebration of the Kalmenhof’s 90th anniversary, its director even denied—apparently in good faith—that people had been killed there during the Nazi period, and this very statement found its way into the corresponding Festschrift [61,91]. No one seems to have noticed then the publication of trial verdicts for the Kalmenhof about ten years

earlier. In a bizarre twist, a thematization of murders in the Kalmenhof did occur, in a book by Franz Scheidl. Scheidl had been an Austrian Nazi and was among the first Holocaust deniers in post-World War II Austria. In a section of his self-published tome *The History of Vilification of Germany* (*Geschichte der Verfemung Deutschlands*, 1967), he adopted Mitscherlich and Mielke's earlier mistaken identification of the Kalmenhof as "Kantenhof" and claimed that the killing of "crippled and idiotic" children was motivated by compassion and had been continued by the American occupiers after the end of the war. Thus he not only accused Americans of committing the same deeds as the Nazis but also promulgated the familiar Nazi depiction of the mass murder of disabled children as merciful *deliverance* from a baneful existence [92,93]. The Holocaust denier group VHO continues to make Scheidl's writings available on the Internet [94].

3.3. Commemorative Vehicles

An annual personal procession until the year 1961 by a Kalmenhof nurse with a few children to the cemetery with the murdered children's mass grave in the vicinity of the hospital was the only reported form of an act of commemoration for them at the time [95]. This situation changed in the early 1980s when a group of students in the context of the Action Reconciliation Service for Peace visited Auschwitz, where the Auschwitz survivor Jerzy Skrzypek pointed them to information published by Mitscherlich and Mielke about the crimes committed at the Kalmenhof during the Nazi period. Upon their return the leader of the group, a reverent from Idstein, contacted Idstein's mayor, members of religious congregations, and the directorship of the Kalmenhof in this regard. This action helped prompt the Idstein newspaper to publish a detailed report about the crimes in January 1982, and a commission formed that included the Communal Welfare Association to work toward establishing a memorial. This initiative addressed "children's euthanasia" and therefore ranks among the first at the historical locations of "special children's wards" (see Table 1 below).

Table 1. Commemoration at approximate 30 sites of "Special Children's Wards" in Germany, Austria, Poland, and the Czech Republic: an Overview [96].

State/Region/ Province (Voivodeship)	Location	Commemorative vehicles (incomplete list)/in or since	Active commemoration online/Exhibits (including parts of a museum) on site
Germany			
<i>Baden- Wuerttemberg</i>	Stuttgart	none	no/no
	Wiesloch	wooden cross/1980 monument/1990	no/no
<i>Bavaria</i>	Ansbach	plaque/1992 panel in permanent exhibit in psychiatry museum/2002	no/yes

Table 1. Cont.

	Egling-Haar	plaque/1987 monument/1990 panel at monument/2005 panels in museum of psychiatry/2005	no/yes
	Kaufbeuren-Irsee	panel added to portraits of clinic directors/1980s (Kaufbeuren) sculpture/1981 (Irsee) boulder/1989 (Kaufbeuren) stela in former pestilence cemetery/2005 (Irsee) stela/2006 (Kaufbeuren) plaque in cemetery (Irsee) anteroom in former pathology/ca. 2007 (Irsee) sculpture and panels/2008 (Kaufbeuren) stumbling blocks/2009 (Irsee) memorial arrangement of candles in cemetery/2010 (Irsee)	no/no
<i>Berlin</i>	Berlin-Wittenau	plaque/1993 panels in the exhibit "Passed Over in Total Silence"/1988 stumbling blocks/2004	no/yes
<i>Brandenburg</i>	Görden	memorial/2002 exhibit "State hospital Görden, 1933-1945: Psychiatry under National Socialism"/2004 display in cemetery/2008	no/yes
<i>Hamburg</i>	Langenhorn	memorial/2009	no/no
	Rothenburgsort	plaque/1999 stumbling blocks/2009	no/no
<i>Hesse</i>	Eichberg	cross/1985 plaque/1988 memorial/1993 exhibit with panels/2009	no/yes
	Kalmenhof	cross/1984 monument/1987 exhibit with panels/1997	no/yes
<i>Lower Saxony</i>	Lüneburg	memorial/1983 exhibit in memorial/2004 stumbling blocks/2005	yes/yes
<i>Mecklenburg-Western Pomerania</i>	Sachsenberg	sculpture/2008	no/no
	Ueckermünde	sculptures/1991 and 2009	no/no

Table 1. Cont.

<i>North Rhine-Westfalia</i>	Dortmund-Aplerbeck	plaque, memorial tree/1989 stelae/1991 memorial/1994	no/no
	Niedermarsberg	monument/1989 memorial/2000 art workshops with children/2002 art installation in cemetery/2004	no/no
	Waldniel	two plaques and stone/1988	yes/no
<i>Saxony</i>	Großschweidnitz	sculpture/1990 plaque/1990	no/no
	Leipzig	memorial/2008 online memorial book of the dead/2010 “place of remembrance” for victims of “children’s euthanasia”/2011	no/no
	Leipzig-Dösen	commemorative gravestones for two Jewish child victims in Old Jewish Cemetery Leipzig/2001 (see also Leipzig)	no/no
<i>Saxony-Anhalt</i>	Uchtsprunge	memorial/2004	no/no
<i>Schleswig-Holstein</i>	Schleswig-Hesterberg	sculpture and plaque/1993	no/no
	Schleswig-Staffeld	no	no/no
<i>Thuringia</i>	Stadtroda	monument/1998	no/no
Austria			
<i>Steiermark</i>	Graz	stelae/2006	no/no
<i>Vienna</i>	Wien	plaques/1988 and 2007 exhibit “War Against the ‘Inferiors’: On the History of Nazi Medicine in Vienna”/2002 field of stelae/2003	no/yes
Poland			
<i>Lower Silesia</i>	Wroclaw (Breslau)	no	no/no
<i>Pomerania</i>	Kocborowo (Konradstein)	plaque/1948	no/no
<i>Silesia</i>	Lubliniec (Loben)	cross/2002	no/no
<i>Wielkopolska</i>	Dziekanka (Tiegenhof)	plaque/1948	no/no
Czech Republic			
<i>Plzeň</i>	Dobranský (Wiesengrund)	no	no/no

One year later the student Dorothea Sick published a first research report on “*euthanasia*” at the facility. For the first time a public service in memory of the victims occurred on the National Day of Mourning in 1984, and a wooden cross was erected on the still overgrown cemetery, which had been used, among other things, as a children’s playground. It bore the inscription “In memory of the victims of crimes at the Kalmenhof/Idstein during the time of National Socialism.”

In 1987 a memorial was dedicated at the former cemetery, which used to be a field before it served as a mass grave site after October 1942. The wooden cross was replaced with a metal one (the inscription remained the same), and a round stone monument was added. Its inscription reads: “In memory of the victims of tyranny. More than 600 children and adults of the Kalmenhof were murdered between 1941 and 1945. The Nazis considered their lives as unworthy of living. Many of the victims are buried here. The number and location of the individual graves are unknown.” In that year a plaque was placed at the town cemetery, which had run out of space in 1941 as a result of increased mortality, next to an older one for residents who had died on foreign soil during the world wars. It reads: “In memory of the victims of dictatorship. Many of the 600 victims of the Kalmenhof lie buried in the cemetery. Their lives were considered unworthy of living in the totalitarian state. 1941–1945.”

The 100th anniversary of the Kalmenhof in 1988 prompted the creation of a travel exhibit with the title “Capacity for Education-Civilization-Usefulness: One Hundred Years of Pedagogy at the Kalmenhof at Idstein: Images and Documents in German Social and Pedagogical History,” which depicted the Kalmenhof’s entire history and included Nazi medical crimes against children and youths. Curators of the exhibit with assistance from the Communal Welfare Association of Hesse revised parts of the exhibit and transformed them into a permanent exhibit in 1997. This exhibit was the first permanent display addressing crimes against children at the site of a “special children’s ward” anywhere (see Table 1) [97].

Created in a joint effort between the working group “Kalmenhof zwischen Gestern und Heute” (The Kalmenhof Now and Then) and the Communal Welfare Association’s Division “Archive, Memorials, and Historical Collections,” the exhibit has been slightly changed and expanded over the years. It has been presented under the titles “The Kalmenhof-History-Continuity-Current Relevance” and “The Kalmenhof Now and Then,” respectively, on the ground and first floors in the Kalmenhof’s main administrative building. The ground floor’s entrance area contains several panels that address the emergence of the exhibit and its purpose, as well as the current main tasks and areas of service of the “Vitos Kalmenhof” (formerly named the “Social-Pedagogical Center Kalmenhof”), which is the name of the organization today. Among them are two panels that describe various historical buildings and the origins of the institution that incorporated reformed pedagogical approaches into the care of persons with disabilities. A panel in the staircase presents information about the Kalmenhof’s founders. Upstairs a panel depicts the takeover of the institution by the Nazis, and another one informs about the social Darwinist foundations of Nazi “racial hygiene.” The panel “Victims” includes graphs denoting the numbers of those who were compulsorily sterilized or killed. Two displays depict individual victims, a child and a youth, sterilized or likely murdered, using documentary evidence. The next panel addresses the functions and deeds of perpetrators and their trials. Another panel points to the role of the Kalmenhof in the “T4” program and its connection to Hadamar, and a final one addresses everyday life in an institution with a “special children’s ward.” In the center of the room are black stelae in the form of cubicles on which the anonymized names of those who died at the

Kalmenhof between 1939 and the end of the war are engraved in white letters. The information presented there includes their dates of birth and death, the age at which they died, and how many years they resided in the Kalmenhof facility.

A pamphlet detailing and describing the exhibit's elements is available. Accessible in print as well as on the Internet [98], it addresses both the exhibit's contents and its history, and notes possible pedagogical approaches to some of its components. Open and unrestricted access to the exhibit (during business hours) makes it impossible to estimate the annual number of visitors. Kalmenhof employees offer guided tours of the exhibit, especially for students at the high school level. The number of students participating in such tours has been approximately 200 annually [99]. A memorial service is conducted at the annual National Day of Mourning. One of the Kalmenhof buildings and a street in Idstein are now named after Loni Franz, a rare example of an individual to have both actively resisted the killing process from within such an institution and succeeded in saving children from it.

4. Dealing with the Trauma of Dead Children: Implications for the Study of Public Memory and Commemoration

4.1. Disjunctures between Information, Memory, and Commemoration

Both the Eichberg and Kalmenhof facilities are characterized by the existence of extensive evidence about the child murder program that took place there. In fact, the information has been more extensive and available much earlier than for many other sites of a "special children's ward." Yet commemoration did not begin at either site until the 1980s with the placement of commemorative objects and more recently through exhibits, web pages, and guided tours. The case studies illustrate the general argument that the presence of information about atrocities does not necessarily translate into a shared local memory of them or into the commemoration of their victims, though it may well trigger processes of memorialization [100]. Local memory may depend on the existence of evidence such as presented in trial records or scholarly studies in cases when such crimes were committed in secret or go back far into the past, but the existence of evidence is at best a necessary but not sufficient condition for memory or commemoration. As current scholarship affirms [101], it simply cannot be assumed that knowledge of past events translates into the development of a mnemonic culture, even when historical developments occur that put the events in stark relief. When evidence of trauma and culpability contradicts elements in a local memory culture and seems to taint an entire region or goes against the grain of the local citizenry's self-image, as the horrors in the Eichberg and Kalmenhof institutions apparently did, it may well be ignored, denied, or repressed. Studies have documented such a refusal to remember for disparate events ranging from the "T4" gas murders at Grafeneck to the Nanking massacre in 1937 to atrocities committed against war time captives in the American Civil War [102–104].

4.2. Embeddedness in National Cultures of Memory and Commemoration

Commemoration is often embedded in national and sometimes even in international memory regimes. Such memory regimes tend to have geographic as well as historical profiles [105,106]. In a well-known essay, sociologist M. Rainer Lepsius has identified three profiles: normative

“internalization” of the Nazi past for the former West Germany (where Idstein and Eltville are located), in so far as politics there could not disclaim the country’s principal responsibility for Nazi Germany’s crimes as the successor nation and government, particularly in light of the fact that the rapid economic, politically, and military integration of West Germany in Western alliances from the late 1940s onward could not nearly have happened as smoothly as it did had the government’s approach to accounting for the Nazi past been different. As Lepsius points out, this orientation toward the Nazi past stood in stark contrast to the one in communist East Germany, which could deflect the assumption of responsibility for Nazi crimes through “universalization” by depicting itself in the tradition of socialism and anti-fascist resistance against the evils of monopoly capitalism of the West, of which Nazism was considered a manifestation; and to the politics of Austria, which “externalized” its Nazi past by portraying itself as the first victim in 1938 of Nazi aggression [107,108]. In part ushered in by the American mini-series “Holocaust” shown on West German television in 1978, a substantive change in how West Germany as a nation on the whole reconsidered its Nazi past is evident for the late 1970s and early 1980s [109,110]. This national change likely played a major role in the memory initiatives at the Eichberg and the Kalmenhof, which commenced in the early 1980s. Still, it took a considerable time until such initiatives translated into permanent forms of commemoration, a process in which the Kalmenhof nationally took on a pioneering role through establishing a monument that mentioned “children’s euthanasia” in 1987, and of a permanent exhibit on site in 1997.

4.3. The Importance of Local Memory Studies

Studies of mnemonic cultures often have an episodic focus or address developments at the national or international level, particularly in the areas of the Holocaust and Nazi medicine. Yet a comparison of the memory of Nazi crimes against children and commemoration of their victims at about 30 different sites in four nations over a period of almost 70 years points to the importance of localized memory studies, which show both memory and commemoration to vary considerably across nations as well as regions and even smaller geographical areas [111]. It clearly does not suffice in this case to refer to supra-regional trends, as the analysis must take into account localized developments. The strengths of such an approach lie in its ability to take account of configurations of individuals and groups (the synchronous level) as well as longitudinal change over time (the diachronous level), to study the links between individual and collective memory outside the often-studied unit of the family or nation, to compare local memory cultures, and to bring into relief a factor highlighted by geographers but often neglected in historical and sociological studies: that of local “space” and the topography of memory [112].

4.4. Anniversaries as Impetus for Commemoration

Anniversaries at the two locations under study often provided an important impetus for further study and commemoration: at the Eichberg, the years 1999 (the institution’s 150th anniversary, which led to an exhibit and a book) and 2009 (the 70th anniversary of Hitler’s “euthanasia” decree, on which date a permanent exhibit was opened that used many elements of the earlier exhibit); and the Kalmenhof, the year 1988 (the institution’s 100th anniversary, which led to the publication of a book on its history and the creation of a travel exhibit that morphed into the current permanent exhibit). Of

course, many anniversaries and similar occasions for reflection had passed previously without initiating any changes in memory or commemoration, but in Germany the socio-political developments since the 1980s have made it increasingly socially inappropriate, if not outright deviant, to write institutional histories without proper attention to the Nazi past. When anniversaries have prompted official reflection on such institutional histories, the reflection could no longer omit trauma during the Nazi period. Once the crimes are made known in this way, official occasions for reflection, particularly in Germany on the National Day of Mourning, Corpus Christi (in Catholic regions), and the (International) Holocaust Remembrance Day, tend to offer interested individuals and groups ritualized official forms of commemoration but sometimes also personal and interactive ways to reflect. It has been rightfully argued that Germany has developed a skillful set of routines by which functionaries in their capacity as official guardians of memory, last but not least on the national political level, tend to “normalize” the past and recreate a “culture of contrition” that serves the function of alleviating any international concerns about remnants (or the reemergence) of Nazism and legitimating its democratic successor state—if one cannot be proud of Nazi atrocities, one can very well be proud of the way in which the Nazi past has been successfully “worked on” and “mastered” over the decades [110,113]. Critics are quick to point out that socio-political rituals can be meaningless outward demonstrations of contrition; however, rituals can and sometimes do go beyond merely being routinized demonstrations of political piety and public trauma. Paul Connerton has pointed out that performative functions of rituals need not be devoid of meaning and can initiate further engagement with the past and stabilize commemorative practices [114]. Similarly, cognitive psychologist Jonathan Haidt has recently emphasized the importance of rituals in shaping political and religious decisions and their role in the moral apprehension of events in the past and present [115].

4.5. The Role of Memory Agents

Before rituals can stabilize mnemonic practices, commemoration has to be initiated first. Memory agents construct the commemorative foundation for beliefs and practices relating to past trauma and resonate with other persons and groups in such a way as to help them relate to past events and make them meaningful [116–118]. At the Eichberg facility, the two pastors who offer tours play the role of memory agents, as do the members of the working group who initiated the placement of the new exhibit on location. The Vitos Rheingau has an employee who works with the press and the public in responding to inquiries and furnishing information. At the Kalmenhof, the main guide has served as a memory agent, particularly in working with teachers and students from local schools, as did researchers such as Dorothea Sick, whose findings found a broad echo in the local community.

4.6. The Significance of the Internet

Research on the use of the Internet among visitors of traditional museums and other public memory institutions has shown that younger generations in particular expect an online presence of the institution, such as when preparing a visit. Current studies have also shown some of these institutions to be still quite conservative in their online use of multimedia technologies, including German ones addressing Nazi atrocities [119–122].

During this researcher's visits of European places of memory related to Nazi "euthanasia" and its victims, their curators and the creators of institutional websites (who were often identical) often seemed hesitant to present a large number of elements of an exhibit online, due to financial or technical constraints (in many cases no digital documentation existed), or concerns about privacy (particularly of the victims and their descendants), but also because of fears that "too much information" online might decrease the number of visitors. Studies have shown concerns about a negative effect of the provision of extensive information online on visitor numbers and visitor satisfaction to be unfounded, however [123–125]. Visitors tend to use the amount and quality of information provided by an institution of public memory as a proxy for the quality and type of a visitor's experience on site, and the number of visits is positively correlated with the extent and quality of an institution's online presence, even when a virtual exhibit duplicates many elements of what is shown online. Even if this were not the case, it appears likely that visitors who gain information online from an institution's website before their visit will be able to access the materials provided on-site in a more meaningful and lasting manner and have a better experience overall [126–128].

These considerations are relevant to sites of "special children's wards," as most do not (yet) have a presence online (and some perhaps never will). Yet within the last 5 years in particular significant developments have occurred. At the Eichberg in 2007 no information could be found online about the guided tour of the places of memory there or about the crimes committed against children at the institution. It would have been difficult for persons who did not live in the vicinity of the site to find out about commemoration. Now the Eichberg facility has a website that is dedicated to the history of "euthanasia" crimes. For the Kalmenhof, the Communal Welfare Association of Hesse has posted a detailed description of the exhibit there and a guide to its components [129]. One other site, the exhibit for the "special children's ward" at Vienna, has even moved toward providing more information online than on-site. Its online information is also more current [130]. Overall, however, at least for "children's euthanasia" crimes a discussion of the opportunities and limitations of online commemoration and the Internet as a site of memory is still in its infancy [118].

4.7. Hidden Treasures and Missed Opportunities: On the Re- and Nonuse of Existing Exhibits

Education about past wrongs is difficult when no texts, visual materials, or other sources of information are available at a site of memory. At the Eichberg a major change in memory agents' efforts to educate the public about Nazi crimes occurred with the establishment of a permanent exhibit, which likely would not have come into existence had it not been for the ready availability of a ten-year old but still fairly up-to-date predecessor exhibit. At the Kalmenhof, too, the existing exhibit draws on an earlier exhibit that focused on the history of the institution and included major sections on the Nazi period. Such re-use of existing materials and entire exhibits appears to be the exception, however, even though some developments have been favorable for the display of exhibits at similar sites. Like elsewhere, in Germany reforms in psychiatry have sharply lowered the number of patients permanently institutionalized at existing, older facilities providing long-term psychiatric care in public ownership, and the vast majority of "special children's wards" happen to have been established in such psychiatric facilities. Empty floors and entire buildings, which in some cases are under historic preservation and cannot be razed, have become available as potential sites for exhibits, even though the condition of

these buildings is often poor and requires construction to make hosting an exhibit feasible. Yet there are also countervailing trends: communities and even states have sold off their existing older psychiatric facilities to private companies, which are driven by private interests (including profit motives) and may not see their purpose as providing for psychiatric museums or paying for the upkeep of exhibits on Nazi crimes [131]. Beyond that, there is another development: buildings, even ones that house museums and exhibits, are threatened to be reclaimed by the expansion of forensics, which has seen a boom in Germany in psychiatric facilities in part because of increasing numbers of forensic psychiatric convictions in courts and the way forensic institutions have received compensation for housing these convicts [132]. Still, many facilities have room to house exhibits but don't—despite the fact that a plethora of exhibits is available, in some cases readily so and in a form that could be arranged to accommodate references to local conditions and events. Examples include exhibits in Thuringia (“Death Transports: Nazi ‘Children’s Euthanasia’ in Thuringia”) and Leipzig (“505: Children’s Euthanasia Crimes in Leipzig”). Given that in many cases it took years to collect materials for the exhibits and some are truly unique in the information they display (such as victims’ stories), their nonuse appears to be a missed opportunity [133].

5. Conclusions

“In a more goal-oriented, orderly, and ‘scientific’ manner than these other [eugenic] measures” is how Nuremberg doctors’ trial observer Alice Platen-Hallermund characterized the process by which physicians allegedly aspired to implement “children’s euthanasia” [134]. The reality was anything but scientific and orderly: while equivalent statistics for “Reich Committee children” are not available, data for children who became victims of “T4” show that the central determinant of victimization was whether the medical evaluators considered a child’s “educational capacity” (*Bildungsfähigkeit*) to be low—a diagnosis that often took them only minutes to make, and without ever having seen the patient. This evaluation was anything but “scientific” [135]. The entire procedure was rather a rigorous exercise of social control, and disabled children’s death was an integral part of it. At the “Spiegelgrund” in Vienna, for example, where close to 800 children died, the “unfit” who failed the selection and were found “unable to comply with the new criteria [for “fitness”]—on the basis of ‘willingness to perform’ (*Leistungsbereitschaft*), ‘hereditary health,’ and ‘racial purity’—were exposed to measures of eugenic ‘eradication’ (*Ausmerze*). Disabled or retarded children were killed in the ‘euthanasia’ unit, while troublemakers were brutally disciplined in the ‘reformatory’” [136]. That this process was not orderly either is evident at the Eichberg, where Drs. Mennecke and Schmidt were reported to have selected victims while making rounds drunk at night, and at the Kalmenhof, where killings occurred lest patients be able to identify perpetrators after the war [137,138]. For a long time, the public memory of these deeds remained elusive; commemoration of the victims, non-existent.

Still, important changes have taken place at the two sites at the Eichberg and the Kalmenhof: memory agents started processes of commemoration that resonated with citizen groups, albeit some of them very small, and translated into commemorative vehicles, among which guided tours and exhibits have emerged next to more traditional forms such as monuments and plaques. This process is also present in other regions located in former West Germany (see Table 1). There is evidence, however, that even today some families do not like to identify victims in their midst, which at least in part

appears to be due to the stigma still attached to psychiatric disorders or other conditions and that cautions such individuals to disclose anything they believe might put a black mark on their family lines and histories [139].

This article has not addressed memory and commemoration at sites of “special children’s wards” in other regions, which the author has described and analyzed elsewhere [140]. A brief overview must suffice: In the territory of former East Germany, where Nazi crimes were once “universalized,” “euthanasia” victims remained secondary to heroic “anti-fascist resistance fighters.” Commemoration typically started later than in West Germany, although some forms emerged before unification. Today, the city of Leipzig has among the most active forms of commemoration of child victims anywhere. The same can be said for Vienna [118], as the “externalization” of Nazi crimes by viewing Austrians as “victims” may be in retreat [141,142]. In Poland and in the Czech Republic commemoration of Nazi medicalized killings of children depends on local initiatives. In Kocborowo (Poland) a local boy scout organization dedicated the very first monument anywhere to the memory of murdered “Reich Committee children” in 1979. In contrast, the directorship of the asylum in Dobraný (Czech Republic) continues to deny that patients were murdered by the Nazis, in spite of solid historical evidence to the contrary. There nothing reminds of the crimes or its victims [118].

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References and Notes

1. Parts of this article are based on earlier publications by the author in German: Kaelber, L. Gedenken an die NS-“Kindereuthanasie”: Das Fallbeispiel der Landesheilanstalt Eichberg (The Memory of NS-“Children’s Euthanasia”: A Case Study of the Eichberg Asylum). *Gedenkstätten-Rundbrief* 2011, 161, 14–24; Kaelber, L. Gedenken an die “NS-Kindereuthanasie”: Zwei Fallbeispiele (Eichberg, Kalmenhof) und allgemeine Folgerungen zur Gedenkkultur (The Memory of NS-“Children’s Euthanasia”: Two Case Studies and General Implications for the Culture of Commemoration). In *Den Opfern ihre Namen geben: NS-“Euthanasie”-Verbrechen, historisch-politische Verantwortung und Erinnerungskultur* (Naming the Victims: NS-“Euthanasia”-Crimes, Historical and Political Responsibility, and Culture of Commemoration); Arbeitskreis zur Erforschung der nationalsozialistischen “Euthanasie” und Zwangssterilisation, Ed.; Klemm und Oelschläger: Munster, Germany, 2011; pp. 201–232.

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10. In 1942 only about 600–700 beds were available for about 1,500 patients. Their abuse included their placement for infractions in two “bunkers,” which were completely dark, unsanitary, and had patients on a reduced diet, or in a special station called “Kick” (Tritt), to kick patients into the hereafter by completely withhold food or medical attention; “bath therapy” consisting of hot baths and then packing of patients in wet towels and blankets, which left them susceptible to death by poor circulation; systematic beatings; and the practice of stopping to feed patients who needed to be spoon fed, and giving so little to the others that there were food fights in which the stronger patients clobbered the weaker ones with their wooden clogs, while the chief administrator and the medical director diverted food destined for the patients to themselves and their families. See Kreitmair, M. In *Fear of the Frail: The Treatment of the Disabled at the Eichberg Asylum for the Mentally Ill in Nazi Germany*, M.A. Thesis, Department of History, Simon Fraser University, Canada, 2000; pp. 70–74. Available online: <http://www.collectionscanada.gc.ca/obj/s4/f2/dsk2/ftp03/MQ51380.pdf> (accessed on 1 July 2011); Dickel, H. “*Die sind doch alle unheilbar*”: *Zwangsterilisation und Tötung der “Minderwertigen” im Rheingau 1934–1945* (“But Those Are All Incurable”: Compulsory Sterilization and Killing of “Defectives” in the Rhine Province, 1934–1945); Moritz Diesterweg: Frankfurt a.M., Germany, 1988; pp. 16–18.

11. The author visited the locations of the approximately 30 “special children’s wards” between 2007 and 2012, some of them more than once, and summarized their histories of the crimes as well as commemoration of the victims on a web site (<http://www.uvm.edu/~lkaelber/children/>). For an overview, see Kaelber, L. Gedenken an die NS-“Kindereuthanasie”-Verbrechen in Deutschland, Österreich, der Tschechischen Republik und Polen (Commemoration of NS-Children’s Euthanasia Crimes in Germany, Austria, the Czech Republic, and Poland). In *Kindermord und “Kinderfachabteilungen” im Nationalsozialismus: Gedenken und Forschung* (Child Murder and “Special Children’s Wards” During National Socialism: Commemoration and Research); Kaelber, L., Reiter, R., Eds.; Lang: Hamburg, Germany, 2011; pp. 33–66.
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15. See ref. 14, p. 539.
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17. See ref. 13, especially pp. 231–239.
18. See ref. 14, pp. 546–551.
19. See ref. 14, pp. 534, 536.
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50. See ref. 48, p. 311.
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55. See ref. 48, p. 297.
56. Many studies erroneously give the number as 232 and some include claims that those were minors. For detailed information the author wishes to thank Dr. G. Lilienthal, the director of the Hadamar memorial.
57. See ref. 48, pp. 298–299.
58. This was reported in the *Idsteiner Zeitung*; see ref. 52, p. 120.
59. See on this and the following ref. 14, p. 540 and passim.
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65. See ref. 48, p. 327. The trial verdicts refer to Wrona’s first name as Anna.
66. The Court verdict of 9 February 1949 notes: “for this purpose [the “special children’s ward”] the second floor was made available by the military hospital. Furthermore, on the third floor two rooms were expanded” (Federal Archive Ludwigsburg BArch B 162/14023 Bl. 439).
67. See ref. 52, p. 36.
68. See ref. 14, p. 542.

69. For an overview of the documents and the statistics derived from them, see ref. 52, pp. 27–28.
70. Problems of determining who was a victim are discussed in Reiter, R. Opferstatus ohne Nachweis? Über ein Dauerproblem in der Forschung zu Opfern der NS–Psychiatrie (Victim Status Without Evidence? On a Perpetual Problem in Research on Victims of Nazi Psychiatry). In *Kindermord und “Kinderfachabteilungen” im Nationalsozialismus: Gedenken und Forschung*; Kaelber, L., Reiter, R., Eds.; Lang: Hamburg, Germany, 2011; pp. 193–215.
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72. See ref. 14, pp. 663–670; the victim from the Kalmenhof is mentioned on p. 667.
73. See ref. 22, pp. 260–261.
74. Maass, E. Verschweigen–Vergessen–Erinnern: Vergangenheitsbewältigung in Idstein (Keeping Silent–Forgetting–Remembering: Coming to Terms with the Past in Idstein). In *Die Idee der Bildbarkeit: 100 Jahre sozialpädagogische Praxis in der Heilerziehungsanstalt Kalmenhof*; Schrappner, C., Sengling, D., Eds.; Juventa: Weinheim, Germany, 1988; pp. 337–338.
75. See ref. 52, pp. 96ff.
76. Rüter–Ehlermann, A.; Rüter, C.F. *Justiz und NS–Verbrechen: Sammlung deutscher Strafurteile wegen nationalsozialistischer Tötungsverbrechen 1945–1966*; University of Amsterdam Press: Amsterdam, The Netherlands, 1968; Volume 1, no. 014.
77. The legal issues are discussed in Freudiger, K. *Die juristische Aufarbeitung von NS–Verbrechen*; Mohr Siebeck: Tübingen, Germany, 2002; pp. 231–43; Bryant, M. *Confronting the “Good Death”: Nazi Euthanasia on Trial, 1945–1953*; University of Colorado Press: Boulder, CO, USA, 2005; pp. 135–144.
78. For murder under the German (extreme–) subjective theory of law, the intent of the person contributing to the offence is crucial. In order to be considered a perpetrator, not merely an accomplice, the individual has to act willfully and show a desire for achieving the desired outcome and identify with it enough to make it his or her own (“die Tat als eigene will”); the individual does not intend to be a mere participant in the act.
79. Bryant, M. *Confronting the “Good Death”: Nazi Euthanasia on Trial, 1945–1953*; University of Colorado Press: Boulder, CO, USA, 2005; p. 144.

80. A. Kinast (see ref. 63, pp. 259–266) has shown that Hermann Wesse never received a “Dr. med.” degree for lack of a medical dissertation, and his qualifications as a physician were questionable even in the context of his activities in Nazi medicine. In a sworn statement to a court in 1949, Mathilde Weber admitted that she, too, did not write a medical dissertation (Federal Archive Ludwigsburg B 162/17520 Bl. 337). Her skills as a physician may have been as questionable as Hermann Wesse’s. A further similarity between the Kalmenhof’s and the Eichberg’s medical personnel is the practice of medicine without a license in the case of Mathilde Weber and Dr. Schmidt, both of whom were reported to have done so after their release from prison (see Klee, E. *Was sie taten–Was sie wurden: Ärzte, Juristen und andere Beteiligte am Kranken-und Judenmord* [What They Did–What Became of Them: Physicians, Jurists, and Other Participants in the Murder of the Sick and Jews]; Fischer: Frankfurt a.M., Germany, 2004; p. 206), and that both were well regarded as physicians then and lived in the region without facing any further problems. Mathilde Weber resided in Idstein until 1994 and died in 1996. The author wishes to thank T.-K. Ziegler for information.
81. See ref. 24, p. 132.
82. See ref. 25, pp. 50ff.
83. Mitscherlich, A.; Mielke, F. *Wissenschaft ohne Menschlichkeit: Medizinische und eugenische Irrwege unter Diktatur, Bürokratie und Krieg* (Science Without Humanity: Wrong Tracks in Medicine and Eugenics Under Dictatorship, Bureaucracy, and War); Lambert Schneider: Heidelberg, Germany, 1949; reprint under the new title *Medizin ohne Menschlichkeit. Dokumente des Nürnberger Ärzteprozesses* (Medicine Without Humanity: Documents of the Nuremberg Doctors’ Trial)]; Fischer: Frankfurt a.M., Germany, 1960; pp. 210ff.
84. See ref. 52, pp. 100, 116–118, 125–126.
85. See ref. 74, appendix, p. 373, n. 9.
86. See ref. 74, p. 351 for a more extensive documentation of the Kalmenhof trials’ depiction in the literature.
87. This is taken from the letter Weber wrote seeking to regain her full rights as a citizen; see ref. 52, p. 98.
88. For another assessment of Weber, see de Mildt, D. *In the Name of the People: Perpetrators of Genocide in the Reflection of their Past–War Prosecution in West Germany: The “Euthanasia” and “Aktion Reinhard” Trial Cases*; Martinus Nijhoff: The Hague, The Netherlands, 1996; pp. 129–132.
89. See ref. 74, p. 344.
90. For excerpts, see ref. 52, p. 67.
91. See ref. 74, p. 350.
92. Burleigh, M. *Death and Deliverance: Euthanasia in Germany, c. 1900–1945*; Cambridge University Press: Cambridge, UK, 1994.
93. Dörner, K. *Tödliches Mitleid: Zur sozialen Frage der Unerträglichkeit des Lebens* (Deadly Compassion: The Social Question of Life Unbearable), 4th. ed.; Paranus: Neumünster, Germany, 2002.
94. Scheidl’s writings are available online: http://vho.org/D/gdvd_3/III2.html#2 (accessed on 15 March 2012). On Scheidl, see Bailer-Galanda, B. “Revisionism” in Germany and Austria: The

Evolution of a Doctrine. In *Antisemitism and Xenophobia in Germany after Unification*; Kurthen, H., Erb, R., Bergmann, W., Eds.; Oxford University Press: Oxford, UK, 1997; available online: <http://www.doew.at/information/mitarbeiter/beitraege/revisionism.html> (accessed on 15 March 2012). A reading error resulted in the identification of Scheidl as Scheidt in Kaelber, L. Gedenken an die “NS-Kindereuthanasie”: Zwei Fallbeispiele (Eichberg, Kalmenhof) und allgemeine Folgerungen zur Gedenkkultur. In *Den Opfern ihre Namen geben: NS-“Euthanasie”-Verbrechen, historisch-politische Verantwortung und Erinnerungskultur*; Arbeitskreis zur Erforschung der nationalsozialistischen “Euthanasie” und Zwangssterilisation, Ed.; Klemm und Oelschläger: Munster, Germany, 2011; p. 217, n. 56.

95. See ref. 74, p. 352 for the following.
96. Active commemoration online goes beyond having an exhibit online. It implies the presentation of information about the past events as well as the ability to find out about current forms of commemoration.
97. In 1988 the exhibit “Passed Over in Total Silence” (Totgeschwiegen) in Berlin—Wittenau was created for the municipal clinic, which was the site of another “special children’s ward.” The exhibit addressed “children’s euthanasia”; however, it was not permanently located on the hospital’s premises.
98. Landeswohlfahrtsverband Hessen. Der Kalmenhof damals und heute: Ausstellung in der Vitos Kalmenhof gGmbH in Idstein. Available online: http://www.lwv-hessen.de/webcom/show_article.php/_c-289/_nr-44/i.html (accessed on 15 March 2012).
99. The author wishes to thank L. Kratz, the main guide, for information.
100. Such a trigger effect can be shown for the lecture and the publication of a book by K. Teppe of the LWL—Institute for Westphalian Regional History in 1989 about crimes committed against children in the “special children’s ward” Dortmund-Aplerbeck, which initiated commemoration there. See Kaelber, L. “Special Children’s Ward” Dortmund–Aplerbeck. Available online: <http://www.uvm.edu/~lkaelber/children/dortmundaplerbeck/dortmundaplerbeck.html> (accessed on 10 June 2012).
101. See especially Connerton, P. *How Modernity Forgets*; Cambridge University Press, Cambridge, UK, 2009.
102. Stöckle, T. *Gedenkstätte Grafeneck: Dokumentationszentrum: Ausstellungsband* (Grafeneck Memorial: Documentation Center: Volume Accompanying the Exhibit); Gedenkstätte Grafeneck: Gomadingen, Germany, 2007.
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104. Cloyd, B. *Haunted by Atrocity: Civil War Prisons in American Memory*; Louisiana State University Press: Baton Rouge, LA, USA, 2010.
105. Langenbacher, E. Changing Memory Regimes in Contemporary Germany? *Ger. Polit. Soc.* **2003**, *21*, 46–68.
106. Lebow, R., Kansteiner, W., Fogu, C., Eds. *The Politics of Memory in Postwar Europe*; Duke University Press: Durham, NC, USA, 2006.

107. Lepsius, M.R. *Demokratie in Deutschland: Soziologisch–historische Konstellationsanalysen* (Democracy in Germany: Socio–Historical Analyses of Constellations); Vandenhoeck und Ruprecht: Göttingen, Germany, 1993, pp. 229–245.
108. For a critique of Lepsius, see Hammerstein, K. Schuldige Opfer? Der Nationalsozialismus in den Gründungsmythen der DDR, Österreichs und der Bundesrepublik Deutschlands (Guilty Victims? [Perspectives on] National Socialism in the Foundational Myths of East Germany, Austria, and West Germany). In *Nationen und ihre Selbstbilder: Postdiktatorische Gesellschaften in Europa* (Nations and Their Self–Image: Postdictatorial Societies in Europe); Fritz, R., Sachse, C., Wolfrum, E., Eds.; Wallstein: Göttingen, Germany, 2008; pp. 39–61.
109. Kansteiner, W. *In Pursuit of German Memory: History, Television, and Politics after Auschwitz*; Ohio University Press: Athens, OH, USA, 2006.
110. Art, D. *The Politics of the Nazi Past in Germany and Austria*; Cambridge University Press: Cambridge, UK, 2006.
111. See Kaelber, L. Gedenken an die NS-“Kindereuthanasie”-Verbrechen in Deutschland, Österreich, der Tschechischen Republik und Polen. In *Kindermord und “Kinderfachabteilungen” im Nationalsozialismus: Gedenken und Forschung*; Kaelber, L, Reiter, R., Eds.; Lang: Hamburg, Germany, 2011; pp. 33–66, as well as the other case studies in the book.
112. See Thiessen, M. Das kollektive als lokales Gedächtnis: Plädoyer für eine Lokalisierung von Geschichtspolitik (Collective Memory as Local Memory: Arguments for a Localization of the Politics of History). In *Geschichtspolitik und kollektives Gedächtnis: Erinnerungskulturen in Theorie und Praxis* (The Politics of History and Collective Memory: Mnemonic Cultures in Theory and Practice); Schmid, H., Ed.; Vandenhoeck und Ruprecht unipress: Göttingen, Germany, 2009; pp. 159–80. A study that focuses on the relationship between spatial and mnemonic practices is Jordan, B. *Structures of Memory: Understanding Urban Change in Berlin and Beyond*; Stanford University Press: Palo Alto, CA, USA, 2006.
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126. Falk, J.; Dierking, L. *Learning from Museums: Visitor Experiences and the Making of Meaning*; Rowman and Littlefield: Walnut Creek, CA, USA, 2000.
127. Pampel, B. “Mit eigenen Augen sehen, wozu der Mensch fähig ist”: Zur Wirkung von Gedenkstätten auf ihre Besucher (“Seeing with One’s Own Eyes What Humans are Capable of Doing”: On the Effects of Memorials on Their Visitors); Campus: Frankfurt a.M., Germany, 2007.
128. Pampel, B. Was lernen Schülerinnen und Schüler durch Gedenkstättenbesuche? (Teil-) Antworten auf Basis von Besucherforschung (What Do Students Learn by Visiting Memorials? [Partial] Answers Based on Research on Visitors). *Gedenkstätten-Rundbrief* **2011**, *162*, 16–29.
129. See ref. 45 and 98.
130. The latest major revision to the exhibit occurred online in May 2012 and includes videos of survivors as well as victims’ stories. Available online: <http://neu.gedenkstaettesteinhof.at/en/content/background/> (accessed on 1 August 2012). The author wishes to thank Dr. H. Czech, the exhibit’s principal curator, for information.
131. For example, in 2006 the state Brandenburg sold off four of its state facilities for psychiatric and neurological care, one of which was the State Asylum Görden, the site of major “children’s euthanasia” crimes and an exhibit on these crimes. Other states have followed.
132. Rückert, S. In der Landesversickerungsanstalt (Wasting Away in a Psychiatric Facility). *DIE ZEIT*, 11 December 2008, *51*. Available online: <http://www.zeit.de/2008/51/DOSSSchlangengrube> (accessed on 1 April 2012). In Bernburg, a site of the “T4” gassing program, a shortage of rooms reportedly led to the consideration of re–purposing for clinic use the floor located directly over the still existing gas chamber, currently in use by the memorial.

133. Another exhibit based on the use of original documents, “Children’s Euthanasia in Vienna, 1940–1945: Medical Records Bear Witness,” in spring 2012 became part of the “Spiegelgrund” exhibit in Vienna.
134. See ref. 25, p. 45.
135. Fuchs, P. Die Opfer als Gruppe: Eine kollektivbiografische Skizze auf der Basis empirischer Befunde (Victims as a Group: A Collective–Biographical Sketch on the Basis of Empirical Evidence). In *“Das Vergessen der Vernichtung ist Teil der Vernichtung selbst”: Lebensgeschichten von Opfern der nationalsozialistischen “Euthanasie”* (“Forgetting About Extermination Is Part of the Extermination Itself”: Life Histories of Victims of National Socialist “Euthanasia”); Fuchs, P., Rotzoll, M., Müller, U., Richter, P., Hohendorf, G., Eds.; Wallstein: Göttingen, Germany, 2007; pp. 53–72.
136. Czech, H. From Welfare to Selection: Vienna’s Public Health Office and Implementation of Racial Hygiene Policies under the Nazi Regime. In *“Blood and Homeland”: Eugenics and Racial Nationalism in Central and Southeast Europe*; Turda, M., Weindling, P., Eds.; Central European University Press: Budapest, Hungary, 2007; p. 330.
137. See ref. 34, p. 74.
138. See ref. 52, p. 88.
139. See Delius, P. Im Schatten der Opfer: Die Bewältigung der NS–Gewaltmaßnahmen gegen psychisch Kranke durch deren Angehörige (In the Victims’ Shadow: Family Members Coming to Terms with Nazi Violence Against Mentally Ill Relatives). In *Heilkunst in unheilvoller Zeit: Beiträge zur Geschichte der Medizin im Nationalsozialismus* (Healing in Calamitous Times: Contributions Toward a History of Medicine Under National Socialism); Heesch, E., Ed.; Mabuse: Frankfurt, Germany, 1993; pp. 65–84, who contacted relatives of “euthanasia” crime victims and found common repression of this part of a family’s history, in part due to the notion of an illness or disorder being a “stain” on it.—One reviewer pointed to the situation in North Carolina, which is the only state in the U.S. that is currently considering compensating the victims of its eugenic sterilization law. While this author has heard more than once from directors and guides at German memorials for “euthanasia” victims that some families steadfastly continue to deny one of their members’ victim status “because there were never any psychiatric illnesses [or similar negatively viewed conditions] present in our family,” it is astonishing to find that in North Carolina, too, a reluctance to disclose past victimhood status may exist. As of June 2012, fewer than 150 of approx. 1,500 victims have come forth and identified themselves, even though the absence of victim verification would preclude financial compensation if such compensation were implemented. The author has been contacted by relatives of victims of eugenic sterilizations in different U.S. states on a few occasions, and sometimes the presence of shame for a past disorder or disability in a family member still shines through in communications.
140. The most comprehensive overview can be found at the author’s website, *“Kinderfachabteilungen* (‘Special Children’s Wards’): Sites of Nazi ‘Children’s Euthanasia’ Crimes and Their Commemoration in Europe.” Available online: <http://www.uvm.edu/~lkaelber/children/> (accessed on 1 August 2012). See also the chapters in Kaelber, L., Reiter, R., Eds. *Kindermord und “Kinderfachabteilungen” im Nationalsozialismus: Gedenken und Forschung*; Lang: Hamburg, Germany, 2011.

141. Markovits, A.S.; Rabinbach, A. The Dark Side of Austrian Social Democracy. *Dissent* 2000, 47, 15–18.
142. Berg, M. Commemoration versus *Vergangenheitsbewältigung*: Contextualizing Austria's *Gedenkjahr* 2005. *Ger. Hist.* 2008, 26, 47–71.

Appendix 1

The Process of “Children’s Euthanasia” in Documents: A Case Study

The document (see supplementary file A; originally published in Teich, S.; Tucholski, A. Eine Studie über “Kindereuthanasie” in der Kinderfachabteilung der LHA Eichberg anhand der Krankenakten im Hessischen Hauptstaatsarchiv in Wiesbaden, [Unpublished] Master’s Thesis in Social Work, Frankfurt am Main Polytechnic, Germany, 1992; pp. 67–80; all references are to the page numbers shown at the bottom of each page unless otherwise noted), the original of which is located in the Hesse Main State Archive in Wiesbaden, Abt. 430/1, No. 10862, provides the basis for a short case study in the sequence of a medical crime. The administrative and patient records shown in the document pertain to a three-year old victim. They illustrate in detail and step by step how the “Reich Committee” procedure worked, from the reporting of the child’s disability on a form to the admission to the Eichberg “special children’s ward” and ultimately his death and the notification of his parents.

Werner S. was two years old when he was first reported by a physician to the state health office in the small town of Mergentheim in northern Wuerttemberg in May 1940. The reason for the report was an intellectual disability (“idiocy”). In the report, the reporting physician considered his “prospects for improvement” to be “null” (p. 67).

In June 1940 a new reporting form was introduced, as the original one was considered insufficient (see Vormbaum, T., Ed. *“Euthanasie” vor Gericht: Die Anklageschrift des Generalstaatsanwalts beim OLG Frankfurt/M. gegen Dr. Werner Heyde u.a. vom 22. Mai 1962* [“Euthanasia” Standing Trial: The Indictment Against Dr. Werner Heyde and Others by the Attorney General at the Superior Court Frankfurt a.M. of 22 May 1962]; Berliner Wissenschafts-Verlag: Berlin, Germany, 2005; pp. 35–39). Another report, with more extensive information, was filed for the boy. Interestingly enough, the reporting physician now answered the question whether from a medical perspective an improvement or cure was to be expected, with “yes.” The reporting form also contained information about the medical history of the boy’s family (pp. 68–69).

In January 1941 the state health office sent the materials to the “Reich Committee” in Berlin, where the medical “evaluation” took place. The “Reich Committee” in a standardized letter in June 1941 told the state health office that the boy was to be admitted to the “special children’s ward” of the Landes-Heilanstalt Eichberg, where he would receive “the best care” (pp. 70–71).

In August 1941 the “Reich Committee” in another standardized letter informed the state health office and the medical director of the Eichberg that it would assume the cost of care for Werner S. (and two other boys) “for up to half a year” (p. 72).

When the boy was admitted to the Eichberg facility in the same month, it was noted in the patient record that he had been brought there by his mother and “admitted to the ‘special children’s ward,’” and that the initial diagnosis was “idiocy” (pp. 73–74).

A further leaf in the patient record pertains his medical history: heredity in the family (“nothing is known for the family”), and that he developed seizures when he was half a year old (p. 75).

The patient record further notes for the next few months that he suffered from microcephaly (small brain), made no mental progress, and his physical condition was deteriorating in October 1941. In the same month, it is noted, the parents wanted to take their child home. On 14 November 1941 the child died, allegedly from measles (p. 76).

In the meantime, in late September the state health office in Mergentheim had asked for a report about the condition of the child and two other children sent to the Eichberg from there (p. 77). Is it possible that since the Eichberg’s “special children’s ward” had only been in operation for a few months, and because no other “special children’s ward” was in operation in the vicinity, word of the actual purpose of such a killing station had not reached the state health office in Mergentheim, and that the request was genuine? The state health office also asked whether school children (*i.e.*, older children) could be admitted to the “special children’s ward” for “the purpose of observation.”

The director Dr. Mennecke answered this letter promptly in early October, stating for Werner S. that his “physical development is quite good, he feels quite well at the present time also” (p. 78). Dr. Mennecke’s statement is in stark contrast to what was entered in the medical record over the course of that month.

In early November 1941, eleven days before the boy’s death, the “Reich Committee” had sent a letter to Dr. Mennecke about Werner S. and another boy. It notes that “an authorization for treatment...has not yet been provided” (p. 79) and that a further notice would be sent shortly based on the medical reports sent to the “Reich Committee.” It is not known whether the “Reich Committee” subsequently provided the “authorization,” or whether Dr. Mennecke and Dr. Schmidt proceeded without it. It was not uncommon in other “special children’s wards” for a killing to occur prior to an “authorization,” although physicians were eager to receive one, for reason of denial of culpability.

The last part of the record is a letter from the Eichberg facility to the boy’s parents on the day of his death. It notes that Werner S. had died from complications from measles, and that the burial was scheduled for six days later at the facility’s cemetery, “at no cost” to the parents (p. 80). In one reported case, Dr. Schmidt actually wrote his letter of condolence to parents on the day prior to their child’s actual death (see Hohendorf, G.; Weibel-Shah, S.; Roelcke, V.; Rotzoll, M, *Die “Kinderfachabteilung” der Landesheilanstalt Eichberg 1941 bis 1945 und ihre Beziehung zur Forschungsabteilung der Psychiatrischen Universitätsklinik Heidelberg unter Carl Schneider*. In *Wissen und Irren: Psychiatriegeschichte aus zwei Jahrhunderten—Eberbach und Eichberg*; Vanja, C., Haas, S., Deutschle, G., Eirund, W., Sandner, P., Eds.; Landeswohlfahrtsverband Hessen: Kassel, Germany, 1999; p. 226). Sometime after Werner S.’s death, the “Reich Committee” would also have expected a letter with the “results” of the “treatment,” either based on this and other individual cases or at least in the form of a monthly statistic.

Appendix 2

“Authorizations” of the “Reich Committee”: Documents

In 1945 the psychiatrist and neurologist Leo Alexander, who had been a medical investigator for the U.S. army in Europe during World War II, was commissioned by the Supreme Headquarters of the Allied Expeditionary Force (SHAEF) to investigate the exploits of German medical science in the Third Reich. Within days of beginning his explorations in Munich at the end of May 1945, Alexander went to the asylum Eglfing–Haar, located on the city’s perimeter, after a physician there, Dr. Anton Edler von Braunmühl, had indicated to be in the possession of secret files. These were files that had belonged to Dr. Hermann Pfannmüller, the facility’s former director and an infamous advocate of, and participant in, the “euthanasia” program. Dr. von Braunmühl reported to have been instructed by Dr. Pfannmüller to have the files destroyed, a directive he had not followed. Eglfing–Haar had housed a “special children’s ward,” and extensive documents about its operation thus fell into Alexander’s hands (Schmidt, U. *Justice at Nuremberg: Leo Alexander and the Nazi Doctors’ Trial*; Palgrave Macmillan: London, UK, 2006). The documents enabled Alexander to give a detailed report about the “children’s euthanasia” program among other medical crimes in a classified report (Combined Intelligence Objectives Sub–Committee report; later declassified) he issued in August 1945 (Alexander, L. *Public Mental Health Practices in Germany: Sterilization and Execution of Patients Suffering from Nervous or Mental Disease*; CIOS Item 24 [Medical], File no. XXVIII–50; Combined Intelligence Objectives Sub–Committee: Armed Forces Supreme Headquarters, 1945). The materials themselves may have been among the ones used by Dr. Gerhard Schmidt, who became interim medical director of Eglfing–Haar in June 1945, to compose the very first German book–length study of “euthanasia” crimes at a public health facility—which Schmidt readied for publication at the end of 1946 but failed to find a publisher for until the mid–1960s (Schmidt, G. *Selektion in der Heilanstalt, 1939–1945: Neuauflage mit ergänzenden Texten* [Selection in the Sanatorium, 1939–1945: New Edition with Additional Texts]; Schneider, F., Ed.; Springer: Berlin, 2012).

The report is divided into two parts: Alexander’s description and analysis of the medical crimes, and an appendix with copies of select documents. Whereas the former has been known to historians and is even available on the Internet (Web Genocide Documentation Centre, S. Stein, University of the West of England; available at http://www.ess.uwe.ac.uk/genocide/Alexander_Index.htm; accessed on 8 July 2012), parts of the appendix in regard to “children’s euthanasia” have not yet received attention and are presented here in a supplementary file with anonymized information about the victims (see supplementary file B).

Pages 110 and 111 contain copies of two sheets taken from what appears to be a ledger that contained information about children whom local health offices had asked to be admitted to the “special children’s ward” in Eglfing–Haar. There are 10 columns. Column 1 contains a series of individual registration numbers, in consecutive order, one for each child to be admitted. For each child, column 2 contains the first and last name (this information has been removed by the author); column 3, the date of birth; column 4, the place of birth; column 5, the residence prior to admission (information removed by the author); column 6, the running number of actual admission to the hospital; column 7, the day of admission; column 8, the day of death (“departure”); column 9, an entry for “released to”

(for most, “+ in institution”); and column 10, remarks. The two sheets show that a few children destined for the “special children’s ward” were not actually admitted, and a few were released from it. Remarkable information derives from the last column: “authorization” is noted there for most cases, and for a few, “case for observation.”

Pages 112, 113, and 114 derive from a different document. At the top of the first page it is written “Cases of authorizations for children of the Reich Committee...” Here, the operatives on site kept track of the “authorized cases,” *i.e.*, those for whom the “Reich Committee” had given the go-ahead for murder. There are six columns. Column 1 contains a running number; column 2, the name of the child (information removed by the author); column 3, the date of birth; column 4, the medical diagnosis; column 5, the day on which the “authorization” was provided; and column 6, “remarks.” Column 6 typically contains the date of death of the child. In a few cases, children had also been released. Information on the last sheet shows what can only be described as a batch-processing of the children’s records by the medical “evaluators” in Berlin, as at least 26 killings were authorized on a single day alone.

These two documents evince the methodical and deliberate nature of selection, evaluation, and eradication of disabled children. No one directly involved in the process could have been a participant without intimate knowledge of the intentions behind the process and its outcomes.

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