

## Johannes Heinrich Schultz and National Socialism

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**Abstract:** *Background:* Johannes Heinrich Schultz (1884–1970) established the set of techniques known as “autogenic training.” From 1936 until 1945 he worked as assistant director of the Göring Institute. His role during National Socialism has been underestimated in our opinion. *Method:* We considered Schultz’s academic publications and his “autobiography” from 1964. *Results:* Schultz publicly advocated compulsory sterilization as well as the “annihilation of life unworthy of life” and developed a diagnostic scheme which distinguished between the neurotic/curable and the hereditary/incurable. In fact, this classification was then employed to decide between life and death. In order to justify the “New German Psychotherapy” alongside eugenic psychiatry, Schultz carried out degrading and inhuman “treatments” of homosexual prisoners of concentration camps who were in mortal danger. *Limitations:* This study was based on written documents. We were not able to interview contemporary witnesses. *Conclusion:* By advocating compulsory sterilization and the “annihilation of life unworthy of life” and by the abuse of homosexuals as research objects Schultz violated fundamental ethical principles of psychiatry.

### Introduction

Johannes Heinrich Schultz (1884–1970) developed the set of techniques known as “autogenic training” or “self-hypnosis,” a relaxation technique which he first published in 1932. There are many parallels with progressive muscle relaxation which was developed independently by the American physician Edmund Jacobson. Schultz contributed substantially to the establishment and institutionalization of psychotherapy in Germany after World War II. During National Socialism, Schultz held key positions at the German Institute for Psychological Research in Berlin, the so-called Göring Institute. The director of the institute was Matthias Heinrich Göring (1879–1945), a cousin of the “Reich Marshal” and chief of the air force Hermann Göring. During 1909 and 1910 Matthias Heinrich Göring had been a medical assistant at Kraepelin’s psychiatric clinic in Munich. From its foundation in 1936 until 1945 Schultz was assistant director of the Göring Institute, which was classified as “important for the war” (1). Its budget was even increased in the last years of the “total” war (2). The German Labor Front contributed the major portion of its financing from 1939 to 1942; in addition it was supported financially by the German Air Force (3). The aim of the Göring Institute was the development

of the so-called “New German Psychotherapy” (“Neue Deutsche Seelenheilkunde”) which was to have been “purified” of the “Jewish” psychoanalysis considered too expensive and too long-term to be an effective tool on a popular basis. The term psychoanalysis was abandoned. Freud’s works had been burned in May 1933. The intention was to combine elements of the three major schools of psychotherapeutic thought: the Freudians, Jungians and Adlerians. The specific innovative elements of the “New German Psychotherapy” remain unclear. Its lack of substance is not compensated by a mixture of psychoanalysis, an “intuitive” understanding of human nature, and political attitudes (2). Director Göring belonged to the Adlerians. Famous representatives of the Freudians were Harald Schultz-Hencke and John Rittmeister. John Rittmeister, the director of the institute’s outpatient clinic, and his wife were arrested on September 26, 1942, by the Gestapo and charged with being members of the “Red Orchestra,” an espionage network that supplied information to the Soviets. Rittmeister was condemned to death and was executed at Plötzensee Prison on May 13, 1943. Schultz adhered to none of the three major schools of thought; he belonged to the “independents.” He emphasized the importance of inexpensive, short-

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term therapy, which he specified could legitimately include advice, discussion, instruction, enlightenment, encouragement, reassurance, hardening [“Abhärtung”], exercise and prohibition (3, p. 74). Schultz, especially interested in suggestive procedures like hypnosis, developed his own method of autogenic training (self-hypnosis). He was interested in the so-called “small psychotherapy,” a simple and short mode of psychotherapy that every doctor could be taught without needing to specialize in psychiatry.

Biographical reconstruction efforts are particularly difficult in the case of people who held an office during National Socialism. Regarding Schultz, additional research is especially important. The relevant monographs (2, 3) and a thesis (4) support the notion that Schultz was a “clever opportunist” who only paid lip service to the Nazi regime and who even protected homosexuals. In order to appropriately appreciate Schultz’s role during National Socialism, it is necessary to consider reports from contemporary witnesses and academic publications as well as his “autobiographical” work (5). In particular, one must be aware of his professional and political intentions, which were closely linked to his personal career ambitions. In 1933 Schultz had suffered some harassment because his first wife was Jewish. To deflect such attacks he joined the Nazi Motor Corps (“Nationalsozialistisches Kraftfahrerkorps,” NSKK) and remained a member until it was taken over in 1935 by the SA. According to his Reich Physician Chamber file, he never joined the party, remaining only a candidate. Geoffrey Cocks emphasizes Schultz’s “expertise at political and professional survival” (3): “Whatever advantage he sought for his person was always connected to advantage for his profession.” Cocks reports that Schultz regularly snapped “Heil Hitler” over the telephone. In summer, 1941, Schultz took part in a meeting of the advisory board of the society of German neurologists and psychiatrists in Tiergartenstrasse 4, which was the headquarters of the “euthanasia” program (Action T4; 6). Schultz represented a non-mainstream scientific method, supporting the so-called “New German Psychotherapy.” This meant it had to deny its roots in psychoanalysis in order not to be regarded as a “Jewish source of income from hereditarily handicapped people” (5). It was Schultz’s greatest concern to legiti-

mize this outsider method alongside the predominantly eugenics-orientated psychiatry, as well as to establish it institutionally. Schultz, therefore, was under pressure to succeed and to justify his method. He was dependent on successes to verify the effectiveness of psychotherapy.

### Compulsory Sterilization

The “Law for the Prevention of Hereditarily Diseased Offspring” (“Gesetz zur Verhütung erbkranken Nachwuchses”), proclaimed in 1933, required physicians to register every case of hereditary illness like mental retardation, psychiatric and neurological disorders. More than 200 eugenic courts were created as a result of the law. It is estimated that over 400,000 individuals had been sterilized by the end of World War II.

In the first years of National Socialism, Schultz publicly showed allegiance to the ideas of National Socialists. In 1935 he published his essay, “Psychological consequences of sterilization and castration among men” (7), in which he advocated compulsory sterilization for men on the basis of the above-mentioned “Law for the prevention of hereditarily diseased offspring.” This law served Schultz as a basis for defining the purpose of the “New German Psychotherapy” (7): “In case sterilization is necessary, for instance because of hereditary diseases, intensive psychotherapeutic aid has to begin in order to avoid mental disasters. The more a person is neurotic, the less the thought of the species and the people’s sacrifice protects him from the outbreak of severe anxiety and depression coming from his deep conflicts and the unconscious. Bringing these people to a right and deep understanding of every German’s duty in the New Germany, such as preparatory mental aid and psychotherapy in general and in particular for persons to be sterilized, and for people having been sterilized, is a great, important and rewarding medical duty. Also, to do away in difficult cases with inhibitions that prevent a neurotic from the lively participation in everything great and real with the help of a special psychotherapy can be seen as such an important and rewarding duty.” According to Schultz, “the care concerning eugenic hygiene and the psychotherapeutic building up of the personality are inseparable confederates” (7).

Also in 1940 Schultz expressed his agreement with the “law for the prevention of hereditarily diseased offspring” in his “diagnostic scheme” (8): “There is a hereditary form [of epilepsy], which is liable to the law for the prevention of hereditarily diseased offspring for the blessing of our nation, just like hereditary mental deficiency.” As late as 1952 Schultz denied persons with mental retardation their human dignity. His book “Organic Disorders and Perversions in Love-life” (9), published in 1952, deals with “hereditary inferiority” and “clans of mental defectives [‘Schwachsinnigensippen’] who are a burden on the general public and [...] who could mean a social threat; completely apart from the economic burden for everybody.” The use of typical Nazi vocabulary as well as the dissemination of the Nazi body of thought as late as 1952 give reason to believe that the statements from 1935 and 1940 were not only about opportunistic lip service, but instead were an expression of his fundamental conviction.

### “Euthanasia”

“Euthanasia” is the euphemistic term for the systematic murder of approximately more than 100,000 ill and disabled individuals in Nazi Germany. These individuals were regarded as “human ballast (‘Ballastexistenzen’).” The program was also called “Action T4.” The codename T4 is an abbreviation of “Tiergartenstrasse 4” where the operational headquarters of the program was located. The T4 program developed from the Nazi policy of “racial hygiene,” its aim being the “annihilation of life unworthy of life.” In 1920, Karl Binding and Alfred Hoche published their book, “Release for Annihilation of Life Unworthy of Life (‘Die Freigabe der Vernichtung lebensunwerten Lebens’).”

In 1940 Schultz published his “suggestion of a diagnostic scheme” (8), where he commended Alfred Hoche. Even in 1964 he called Hoche a “wise psychiatrist” (6). In his diagnostic scheme from 1940 Schultz advocated the execution of mentally ill patients (8): “I personally have to align myself with Mr. Hoche for the second time tonight [...], by recalling the ‘annihilation of life unworthy of life’ and by raising the hope that the madhouses will soon become emptied and remodeled according to this principle.”

In his diagnostic scheme, Schultz defined a

prognostically disadvantageous group, the “hereditarily degenerated psychopaths,” as “hereditary and consequently fateful and uncorrectable”: “We are allowed to describe these cases as hereditary mental deformity and [...] with regard to a psychotherapy we are completely helpless. [...] It is about persons who are simply at the mercy of the hereditary bad influences of their family just like the very difficult cases of idiocy and heavy mental deficiency. Hence, any undertaking of a deeper psychotherapeutic fashion is out of the question.” Taking into account Schultz’s professional and strong political ambitions, it makes sense that such a distinction between the hereditary/incurable and the neurotic/treatable seems to be a categorization primarily based on prognostic criteria. This was in line with Schultz’s own interests. His diagnostic scheme enabled him to get rid of the prognostically unfavorable group by declaring the “New German Psychotherapy” not appropriate in this case. So he could delegate these persons to eugenic psychiatry. The consequence was “euthanasia” which was explicitly supported by Schultz. He was completely aware of the fatal consequences of his diagnostic assessment, using the term “death sentence in the form of a diagnosis” (8).

It is of great importance for the conflict between science and politics that Schultz’s nosological entity of the “hereditarily degenerated psychopaths” (8) was lacking empirical evidence. Convincing evidence for a genetic etiology was nonexistent. This is the reason for defending that in this case professional political intentions were in the fore. In our opinion his diagnostic scheme served primarily the purpose of recruiting candidates with a priori better prognoses for treatment at the Göring Institute. However, the fatal consequence for the group with a poor prognosis was “euthanasia.” Schultz accepted this and publicly agreed to the murder of patients with hereditary/incurable diseases.

### Homosexuality

For Schultz the subject of homosexuality was a good opportunity to promote psychotherapy. Schultz’s position was in contrast to eugenic psychiatry. At that time mainstream psychiatry regarded homosexuality as genetically determined, and therefore incur-

able. Schultz, by contrast, constantly opposed any idea of a genetic component to homosexuality, postulating pure psychogenesis (9, 10), and consequently, he asserted that homosexuality was “curable” (9, 11–13). Schultz regarded homosexuality as a perversion, a profound disorder of the entire personality. He speaks several times about “scrubby and stunted forms of personality development” (“Kümm- und Krüppelformen der Persönlichkeitsentwicklung”; 9). Schultz was convinced that homosexual identity was curable psychotherapeutically. In order to substantiate his position and to strengthen the “New German Psychotherapy” alongside the predominant psychiatry based on eugenics, Schultz had to demonstrate concrete psychotherapeutic success.

At the suggestion of the air force (3), research contracts concerning homosexuality existed at the Göring Institute. Felix Böhm, Kalau vom Hofe and Schultz were in charge of these projects (2). The SS cooperated with the Göring Institute; homosexuals were released from concentration camps, transferred to the prison Berlin-Charlottenburg, and were “treated” at the Göring Institute (3). Between 1923 and 1938, 510 homosexuals were “treated” at the Göring-Institute; 341 of them were said to be “cured” (3).

A “case report” published by Schultz in 1952 shows how degrading and inhuman such a “therapy” had been. Schultz describes the case of a 21-year-old SS man who had been sentenced to death because of his homosexual acts. A Gestapo member was said to have informed the Göring Institute about the young man. After that the young man was officially under supervision of the Göring Institute. Schultz refers to problems in the initial stage of psychotherapy: “At first it wasn’t easy to get into a good human contact with the extremely mistrustful young man who had been completely crushed by his fate. He was afraid of being sent to a lunatic asylum, being castrated or being used for some experiments by the ‘alienist.’ [...] When he found out that in the years before the majority of the homosexuals who were close to him were in concentration camps, that some of them had committed suicide, he was shaken severely” (9). After only 30 sessions within a period of three months Schultz believed the young man to have been “cured” of his homosexuality. He was forced to dem-

onstrate his putatively changed sexual orientation in an inhuman way (9): “With the consent of the detention office, X could go to a prostitute after approximately a 1/4 year where he was, at 22, completely and with pleasure potent, for the first time in his life, so that — although the guards with rifles stood in front of the door and he was aware of his extremely life-threatening situation — he could be together with her several times.” The “court cashier’s office” made the “payment” to the prostitute (9). As to the further fate of his “patient,” Schultz reports (9): “The death sentence was cancelled and X was called up for service in a probation company, in the course of which in all probability he met his death in the war.”

Locket points out (2, p. 225) that despite the inhuman and degrading practice, this “patient” escaped the concentration camp due to Schultz’s treatment. Paradoxically, Schultz’s practices in fact may have led to the saving of an unknown number of homosexuals. However, as Schultz himself says in his “case report,” “successfully” treated subjects were sent to the front, where they most probably were killed in action.

This case report shows that quickly presentable success was Schultz’s primary aim. Scientific concepts which had been presented by him before were now flouted for obvious opportunistic reasons. Schultz treated his “patient” in spite of ongoing proceedings. Several years before, he had strictly refused such a procedure for methodological reasons. Also the short-term therapy in the reported “case” is contrary to his view of homosexuality as a “basic neurosis,” deeply rooted in character/personality. For such cases he deemed a longer period of treatment necessary, lasting over several years (11). It seems probable that only prognostically favorable candidates were recruited for a “therapy” at the Göring Institute.

The assumption that Schultz supported homosexuals for altruistic reasons and that he intentionally prevented them from being sent to concentration camps using his powerful position seems implausible when his negative attitude toward homosexuals is taken into account. In 1940 Schultz published his essay, “Genetic Biology and Racial Anthropology” (14), in which he conjures up the demonic picture of homosexuals as a “clique,” as a “state within the state.” Homosexuals are said to be “shady characters corrupting the morals of the youth”

(“Lichtscheue” and “Jugendverderber”); they are regarded as persons who are “harmful for the community because of their failure to procreate” (“durch Zeugungsausfall gemeinschaftsschädlich”). “Because of the weak will for a treatment it is frequently necessary to make use of castration instead of psychotherapy.” Jurists and physicians should “draw the attention of persons who do not yet feel ready or proper for a volunteer castration to the possibility of a psychotherapeutic treatment.” Also in his book, “Organic Disorders and Perversions in Love-life” (9), Schultz wrote that “perverts” were “prone to revolutionary thoughts in their active supporters.” Homosexuals pursued a “tendentious propaganda,” Schultz warned, with an emphasis on the “great dangers of such groups for the community and especially for immature persons.” “Rightly, the community fears ‘infections’ in the mental surroundings of perverts.” Accordingly, he was convinced that a “really sufficient protection of ‘immature and half mature persons’ against homosexual seduction” is an “urgent requirement for the preservation of health” (9).

As can be verified (11, 13), as late as 1967 Schultz emphatically advocated Paragraph 175 StGB (StGB means penal code, “Strafgesetzbuch”). Paragraph 175 was a provision in the German Criminal Code from 1871 to 1994 making male homosexual acts a crime. In 1935, the Nazis broadened and tightened the law. The Gestapo could take male homosexuals into preventive detention (“Schutzhaft”) of arbitrary duration. Many homosexual men were sent to concentration camps, where the majority of them died. On November 15, 1941, Hitler decreed the death penalty for homosexual members of the SS (3, p. 208). In post-war Germany persecution continued: in 1945, when the concentration camps were liberated, homosexual prisoners were not freed, but were instead forced to serve out their sentences under Paragraph 175. West Germany retained the Nazi amendments to Paragraph 175. In 1969, the government eased Paragraph 175 to an age of consent of 21, which was lowered to 18 in 1973. Paragraph 175 was finally repealed in 1994.

## Conclusion

Johannes Heinrich Schultz promoted the “New German Psychotherapy” and developed “autogenic

training.” He had strong professional and career ambitions. It was Schultz’s greatest concern to legitimize psychotherapy alongside eugenic psychiatry and to institutionalize it. To justify his method, Schultz was dependent on successes demonstrating the supposed effectiveness of his non-mainstream method.

In our opinion, regarding him as a “clever opportunist” who only paid lip service to the Nazi regime underestimates his influential and prominent role during National Socialism. While Schultz was assistant director of the Göring Institute from 1936 until 1945, he publicly advocated compulsory sterilization as well as the “annihilation of life unworthy of life.” He developed a diagnostic scheme which distinguished between the neurotic/curable and the hereditary/incurable. It is very likely that the main purpose of his diagnostic scheme was to recruit patients with a favorable prognosis for treatment at the Göring Institute. Without sufficient empirical evidence Schultz declared the prognostically unfavorable group as hereditary/incurable, according to which the “New German Psychotherapy” was not appropriate. We speculate that Schultz’s diagnostic scheme served primarily his own purposes and professional ambitions. It enabled him to select prognostically favorable cases for psychotherapy. The group with poor prognosis was left to the Nazi “euthanasia” program. Schultz was completely aware of the fatal consequences of his diagnostic scheme. He used the term “death sentence in the form of a diagnosis” in this context, publicly advocated the “annihilation of life unworthy of life” and praised Alfred Hoche.

In cooperation with the SS, Schultz performed degrading and inhuman “treatments” of homosexual prisoners of concentration camps who were in mortal danger. Schultz reported the “case” of a young man who was forced to demonstrate the supposed change of his homosexual orientation after treatment by having sexual intercourse in a life-threatening situation with armed guards standing at the door. This inhuman and degrading practice violates basic ethical principles of psychiatry. It cannot be ruled out that due to Schultz’s procedure an unknown number of homosexuals were in fact released from concentration camps. However, as Schultz himself points out, “successfully” treated subjects were sent to the front where they were most likely killed in ac-

tion. Taking into account his continuous and emphatic public condemnation of homosexuality, it seems highly unlikely that Schultz primarily intended to protect homosexuals from concentration camps. As late as 1967, Schultz emphatically advocated Paragraph 175 of the German penal code, which made male homosexual acts a crime. The Nazis had tightened this law in 1935.

In conclusion, by advocating compulsory sterilization and the “annihilation of life unworthy of life” and by abusing homosexual prisoners of concentration camps as “research objects” for his own professional purposes and ambitions, Schultz violated fundamental ethical principles of psychiatry.

### Acknowledgements

We wish to express many thanks to Axel Gelfert, who carefully read the manuscript and provided us with some helpful details.

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