

FEATURE

CHRISTMAS 2014: IN LOVE AND WAR

Don't look away now

What should be the guiding principles in deciding the journal's coverage of "difficult" topics, wonders
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Between qualifying as a teacher and getting her first job, my aunt, Margaret Milner, edited her local newspaper, *The Weekly News Broome*. "Newspaper" may be a slight exaggeration for a set of duplicated pages stapled together. Nevertheless, it read like a regular newspaper, with national and international news stories jostling for attention with items of more local interest—horse races, murders, tide times. My guess is that my aunt "sourced" her news stories from newspapers begged and borrowed from passengers on the ships that stopped at Broome, an isolated port on the northwest coast of Western Australia.

Leafing through the papers in Broome's Historical Society and Museum a few years ago I was struck by this story that appeared in the newspaper during my aunt's editorship:

Nazi's control increasing

The Governments of Saxony, Bavaria, and Baden, the three states in the south and south west of Germany, have resigned and the Nazis have gained control of these states.

The Nazis are still bitter in their offensive against Jews and Communists, many of whom show traces of beatings and are hastening out of Germany. The Communist members of the Reichstag will not be permitted to take their seats but will be confined in concentration camps.¹

It was dated 15 March 1933, six weeks after Hitler's seizure of power.

My discovery among the manila folders in the museum wasn't long after the publication of Daniel Goldhagen's controversial book, *Hitler's Willing Executioners*, which explored the complicity of "ordinary" Germans in what was being done in their name.² How had my clear eyed aunt registered what was happening 8500 miles from her home town? And what, I wondered, had my own publication said about Germany between Hitler's rise to power and the outbreak of the second world war? After all, Germany is only 275 miles from Tavistock Square as the crow flies.

The digitisation of *The BMJ's* complete archive made answering this question easy. But the yield turned out to be surprisingly

poor—one small series of articles on the plight of emigrant Jewish doctors and another from which you could glean other evidence of the rise of Nazi ideology.

The BMJ's coverage began in April 1933, with the mostly sympathetic response of the BMA's Medical Secretary to inquiries about the prospects of Jewish doctors from Germany practising in Britain.³ More than three years passed before the next, oblique mention of this subject—a two sentence news story reporting the absolute and relative decline in the number of Jewish doctors in Berlin.⁴ Then in July 1938 the journal reported a flurry of parliamentary activity, beginning with the ministerial reply that just 185 refugee doctors and oculists from Germany had been admitted to the medical register since 1933.⁵ Home Secretary Samuel Hoare said that he had conducted "discussions with representatives of the principal medical organisations, who agreed with him that discrimination [against refugee doctors] must be exercised."⁶

A fortnight later *The BMJ* published a bald translation of the *Reichsgazette* of 3 August, with its "decree depriving all Jewish doctors in Germany of their permit to practise medicine in that country and Austria with effect from September 30 next . . . Henceforth no Jewish practitioner deprived of his means of livelihood will be allowed to re-enter the profession."⁷ No commentary was provided other than to mention that Vienna, where 50% of practising doctors had been Jewish, would be hardest hit.

Rise of Nazi ideology

Similarly free of comment was a note about Germany's impending Law for the Prevention of Hereditarily Diseased Offspring, which came into force in January 1934.⁸ The law allowed for the enforced sterilisation of those with a high probability of having children with severe hereditary physical or mental illness. In March 1934 the journal published a summary of a fairly measured response to the act by a German psychiatrist, which had originally appeared in the journal's German counterpart, the *Klinische Wochenschrift*.⁹

In July 1937 the journal covered a report on physical education in Germany based on a visit by a delegation of English and

Scottish education officials.¹⁰ Hitler Youth and the Napoli Schools are mentioned. The schools are described as being “drawn up in accordance with the Fuhrer’s own ideas,” where the “last—and avowedly the least important—aim is to give the pupils proficiency in book knowledge and a grounding in academic subjects generally.” The author of the journal’s summary approves of the “pertinent question” raised at the end of the 80 page report: “Is not the present German preoccupation with the subject of physical training likely to go too far, and is there not already a tendency in that country to seek to develop the body at the expense of the mind and to regard it as a mere machine to be kept constantly tuned up to the highest possible pitch of efficiency.”

Two months later came a three page report by the dean of the British Postgraduate Medical School, Hammersmith, on the Third International Congress on Postgraduate Medical Education in Berlin.¹¹ The German hosts used it as a shop window for the changes that had been introduced into German medicine over the preceding years. Reich medical leader, Gerhard Wagner, presented a paper to the conference on the position of the doctor in the new Germany. He said that the doctor’s chief duty was to combat those conditions “which history shows have caused nations to perish—namely: (1) the decline of births; (2) the swamping of the best and most capable parts of a nation by those elements which had no right to existence; (3) the mingling with the blood of a different race.”

The oddest mention of Nazi Germany was a book review published in October 1937, looking at mortality among Berlin Jews in the two triennia, 1924-6 and 1932-4.¹² “In the period 1932-4 suicide had increased among the Jews much faster (almost 50 per cent.) than among the non-Jews.” From this finding “others may be inclined to draw an inference,” wrote the reviewer. But the reviewer drew none and approved the book’s authors for doing the same. What was the reviewer thinking? By 1937 a series of highly discriminatory laws had been passed, fuelling outbreaks of anti-Jewish violence each time.¹³

And that was that, as far as dispatches from prewar Nazi Germany went (apart from a few reports on maternal mortality and infectious diseases). They reveal scrupulous attention to “the facts,” with judgment mostly withheld. I could find no editorials or commentaries decrying what had been so soberly reported. Perhaps the fault lies with Gerald Horner, who was editor of *The BMJ* at the time and has been described by the journal’s historian as being “temperamentally incapable of providing leadership, distrustful of innovation, and reluctant to assume responsibility.”¹⁴

Perhaps no one at the time believed there was much ground for criticism. Antisemitism was rife in 1930s Britain (see Peter Arnold’s account below¹⁵), and Britain had been in thrall to eugenics in the early twentieth century, which provided the rationale for sterilising the unfit.¹⁶ Germany wasn’t breaking new ground with its sterilisation law; before the Nazis came to power 28 US states had compulsorily sterilised 15 000 people, and Sweden, Denmark, and Norway all had sterilisation laws on the statute books by 1934.¹³ If there had been any disapproval perhaps it would have been only of the German tendency to take good ideas too far (as in the example of physical fitness above). The journal seems to have concluded that these were internal matters for Germany to decide and none of its business. Had *The BMJ* spent the 1930s thundering against Germany’s persecution of Jewish doctors and its increasing obsession with racial hygiene would it have stopped the holocaust? Certainly not. But shouldn’t *The BMJ* have been more vocal in its

criticisms of matters that fell clearly within the remit of a general medical journal? Bearing witness is the journal’s sometimes painful responsibility.

That was then, this is now

The days have long gone when the journal carefully picked its way through the events of the day trying to avoid any unpleasantness. We’ve long given up any pretence that untangling medicine from politics is possible, and it’s reassuring to know that less than a quarter of our readers want less politics.¹⁷

But questions of the appropriate amount of coverage of difficult topics haven’t gone away. On some topics—such as Syria—we’re painfully aware of our underperformance. And there must be other blind spots we’re not even aware of. Others lament our overcoverage of some topics, particularly our “bizarre preoccupation with Israel and all it does.”¹⁸

But it’s hard to turn a blind eye to reports such as one on the effects of this summer’s Operation Protective Edge.¹⁹ Coordinated by the World Health Organization, the report begins:

The recent conflict in Gaza severely impacted on the health and wellbeing of the entire population. Large-scale population displacement, shortages of water and electricity, environmental health hazards, loss of income and many more factors increased drastically the vulnerability of the majority of the population at a time when the siege on Gaza and the financial crisis of the government had already left the system on the brink of collapse. The chronic situation of the health sector therefore is a major underlying cause for the impact of the conflict on the health system in Gaza today and unless addressed systematically a recovery of the health sector to a stronger and more resilient health system is highly unlikely.

The direct impact of the conflict led to the loss of life, disabilities, decompensation of chronic illnesses, and severe negative effect on the mental wellbeing of the population.

As the readers’ editor of the *Guardian* recently commented, criticisms about “disproportionate” coverage of the Israel-Palestine conflict, and Gaza in particular, come with the territory.²⁰

As critics of our coverage remind us, many war zones have much higher body counts than Gaza, but body counts alone don’t seem like a good enough metric for deciding coverage. Their use wouldn’t have led to any more coverage of the Third Reich in *The BMJ* in the lead-up to war. Although many Germans died violently at the hands of the Nazi regime in the 1930s, the body count wouldn’t have registered against the body counts of contemporaneous wars—the Chaco war between Bolivia and Paraguay, the Chinese civil war, the Spanish civil war, and the second Italo-Ethiopian war. However, I don’t think the relatively modest body count in prewar Germany gets my predecessors on the journal off the hook for their lack of curiosity and humanity.

Whatever turns out to be the right metric for deciding coverage, I think future generations will judge the journal harshly if we avert our gaze from the medical consequences of what is happening to the occupants of the Palestinian territories and to the Israelis next door.

I wonder what my clear eyed aunt would think.

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