

An Ethics of Testimony Prisoner Nurses at Auschwitz

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This historical research report presents and analyzes 2 recently identified narratives of women who underwent sterilization experiments at the Auschwitz concentration camp during World War II. A description of the historical and contextual background is presented in which involvement of the prisoner nurse occurred in the sterilization experiments. Using a critical feminist perspective, the ethics of nursing involvement are discussed in these experiments, with an emphasis on the political dimension. Salient implications are explored for contemporary nursing. **Key words:** critical feminist, Holocaust, nursing, postmodernist, sterilization, suffering

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Schewa Melzer,¹ Holocaust survivor, 1956

DURING the 1930s and 1940s, the participation of professional nurses in multiple roles in the atrocities committed on millions of persons under the aegis of National Socialism in Germany has, until recently, been rendered almost invisible. However, the recent

works of researchers such as Benedict,² Benedict and Kuhla,³ and McFarland-Icke⁴ have begun to lay the groundwork for a more complete historiography of nursing involvement in the Holocaust. The narratives that emerge from this clearly documented evidence of active involvement of professional nurses in mass murder, torture, and unethical experimentation are uniformly chilling and extremely significant for consideration for contemporary nursing. This article addresses a specific exemplar of nursing involvement in the Holocaust, the participation of prisoner nurses in the "sterilization experiments" performed on thousands of women in Block 10 of the Auschwitz concentration camp. The purpose of this study is to present the historical narratives of 2 women who underwent the sterilization experiments at Auschwitz, and to provide an analysis from a critical feminist perspective regarding the active involvement of prisoner nurses in these experiments. Specifically, this article:

- provides a description of the historical and contextual background in which involvement of the prisoner nurse occurred in the sterilization experiments;
- presents the narratives of 2 women who underwent these experiments;
- discusses the ethics of nursing involvement in these experiments from a critical feminist perspective, with an

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emphasis on the political dimension; and

- explores salient implications for contemporary nursing.

HISTORICAL CONTEXT

The ideological goal of National Socialism of the permanent elimination of “undesirables” was clearly elucidated and in congruence with its philosophical underpinnings of racism, sexism, anti-Semitism, and heterosexism. After Hitler’s rise to power in 1933, the entire apparatus of the state was redesigned to achieve this goal, and no segment of German society—education, healthcare, industry—went untouched. The re-socialization of nursing within this ideological framework and the resulting activities of professional nurses have only recently begun to be examined.

NURSING AND NATIONAL SOCIALISM

In a landmark text entitled *Nurses in Nazi Germany: Moral Choices in History*, historian Bronwyn McFarland-Icke⁴ provides a stunning and meticulously documented account of the participation of psychiatric nurses within Nazi Germany in the euthanasia of thousands of patients with mental illness. She notes the apparent paradox present in the nursing literature under early National Socialism, which while still retaining discursive themes of caring and ethical behavior^{4(p128)} was also beginning to display themes such as emotional distance and “coldbloodedness,”^{4(p145)} portrayed as important components of psychiatric nurse practice. McFarland-Ecke^{4(p145)} documents the entry of the concept of eugenics into German nursing literature of the 1930s, contemporaneous with the promulgation of the National Socialist agenda to apply “scientific” knowledge to social policy for the purpose of attaining “racial purity.”^{4(p147)} Concurrently, decreased state funding for psychiatric institutions resulted in an actual reinforcement

of Nazi stereotypes of persons with mental illness as unclean and “animalistic,”^{4(p146)} as nurses and other resources dedicated to their care shrank. Thus, McFarland-Icke^{4(p218)} asserts, by the time the organized euthanasia programs for persons with mental illness began in 1939, psychiatric nurses had been re-socialized by both propaganda and circumstances to be willing participants in the mass killings by gassing, starvation, and later, by injections.²

PRISONER NURSE INVOLVEMENT

The work of McFarland-Icke⁴ regarding participation of “citizen” nurses under National Socialism is seminal. Nevertheless, research still needs to be done to address issues that remain largely unexplored and unresolved: to what extent did nurses who had been taken prisoner in concentration camps participate in the infliction of suffering and murder, and what was the context in which these actions occurred? Were these nurses even able to make what could be deemed “ethical” choices within this context? This article seeks to elucidate a specific instance of the participation of prisoner nurses in the sterilization experiments conducted on women at the Auschwitz concentration camp.

STERILIZATION EXPERIMENTS AT AUSCHWITZ BLOCK 10

Congruent with the National Socialist ethos of using “science” to attain its goals, considerable support, both financial and political, was provided to launch research programs regarding rapid and cheap means of sterilizing “inferior,” non-Aryan persons, while retaining their abilities to provide labor. In 1941, 2 German physicians were chosen to lead key investigations into the development of such techniques. Dr Carl Clauberg, a gynecologist well known for his endocrinological research, and Dr Horst Schumann, an SS Major, were selected to design and implement sterilization experiments in Auschwitz.^{5(p270)} Clauberg tested a technique using injection of

caustic chemicals while Schumann utilized an intervention involving high doses of radiation. While more than 1000 involuntary subjects underwent these experiments, fewer than 100 survived.^{6(p356)} Both men and women were used in Schumann's radiation sterilization experiments. Young men had their testicles subjected to large doses of radiation, and were subsequently surgically castrated to assess the degree of pathological changes in their testes. Nearly all the persons used in Schumann's experiments were exterminated following their participation, as the severe x-ray burns rendered them incapable of working.^{7(p702)} While recognizing and honoring the extreme suffering of the men who underwent torture and murder, this article focuses specifically on the experiences of the women who underwent sterilization experiments and the ethics of prisoner nurse involvement.

Clauberg began his Auschwitz experiments in December 1942 in Birkenau [Auschwitz II]. However, after persuading authorities that the importance of his research merited special space and equipment, he transferred his experimental setting to Block 10 of Auschwitz I on April 1, 1943.^{8(p366)} The research facilities provided to Clauberg included wards housing hundreds of experimental subjects, an elaborate x-ray apparatus, and 4 special experimental rooms, one of which served as a dark-room for developing x-ray films. The method that Clauberg tested as an expedient means of sterilization was the injection of a caustic substance into the cervix in order to induce tissue inflammation, scarring, and subsequent obstruction of the fallopian tubes. Inclusion criteria for the women subjected to these experiments included being married and between the ages of 20 and 40, preferably those who had given birth. Prior to the intervention, the women were injected with a radio-opaque liquid in order to confirm by x-ray examination that no preexisting fallopian blockage was present.^{5(p271)} While Clauberg maintained a great deal of secrecy surrounding the exact nature of the caustic substance he was utilizing, historians have documented that its prin-

cipal ingredient was most likely formalin, a solution of 10% formaldehyde normally used for disinfection or the preservation of biological specimens.^{5(p272)} This injection formula was developed by Dr Johannes Göbel, a chemist from Schering Werke, who worked as an assistant to Clauberg.^{6(p349)} Clauberg would have found the substance cheap, readily available, and capable of inflicting extreme damage to living tissue. The dosage was administered in 3 stages over a period of a few months, though some women later described a total dose of 4 or 5 injections. Subsequent x-ray films were then taken to document the degree of fallopian occlusion. It is estimated that several thousand women were sterilized using the "Clauberg method" in Auschwitz.^{7(p701)}

While prior historical documentation of Clauberg's activities has mentioned the consistent presence of a prisoner nurse named Sylvia F. as an assistant to him, scanty information regarding her role or that of other prisoner nurses has been published to date. Lifton^{5(p272)} states that Sylvia would "observe the women after the injections for symptoms of any kind." Recently identified narratives provide a more complete account, and in the narratives that follow, Sylvia F. is portrayed as an active participant in Clauberg's work, as are other prisoners who worked as nurses. [*Authors' note:* It is impossible, in many cases, to identify which persons had been educated as professional nurses. It was not unusual for a prisoner to claim to be of a particular profession in order to obtain a better work assignment in the camp. Prisoners who worked as physicians and nurses had far better living conditions than the average prisoner and, most important, the indoor job that was often the difference between life and death.]

THE NARRATIVES

Recent identification of archival testimony given by women who experienced the horror of the experiments conducted in Block 10 of Auschwitz has revealed a stunning portrayal of prisoner nurse involvement that has previously remained largely undocumented

in the nursing literature. This article presents excerpts from the testimony of 2 women who survived Auschwitz, and later gave depositions in preparation for the trial of Dr. Clauberg in the 1950s. [*Authors' note:* Clauberg committed suicide before his German trial began.] Of particular relevance to this article are their descriptions of the active involvement of prisoner nurses in acts of incomprehensible violence against women. The narratives are excerpts taken from primary source documents contained in the German state archives in Wiesbaden (Hessisches Hauptstaatsarchiv).

The first narrative is that of Cornelia Loewendorff-de Haff,⁹ who was 30 years old when she entered Auschwitz. Schewa Melzer,¹ the second witness, was 33 years old at the time of her arrest. Of particular salience is that Ms Melzer was already a professional nurse prior to this experience, and details in her narrative (eg, descriptions of wound healing) reflect her nursing background. That these 2 young women survived to relate these narratives is a testimony to the human ability to survive the most horrific experiences.

TESTIMONY OF CORNELIA LOEWENDORFF-DE HAFF

"In the beginning of August, 1943, we were arrested . . . because we were Jewish and had hidden . . . we arrived in Auschwitz around August 24th or 25th. . . . My prisoner number at Auschwitz was 56009. After we were unloaded in Auschwitz a group of about 40 women were sent to Block 10 of the men's camp in Auschwitz [Auschwitz I]. . . . We did find a few Dutch women (maybe 3 or 4) who had already been there before our arrival. . . . They were asking us as soon as we arrived how things were back home . . . and they were telling where we had landed. They told us about the "Clauberg Block," and we did not understand at the time what this meant. They explained that women were undergoing experiments in this Block . . . one of these experiments consisted of injections into the uterus.

The next day I was called by a Dutch prisoner woman . . . she told me that I had to undergo surgery the following day and that it would be done by [prisoner-physician] Dr. Samuel. When I went downstairs the following day, I had to lie on the examining table . . . I received an injection in my arm and was anesthetized. When I woke up, I was in bed . . . I cannot say what had occurred in the meantime . . . I can say, however, that I had an uncomfortable feeling in my abdomen but cannot say that I was in major pain. A few days later, my temperature was very high and I was sick for several weeks lying in the Revier [infirmary, hospital] before I was transferred into the larger sleeping area."

"It was months later that I was called in by (the nurse) Sylvia. Whenever Sylvia appeared, the word was, the 'death announcer' had arrived. She told me to come downstairs for an examination to see whether I was qualified for an injection by Dr. Clauberg. Sylvia was in the room . . . I believe I was examined by at least 2 men, and I heard the following conversation where one man said to the other: 'My God, this woman has been sutured shut down here.' I had meanwhile found out that the women who were not suitable for surgery were all sent to Birkenau. I was afraid of the transport to Birkenau because it meant either gas or typhus . . . I was so afraid that the 'This woman has been sutured shut' meant that I was not suitable and that I would be sent away. I went to Branka [another Dutch prisoner] and asked her to speak with Dr. Samuel so that he might help me. (He) examined me, and afterwards he told me he would help me. He asked me to return very early the next morning. I was supposed to bring a friend and come right after the Block opened because no one was to know. Dr. Samuel did something to my sexual organs, but I cannot describe it because I do not understand it. It was very painful and I was bleeding. Branka, who had some influence, talked with Margit to make sure that I was allowed to remain in bed. . . ."

"About one week later I was called into Dr. Clauberg's office. I was so anxious back then, and am unable to tell you today who else

might have been in the office. I remember one man stating, "This woman is all "raw." But I did not say anything about Dr. Samuel and what he had done. Once I laid on the table, something was put in my abdomen. Then everything went dark. I felt that an instrument was guided into my sexual organs . . . a bit later I felt pain in my body. I cannot give a better description of the pain and the circumstances, because back then I was much too apathetic, and also too scared and anxious. Afterwards I developed a very high temperature up to 40 degrees C. The female prisoner physician diagnosed adnexitis [*Authors' note: Infection of the fallopian tubes and ovaries*] and ordered cold compresses for me. . . ."

"A few months later I was called for another injection. I remember this so distinctly, because after the infection, I once again became very sick (with) adnexitis. Before we were transferred to the new Block 1 [*Authors' note: This event occurred in May 1944*^{6(p352)}], we had to appear for a count. Only very healthy women were desired. I went with the help of some comrades to the courtyard for the count, and I had a high fever and could hardly walk . . . I do not have much of a memory of the second injection. The consequences were worse than the first time . . . aside from me, many other women had acute pelvic infections after the uterine injections. There were many deaths after having developed acute pelvic infections caused by the injections As I mentioned earlier, those women who were not suitable for any experiments were selected and sent to Birkenau. . . ."

[*Authors' note: In January 1945, Auschwitz was largely vacated as the Russian army approached. Many prisoners, including Ms Loewendorff-De Haff, began a "death march" to the women's concentration camp, Ravensbrück, near Berlin.*] "After the war I was treated by several physicians. (A physician) recommended me for tubal insufflation (treatment.) My present husband and I decided against this procedure, because I had already undergone so many procedures that I cannot endure one more. I only have one interest. Professor Clauberg should say

exactly what he did to us back then . . . he should say what he injected in our bodies. . . ."

"Aside from the already described experiments in Block 10, there were also experiments performed on Greek girls—the burning of the ovarian tubes by radiation. Later on those girls who underwent the radiation also went into surgery. They wanted to see whether the burning of the ovarian tubes had been successful. Several girls died from these procedures. These girls were screaming after surgery. Some of them died. I do not know who performed these surgeries . . . I feel sure that the accused Professor Dr. Clauberg should also be held responsible. As physician and university professor, he should not have tolerated such experiments taking place in his Block."⁹

TESTIMONY OF SCHEWA MELZER

"The Gestapo picked me up in 1942 . . . my husband was able to attain Aryan papers and was employed as a mailman, but in 1943, someone squealed and so he died After my arrest I was brought to the Westerbork camp where I was for about one year. I reported that I was a trained nurse because I hoped to remain in Holland . . . I arrived at Auschwitz on a transport on 16 September 1943 and received my prisoner number 62482, tattooed on my arm underneath an upside down triangle. We were told in camp that those who had this kind of a triangle were cursed to a slow death. . . ."

"There was a laboratory in the back of the basement of Block 10 . . . at first a Czech woman named Ethel was the Block Eldest (person in charge) . . . she was later relieved by Margit . . . Dr. Clauberg recruited both of them for his sterilization experiments already in Birkenau . . . The first assistant of Dr. Clauberg was a tall, blonde, Czech Jew (named) Sylvia. She was a beautiful woman. I am firmly convinced she had an affair with Dr. Clauberg . . . Sylvia had her mother, who was treated as a special prisoner, with her. She had good clothes, was released from everything and could remain in the courtyard

to play chess. There was a certain Martha who worked as an assistant nurse, as well as a certain Genia . . .” [*Authors’ note:* In her list of inmate personnel of Block 10, Holocaust survivor Ima Spanjaard¹⁰ lists Magda Hellinger (first Block Eldest), Margit Neumann (second Block Eldest), and Magda Hans, but did not mention anyone named Martha as an inmate worker in Block 10.]

“The women were on certain lists for certain doctors and certain experiments . . . when I lay on the table in the treatment room, I overheard Dr. Samuel saying to himself, ‘My God, to have to destroy such a young and beautiful body.’ I asked the 2 assistants in Polish what would be done to me. ‘Can’t you figure this out for yourself—you know where he examined you’ (they replied.) I protested and said that they could not mean to remove body parts from me without any kind of anesthesia. They replied that I was not in Holland and that I was in a Block where these experiments were done. Dr. Samuel released me without surgery because I was menstruating . . . I was called in by Dr. Clauberg in October of 1943. I arrived in the room downstairs. It was dark. The x-ray machine’s red lamp was on. Sylvia told me to lie down on the x-ray table, and then she took a long syringe filled with a milky substance and undertook the injection herself. Martha and Genia held me down. They put a glass plate on my abdomen and took x-rays right away. I had terrible burning pain and the feeling that my abdomen was coming apart, nearly as if I would explode. I was screaming. I could not get off the table by myself. Martha and Genia helped me and once I was outside, two other women took me upstairs to bed. I stayed there, had a fever, without (my temperature) being taken . . . really, there was no medical care whatsoever and I remained in bed for two days. In order to reduce my pain, I had made cold compresses for my abdomen and my head. After two or three days, Sylvia gave the second and the third injection. Every 4 to 6 weeks Sylvia gave the second and third injection. Those were just as painful as the first one . . . Clauberg was never present.

However, as I found out, he did see the x-rays . . .”

“Once we arrived at Block 10, we found 16 to 18 year old Greek girls with whom Dr. Schumann had experimented. He tried to burn their ovaries by method of radiation. Some of those Greek girls had dark coloration on their abdomen. Later on, this Dr. Schumann performed surgery on these girls in order to remove the ovaries. The surgical sites looked horrible—the wounds would not heal. The girls could not walk upright. One day all 20 Greek girls were transported to Birkenau where they were gassed. From what I know, the following women from Block 10 died from the Clauberg injections: my friend, Anni S., a Polish citizen who was also arrested in Amsterdam and who also received an injection from Sylvia and who became very ill and eventually died . . .”

“The selections took place approximately every 6 weeks. [*Authors’ note:* Selections occurred when a physician would “select” the ill and those no longer valuable for experiments to be sent to the gas chambers in Birkenau.] The resulting spaces would be filled with new transports. The victims were at first put on lists put together by the doctors who found the women that were selected for them no longer useful. There were also so-called nude parades where we had to undress and stand in the hallway or the sauna, and 3 or 4 uniforms [*Authors’ note:* SS officers] would inspect and separate us by moving their thumb, deciding as to who would remain in Block 10 and who would be transported to Birkenau . . .”

“The evacuation was the so-called death march [January 1945]. We had to march without food and decent clothing for about two to three days and were then put in open coal wagons . . . we were supposed to work in ammunition factories . . . gwe marched toward Grimma, and it was there where the Americans liberated us. It was on April 26, 1945.”

“My physician, Dr. V., a gynecologist, performed surgery on me in March 1953 and both ovaries were removed. I am also in treatment with Dr. L., an internist who has found that my nervous system was damaged. I suffer

from this. In the end, it was the concentration camp and the experiments that destroyed my life."¹

DISCUSSION

These powerful narratives give an account of human experiences almost beyond comprehension. A thorough deconstructive analysis from a postmodern perspective could be the subject of an entire lengthy text. For the purposes of this article, an analysis using critical feminist perspective will be focused on the political dimension of these narratives, with a specific emphasis on the participation of prisoner nurses.

In her classic text, *In a Different Voice*, psychologist Carol Gilligan^{11(pxix)} asserts that accounts of historical events can "expose the underpinnings" of power relations between men and women, or, by extension, the dominant and the subordinate speaking groups. The 2 narratives presented above are a remarkable exemplar of this exposure: the sterilization experiments in Block 10 were the outgrowth of an ideological system fanatically concerned with maintaining the dominant position of "Aryan" heterosexual males. That these 2 women are describing acts of violence enacted on their bodies *because* they are women and *because* they are deemed racially "inferior" is extremely salient in analyzing the political dimensions of the experience. These narratives can be viewed as a quintessential ramification of Foucault's¹² assertion that the body is the ultimate site on which power is concentrated in Eurocentric culture. It is the actual "symbolic" anatomical parts of women in Eurocentric culture—the uterus, fallopian tubes, and ovaries—that are the target of these extreme acts of violence. The narratives are also emblematic of what Gilligan^{11(p.x)} describes as a Eurocentric, "male voiced civilization" and "order of living" that is founded on *disconnection* from women. Within this ideology, radical disconnection from the socially constructed "other" becomes not only possible but also highly rewarded. In this particular situation, women's bodies have now become the actual "the-

ater" on which this disconnection is played out, characterized by what Ms Melzer¹ terms "nude parades" conducted by disembodied male figures described as "uniforms."

In contrast, the voices of the 2 women who experienced these events can be viewed, as Gilligan suggests, as "a voice that insists on staying in connection, and most centrally staying in connection with women . . ."^{11(pxiii)} In spite of the horror into which they have been thrust, connectedness with other imprisoned women becomes a paramount concern. Again and again, it is the other women who are described as helping them, and, more than 10 years after these horrific events, the names of woman friends who died remain clearly remembered and uttered. As Gilligan^{11(pxiv)} asserts, these narratives can be viewed as making relational realities *explicit*.

What, then, to make of the descriptions of the activities of the prisoner nurses described in the narratives? Congruent with other descriptions of imprisoned women in the concentration camps who were given positions of power, their actions display a mixed response that confounds any facile explanation. In some cases, they are described as helpful while simultaneously being characterized as abusive. In these exemplars, one is left with an impression that the major nurse prisoner figure described (Sylvia) has been promoted to a position in which she is almost an extension of Clauberg—the "first assistant" and "death announcer."⁹ As Schewa Melzer¹ notes, these are the "Clauberg injections" and "Clauberg was never present However, as I found out, he did see the x-rays"¹ Clauberg has removed himself physically, but again and again, Sylvia is present during multiple phases of the experiments. One can readily surmise that Sylvia had become a valuable asset to Clauberg, as valuable, perhaps, as the state-of-the art x-ray equipment he demanded and received during a stringent wartime economy.^{5(p276)} The theme of sexual politics is also present: Ms Melzer is "firmly convinced that she (Sylvia) had an affair with Dr. Clauberg,"¹ a statement that immediately precedes her description of the special privileges enjoyed by Sylvia. And

Sylvia received the ultimate “special privilege” of prisoners in Auschwitz—she lived! In the moral universe of Auschwitz in which anything was possible, the relational realities of suborning oneself to the dominant male and disconnecting from the “other” to the point of radical violence have become a survival strategy.

In his text, *The Nazi Doctors: Medical Killing and the Psychology of Genocide*, Robert Lifton⁵ quotes an Auschwitz survivor as stating, “I have no words. I thought we were human beings. We were living creatures. How could they do things like that?”^{5(p269)} Work by philosopher Giorgio Agamben¹³ provides a useful perspective for examining more deeply the relational realities faced by prisoner nurses in Auschwitz. Agamben¹³ builds on Foucault’s^{14(p140)} concepts of “biopower” and “biopolitical space” to examine the ethical questions raised by the testimony of Holocaust survivors. Foucault^{14(p140)} described the term *biopower* as the exercise of technology to achieve subjugation. Thus, Agamben centers his work in the biopolitical space that constitutes the postmodern world “after Auschwitz.”¹³ Agamben asserts that the biopolitical space of Auschwitz was extreme to the point of defying ethical categories. Thus, existing ethical categories in the Western mind totally collapse and are insufficient to respond to the Holocaust.¹³ As Ms Melzer describes in her narrative, the sole explanation given to her for her unimaginable suffering is that she is “not in Holland” but “in a Block where these experiments are done.”¹ Thus, according to the authoritative voices in the setting, she has entered a radically different biopolitical space where such activities simply occur naturally, and no further explanation is needed. In her narrative, “Holland” becomes a metaphor for a now invalid biopolitical space in which she was deemed human and ethical categories of right and wrong existed. In the collapsed moral universe of Auschwitz, her status as a human being and the salience of previously held ethical categories have entirely disappeared.

What can one say, when confronted with narratives of radical violence against women

carried out in a systematized fashion by prisoner nurses? Were ethical choices, as understood in our contemporary context, even possible for them? Agamben^{13(p13)} warns against a response of complete mystification (ie, that it is entirely unknowable) that can lead to a sense of nihilism and apathy. Instead, Agamben asserts, the ethics that remains after Auschwitz is an ethics of testimony.^{13(p13)} The fundamental task of such an ethics is to bear witness to suffering. Central to an ethics of testimony is the task of repeating narratives that reflect the Nazi attempt to reduce the human to a mere biological substance, with the conscious teleological purpose of preventing such a biopolitical space from being created again.

IMPLICATIONS FOR CONTEMPORARY NURSING

If, as Agamben suggests, the ethics that remains “after Auschwitz” is an ethics of testimony, the publication of Holocaust narratives in major nursing journals for our students and colleagues becomes an essential moral duty. It has taken the better part of 50 years for the nursing discipline to begin substantial research into the participation of nurses in Nazi atrocities. But the above narratives that describe the involvement of prisoner nurse in unthinkable violence may also constitute an important sign in a postmodern, semiotic sense to nurses in the contemporary political environment. Reports of events within the biopolitical space of Abu Ghraib prison in Iraq¹⁵ remind us of the very real possibility that relational realities within such spaces can rapidly devolve into a “collapsed” moral universe. As Georges¹⁶ notes, to the extent to which contemporary nursing is willing to engage in an uncritical acceptance of ideology, the potential for the perpetration of suffering—and a subsequently collapsed moral universe—exists. The narratives from Block 10 of Auschwitz stand as a sign and a warning that, within recent history, nurses have been caught up in such a collapse.

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