Introduction

Center for Medicine after the Holocaust (CMATH) is an international group of academics, clinicians and educators interested in both the education of health professionals, and the history of human rights (http://www.medicineaftertheholocaust.org/). Its mission is to “challenge doctors, nurses, and bioscientists to personally confront the medical ethics of the Holocaust and to apply that knowledge to contemporary practice and research”: Two of the authors of this paper, LS and SB are members. The American and Israeli groups of CMATH are undertaking a survey to find if and how the Holocaust is taught in American and Israeli medical schools. We decided to do a similar survey of Australian nursing, midwifery and medical schools and this brief report presents the findings of our initial pilot study, which will be the basis for an in-depth examination of the topic.

Background

Known predominantly today as the “Holocaust” or the “Shoah”, a systematic and bureaucratic process of killing was implemented by Germany’s Nazi Party over a period of almost a decade (the majority of the genocide was carried out between 1941 and 1944) (Roskies & Diamant, 2012) Driven by the ideological belief that non-Jewish Germans were racially superior, the Holocaust culminated in the “Final Solution,” the Nazi policy which sought to remove all “non-desirable” Europeans from the Third Reich. The result was the murder of approximately six million Jews, alongside the death and persecution of many other political...
groups or societal communities who did not conform to Nazi ideology, Jehovah’s Witnesses, Roma, homosexuals, and communists, to name but four. It also meant the “euthanasia” (the word in this context is a misnomer. Euthanasia means “a good death” and there was nothing good about this programme) of many German citizens, Jewish and non-Jewish alike, who suffered mental and physical disabilities (Benedict & Shields, 2014).

While the killing stretched over the entirety of Europe, and to Northern Africa and some of the Arab nations, the majority of the murder was carried out in Eastern Europe, particularly Poland and the Ukraine. Death camps were built in various Eastern European regions, no better exemplified (and later iconicized) than the concentration camp of Auschwitz-Birkenau (Auschwitz II) which was established specifically for the killing of millions of European Jews, murdering as many as six to ten thousand people per day.

The teaching of the Holocaust has long been advocated by institutions dedicated to the memory of the topic, including Yad Vashem in Israel (http://www.yadvashem.org/) and the United States Holocaust Memorial Museum (http://www.ushmm.org/). While courses dealing with this field of enquiry are core subject matter in many European nations and in Israel and America, it is not a focus for most Australian universities, with the exception of university departments such as Monash University’s Australian Centre for Jewish Civilisation (http://artsonline.monash.edu.au/acjc/). However, with time gradually distancing generations from the actual events, there is a need to reiterate the significance of the Holocaust in all education, as it is an event in human history that philosopher Slavoj Žižek (2009) describes as one of the two major turning points in humanity’s ethical composition. The teaching of the Holocaust provides, therefore, not only an historical overview, but it also enables an empathetic understanding of the trauma and suffering inflicted on millions due to the implementation of one particular ideology.

Health professions were complicit in the Holocaust. There is a large body of scholarship about the role of doctors (Weindling, 2004; Friedlander, 1995; Schmidt, 2008; Rubenfeld, 2010), but the role of nurses and midwives (who were just as guilty as their medical colleagues, and in much bigger numbers) has, until recently, been overlooked (Steppe, 1992; Benedict & Shields, 2014; Lisner & Peters, 2014). The actions of these health professionals led to the development of the Nuremberg Code for Research Ethics (Annas & Grodin, 1992). Human rights abrogations, which so characterised health care in the Nazi era, are important considerations for human rights today (Foth, 2013) especially in Australia, where Aboriginal and Torres Strait Islander health is still affected by the human rights abuses such as the “Stolen Generation”, which saw children of Aboriginal descent forcibly removed from their parents to be brought up in non-Aboriginal families (Australian Human Rights Commission 1997).

Teaching the Holocaust can be a platform for teaching health professions about ethics and human rights (Ben-Sefer & Sharon, 2014). We aimed to see if, and how, the Holocaust was taught in nursing/midwifery and medical undergraduate courses in Australian universities. The findings will provide a base for further research about its perceived relevance, and for development of specific education programmes for use in Australia.

**Methods**

**Aim**: to ascertain whether or not the Holocaust is taught in nursing/midwifery and medical school undergraduate subjects in universities in Australia.

**Research questions**:  
1. Is the history of the Holocaust taught in any way in undergraduate nursing/midwifery and medical education in Australia?  
2. If yes, how and where in the curricula is it taught?

**Data collection**

We found the names and email addresses of undergraduate course co-ordinators at every nursing/midwifery and medical school in Australia from their respective school websites. Figure 1 shows the email that was sent. All who responded chose to reply by email. As confirmed by the Townsville Hospital and Health Service Human Research Ethics Committee, ethics approval was not required as our question was one which any prospective student could make about the content of undergraduate courses.

**Results**

We sent 49 emails to undergraduate course co-ordinators, 31 to schools of nursing/midwifery, 18 to medical schools. Two weeks later we sent a reminder to those who had not responded. Table 1 shows the response rates. In total, 12 of the nursing/midwifery schools did not reply, nor did 14 of the medical schools. The total response rate was 43%.

Of the 31 who replied, two nursing/
midwifery schools and one medical school taught the Holocaust as a direct topic in at least one lecture. Six nursing/midwifery schools and two medical schools addressed the Holocaust in reference to the development of the Nuremberg Code and research ethics. No schools in either discipline included a whole subject on the Holocaust, or the role of health professionals in it.

**Discussion**

The Holocaust and the Nazi era has had a profound effect on human rights, and for the purposes of this project, on the development of nursing (Benedict & Shields 2014), midwifery (Lisner & Peters 2014) and medicine (Weindling, 2004; Schmidt, 2008) as disciplines. The egregious acts surrounding the medical experiments led directly to the development of the whole emergent discipline of bioethics, and research ethics within that (Foth, 2013). While medicine has borne the brunt of scholarship and consequent blame (Weindling, 2004; Friedlander, 1995), nurses (Steppe, 1992; Benedict & Shields, 2014) and midwives (Lisner & Peters, 2014) were just as culpable. Hence it is important that the Holocaust is taught in nursing/midwifery and medical curricula, because, as with all history, unless it is taught (and remembered) there is always a risk that history will repeat itself.

Although, upon initial inspection, it would seem that the lessons from the Holocaust were time- and site-specific, this is not true and today’s health care practitioners need to know the lessons of the Holocaust before they proceed down the road of assisted suicide, euthanasia, and genetic selection (Benedict & Shields 2014). With the ability of neonatology to keep the smallest of infants alive, is it right or wrong to do so? Do parents of an extremely premature infant really have informed consent when asked about extended life support for their baby? Would the residual guilt of saying “no” be too much? Do nurses and doctors who are asked to help a dying patient obtain the necessary resources to end their suffering fully understand the implications of what they are doing? Many of the nurses of the so-called Nazi “euthanasia centres” described the killing of their patients as “ending their suffering” (Benedict 2014). Is this the same thing? In 2014, Belgium extended its “euthanasia” laws to include parental consent for the death of their infants or children. To see one’s child suffer must be an unbearable burden. To have it ended by an induced death cannot be a lesser one.

Modern laws have indeed led us to reflect on the lessons of the Holocaust and the importance of including these lessons in the curricula of today’s health care professionals so that they can see the impact of these actions. How can one make policy, law, and professional practice decisions without knowing the history?

Health discipline curricula are always very crowded, especially with developments in knowledge, technology, legal requirements, and policy around the use of all that is being developed and changed. It is difficult to convince academics and teachers about the value of teaching something that happened over 70 years ago, but we contend that this history is just as important as any knowledge about drugs or treatments.

**Limitations**

This was a brief survey to ascertain if the Holocaust and its implications were taught at all in nursing and medicine in Australia. We did not differentiate between nursing and midwifery because in Australia, most of the schools for these are taught in combined schools. In the proposed broader study we will be able to separate out the two professions. The study used a simple question sent by email, and less than half responded. This has not elicited any in-depth information about the way ethics, or research ethics are taught, nor about how educators in nursing/midwifery and medicine in Australia perceive the importance of teaching about the Holocaust. We used email correspondence only, and it is possible that direct conversation may have yielded more information. We did not ask about other historical events which could legitimately yield information about human rights abuses in health, because the Holocaust is a singular and sentinel event in the history of the world (Rubenfeld & Benedict 2014), and as such should be the starting point for education about health professionals’ involvement in human rights abuses.

**Implications for learning and teaching**

The Holocaust and the roles of nurses, midwives and doctors in the Nazi era and subsequent human rights abuses need to be taught to all health professionals, either as a stand-alone subject, or as part of the history of the respective subjects, particularly given the history of human rights in the context of Aboriginal and Torres Strait Islander peoples.

In crowded curricula, history is often overlooked but unless professions acknowledge their history by giving it a prominent place in teaching and learning, then the same things can happen all over again. While curriculum developers might argue that it is not possible to fit in a whole subject on history, most subjects could be taught with history as their beginning reference point. This is particularly important for subjects like health and research ethics, and the involvement of health professionals in the crimes of the Nazi era is vital for inclusion.

**Conclusion**

The Holocaust stands as a sentinel event in world history and the egregious medical experiments conducted during that time were the springboard for the international effort which saw the development of the Nuremberg Code for Research Ethics. In many countries, including Australia, nursing, midwifery

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Table 1: Response rates

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<thead>
<tr>
<th></th>
<th>Emails sent</th>
<th>Replies (%)</th>
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<tbody>
<tr>
<td>Nursing/midwifery schools</td>
<td>31</td>
<td>17 (55%)</td>
</tr>
<tr>
<td>Medical Schools</td>
<td>18</td>
<td>4 (22%)</td>
</tr>
<tr>
<td>Totals</td>
<td>49</td>
<td>21 (43%)</td>
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</tbody>
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and medicine undergraduate education programmes teach about the Nuremberg Code in course content about research and its ethics.

However, few teach about the Holocaust itself. On the premise that the respect for human rights is an integral part of nursing, midwifery and medicine philosophies, we planned to find out if and how the Holocaust, which saw a terrible destruction of human rights, was taught at undergraduate level in Australia. This paper described the pilot study on which further research will be based. Using email and university web pages we found that of the course co-ordinators who replied, few described nursing/midwifery or medical courses that taught the Holocaust as a direct topic. For most it was taught as the turning point from which research ethics became codified.

The pilot study confirmed that this is a topic which requires further examination and our next step is to undertake a study about its relevance to nursing and midwifery education in Australia today. In addition we will link with CMATH colleagues who are planning similar research in their countries.

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