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Isabelle von Bueltzingsloewen

Starvation in French Asylums during the German Occupation. Reality and Misinterpretations.

In its edition of June 10, 1987, the French national daily *Le Monde* published an article entitled "Death Asylums," which revealed that 40,000 mentally ill people had died of hunger, cold and infections caused by undernourishment in French psychiatric hospitals between 1940 and 1945. ¹ Actually, this fact had been published a few months before by the psychiatrist Max Lafont in a book with the eye-catching title "L'Extermination douce. La Cause des fous 40 000 malades mentaux morts de faim dans les hôpitaux sous Vichy" (Gentle-extermination. The deaths of 40,000 mentally ill people in French mental hospitals under the Vichy regime). ² In this heretofore unnoticed book, Lafont indeed maintained that the Vichy regime had taken advantage of the food crisis caused by the war and the Nazi occupation to get rid of patients who were considered socially useless, a threat to the purity of the race and an excessive financial burden on society.

Far more radical than Lafont's book, the article published in the daily Le Monde violently implicated French psychiatrists, who were accused — as were their German colleagues — of having contributed to the extermination of 40,000 mentally handicapped people, or at least of having left them to die without attempting to save them. In the following weeks, several deeply shocked psychiatrists strongly rejected these allegations.

¹ Escoffier-Lambiotte, Claudine. "Les asiles de la mort: Quarante mille victimes dans les hôpitaux psychiatriques pendant l'Occupation", Le Monde, 10 June 1987.

² Lafont, Max. L'Extermination douce. La Cause des fous 40 000 malades mentaux morts de faim dans les hôpitaux sous Vichy, Ligné: Editions de l'AREFPPI, 1987.

Over the following two decades, the "gentle extermination" thesis — also called "hidden extermination" — positioned itself in the collective memory and was increasingly considered an undisputable truth. Although the thesis was vigorously contested by several historians, including Henry Rousso and Claude Quétel ³, booth specialists in the Vichy regime, it was spread by the media and by several leftist intellectuals, including the psychiatrist Boris Cyrulnik, who has popularized the concept of "resilience" in France⁴.

At the same time, the gentle extermination thesis became progressively more radical. Thus in 1998, the psychiatrist Patrick Lemoine published a work of fiction entitled "Droit d'asiles" (Right of asylum). In his preface he contented, without providing any proof, that the Vichy regime had intended to eliminate the mentally ill who were confined in psychiatric hospitals; in other words, the Vichy regime not only took advantage of the food crisis to get rid of mentally ill people but that it organized the starvation, perhaps obeying German orders; this interpretation has nonetheless remained isolated.

In 2000, Max Lafont published a second edition of his book, which was far more accusatory than the first one. In June 2001, the extreme leftist publisher Syllepse, directed by Armand Ajzenberg,

Rousso, Henry. "Compte rendu des livres de Max Lafont et de Pierre Durand", Vingtième Siècle. Revue d'histoire 21, January-March 1989,156-157; Quétel, Claude et Bonnet, Olivier. "La surmortalité asilaire en France pendant l'Occupation", Nervure. Journal biologique et clinique IV, 2 March 1991, 22 - 32.

⁴ Cyrulnik, Boris. *Un merveilleux malheur*, Paris: Editions Odile Jacob ,1999.

⁵ Lemoine, Patrick. *Droit d'asiles*. Paris: Éditions Odile Jacob, 1998. ⁶ Lafont, Max. *L'Extermination douce*. *La Cause des fous 40 000 malades mentaux morts de faim dans les hôpitaux sous Vichy*, Bordeaux: Le Bord de l'eau éditions, 2000.

decided to launch a petition entitled "Pour que douleur s'achève" (For an end of suffering). It describes the duty of remembrance in the following terms:

The time has come for the highest authorities of France to recognize the responsibility of the French Vichy regime for this catastrophe, as has been done for the victims of other catastrophic events; and for the history of this slaughter to be included in educational curricula and textbooks in lycées and colleges, where it has so far been excluded. We want the highest government authorities to acknowledge that the French state of Vichy abandoned human beings confined to mental hospitals to their deaths during World War II in France. We want responsibility for these events to be understood in terms of their wider political ideology and institutions, and taught in schools. We believe that resolving the virtual amnesia surrounding these dreadful events will make such tragedies more difficult to repeat.

This pressing request referred to the speech delivered by French president Jacques Chirac in 1995 in which, in commemorating the massive round-up of Jews in Paris in July 1942, he admitted the participation and responsibility of the French state under German occupation for the deportation of 76,000 Jews⁸.

⁷ See Bueltzingsloewen, Isabelle von. The Mentally-ill who Died of Starvation in French Psychiatric Hospitals during the German Occupation in World War II, Vingtième Siècle. Revue d'histoire, 4 (2002) 76; https://www.cairn-int.info/article-E VING 076 0099--the-mentally-ill-who-died-of-starvation.htm#re30no30, accessed 20.7.2018.

⁸ On 16 July 1995, on the occasion of the commemoration of the 16 - 17 July 1942 raid of the Vel'd'Hiv' during which almost 13,000 Jews (including more than 4,000 children) were arrested and sent to French transit camps before being transported to extermination camps, President Jacques Chirac officially acknowledged the responsibility of the French police in this tragic event. In 1992, on the 50th anniversary of the raid, his socialist predecessor François Mitterrand had refused to do so. On this point see Wieviorka, Olivier. La mémoire désunie: Le souvenir politique des années sombres, de la Libération à nos jours, Paris: Le Seuil, 2010.

This was, broadly outlined, the memorial context in which I started my investigation. This is not the place to go into the details of my study, which was published in 2007 (2009 for the second paperback edition) under the title "L'hécatombe des fous. La famine dans les hôpitaux psychiatriques français sous l'Occupation" (The hecatomb of lunatics. Starvation in French psychiatric hospitals under German occupation). 9

My study invalidated the extermination thesis defended by Patrick Lemoine and the gentle or hidden extermination thesis defended by Max Lafont and others. Till now the thesis had never been validated by a rigorous historical study and, by the way, it is important to point to the responsibility of academic historians who never held an historical inquiry on this tragic event despite the fierce debate described above.

Thanks to very abundant sources, most of which never had been tapped for the debate, I could indeed show that—though it had indisputably provoked the death of a large number of people (45,000 according to my calculations)—the starvation that had decimated the population of mentally ill patients confined in French psychiatric institutions between 1940 and 1945 had not been organized by the regime of Marshall Pétain in Vichy: The mentally ill were not exterminated by systematic killing as in the German T4 operation and other policies that followed in countries occupied by the Reich. But this does not mean that the Vichy government had no responsibility in this tragedy. By choosing to collaborate, Vichy also yielded to the increasing demands of the occupational forces that organized the systematic pillage of French resources in order to support its total war effort on the

⁹ Bueltzingsloewen, Isabelle von. *L'Hécatombe des fous. La famine dans les hôpitaux psychiatriques français sous l'Occupation*, Paris: Aubier, 2007. In French the word *hécatombe* - meaning a huge loss of life - is used far more often than in English.

eastern front, thus endangering the most fragile segments of the French population ¹⁰: not only confined mentally ill people but also elderly in hospices (we now know that 50,000 elderly or disabled persons starved to death in these institutions between 1940 and 1945)¹¹, or detainees in prisons or internment camps (especially those for Jews) who also suffered deeply from shortages of food, as well as elderly people who were left alone in large cities or infants who, deprived of milk, died en masse in 1940 and in 1945, and also those who were indigent or chronically ill and lacked the physical and mental capacity to develop a survival strategy amidst a severe food crisis¹².

Although it often has been asserted that no one died of hunger in France during the Second World War because French people were particularly ingenious, we now know that probably more than 300,000 people died of hunger during these terrible years. I say "probably" because I can't give a more precise calculation of these indirect "victims of the conflict" as demographers often call them. Victims of starvation can hardly be evaluated because in the general mortality rates the increase of deaths due to

10 See Grenard, Fabrice. "Les implications politiques du ravitaillement en France", Vingtième Siècle. Revue d'histoire 94, April-June 2007, 199 - 215.

¹¹ According to François Chapireau, 50,000 old or disabled residents died of hunger in French hospices between 1940 and 1945. But hospices were proportionately less affected than mental hospitals. See Chapireau, François. "La mortalité des malades mentaux hospitalisés en France pendant la Seconde Guerre mondiale. Etude démographique", L'Encéphale 35(2), 2009, 121 - 128.

¹² See Bueltzingsloewen Isabelle von (ed.), "Morts d'inanition". Famine et exclusions en France sous l'Occupation", Rennes: Presses universitaires de Rennes, 2005.

starvation were offset by the decrease of deaths due to other causes such as $alcoholism^{13}$.

In addition, I could show that the Vichy government did not abandon mentally ill people to their tragic fate but rather took measures to stop the starvation in psychiatric institutions. On December 4, 1942, a directive by the Secretary of State for Family and Health allocated a substantial quantity of supplemental rations to patients confined in psychiatric hospitals. Not mentioned, relativized or even denied by those who support the gentle extermination thesis, this directive demonstrates the intention of the central power to stop the starvation in psychiatric hospitals. As a result of its application, a significant decrease in mortality was, by the way, observed in a large majority of psychiatric hospitals.

Insert GRAPHIC!!!

Here is the mortality curve of one of the biggest psychiatric hospitals in France located in the suburbs of Lyon: There is an enormous increase of mortality between 1939 and 1942; in 1943 the death rate drops abruptly and increases in 1944 again in a context marked by the battles for liberation, which intensified the food crisis.

Hence, contrary to what the supporters of the gentle extermination thesis have often insinuated, it is not possible to place the extermination of German people with handicaps by the Nazi regime on the same level as the death of French mentally ill people due to starvation or even to claim that "it comes to the same thing." The National Socialists never expressed any interest in the fate of French mentally ill people. They did not necessarily intend to

 $^{^{13}}$ See Bueltzingsloewen, Isabelle von. « Inégaux devant la mort », in La France pendant la Seconde Guerre mondiale. Atlas historique, Paris : Fayard, 2010, 138-139.

do the same in the occupied countries of the West as they did in the East or within their own territory.

The attitudes of psychiatrists towards confined mentally ill people constitute another major element of differentiation between the French and German situation. We know that the extermination of German mentally ill patients was possible because of the collaboration, or at least the consent, of the great majority of psychiatrists employed in psychiatric hospitals. I have established that on the French side, on the contrary, the Directive of December 4, 1942, which gave priority in the rationing system to confined mentally ill patients along with other vulnerable categories of the population, was drafted under pressure from doctors in psychiatric hospitals. Beginning in the autumn of 1941, some physicians united to take action within the framework of the Medico-psychological Society, and later during the Congress of French Alienists and Neurologists in October 1942 in Montpellier.

At the local level, numerous directors of psychiatric institutions and chief physicians also took up the cause of their patients, multiplying appeals to the prefects, to sanitary authorities and provision services in order to obtain more food and means for heating their establishments. There were, of course, those who remained passive but no one took advantage of the context to call for the "euthanasia" of incurable patients or to use the Nazi regime to this end. It is consequently surprising to read what the German geneticist Benno Müller-Hill wrote in his book "Tödliche Wissenschaft. Die Aussonderung von Juden, Zigeunern und Geisteskranken 1933-1945" (Murderous science. Elimination by scientific selection of Jews, Gypsies and others in Germany 1933-1945): 14 Approximately 40,000 confined mentally ill died of

¹⁴ Müller-Hill, Benno. *Tödliche Wissenschaft. Die Aussonderung von Juden, Zigeunern und Geisteskranken 1933-1945*, Reinbek: Rowohlt 1984.

starvation in France [...]. French psychiatrists followed the German example without having received the order to do so."

Finally, the comparison with the German situation has allowed for a new examination of the delicate subject of eugenics. The extermination of mentally ill patients by the National Socialist regime was in fact made possible by the strong attachment of the medical corps and parts of the population to highly extremist eugenic theories. This extremist (or negative) eugenics had few advocates in France and was not promoted in the framework of the National Revolution advocated by supporters of the Vichy regime 15. That said, we cannot assert that these eugenic theories largely circulated throughout French society in the period between the two World Wars had no influence over the tragedy that took place within psychiatric institutions between 1940 and 1945 and that seems to have been a minor event for a majority of the French population. In order to obtain additional food for their patients, doctors in psychiatric hospitals had to fight highly negative, entrenched opinions about mentally ill patients. Mentally ill people were perceived as incurable and therefore a burden on society; their survival was not a priority in the context of a severe food shortage.

Nonetheless, it is notable that in a very unfavorable context, the humanist argument that emphasizes a society's unquestionable obligation to protect its weakest members whatever the

The Vichy program of eugenics can be summed up by the introduction of a mandatory premarital certificate, a measure called for by numerous hygienists in the period between the two world wars. See Taguieff, Pierre-Henry. "Eugénisme ou décadence, l'exception française", Ethnologie française 24(1),1994, 81-103; Carol ,Anne. Histoire de l'eugénisme en France: Les médecins et la procéation XIX-XXe siècles, Paris: Le Seuil, 1995, and Drouard, Alain. L'eugénisme en question. L'exemple de l'eugénisme français, Paris: Ellipses, 1999.

circumstances, as numerous psychiatrists as Henry Ey, the famous catholic psychiatrist of the psychiatric hospital in Bonneval (Eure), affirmed during the period, remained sufficiently audible to forestall eugenic and economic arguments. This victory was perhaps narrow, but the decision to provide additional calories to confined mentally ill patients was made in the name of humanism, despite some reticence, in particular from some members of the prestigious Academy of Medicine¹⁶.

One should now clarify the strategies at work in the historical narratives produced by supporters of the gentle extermination thesis and consider why this weak thesis has spread so widely and easily over three decades.

Historians are increasingly concerned with analyzing contemporary uses of the past; that is, with clarifying how the past influences the discourse, practices and identity of specific groups or even of society as a whole. From this perspective, I tried to identify the memorial issues at work in the instrumentalization — by psychiatrists (and other professionals involved in the psychiatric field) and non-psychiatrists — of a highly traumatic event in the history of psychiatric care. I noticed that these memorial issues have progressively shifted. This shift not only reflects the radical transformations of the psychiatric institution but also

qui attribue un supplément de ration alimentaire aux malades internés des hôpitaux psychiatriques", Bulletin de l'Académie de médecine 107 (6), 9 February 1943.

¹⁶ At the session of 3 February 1943, Dr. Pierre Martel, one of the members of the commission for food rationing created by the Academy of Medicine in September 1940, expressed his opinion that the additional food allocated to the mentally ill was not justified. Martel, Pierre Henri. "Au sujet d'une circulaire

the transformation of the relationship between French society and the remembrance of the painful episode of the Vichy regime. 17

First, I established that-contrary to what supporters of the gentle extermination thesis firmly claimed-the psychiatric corporation did not try to conceal the facts. The subject of the deaths of 45,000 mentally ill people due to starvation in French psychiatric hospitals under Nazi occupation and the Vichy regime has never been a taboo issue. On the contrary, the reference to this tragedy was always part of the strategy developed by communist and left Christian psychiatrists soon after the liberation, in particular within the framework of the Union of Mental Hospital Physicians, founded in May 1945¹⁸.

At that time the aim was to take advantage of the guilty conscience provoked by remembrance of the tragic wartime fate of mentally ill people in order to pressure the government into taking concrete measures to improve conditions in psychiatric hospitals and to promote the reform of psychiatric care in accordance with the demands of some progressive psychiatrists in the thirties. To reach this goal, some radical psychiatrists — most of them communists such as Lucien Bonnafé, Louis Le Guillant or Henri Wallon — maintained that mentally ill people who had died of hunger in French psychiatric institutions had suffered the same fate as German psychiatric patients murdered by the Nazi regime.

¹⁷ See Rousso, Henry. Le syndrome de Vichy, Paris: Seuil 1987 (2nd edition 1990); idem, La hantise du passé, Paris: Textuel, 1998; Conan, Rousso, 1994/1996; Wieviorka, 2010, and Laborie, Pierre. Le chagrin et le venin? La France sous l'Occupation, mémoire et idées reçues, Paris: Bayard 2011.

¹⁸ See for example the special issue of the prestigious journal *Esprit* published in December 1952 under the title "The misery of psychiatry".

During the seventies, remembrance of the starvation that caused the death of so many mentally ill people had been revisited by the anti-psychiatrists, particularly communists or extreme leftists. The most hard-hitting intervention on this topic is probably the scathing book by the psychiatrist Roger Gentis, published in 1970 under the title "Les murs de l'asile" (The walls of asylum). 19 Gentis was involved in the "therapeutic community" movement and in the promotion of the "politique de secteur" (sectoral policy) implemented in France at the beginning of the seventies, which consisted of developing outpatient care so as to avoid excluding mentally ill patients from society. In this highly provocative text, Gentis declared that societal attitudes towards mental illness had not changed since 1945. Therefore, in his opinion, the scenario that had led to the extermination of mentally ill and disabled people by the National Socialists during the Second World War could happen again even in France, where-he argued-such radical policies are not inconceivable at all.

Max Lafont's 1987 work is in line with this militant process developed as early as the end of the war. Born in 1950, Lafont belongs to a generation that did not experience the war and the german Occupation. Although his corpus of sources is poor and his methodology very questionable, his study aims to clarify the conditions in which massive numbers of confined mentally ill people died of hunger under German occupation. But it must be read as a radical work. At that time, it was no longer urgent to obtain a reform of psychiatric care. Rather, the motive was to denounce, in a context of economic crisis, the financial restrictions that imperil the sector policy and the therapeutic innovations that had been initiated in this framework through the end of the sixties. In the second edition of his book, Lafont also castigates the closing of beds in psychiatric hospitals, a move that had led to

¹⁹ Gentis, Roger. Les murs de l'asile, Paris: François Maspero, 1970.

the neglect of numerous patients with no choice but to live on the streets or land in prison.

The media impact of Lafont's book cannot be explained by a new sensibility to the condition of psychiatric patients but rather by a change in the memorial configuration. During the seventies, the French public rediscovered the scale of Vichy crimes, in particular its involvement in the deportation and extermination of the Jews. 20 Lafont's book came out during the trial of Klaus Barbie, head of the local Gestapo in Lyon, who was responsible for the deportation of thousands of Jews and for the deaths of numerous resistance fighters. 21 Above all, many associations campaigned in the name of the "duty of memory" for recognition of all crimes perpetrated by a regime that had called for the exclusion of entire segments of the population. In addition, through the mid-nineties, the tragic fate of mentally ill people under the Vichy regime met with a great response due to the fierce debate about the 1912 Nobel Prize winner for Medicine, Alexis Carrel, and his eugenic ideas. 22 By stating the indisputable connection between Carrel's ideas and the massive mortality described as a mass murder of patients confined in psychiatric institutions under the Vichy regime - and by calling on the French government to accept its responsibility for this tragedy, the

²⁰ See Rousso, 1987/1990, Wieviorka, 2010, and Laborie, 2011.

 $^{^{21}}$ This trial, which was filmed, started on May 11, 1987 in Lyon. On July 4, 1987, Klaus Barbie was sentenced to life imprisonment for crimes against humanity.

Alexis Carrel, Nobel Prize winner for medicine in 1912, spent his entire career at the Roc- kefeller Institute for Medical Research in New York. In 1941 he decided to return to France, and Marshall PØtain appointed him head of the French Foundation for the Study of Human Problems (also known as the Carrel Foundation) which had been set up to regenerate the country after the defeat of 1940. See Alain Drouard, Une inconnue des sciences sociales: La fondatio ????

campaigners for changing the names of French streets named after Alexis Carrel ²³ affirmed they could prove indisputably the Vichy regime's eugenic character, a point long contested by historians ²⁴. Thus, they created a perverse competition between Vichy and the Nazi regime. If Vichy can be held responsible for thousands of deaths among mentally ill patients, this regime must in many ways resemble Hitler's. That is also evidenced by speeches delivered at remembrance ceremonies dedicated to wartime victims of starvation in French psychiatric institutions.²⁵

It was shown that the starvation that decimated the psychiatric hospital population between 1940 and 1945 was largely due to the fact that most of those confined in such institutions were deprived of social contacts and were not aided by solidarity movements dedicated to other vulnerable segments of the French population, such as political prisoners or people interned in camps. They could not count on help from relatives because they often had lost contact with them. Nor could these patients count on the help of charitable organizations like the French Red Cross or the Secours National, with which all French charitable associations had to be affiliated, because they were not considered to be war victims -all of these associations, however, were overwhelmed by numbers of people in need 26. Thus their social transparency or invisibility must be considered as a factor influencing their fate - a point that raises the delicate question of society's approach to mental illness.

The action group for changing the name of French streets named after Alexis Carrel was formed in 1993.

 $^{^{24}}$ See Taguieff, 1994, Carol, 1995, and Drouard, 1999.

²⁵ For instance, the ceremony held on January 5, 1995 at the psychiatric hospital of Stephansfeld-Brumath to commemorate the 49 mentally ill patients of Alsace exterminated in the German asylum of Hadamar or the ceremony held on April 7, 1999 to unveil a monument dedicated to the patients who died of hunger in the psychiatric hospital of Clermont-de-l'Oise.

²⁶ See Jean-Pierre Le Crom. Au secours Maréchal! L'instrumentalisation de l'humanitaire (1940-1945), Paris: Presses universitaires de France, 2013.

The instrumentalization of history by groups that may defend contradictory causes is hardly surprising to historians. Yet they feel very uncomfortable when historical reality is simply dismissed or even falsified in the name of a cause — even if this cause is respectable. They are particularly appalled when this falsification leads to banalizing or relativizing of an actual genocide, namely the "euthanasia" of psychiatric patients by the Nazi regime. The aim of examining the reality of the extermination of psychiatric patients by the Vichy regime is of course not to minimize the regime's criminal nature, which has been highlighted by numerous other historical studies. Rather, the aim is to consider the complexity of this regime and of this period. The Vichy regime contributed to the deportation of the Jews to the extermination camps, yet it did not eliminate psychiatric patients by food deprivation.

It should be added that, contrary to what many seem to think, the fact that mentally ill people who died of starvation in French institutions during the Second World War were not murdered does in no way turn them into inferior victims. These victims, as other civil war victims like victims of bombings, deserve their place in the collective memory comme en témoignent deux documentaires très émouvants réalisés en 2018²⁷. C'est ce qu'a signifié French president François Hollande in December 2016 en inaugurant a stele dedicated to the memory of the disabled victims of the second world war in France, at the square in front of the Trocadéro in Paris. Reste que, bien que tardive, cette consécration mémorielle, réclamée par un collectif hétéroclite de militants de la cause des

²⁷ L'hécatombe des fous d'Elise Rouard et *La faim des fous* de Frank Seuret. Notons qu'aucune TV n'a accepté de diffuser ces deux documentaires qui ont cependant été présentés dans un certain nombre de lieux et ont eu un écho dans la presse écrite.

handicapés²⁸, n'a pas mis entièrement fin à une polémique qui, bien que très atténuée, peut à tout moment resurgir²⁹.

Jean-Marc Maillet and Charles Gardou, "Pour un mémorial en hommage aux personnes handicapées victimes du régime nazi et de Vichy". Petition hosted on the webside Change.org: http://www.change.org/p/pour-un-mémorial-en-hommage-aux-personnes-handicapées-victimes-du-régime-nazi-et-de-vichy (19 August 2014).

²⁹ Compte tenu du caractère polémique du sujet, l'Elysée a, en 2015, commandé un rapport à l'historien Jean-Pierre Azéma. Ce rapport ayant été jugé diffamatoire par Armand Ajzenberg, ce dernier a porté plainte. L'affaire est en cours de jugement. Notons qu'en 2012, Armand Ajzenberg avait publié un pamphlet dans lequel il s'en prenait frontalement à mon travail sans apporter aucun argument ou matériau nouveaux. Le livre n'a eu aucun écho dans le milieu psychiatrique ni dans les medias. Ajzenberg, Armand. L'abandon à la mort… de 76 000 fous par le Régime de Vichy, Paris, L'Harmattan, 2012.