

Continuity of “Race Hygiene”?

Discourses and Practices of Sterilization in the Soviet Occupation Zone and the Early GDR

Stefan Jehne¹

Abstract *This article addresses the question of why, despite the repeal of the Nazi sterilization law and an officially negative attitude towards eugenic sterilization, applications for sterilization were submitted and in some cases even carried out in the Soviet Occupation Zone and the early GDR. Stefan Jehne also examines the extent to which the sterilization policies and practices of the Soviet Occupation Zone and the GDR were influenced by their counterparts in the systems before.*

Introduction

With Command No. 6, published on January 8, 1946, the Soviet Military Administration in Germany abolished the Nazi sterilization law (“Gesetz zur Verhütung erbkranken Nachwuchses”) in the Soviet Occupation Zone and declared it to be Nazi injustice.² Thus, forced eugenics legitimized by the state officially ended. As a consequence, several doctors and former lawyers who had participated in the implementation of the Nazi sterilization law, were prosecuted during the four years of the Soviet Occupation Zone. Yet only once, on March

1 Landeswohlfahrtsverband Hessen, Gedenkstätte Hadamar und Leibniz-Zentrum für Zeithistorische Forschung Potsdam.

2 See Command No. 6 of the Soviet Military Administration, January 6, 1946 (See for instance Bundesarchiv (BA) Berlin, DQ 1 Ministerium für Gesundheitswesen der DDR (MfG), No. 20992, sheets without pagination, letter from the Ministry of Labour and Health, allegedly signed by Maxim Zetkin, to the insurance company of Berlin, November 25, 1949.

27, 1946, were doctors legally convicted by the District Court in Cottbus.³ From the beginning of the prosecution, the relevant German health and judicial organizations were mostly opposed to the Soviet initiative to try those involved in sterilization practices during the Nazi era. For example, the president of the Central Department of Justice in the Soviet Occupation Zone, Eugen Schiffer, and the later first attorney general of the GDR, Ernst Melsheimer, argued after the Cottbus trial in March 1946 that prosecuting doctors for being involved in sterilizations would lead to a systematic exodus of medical doctors to the Western Occupation Zones. Because finally, according to Schiffer and Melsheimer, most doctors had been involved in national-socialist sterilizations.⁴

But these pragmatic motives were not the only reason why Schiffer, Melsheimer, and others intervened to stop the prosecutions. Indeed, the attitudes towards the legal evaluation of sterilizations in the Nazi-regime varied across relevant governmental organizations. For example, the leader of the Section II of the Central Department of Health, Werner Holling, argued that eugenically motivated sterilization during the Nazi period could not be illegal, because similar sterilizations were practiced in many other countries too.⁵ The same argument can also be found in the largely parallel West German debate, which differed structurally from the East German debate in that only in Bavaria, North Rhine-Westphalia and with cutbacks in Hesse was the “Gesetz zur Verhütung erbkranken Nachwuchses” repealed at all and was not qualified as a crime against humanity.⁶ Although the Soviets had classified the Nazi

3 See *Ibid.*, sheets without pagination, judgement by the District Court in Cottbus against Ulrich Hammer, Paul Carthaus and Otto Bode, March 27, 1946. As we know today, the judgement was negotiated before between the Soviets and the German participants (See BA Stasi-Unterlagen-Archiv, MfS, BV Cbs, ASt 3441–54 VSG, p. 7–10, note by the Department of Justice of the Brandenburg Provincial Administration, signer not readable, March 15, 1946).

4 See *Ibid.*, DP 1 Ministerium der Justiz der DDR (MdJ), No. 116, sheet 10, letter from the president of the Central Department of Justice in the Soviet Occupation Zone, Eugen Schiffer, to the Legal Department of the Soviet Military Administration in Berlin-Karlshorst, May 10, 1946; Cf. Meyer-Seitz: *Verfolgung von NS-Straftaten*, 1998, p. 54.

5 See BA Berlin, DQ 1 MfG, No. 20992, sheets without pagination, instructions concerning the penalization of sterilizations, no date. On the international eugenics movement and its transnational history of interdependence, See e.g. Allen, *Eugenics*, 2015, p. 224–232. Bashford, *Internationalism*, 2010, p. 43–61. Turda, *Race*, 2015, p. 62–79. Kühl, *Rassisten*, 2014.

6 See hierzu Tümmers, *Anerkennungskämpfe*, 2011, p. 43–45. Teicher, *Mendelism*, 2020, p. 205f.

Forced Sterilization Act as a Nazi injustice, the German efforts were successful. In May 1946, the Soviet Military Administration issued a new decree which defined only those Nazi sterilizations as crimes against humanity that were racially or politically motivated. Thus, eugenic sterilizations were no longer classified as crimes.⁷

Despite the abolition of the Nazi sterilization law by the Soviet Military Administration, medical doctors had internalized the administrative practices from the Nazi period and continued to request permission for sterilization. In the following, I would like to examine the sterilization debates and practices in the Soviet Occupation Zone and the GDR up to 1959 and ask whether this was something genuinely original, a continuation of Nazi racial hygiene or the reactivation of Weimar eugenics concepts. My particular focus is on the sterilization applications and partial executions with eugenic indications. In this regard, I ask how and why, despite a diametrically opposed official stance on eugenic sterilization applications and in some cases eugenic sterilizations were approved, even though there was no legal basis for this and any proactive action in this direction was therefore formally illegal. I also compare the sterilization debates practice in the Soviet Occupation Zone and early GDR with that in the Federal Republic of Germany during the same period, with the Nazi practice of forced sterilization and with that in the Weimar Republic in some extent. Finally, I will shed some light on the biographical influences of the actors involved.

The Renaissance of Weimar Eugenics? Sterilization Applications in the SBZ and GDR 1945-1959

Regarding the latter, two substantial differences in request practices before and after the end of the national-socialist regime 1945 can be easily identified. In the four years of the Soviet Occupation Zone, there were approximately 60 requests for sterilizations. Ca. five were provided with a eugenic indication and one of them had been approved.⁸ During the 1950s, we can identify

7 See Meyer-Seitz, *Verfolgung*, 1998, p. 48.

8 Evidently, the not clearly definable dark figure of non-registered reports is not included, just as the actually executed sterilizations. Until the end of 1948, six to twelve requests per Department of health of each State had been registered (See BA Berlin, DP 1 Md), No. 7098, record note, signer not readable, December 29, 1948). Sächsisches

165 requests, approximately 85 of which were made for eugenic reasons. Ten of them had been certainly approved and further five were approved and executed.⁹ In contrast, during the Nazi regime, about 400.000 sterilizations were carried out.¹⁰ Thus, the number of requests for sterilizations and consequently the number of performed sterilizations, decreased dramatically after the Nazi era. This meant that the total number was significantly lower than in the western occupation zones, where 329 sterilization requests were submitted to the public health department in Bremen alone.¹¹ The figures were also significantly lower than in the Federal Republic of Germany in the 1950s. The head physician of the district hospital in Großburgwedel near Celle, Dohrn, who was indicted in 1962, had performed 162 sterilizations on women in 1958 and 1959 and, according to his own statements, a total of over 1000 since 1948.¹²

Also, most of these requests after 1945 were directed against women.¹³ The reason for this is that official biopolitics in the Soviet Occupation Zone/GDR focused almost exclusively on the female body in matters of reproduction and contraception, as Daphne Hahn has already elaborated.¹⁴ Another major difference is the fact that in all those requests it was claimed that the individuals submitted voluntarily. The conceptual background for the rejection of compulsory sterilizations but the approval of voluntary sterilizations reaches back to social democratic, socialist and bourgeois biopolitical programs in the Weimar Republic.¹⁵ The Weimar sterilization debate had reached its climax with the draft law of the Prussian State Health Council from July 1932, which provided for voluntary eugenic sterilizations, the approval of which was to be decided by a panel of experts.¹⁶ After 1945, there was a consensus across the occupation zones and subsequently in both German states that, in contrast to National

Hauptstaatsarchiv Dresden (SächsHStA DD), 11391 Landesregierung (LRS), Ministerium für Arbeit und Sozialfürsorge (MASF), No. 2144–2146.

9 See BA Berlin, DQ 1 MfG, No. 1843, Vol. II, No. 2036, No. 2040, No. 6119, No. 7098 and Müller-Hegemann, *Therapieversuche*, 1958, p. 230–235.

10 See e.g. Baader, *Eugenik*, 2016, p. 319f.

11 See Nitschke, *Erbpolizei*, 1999, p. 267.

12 See Hahn, *Modernisierung*, 2000, p. 96.

13 In the 1950s, only 7 to 9 of 165 requests were directed against men; all others were directed against women. In one case the gender is not evident (See BA Berlin, DQ 1 MfG, No. 1843, Vol. II, No. 2040, No. 7098).

14 See Hahn, *Modernisierung*, 2000, p. 40–42, 207, 217–218, 228–230, 277–278, 305.

15 See Schwartz, *Sozialtechnologien*, 1995, p. 264–311.

16 See for instance Vossen, *Umsetzung* 2009, p. 98–100.

Socialism, only voluntary sterilizations should be carried out. This is exemplified by publications in this regard by the geneticist and Nazi perpetrator Hans Nachtshheim, who was at pains to emphasize the alleged abuse of eugenics by the Nazi regime.¹⁷ However, Nachtshheim wanted to relativize the voluntary nature of people marked as "feeble-minded". Instead, the state should be able to order sterilization without consent in these cases.¹⁸

It was common during the four years of the Soviet Occupation Zone and the early GDR in the 1950s that medical doctors requested the sterilization of women together with a request for abortion. An example of a eugenic indication is the case of Irmgard P. in June 1949, who was described as "deaf and dumb". Allegedly, she had applied for her own sterilization at the Department of Health in Leipzig after her abortion had been approved. Her request for sterilization, which was signed by her but written in third person presumably by a doctor, was eugenically motivated according to today's and as well in the contemporary understanding. It was claimed that she was 'mentally below average', and that her deafness was inheritable.¹⁹ The Department of Health in Leipzig forwarded the request to the Department of Health of the Saxon State, and its head, Friedrich Winkler, decided to authorize the sterilization without any legal basis.²⁰ Winkler can be seen as a paradigmatic example of individual continuities of eugenicists from the 1920s through National Socialist rule to the post-war period. From 1928 to 1934 he lectured at university of Rostock about eugenics and "race hygiene" and was a visiting scientist at the so-called Racial Biology Institute in Uppsala, Sweden. Afterwards, he worked as head of the Department of Health in Neustrelitz. During World War II he worked as a military hygienist at German *Wehrmacht*.²¹ As I have already mentioned,

17 See Nachtshheim, *Rassenmischung*, 1947, p. 148–154. Nachtshheim, *Sterilisierung* 1952, p. 47–50. Also Tümmers, *Anerkennungskämpfe*, 2011, p. 51–54. and Doetz, *Alltag*, 2011, p. 213–215.

18 See Nachtshheim 1952, p. 47–50; in addition Tümmers, *Anerkennungskämpfe*, 2011, p. 54.

19 SächsHStA DD, 11391 LRS, MASF, No. 2146, sheet 81, self-application, signed by Irmgard P., filed at the Health Department of Leipzig, June 7, 1949.

20 Ibid., sheet 82, letter from the Department of Health of the Saxon state, signed by Friedrich Winkler, to the Department of Health in Leipzig, June 27, 1949.

21 See SächsHStA DD, 19117 Personalunterlagen sächsischer Behörden, Gerichte und Betriebe from 1945, Box 2097, Dossier of Friedrich Winkler, sheet without pagination, Dossier, handwritten by Friedrich Winkler, September 2, 1945; Ibid., DO 1 Ministerium des Innern (Mdl), No. 102922 Dossier of Friedrich Winkler, sheet 1–3, 'questionnaire', December 3, 1948, sheet 3, Dossier, selfwritten, no date; Ibid., R 4901 Reichsministeri-

legalizing formally voluntary sterilizations for eugenic reasons was discussed several times but officially rejected. Winkler thus concealed the real reason for the sterilization of Irmgard P. in his permission. Formally, he gave his consent for medical and social reasons. Three weeks later, the Central Department of Health finally passed a first official regulation concerning the sterilization complex of women. Henceforth, voluntary sterilizations of women for strictly medical indications were legal, but not for other possible indications.²²

Debates and Legislative Initiatives in the Soviet Occupation Zone and Early GDR on the Legalization of Sterilization

During the Weimar Republic, the regions of Saxony and Thuringia in particular had been pioneers in both the discourse and the illegal practice of sterilization.²³ It is therefore not surprising that the first demand to regulate sterilizations by law, which was sent to the Central Department of Health of the Soviet Occupation Zone, was made by the Department of Health of the Saxon State in January 1948. In an internal letter, Wladimir Lindenberg, responsible in the Central Department of Health, stated he fully supported the Saxon request.²⁴ Together with the Central Department of Justice, the Central Department of Health tried to define a legal framework to outline the circumstances, in which sterilizations would be legal. Wladimir Lindenberg argued that sterilizing for medical reasons was indisputably legal, and he added that it should

um für Wissenschaft, Erziehung und Volksbildung (RMfWEV), No. 1320, index card No. 10539 (Friedrich Winkler); entry ‚Friedrich Winkler‘, *Catalogus Professorum Rostochiensium*, <https://purl.uni-rostock.de/cpr/00001837> (05.06.2025).

- 22 This is comprehensible from the correspondence between the Saxon State Department of health and the Department of Health of the district of Leipzig (See *Ibid.*, sheet 71, letter from the Saxon State Department of health and the Department of Health, signed by Schratz, to the Department of Health of the district of Leipzig, November 9, 1949).
- 23 For example in Zwickau, Saxony, the physicians Gustav Boeters and Heinrich Braun sterilized 67 people between 1921 and 1925 (See Braun, *Sterilisierung*, 1924, p. 104–106. Boeters, *Unfruchtbarmachung* 1925, p. 341.) In Thuringia it was Margarete Hielscher, who sterilized 27 people in 1924 to 1926 in the Psychiatric State Institute of Stadtroda, (See Hielscher, *Schwachsinniger* 1930, p. 97–99.)
- 24 See BA Berlin, DQ 2 Ministerium für Arbeit und Berufsausbildung der DDR (MAB), No. 3887, sheet 450, letter from Wladimir Lindenberg to Erwin Marcusson, January 10, 1948.

also be legal 'in all other cases'. These other cases were 'a clear, verifiable hereditary disease' (which points to eugenic motivations), the 'social situation', and 'the existence of a lebdinous psychopathic personality' (which points to psychiatric motivations).²⁵ At the end of January 1948, a meeting of section leaders took place within the Central Department of Health in Berlin. The head of the Section of Staff and Instructions, Carl Coutelle, stated that eugenically as well as socially motivated sterilizations could not be legalized. Only in cases of medical indications sterilizations shall be 'tolerated'.²⁶ Coutelle's position becomes clearer considering his biography. Already in the Weimar Republic he was a member of a Communist student group.²⁷ The communist party had regularly rejected eugenically motivated sterilizations, calling them 'class medicine'.²⁸

It is astonishing that Wladimir Lindenberg reconciled his position with that of Coutelle. Apparently, a clear position on eugenically motivated sterilizations was not appropriate within the Central Department of Health. Their president, Karl Linser, instructed Lindenberg to prepare a bill regulating the sterilization topic in the following internal organizational meeting.²⁹ However it was not him, but employee Marie Schulte-Langforth, who prepared the pertinent bill in August 1948. She argued that sterilizations for medical reasons should be legal, but not for social reasons. But she further argued, one would have to respect a person's wish for sterilization if they were mentally or physically ill.

Although Schulte-Langforth was in favour of eugenics, the internal vote in the Central Department of Health on eugenically indicated sterilizations was clearly against it. Thus, she modified the bill, and the new version was much more restrained about eugenically motivated sterilizations.³⁰ However, her bill

25 Ibid. DP 1 MdJ, No. 7098, sheet 2, letter from Wladimir Lindenberg to the Central Department of Justice of the Soviet Occupation Zone, January 30, 1948.

26 Ibid. DQ 1 MfG, No. 20992, sheet without pagination, protocol of a meeting of section leaders within the Central Department of Health of the Soviet Occupation Zone, February 11, 1948.

27 See Ibid. DO 1 Ministerium des Innern (Mdl), No. 94962, sheet without pagination, sheet of staff, no date.

28 See Benjamin, *Klassenmedizin*, 1925, p. 8–12. Ibid. *Rassenhygiene*, 1927, (quoted in Schwartz 1995, p. 80).

29 See BA Berlin, DQ 1 MfG, No. 20992, sheets without pagination, protocol of a meeting of section leaders within the Central Department of Health of the Soviet Occupation Zone, February 11, 1948.

30 Ibid. sheet 10, bill prepared by Marie Schulte-Langforth, October 4, 1948.

was not passed into law. In further discussions between Schulte-Langforth and the responsible staff of the Central Department of Justice, no agreement was reached.³¹ Altogether, the various debates within and between the relevant organizations ended at the end of 1948 without a legal regulation. The informal practice of doctors registering people for sterilization continued and was not affected at all by these debates at the ministerial level.

The Central Administration for Public Health's negative position towards the legalization of eugenic sterilization did not change after the founding of the GDR on 7 October 1949. This, however, did not put an end to the attempts at sterilizing people for eugenic reasons.³² This internalized need within the medical profession in the GDR led to the fact that the question of how to deal with eugenically and socially indicated sterilization requests was declared a top priority by the leading health official Maxim Zetkin in April 1950. The communist Zetkin wrote to the party executives of the SED that, on the one hand, he could – against the traditional communist position – certainly understand the desire to sterilize women because of the poor prospects for the heredity of their offspring, but on the other hand, he could also understand the hesitation of the central health department to explicitly regulate the issue by law. Despite his sympathy in principle for eugenically motivated sterilizations, Zetkin ultimately opposed their legalisation, solely for political reasons.³³ Regarding compulsory sterilizations, he made clear that it was politically impossible to reinstall eugenically motivated practices so fast after the recent Nazi sterilizations. Evidently, it was more important for the GDR to distance itself from the Nazi regime's extermination policy than to implement its own eugenics programmes, despite the fact that eugenics was still considered a serious biopolitical concept. There is no official response from the SED leadership to Zetkin's letter, but there is a handwritten note on this letter that the party's General

31 Ibid. DP1 MdJ, No. 7098, sheet 13, recorded note by Marie Schulte-Langforth, December 29, 1948.

32 See for instance ebd., No. 2147, sheet 114, letter from Oskar and Charlotte T. via the medical department of Löbau to the Saxon State Department of Health in Dresden, December 16, 1949; sheet 115, "specialist medical report" concerning Charlotte T., prepared by Elfriede Ochsenfahrt, December 7, 1949. Charlotte T. was claimed to be schizophrenic (Ibid.).

33 See BA Berlin, DQ 2 MAB, No. 3887, sheet 433, letter from Maxim Zetkin, Ministry for Labour and Health to the SED party executives, April 15, 1950.

Secretary Walter Ulbricht personally rejected the request to formalise rules for sterilization. Again, no law was passed.³⁴

Despite this, health officials kept on demanding the creation of a sterilization law in the 1950s. For example, in November 1950, the head of the gynaecological clinic of the University of Rostock, Hans Hermann Schmid, and later in January 1958 his colleague from the Department for Social Hygiene, Karl-Heinz Mehlan, both called for a sterilization law based on eugenic ideas.³⁵ Schmid's request was directly supported by his colleagues of the gynaecological clinics of the universities at Jena (Gustav Döderlein), Leipzig (Robert Schröder), and Halle (Helmut Kraatz).³⁶ Apart of Schmid, the other three professors had been involved as perpetrators in carrying out forced sterilizations during the National Socialist era.³⁷ In his request, Schmid tried to construct a difference between eugenically motivated sterilizations of the national-socialists and sterilizations under democratic conditions.³⁸ The argument that eugenic steriliza-

34 See *Ibid.*, handwritten note, no date and no author.

35 See SächsHStA DD, 11391 LRS, MASF, No. 2144, sheet 101, letter head of the gynaecological clinic of the university of Rostock, Hans Hermann Schmid, to the State government of Mecklenburg, Ministry of Health, November 21, 1950; BA Berlin, DQ1 MfG, No. 21170, sheet without pagination, letter from the head of the Institute for Social Hygiene at the university of Rostock, Karl-Heinz Mehlan, to the Head of the Main Department "Mother and Child" at the Ministry of Health of the GDR, Käthe Kern, January 21, 1958.

36 See SächsHStA DD, 11391 LRS, MASF, No. 2144, sheet 100, letter by the Head of the gynaecological clinic of the university of Leipzig to the Department of Health at the Saxon Ministry of Labour and Social Welfare, December 8, 1950.

37 Gustav Döderlein was assistant at the gynaecological clinic at the university of Berlin (until 1936) and afterwards he was head of the police state hospital in Berlin until the End of World War II. At both places he took through sterilizations. The same was true for Helmut Kraatz. He took through sterilizations at the gynaecological clinic at the university of Berlin until 1941. Robert Schroeder was already head of the gynaecological clinic at university of Leipzig during the national-socialist-period and took as well through sterilization operations even before 1933. (See BA Berlin, R 4931 RMfWEV, No. 13261, index card No. 1709 (Gustav Döderlein). *Ibid.* No. 13269, index card No. 5387 (Helmut Kraatz). *Ebd.*, DQ 1, MfG, No. 24137 Dossier Helmut Kraatz, p.10-11, Dossier, April 24, 1953. *Ibid.* Reichsärzteregeister, index card Robert Schröder. David, Döderlein, 2011, p. 196. *Die Direktoren der Universitätsfrauenklinik* p. 274; Doetz, *Alltag*, 2011, p. 213; Klee, *Personenlexikon*, 2003, p. 561; Klose, *Nachuntersuchungen 1940 (simult. med. Diss. Kiel 1940)*, p. 4, 13.)

38 See SächsHStA DD, 11391 LRS, MASF, No. 2144, sheet 101, letter head of the gynaecological clinic of the university of Rostock, Hans Hermann Schmid, to the State government of Mecklenburg, Ministry of Health, November 21, 1950.

tions were a serious social technology that had been abused by the National Socialists was neither an exclusive argument of Hans Hermann Schmid nor a specific feature of the discourse of the Soviet Occupation Zone and early GDR. Rather, it was also the core argument of Hans Nachtshiem in his “Critique of National Socialist Racial Theory” or – in addition to the pragmatic reason of the shortage of doctors – the central political argument against the systematic prosecution of those involved in Nazi forced sterilizations in the Soviet Occupation Zone.³⁹ This dichotomous separation of eugenics from the Nazi practice of forced sterilization made it possible in the Federal Republic to continue offering eugenic counselling during the 1950s.⁴⁰

However, the Central Department of Health of the GDR in Berlin did not comply with the scientist’s demands: no law was passed to regulate this complex. On the contrary, the Central Department of Health passed another regulation in 1954 confirming the position of the first of 1949.⁴¹ The same was true for the Case of Karl-Heinz Mehlan. In his request he talked about ‘imbecile and psychopathic children, who will flood the recreation centres if they were not aborted before.’ He further wrote that it was necessary to sterilize the mothers because ‘unfortunately’ there were ‘some antisocial, moronic, and instinctive girls’ who get pregnant all the time if they are not sterilized.⁴² With attributes such as “asocial”, “moronic” and “instinctive”, eugenicists categorized actual or supposed (sexual) deviations from the norm with intersectional discriminating intent across all temporal and political system boundaries. This finding can also be applied to the eugenic sterilization practice in the Soviet Occupation Zone and the GDR in the 1950s, as can be exemplified paradigmatically by an application made in 1954 against Jutta L. from Leipzig for “feeble-mindedness”. There was no serious medical diagnosis here, but her supposed sexual deviation from the norm was medicalized. The psychiatrist who wrote the report described her sexual behaviour as “instinctive” and her in general as “antisocial” and “dull”. A male doctor, and therefore a member of a privileged class, stigmatizes a member of a deprived class on the basis of his internalized

39 See Nachtshiem, *Rassenmischung*, 1947, p. 148.

40 See Vogel, *Retinoblastom* 1957, p. 565, 569. Schenk, *Behinderung*, 2016, p. 20f.

41 See Verfügungen und Mitteilungen des Ministeriums für Gesundheitswesen No. 2, March 16, 1954, p. 6.

42 BA Berlin, DQ 1 MfC, No. 21170, sheet without pagination, letter from the head of the Institute for Social Hygiene at the university of Rostock, Karl-Heinz Mehlan, to the head of the Main Department “Mother and Child” at the Ministry of Health of the GDR, Käthe Kern, January 21, 1958.

classist and sexist system of prejudice and wants her to be sanctioned for deviating from the norm. He uses the stigma "antisocial" to express the supposed break with the class norm, denies her free will and control over her sexuality in a sexist way with the term "instinctive" and disparages her with the attribute "dull".⁴³

Mehlan's demand was therefore by no means merely utopian but was already being applied in practice as a matter of course. However, his application was not successful but he did not have to bear any consequences – just as little as the doctors and Nazi perpetrators Robert Schröder and Johannes Suckow⁴⁴ who were involved in the sterilization application against Jutta L. So, the limits of the sayable and executable were much more extensive within the GDR's biopolitical organizational system than the official position of the Ministry of Health would suggest.

Conclusion

To sum up, the adoption of a new sterilization law was discussed in the Soviet Occupation Zone and in the early GDR but remained in some ways open-ended. Sterilization demands were practiced at least to the stage of making requests, but partially approved and executed. Hereby, the biopolitical focus was decidedly placed on the female body. So, there is no doubt that eugenic debates and practices continued after the end of World War II. Even during the persecution of doctors and lawyers involved in compulsory sterilizations, German officials were interested in rehabilitating eugenics as a serious biopolitical concept. But as I have pointed out, every request of sterilization was formally declared to be voluntary, and their total number was much lower than under National Socialism. Thus, both the discourse and the practice are more reminiscent of the Weimar Republic, although it cannot be ruled out

43 Ibid., No. 1843, Vol. II, sheet 61, Sending of Robert Schröder's application for sterilization against Jutta L. with an excerpt from the expert opinion of the senior physician and psychiatrist at the Leipzig-Dösen State Hospital, Johannes Suckow, by the head of the Mother and Child Department, Healthcare Division at the Leipzig District Council, Margarete Boenheim, to the Mother and Child Department at the Ministry of Healthcare of the GDR on 11 February 1954.

44 From December 1, 1942 to March 31, 1943, Johannes Suckow was in charge of research at the Wiesloch sanatorium and nursing home as part of the Nazi "euthanasia" program (See for instance Lienert, *Euthanasie-Verbrecher* 2018, p. 87–89).

that the actors involved in the Nazi practice of forced sterilization merely tactically adapted their sterilization applications and/or legal demands to the new discourse framework after 1945. However, on the level of the Central Department of Health and the later Ministry of Health of the GDR, the internal debates seemed partially to be a serious attempt to argue for a legalization of eugenically motivated sterilizations. But as Maxim Zetkin's letter to the SED party leadership made clear, the politically motivated demarcation from the abuse of sterilizations by the Nazi regime made it impossible for the GDR to officially install a biopolitical programme involving sterilizations for eugenic reasons.

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