



UNIVERSITY OF LEEDS

This is a repository copy of *A hidden history: a survey of the teaching of eugenics in health, social care and pedagogical education and training courses in Europe*.

White Rose Research Online URL for this paper:
<http://eprints.whiterose.ac.uk/92243/>

Version: Accepted Version

Article:

Atherton, H and Steels, S (2016) A hidden history: a survey of the teaching of eugenics in health, social care and pedagogical education and training courses in Europe. *Journal of Intellectual Disabilities*, 20 (4). pp. 371-385. ISSN 1744-6295

<https://doi.org/10.1177/1744629515619253>

(c) The Author(s), 2015.

Reuse

Unless indicated otherwise, fulltext items are protected by copyright with all rights reserved. The copyright exception in section 29 of the Copyright, Designs and Patents Act 1988 allows the making of a single copy solely for the purpose of non-commercial research or private study within the limits of fair dealing. The publisher or other rights-holder may allow further reproduction and re-use of this version - refer to the White Rose Research Online record for this item. Where records identify the publisher as the copyright holder, users can verify any specific terms of use on the publisher's website.

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



eprints@whiterose.ac.uk
<https://eprints.whiterose.ac.uk/>

Title: A hidden history: a survey of the teaching of eugenics in health, social care and pedagogical education and training courses in Europe.

Author: Dr HL Atherton, School of Healthcare, University of Leeds
Email: h.l.atherton@leeds.ac.uk, Tel: 0113- 3437562

Co-Author: Dr SL Steels, School of Healthcare, University of Leeds
Email: S.L.Steels@leeds.ac.uk, Tel: 0113 3431443

Acknowledgements:

Dr Kathrin Braun, University of Hannover, Germany

Caroline Dalton O'Connor, University College Cork, Ireland

Gerhart Hofer, Kathi-Lampert-Schule für Sozialbetreuungsberufe, Götzis, Austria

Thomas Hülse, Fachschule für Heilerziehung, Alsterdorf, Germany

Ole-Martin Hitland, Høgskulen I Sogn og Fjordane, Sogndal, Norway

Christophe Schindegger, Kathi-Lampert-Schule für Sozialbetreuungsberufe, Götzis, Austria

Tor Rynning Torp, Universitets-OG Høgskolerådet, Norway

Peter Zaagman, Oxford Brookes University, UK

Abstract

Knowledge and understanding of how eugenics has historically affected the lives of people with intellectual disabilities is vital if professionals are to mount an effective defence against its contemporary influences. An online survey of European providers of health, social care and pedagogical education and training courses was undertaken to find out how the history of eugenics is taught to those wishing to work in services for people with intellectual disabilities. 206 educational providers were contacted with a response rate of 35.9% (n=74). Findings showed that the majority of educational providers recognise the importance of including the history of eugenics in their courses although fewer feel confident that it is sufficiently well covered to prepare future professionals for their role as protector. Course content differs on both the emphasis given to the different components of this history, time dedicated to its delivery and the extent to which it is used to inform legal and ethical debate. Specific recommendations for developing the way in which this subject area is taught are outlined.

Keywords: history of eugenics; education and training; intellectual disability professionals

Introduction

Throughout the late 19th and early decades of the 20th century countries across the world were occupied with questions about the physical, intellectual and moral health of their populations. It was widely conceived that disproportionate levels of breeding amongst those regarded as the 'unfit' (Carlson, 2001) was not facilitating the advancement of societies but contrarily bringing about their degeneration (Noack and Fangerau, 2007). The mentally deficient¹, and in particular the subcategory of the feeble-minded, were one such group whose existence was perceived to pose a particular threat. Varyingly defined as menaces, a burden on the state or in some cases a life unworthy of life (Binding and Hoche, 2012) measures were introduced to control their existence. This came in the form of eugenics, a term first defined by Sir Francis Galton to mean:

“the science which deals with all influences that improve the inborn qualities of a race; also with those that develop them to the utmost advantage” (Galton, 1904: 1)

In German speaking countries the term 'racial hygiene' (*rassenhygiene*), originally coined by Alfred Ploetz in 1895 (Kessler, 2007), was considered to be its nomenclatural equivalent. During the first decades of the 20th century a range of disparate negative eugenic controls were introduced across countries to curb the existence of the mentally deficient. In 1934 Norway legalised the voluntary sterilization of this group although with the German occupation of the country this became a compulsory requirement under a 1942 law (Haave, 2007). Although

¹ By today's standards, some of the terminology previously employed to describe those with intellectual disabilities is derogatory. This said, the authors have chosen to include such terms in this current paper as they constitute an important part of the social history of this group.

sterilisation measures were debated they were never legalised in the UK; mental defects were instead subject to segregation in institutions, guardianship or supervision orders in accordance with the requirements of the 1913 Mental Deficiency Act (Walmsley and Rolph, 2001). In Ireland strong opposition from the Catholic Church meant that negative eugenics was never to become a key feature of this country's history (Jones, 1992). Despite this, the practice of segregating those deemed to present a risk to society was still undertaken under the jurisdiction of the church (Sweeney, 2010). Positive eugenic measures that sought to encourage judicious matings were more likely to receive support in Catholic countries such as Austria where a marriage counselling service had been established in Vienna in 1922 for this purpose (Löscher, 2007). This was to change with the 1938 *Anschluss* when the full force of Germany's own destructive racial hygiene policies were extended to the country. These had included a 1933 act that legalised the compulsory sterilisation of those with a range of physical and mental conditions and a 1935 act that prevented the marriage of those who were deemed carriers of hereditary disease (Friedlander, 1995: 23). It culminated in the mass murder of thousands of disabled children and adults in two killing programmes the first of which ran between 1939 and 1945 and the second, the T-4 program, between 1940-1941 although it is known that the decentralised killing of adults continued until 1945 (Kessler, 2007)

The success of eugenics depended on the active involvement of health and social care professionals. What precipitated the involvement of this group in activities that essentially represented the antithesis of their caring role has since been the focus of historical investigation (Weindling, 2006; Benedict and Shields, 2014 as examples). Such research reveals a multiplicity of causal factors among which were stoic commitment to current social and political ideology and the need to demonstrate duty and obedience in the face of orders emanating from

higher authorities. Today, the role of health and social care professionals continues to be shaped by current social and political trends leading some to conclude that such groups could again become key players in actions that stand to threaten the human rights of those in their care (Holmes, 2006).

In societies where people with intellectual disabilities are still regarded as different from their non-disabled peers and less socially desirable than other disabled groups (Scior, 2011), where there remains a belief amongst some that they should not be afforded the right to engage in sexual relationships or parent children (National Disability Authority, 2012) and where the economic cost of maintaining their lives continues to be debated (Giubilini and Minerva, 2011), the risk from eugenics remains. Yet a eugenic threat is not always transparent or easily detected as it can be hidden beneath the alleged promotion of key ethical values such as autonomy, beneficence and non-maleficence. For example, whilst on going developments in the field of human genetics promise prospective parents the chance to make informed decisions about any future offspring it simultaneously facilitates the opportunity to prevent the birth of those with disabilities (Miller and Levine, 2013). Whilst the widespread use of 'Do not resuscitate notices' (DNR's) aims to limit suffering that people have to endure at their end of their lives, their remit can be discriminatorily applied to terminate those whose lives are believed by others to lack inherent worth (Mencap, 2012). Significantly, McCarthy (2011) purports that not all applications for contraception made on behalf of those with intellectual disabilities by third parties will have their best interests at heart. Moreover, negative attitudes and stereotypes about the reproduction amongst this group may influence the decisions made (McCarthy, 2009). It could be concluded therefore that the eugenic threat posed to people with intellectual disabilities is not from specific interventions and procedures per se but the value ascribed to this

group by those advocating or implementing them. In recent times, a judge in the UK ordered a man with intellectual disabilities to undergo a non-therapeutic sterilisation as the weight of presented evidence suggested that this procedure would significantly improve the quality of his life (Ward, 2013). Mencap, a leading UK charity for people with intellectual disabilities, welcomed the way in which the case had been managed, in particular the detailed weighing up of evidence that had led to what they perceived as a balanced decision (Ward, 2013). Yet the process of non-transparent decision-making coupled with what Bartoszko et al (2012) conceives to be a lack of critical reflection is what may make a eugenic threat difficult to identify. Whilst the potential of eugenics could carry a risk for any devalued group in society, by the very nature of their condition people with intellectual disabilities may have greater difficulty than others in both detecting such a threat and in formulating an effective defence; therefore this role must be assumed, either in full or in part, by the people around them and this includes those working in services for this group.

The professional response to the danger of contemporary eugenics is primarily two-fold. First, is to detect any situation that appears to devalue an individual thus making them a vulnerable target (Benedict, 2003). Second, is to be able to mount an effective campaign against potential threats (Mostert, 2002: 168). Both of these demands that professionals do not submit readily to decisions made about the people in their care; they must instead adopt a critical, questioning approach that Benedict et al (2009: 515) define as “healthy scepticism”. They must also be prepared to speak out as and when necessary (Shanley, 1998) and as importantly openly acknowledge any damaging attitudes and beliefs that they themselves may hold (Atherton, 2004). A knowledge and understanding of history is central to being successful in this role, particularly in detecting ethical challenges that emanate from the threat of contemporary

eugenic practices (Wilson, 2013). From a pedagogical perspective, a study of history also provides a safe haven from which future professionals can debate historical and contemporary moral issues (Madsen, 2008). In addition to understanding the specific social, political and economic conditions that precipitated a rise in popularity of eugenics, by discussing the ethical failings of their predecessors, professionals are better placed to detect potential areas of 'ethical vulnerability' within contemporary practice (Lagerwey, 2010). Whilst history may not provide ready-made answers it can support professionals to pose key questions (Rothman, 1975: 24). This said, there is currently little known about how, and indeed if, the history of eugenics is taught in education and training courses that specifically prepare individuals to work in services for people with intellectual disabilities. These constitute an important group of professionals as the nature of their work in supporting people with intellectual disabilities in their day-to-day lives means that they are best placed to help them defend their human rights.

Given the prominence of eugenics in the UK, Norway, Germany and Austria, a focus on the teaching of eugenics within education and training courses preparing individuals to work in services for people with intellectual disabilities in these countries was deemed highly relevant. Although Ireland's relationship with eugenics was less well established, it would nevertheless provide an interesting comparator.

The structure of this paper is as follows. First, an overview of the methods employed for this study is presented, including the development of the data collection tool, sample strategy and distribution of the survey. Then the results are presented. Next, a discussion of the results with

respect to the current teaching of eugenics to those wishing to work in services for people with intellectual disabilities. This is followed by our conclusions and recommendations.

Method

Development of data collection tool

Using software written and hosted by the Swiss company *Onlineumfragen.com* an online questionnaire was developed to gather both quantitative and qualitative data in line with the aim of the study. Despite low response rates being characteristic of online surveys (Manfreda et al, 2008) the geographical disparity of the population meant that it was still deemed an appropriate method of data collection. The questionnaire comprised 14 open and closed questions split across three sections (see appendix 1). Section A collected demographic information about the respondent, their country of origin, place of work and the types of education and training courses their organisation delivered to those wishing to work in services for people with intellectual disabilities. In Section B information about the teaching of eugenics in relation to people with intellectual disabilities from both a historical and contemporary perspective was sought. This included questions about content, delivery and timing within specific courses. Section C concerned itself with establishing the opinion of respondents as to the importance of teaching the history of eugenics to contemporary health and social care professionals.

The questionnaire was written in English and then translated into German by a member of the research team. It was then piloted with potential respondents from both English and German speaking countries to ensure that questions were relevant, clear, logically ordered and answerable with the information they would typically have at their disposal. This resulted in

some amendments to the questionnaire to improve comprehension. This included adopting the phrase 'NS-Euthanasia' in the German version of the questionnaire instead of the term 'genocide' in order to ensure cultural relevance. Norwegian respondents agreed to answer the English version of the questionnaire.

Sampling

The specific aim of the study resulted in employing a purposive sampling strategy. Eligibility criterion for inclusion in the study was the provision of an education and training course preparing individuals to work in services for those with intellectual disabilities. The range of possible courses that this included can be found in Table 1. Contact details for the persons within each of the educational providers best placed to answer the questionnaire were sought through professional networks and online course information.

A total of 206 educational providers from across the five countries that met this criterion were approached to take part. This included 36 universities from the UK that provided either learning disability nurse education or learning disability nurse education and social work (n= 36); seven universities and colleges in Ireland providing intellectual disability nurse education; all Høgskolen and university colleges in Norway providing Vernepleier education (n=12); 57 schools in Austria providing either Diplom-Sozialbetreuer and/or Fach-Sozialbetreuer; finally 94 schools comprising the membership of the German organisation *Bundesarbeitsgemeinschaft der Ausbildungsstätten für Heilerziehungspflege und Heilerziehung in Deutschland* (BAG-HEP) delivering Heilerziehungspflege and/or Heilerziehungshelfer

Country	Courses	Duration in years	Educational level	EQF-level	Professional profile
Austria	Diplom-Sozialbetreuer	3	Upper secondary school	6 - non-bachelor	Pedagogic, social and health care
	Fach-Sozialbetreuer	2		5	
Germany	Heilerziehungspflege	3	Post-secondary school (not university)	6 – non-bachelor	Pedagogic, social and health care
	Heilerziehungshelfer	1-3		4	
Ireland	Intellectual disability nursing	4	University	6 – bachelor	Nursing
Norway	Vernepleier	3	University	6 – bachelor	Health and social care, pedagogic
UK	Learning disability nursing	3	University	6 – (mixed group diploma and bachelor	Nursing
	Learning disability nursing and social work	3	University	6 – bachelor	Nursing and social work

Table 1: Courses of education and training comprising the sample

Distribution of questionnaire

Ethical approval to conduct the study was obtained from the School of Healthcare Research Ethics Committee at the University of Leeds (SHREC/RP/276). As this was an online survey being conducted and administered by a U.K institution, ethical approval from each individual country was not required.

An invitation to participate in the study was sent via an email, attached to which was a participant information sheet outlining the nature and purpose of the study. The e-mail also contained a hyperlink and password to access the online questionnaire and specific details as to how to answer it. Participants were made aware that implied informed consent for inclusion in the study would be assumed if they submitted a completed questionnaire. In following ethical guidelines, respondents were not required to identify themselves on the questionnaire unless they chose to do so thus respecting their right to anonymity. Reminder e-mails re-emphasising the importance of the respondents' contribution were sent at four weeks and then six weeks after the date of the initial e-mail. The aim of this was to optimise response rate thereby limiting the potential for non-response bias.

Data analysis

Quantitative data was exported from Onlineumfragen.com and analysed using IBM SPSS Statistics Package Version 21 and Stata IC Version 13. Fisher's Exact was used as a global test to compare proportions across all countries. Where significant differences were found pairwise comparisons were conducted using z-tests. Accepted level of significance was $P \leq 0.05$.

Results

The survey sought to explore which components of the history of eugenics providers included in their courses (i.e institutionalisation, involuntary sterilisation, marriage laws and genocide). Overall, 74 (35.9%) educational providers responded to the online survey. Response rates after screening and cleaning the data set are shown in Table 2. The results from the study are presented in the following order: areas of eugenics taught; types of perspectives taught (local vs

global); considering the broader context of teaching the history of eugenics; time allocated for teaching and support for the teaching of eugenics. All results are self-reported unless otherwise stated.

	Number of educational providers invited to participate	Number of educational providers responding	% Response rate
Austria	57	13	22.8%
Germany	94	24	25.5%
UK	36	27	75%
Ireland	7	4	57.1%
Norway	12	6	50%
Total	206	74	35.9%

Table 2: Response rates after screening and cleaning the data set

Areas of eugenics taught

Responses showed 86.3% of all educational providers covered the subject of institutionalisation. For the UK and Ireland this figure was 100%. None of the differences between countries were statistically significant however the UK was significantly more likely to teach about this subject than either marriage laws (47.6%), ($p \leq 0.001$), involuntary sterilisation (80.8%) ($p \leq 0.018$) or genocide (56%) ($p \leq 0.001$).

With specific reference to course content, the history of involuntary sterilisation was covered by 80.8% of all educational providers with Germany significantly more likely than Norway to include it in their courses (91.7% versus 33.3% $p \leq 0.023$). Marriage laws were much less frequently covered with only 52.2% of the total number surveyed indicating their inclusion. No significant differences existed between countries however UK providers were significantly less likely to teach about marriage laws (47.6%) than involuntary sterilisation (80.8%) ($p \leq 0.017$). Germany was significantly less likely to teach about marriage laws (52.2%) than either involuntary sterilisation (91.7%) ($p \leq 0.003$) or genocide (91.7%) ($p \leq 0.003$).

Genocide (NS-Euthanasia) was included in the courses of 69.4% of educational providers. For Germany this figure was 91.7%. A significant difference existed between countries and was attributed to Germany being more likely to teach about this subject area than either the UK or Norway ($p \leq 0.001$).

Insert Figure 1: Percentage number of educational providers who include key components of the history of eugenics in their courses.

	Austria	Germany	UK	Eire	Norway	Total	
Institutionalisation	Yes	11 84.6%	19 79.2%	26 100%	4 100%	3 50%	59 80.8%
	No	2 15.4%	3 12.5%	0	0	2 33.3%	13 17.8%
	Don't know	0	2 8.3%	0	0	1 16.7%	1 1.4%
	Total	13 100%	24 100%	26 100%	4 100%	6 100%	73 100%
Involuntary sterilisation	Yes	11 84.6%	22 91.7%	21 80.8%	3 75%	2 33.3%	59 80.8%
	No	1 7.7%	2 8.3%	5 19.2%	1 25%	4 66.7%	13 17.8%
	Don't know	1 7.7%	0	0	0	0	1 1.4%
	Total	13 100%	24 100%	26 100%	4 100%	6 100%	73 100%
Marriage Laws	Yes	8 61.5%	12 52.2%	10 47.6%	4 100%	1 16.7%	35 52.2%
	No	2 15.4%	8 34.8%	9 42.9%	0	5 83.3%	24 35.8%
	Don't know	3 23.1%	3 13.0%	2 9.5%	0	0	8 11.9%
	Total	13 100%	23 100%	21 100%	4 100%	6 100%	67 100%
Genocide	Yes	11 84.6%	22 91.7%	14 56%	4 100%	1 16.7%	50 69.4%
	No	1 7.7%	2 8.3%	11 44%	0	5 83.3%	21 29.2%
	Don't know	1 7.7%	0	0	0	0	1 1.4%
	Total	13 100%	24 100%	25 100%	4 100%	6 100%	72 100%

Table 3: Number of educational providers teaching the different areas of eugenics

Types of perspectives taught: local vs global

In considering the extent to which teaching covered the history of eugenics at the local², national³ and international⁴ level, the UK appeared more likely than any other country to teach the history of eugenics from an international perspective (see Table 4). By comparison

² A local perspective is defined as teaching material including (but not limited to) law, policies and history of eugenics at a local level e.g. specific to a city, town, village or region (e.g. West Rhine or Yorkshire) but does not include national or international perspectives.

³ A national perspective is defined as teaching material including (but not limited to) law, policies and history of eugenics at a national level but not including local or international perspectives.

⁴ An international perspective is defined as including teaching material from other countries. This can include (but not limited to) laws, policies and history of eugenics from countries both in Europe and beyond. This does not include national or local perspectives.

Germany was most likely to teach it from either a local or national perspective (see Table 4) with two educational providers mentioning in the qualitative responses the historical role their own schools had played in the process of eugenics.

	Local	National	International
Austria	4	1	4
Germany	5	9	1
UK	3	6	9
Ireland	0	0	0
Norway	0	1	0

Table 4: Number of educational providers indicating whether the history of eugenics was taught from a local, national or international perspective (n=34) (multiple response)

Considering the broader context of teaching the history of eugenics

In considering the history of eugenics in relation to the broader context of learning disability, responses showed that eugenics was often taught within the context of the wider history of intellectual disabilities including developments in service provision. U.K educational providers in particular reported it to be positioned within foundation or introductory modules to a specific field of practice (e.g. learning disability nursing). In comparison, providers in Germany and Austria were more likely to report it being taught within the context of a range of academic subject areas including ethics, law, history, political education and religion.

For all countries the history of eugenics was predominantly 'sometimes' used to inform debate around contemporary legal and ethical issues (e.g. prenatal testing and abortion; sexuality and relationships including marriage; parenting and euthanasia [denial of life saving treatment]) as opposed to 'always' with only a very small number of educational providers saying that it would never be used (see Table 5). None of the participating countries identified a national directive that made it compulsory for courses to cover this subject area.

Time allocated for teaching

Teaching time dedicated in courses to the history of eugenics ranged from 30 minutes to more than 20 hours. A variety of educational resources were cited as being used to inform its delivery and included books, articles, films and documentaries. Specific websites such as the UK's *Unlocking the Past* based upon the experiences of those working and living at the Royal Albert Hospital, Lancaster and Austria's '*Gedenkstaettesteinhof*' that explores the fate of those at Steinhof Hospital, Vienna were also mentioned. Many of these resources focused on the national experience. In Germany and Austria excursions (field trips) appeared to play an important role in the education of students but this pedagogical approach was not mirrored in the other participating countries.

	Prenatal testing and abortion			Sexuality and relationships including marriage			Parenting			Euthanasia (denial of life saving treatment)		
	S	A	N	S	A	N	S	A	N	S	A	N
Austria	4 (9)	4	1	4 (8)	3	1	4 (8)	4	0	5 (9)	4	0
Germany	9 (19)	10	0	8 (19)	10	1	11 (18)	7	0	8 (17)	8	1
UK	9 (18)	8	1	11 (21)	8	2	13 (20)	6	1	11 (16)	4	1
Ireland	3 (3)	0	0	2 (4)	1	1	2 (4)	1	1	2 (3)	0	1
Norway	1 (3)	0	2	3 (5)	0	2	2 (3)	0	1	1 (2)	0	1

Table 5: Number of educational providers indicating the extent to which the history of eugenics was used to inform debate around contemporary legal and ethical issues (S=sometimes, A= always, N=never). Numbers in brackets = total number of respondents answering the question.

Support for the teaching of eugenics

Of 58 educational providers, 57 (98.3%) either strongly agreed or agreed that contemporary health and social professionals working with people with intellectual disabilities should have knowledge and understanding of how eugenics has historically influenced the treatment of this group. A 100% (n=58) believed that it would help professionals protect their human and civil rights in the future. In comparison fewer respondents believed that their own courses covered the subject of eugenics and its related issues sufficiently well to enable them to do this (n= 39 67.2%). Of 57 educational providers, 55 (96.5%) agreed that a specifically designed online educational programme about eugenics and people with intellectual disabilities would be a useful resource to support current teaching in this area.

Summary of results

The results of the survey found that the history of eugenics was taught across all countries taking part in the study. Variations in the areas of eugenics covered between and within countries were also noted. In particular the history of involuntary sterilisation was more likely to be covered in Germany compared to the U.K, Ireland, Norway and Austria. Furthermore, Germany was more likely to teach the subject of genocide. In considering the broader context of eugenics, the U.K was found to adopt a more international perspective. In comparison, German and Austrian participants reported the integration of eugenics in a range of academic subject areas such as ethics, law and history. Overall, participants supported the teaching of eugenics in health and social care profession with 96.5% of participants supporting the creation of an online resource to support teaching in this area.

Discussion

When viewed through the prism of contemporary human and civil rights, the implementation of eugenic programmes aimed at controlling and ultimately preventing the existence of people with intellectual disabilities is an unpleasant period in the social and political history of many western countries. It has been suggested that some countries appear to have been unwilling to publically confront this past, thus leaving contemporary society largely ill informed of its existence (Brave and Sylva, 2007). For example, in the years following the atrocities committed in Austria and Germany, subsequent governments did little to bring the perpetrators of the killings of those with disabilities to justice thus allowing many to quietly assimilate themselves back into ordinary personal and professional lives (Thomas et al, 2006). Indeed, for many

decades after the war, there were those in the medical communities of these countries who refused to accept that any wrongdoing had taken place (Schneider, 2011). Furthermore, few victims of eugenic programmes have ever received any form of compensation despite the life changing nature of the treatment that they had endured (Braun et al, 2014), with proper national commemoration of their lives a largely recent affair (Eddy, 2014).

This lack of public acknowledgement has led some to argue that the history of eugenics is often hidden from view and that in some cases there is evidence of a very deliberate attempt to forget its legacy (Kaelber, 2012). Moreover, it has been suggested that there has been a tendency for countries to blame the Nazi state thus conveniently side stepping the issue of their own accountability (Rose cited in Kerr and Shakespeare, 2002: 46).

The state of collective amnesia alluded to by Kaelber (2012) appears not to be reflected in the views and opinions of providers in this current study. Contrary to the suggestion that contemporary professionals may be reluctant to see the relevance of past events (Lagerwey, 1999), the findings of this study suggest that educational providers recognise the importance of this history, particularly in terms of preparing students for the future role they will play in protecting the human and civil rights of people with intellectual disabilities. This is important as by being ultimately in charge of what is taught and how it is taught educators are considered significant gateways to knowledge and understanding (Adler, 2008). This positive attitude to the teaching of the history of eugenics is particularly important given that none of the participating countries had a national directive that makes it a compulsory subject area for courses to cover thus leaving its inclusion or exclusion to the discretion of individual educational providers. Furthermore 67.2% of educational providers felt confident that their own institutions covered the subject sufficiently well to prepare their students for this role of protector although this figure also suggests that further teaching in this area could be undertaken.

Whilst a lack of clear educational guidelines for the teaching of the history of eugenics makes it difficult to establish what would constitute the ideal, it could be argued that a transnational overview is required if individuals are to fully appreciate the many different guises of eugenics. However, the findings of this current study indicate that not all educational institutions attempt to provide their students with either a global perspective of eugenics or indeed a complete account of it in terms of their own national history (see Tables 3 and 4). This was noticeable in the case of the low response from Norway (n=1) indicating that their courses included reference to the practice of involuntary sterilisation despite this having been actively employed during the Nazi Occupation (Haave, 2007). Similarly, whilst high numbers of respondents from both Austria (84.6%) and Germany (91.7%) confirmed the inclusion of teaching about NS-Euthanasia in their courses fewer reported the inclusion of content relating to the marriage law that had pre-dated the killing of patients (see Figure 1 and Table 3)

Though it is unclear from this study why so few Norwegian educational institutions choose not to include a history of involuntary sterilisation in their teaching (33%), it has been suggested that there remains a widespread belief amongst Scandinavian countries that eugenics was something experienced by countries other than themselves (Tydén, 2010). Such a denial may have implications for how and if the subject of eugenics is taught. Furthermore, in the absence of a statutory requirement to do so, the teaching of eugenics may become the province of the few who have a personal interest in the area.

Results from our study showed that in the case of Germany and Austria there was more emphasis on the subject of NS-Euthanasia (Germany, 91.7%; Austria, 84.6%). A rationale for this could be explained by reflecting back on the violence of the methods used on disabled

people and the commitment on the part of these countries that it should never be repeated (Bell, 2012). However, this bias may result in a rather skewed account of the history of eugenics and can potentially deny learners the opportunity to consider the many practical manifestations of its principles.

This is also a problem when there is more focus upon the local and/ or national experience rather than providing a transnational perspective of eugenics. This was shown in the study results from the U.K when comparing the numbers of those teaching about institutionalisation as compared to involuntary sterilisation, marriage laws and genocide (see Table 3). Focusing the attention of students on national history can undoubtedly facilitate identification with the past (Barton and Levstik, 2004). However, there is the potential that limiting the teaching of eugenics in this way can lower the sensitivity of contemporary professionals to both detect and respond to eugenic threats that fall outside the experience of their own country. Being able to link past events to contemporary moral and ethical issues is crucial if professionals are to recognise and effectively respond to contemporary eugenic threats (Baroszko et al, 2012).

Developing a more internationalised approach to the teaching of eugenics is also dependent upon educators actively utilising literature from other countries. However, the study results would suggest that this is limited. Again, the reasons for this are unclear but a study by Montgomery et al. (2001) suggest that barriers might include a lack of awareness of the existence of specific source material and the language in which it is written.

The study also found a variation in the teaching hours dedicated to the subject. This might suggest that some education and training providers attach more importance to the subject of eugenics than others although it could be equally argued that the teaching of its history might prove difficult for some to justify when there is insufficient time to even address contemporary issues (Ion and Beer, 2003). To address this issue, an increasing number of bilingual websites such as Austria's '*Gedenkstaettesteinhof*' are being developed which also draw together key resources on a particular subject. However, their focus tends to only reflect the local and/or national experience at the expense of presenting eugenics from a broader, international perspective. Moreover, many of these websites lack specific learning activities that would promote active engagement with the presented material in terms of responding to issues arising in contemporary practice; both of these issues could be addressed by educators collaborating to develop a specifically built online educational resource that could be used to supplement classroom learning.

Study limitations

A number of limitations were noted with this study. The use of a questionnaire reduced the opportunity given to respondents to expand on, clarify, or illustrate their thoughts or feelings (Parahoo, 2006). As such, it is unclear why some respondents felt that deficits relating the history of eugenics existed in their courses or indeed the specific nature of them. In addition, although the response rate to the online questionnaire was good (35.9%), responses to some questions were low and this may affect the external validity of the study. Therefore the results presented in this paper should be interpreted with caution. As purposive sampling was used in

lieu of a sample size calculation, the researchers are aware that this would result in selection bias. Both the length of the online questionnaire plus the design of some of the questions may have contributed to this issue in addition to deterring people from answering all of its relevant parts. This latter issue may also have been compounded by a failure to clearly define some of the terminology employed in the questionnaire that may in turn have led to different interpretations of the requirements of the questions. All of these issues would need to be addressed if the survey was to be replicated. Overall, a number of significant findings were generated that could be usefully translated into specific recommendations for developing the way the history of eugenics is currently taught.

Conclusions and recommendations

The overall aim of this study was to explore how the history of eugenics is currently taught in education and training courses preparing those to work in services for people with intellectual disabilities in UK, Ireland, Norway, Austria and Germany. To achieve this an online questionnaire was developed and administered to educational providers delivering health, social care and pedagogic education and training courses that prepared people to work with those with intellectual disabilities. Results of the survey found that the history of eugenics was taught across all countries who took part in the study. A difference in the areas of eugenics covered between and within countries was found. Overall, educational providers supported the teaching of eugenics, however, a lack of national directive has resulted in different amounts of time dedicated to its delivery and the extent to which it is used to inform current legal and ethical debates.

This study identified a number of recommendations:

1. All courses of education and training preparing to work in services for people with intellectual disabilities should include content relating to the history of eugenics.
2. Educators should draw on a range of local, national and international examples to illustrate how the principles of eugenics have been previously practically implemented.
3. Rather than be confined to individual modules, the history of eugenics should be integrated throughout courses of study.
4. Educators should actively support students to make links between historical aspects of eugenics and contemporary legal and ethical debates emanating from the threat posed by contemporary eugenics.
5. Educators from different countries should collaborate to develop an online educational resource that can be used to support teaching in this subject area.

References

- Adler S (2008) The education of social studies teachers In Levstik LS and Tyson CA (eds) *Handbook of Research in Social Studies Education* Abingdon: Routledge
- Atherton HL (2004) *Eugenic attitudes amongst professionals in learning disability services* PhD, University of Hull
- Barton K and Levstik LS (2004) *Teaching History for the Common Good* Abingdon: Routledge
- Bartoszko A, Solvang PK, Hanisch H (2012) "It did not come with Hitler and did not die with Hitler." The uses of the Holocaust by disability activists in Norway *Vulnerable Groups & Inclusion* <http://dx.doi.org/10.3402/vgi.v3i0.17177>
- Bell B (2012) *Nazi medical experiment victims laid to rest in Vienna* Available at: www.bbc.co.uk/news/world-middle-east-18014848
- Benedict S (2003) *Killing while caring: the nurses of Hadamar* *Issues in Mental Health Nursing*, 24, 59-79
- Benedict S, Shields L, O'Donnell AJ (2009) Children's "Euthanasia" in Nazi Germany *Journal of Pediatric Nursing*, 24, 6, 506-516
- Benedict S and Shield L (eds) (2014) *Nurses and Midwives in Nazi Germany: The "Euthanasia Programs"* London: Routledge
- Binding K and Hoche A (2012) *Allowing the destruction of life unworthy of life: Its measure and form* Greenwood, WI: Policy Intersection Research Center
- Braun K, Herrmann SL, Brekke OA (2014) Sterilization policies, moral rehabilitation and the politics of amends *Critical Policy Studies* 8 (2) 203-226

Brave R and Sylva K (2007) Exhibiting Eugenics: Response and Resistance to a Hidden History
The Public Historian 29 (3) 33-51

Carlson EA (2001) *The Unfit: A History of a Bad Idea* New York: Cold Spring Harbour
Laboratory Press

Eddy M (2014) *Monument Seeks to End Silence on Killings of the Disabled by the Nazis*
Available at: http://www.nytimes.com/2014/09/03/world/europe/monument-seeks-to-end-silence-on-killings-of-the-disabled-by-the-nazis.html?_r=0 Access 7/9/14

Friedlander H (1995) *The Origins of Nazi Genocide* University Chapel Hill: The University of
North Carolina Press

Galton F (1904) Eugenics: Its Definition, Scope and Aims *American Journal of Sociology* Vol X,
1, 1-25

Giubilini A and Minerva F (2012) After-birth abortion: why should the baby live? *Journal of
Medical Ethics* doi: 10.1136/medethics-2001-10-0411

Haave P (2007) Sterilization Under the Swastika: the Case of Norway *International Journal of
Mental Health* 36 (1) 45-57

Holmes C (1996) Nazism and nursing: a comment on relevance *International History of Nursing
Journal* 2 (1) 5-24

Ion RM and Beer MD (2003) Valuing the past: the Importance of an understanding of the history
of psychiatry for healthcare professionals, service users and carers *International Journal of
Mental Health Nursing*, 12, 237-242

Jones G (1992) Eugenics in Ireland: The Belfast Eugenics Society 1911-15 *Irish Historical
Studies* 28 (109) 81-95

Kaelber L (2012) Child Murder in Nazi Germany: The Memory of Nazi Medical Crimes and Commemoration of “Children’s Euthanasia” Victims at two Facilities (Eichberg, Kalmenhof) *Societies, 2, 157-194*

Kerr A and Shakespeare T (2002) *Genetic politics: from eugenics to genome* Cheltenham: New Clarion Press

Kessler K (2007) Physicians and the Nazi Euthanasia Program *International Journal of Mental Health 36 (1) 4-16*

Lagerwey MD (1999) Nursing Ethics at Hadamar *Qualitative Health Research 9 (6) 759-772*

Lagerwey MD (2010) Ethical vulnerabilities in nursing history: Conflicting loyalties and patient as ‘other’ *Nursing Ethics 17 (5) 590-602*

Levine P and Bashford A (2010) Introduction: Eugenics and the Modern World In Bashford A and Levine P (eds) *The Oxford Handbook of the History of Eugenics* Oxford: Oxford University Press

Löscher M (2007) Eugenics and Catholicism in Interwar Austria In: Turda M and Weindling P (eds) *Blood and Homeland: Eugenics and Racial Nationalism in Central and South East Europe 1900-1940* Budapest: Central European University Press

McCarthy M (2011) Prescribing Contraception to Women with Intellectual Disabilities: General Practitioners’ Attitudes and Practices *Sex and Disability, 29, 339-349*

McCarthy M (2009) ‘I have the jab so I can’t be blamed for getting pregnant’: Contraception and women with learning disabilities *Women’s Studies International Forum, 32, 198-208*

Madsen W (2008) Teaching history to nurses: Will this make me a better nurse? *Nurse Education Today, 28, 524-529*

Manfreda KL, Bosnjak M, Berzelak J, Haas I, Verhovar V (2008) Web surveys versus other survey modes: a meta-analysis comparing response rates *International Journal of Market Research* 50 (1) 79-104

Mencap (2012) Man with Down's syndrome sues over DNR Available at: <https://www.mencap.org.uk/news/article/man-down-s-syndrome-sues-over-dnr-order> Retrieved 20.12.14

Miller PS and Levine RL (2013) Avoiding genetic genocide: understanding good intentions and eugenics in the complex dialogue between the medical and disability communities *Genetics in Medicine* 15 (2) 95-102

Mostert MP (2002) Useless Eaters: Disability as Genocidal Marker in Nazi Germany *The Journal of Special Education* 36 (3) 157-170

National Disability Authority (2012) *National Survey of Public Attitudes to Disability in Ireland* Dublin: National Disability Authority

Noack T and Fangerau H (2007) Eugenics, Euthanasia, and Aftermath *International Journal of Mental Health* 36 (1) 112-124

Parahoo K (2006) *Nursing Research: Principles, Process and Issues 2nd edition* Hampshire: Palgrave Macmillan

Rothman D (1975) Behavior Modification in Total Institutions *Hastings Report* 5 (1) 17-24

Schneider F (2011) Psychiatry under National Socialism: Remembrance and Responsibility *European Archives of Psychiatry and Clinical Neuroscience* 261 (Suppl 2) 111-118

Scior K (2011) Public awareness, attitudes and beliefs regarding intellectual disability: A systematic review *Research in Developmental Disabilities* 32 (6) 2164-2182

Shanley E (1998) The international voice of mental health nurses: A deafening silence
Australian and New Zealand Journal of Mental Health Nursing, 7, 46-48

Sweeney JF (2010) Attitudes of Catholic religious orders towards children and adults with an intellectual disability in postcolonial Ireland *Nursing Inquiry* 17 (2) 95-110

Thomas FP, Beres A, Shevell MI (2006) "A Cold Wind Coming": Heinrich Gross and Child Euthanasia in Vienna *Journal of Child Neurology*, 21,342-348

Tydén M (2010) The Scandinavian States: Reformed Eugenics Applied In: Bashford A and Levine P (eds) *The Oxford Handbook of The History of Eugenics* Oxford: Oxford University press

Walmsley J and Rolph S (2001) The development of community care for people with learning difficulties 1913 to 1946 *Critical Social Policy* 21 (1) 59-80

Ward V (2013) Man with learning difficulties to be sterilised in unprecedented court ruling
Available at: <http://www.telegraph.co.uk/news/uknews/10247073/Man-with-learning-difficulties-to-be-sterilised-in-unprecedented-court-ruling.html> Accessed 19.12.14

Weindling PJ (2006) *Nazi Medicine and the Nuremberg Trials: From Medical War Crimes to Informed Consent* Hampshire: Palgrave Macmillan

Wilson D (2013) What can history do for bioethics *Bioethics* 27 (4) 215-223

Appendices