

# German science and black racism—roots of the Nazi Holocaust

François Haas<sup>1</sup>

New York University Institute of Community Health and Research, New York University School of Medicine, New York, New York, USA

**ABSTRACT** The Nazi's cornerstone precept of "racial hygiene" gave birth to their policy of "racial cleansing" that led to the murders of millions. It was developed by German physicians and scientists in the late 19th century and is rooted in the period's Social Darwinism that placed blacks at the bottom of the racial ladder. This program was first manifested in the near-extermination of the African Herero people during the German colonial period. After WWI, the fear among the German populace that occupying African troops and their Afro-German children would lead to "bastardization" of the German people formed a unifying racial principle that the Nazis exploited. They extended this mind-set to a variety of "unworthy" groups, leading to the physician-administered racial Nuremberg laws, the Sterilization laws, the secret sterilization of Afro-Germans, and the German euthanasia program. This culminated in the extermination camps.—Haas, F. German Science and Black Racism—Roots of the Nazi Holocaust. *FASEB J.* 22, 332–337 (2008)

*Key Words:* eugenics • racial hygiene • Nazi medicine • Social Darwinism • Herero

*If the physician presumes to take into consideration in his work whether a life has value or not, the consequences are boundless and the physician becomes the most dangerous man in the state.*

Christopher Wilhelm Hufeland (1762–1836) (1)

ALTHOUGH THE SLAUGHTER OF INNOCENTS has been a repeating theme throughout human history, only the Nazi-led extermination of millions of people deemed undesirable was framed in the scientific context of "racial hygiene." At the core of Nazi philosophy was the view of the nation as a living organism. Using Herder's concept of *Volk*,<sup>2</sup> Hitler viewed German society as an organism with its own health. "Our people is also a biological entity. . . German people forms one great relationship, a blood society. . . This biological unity of people will be known as the people-body (2)." Because individual human beings were regarded as functional or dysfunctional parts of this larger whole and thus affecting the health of the people-body, racial hygiene

became seminal to Hitler's thinking. As Bavarian Cabinet Minister Hans Schemm declared in 1934, "National Socialism is nothing but applied biology (3)."

The rise of science-based medicine combined with physicians' roles in national health reform during the late 19th century (4) to give physicians first-time political leverage and continuous and unprecedented levels of public recognition (5). Hitler and the Nazis reached out early to physicians:

*I could, if need be, do without lawyers, engineers, and builders, but. . . you, you National Socialist doctors, I cannot do without you for a single day, not a single hour. If. . . you fail me, then all is lost. For what good are our struggles, if the health of our people is in danger? (3)*

Physicians responded in kind (Table 1): "The National Socialist Physicians' League proved its political reliability to the Nazi cause long before the Nazis seizure of power, and with an enthusiasm, and an energy, unlike that of any other professional group (3)."

Central to this affinity was the 19th century etiologic notion evolving from Social Darwinism that certain diseases (*e.g.*, mental illness, feeble-mindedness, criminality, epilepsy, hysteria, alcoholism) are genetically determined. The physicians who had developed this theory—primarily psychiatrists, neurologists, and anthropologists (6)—became Germany's eugenicists and authored the country's racial policy, and it was primarily these physicians and their disciples who eventually led the Nazi government's policy of ethnic cleansing. This program evolved in a series of discrete steps of ever-increasing barbarism that emerged during the German colonial period in Africa and terminated in the extermination camps of the Holocaust.

<sup>1</sup> Correspondence: 400 East 34th St., RR114, New York, NY 10016, USA. E-Mail: francois.haas@med.nyu.edu  
doi: 10.1096/fj.08-0202ufm

<sup>2</sup> Johann Gottfried von Herder (1744–1803), a German physician, theologian, and linguist, introduced concepts of ethnic study and nationalism. He defined the *Volk* (the people) a group bound together organically by language, religion, education, inherited tradition, folk songs, ritual, and speech. This bond, which was spiritual in nature, he termed *Kulture*.

TABLE 1. *Medical involvement in the Nazi party* (3)

---



---

By early 1933, 6% (2,786) of German MDs had joined the Nazi party compared to 2.3% of engineers and 1% of judges.
By November 1933, 11,000 MDs had joined.
By the war's end, 48% of psychiatrists and neurologists had joined the Nazi Party compared to ~10% of the general population.
26% of male MDs were in the SA compared to 11% of college teachers.
More than 7% of male MDs belonged to the SS compared to <0.5% of general public

---

Although notions of race have a long history, it was ironically the Scientific Revolution followed by the Enlightenment and then the Age of Reason, emphasizing science and rationality, that were the wellsprings for biologically based racism. The earlier division of humans into races had produced opposing views that were hotly debated. The nonhierarchical, biologically homogeneous model held no race as superior. The hierarchical model placed whites, most notably Northern Europeans, at the top and Blacks at the bottom (7). The hierarchical construct eventually won out and Blacks were relegated to inferiority. This concept of intrinsic value or defect (popularized in the 1860s as Social Darwinism) was clearly articulated by Sir Francis Galton (1822–1911) in “The science which deals with all influences that improve the inborn qualities of a race (8).” He coined the word “eugenic” (relating to or producing improved offspring) and proposed that “races” were in a struggle for survival of the fittest. German Darwinists argued that innate racial inequalities gave each individual life a different value, and extermination of “inferior” races was not only appropriate but unavoidable (9). Their model placed the German (*i.e.*, Aryan) Race at the pinnacle and initiated the medical framework supporting the concepts and implementation of racial hygiene.

## GERMANY'S COLONIAL PERIOD

Nazi policy was actually presaged prior to WWI in Germany's African colonies. The native populations were regarded as inferior and treated in kind, and racism was institutionalized. Indigenous populations were coerced into forced labor in Togo, Cameroon, and South West Africa (Namibia), but conditions reached their peak in the latter under Namibia's first governor, Heinrich Ernst Goering (father of Hitler's deputy Herman Goering).

Among the populations inhabiting this colony were the more than 80,000 Hereros (10), who rebelled against their German overlords in 1904. The Germans sent an army under Lothar von Trotha who called the conflict a “race war.” He declared in the German press that “no war may be conducted humanely against non-humans” (11) and issued an “annihilation order”:

*...The Hereros are no longer German subjects. All Hereros must leave the country. . .or die. All Hereros found within the German borders with or without weapons, with or without animals will be killed. I will not accept a woman nor any child. . . There will be no male prisoners. All will be shot* (11).

That order set this racial genocide apart from other colonial mass murders and heralded the Nazi final solution (11).

As would occur under the Nazis, these killings were often framed in public health rhetoric. Von Trotha wrote, “I think it is better that the Herero nation perish rather than infect our troops. . .” By the time his order was rescinded, an estimated 65,000 Hereros had been killed (12). The remaining 15,000 (mostly women) were interned in *Konzentrationslager*.<sup>3</sup> Germany's first official use of this term occurred when Chancellor von Bülow rescinded the annihilation order and established camps for the survivors (11) which were designed to extract economic benefits from their forced labor under conditions that would lead to mass fatalities (12). The Herero uprising was eventually followed by the Nama (called Hottentots at that time) and Kaffirs.

*Fritz Isaac states under oath:*<sup>4</sup> ‘. . .I was sent to Shark Island by the Germans. We remained. . .one year. 3,500 Nama and Kaffirs were sent to the Island and 193 returned. 3,307 died on the Island’

*Samuel Kariko states under oath:* ‘There were only a few thousands of us left, and we were walking skeletons. . . The people died there like flies that had been poisoned. The great majority died there. The little children and the old people died first, and then the women and weaker men’ (13)’

Almost half of the approximate 17,000 natives incarcerated in the concentration camps died (11). These camps, abolished only in 1908 (10), were a template for the Nazi extermination and forced labor camps such as Auschwitz and Buchenwald, respectively.

The African colonies and concentration camps also served racial scientific inquiry. Post-mortems were performed to study causes of death and bodies of executed prisoners were preserved and shipped to Germany for

---

<sup>3</sup> The term “concentration camp” was first used by the Spanish for incarceration sites created as part of an anti-insurgency campaign in Cuba (ca. 1895–1898). The English then used it to describe camps operating in South Africa during the Second Boer War (1899–1902).

<sup>4</sup> These quotes are from survivor testimony obtained by the British government and included in a “Blue Book,” *i.e.*, a British government report, printed in 1918. In 1926, the legislative assembly for South West Africa demanded its removal and destruction throughout Namibia and South Africa. In the rest of the Empire, copies of the Blue Book were transferred to the Foreign Office and could be obtained only by authority of the librarian (13).



**Figure 1.** Head of a Nama man who died at Shark Island concentration camp, Namibia, which was sent to Germany for anthropological “research” (14) (with permission, E. Schweizerbart’sche Verlagsbuchhandlung <http://www.schweizerbart.de>).

dissection (**Fig. 1**, (14)). A 1907 chronicle reported that: “A chest of Herero skulls was recently sent to the Pathological Institute in Berlin, where they will be subjected to scientific measurements (10).”

Probably the most well-known study was the physician Eugen Fisher’s evaluation of *Basters*,<sup>5</sup> the mixed-blood children of Dutch men and Nama women. He argued that “Negro blood” was of “lesser value” and that mixing it with “white blood” would destroy European culture, and advised that Africans should be exploited by Europeans as long they were useful, after which they could be eliminated (15).

Fisher went on to co-author the seminal *Outline of Human Genetic and Racial Hygiene* with Fritz Lenz and Edwin Baur. Echoes appear in Hitler’s *Mein Kampf* (Hitler had been given a copy while in jail and writing *Mein Kampf*) and eventually in the Nuremberg racial laws<sup>6</sup> forbidding marriage and sexual relations between Germans and “unfit” groups (Jews, Sinti, Roma, and Africans) (3), and in the sterilization laws. Fisher became Director of the Kaiser Wilhelm Institute for Anthropology, Human Heredity, and Eugenics, and served on commissions that planned for the sterilization of Afro-Germans and

<sup>5</sup> “Basters” derived from the Dutch word for bastard. They were also known as “Baasters,” “Rehobothers,” or “Rehoboth Basters.”

<sup>6</sup> It is important to remember that the Germans looked to U.S. antimiscegenation and sterilization laws as models for their racial laws. Antimiscegenation laws in the U.S. had a history dating back to the colonial period. As late as 1957, Virginia trial court Judge Leon Bazile sentenced an interethnic couple who had married in Washington, D.C. to jail writing, “Almighty God created the races white, black, yellow, Malay and red, and he placed them on separate continents. The fact that he separated the races shows that he did not intend for the races to mix.” This decision was eventually overturned in 1967. At the time that anti-miscegenation laws were ruled unconstitutional by the U.S. Supreme Court, 16 states still had laws prohibiting interethnic marriage. In November 2000, Alabama became the last state to repeal its law.

provided scientific testimony on the racial heritage of German citizens (11).

Fisher summarized the role of racial hygiene in the *Deutsche Allgemeine Zeitung*: “It is rare and special good fortune for a theoretical science to flourish at a time when. . .its findings can immediately serve the policy of the state (16).”

## POST-WWI

The Treaty of Versailles marking the end of WWI forced Germany to divest its colonies. Because the Germans feared post-war occupation by Black French-African units, they repeatedly attempted (with broad Anglo-American support, including president Woodrow Wilson), but failed, to get a ruling that “colored troops should not be made a part of the army of occupation (16).”

The French use of their African troops sparked immediate international concerns. On June 5, 1919, for example, Major Paul H. Clark noted in a memo to General Pershing, “One or two cases of rape, committed by blacks on German women, well-advertised in the southern states of America, where there are very definite views with regard to the Blackmen, would likely greatly reduce the esteem in which the French are held (17).” Visitors to Germany were also outraged. The well-known British writer E. D. Morel, for example, wrote to the *Nation*, “. . .thrusting barbarians—barbarians belonging to a race inspired by Nature. . .with tremendous sexual instincts—into the heart of Europe. . . (18).”

The Germans continued to milk this stereotype of the sexual threat posed by Blacks, provoking world wide sympathy especially in the US. A rally of 12,000 in New York City’s Madison Square Garden submitted a petition to Congress that “the Moral sense of the American people demands the immediate withdrawal of the uncivilized French Colored troops (19).”

In 1920, Doctor F. Rosenberger wrote in the *Medical Review*, “. . .Shall we stand in silence and allow it to happen that in the future the banks of the Rhine shall echo not with the songs of beautiful and intelligent white Germans, but with the croaks of stupid, clumsy, half-animal and syphilitic mulattos (20)?” This reiterated the threat first articulated during Germany’s colonial period that racially mixed offspring (called *Mischlings*) will destroy the purity of the German white race (6). As Colonial Secretary Solf had incited people in 1912, “You send your sons to the colonies: do you want them to return with wooly-haired grandchildren?. . .Do you want your girls to return with Hereros, Hottentots and bastards?. . .We are Germans, we are white, and we want to stay white (21).”

## THE NAZI REGIME

Nazi propaganda not only stirred the broad German anti-black resentment, they conflated it with the grow-



**Figure 2.** Left Panel) In this picture from a Nazi propaganda film strip, Jews were viewed as the “bastard” offspring of Eastern peoples, Blacks, Mongols and eastern Africans. USHMM #17609.<sup>10</sup> Right Panel) The Nazis attempted to demean and prohibit jazz, which they saw as degenerate music produced by Blacks and Jews (Bildarchiv Preussische Kulturbesitz courtesy of USHMM) (22).

ing anti-Jewish feelings (Fig. 2, (22)). Hitler states in *Mein Kampf* that: “It was and is the Jews who bring the Negro into the Rhineland, always with the same secret thought and clear aim of ruining the hated white race by the necessarily resulting bastardization, throwing it down from its cultural and political height, and himself rising to be its master (2).”

Although the Nazis’ aim was always to remove the Jewish presence from Germany, the first group actually targeted for “medical intervention” was the *Rhineland Bastards*, the small number of mixed-blood children born to a German mother and a Black father in the occupying forces. When sterilization of these *Mischlinge* was first requested by private citizens in 1927—because they were approaching puberty and their procreative potential threatened race purity—their request was denied. Although the government recognized this “serious racial danger,” forced sterilization had no legal basis (23).

The Nazi party assumed power in January 1933, and on April 5 Hitler asked the medical profession to lead the race issue with full energy: “racial hygiene was to be the task of the German physician (2).” July 14th saw passage of the Law for the Protection of Hereditary Health, decreeing that “anyone who suffers from an inheritable disease may be surgically sterilized if, in the judgment of medical science, it could be expected that his descendants will suffer from serious inherited mental or physical defects (3).” This included congenital neurologic diseases, psychiatric illness, inherited deafness and blindness, etc. (Fig. 3). Irwin Baur, Director of the Kaiser Wilhelm Institute for Biology, presaged euthanasia and the “final solution”—“No one approves of the new sterilization laws more than I do, but I must repeat over and over again that they constitute only a beginning (3).”

Although this law did not include sterilization based on race, German eugenicists continued to press for sterilizing the Rhineland *Mischlings* (25) and published medical articles advocating their elimination. As examples, Dr. Hans Macco stressed elimination of the “black curse” in “Racial Problems in the Third Reich” (24); Dr. Wolfgang Abel (University of Berlin) claimed evidence of their mental and physical weakness in “Bastards on the Rhine” (26).

The Nazi Racial Office eventually convened a secret committee of anthropologists and academic physicians

to discuss strategy. They chose illegal sterilization performed by physicians who belonged or were sympathetic to the Party but delayed implementation of this clearly illegal racially based sterilization until 1937 due to concern about possible negative public opinion. The procedure required authorization from a Government member, recommendations from two physicians who had examined the *Mischlinge*, and the mother’s consent. Following are examples of the legal “decisions” (20):

*C.M.B. of German nationality, born July 5, 1923, living in Koblenz, is a descendent of a member of the former Allied occupation forces, in this case an American negro, and shows corresponding typical anthropological characteristics, for which reason she shall be sterilized.*

*A.A. of German nationality, born March 14, 1920, living in Duisburg, is a descendent of the former colored Allied occupation forces, in this case a negro from Madagascar, and shows corresponding typical anthropological characteristics, for which reason he shall be sterilized.*



**Figure 3.** Students at the Berlin School for the Blind (ca. 1935) learning Mendelian genetics and racial characteristics by examining head models. These same students were expected to submit to sterilization as their civic duty to avoid producing blind offspring (Image credit: Blinden-Museum an der Johann-August-Zeune-Schule für Blinde, Berlin).

Medical notes were maintained, such as for this patient sterilized by Professor Dr. Nieden: “The patient (A. A.) was prepped and draped in the usual manner. Six cm of *vas deferens* were resected bilaterally. The patient was given a bolus of *Rivanol*. The wound healed in 6 days without further complications (20).”

In all, 385 children of mixed blood (201 boys and 182 girls from ages 7 to 17) with a French or American father were sterilized (20).<sup>7</sup> Sterilization of these *Mischlings* was the first step in an ever expanding program of direct medical involvement.

The next step involved economic justification, euthanizing institutionalized children, and eventually adults, who were considered to be burdens to the State. Hitler used *Release and Destruction of Lives Not Worth Living*, published by psychiatrist Alfred Hoche and jurist Rudolph Binding in 1920, as the basis for the secret euthanasia program (code-named *Aktion T4*) that he authorized on July 18, 1939 at six new killing stations. Euthanasia was a “medical intervention” to be carried out only by physicians according to the motto: “The needle belongs in the hand of the doctor<sup>8</sup> (3).” The variety of methods included the newly developed gas chambers. But this T4 program, which was not yet race-based, eventually caused such a public outcry that Hitler was forced to suspend it, but not before more than 70,000 people had been murdered.

The techniques learned and perfected in the T4 program were put to use in a different “institutional” context and aimed at a new target—selected “asocial” elements in the concentration camps (**Table 2**). *Operation (aka Special Treatment) 14f13* earmarked the Jew, Roma and Sinti, and homosexual for killing.

This last step in eliminating inferior populations expanded the program requiring a physician to select those camp inmates to be worked to death and those sent to the gas chambers. This “Final Solution” mirrored the genocidal public health language used in Namibia. Himmler referred to the extermination of Jews as “. . . exactly the same thing as delousing. Getting rid of lice is not a question of ideology. It is a matter of

<sup>7</sup> Despite the outrage at Nazi racial policy, Allied authorities were unable to classify sterilizations as war crimes, because similar sterilization laws had been enforced in some states since 1907 and had been upheld by the Supreme Court. In *Buck v. Bell* (1927), the majority decision, written by Chief Justice Oliver Wendell Holmes, Jr., used modern opinions of science to support the Virginia sterilization law: “It is better for all the world, if instead of waiting to execute degenerate offspring for crime, or let them starve for their imbecility, society can prevent those who are manifestly unfit from breeding their kind. The principle that sustains compulsory vaccination is broad enough to cover cutting Fallopian tubes. . . Three generations of imbeciles are enough.” Although compulsory sterilization ended after the war in Germany, in the US, 11 African-American girls were sterilized in 1972. The Oregon Board of Eugenics, which was renamed the Board of Social Protection, existed until 1983, the last forcible sterilization occurring in 1981.

<sup>8</sup> This notion is still upheld in the U.S. when capital punishment is performed by lethal injection.

TABLE 2. *Physicians’ diagnostic statements authorizing euthanasia for selected prisoners in concentration camps* (31)

---



---

“Anti-German Jewish agitator; lazy and insolent in the camp.”
“Anti-German behavior: Crime of miscegenation. Lazy, insolent in the camp.”
“Marxist functionary. Vile Germanophobe. Relations to English Embassy.”
Deportation prisoner who returned illegally from abroad. Suffers from venereal disease (Clap).
“Attitude hostile to the state.”

---

cleanliness.”<sup>9</sup> It was also framed in classic Darwinian theory. According to minutes taken by Adolph Eichman during the Wannsee meeting at which the final solution was formulated, “Approximately 11 million Jews will be involved. . . . In the course of the final solution, the Jews are to be allocated for appropriate labor in the East. Able-bodied Jews, separated according to sex, will be taken in large work columns to these areas for work on roads, in the course of which action doubtless a large portion will be eliminated by natural causes. The possible final remnant will, since it will undoubtedly consist of the most resistant portion, have to be treated accordingly, because it is the product of natural selection and would, if released, act as the seed of a new Jewish revival (27).”

Although relatively few Blacks were deported to concentration camps, the German SS military units (which, with some notable exceptions, treated white POWs according to the Geneva Convention) victimized Black POWs, initially French colonial soldiers, and then African-Americans once the U.S. entered the war (24, 28).

## CONCLUSION

Central to Nazi philosophy was the paradigm—broadly accepted as fact by scientists and community—that the Nordic race was not only superior to the “lower” races, notably Blacks and Jews, but involved in a terminal struggle with them for survival of the fittest. It is little recognized that this scientific framework did not rise *de novo* with the Nazis but had evolved over the previous 80 years from the related notions of eugenics and Social Darwinism. It had already legitimized Germany’s earlier racial policy in South West Africa during their Colonial period, and was the founding core of Nazi racial hygiene. It was formalized by making physicians officially responsible for carrying out this policy, culminating in implementation of the “Final Solution.”

<sup>9</sup> The SS gas chamber operators were called the *Desinfektoren* (the disinfectors).

<sup>10</sup> The views or opinions expressed in this article, and the context in which the images are used, do not necessarily reflect the views or policy of, nor imply approval or endorsement by The United States Holocaust Memorial Museum.

Leo Alexander, in his 1949 article “Medical Science Under Dictatorship” (*NEJM*), suggested that, “Science under dictatorship becomes subordinated to the guiding philosophy of the dictatorship (28).” I am proposing the inverse, that Politics under Science becomes subordinated to the guiding philosophy of that Science. This article also touches on a potentially dangerous relationship between science and society that we tend not to recognize. As Ludwick Fleck noted in 1935 in *Genesis and Development of a Scientific Fact*, “This social character inherent in the very nature of scientific activity is not without its substantive consequences. Words which formerly were simple terms become slogans; sentences which once were simple statements become calls to battle. This completely alters their socio-cognitive value. They no longer influence the mind through their logical meaning—indeed, they often act against it—but rather they acquire a magical power and exert a mental influence simply by being used (29).” [E]

## REFERENCES

1. Charatan, F. (2004) *Danger*. *BMJ* **329**, 899
2. Hitler, A. (1943) *Mein Kampf*, Houghton Mifflin Company, Boston
3. Proctor, R. (1988) *Racial Hygiene: Medicine under the Nazis*. Harvard University Press, Cambridge, Mass.
4. Rosen, G. (1993) *A History of Public Health*. John Hopkins University Press, Baltimore
5. Weiss, S. F. (1990) The Race Hygiene Movement in Germany 1904–1945. In: *The Wellborn Science* (Adams, M. B., ed.) Oxford University Press, New York, pp. 8–68
6. Stone, D. (2001) White men with low moral standards? German anthropology and the Herero genocide. *Patterns of Prejudice* **35**, 34–45
7. Hecht, J. M. (2000) Vacher de Lapouge and the Rise of Nazi Science. *J. Hist. Ideas* **61**, 285–304
8. Galton, F. (1907) *Inquiries into Human Faculty and its Development*. Dent & Dutton (Everyman), London
9. Weilkart, R. (1993) The origins of social Darwinism in Germany. *J. Hist. Ideas* **54**, 469–488
10. Gewald, J.-B. (1999) *Herero Heroes*, Ohio University Press, Athens
11. Madley, B. (2005) From Africa to Auschwitz: How German South West Africa Incubated Ideas and Methods adopted and Developed by the Nazis in Eastern Europe. *Eur.Hist. Quart.* **35**, 429–463
12. Gray, A. (1919) The German Colonies of Africa. *J. Comp. Legis. Internat. Law 3rd Ser.* **1**, 25–35
13. Silvester, J., and Gewald, J. B. (2003) *Words Cannot Be Foun: German Colonial Rule in Namibia: An Annotated Reprint of the 1918 Blue Book* Vol. 1, Brill, Leiden
14. Fetzter, C. (1913) Rassenanatomische Untrsuchungen an 17 Hottentottenkopfen. *Zeitschrift fur Morphologie und Anthropologie* **16**, 95–116
15. Weikart, R. (2003) Progress through racial extermination: Social Darwinism, eugenics, and pacifism in Germany, 1860–1918. *German Studies Rev.* **26**, 273–294
16. Swan, J. (1991) The final solution in South West Africa. *MHQ: Quart. J. Mil. Hist.* **3**, 36–55
17. Nelson, K. (1970) The “Black Horror on the Rhine”: Race as a factor in post-World War I diplomacy. *J. Mod. Hist.* **42**, 606–627
18. Morel, E. (1920) The employment of Black Troops in Europe. *The Nation*, p. 893)
19. (1921) 12,000 in garden under police guard attack France. *New York Times*, p. 1
20. Pommerin, R. (1982) The Fate of mixed blood children in Germany. *German Studies Rev.* **5**, 315–323
21. Campt, T. (2005) *Other Germans: Blacks, Germans and the Politics of Race, Gender and Memory in the Third Reich*. University of Michigan Press, Ann Harbor
22. Kater, M. H. (1989) Forbidden Fruit? Jazz in the Third Reich. *Am. Hist. Rev.* **94**, 11–43
23. Campt, T. (2003) Converging Specters of Another Within: Race and Gender in Prewar Afro-German History. *Callaloo* **26**, 322–341
24. Kestling, R. W. (1998) Blacks Under the Swastika: A Research Note. *J. Negro Hist.* **83**, 84–99
25. (1934) Asks Negro sterilization. *New York Times*, New York
26. Abel, W. (1934) *Bastard and Rhein*. *Neues Volk* **2**, 4–7
27. Office of Strategic Services (1982 ) *The Wannsee Protocol and a 1944 Report on Auschwitz*. Vol. 11, Garland, New York
28. Scheck, R. (2005) “They are just savages”: German massacres of Black soldiers from the French army in 1940. *J. Mod. Hist.* **77**, 325–344
29. Alexander, L. (1949) Medical science under dictatorship. *N. Engl. J. Med.* **241**, 39–47
30. Fleck, L. (1979) *Genesis And Development of a Scientific Fact*. University of Chicago Press, Chicago
31. Lifton, R. J. (1986) *The Nazi Doctors*. Basic Books, Inc., New York

*The opinions expressed in editorials, essays, letters to the editor, and other articles comprising the Up Front section are those of the authors and do not necessarily reflect the opinions of FASEB or its constituent societies. The FASEB Journal welcomes all points of view and many voices. We look forward to hearing these in the form of op-ed pieces and/or letters from its readers addressed to journals@faseb.org.*