

## Introduction

I have two recurring nightmares. In one, I move within a ghetto from hiding place to hiding place while attempting to elude Nazis. After a chase, I am captured, marched out of the ghetto, and with thousands of others herded onto a train, its destination a concentration camp. We travel for days. People moaning, fighting among themselves, crying, sick, forced to live in their own feces. We finally arrive at the station platform, where we are pushed and clubbed out of the cattle car and marched single file to a waiting gas chamber. In the other dream, I am in the Israeli army. The battle with the Arabs is fierce, the tide slowly turning against us. Our position, in a foxhole at the perimeter of a kibbutz in the desert or in a building in Tel Aviv, is overrun, and we are about to be slaughtered.

I am a forty-one-year-old clinical psychologist, university professor, husband, and father. But I am foremost a child of an earlier era. Events that occurred fifty years ago, before my birth, follow me. Stories of those times, images before my eyes, evoke my most intense feelings of anger, fear, and sadness. My parents, survivors of the Holocaust, raised me and shaped me.

Growing up meant being constrained, often paralyzed, by hearing, "How could you do this to me after all I have suffered?" My people—the Jews—and their history were, I felt, completely defined by suffering and oppression. In reaction, I formed attitudes about Gentiles, all Gentiles.

I have never been a joiner of groups. No Boy Scouts, no fraternities. I never belonged to a *group* of friends. I thought I was different from other children, and perhaps that self-perception resulted in my being seen by others as peculiar. I identified myself so narrowly. I was a remnant of the Holocaust. And, in a perverse manner, I believe I somewhat enjoyed this distinction, this uniqueness. As an adult, I continue to feel different from my contemporaries. Perhaps some of these feelings are simply a result of my temperament, a genetic legacy. But much of it I attribute to being a child of Holocaust survivors.

When asked, “*Fin vanit bist du?* (where are you from?)” by someone from the old country, I would respond “*Ich bin a Lubliner.*” Even though before 1987 I had never been to Lublin, Poland, where my parents and grandparents lived before the war, I *felt* as though that were my home. Through a series of circumstances beyond my control, my life was displaced from where it should have taken place, from where, I believed, I would have led a far more contented existence.

I grew up thinking that laughing indicated a certain superficiality. It was not until I reached my thirties that I understood the value and necessity of laughter. I also had to learn not to begrudge it to others. I have similar, unusually strong, feelings about trivial conversation. I have no patience for it. I avoid it, and I know this inflexibility, this subversion of social etiquette, has cost me dearly, for it is usually perceived as snobbishness.

Since childhood I have been interested in the Holocaust—reading books, attending lectures, viewing films, inquiring about the past experiences of survivors—but only in recent years have I attempted to make sense of its impact on me and others close to me and to engage in activities such as teaching and writing that create hope and clarity as opposed to overwhelming sadness and opaqueness. Understanding the Holocaust’s causes and its myriad effects after liberation has given me a greater sense of control over my life. I can now choose vehicles for personal expression and can place that era and its consequences in a useful, as opposed to simply painful, perspective. This book reflects a further attempt at comprehension. I embarked on the research for it without prior hypotheses. I was interested in discovering the extent to which other children of survivors had experiences similar to my own. I wanted to know if there were attitudes and patterns shared by those who had grown up in the shadow of the Holocaust.

In my reading, I found that much of the earlier research on children

of Holocaust survivors, particularly that conducted in the 1970s, was deeply flawed by its focus on small, clinical samples, those children of survivors who were patients being seen in a psychiatric setting. It would be fallacious to assume these individuals were representative of the entire group. For convenience, other investigators have chosen subjects who were actively involved in organizations or activities of children of Holocaust survivors. But here, too, such a selection cannot be representative, since only a tiny percentage of children of survivors choose to affiliate or involve themselves in Holocaust-identified forums. In an attempt to increase the objectivity of their studies and produce quantifiable results, recent investigators have often used personality tests in their examination of children of survivors. As valid measures of personal qualities, unfortunately, such tests are often questionable and, more important, provide a constricted picture of the individual.

My own study was much less formal. It was based on personal interviews and a questionnaire and did not include a control group. I believe, however, that for the most part it avoided the pitfalls of the earlier studies.

Some of the participants were individuals I had met over the years. They provided the names and addresses of many friends and relatives who were also children of survivors. I requested face-to-face interviews with those in my geographical area and sent the questionnaire with an introduction and explanation for its rationale to those in distant locations. I introduced myself to potential participants as a professor of psychology and a child of survivors who was writing a book about children of survivors. I asked for their cooperation so that both laypeople and mental-health professionals could more fully understand the effects of growing up with such a background. (To preserve the anonymity of my informants, I have altered names and some characteristics. Some quotations are composites.)

It is difficult to obtain volunteers who are willing to commit several hours of their time for anything, let alone a process that may be distressing. Many to whom I sent the questionnaire never responded. Forty-eight children of Holocaust survivors agreed to be interviewed by me or responded anonymously to my questionnaire, forty-four from the United States and four from Canada. Each of the forty-eight had at least one parent who was in Nazi-occupied territory during World War II. They spanned the ages of nineteen to forty-two; two-thirds were

between thirty and forty. Twenty-six occupations were represented, including teaching, the law, homemaking, medicine, selling, acting, and psychotherapy. A few of the respondents belonged to organizations of individuals from Holocaust backgrounds such as their own, but most did not. I conducted the interviews in 1988 over a period of one year, either in the subjects' homes or after hours in their offices.

While the items on my questionnaire were the same as those discussed in the personal interviews, I was able to follow up my queries during the face-to-face exchanges. In addition, I ended the interviews by asking: "Is there anything else about you and the Holocaust which you believe is important that I have failed to touch upon?" It became clear that many had never pieced together the relationship between various aspects of their personality and the Holocaust. I wished I had had more time with each subject. A lengthier interview might have fostered more insight and recognition.

Although my queries were specific, they encompassed concerns of my own that I believed were central issues in the life of a child of survivors. I hoped that my questions about parents would provide both information about the interaction between survivors and their children and a view of the survivors other than the one we have received from the survivors themselves or from mental-health professionals. In addition, I addressed a number of issues on which earlier research had not reported: belief in God, attitudes about Gentiles and about Israel, and views on the possibility of a recurrence of the Holocaust.

The questions I asked often required a consideration of issues that some preferred to leave unexamined. At the conclusion of our three hours together, one man commented that the conversation "was unsettling for me because I just haven't thought about how the Holocaust has affected these aspects of my life."

I encountered various levels of denial. When I asked one man why he avoided involvement in any Holocaust-related activities, he expressed the feelings of many survivor offspring who do not wish to be reminded of those events by their parents or by anything else: "Once I got the message, I didn't want to hear about it anymore. I know enough. The images are already indelible. To involve myself further would make me uncomfortable." Several people acknowledged that "it is just too painful for me to think about these things." One woman stated flatly, "The Holocaust happened to my parents. It has nothing to do with me."

Why did others agree to participate? Some were curious: "What do

you think is important about my being a child of survivors? Are we different in some way?" Some were suspicious or insecure: "Are you looking for something?" or, with forced levity, "So, you want to see if we're screwed up."

Others, like Benjamin, were searching for answers about themselves and their families. We sat in his office at a large medical center late into the evening, and five times in the course of an emotional three-hour meeting, Benjamin, himself a physician, interjected, "You're going to have to send me a bill. What do you charge for sessions like this?"

Benjamin had moved three thousand miles away from his parents. Intense, nervous, and now thirty-six and a practicing neurosurgeon he had purposefully avoided contact with survivors or their children. He didn't want to think about that world. "Only negative things," he said, "can come from dwelling on the Holocaust." Yet he wondered. And when I called to ask for an interview, Benjamin was in the throes of marital difficulties. This was his second marriage. Neither wife was Jewish. It was a propitious time for him to take a look at himself.

Alex, a forty-year-old schoolteacher, lived with his wife and two children in a modest home in a middle-class suburb. Warm, articulate, and insightful, he had struggled to attain his stable, productive life. He had become a drug addict during his twenties, and the habit held him for ten years. His question to me, asked in various forms, reflected his agenda for our meeting. "Am I like other children of survivors?" If Alex was similar to other children of survivors, he could feel normal. His background could explain or justify his problems.

Before I began an interview, I expressed my appreciation to the person, usually a stranger, for his or her willingness to discuss personal issues with me. I expected that it might not be easy to talk about these things. Esther, a cheerful thirty-two-year-old Orthodox Jew who taught school, was quick to reassure me. "But you don't understand. This is a catharsis for me. I've looked forward to it ever since you called." Indeed, most children of survivors never have occasion to speak of their Holocaust background.

Some children of survivors were not at all reticent about speaking with me. Even during our initial telephone conversation it was clear that they were not simply interested in exposing *themselves* to me. "The world should know about us and what we went through," one man contended proudly. "I think we're a unique group. Our parents in particular. They're the real heroes."

Other children of survivors immediately agreed to participate for

altruistic reasons. They were contributing to research in an area they believed was important—the Holocaust. “We must write about the Holocaust. It bothers me that they teach that the Holocaust never occurred. It’s our duty to keep history alive,” remarked one Israeli-born child of survivors. But even with these individuals, I invariably sensed other motivations as well. An opportunity to look inward. An opportunity to sort out who they were and where they came from. As one man explained, “For the first time I wanted to talk about it, see if I could gain some insight and find out if I could handle examining this stuff.” The diversity of motives of these children of survivors was the first indication of the tremendous variety of responses they would report, both toward the Holocaust and toward their parents.

For myself, talking with other children of survivors was revelatory. Before questioning these strangers I had assumed a certain mutuality. I believed that children of survivors were, in fundamental ways, like me. This belief had contributed to my feeling of an immediate kinship whenever I had met children of survivors in the past. The illusion of similarity extended to their parents as well. I assumed that I recognized their parents because I was familiar with my own. I presumed other children of survivors related to the Holocaust as I did. I learned this was not necessarily so. I was surprised to find that the Holocaust was not a part of the ongoing, conscious life of some children of survivors.

During the interviews I attempted to hide my own feelings for fear of influencing the subject’s responses. But I was aware of many instances of tears welling up in my eyes as I heard descriptions of survivor parents and their experiences both during and after the Holocaust. In some cases I recognized family dynamics and individual conflicts as similar to my own. Frequently, a respondent would articulate a theme that I had been aware of subliminally through most of my life but had never clearly enunciated. I learned a great deal about myself through the disclosures of my volunteers.

The agony of our parents did not end with their liberation at the close of World War II. Their legacy of pain and changed personalities dramatically affected a generation that never saw an SS storm trooper. This book is an attempt to clarify the effects of that legacy on their children, actors involuntarily grafted onto this ignominious period of human destruction.

## 1

## The Psychological Profile of Survivors

He who has been tortured remains tortured. . . . He who has suffered torment can no longer find his place in the world. Faith in humanity—cracked by the first slap across the face, then demolished by torture—can never be recovered.

—Jean Améry

To understand the children of Holocaust survivors, we must first become familiar with their parents' responses to their own experiences. The psychological aftereffects of the survivors' trauma are often mirrored in the attitudes, perceptions, and fears of their offspring. Many children of survivors await a repetition of the persecution their parents experienced. Their homes were shaded by ominous clouds and peopled with ghosts and demons.

Survivors of the Holocaust, particularly Jewish survivors, are often seen as a unitary phenomenon by both mental-health professionals and laypersons. And yet the experiences of individual Jews during World War II varied markedly. Some Jews spent most of the time in hiding, and some eluded capture by posing as Gentiles, with forged papers as proof. Others lived in ghettos and concentration camps for periods of varying duration, while thousands more were exiled and confined in work camps in the Soviet Union. A handful fought in the forests as partisans.

Most survivors (particularly those who lived in eastern Europe) experienced the murder of immediate and extended family members.



Many lost a spouse or children. But some were lucky enough to have retained a mother, a father, sisters, or brothers. Obviously, survivors' personalities during the prewar years were as disparate as those in any large group of people. Significantly, the war and subsequent persecution caught people at different ages and developmental periods.

All these variables shaped not only the survivors' reactions during the Holocaust and their postwar adjustment, but also, by implication, their manner of future parenting. Survivors differed in the degree and kind of emphasis they gave to the Holocaust in their postwar families. Some parents talked of their experiences and impressed on their children the importance of memory. Others avoided mention of the Holocaust years and attempted, as best they could, to obliterate its influence on their later lives. Some survivors turned away from their Jewishness out of fear or anger. For others, their continuing Jewishness became inextricably bound to the horrors witnessed in the past.

In 1964, after years of clinical experience in diagnosing and treating concentration camp survivors, William Niederland, a psychiatrist, published a landmark study proclaiming the existence of a "survivor syndrome." He listed a host of symptoms manifest in individuals who had survived Nazi persecution: chronic anxiety, fear of renewed persecution, depression, recurring nightmares, psychosomatic disorders, anhedonia (an inability to experience pleasure), social withdrawal, fatigue, hypochondria, an inability to concentrate, irritability, a hostile and mistrustful attitude toward the world, a profound alteration of personal identity, and, in many cases, hallucinations and depersonalization (an alteration in the perception of the self so that the feeling of one's own reality is temporarily lost).<sup>1</sup>

Leo Eitinger, a psychiatrist and Holocaust survivor who had extensive clinical contact with many concentration camp survivors in Norway and Israel, observed a similar survivor syndrome:

The most predominant sequel to the concentration camp activity seems to be the deep changes in personality, a mental disability which affects every side of the personality's psychic life, both the intellectual functions, and especially, emotional life and the life of the will, with the many facets of difficulties in adaptation and the complications which this leads to in the victim's life. Chronic anxiety states, often provoked by nightmares and/or sleeplessness at night, by disturbing thought associations and memories during the day, chronic depressions of a vital type, inability to enjoy anything, to laugh with others, to establish new,



*The Psychological Profile of Survivors*

9

adequate, interpersonal contacts, the inability to work with pleasure, to fill a position—in short, the inability to live in a normal way—are among the most characteristic symptoms of this condition.<sup>2</sup>

Niederland's and Eitinger's reports focused attention on a group of individuals who, in many ways, had been forgotten. Moreover, Niederland and Eitinger asserted that persecution left lasting, perhaps permanent, effects on the survivors. The conclusion of the war, the liberation of camp inmates, and the resettlement of refugees had not meant an end to the effects of the Nazi atrocities. The studies by these two men became the point of departure for most psychiatric pronouncements about survivors.

Subsequent articles by other professionals reported a variety of other symptoms and advanced similar explanatory theories. They stated that the intense depression survivors felt led to complete social withdrawal, seclusion, and profound apathy. Survivors were overwhelmed by indelible and grotesque images of death.<sup>3</sup> They isolated themselves because they believed that no one could understand or appreciate the horrors they had been through. A sense of alienation ensued.

Survivors, these writings asserted, would forever have difficulty establishing any close relationships. They had lost a basic trust in people because of their own persecution and because they witnessed the physical and mental deterioration of their parents. Unconsciously, they maintained a fierce anger because their parents had been unable to protect them from such devastation. Furthermore, it was hypothesized, survivors had difficulty "reinvesting in life" and were deeply ambivalent about founding new families.<sup>4</sup> They would not allow themselves to become emotionally attached because they feared another precipitous separation.

Some studies reported that the emotional responses of survivors had a pervasively shallow quality. "Psychic numbness" or "psychic closing off" were terms used to describe survivors' inaccessibility to feelings. During the Holocaust, while they were experiencing the overwhelming losses and stresses and the resultant intolerable anger or fear, survivors blocked out all capacity for emotion in the interest of continuously adapting to their changing, hostile environment. Although this defense was valuable at the time, its lingering deployment was obviously maladaptive.<sup>5</sup>

Psychosomatic symptoms such as ulcers, hypertension, and premature aging emerged among many survivors who would not allow themselves an emotional catharsis. Some researchers concluded that survivors' massive repression of wartime memories resulted in their generally blunted ability to feel. Contradicting these assessments, other clinicians reported that their survivor patients ruminated excessively about their Holocaust experiences, were preoccupied with mourning, and were generally hyperemotional. Some were subject to fits of violence, as previously suppressed rage, too dangerous to express at the time of persecution, emerged. In psychiatric writings about survivors, contradictory findings abound.

Perennial depression and anger in survivors may have resulted from their failure to engage in "grief work," the necessary mourning of losses. During the war, they had been unable to afford the luxury of that letdown. After the war, they faced the pressures of adapting to a new country, new language, new customs, and new responsibilities. Many desperately wanted simply to get on with life once again, and they believed "others" were not interested in their Holocaust experiences or their traumas. Describing what he referred to as "death immersion," one investigator proposed that many survivors had been so inundated with death that they were unable to mourn their losses fully.<sup>6</sup>

"Survivor guilt" is the name given to a phenomenon frequently reported by social scientists, who have offered various interpretations of its origin and function. Survivors may blame themselves for not going to greater lengths to save others. One researcher wrote: "They have a perpetual need to atone for cowardice or other 'failures.' There is either real personal shame or assumption of collective shame for the failure of Jews to fight the Nazis."<sup>7</sup> Primo Levi, a survivor of Auschwitz, noted: "When all was over, the awareness emerged that we had not done anything or not enough against the system into which we had been absorbed. . . . Consciously or not, he (the survivor) feels accused and judged, compelled to justify and defend himself."<sup>8</sup>

A survivor may be haunted by the thought, "What right did I have to live when better individuals than I died?"<sup>9</sup> Indeed, he may believe, on some level, that his life was made possible by the death of others. "Are you ashamed because you are alive in place of another?" Primo Levi writes. "And in particular, of a man more generous, more sensitive, more useful, wiser, worthier of living than you? . . . It is no more