

# New Europe College *Ștefan Odobleja* Program Yearbook 2019-2020



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ALEXANDRU BEJINARIU  
ADRIAN GRAMA  
ALEXANDRA ILINA  
RĂZVAN IOAN  
ANAMARIA IUGA  
LEYLA SAFTA-ZECHERIA  
ANDREI SORESCU  
CĂTĂLINA TESĂR  
ANDREI RĂZVAN VOINEA

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Editor: Irina Vainovski-Mihai

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New Europe College  
Str. Plantelor 21  
023971 Bucharest  
Romania

[www.nec.ro](http://www.nec.ro); e-mail: [nec@nec.ro](mailto:nec@nec.ro)

Tel. (+4) 021.307.99.10, Fax (+4) 021. 327.07.74



## LEYLA SAFTA-ZECHERIA

Born in 1987, in Bucharest

Ph.D. in Political Science, Central European University (2018)

Thesis: *Away towards the Asylum: Abandonment, Confinement and Subsistence in Psychiatric (De-)institutionalization in Romania*

Research assistant, Educational Sciences Department, West University of Timișoara

Scholarships and fellowships:

Visegrad Fellowship, Open Society Archives, Budapest (2018)

Central European University Foundation (2013-2016; 2017-2018)

CEU-IWM Junior Visiting Fellowship, Institut für die Wissenschaften vom Menschen, Vienna (2017)

German National Foundation (2011-2013)

German Academic Exchange Program/ DAAD (2006-2010)

Participated in conferences, workshops, as well as held guest lectures at universities in Brazil, Germany, Hungary, England, Romania, Spain, Czech Republic, Scotland, and Russia

Authored a number of articles and book chapters in the fields of disability,  
education, and human rights

Participated in several international and local research projects in the fields of  
education, especially concerning equality in education (SALEACOM, 2017)  
and participatory action research

# DIVIDED COLLECTIVE MEMORY AND THE JUDICIALIZATION OF (PAST) NECROPOLITICAL PRACTICES AROUND INSTITUTIONS FOR CHILDREN WITH DISABILITIES IN ROMANIA<sup>1</sup>

## Abstract

This paper is an analysis of a recent series of criminal complaints by the Institute for the Investigation of the Crimes of Communism and the Memory of the Romanian Exile regarding preventable deaths in residential institutions for children with disabilities. I contrast the investigations with ethnographic and interview data surrounding one of the institutions included in the trial, as well as archival material. I argue that the criminal complaints have marked a turning point in the process of judicialization of the state socialist past through democratizing victim and perpetrator statuses and set in motion dynamics of cultural memory recognizing the deaths of children in institutions on a local level. Nevertheless, they also obliterate continuities of necropolitical practices in relation to institutions.

**Keywords:** memory, judicialization, disability, post-socialism

## Introduction

The section of the Orthodox Christian cemetery in Siret, where the children and other people who had grown up at the NPI [neuropsychiatric children's hospital] are buried, lies apart from the other sections designated for people of Orthodox faith in Siret. Whereas in the other sections one can see tidily kept graves and marvel or neatly kept metal gravestones, the section pertaining to the once institutionalized children and people stands in stark contrast (see images in appendix).

Most of the section is made up of anonymous graves, the differences between the individual graves are, if at all, so barely perceptible, that it

gives the impression of a mass grave. Every now and then metal or stone crosses mark individual graves, yet most are broken down and one can see the tide of time and neglect that has passed over them.

Only at the entrance to the section that separates it from the rest of the cemetery, one can see a large monument erected recently (since 2018) to the memory of the children who had grown up at the hospital, died and are buried there. Locals say that it was erected by a former nurse from the hospital that had been strongly involved in the processes of inclusion in the community and who received support from transnational volunteers. Nevertheless, local press reports show that it was erected as a consequence of the deaths of the children from the hospital receiving attention in the wake of the launching of the criminal investigation by the Institute for the Investigation of the Crimes of Communism and the Memory of the Romanian Exile (hereafter IICCMER, a government agency involved with researching crimes committed during the state socialist period and initiating criminal trials against the alleged perpetrators) (Monitorul de Suceava, 2018a). Moreover, alongside the erection of the monument, the plot in the cemetery was also cleaned of the growing weeds that had made the few existing crosses and marked graves invisible (Monitorul Suceava, 2018b), and trees were planted (Monitorul Suceava, 2018c). The monument is adorned with plastic flowers and stands in stark contrast to the remainder of the section in the cemetery pointing to a shift in memory practices that occurred well after most of the children and other people buried in the cemetery had already died.

I visited the cemetery in February 2020 as part of my research on how a criminal trial initiated by the Institute for the Investigation of the Crimes of Communism and the Memory of the Romanian Exile (hereafter IICCMER) is changing practices and relationships among the people in Siret that had once grown-up or worked as employees at the neuropsychiatric children's hospital (NPI). Upon this visit, my partner and amateur photographer Mugur Ciumăgeanu documented what we were seeing in the cemetery in a series of images that I have reproduced in the appendix with his permission. The trial was initiated by the IICCMER in June 2018 and concerns inhuman treatments of the children at the NPI hospital during the 1980s. Upon my visit to the cemetery, I was surprised how much of the shifts in interpreting the history and memory of the NPI hospital and its inhabitants and workers were visible in the space of the cemetery –

making it into a veritable *lieu de mémoire* as described by the reputed historian Pierre Nora (1989).

In the following, I will first outline the methodology that underpins the generation and interpretation of the data presented in this paper. In a next step, I will look at the way in which the investigation carried out by the IICCMER addressed the question of the violent past and the deaths in institutions for children with disabilities during the state socialist time. I will problematize the framing of the necropolitical past of these institutions by giving special attention to the place awarded to survivors' voices and to the framing of victims and perpetrators that the investigation produced. I will then look at the way in which these have travelled back into the space of communicative memory surrounding one of the communities where such an institution once existed, namely the town of Siret. Finally, I will look at how complementary to the trial that was initiated as a result of the investigations, andra- and pedagogical interventions could be developed to address the formation of ethical impulses of de-normalization of preventable deaths of children in institutions.

## Methodological Reflections

The present paper is based on ethnographic fieldwork in Siret in 2015 and 2020. 2015 was the year of my extended ethnographic fieldwork in Siret that lasted for several months, and 2020 when I revisited Siret with the specific question addressed in this paper in mind. During my 2020 stay, I conducted interviews and a focus group/conversational interview with several people who had grown up at the hospital, as well as with a now retired carer that had worked at the hospital all her life. During this one week visit in February 2020, I also visited the cemetery in Ruși. My ethnographic stay in 2015 in Siret was pivotal to being able to carry out the present research. On the one hand, the difficulty of establishing a relationship with the interview partners that would allow exploring episodes of violence, but also ambivalent and intricate local social relations that the person is embedded in requires trust that cannot be built on a short term basis. The fact that I knew almost all my interview partners in advance, allowed me to gain an ever more complex understanding of the dynamics involved in the present transformations.

Among these challenges, the most methodologically relevant is that speaking out loud publicly (e.g., on TV) as a former child/ survivor of the

hospital had brought severe criticism from the local community, especially from former workers of the hospital upon those who had spoken up. Those who appeared on TV were discredited in several ways publicly, they were called liars and accused of having received money or objects (like refrigerators) for their inexplicable statements. This made my interview partners very wary of speaking up about their past at the hospital. Those that I eventually came to speak to were alright with speaking to me (and not to anyone else, as they assured me), since they had met and known me previously, and knew that I would take their anonymity as sources seriously. One of my interview partners spoke to me knowing that I am a researcher, and hoping that I could be an expert witness in the trial - a possibility I had not thought about. But there were also people who refused to speak to me, feeling concerned about the consequences speaking out loud could have for them locally. At the same time, the staff were also concerned about speaking to me since it could be to their disadvantage in the present situation. The carer that did speak to me was introduced to me by a former worker from the hospital. She was an outspoken person that felt she did not have anything to fear, since she had already been in retirement for a long time. The fact that my first ethnographic encounter with Siret had happened previous to the trial opening helped to uncover the ways in which the memory of the hospital and the people who had survived it or died there was understood previous to the proceedings of the criminal trial. It offers the possibility to analyze the dynamics at play in the way in which collective memory is constructed in relationship between local memories and national and transnational processes of coming to terms with these memories. Moreover, having got to know the hospital and its past before the onset of the trials helped me as a researcher keep an open mind about vernacular interpretations of the proceedings, since I knew Siret as a community beyond its image as the sight of the “massacre of the innocent”.

Another important avenue for research was understanding the way in which the initiation of the criminal trial had come about. Initially, I had intended to follow the trial proceedings but there was as far as I could tell no progress during the timeframe of my research. I thus analyzed the documents and materials collected by ICCMER in support of the trial concerning the hospital in Siret,<sup>2</sup> as well as one other trial concerning three care institutions for children with disabilities, Cighid, Păstrăveni and Sighet.<sup>3</sup> To better understand the way in which the files on each of the institutions was produced, how the institutions were chosen and how the



trials came about, I interviewed historian Luciana Jinga, one of the experts who had a pivotal role in bringing this issue on the agenda of the IICCMER, as well as in conducting a significant part of the research that went into the files. I analyzed the materials collected in the files, and contrasted them with materials concerning the same or similar institutions that I had collected during a Visegrad fellowship at the Open Society Archives in 2018, as well as with my ethnographic and interview data from Siret.

Unfortunately, time did not allow for implementing the educational interventions that I discuss at the very end of the paper and seeing how this approach to the topic allows for generating new insights about the way in which memory operates collectively on a local level. My conclusions in this field therefore remain as peda- and andragogical methodological suggestions.

## **Divided Collective Memory Practices and the Hospital's Past**

### ***Bio- and necropolitical questions***

In 2020, I decided to revisit Siret and the memories of deaths of children from the neuropsychiatric hospital with the question of understanding the social significance these deaths had for local people (both survivors and others). My interest was prompted by two different interconnected trains of thought.

Firstly, while going through the material generated and gathered during my fieldwork in Siret in 2015 studying how the deinstitutionalization of the neuropsychiatric hospital had arrived in the lives of people with disabilities, I came across what I came to regard as (past) biopolitical (Foucault, 1978, 2003 [1997]) and necropolitical (Mbembe, 2003) practices. My interview and conversation partners, who had grown up in the hospital in Siret spoke of having been given *food from the bucket* until the age of seven, when upon being admitted to the school that was also located on the grounds of the hospital, they started being served three course meals and told that they need to know how to eat with cutlery because one day they will go out into the world beyond the hospital. The hospital (in a movie shot in 1981) also prided itself with its recovery activities, something that was very surprising given its reputation as a place of death for many children with disabilities. The differentiated food associated with school admission status and recovery opportunities of children with disabilities from the hospital

shows how the biopolitical separation between those considered at the time as “recoverable”, thus in need of education, recovery and food, and those considered “unrecoverable”, thus only entitled to a bare minimum, must have operated. The practices worked to separate those whose lives should be actively enhanced and those whose lives could be disavowed, they could be let die. These practices were interconnected on many levels and involved prognostic professional statements of specialized committees (of recoverability or un-recoverability<sup>4</sup>), but as I learned from both carers and survivors through ethnographic interviews, also everyday life explicit or implicit biopolitical hierarchies: aesthetic questions of being ugly as opposed to being beautiful, or being “good” and helping out, as opposed to making trouble for the carers.

The practices underpinning the system could partly also be described with what Mbembe (2003) has called *necropolitics*. Necropolitics (Mbembe, 2003) is a form of politics that allows for the creation of a relationship of enmity that legitimizes certain people to inhabit a positionality of power that entitles them to decide over killing or exposing to death of someone who inhabits a different positionality. In this sense, “unrecoverability” as a professional diagnosis positioned a person outside of the claim to having one’s life fostered, to paraphrase Mbembe (2003), it located the person in a *space of death within life*, where death becomes a real possibility and lies within the freedom of others to act upon one’s life and death. Yet, recoverability operated as a biopolitical category that entitled the bearers to having their lives fostered (biologically, socially and educationally).

I came to ask myself, how and where is this bio- and necropolitical distinction once drawn in the hospital still visible today? How does the fictionalized notion of the enemy (see Mbembe, 2003), that makes necropolitics possible, interact with the possibility of mourning and remembering the dead, as well as with challenging the conditions of possibility of their deaths?

Secondly, in the time that had passed between my fieldwork in Siret in 2015 and my visit in 2020, a significant change in the way in which the bio- and necropolitical past of these institutions was being discussed had occurred in Romania. In 2017, on June 1st, symbolically chosen as children’s day, the Commission for the Investigation of the Crimes of Communism and the Memory of the Romanian Exile/ IICCMER forwarded a file to the Romanian Criminal Authority concerning the deaths of 771 minors in 3 state hospital-homes/institutions for children deemed

“unrecoverable”, followed one year later by a second trial opened for the Neuropsychiatric Hospital in Siret, concerning the deaths of 350 children in the 1980s (of the 1500 children believed to have died in the institution since its beginning in 1956). The bodies of the children buried in the cemetery in the Ruși neighborhood thus had acquired significance as the earthly remains of victims in a criminal trial surrounding inhuman treatments carried out in the hospital in the time from 01.01.1980 and 22.12.1989.<sup>5</sup> I came to ask myself how the relationship with the untimely deaths of the children from the closed hospital were re-inscribed with meaning through the process of investigation, judicialization and criminalization of their deaths and the treatment they have suffered.

### **“The Massacre of the Innocent” – Re-inscribing Deaths with Historical and Legal Meaning**

As we learn from Katherine Verdery (1999), dead bodies have had a significant after-life in the post-socialist memory landscape that operated with reburials and resignifications of deaths. Specifically, when addressing the anonymous dead, Verdery (1999, pg. 20) sees in the reburial or drawing of attention to those whose death was only known to few people close to them a form of repositioning of entire social categories. Thus, the cemetery in Ruși appears as a space in which the death of the children from the neuropsychiatric hospital in Siret re-acquires meaning, repositioning children with disabilities previously deemed and labelled “unrecoverable” within the affective space of the community and of the country.

Yet, the resignification of dead bodies is only one way of dealing with deaths that happened during the state socialist period in institutions for children with disabilities. In this particular case, the resignification of dead bodies appears as a consequence of another framework for problematizing the past in this region, namely that of judicialization (see Grosescu et. al, 2017) and connected to this, that of criminalization (see Constantin, 2019). Often judicialization was carried out through national memory institutes that came to be seen as a characteristic of East European transitions (Baby et. al, 2019, Behr, 2019). Through judicialization national memory institutes in the region, and particularly the IICCMER, also play a central role in the criminalization of the state socialist past (Constantin, 2019). A common feature of this modality of dealing with the past is that it mixes history with justice and politics (see Behr, 2019). Especially history writing

and legal procedures appear as often confounded in the work of these institutes (Behr, 2019).

Very recently the institutional framework of the processes of criminalization and judicialization of the state socialist past in the region (Baby et. al, 2019, Constantin, 2019, Behr, 2019), as well as the transnational and global ramifications of the associated memory processes (Grosescu et. al, 2019, Grosescu 2017, Neumayer, 2017), have received scholarly attention. This literature allows for a sophisticated immersion into the national and transnational drivers of the processes of criminalization, judicialization and cultural memory – but it leaves the local dynamics of communicative and collective memory under-reflected.

To address this absence, I propose to trace the work of judicialization of the state socialist past as it works to change the ways in which groups and collective identities on a local level are shifted and shaped in this process. The process of judicialization that I have chosen to analyze also marks a significant change from the way in which such trials have been carried out in the past, as it involves the democratization of both perpetrator and victim status.

The crimes for which the prosecutor's office was notified through the launch of a criminal complaint involved the deaths of 340 minors (in Siret)<sup>6</sup> and 771 minors<sup>7</sup> (in other three institutions for children with disabilities) ran under the legal framing of inhuman treatments. The investigations were pivotal in drawing attention to the deaths from preventable causes of children in institutions, thus opening up the possibility of publicly discussing the necropolitical practices and violence to which children that were labelled as "unrecoverable" and "deficient" were subjected. It marked an opportunity to discuss the perpetual and systematic marginalization of children and people with disabilities that peaks in such violent manifestations. Nevertheless, this opportunity was not fully explored. This missed opportunity is relatable to the way in which the victims, perpetrators, as well as the forms and drivers of violence have been framed in the investigations – that is why I will engaged with these points at large throughout the paper.

The victims of inhuman treatments were institutionalized children. The victim status of this group is visible in the death numbers that I will come back to in a bit, but also in the title given to the investigation related to one of the criminal complaints: *The Massacre of the Innocent from the chronic neuropsychiatric hospital in Siret*. The word *massacre* in the title involves an intentional character attributing to the (not yet identified) perpetrator

an awareness of the deadly consequences of their actions. Moreover, the “Innocent” appear as clearly separated from the perpetrator in the form of speechless victims characteristic of humanitarian aid framings (see Malkki, 1996).

The intended suspects of the complaint were the employees of the institutions. As the IICCMER representatives remarked at the press conference upon the launch of the first criminal complaint in 2017, the people considered responsible for inhuman treatments were all the employees of the institution, their occupations varied from cleaning staff to heads of institutions (ProTv, 2017). Yet, the investigations were opened in 2017 and 2018 without clear suspects (*in rem*).<sup>8</sup> The reason for this move was that the IICCMER did not have access to all the employee registers of the institutions that were included in the proceedings and they did not want to include as accused only those about which information was available to the institute.<sup>9</sup> To date, not much has occurred in respect to these investigations from a legal point of view, but there are signs that the proceedings will regain momentum.<sup>10</sup>

The variety in occupations of the accused offers an interesting contrast to previous trials initiated by investigations carried out by the IICCMER. The most prominent such instance is that concerning Alexandru Vişinescu, the former head of the Râmnicu Sărat penitentiary, who died while serving a twenty year prison sentence as a consequence of the trial initiated through a criminal complaint by the IICCMER for inhuman treatments inflicted upon political detainees in the late 1950s and early 1960s.<sup>11</sup> The perpetrators in the cases concerning the institutions for children with disabilities are more varied, but at the same time more difficult to trace and identify. The victims are also more vulnerable and their presence in institutions for children with disabilities less easily associable with “Communist” institutions and ideology, since such institutions also existed in non-“Communist” countries across the world.

These specific investigations offer an interesting starting point in throwing light on the question of how local dynamics of communicative memory are transformed through processes of cultural memory with a dimension of judicialization in a post-socialist context. This is the case since as outlined above the past everyday lives of employees in these institutions in the late 1960s through to the very early 1990s becomes sufficient ground for their inclusion as (would-be) suspects in the investigations, if not in the trials. Therefore, the local community around the former institution in Siret, where most people either worked or had

grown up, is involved in the investigations directly as either perpetrators or victims.

### ***Counting preventable deaths***

In order to understand the nature of the judicialization and intended criminalization of the necropolitical past of institutions for children with disabilities by the IICCMER it is useful to have a closer look at the press files concerning the institutions that were made available upon the launching of the criminal complaints.

The files that the IICCMER created on the four institutions under investigation are rather similar. They share introductory historical and organizational sections, as well as a section presenting the numbers of the deaths in each of the institutions, and a section including testimonies (see IICCMER, 2017a, 2017b, 2017c; 2018). The counting of the deaths had been one of the main objectives of the research process in preparing the criminal complaint and consisted of creating a database that could centralize death certificates obtained from local authorities that were in charge of registering the deaths of children from these institutions.<sup>12</sup> As an effect of this *modus operandi*, the deaths of children are discussed mainly numerically in terms of the ages of the children and the registered causes of death, as well as an evolution of the numbers of deaths in each institution throughout the period of time about which the complaint is launched. The period varies from 1987- March 1990 for Cighid, to the full 1966 – April 1990 for Păstrăveni and to 1973 -1991 for Sighetu Marmăției. The complaint about the hospital in Siret only refers to the decade of the 1980s. Other pieces of information, such as the county of origin are also available, which most probably is due to the attempt to integrate all the available information into the description.

From the description of the death numbers we learn that several tens and even hundreds of children had died in each of these institutions and that the most common cause of death was pneumonia. However, in the case of the institution from Păstrăveni pneumonia, although accounting for around 30% of the deaths, is overtaken by malnutrition, that accounts for another 41% of the deaths (see IICCMER, 2017b). Other registered death causes include oligophrenia (an old term for intellectual disability that is an unlikely death cause), without further explanations of associated health conditions. Death causes such as pneumonia and malnutrition accounting for tens of deaths, if not hundreds, makes the necropolitical

nature of the mechanisms operating here clearly visible and identifiable. The death causes also give an indication of the mechanisms through which necropolitics operated – pneumonia has been a curable disease ever since the widespread use of antibiotics and its presence in such high numbers appears to indicate lack of access to medical treatment. Moreover, given the widespread nature of this diagnosis as a cause of death in terms of years and in terms of different institutions, it is clear that these institutions appear to have been systematically deprived of basic lifesaving medical treatment. Moreover, pneumonia, as we read in one of the humanitarian reports quoted in the press release (IICCMER 2017a, Spiegel/ Ariane Barth 1990), may have been due to the lack of heating in these institutions, pointing to a different mechanism that points to the lack of necessary resources for the biological reproduction of life. This mechanism is also visible in the registration of malnutrition as a cause of death. In these instances we see the necropolitical mechanism of depriving children of the necessary resources for the biological reproduction of life operate through starvation and cold deaths.

From the death numbers we can also see that most children died before reaching age four. An account that is confirmed by survivors. In a conversation-like focus group, survivors mentioned to me that in their view the work of carers working with small children was hardest. This was the case since these carers had to feed each of them despite the large numbers of children in their care, as well as witness their unexpected deaths.<sup>13</sup> The necropolitical mechanism identified here points to the lack of human resources necessary to perform care and might help articulate itself with the other two necropolitical mechanisms: lack of possibilities to perform care means not identifying the need to administer medication in the right moment or not feeding someone often enough or the right kind of food in the right kind of way.

The three identified mechanisms operate in such a way as to point to the systematic nature of this necropolitics. Unavailability of medicine or food or even people to administer either are all elements the securing of which goes beyond the everyday life of carers in institutions, it also even goes beyond the acting possibilities of a head of an institution. Who then can be identified as the perpetrator of these preventable deaths?

The next section of the press files released by IICCMER (2017abc, this section is interestingly absent with the file dealing with the hospital in Siret) deals with witness testimonies. Interestingly, these testimonies consist mainly of translations of transnational humanitarian reporting about the

institutions from around 1990 and from the early 2010s (including the statement by a Bavarian politician, previously arrived as a humanitarian volunteer, upon visiting one of the institutions in 2011). These accounts were chosen to convey a similar picture of living conditions and lack of care that lead to severe neglect, as well as preventable deaths. Children are described as covered in their own excrement, compared to (wild) animals, the lack of medical treatment and medical supervision noted, as well as instances of locking children and young people up or putting them in cages (IICCMER, 2017abc). These accounts are generally taken from Radio Free Europe re-airing of humanitarian reports from German and American transnational humanitarian reporting and work to support the claims provided by the statistics concerning death numbers discussed above.

Interestingly, survivors' voices are strongly underrepresented in the files, except for one specific file that addresses the case of Izidor Ruckel (IICCMER, 2017d), and that accompanied the launching of the first criminal complaint. Izidor Ruckel was also present at the press conference held upon the launch of the criminal complaint (ProTv, 2017), and his presence at the press conference had been a key factor in attracting media attention, since he was already well-known in the national media landscape.<sup>14</sup> Izidor Ruckel had spent part of his childhood in the institution in Sighet, before being adopted by an American family. In adult life he wrote his autobiography and starred in a number of reportages surrounding Romanian institutions.<sup>15</sup>

Very valuable as it is, the inclusion of Izidor Ruckel's biography on an equal footing with the reports about the deaths of many nameless others creates a strange asymmetry that he himself addresses in his work: the asymmetry between those of the "abandoned children" who have been given the opportunity for a fulfilling life and those who haven't.<sup>16</sup> Moreover, the testimony of a survivor throws an interesting light on an inquiry that only addresses death – can one be included as a victim of an institution, if one has managed to survive it? This question points to how limiting the framing of the necropolitics in terms of death numbers in the context of the present processes of judicialization of dealing with the past set in motion by the criminal complaints initiated by the IICCMER.

Another important point in the files analyzed here is the legal framing of the preventable deaths of children labelled "unrecoverable" through the necropolitical mechanisms described above, namely that of inhuman treatments. This framing was made possible by its inclusion alongside



genocide and war crimes in the 1968 (Socialist) Criminal Code, with the mention that these types of international crimes were not subject to statutory limitations (see Grosescu, 2017, pg. 6). Incidentally, this was the crime for which Alexandru Vişinescu had been convicted for in 2016 in a trial initiated through a criminal complaint by the IICCMER. This was the case despite the inclusion in 2012 in the Romanian Criminal Code of the legal category crimes against humanity as a replacement of inhuman treatments and relied on the fact that the defendant had the right to be trialed under the applicable legal framing that would offer the most favorable conditions (see Grosescu, 2017).

The framing of inhuman treatments allows for overcoming statutory limitations, such as those concerning the duration of time elapsed since the crime had been committed. Nevertheless, it might create other problems since the framing is strongly associated with conditions of war, although it has been successfully applied in other contexts (such as the case of Alexandru Vişinescu). However, the underlying logic<sup>17</sup> requires the presence of a relationship of animosity/enmity between the state and the citizens/group in concern. The argument in the Vişinescu case had been that “adversarial relations” existed between the socialist state and its political opponents (Grosescu, 2017, pg. 14-15).

In the complaints concerning the institutions for children with disabilities, an argument could be made that a necropolitical regime that positions children labelled as “unrecoverable” and locates their lives as outside of the realm of those deserving to be fostered is “adversarial” (see also Mbembe, 2003 discussed above). Nevertheless, such an argument ties the present question of inhuman treatments in residential institutions for children and bio- and necro-political regimes to much broader processes of denying and demanding the right to life of people with disabilities that range from the eugenic movement to present day responses (or lack thereof) to the Covid-19 pandemic related to care homes and institutions across the globe (American Civil Liberties Union, 2020). It goes way beyond the “adversarial” relations of the state socialist state with children labelled as “unrecoverable”.

The legal framing therefore points to a broader set of questions concerning the limits of approaching (past and present) necropolitical practices in institutions for children with disabilities with the lens of judicialization in relation to the “crimes of Communism”.

***Limits of dealing with necropolitics through judicialization and criminalization***

**Survivors' stories**

As visible above the main sources that were included in the IICCMER's investigation were on the one hand statistically aggregated data on the numbers and causes of deaths and on the other hand accounts by transnational humanitarian volunteers. These accounts were either voiced and printed in the 1990s upon the said "discovery" of these institutions by Western volunteers (a formulation used in two of the five files) or as a memory by the same volunteers voiced in the 2010s. Izidor Ruckel's stance is as described a different, though partial complement. Yet, the fact that his account is not integrated with the file on Sighet, but receives a file of its own is indicative of the fact that survivors' accounts are placed apart (and still barely) within the historical-legal framework of the investigation.

Although in the documentation process of the investigation by the IICCMER, former employees had been interviewed, the same was not true of survivors. Survivors were seen as a problematic category, since their accounts of the carers were unlikely to be black and white – one survivor telling one of the IICCMER's experts that he would not name perpetrators since even if he had witnessed a carer killing another child, in another instance the same carer took care of him and she is the reason why he is now alive.<sup>18</sup>

Survivors' testimonies appear as difficult to reconcile with the framework of a historical investigation preceding a criminal trial and it is here that the epistemological tensions brought into historical research by judicialization and criminalization become apparent: it is hard to ascertain how complex necropolitics operated in and through institutions for children with disabilities, while trying at the same time to divide people into victims and perpetrators. This is the case since in this framework it is impossible to address the fundamental tension and paradox underlying institutions for children with disabilities in this context. Their aim at care and recovery contrasted with the large numbers of deaths and terrible living conditions – yet, these two opposing bio- and necropolitical forces co-existed in the space of these institutions. People serving as workers in these institutions, as well as children confined to them participated in both, as I learned from my interview partners during my 2015 fieldwork. It is therefore almost impossible to retrospectively and analytically isolate the victims from the perpetrators in order to punish the later.

Nevertheless, both survivors and experts that I have interviewed seem to agree that the perpetrator status should be attributed to those with highest responsibility – the heads of the institutions and starting from there downwards to heads of wards, etc. The equation of perpetrator status with organizational responsibility solves the problem of accusing people retrospectively for dealing with a terrible working situation (like caring for twenty or thirty infants alone for several hours, as in the case of the carers), yet, it is also the most difficult to prove. Heads of institutions can only be accused of not having done enough to protect the lives of the children who had died, since they were not directly involved in offering them care or medicine.

Moreover, during my 2015 and 2020 fieldworks, when speaking of the violence that had happened in the neuropsychiatric hospital, former carers and those community members connected to them identified it as a process that happened between the children. Whereas, former children would stress violence carried out by carers or more often being assaulted or physically punished by an older, more privileged roommate and screaming but receiving no support by the carer on duty. Moreover, some in order to avoid punishment would receive the task of keeping a look out so that no carers would come while the older children “punished” others by hitting the soles of their feet with wet sticks or beating them with wet bed linen.<sup>19</sup> Another situation often told is that of receiving only the support of specific carers that one had a relationship with.

The line between victim and perpetrator appears as blurred – whereas it actually should not be. Carers could encourage or discourage violence – but often it appears that violence could be used by older children to discipline the younger ones. Yet, for this former children cannot be held responsible, since they were not legally responsible for their actions at that time.

Yet, memories of past violent relations also affect the way in which and to whom these episodes can be narrated. My first meeting with an interview partner took place in a group discussion with women who had grown up at the hospital. To me the stories of violence told then (in 2015) had appeared shocking. Yet, only much later did I find out that one of the women present had been the “boss” and had engaged in some of the violent episodes narrated. The initial account of her former roommate had then remained incomplete due to the presence of her previous abuser at the interview. Yet, when in a later follow-up interview in the absence of the abuser, I asked her whether she attributes blame to the other woman,

my interview partner replied that she neither blames her nor does she feel spite for what happened “in their childhood”. At the same time, she said she would like to see all the employees convicted of negligence, since they had not been there to protect them. A view held by another one of my women interview partners, but not shared by others who saw the head of the institution as the main perpetrator and showed understanding for the difficult situations that carers were faced with in the hospital.

Another question that points to the limitations of the present approach of the ICCMER to the necropolitical past of institutions is conceptualizing violence and inhuman treatments in terms of preventable deaths. What about other forms of violence that people who grew up in institutions have survived through? Would acknowledging untimely deaths be enough to stop future and present abuse in institutions for children with disabilities? And what dignity is regained in the process of acknowledging these untimely deaths for the survivors of these institutions who have suffered violence but not death?

To illustrate this point, one of my interview partners, who asked to be called Rania, told me the story of her violent experiences at the hospital.<sup>20</sup> When she was a small child, she had lived in the basement of the hospital’s main building. Close to the room for small girls was the room for older boys (ages sixteen and above). When they would leave the room, some would be raped and Rania had witnessed such a rape, causing her to live in fear of it for the rest of her time there. Later, when she moved to a different room, it was so crowded that there was no room for her to sleep in a bed, so she would have to sleep on the floor to avoid being beaten by older girls. She lived through many humiliations, like being told to take off her clothes and stand in the window, so that people living close to the hospital in the community could see her naked body in the window. When she wanted to run, she would be threatened that she would be beaten. The older girls would beat her with rubber bands over her wet feet, or would throw buckets of cold water onto her face. Once they put her body on a bed sheet and four girls held a corner each and propelled her up into the air. They propelled her into the wall and she hit her head so hard that she had an epileptic like seizure. The nurses stopped the girls and Rania received medication for epilepsy for around a month after the episode. She was not beaten by carers, just by the older girls. The carers were always absent, but there was an older girl who would stand up for her and others and stop the violence. She also remembers that her primary school teacher stood up for her against the older girls, once she

had come to be older (around nine) and look prettier. The first time her teacher gave her a hug, she remembers not knowing what to do with her arms and holding them stiffly.

Stories such as Rania's are hard to research since trust needs to be built before such experiences can be articulated in dialogue. Rania was asked by journalists travelling to Siret to speak up as a survivor, but she had declined since they refused to offer her anonymity and insisted she appear on TV. Once articulated, the story shows the huge complexity of violent relations that could, but did not always, result in death - such as the episode when her body hit the wall and she developed a head injury. Is she to be considered a victim of the hospital? And how could this victim status and the violence she was subjected to be acknowledged, especially since she wants to keep what has happened to her silent from all but the people she trusts?<sup>21</sup>

### **Denying having been a perpetrator by upholding the normalization of preventable deaths**

If the victim status is complex, so is that of the perpetrator. The criminal complaint has contributed to a re-articulation of a dynamic that was already in place, namely that of normalizing the deaths that are now disputed. This dynamic is apparent in the narrations of former employees of institutions, whether they fear being accused of inhuman treatments or not.

When asking a former care-worker from the NPI hospital in Siret about whether children had really died there, she replied that dying was not so common, just "who had to die, died" (*cine avea de murit murea*). In her view it only happened to those disfigured and it didn't really happen to the older children. The deaths could be attributed to conditions that the children had been born with. To her the hospital had been a very good place to work, and she remembered the children she had cared about, even loved (the favorites), as well as the good food, but tough working conditions (like needing to manually wash clothes and bed linen) in the hospital.<sup>22</sup>

A similar form of normalizing the deaths is visible around the former children's institution in Cighid. After the first criminal complaint was launched in June 2017, one of the local newspapers<sup>23</sup> from around the former hospital-home in Cighid, tracked down the two doctors (husband and wife) that had headed the institution for children with disabilities from October 1987 to March 1990 (coinciding with the period for which the trial is being opened). The interviewed doctors considered not they,

but the “system is guilty” and both considered nothing could have been done for the children since they were “unrecoverable” and “unwanted by both their families and the state, sent to us to die”. The local paper also quotes the woman doctor saying: “Our purpose was to secure hygiene, food and treatment and supervision so that we are not accused that they died because of us”, their purpose was to make the death of the children “silent” (Bihoreanul, 2017).

The causes of the animal like state that the children were reduced to portrayed in the humanitarian reporting is attributed by the man doctor to the children’s disability phrased as: the children were oligophrenics [intellectually disabled] and could not absorb food. And the “unrecoverability” is seen by his wife as a reason why there was no actual need for recovery activities. Nevertheless, interestingly, the woman doctor admits to having dreamed about the children for many years, despite knowing that she could not have done anything to help them (Bihoreanul, 2017).

The tendency to normalize these deaths, so as to prevent taking on responsibility for them is at the same time a legal defense, as it is an ethical defense mechanism – it erases personal responsibility for furthering the lives of children with disabilities that had once been in one’s care through restating the logic behind the term “unrecoverable” a diagnostic category that denied children a livable future.

Yet, it is exactly here in this ethical realm that an alternative future needs to become imaginable for precisely those people that share in the discourse that normalizes the deaths of children from these institutions. The power of the framing of “unrecoverability” needs to be robbed of its power to normalize preventable deaths and these deaths need to regain their eventfulness as a space of rethinking the ethical relationship between those considered to be disabled and “unrecoverable” and those that are responsible for their care (Povinelli, 2011, pg. 4). Put briefly, their deaths need to be re-inscribed with eventfulness in order to allow for the formation of an ethical impulse that involves the de-naturalization of their deaths. I will return to this point when discussing peda- and andragogical interventions.

### **Necropolitical marginalization of institutionalized children with disabilities**

The criminal complaints launched by IICCMER in 2017 and 2018 related to inhuman treatments that took place in institutions for children

in Romania share one common very significant feature. They all relate to residential institutions that housed children with disabilities labelled as “unrecoverable”. Cighid and Păstrăveni were “hospital-homes for unrecoverable minors” (*cămin-spital pentru minori nerecuperabili*), Sighetu Marmăției was a “home for deficient unrecoverable minors” (*cămin pentru minori deficienți nerecuperabili*) and Siret was a “neuropsychiatric hospital for children” and it also housed children labelled as “unrecoverable”.

Although, the notion of “unrecoverability” was central to the ways in which these institutions were organized and ran, as well as the normalizing dynamics of the violence and depravation that children were exposed to in these places, it is not central in the IICCMER investigations. Upon the launch of the first criminal complaint in 2017, the mention is made that “IICCMER experts had come across numerous cases in which the classification is made erroneously, the children were perfectly healthy or had minor physical and mental disabilities that were completely recoverable.”<sup>24</sup> Although the statement is clearly intended to relativize the way in which the classification of children was made into the category of “unrecoverable”, stating that many of the children were in fact “recoverable”, it nevertheless upholds the ableist classificatory logic. It follows that some children were rightly considered “unrecoverable”, which is immensely problematic from a social model of disability perspective.

It is this classificatory logic of negative future prognosis that is inscribed in the category labelling an individual child as “unrecoverable” that I argue was fundamental in setting in motion the necropolitical mechanisms uncovered by the investigation. It is the present shadow of this label that through such statements inadvertently acts to normalize violence and preventable deaths – some were wrongly attributed this label, whereas (few) others were rightly attributed this label? The underlying classificatory logic remains unchanged from the practices of employees that normalize violence and preventable deaths through the relativizing efforts of the IICCMER since both recourse to the category of “unrecoverability”.

Thus, I argue that this classification needs to be denormalized and denaturalized – making clear that no child or adult individual is “unrecoverable” as such. It needs to be acknowledged that it is the environment that disables the individual and creates barriers to, as well as defines the standards of what we call participation in society. Acknowledging this offers the possibility to denaturalize both the classification and the violence and necropolitical mechanisms that derived from it, making it possible to think of a more inclusive future.

### **The limits of “Crimes of Communism”**

Among the limitations that dealing with the necropolitical past related to the institutions for children with disabilities through the lens of judicialization and criminalization of “Communism” that the IICCMER’s criminal complaints inaugurated maybe the most striking one is the circumscription of preventable deaths of children in institutions to the state socialist period. This circumscription coincides with an increase in the population of institutionalized children after the infamous pronatalist decree 770/ 1966 (on this increase see Jinga, 2011).

Nevertheless, this framing of necropolitical practices directed at institutionalized children and people with disabilities as a problem of “Communism” brushes out of view the continuities with practices of abuse both before the state socialist and the pronatalist period, as well as after it. It neglects the fact that institutions for people with disabilities (like psychiatric hospitals) were infamous places with very high mortality rates from the 19<sup>th</sup> century onwards (Obregia 1905, 1910, Parhon, 1919). Moreover, it neglects episodes of violence against children in institutions (Alexandrescu, 2019), as well as instances of high numbers of preventable or unexplained deaths in institutions close to the present day (Amnesty International 2004ab, Centrul De Resurse Juridice, 2015). This is not to say that institutions do not defer in the numbers of preventable or unexplainable deaths or in the forms of violence practiced within them, but that the problem goes beyond “Communism” and is connected to the systematic exclusion of children and people with disabilities that sometimes has necropolitical ramifications.

Moreover, interestingly the reports that create the fundament for distinguishing between “Communism” as a criminal system against children with disabilities in institutions and “Post-Communism” as a system free from such systematic problems is the myth that the problematic situation in “Romanian orphanages” was discovered by Western volunteers immediately after the revolution and that this discovery put an end to these practices.

### **The discovery of Romanian orphanages by transnational volunteers around 1989/1990 revisited**

Christmas 1989, the moment of the “Romanian revolution”, is widely regarded as the turning point of the bio- and necropolitical regime surrounding children institutions in Romania. A series of transnational video and audio-documentaries circulated in Western European and



US American media that documented the problematic living conditions in what came to be known internationally as “Romanian orphanages”. “Romanian orphanages” were actually mostly residential institutions for children with disabilities that had been entrusted by their families into state care. As I have shown above the notion of “discovery” is also used in the transnational humanitarian reporting substantiating the criminal complaints. Nevertheless, this “discovery” was not as novel as originally apparent, allowing for a finer re-periodization of transnational circulation of information around the end of the Cold War.

„Eine Atmosphäre von Gefangenennagern” / „An atmosphere of prison camps”<sup>25</sup> is the title of a reportage published by a Frankfurt-based visitor to Romania in the January/ February edition of the *Menschenrechte/ Human Rights* magazine. The author had been to Romania in the Fall of 1985 and had accompanied an acquaintance to visit a state care home close to the mountain town of Predeal in the Carpathian mountains, where she was taking care of the formalities related to the death of a resident she had known. After witnessing the poor living conditions and lack of care staff of the elderly home, the two visit a nearby institution for children with disabilities. This institution was severely understaffed with three carers looking after over one hundred children of various ages and with various, mostly intellectual disabilities. The author was shocked by the neglect in which the children were growing up and the apparent resignation of their carers. He also witnessed an episode that apparently determined him to write the reportage: right before making their way back, the two visitors notice one of the carers handing a lofty load to children for them to take to the elderly home. The Romanian acquaintance offers to transport the load in her car and this is how they come to know that it was actually composed of poorly wrapped dead bodies of children that would normally be dragged across the street by older children. In shock, the author thinks about exposing the conditions to the international press but realizes that they seem to belong to the everyday life of these places. Yet, he does resolve on writing for the magazine *Menschenrechte*. The information is picked up by Radio Free Europe and distributed further and we learn from a later report of the same magazine the November-December 1986 issue<sup>26</sup> that the Romanian authorities upon learning of the account increased the surveillance and fencing surrounding care institutions for both elderly and children.

The account that my research in the Open Society Archives<sup>27</sup> in Budapest uncovered is interesting in several ways: First of all, it helps to

re-think the periodization of transnational humanitarian and human rights reporting that conventionally located 1989 as the turning point of the “discovery” of human rights abuses committed in care homes for children in Romania. The report clearly shows that albeit a much more modest, yet, nevertheless strikingly similar transnational flow of information regarding these institutions existed during the Cold War. Moreover, this episode also helps to clarify that it wasn’t the “discovery” of human rights abuses in care homes in Romania by Western observers that brought about the emergence of transnational humanitarian spaces. The emergence of these spaces, as that of human rights scandals was made possible by the reconfiguration of transnational power dynamics between East and West after the end of the Cold War. Put differently, although the report by the West-German author had made it into a human rights magazine, it did not become front-page news. Nevertheless similar news would become immensely important and relevant three years later. At the time of his writing nonetheless, the credibility of his account needed to be validated by the publisher by adding below his account the fact that he is “personally known” by the editing team – since apparently otherwise his anonymous account would not have been taken seriously.

Three years later, around Christmas 1989 the type of account that this magazine put forward develops into a veritable genre of transnational humanitarian reporting, which then informed the investigations of the IICCMER.

Yet, this re-periodization is necessary not only when addressing how these instances had already become known (though marginally) outside of Romania during the state socialist period. Another episode from Siret narrated by a survivor during our conversation in February 2020<sup>28</sup> also helps to substantiate this point by proving that it is impossible to limit the investigation to the duration of “Communism”. The survivor considered that the head of the hospital should be held accountable for his inactions as part of the trial, yet, related his desire for accountability to occurrences in the 1990s: “Yes, I believe [that the head of the hospital should be held accountable] and I would be ready to testify in court against the head [name of the head], he should be held accountable that he didn’t get involved. Americans came to beat up a child. He let an American beat up the child. A former American doctor adopted a child from us [from the hospital]. He took him in to take care of him. One year later, the doctor came back to Romania to visit a boy from the hospital who had beaten up the boy he had adopted. He [the doctor] did not come to hold accountable

those who had been supposed to be guarding that boy keeping him from beating others up.[...] [The head of the hospital] gave an order to the head nurse, the head nurse to the carer on duty. The head nurse took her out of the room and asked who is P. – this is P. . P. was the boy who was taking care of the kindergarten aged children, he would take care of them and rarely would he be guarded by anyone like a carer. So no one would check on him that he doesn't beat up the children. The American came in and started punching P. and talking at him, but P. didn't understand. If I had been P., I would have hit him back, defended myself."<sup>29</sup>

The continuity of violent practices, in which the American volunteer also participated, is not incidental. As the survivor explained the head of the hospital gave orders allowing this abuse and the violence to which the child had been subjected was enabled and not stopped by the professionals involved in his hospital visit. The survivors also linked this to advantages the head may have received from the volunteer, as well as the volunteers "American" characteristic arrogance that allowed them to do whatever they pleased from their position of power. A chain validating violent abuse therefore existed after the onset of transnational volunteering practices and international adoptions and was entangled with these practices. This could be read as a form of post-socialist path-dependency, nevertheless, the main perpetrator that uses the system of abuse is external to the mechanisms of socialist reproduction of violence and therefore locates the episode outside of easy path-dependency based interpretations.

Moreover, locating the problem of "crimes" affecting people with disabilities in the "Communist" period works to silence forms of violence directed at this vulnerable group long after 1989. For example, even recently children are still being subjected to different forms of violence in the protection system (Alexandrescu, 2019) and people with disabilities institutionalized were exposed to much higher mortality rates than the regular population (Centrul de Resurse Juridice, 2015). Episodes such as that from Poiana Mare in 2003/2004 when around one hundred people in a psychiatric hospital with a capacity of five hundred beds died, many of preventable causes such as hypothermia and malnutrition (Amnesty International, 2004ab) show that transition did little to overthrow necropolitical mechanisms in certain care institutions for people with disabilities.

Understanding the problematic framing of violence and death that happens in institutions for people (and children) with disabilities outside of the confines of legally condemning "Communism" and those who

have acted on behalf of “Communism” allows to open up a space of reflection regarding the normalizing dynamics that allow for the continuous marginalization of children and people with disabilities and its necropolitical and violent ramifications what regards care institutions.

Moreover, on a European level, memory entrepreneurs supporting this particular form of indictment of “Communism” have found little recognition for their framing of the past, outside of Central And East European Conservative Members of the European Parliament (Neumayer, 2017). This is due to different collective memory frames existing in relation to the state socialist past.

Nevertheless, the question of coming to terms with the violent and necropolitical mechanisms that have affected institutionalized children (and other people) with disabilities can constitute a relevant memory issue, beyond the reductive and distortive frame of “condemning Communism” on local, national, transnational and global levels. Such an approach would allow coming to terms with both the violence inflicted upon children with disabilities in the past and in the present in order for a more ethical future that recognizes the right to a dignified life and a more inclusive society to emerge. In the final section of this paper, I will explore what I see as the stepping stones for this possibility of crafting a peda- and andragogical response to de-normalizing preventable deaths in relation to disability, but before that I will turn to communicative memory dynamics as visible in the cemetery in Ruși, Siret.

### ***Communicative memory and the consequences of judicialization in everyday life***

In this section, I will look at an unexpected consequence of the initiation of the trial concerning inhuman treatments carried out in the NPI hospital in Siret, namely the redrawing of attention to the section of the cemetery, where the children (and young people) who grew up at the hospital are buried.

#### **The cemetery in Ruși as a lieu de mémoire**

“The cemetery in Ruși is full of children from the NPI [the neuropsychiatric children’s hospital]” said Ștefan,<sup>30</sup> a man in his mid to late twenties, when speaking about the violence that occurred in the previous neuropsychiatric children hospital. The hospital had been closed in 2001, no less than fourteen years before our conversation took place in

2015. Ștefan also remembered witnessing a death at the hospital, where he had spent his early childhood (mostly during the 1990s), as well as a situation in which a nurse was discovered as wanting to hang another child – a deed that was prevented and she was punished only by having money taken away from her salary. Such memories were confided in me by others who had grown up at the hospital, especially as those older in age, yet, the cemetery was rarely so explicitly mentioned during my 2015 ethnographic stay in Siret.

Nevertheless, upon my return to Siret in 2020, the section assigned to the former hospital in the cemetery and the few graves that were identifiable as such had gained a strange form of importance.

Two images (see images in the appendix, especially image 5 and 6) give a sense for the desertedness of the cemetery as a place where the graves of very few of those who are buried are marked – the burials of other hundreds in this plot has left no visible traces. The place of their decaying bodies is anonymous and parallels the uneventfulness of their deaths that impedes the formation of an ethical impulse. The ethical impulse is substituted by a normalizing impulse that attributes “natural causes” to a slow decaying death (see Povinelli, 2011). The children and people buried among many others who had lived at the hospital and now lay in the common plot, resembling a mass grave were subjects whose death could not be mourned, their lives did not appear as grievable and their deaths not as mournable within the community boundaries (Butler, 2003, pg. 20f).

Yet, the hopelessness of the scenery is not unfragmented. It points to cracks in the ethical order and the boundaries of collective memory frames that make up the mournable subject. These cracks are essential for thinking through the potentialities for hope for a different future order of inclusion. Every now and then, a cross, even a name and the date of birth and that of death are visible on the crosses, making the plot recognizable as a place where the dead are buried. Furthermore, transformations in memory practices are also visible in the space of the plot in the cemetery. Close to the monument pictured above at the extremity of the plot that is closest to the rest of the cemetery, there is a small series of graves (see Image 5, in the appendix). Most of them belong to people who had grown up at the hospital, but have died since it's closing in 2001. Their funerals were visited by many members of the community. Among the graves, I could see one of a young man who suffered of a serious illness during my fieldwork in 2015 and who had since then, died. Others buried here

were remembered by my interview partners, who also remembered their funerals. The plastic flower wreaths have been generously put on all visible graves and crosses marking again a sporadic moment of acknowledging the memory of the people buried here.

Yet, not only the plastic flower wreaths mark the fragmentation and transformation of the memory of the deaths of children and people from the hospital. The fragmentation is also seen in the few graves and crosses that can be identified and attributed to deaths that happened as early as the 1970s, or the planting of a now full grown tree on a small grave marked by metal bars. The transformation of memory practices can be seen in the well taken care of graves at the extremity of the plot that belong to people who have died in the previous twenty or so years since the closure of the former hospital. Moreover, the transformation can be seen in the planting of trees and weeding out of the overgrown weeds in the plot that followed the initiation of the criminal trial (see Image 6 in the appendix).

These two forms of transformation are different in their relationship between memory and history pointing to the significance of the cemetery as a *lieu de mémoire* in Pierre Nora's (1989) terms. Pierre Nora (1989, pg. 7f. ) locates *lieux de mémoire* as sites of embodiment of memory in relation to history as a mediating force. The cemetery in Ruși is re-inscribed with meaning through knowledge uncovered by historical research within a frame prone to legal reasoning and criminalization that of IICCMER, which is in turn representative of a broader global and transnational shift towards judicialization of the past (see Baby et al, 2019, Grosescu et. al, 2017). This meaning making is separated from previously dominant memories that circulated in the community and transforms the space of the cemetery.

In the present, after the initiation of the trial, the deaths of the children from the hospital forty years ago lose their triviality and gain an eventfulness for the local community inscribed in the landscape of the cemetery they did not have at the time at which they occurred. This transformation is marked by the appearance of the monument and trees in the space of the section of the cemetery that pertains to the former hospital. The "natural causes" of the deaths of the children are denaturalized by being questioned, opening up a space for ethical reflection and practices of mourning in relation to these deaths.

Yet, this transformation of space is fragmented and partial, as well as subjected to local power dynamics. As is visible in the images of the cemetery (in the appendix) the space of memory remains deserted, the plastic wreaths of flowers hang on crosses without needing or displaying

having received constant care (they are not living flowers) and the anonymity and mass character of the grave or graves is barely challenged creating an incredibly stark contrast to the marble monument and freshly planted tiny trees.

The forms within which this tension is expressed point to its precise locus: in the space of the cemetery we can see the tension between what Jan and Aleida Assman have called cultural and communicative forms of memory (see Assman, 2008). Cultural memory is institutionalized and exists through mediation and objectification in an external symbolic order (see Assman, 2008, pg. 110ff) – cultural memory can be seen in the cemetery in the monument to the memory of the children and people buried in the hospital's plot. Yet, communicative memory is subjected to social groups and interactive socialization processes and therefore operates through the relationships between groups that interact on a daily and local level, in Assman's terms, communicative memory is closest to what Maurice Halbwachs described as collective memory (Halbwachs, 1950). Investigating the communicative memory involves looking at how social groups that are differently positioned by the former structure of the neuropsychiatric hospital in Siret remember the deaths of the children from the hospital that are buried in the plot in the cemetery and is akin to the tensions in survivors' accounts and the normalizing and naturalizing epistemic forces of preventable deaths mobilized by former staff of the institutions.

As Maurice Halbwachs has shown (1950) we consider our own memories of the past from the perspectives of the groups that we socially belong to. Thus memory is a collective as well as individual process and encompasses the to-and-forth movement between the autobiographical memory that is individual and the social or historical memory that provides a collective frame in which meaning can be attributed to autobiographical memory. Forgotten episodes or fragments of memory resurface as interconnected traces when a "path to our past is indicated [...]" and we see them grow in depth and unity. These traces did exist, but they were more marked in others' memory than in our own. Certainly we do the reconstructing, but we do so following the guidelines laid down by our other remembrances and the remembrances of other people" (Halbwachs, 1950, pg. 76).

What does this mean for the re-articulation of the memories of deaths and the life at the NPI hospital? The criminalization of the hospital's past and the transformation of the cemetery that followed it constituted new

points of reference in the re-organization of memory in town, among different groups of people. It shifted the grounds of what can be articulated as memory in relation to which local and broader social structures. Most significantly, the divide that had always existed between those who had once been children growing up at the NPI hospital and those who constituted the staff of the hospital was re-articulated in this divide and took up new forms.

### **Andragogy and Pedagogy of Hope and Inclusion?**

The judicialization and criminalization of the necropolitics that operated in the neuropsychiatric children's hospital in Siret, as well as in other institutions for children with disabilities and their continuities with later violent practices, was crucial in drawing attention to the preventable deaths and violence that children labelled as "unrecoverable" were exposed to. Yet, as I have shown these processes have had both unexpected, as well as problematic effects. I will now turn to exploring the potentialities of dealing with the necropolitical past from a complementary perspective that can contribute to bringing a more hopeful future of inclusion closer to the present and contribute in a different manner to the possibility of acknowledging these violent and deadly necropolitical practices and thus impeding them from being carried out again.

While cultural memory can be changed through institutional action translated into erecting monuments (such as the one in the cemetery in Ruși), communicative memory is more difficult to transform. It requires an intervention that inter-actively involves the members of the groups whose communicative memory frames are engaged, in this case survivors and carers, as well as other locals, especially young people. Thus, in this final section I explore the potential of building a pedagogy/ andragogy of hope (Freire, 2013) with methods of collective biography (De Schauwer et al, 2016, De Schauwer et al, 2018) engaging the communicative and cultural memory frames that circulated surrounding the hospital.

As Paulo Freire (2013, pg. 16) points out hope is an ontological necessity for making the world better. It contrasts powerfully with despair (as its opposite) that immobilizes people and makes them resort to fatalism and the belief that it is impossible to gather the resources necessary for a creative transformation of the world (ibid.). This despair can be routed in



socio-historical experience that need not be denied (*ibid*), but hope needs to emerge in order for change to become thinkable.

Interestingly, this despair is most visible in the accounts normalizing the violence against institutionalized children with disabilities and the preventability of their deaths. It comes through in the carers words, “Who had to die, died”, but also in the head doctor’s dreams of the children in her care, despite “knowing” she could not help them. This despair impedes the formation of the ethical impulse of inclusion, as it rests upon the unpreventability of death and the normalization of violence. It is this despair that needs to be problematized and denormalized – but how?

A similar desire for denormalization of violence was voiced by a survivor in conversation about his hopes surrounding the trial: “they [the employees of the institution] should be held accountable, even if not publicly, but they should know that what they did was not good and then they can educate others, their grandchildren, or their children, if you work in children’s houses [...] don’t do as I have done.”<sup>31</sup> Thus the trial is imbued with an andragogical mission to educate the former employees of the institution for children with disabilities about the responsibilities of someone in their former position. The demand behind the desire is that of creating a space where past violent inaction on behalf of the carers is denormalized and thus changes future practices by becoming less socially acceptable and thus sanctioned by authority (including those who had once practiced violent inaction as employees).

Denormalization of past violence and necropolitical practices should be addressed in a context of guided collective dialogue that would allow a reflection and problematizing awareness of the past, as well as opening up new opportunities for action. Such spaces of reflection could be created both as ethical spaces within training courses for aid, education and health professions, as well as extracurricular activities for students in school.

These spaces of reflection could be built around collective biography workshops for those who have been involved in working with institutions or with people with disabilities (De Schauwer et al, 2016, De Schauwer et al, 2018) with the goal of engaging with shared understandings of difference and disability and their problematic outcomes. The reflection should be guided by materials co-produced by people with disabilities who have been institutionalized as children (like the graphic novel “Becoming Eli/ Spune-mi Eli”, illustrated and narrated by Dan Ungureanu, 2017). These practices and spaces can allow for an epistemological re-perspectivation, which is necessary for de-normalization of past practices. Nevertheless,

a medium, an alternative *lieu de mémoire* like the book co-produced by a person with disabilities that was institutionalized, is a necessary mediator in this process. This andragogical process should not involve making previous victims face their oppressors or abusers in a face-to-face encounter, as that is likely to be traumatizing as well as re-normalizing of past relationships and frames. A context that is both artificial and distanced as well as familiar should be created that would allow for a more hopeful vision of inclusion in the future to emerge.

Moreover, survivors, if they so desire can be involved in pedagogical interventions with young people that have no personal experience of institutions. In such interventions, young people, especially from communities close to (former) large institutions for children with disabilities, should be offered the opportunity to be exposed to narratives of past violence in order to counter-balance the normalizing discourses they are likely have been exposed to.

## ANNEXES

All images are reproduced here with permission by Mugur Ciumăgeanu, author of the images, to use and publish them.



**Image 1.** The section for institutionalized children in the cemetery of Ruși neighborhood, Siret, in February 2020, photo by Mugur Ciumăgeanu



**Image 2.** Monument to the memory of the children from the neuropsychiatric hospital buried in the cemetery of Ruși, Siret, February 2020 (photo by MC)



**Image 3.** Crosses and unmarked graves in the cemetery of Ruși, February 2020 (photo by MC)





**Image 4.** One of the around thirty crosses in the plot of the cemetery where the hundreds of children from the hospital are buried, February 2020 (photo by MC)



**Image 5.** Graves of people with disabilities who had died more recently and had received more care, February 2020 (photo by MC). The grave in the bottom part of the image belongs to the plot where the children and people who grew up at the hospital are buried.



**Image 6.** A tree recently planted in memory of the children who are buried in the cemetery of Ruși, February 2020 (photo by MC)

## NOTES

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- <sup>2</sup> <https://www.iicmmer.ro/masacrul-inocentilor-sesizare-penala-a-iicmmer-privind-tratamentele-neomenoase/> last accessed on 04.07.2020
- <sup>3</sup> <https://www.iicmmer.ro/sesizare-penala-privind-tratamentele-neomenoase-perioada-comunista-in-caminele-spital/> last accessed on 04.07.2020
- <sup>4</sup> On the committees see Spiegel (1990)
- <sup>5</sup> <https://www.iicmmer.ro/masacrul-inocentilor-sesizare-penala-a-iicmmer-privind-tratamentele-neomenoase/> accessed on 19.06.2020
- <sup>6</sup> For information on the investigation see, the official IICCMER website, *Masacrul Inocenților de la „Spitalul de copii neuropsihici cronici Siret”* available here <https://www.iicmmer.ro/masacrul-inocentilor-sesizare-penala-a-iicmmer-privind-tratamentele-neomenoase/> last accessed on 09.07.2020
- <sup>7</sup> For the other investigations see <https://www.iicmmer.ro/sesizare-penala-privind-tratamentele-neomenoase-perioada-comunista-in-caminele-spital/>
- <sup>8</sup> See announcement on IICCMER website available here <https://www.iicmmer.ro/iicmmer-si-asociatia-umanitara-il-chicco-pe-urmele-orfelinatelor-comunismului/> last accessed on 09.07.2020
- <sup>9</sup> Interview with historian Luciana Jinga (IICCMER), conducted in June 2020
- <sup>10</sup> Ibid.
- <sup>11</sup> See information on the case on the IICCMER website: <https://www.iicmmer.ro/a-murit-alexandru-visinescu-fostul-comandant-al-penitenciarului-ramnicu-sarat/> last accessed on 09.07.2020; see also Groșescu, 2017
- <sup>12</sup> Interview with historian Luciana Jinga (IICCMER), June 2020
- <sup>13</sup> Focus group like interview with survivors in Siret, February 2020
- <sup>14</sup> Interview with historian Luciana Jinga (IICCMER), June 2020
- <sup>15</sup> Interestingly, the most recent such reportage was just published: The Atlantic (2020) available here [https://www.theatlantic.com/magazine/archive/2020/07/can-an-unloved-child-learn-to-love/612253/?fbclid=IwAR3geJjXWP1h2e4grve1QO7uI\\_hFkhWCXXtS5L6zv0ecwJOgCetjKgxE1sE](https://www.theatlantic.com/magazine/archive/2020/07/can-an-unloved-child-learn-to-love/612253/?fbclid=IwAR3geJjXWP1h2e4grve1QO7uI_hFkhWCXXtS5L6zv0ecwJOgCetjKgxE1sE) accessed on 11.07.2020
- <sup>16</sup> Interview with Izidor Ruckel part of the Teaser Izidor the Movie available here <https://www.youtube.com/watch?v=dNKe6G549bo> last accessed on 15.07.2020
- <sup>17</sup> For the text of the Criminal Code of 1969 concerning inhuman treatments, see <https://lege5.ro/Gratuit/heydinrt/art-358-tratamentele-neomenoase-codul-penal?dp=giztonzxguztg> accessed on 11.07.2020



- 18 Interview with historian Luciana Jinga (IICCMER), conducted in June 2020
- 19 Interview conducted with a survivor woman in Siret, February 2020
- 20 Interview conducted with Rania, a survivor woman in February 2020, in Siret
- 21 Rania has confided in me her story in full understanding that this is a research project and has given me permission to use her story, yet, under the strict provision of anonymity, since many people close to her are unaware of what she has lived through and she wants to keep it that way.
- 22 Interview with a retired care-worker woman in Siret, February 2020
- 23 Adrian Criș/ Bihoreanul (2017) Criminalii de copii: BIHOREANUL i-a găsit pe medicii orădeni care au condus orfelinatul groazei de la Cighid. Mărturiile lor sunt șocante. Available here <https://www.ebihoreanul.ro/stiri/criminalii-de-copii-bihoreanul-i-a-gasit-pe-medicii-oradeni-care-au-condus-orfelinatul-groazei-de-la-cighid-marturiile-lor-sunt-socante-134825.html> last accessed on 12.07.2020
- 24 See IICCMER official website (2017) <https://www.iiccmr.ro/sesizare-penala-privind-tratamentele-neomenoase-perioada-comunista-in-caminele-spital/> accessed on 14.07.2020
- 25 From the Open Society Archives: HU-OSA 205-4-70 Box 232 Social Issues/ Children/ 1986.01-1989 [general]
- 26 From the Open Society Archives: HU-OSA 205-4-70 Box 232 Social Issues/ Children/ 1986.01-1989 [general]
- 27 Material from the Open Society Archives incorporated in this paper was collected previous to my stay at the New Europe College as part of a Visegrad Fellowship granted by the Open Society Archives in the academic year 2017/2018.
- 28 Focus group like interview with survivors in Siret, February 2020
- 29 All names have been removed or altered from the account. Focus group like interview with survivors in Siret, February 2020
- 30 All names of ethnographic and local interview partners have been changed in order to ensure that no harm will come to research participants' for providing me with information or opinions and wherever possible any detail that could make the person identifiable was omitted. The only names that have not been changed are those of experts, who have formally agreed to being named and cited.
- 31 Focus group like interview with survivors in Siret, February 2020



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