

An Investigation into the Intergenerational Transmission of Holocaust Effects in South African Survivors.

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Thesis submitted to the Department of Psychology, University of Cape Town,
in fulfillment of the requirements for the degree of Master of Arts.

Cape Town
South Africa
1993

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ACKNOWLEDGMENTS:

I am indebted to the following people who have facilitated me in the completion of this work:

To Andy Dawes, my supervisor, for his constant support, guidance and critical input. Ally Dubb and The Kaplan Centre for Jewish Studies, for the encouragement and funding received. To the other staff members of the University of Cape Town Psychology Department who have provided invaluable assistance. And to my family and friends, and most especially to Adrian, for their continual support. A special thanks must also be given to the Holocaust survivors who opened up their homes and their hearts to me, and allowed me to share in their past.

"When Freud (1917) speculated about the reasons people rejected and avoided psychoanalysis, he said that Copernicus gave the first blow to humanity's naive self-love or narcissism, the cosmological blow, when humankind learned that it was not the center of the universe. Darwin gave the second, the biological blow, when he said that humanity's supremacy over the animal kingdom is questionable. Freud claimed that he gave the third, the psychological blow, by showing that 'the ego is not [even] master in its own house' and that, indeed, we have limits to our consciousness. I believe that Nazi Germany gave humanity the fourth, the ethical blow, by shattering our naive belief that the world we live in is a just place and that human life is of value."

(Danieli, 1985:202).

ABSTRACT

This study focuses on the intergenerational transmission of Holocaust effects among South African Jewish survivors of the Nazi Holocaust and their children. Its aim is to ascertain whether common patterns exist among survivor families that could be attributed to the parents' Holocaust past. Early theoretical and empirical literature suggests that exposure to extreme trauma has long term damaging consequences on the personality functioning of survivors, and on their parenting of their children. However, Holocaust survivors are also immigrants. It is possible that immigration to Southern or Central Africa produced stresses which could also have influenced coping and parenting. In order to address this issue, a comparison group of Jewish immigrants who were not survivors, was also studied. The survivor group consisted of 21 survivors and 11 adult children. The immigrant sample comprised 14 subjects, with 10 children. The implications of resettlement for survivors was also accounted for in this study as part of the process of recognizing that survivors too experienced immigration. Patterns of adaption and acculturation of survivors in general were compared to immigrants in general. Therefore, the sample also included childless survivors and immigrants. Indepth interviews were conducted with all subjects. Findings were based on the reports of the respective subjects regarding their perceptions of their own and their family functioning. No clear differences were found between the survivor and immigrant samples. Considerable within-group variation was present in both groups. Limited intergenerational transmission of generalized patterns of negative psychological effects were found in survivor families. Children of survivors appear to focus on the resourcefulness and strength displayed by their survivor parent. They similarly exhibit resilient and coping behaviour which seems to be based on the presence of these qualities in their parents.

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PREFACE:

This research focuses on the assessment of intergenerational transmission of Holocaust effects within post Holocaust survivor families. The first three chapters comprise reviews of the relevant literature. Firstly, literature related to survivors is presented. This chapter follows the movement and progression of theory and research on survivors in order to lay the foundations for understanding intergenerational transmission of trauma in survivor families. The second chapter, similarly, outlines the development and growth of theory and research related to children of survivors. For both populations, theory has developed in a similar manner. Early work, which identified the existence of pathology in survivors and psychological difficulties in their children, tended to be skewed in terms of focusing only on the negative influences of the Holocaust on both survivors and their children. This theory suggested that the general functioning and child rearing abilities of survivor parents was impaired as a result of their Holocaust experiences, and that this impacted adversely on their children. The current framework acknowledges the problems which may arise in the post traumatic functioning of survivors and the possible implications of this for their subsequent family. However, coping behaviour in survivors and resiliency in their children is also recognised. Recent research tends to suggest that there is little difference in the functioning of survivor families and immigrant comparison groups.

Two criticisms of the early research on survivor families are addressed in this study through the use of a non clinical sample and an immigrant comparison group. In chapter three, a theoretical discussion of immigration and adaption is presented. The focus is on presenting a theory of acculturation, which accounts for both the factors which may promote adaption in the new environment and the different acculturation strategies which may be adopted by the acculturating group or individual.

An outline of the major questions of the study is presented in chapter four, along with a discussion of the research methodology; outline of the characteristics of the target population and samples, and method of data analysis. The research design is qualitative, with an indepth interview format, and a thematic analysis of data. Results and discussion are combined in chapters five and six. The focus is on (1). patterns of Holocaust effects within survivor families (2). coping and adaption of survivors and (3). acculturation and adaption of survivors and their families. Findings on survivors and their families are compared to the acculturation and adaption of Jewish immigrants of similar origins, and their family patterns, in order to assess whether Holocaust effects are obscured by the process of immigration. The final chapter encompasses a summary and discussion of the main findings.

CHAPTER 1

HOLOCAUST SURVIVORS: EARLY AND CURRENT LITERATURE ON EXPOSURE TO MASSIVE PSYCHIC TRAUMA.

The systematic and technologically advanced genocide of the Jewish people by the Nazis represents a unique phenomenon in the recent history of humanity. Between 1936 and 1945, six million Jewish people were destroyed through a system engineered by the Germans and their allies. One third of the total Jewish population were exterminated (Gilbert, 1986). Systematic destruction of communities and annihilation of a group of people defined by their religious identity, occurred on an unprecedented scale. At present the world is still grappling with understanding this event. Schappes (1980: 66) believes that

"It is a mystification of the Holocaust to argue, as so many have done, that it is incomprehensible because it is unique. The Holocaust is a product of twentieth-century human history, a consequence of social relations with social causes, not a supernatural affliction from which we must avert the searching eyes of reason."

This view of the Holocaust has led to the current flourish of literature from numerous disciplines in an attempt to understand the global social and political implications and consequences of the Holocaust occurrence. More specifically, the last three decades have also witnessed the growth of investigations into the long term psychological effects of exposure to such massive trauma on the survivors of the Nazi Holocaust and on successive generations.

This chapter focuses on the development of theory and research related to the post traumatic functioning of survivors of the Holocaust. An outline of the progression of theoretical conceptualizations from the starting point to their current form is presented. It appears that no previous attempts have been made to systematically reflect on the history of theory and research on survivors. The relevance of this historical outline is to promote awareness regarding how theory and research on survivors have altered and the way in which this impacts on an understanding of the functioning of both survivors and the second generation.

In section 1 the early work in this field is acknowledged. This is followed by a discussion of the discovery of the 'survivor syndrome'. The major theorists who contributed to this discovery are outlined and their postulations reviewed. Section 2, outlines the early theoretical framework which explains the manifestation of psychopathology within

survivors. With the discovery of specific symptoms which survivors appeared to display and the classification of these as a syndrome, early theory tended to focus only on pathology. This framework was based on psychoanalytic concepts which suggested that survivors were unlikely to emerge from such extreme trauma without being permanently and indelibly scarred.

In section 3 and 4, a critique of these early formulations is presented. The emphasis is on accounting for the numerous interacting variables within the pre-Holocaust, Holocaust, and post-Holocaust environment of the survivor which may promote coping. Thus the current framework de-emphasizes pathology and incorporates a focus on coping and resilience in this population. This is assessed in section 5, as are some of the variables which have been noted to aid or enhance coping. In section 6, recent research on survivors is presented. Much of this supports the revised theoretical postulates regarding coping behaviour in survivors. The last two sections address numerous problems with past research on survivors and the implications of this for the current research.

1). The Early Work:

The initial period following liberation was characterized by a "conspiracy of silence" regarding survivors of Nazi persecution. For both the Jewish and Gentile worlds the enormity of what had occurred was too horrific to face (Danieli, 1980; Roseman and Handelsman, 1992). Initially, very little attention was paid to the psychological and emotional suffering of survivors who were only provided with material assistance (Winnik, 1966; Bergmann and Jucovy, 1982). This reaction by the external community was based largely on the existing state of denial, part and parcel of which was the belief that removal of the external traumatic situation and provision of material and physical comfort would allow for the complete recovery of the victim.

The first writing on Nazi concentration camp existence was undertaken by Bruno Bettelheim, having himself been incarcerated in Buchenwald and freed in 1939. His original essay on concentration camp experiences appeared in the literature in 1943. This work outlines the dehumanizing conditions of the concentration camps and the effects which this has on the inmates. Given that Bettelheim spent a period in captivity, his theoretical formulations were largely accepted as authoritative and utilized by later theorists as a basis for understanding the psychopathology displayed by survivors. Only recently have they been subject to critical scrutiny (Bettelheim, 1952; Des Pres, 1976; Klein, 1983; Rosenman, 1984).

Current theorists' disagree with Bettelheim's portrayal of the concentration camp inmate's behaviour as characterized by "infantile regression", impulsivity and an inability to distinguish between external reality and internal wish fulfillment's. His views tend to depict survivors as suffering from severe psychological disturbances following their experience of trauma. According to Rosenman (1984: 66) " Bettelheim's prescription for survival has wish-fulfilling, disavowing, incantatory, inflated, socially unsophisticated features. His ideal is the lone person courageously resisting arrest and being killed publicly." Rosenman further argues that Bettelheim's version of concentration camp experiences are skewed in terms of providing a self appreciatory and elavatory position. It must be noted that Bettelheim's (1986) more recent perspectives includes some discussion of resilience and coping among survivors. However, the criticism raised above impacts on early formulations regarding the psychopathology experienced by survivors. Many of these initial theorists based their understanding of the manifestation of psychopathology in survivors on the behaviour of camp inmates as described by Bettelheim's early work.

The first research on survivors was undertaken by Friedman (1949), Pedersen (1949) and Kral (1951). All found that survivors display specific psychological symptoms after their experience of trauma. These include reactive depressions, conversions, hypochondriacal conditions, pervasive guilt feelings and psychosomatic complaints. Shuval (1957-8), in a later study, found that survivors are more pessimistic in future orientation compared to a control group. She also noted, however, that on being faced with future stressful situations, the control group reacted with pessimism, whereas the survivor group's feelings remained stable. Shuval suggests that survivors developed some measure of "hardiness" to the effects of exposure to stressful events.

No specific syndrome had yet been formulated in order to understand survivor psychopathology, but the psychological damage that may be incurred to individuals after experiencing trauma was being recognised. These perspectives illustrate a broadening of accepted theoretical paradigms in accounting for personality disturbances after exposure to external trauma. Prior to this, emphasis had always been solely on internal attributions in explaining psychological disorders (Krystal, 1968). Although still described in terms of "paranoid reaction" Pedersen (1949:345) notes that his findings "... indicates that severe social trauma - in and of itself - has a tendency to release paranoid reactions, regardless of the character structure involved."

2). The Existence of a "Syndrome":

A survivor of the Nazi Holocaust is defined as an individual who suffered persecution and/or incarceration under the Nazis in concentration and extermination camps. These individuals experienced persecution, fear of loss of life of self and family, and destruction

of their community as a result of religious group belonging. A problem with this definition is the difference in the experiences of those who suffered persecution or incarceration in death or concentration camps. Although the definition is broad, any individual who managed to survive, either by hiding or through surviving incarceration, experienced extreme trauma, which incorporated both fear of loss of life and loss of loved ones. According to Kestenberg (1972:311),

"a survivor is one who as a result of Nazi persecution suffered the loss of love as a member of a social group, had to mourn the loss of self and objects as well as institutions and has been bombarded by sado-masochistic events - not fantasies - which threatened to disrupt his psychic organization."

The introduction of Indemnification by the German Federal Republic in the 1960's led to the need for psychological assessment of survivors. It was also noted that a large percentage of survivors were unable to adapt to their new community and were experiencing debilitating psychological and psychosomatic symptomatology (Bergmann and Jucovy, 1982). By the beginning of that decade predominantly psychoanalytically based inquiries into individual cases began to appear in the literature. The term "survivor syndrome" was coined by an American psychiatrist, William Niederland (1961, 1964) to describe the constellation of symptoms manifested in survivors numerous years after liberation.

In numerous papers Niederland outlines the cluster of symptoms comprising the "survivor syndrome". This has been verified by subsequent authors and generally includes: anxiety states; disturbance of cognition and memory; chronic depressive states, including sleep disturbances and frequent nightmares; tendency to withdrawal, seclusion and social isolation, impaired object relations and general rigidity of personality; psychotic-like behaviour complete with persecutory hallucinations and a regressive means of dealing with aggression; an altering of personal identity, impairment in body image, self image and in time and space; psychosomatic conditions; "living corpse" appearance/behaviour, giving the victim a "macabre" or "ghost-like" imprint and excessive blunting of affect. Niederland summarizes the "survivor syndrome" as a combination of reactive depression and anxiety syndrome. Guilt feelings are also reported to be prominent among survivors. According to Niederland, the survivor syndrome develops independent of age, sex, specific individual characteristics or environmental conditions (Niederland, 1961, 1964, 1968a, 1968b; Krystal and Niederland, 1968; 1971).

Hoppe (1968a, 1968b, 1971a, 1971b) adds to this clinical picture the concept of "chronic reactive aggression". According to him, emphasis has been given to the symptom of

chronic reactive depression, but not to the pent up rage experienced by survivors. He defines "chronic reactive aggression" as a repetitive explosion of rage and a defense against depression, hence affording the survivor some degree of relief. However, the extent of this anger and aggression is also a constant source of misery to survivors as they suffer from uncontrollable outbursts of rage which may be turned against the self or family. The result of this is guilt feelings, lowered self esteem and psychosomatic symptoms.

Both Krystal (1984) and Hoppe (1984) suggest that survivors suffer from alexithymia and anhedonia. Alexithymia in survivors may be viewed in terms of a poor fantasy life and restricted capacity for wish fulfillment. This is often coupled with anhedonia, which is demonstrated in the survivors inability to enjoy life. For example, Meerloo (1963) has noted that some survivors do show masochistic tendencies and withdraw into persistent unhappiness. These two symptoms propel the survivor to continue to experience him/herself as the victim.

Meerloo (1963; 1969) notes the importance of survivors' being denied the opportunity to mourn for lost loved ones. Due to this the survivor remains fixated in the grief experience (Niederland, 1968; Krystal and Niederland, 1971). Inability to perform mourning rituals, does not allow survivors the opportunity to effectively come to terms with the death of those close to them through the detachment of cathexis related to the lost loved one (Grubrich-Simitis, 1981). Meerloo believes that delayed mourning and identification with the dead may be repeatedly triggered in the individual by present occurrences in the external environment.

Lifton (1967, 1968, 1973) outlines five psychological themes which he believes are consistently found in survivors of the concentration camps. **Death imprint**, which is defined as images of death and grotesque death forms; along with related death anxiety. **Death guilt**, which is a function of having survived where others did not. **Psychic numbing** and a diminished capacity for affect, which prevents total psychic damage through partial and temporary psychic death. **Suspicion of counterfeit nurturance**, which incorporates the contradictory experience of attempting to reject the abnormality of concentration camp existence and the simultaneous need to adopt some of the characteristics of that world in order to survive. The fifth pattern refers to the **struggle for meaning** experienced by survivors in the post-Holocaust period (Lifton and Markusen, 1990).

There may be general agreement regarding the symptomatology displayed by survivors, but aetiological theories differ. Although using a different term to describe the syndrome,

the symptoms identified by Eitinger (1961, 1962, 1965, 1971) as part of the manifest psychopathology of survivors are similar to that outlined by Niederland. However, Eitinger believes that the only relevant correlation is between the manifestation of symptomatology and neurological damage suffered in the camps due to beatings, malnutrition or illness. He argues that organic brain changes forms the basis of the concentration camp syndrome and found no correlation between symptomatology and any of the following variables: premorbid personality functioning; socio-economic and occupational status; illness prior to captivity and age of arrest. Eitinger does note that the individual's pre-camp experience may influence the degree and intensity with which the concentration camp syndrome is manifested, but not whether or not the syndrome occurs. He adopts a cumulative stress view in understanding the manifestation of psychopathology in relation to the severity of captivity, and believes that the impact which exposure to extreme stress has on psychic functioning irreversibly alters the personality structure of the individual.

Hafner (1968) presents a different theoretical understanding of the survivor syndrome and conceptualizes it as consisting of both primary and secondary components. Although noting similar symptoms to those outlined by Niederland, he divides these symptoms as occurring across two dimensions. Anxiety, nightmares and high irritability with psychological and psychosomatic manifestations is viewed as the primary disorder. Factors such as social withdrawal are seen as secondary symptoms as this particular behaviour pattern arises out of the need to avoid anxiety, mourning, pain or guilt. In contrast to Niederland and Eitinger, Hafner feels that the survivor syndrome is dependent to a limited degree on age and socio-economic status. His findings do support Eitinger's view of the importance of the severity and duration of trauma in determining the extent of psychopathology, but not the idea that murder of close relatives may promote the manifestation of psychological disturbances. Hafner also believes that psychological disorders noted in the survivor syndrome arose through similar but more extensive mechanisms to traumatic anxiety neurosis. Similarly Krystal (1968: 12) notes that

"The psychic apparatus, like the body, has only a limited number of reactive responses to external or internal stimuli and cannot produce entirely new systematic response to the onslaught of even such massive traumatization as concentration-camp horror."

Matussek (1971) provides a far broader and more comprehensive understanding of the psychopathology displayed by survivors than other theorists. According to him, there is no single and uniform reaction to exposure to massive psychic trauma. In an extensive factor analysis conducted on 144 survivors, he discovered fourteen major somatic disorders and

twelve psychiatric symptoms. This analysis of "late injury following incarceration" yielded four possible dimensions regarding the experience of symptomatology.

Factor one is termed the "Psychophysical Syndrome" and refers to the experience of disturbances in both the physical and mental spheres. This factor, also noted by Matussek as a "general state of exhaustion", most resembles the survivor syndrome and incorporates much of the symptomatology outlined by Niederland. Unlike other theorists, Matussek believes this is only one possible response to the Holocaust trauma. Factors two and three relate solely to the manifestation of somatic disorders, and are termed "Gynaecological Disorders" which focuses especially on amenorrhoea, and "Internal Disorders" incorporating cardiovascular and pulmonary-bronchial complaints. The last factor termed "Psychic Syndrome" includes only psychological complaints such as feelings of mistrust, isolation and paranoid ideation. This cluster of symptoms is viewed by Matussek as a "social disorder", because the establishment of positive interpersonal relationships is undermined (Foster, 1987).

As opposed to attempting to fit all possible variations of manifest symptomatology into one classification, Matussek provides numerous levels on which to understand the range of psychosocial consequences of exposure to trauma. Matussek argues that response to stress may take numerous forms, and the difference in individual manifestation is dependent on the conditions and severity of stress and also on the premorbid personality structure and functioning (Foster, 1987).

3). A Psychoanalytic Understanding:

Psychoanalytic theorists largely attribute the existence of the above outlined psychopathology solely to the Holocaust experience. According to them, it is obvious that an experience of such trauma will undermine the individual's psychic equilibrium. Both the group and personal identity of the individual were undermined through the process of dehumanization in the camps, and through the loss of communities, heritage and culture. The estrangement from self and identity impairment, leads to severe identity problems (Niederland, 1968; Davidson, 1980a; Kestenberg; 1982). Simultaneously, the elimination of shame boundaries, privacy and deindividuation serves to erode higher ego functioning. The loss of anticipated environmental reliability, the occurrence of senseless events and lack of causality in the camps is threatening to the ego and can lead to the breakdown of internal reality (Bergmann, 1982; Grubrich-Simitis, 1984).

Psychoanalytic theorists believe that ego regeneration did not necessarily occur after liberation (Grubrich-Simitis, 1984). The survivors now had to confront the overwhelming horror of their experience as well as the loss of family and friends. Important defenses for

survival in the camps, such as denial, remained operative after liberation, for example, denial of loss of loved ones (Nemeth, 1971). Difficulty which the survivor displayed in expressing emotions and entering into an mutually empathetic relationship was viewed as due to the persistence of automatized ego functions (Grubrich-Simitis, 1981). The direction of psychic energy into the maintenance of defensive structures, undermined an already depleted ego and did not allow for the reconstruction of ego functioning. Grubrich-Simitis (1984) also notes that survivors tended to make use of interpersonal defense systems, for example, having a child after the Holocaust to compensate for lost children. As a result the survivor is fixated in a past life which is recreated through the establishment of a present family. The reality testing functions of the ego remains impaired through an undifferentiated past-present existence.

The overwhelming burden placed on the weakened ego, suggests that the maintenance of its defensive structures will be inadequate. Krystal and Niederland (1968) propose that the common symptom of persistence of hypermnesic and affectively charged memories, illustrates the inadequacy of the usual mechanisms of repression. These memories occur with an intensity and frequency which makes it almost impossible for the individual to be sure that the experiences are not reoccurring. Given the extent of the repressed material, it is likely that Holocaust memories will constantly be threatening to break through into consciousness. This places the survivor in a very precarious position as any symbolically encoded stimuli related to their experiences, or an external crisis, may result in a complete suspension of ego functioning. Present crises can cause the reenactment of past unresolved trauma, as during periods of disorganization associated with crisis, unresolved past conflicts which are symbolically linked to present conflicts, are revived (Meerloo, 1969; Greenblatt, 1978).

The destruction of a civilized world eradicates the basis for civilized morality and a total onslaught of the superego occurred (Trautman, 1971). According to Bergmann (1982) superego functioning was likely to be more disturbed than ego functioning. Former stable moral internalizations were weakened, damaging the superego and its ability to protect the personality, as moral guidelines became useless. The forced perpetration of acts against which firmly established prohibitions existed, also served to undermine superego functioning. A consequence of this was to be an outpouring of guilt feelings after liberation, once the superego capacities were able to re-emerge (Niederland, 1986).

Many of the earlier theorists (i.e. Niederland) believe that guilt is the major pathogenic force in the manifestation of symptomatology. There are numerous reasons for the pervasive guilt feelings of survivors. The mass murder occurred indiscriminately. There was no personal characteristic to which the survivor could attribute his/her survival. It was

based largely upon good fortune (Carmelly, 1975; Rosenbloom, 1983). In many instances prisoners had to watch their loved ones being captured, degraded and even murdered, without being able to help (Jaffe, 1970). These survivors often felt responsible for the death of loved ones. According to Rapport (1971:44), this type of expression of guilt "...is a denial of his powerlessness and a belated attempt to win control over a situation which was uncontrollable." Identification with lost love ones perpetuates the survivors' sense of guilt and results in the feeling that they have no right to enjoy life.

According to psychoanalytic theory, guilt feelings arise largely as a function of the reactivation of early oedipal wishes which incorporate the love-hate conflict towards parent. In the Holocaust, early death wishes of the child are fulfilled, in that parents did actually die. These early wishes could be revived unconsciously and result in inner conflict and turmoil. An outlet for this guilt takes the form of self accusation for failing to protect relatives. Related to this is the unconscious rage experienced by survivors towards their parents for not protecting them (Jaffe, 1970; Rappaport, 1971; Bergmann, 1982). Closely connected to the issue of survivor guilt, is the unconscious identification of the survivor with the aggressor. This, according to Krystal and Niederland; Chodoff (1970) and Grubrich-Simitis (1981), is a crucial aspect of having survived.

The belief of the early theorists in the pervasive presence of guilt feelings among survivors is summed up by Rappaport's (1971:46) statement that: "Survivor guilt is a term with the unequivocal implication that freedom from guilt could have been obtained by non-survival". Overwhelming feelings of guilt can be severely debilitating and may undermine the individual's self concept and sense of self worth. Guilt feelings tie survivors to those who have perished, providing them with continuity with the period before persecution, but not allowing them to function effectively in the present (Bergmann, 1982). Guilt is also one way for the superego to preserve its moral stance and capacity for functioning.

The impairment of total personality functioning in the face of the concentration camp experience, leaves the survivor susceptible to the development of the psychopathology. The majority of early psychoanalytic theorists believed that the personality becomes so regressed when confronted by the concentration camp conditions, that fixation at infantile stages of development is the only means of functioning open to the survivor (Krystal and Niederland, 1968; Niederland, 1968; Chodoff, 1970). Given the above view it would appear that no survivor could possibly be symptom free. Many of the early psychoanalytic theorists echo Grubrich-Simitis (1981) view, that the psychic alterations which occurred in the concentration camp resulted in irreversible structural damage.

4). A Critical Review of Psychoanalytic Formulations:

There has been a recent growth of criticism aimed at the psychoanalytic understanding of the concentration camp inmate's behaviour. As noted, many of the early formulations are based on Bettelheim's assessment of the inmates behaviour in the camps. The current criticisms leveled at this work undermine the validity of his conceptualizations (Marcus and Rosenberg, 1988).

Brenner (1980:238) argues against the belief of the passivity of the concentration camp inmates. He notes that the maintenance of personal autonomy and mastery presented a means to sustain integrity and prevent the disintegration of self within the abnormality of the surroundings. According to him

"Since the purpose of the camp was the ultimate death of its inmates, survival was never really achieved passively, although controlled passivity was a requisite for survival. Survival itself could be seen as an expression of determination and autonomy."

Des Pres (1976, 1989) disagrees with the idea that the behaviour of camp inmates was characterized by regression to infantile stages of behaviour. He views psychoanalytic theory as failing to take account of the prevailing situational factors, that a preoccupation with food was caused by literal starvation and inmates were forced to live in their own excrement. Similarly Grossman (1989: 220) notes that the concept of oral regression refers to psychological regression and fixation in a well fed individual. "A preoccupation with food when one is hungry is not regression. It is the body's attempt to remain alive." Hass (1990) believes that to truly regress in the camps meant certain death. Rappaport (1971) suggests that regression implies a return to childhood or infancy, but no child is forced to live under the conditions which the prisoners lived. According to Des Pres (p.151-2), child-like behaviour is not the same as the battle for survival. "the former entails passivity and a preference for illusion; the latter demands intelligent calculation and a capacity for quick, objective judgment."

Continued ego functioning is reflected in the ability of the survivors to adapt to the reality in which they found themselves. True survival included making choices regarding the negotiation of camp life, which entailed hyper-alertness to continually altering circumstances and active manipulation of the environment (Nemeth, 1971; Hass, 1990, Dwork, 1991). According to Berger (1985), survival meant maintaining certain perceptual defenses, maintaining a relation to the external environment and the maintenance of an integrated sense of self.

Also questionable is the psychoanalytic postulation regarding the suspension of superego functioning. There are many narrations of small acts of kindness among and aid between inmates which illustrate that, where possible, prisoners held onto their moral values, although the expression of this was reduced considerably. Survivors also displayed social behaviour within the camps. This is contrary to Bettelheim's (1952) view that surviving entailed egocentric and isolationist behaviour (Des Pres, 1976; Ornstein, 1985). Social groups provided support systems for inmates and ensured the continuation of social behaviour which acts against dehumanization. Luchterhand (1967) argues that survival was largely dependent upon the formation of social networks.

Des Pres (1976) and Krell (1979; 1985) believe that a psychoanalytic explanation is inadequate to fully account for the experiences of the survivor. Psychoanalysis is a theory based on the culture of civilized humanity. Its methods involve the exploration of meanings on more than one level, embodied in symbolic forms. According to Des Pres, this cannot be applied to conditions of extremity, when the response occurs in direct relation to necessity. This real and constant death threat determines behaviour, rather than past experiences, and no symbolic meaning can be attached. Similarly, Grossman (1989:215) argues that existing theories of personality may be inadequate in understanding the concentration camp experience "since the latter represents a breakdown of the norms and values on which these theories are based." Amery (1980:18), a survivor of the camps, phrases it as follows:

"nowhere else in the world did reality have so much effective power as in the camp, nowhere else was reality so real. In no other place did the attempt to transcend it prove so hopeless and so shoddy."

Psychoanalytic formulations do not seem to take sufficient account of numerous interacting variables which may play a role in determining the post traumatic functioning of survivors (Terry, 1984). The survivor became viewed as a historyless person whose entire personality was shaped by one event. Survivors were also seen as a homogeneous group (Steinberg, 1989). Marcus and Rosenberg (1988:56) argue that the frequent use of the concept of the "survivor syndrome" had led to a reductionist way of viewing survivors.

"The difficulty with the survivor syndrome hypothesis is that an interesting speculative framework for understanding the often immediate psychological effects of the survivor experience became an uncritically accepted paradigm into which the survivor was fitted. Moreover, this paradigm of survivorship was viewed more or less as fact."

Similarly Steinberg (1989:27) notes that

"The limited power of this model to explain the behavior of Holocaust survivors in treatment did not appear to inhibit its use. The survivor was often too readily diagnosed as having the syndrome, and other characteristics not necessarily consonant with the survivor syndrome were ignored."

Although providing a framework for understanding the manifestation of symptomatology displayed by survivors, psychoanalysis tends to focus too heavily on pathology and is limited in recognizing the possible existence of ego-regenerative processes in survivors. Terry (1984) even notes that survivors' have been stigmatized and stereotyped by those who aimed to aid them. This emphasis on pathology is largely a consequence of generalizations from the study of clinical survivor samples (Solkoff, 1982; Last, 1988; Marcus and Rosenberg, 1988).

Recent work tends to suggest that guilt plays less of a role in the manifestation of psychopathology than was earlier believed. Currently there is also a focus on the adaptive elements of this guilt experience (Steinberg, 1989). For example, survivor guilt provides a means to maintain a bond between survivors and their lost loved ones, rather than only being viewed as an inability to relinquish the lost loved object. Guilt feelings may also aid the survivor in working through late mourning, and has a commemorative function, allowing survivors to feel that they are maintaining loyalty to the dead. One of the most adaptive functions of guilt is to serve as a reaffirmation of morality after the experience of the Holocaust (Danieli, 1988).

5). The Importance of Other Variables:

As early as 1964, Venzlaff noted the importance of looking at different experiences of the survivor in both the pre-Holocaust and post-Holocaust period. However, his suggestions were not followed up on until a decade after psychoanalytic interpretations of the survivor experience were firmly entrenched as the leading authority on survivors.

Numerous authors note the importance of taking account of individual differences and personal history in order to provide an adequate understanding of the current functioning of the survivor.

"History is a powerful telescope; from a distance in time and space, events of the greatest variety become condensed and create the image of a single event that millions were supposed to have shared in an identical way. In reality, for each survivor his or her experience was unique, not only in its personal meaning,

but also in the details of the circumstances under which they had occurred."
(Ornstein, 1985:107).

Similarly Furman (1973: 379) states that "Perhaps the only shared factors are those of having experienced a stressful interference of more or less traumatic proportions and the task of coming to terms with having survived it." And, according to Berger (1988:208) "To assume that the mutual experiences are powerful enough to neutralize the individual elements is most inaccurate."

Hass (1990) believes that the pre-Holocaust personality of the individual plays a major role in the potential for post-war adaption. According to him, the younger an individual during the Holocaust experience, the greater the risks of post-war decompensation. Differences in survivors' wartime experience may also account for differences in later adjustment. Steinberg (1989) argues that a key factor in understanding post-war reactions is the duration of suffering and extent of humiliation to which the survivor was subjected. Protracted exposure to humiliating experiences may increase feelings of unworthiness in the survivor and lead to self hatred and rage, which prove difficult to resolve. Jaffe (1970), Klein (1983) and Steinberg note the importance of taking into account variables, such as pre-war family and community structure, pre-war personality, age at persecution and duration of traumatization, in terms of providing a more holistic understanding of the post-Holocaust functioning of the survivor. Klein argues that each survivor is unique, in terms of both their Holocaust experience and their response to the Holocaust. He believes that the latter is largely based on the individual survivor's level of functioning and development of coping structures prior to the Holocaust. There also appear to be differences in post-war adaption depending on the country to which the survivor immigrated. Survivors in Israel seem to fare better than those in the Diaspora. Numerous reasons are provided to explain this phenomenon, such as the experience of "rebirth" in building up the state of Israel; being part of a struggle of a new nation, which provided the survivors with the autonomy they were lacking in camp; and participation in the defense of new country (Winnik, 1966; Klein, 1971; Krell, 1979; Newman, 1979; Bergmann and Jucovy, 1982; Hass, 1990).

Kijak and Funtowitz (1982) believe that after liberation the individual's psyche is characterized by the co-existence of two aspects of ego functioning; an ego-part which is fixated in the camp experience and an ego-part which has adapted to a new reality. The second ego-part is characterized by an attempt to adapt and function healthily in the post-Holocaust period. Relations between these two aspects of the ego is viewed as unstable. The ego in reality is continually invaded by the ego fixated to the trauma. If the latter overwhelms the former, this results in the manifestation of symptomatology. In this framework the possibility for ego-regeneration is highlighted in the existence of an

adaptive ego-part. Kijak and Funtowitz also note that the healthy ego-part has recourse to other variables, such as premorbid personality characteristics which may aid in ego-regeneration.

The current perspective, with the focus on numerous interacting variables which determine the survivors' post-Holocaust functioning, provides the framework necessary to understand those who survived not solely in terms of a model of pathology. In this paradigm, survivors are viewed as possessing the potential for ego-regeneration, psychic reintegration and post camp adaptability. This view promotes the study of coping mechanisms within survivors which enables them to adapt and overcome the negative effects of exposure to massive trauma.

6). Coping Behaviour of Survivors:

Many survivors have adjusted well and shown remarkable resilience (Porter, 1981; Bergmann and Jucovy, 1982; Berger, 1985). The danger of over-emphasizing pathology in survivors means that little attention is paid to human potential for recovery. Dimsdale (1980) focuses on coping strategies utilized by survivors during their internment in order to lessen the impact of stress. Coping mechanisms adopted within the camps may have provided the survivor with the internal resources necessary to adapt in the post-Holocaust period. If survival was to some degree dependent on skill then the same means utilized by the survivor to survive, may be operative in the aiding their adaption after the war.

According to Dimsdale (1980), the coping behaviours of camp inmates can be divided into seven general themes. **Differential focus on good**; which refers to a focus on small gratifications. **Survival for some purpose**; certain motivating factors, i.e. the need to seek revenge or bear witness, often aided inmates in surviving the camps. Frankl (1959) argues that one of the most powerful thoughts in promoting survival was that of being reunited with family. **Psychological removal**; insulating oneself from outside stress which aided in warding off shock. Included in this is **time distortion** which represents a focus on the past or on a fulfilling future. **Mastery**; the expression of autonomy through some degree of mastery so as not to feel too defeated by stress. Survival itself was also seen to be an expression of this mastery over defeating external circumstances. The most basic coping strategy is **the will to live**, especially as continued life meant continued suffering. Those who gave up this will to live reached, what was termed in the camps as, the **musulman stage** and were doomed to die (Frankl, 1959; Niederland, 1968). The **mobilization of hope and group affiliation** was also basic to survival.

Many of the patterns outlined by Dimsdale are noted by psychoanalytic theorists (i.e. time distortion), but solely in terms of the pathological effect which this may have on the

survivors subsequent functioning. The use of these same coping mechanisms in the post-Holocaust period is not necessarily beneficial, as within a less abnormal environment, these defense mechanisms may not be adaptive. However, the strength which underlies the utilization of coping strategies within the camp environment, may be viewed as a measure of the strength of the survivor and the potential exists for these inner resources to aid in later recovery.

One particularly important coping means of survivors appears to be their need to maintain their Jewish identity. This provides survivors with a historical connection between the generations and allows them to search for a specific group affiliated meaning for their suffering (Klein, 1983). Once the extent of suffering is linked in weight to the greater body of history, meaning can be sought beyond the confines of a cultural framework of understanding. Brenner (1980:253) believes that a specific cultural framework falls short of providing meaning to an occurrence of such magnitude.

"Our cultures help give us ways of thinking about and dealing with the tragic death of a child or even our own incapacitation or untimely impending death. But no cultural framework provides a way to encompass genocide. Thus the individual who has experienced these traumatic events is faced not only with a loss of individual values and beliefs, but also with the failure of the total culture to provide a meaningful explanation for those events."

Religious adherence and belief in God may provide some framework which enhances coping among survivors (Marcus and Rosenberg, 1989). Although survivors display mixed religious responses to the Holocaust (Brenner, 1980), Danieli (1985) argues that as the survivor ages a return to the performance of rituals and tradition may be viewed as a nostalgic enterprise and an attempt to restructure continuity with the pre-Holocaust period. Results of a study by Carmil and Breznitz (1991) suggest that the experience of the Holocaust does not lead to a belief in a world without God. For some the only feasible explanation for surviving such trauma may be in terms of a higher more powerful force. Brenner notes that many Jews who became observant after the Holocaust relate this to a bargain established with God; they would be observant if God helped them to survive. These bargains were psychologically life preserving and survival oriented modes of thinking. If the Holocaust may be interpreted in a religious frame of reference, this sense of meaning may (a). guard against psychic disintegration (b). provide continuity with the past and therefore aid in the maintenance of ego identity.

The study of survivors adaption after the Holocaust provides insight into an area which was previously not even conceptualized (Hass, 1990). Given the enormity of the Holocaust

experience, the identification of factors which promote resilience to trauma is an important endeavour, and one which has largely been ignored. This is not to de-emphasize the horrific effects which such a trauma may have on the human psyche. The recognition of the potential for later healthy functioning alerts theorists to the dangers of a simple reductionist perspective based on the stress-pathology model. Emphasis must be placed on the potential life enhancing forces which may be present in survivors. Not only will this increase conceptual understanding, but it will also prevent generalizations and the stigmatization of populations which have already suffered massively.

7). Experimental and Observational Studies:

Empirical and theoretical work have developed largely independently from one another. The early psychoanalytic view of the post-war functioning of survivors was derived from the study of individual clinical cases or small clinical samples. Generalizations regarding the psychological profile of survivors based on findings from these samples is inadequate. Recent experimental and observational studies take account of the importance of numerous variables in understanding post-Holocaust reactions and many focus on coping strategies of survivors.

Hafner (1968) tested the hypothesis that the murder of near relatives was positively correlated with the manifestation of psychopathology. He found limited differences between the group that had lost all of their nearest family members and those that had lost few. In fact, contrary to theoretical beliefs, he found that depression is more frequent among those patients who still have close family members. These findings do not verify the hypothesis that mourning over the death of a lost loved one is an important theme in the manifestation of psychopathology. Hafner did note that a correlation existed between symptomatology and duration of traumatization. He also found a small degree of dependency between manifestation of symptomatology and personal variables of the survivor, for example age and social class. Klein, Zellermyer and Shanin (1963) assessed whether a difference exists between individuals who have undergone various forms of oppression. Dividing their small group of subjects into those who had experienced a). Ghetto, Extermination or Concentration camp b). Cover c). Labour camp d). Partisans; they found that the greatest incidence of psychotic syndromes occurred in group a and b. These findings support the hypothesis that the type of traumatization is important in determining the development of symptomatology.

In his study of the existence of psychosomatic skin disorders in concentration camp victims, Shanin (1970a) argues that certain people are more susceptible to the development of guilt feelings than others (as opposed to the belief that experience of guilt among survivors is universal). This implies the importance of premorbid personality

factors. 50 of his sample of 128 survivors were found to be suffering from psychosomatic disorders, which was related to the intensity of guilt experience. These findings indirectly support the importance of individual characteristics of the survivor in determining the potential for the manifestation of symptomatology and the form which this takes. A second study conducted by Shanon (1970b) points to the importance of severity of persecution in determining the manifestation of psychosomatic skin disorders. Of a sample of 1 943 survivors (476 had been in concentration camps), 27% of those who had been incarcerated in concentration camps suffered from psychosomatic skin disorders as opposed to 10% of those who had not been in concentration camps. According to Shanon, the behavioural changes which accompany the appearance of psychosomatic skin disorders are different in concentration camp inmates, as opposed to behavioural changes in those who were not incarcerated. Findings also suggest a difference in the manifestation of psychosomatic skin disorders among males and females; 33% of males presented with this symptomatology in contrast to 22% of females. Type of persecution experienced interacting with personality variables appears relevant in determining the possibility for the development of symptomatology and form of manifestation.

Antonovsky, Moaz, Dowty and Nijsenbeek (1971) studied the extent to which one may find successful adaption among concentration camp survivors. They utilized a non clinical sample of Israeli women experiencing menopause, to assess the regenerative powers of the ego. Findings suggest that the survivor group are less well adjusted to climacteric changes than the control group. However, in terms of ego-regeneration, 40% of survivors were rated to be in excellent health with mild symptom formation, while 29% showed no evidence of symptom formation. The authors suggest three interacting factors in explaining successful post-war adaption and ego-regeneration, a). underlying strength within these survivors b). the existence of an environment which allowed for the re-establishment of positive and meaningful existence c). a process of 'hardening' (from Shuval, 1958), which allows the survivor to adapt better to current stress. They therefore attribute the potential for post-war adaption to the existence of an interaction of positive external and internal forces.

Experimental research challenges the psychoanalytic conception that guilt is an ever present and universal phenomenon among survivors. In a study by Leon, Butcher, Kleinman, Goldberg and Almagor (1981) they found no significant incidence of survivor guilt among their non-clinical sample in comparison to controls. They argue that the utilization of skills and resources necessary for survival does not seem consonant with the idea of extreme guilt. However, a shortfall of this study is that no measure was designed to directly determine the existence of guilt feelings within the sample group. Lobel, Kav-Venaki and Yahia (1985) assessed the presence of feelings of guilt among a sample of

survivors compared a control group matched on ethnic and religious variables. Findings show no significant difference between survivors and controls on guilt feelings in everyday behaviour.

The Leon et al findings also differ from other studies which tend to support aspects of the survivor syndrome. In a study of 68 survivors, Dor-Shav (1978) found that they displayed perceptual and cognitive deficits in comparison to a control group. In contrast, Leon et al found that their survivor group exhibited a greater tendency toward quick action if external conditions warranted it. Leon et al's findings also contrast with Dor-Shav's in regard to the area of interpersonal relations. The Dor-Shav study indicates that survivors display a difficulty in being accessible to others and in the maintenance of positive relationships with others, findings consistent with the identified symptoms of the survivor syndrome. Conversely, Leon et al found that their sample of survivors were able to interact positively on an interpersonal level. The results of the study by Leon et al suggests that not all survivors experience severe psychopathology and many are able to overcome their experiences and live productive lives. In contrast, Dor-Shav's study essentially supports the stress-pathology model.

Shanan and Shahar (1983), Berger (1988) and Shanan (1989) argue that Dor-Shav's interpretation of the results of her study contains major flaws. According to them, although she interprets her data as supporting the stress-pathology hypothesis, on close inspection there appears to be little difference between her subject and control group. Where differences do exist, they do not imply that survivors are unable to cope and function adequately within their post Holocaust environment. The findings from both the Shanan and Shahar and the Shanan studies tend to agree with those of Leon et al. Shanan and Shahar, in a well designed longitudinal study, found that their survivor sample display more task oriented behaviour, cope more actively and express more favourable attitudes toward family, friends and work than the control group. They also noted that the survivors reported more stability during the past decade and displayed greater current satisfaction than the Israeli group. In general, no differences were found on any parameters of coping style. Slight differences were noted between the control and survivor group in cognitive functioning, but this did not reach pathological levels.

Shanan (1989) conducted a follow up study on the same sample group, with a control group matched on numerous variables. Information derived from TAT scores suggests that these survivors function at a level similar to the Israeli group of controls. No differences were found on the personality measures and similar to the previous study, survivors were found to display more active coping mechanisms. The same positive attitudes of survivors found by Shanan and Shahar with regard to the past decade and present satisfaction were

noted in the Shanan study. Interestingly, a study by Carmil and Bresnitz (1991) found that with regard to future orientation, survivors displayed extreme faith in the possibility of the existence of a better future. Returning to a discussion of the Shanan study, the sole difference found between survivors and controls was on the cognitive dimension, where survivors displayed degrees of impairment of short term memory, attention span, lowered levels of conceptualization and a tendency towards concretism. In general, however, results of this study also support the adaptive potential of many survivors in the post-Holocaust period. The findings of the Shanan and Shahar and Shanan studies are particularly important in that the initial research was conducted without the knowledge that the data would later be utilized to study survivors.

Weinfeld, Sigal and Eaton (1981) studied 13 survivors residing in Quebec and compared them to 120 foreign-born respondents who had not experienced the Holocaust. In agreement with the Shanan and Shahar and Shanan findings, they found that there was no difference between the survivors and the controls with regard to satisfaction with the political and economic environment. Survivors do not appear to be more segregated within the Jewish community than other Jews, however there was a significant difference between survivors and greater social segregation when compared to other immigrants. The data does not show survivors to be in more negative circumstances than controls on measures of family income and occupational status. Findings suggest that a large number of survivors are able to make satisfactory adjustments.

The above findings agree with Ornstein's (1985:115) postulation that psychological recovery is defined as "...the capacity to maintain a sense of continuity, to anticipate the future with enthusiasm and vitality - not the absence of pathology." Similarly although Carmil and Carel (1986) found that emotional distress is still evident in the victims of the Holocaust, there was no difference between the group of survivors and immigrant controls in general feelings of life satisfaction and with regard to psychosomatic complaints. The findings from these studies using non-clinical samples do not suggest that survivors' suffer no adverse effects as a result of their trauma, rather they may be able to overcome this adversity and lead adaptive lives despite some degree of disturbance in functioning.

An interesting study by Lomranz, Shmotkin, Zechovy and Rosenberg (1985) illustrates the relevant weighting which the Holocaust experience may be given by survivors, through the assessment of survivors' time orientation. Compared to a control group survivors were found to regard the Holocaust period as wider, denser and closer. They tended to be more past oriented and to use the Holocaust as a yardstick for attributing importance and meaning to current events. In contrast to other findings, survivors were found to have a more pessimistic attitude towards life events. These results suggest that the Holocaust

experience does impact on survivors' in some important areas. This is not necessarily related to the manifestation of psychopathology, rather results are in accordance with what may be an obvious implication of exposure to such overwhelming trauma. Given the enormity of the Holocaust, this event is likely to be the most heavily weighted within the life cycle of the individual, against which current events are continually measured.

In an observational study, Porter (1981) identifies some of the positive factors which have increased the survivors' resilience to the manifestation of pathology. Findings from this study suggest that, in general, survivors tend to live together in tightly knit communities (in contrast to the Weinfeld et al findings) and perpetuate the culture, religious orthodoxy and traditions of their old countries. The significance of this is that it supplies the survivor with a link to their past heritage and a sense of continuity, which is an important factor in the maintenance of a stable identity. Living together in a survivor community provides a social support network for each survivor. Both Porter and Schneider (1975) note that the majority of survivors have succeeded financially and in this respect have been able to function adaptively.

The majority of studies which have found less evidence than expected of psychopathology in survivors have utilized non clinical samples and comparative control or immigrant groups. In contrast to the early work, current research has greater generalizability because of both the focal sample and the utilization of more controlled research methodology. However, the findings of less pathology and greater adaptability of survivors in these later studies may not be the sole product of better research design, but also interacts with historical occurrences. The latter group of studies were conducted numerous decades after the occurrence of the Holocaust; thus suggesting that perhaps survivors were able to overcome many of the adverse aftereffects of traumatization over a longer period. This view supports the possibility of ego-regeneration.

There is one more recent study, conducted by Eaton, Sigal and Weinfeld (1982) on a non clinical sample, which indicates that there do appear to be long term stressful consequences of the Holocaust. Their findings show a slightly higher tendency for survivors to report more psychiatric symptoms than the controls. However they did find that the long term consequences for physical illness were no greater than the controls. Although these findings suggest that psychiatric symptomatology may be greater in survivors, this does not necessarily mean that all, or even most survivors suffer full blown pathology in the form of the survivor syndrome. Much of the current research supports the view that the majority survivors possess the potential for ego regeneration and post-camp adaptability. This is not to discount the effects of the Holocaust on the long term functioning of survivors. Most studies suggest that the Holocaust has left scars on

survivors, and these scars have the potential to undermine personality functioning, but it is no longer believed that they always will.

8). Problems in the Study of Survivors:

Problems exist with the current research on survivors. Many studies treat survivors as a homogeneous group and fail to take account of diverse wartime experiences (Hass, 1990). An insufficient number of replications have been conducted and thus generalizable conclusions are limited (Solkoff, 1982). Hass and Solkoff (1981) also caution against generalizations and simplifications in order to promote general theories, especially from inadequately gathered data. In an attempt to combat these problems, Kahana, Harel and Kahana (1989) argue that interviews must cover a broad time span, i.e. must provide an adequate assessment of the pre-Holocaust, Holocaust and post-Holocaust experiences of the survivor. The studies also display other methodological flaws, such as the use of small samples and little report of the measures utilized to assess samples.

The study of people who have been subject to massive psychic traumatization presents certain difficulties. According to Nemeth (1971), obtaining a detailed and accurate history of concentration camp events is often very difficult as the recounting of experiences may be threatening to both the survivor and the listener. Furthermore, repression of many of the emotionally charged memories of persecution may result in difficulties for the survivor in recalling experiences or expressing emotions related to the concentration camp. Victims of trauma may wish to avoid discussing their traumatic experiences, and refuse or fear participation in a psychological study. Survivors have also been long subject to a "conspiracy of silence" and have experienced subtle pressures to avoid discussing or dwelling on the past. This may have an impact on the survivor's willingness to participate in research (Kahana et al, 1989).

In relation to the current study two important issues must be raised. Survivors who are still alive at present represent a group with two special features. Firstly, many were children or adolescents during the Holocaust. As noted, some authors (e.g. Hass, 1990) believe that the younger the age or the earlier the developmental stage at which the Holocaust occurred, the greater the risk of later developing pathology. Robinson (1979) attempted to establish whether a significant correlation existed between the age of persecution and development of psychopathology. He found that the extent of psychological damage was greater in those subjects who experienced persecution at an earlier age.

Similarly De wind (1971) believes that one must differentiate between those individuals persecuted in early childhood and those traumatized in adult life. Adults already have

intact psychic structures prior to incarceration, while children are not able to develop these essential psychic structures in the bizarre world of the concentration camp. Freud and Dann (1951) in their study of the Bulldog Banks children (six children found on liberation under the age of three) show that immediately after liberation these children displayed behaviours which were very different to those of same age children raised in a normal environment. Most survivors who are still alive would probably have experienced persecution in late adolescence or as young adults, as opposed to as children, as the latter were of the first sent to the gas chambers. Still, adolescents may have experienced a very difficult period of readaption to a normal life compared to adults who had led an established life prior to the Holocaust.

The second feature to note is the implications of old age and survivorship. It is approximately 48 years after liberation and many survivors will now be experiencing senescence. It is very important that the impact of old age on this population is taken account of, as the additional psychological and physical stresses encountered during this life stage may further undermine the functioning of the survivor (Hass, 1990). According to Krystal (1984; 1991), old age poses the issue of diminishing gratification, which may be exacerbated within this population. He notes the presence of anhedonia in survivors and believes that this increases with old age due to a loss of gratification and support systems. People also experience increased recall during senescence and recalling the horrors of the Holocaust experience may be very stressful.

Danieli (1981c) supports these views, while also noting certain problems with Krystal's work. She feels that he does not sufficiently emphasize that the experience of old age may, in and of itself, be traumatic for the survivor. Senescence may increase the experience and manifestation of psychopathology. Hertz (1990) argues that with age the ego loses its well functioning defenses. Partial memory failure may be filled with reminiscence and nostalgic thoughts, which elicits vivid pictures of the Holocaust. Certain feelings may be heightened in survivors on reaching old age. The experience of children leaving home may result in a reliving any traumatization related to the loss of loved ones. Similarly increased sense of isolation, abandonment and loneliness common in elderly people may be related to the Holocaust experienced of being socially isolated.

Eitinger (1973, 1981) and Eitinger and Strom (1981) have noted that Holocaust survivors show early aging and higher than average mortality rates. Shanan and Shahr (1983) and Shanan (1989) believe that survivors who have outlived their counterparts may possess certain qualities which have enabled them to survive. They term this selective survival. Thus, they feel that it is important to recognise that some people may adapt even after extreme stress in ways that safeguards their long term personality development. Survivors

who are currently still alive may have developed a greater amount of resilience and self protection in the face of adversity.

In relation to the present study it has been noted that discussing experiences associated with trauma may be difficult for elderly survivors (Kahana, 1989). However Kahana points out that the elderly survivor may also be more willing and perhaps even eager to talk about their Holocaust past, as they may recognise the importance of bearing witness for the sake of future generations. He also notes that the implications of the Holocaust for its aging victims is not necessarily uniform or negative. Although 45% of his sample felt that the Holocaust had made it more difficult for them to cope with aging, 29% felt that the Holocaust made no difference and 26% felt that it was easier for them to cope with aging. He makes the important point that

"It is noteworthy that most survivors seek some collective wisdom or lesson from the horrible miscarriage of humanity they witnessed... In this sense, it is not surprising that instead of, or alongside personal despair in late life many survivors experience a sense of purpose and meaning that allows for positive affect and a sense of satisfaction." (p. 209).

9). In Summary:

Current research points to the flaws in the early views on survivors. This research suggests that survivors have ego regenerative powers and are better able to cope in the long term than was previously believed. However, the recent conceptualizations and empirical findings are yet to be laid out in a coherent theoretical framework. Currently there is a movement away from an emphasis on the manifestation of psychiatric symptomatology in survivors and a concurrent recognition of the internal coping resources available to this population. In line with this new understanding, there is a need to establish those factors which promote coping and ego regeneration in survivors in the post-war period. This new focus also has implications for theory and research regarding the intrafamilial functioning of survivors. Coping and ego regenerative patterns within this population may suggest that survivor parents are able to provide positive child raising environments. Additionally, their past experience of trauma may not be as negative or detrimental to the development of their children as the early theory would have led us to believe.

CHAPTER 2

CHILDREN OF SURVIVORS: A REVIEW OF THE LITERATURE ON THE TRANSMISSION OF PSYCHOLOGICAL EFFECTS ACROSS GENERATIONS.

The current focus regarding the study of the effects of the Holocaust has shifted towards an assessment of the children of those who survived Nazi atrocities. The definition of children of survivors or second generation includes families where either one or both parents had experienced incarceration in Nazi concentration or extermination camps; or had suffered prolonged persecution and threat of loss of life and family, under the Nazi's. These children are born either in Displaced Persons camps or the country to which their parents had immigrated in the post-Holocaust period (Bergmann and Jucovy, 1982).

The initial study of the survivors' children and the search for possible psychological implications was based on the following general assumption as outlined by Sigal (1973:411):

- (1). Those who experience similar deprivation or traumatic alterations in their psychological environment will later experience similar symptomatology and
"will subsequently develop distortions in their capacities for human relations similar to others having had the same experience."
- (2). That disturbances or distortions in certain interpersonal capacities will produce common disturbances in this group in relation to their children in the form of specific parent-child relationship patterns.
- (3). These disturbances similar to this group in terms of parental functioning will result in common disturbances or distortions in the functioning of their children.

As with literature on survivors, this chapter also focuses on the progression and development of theory and research related to the target population. Similarly an attempt is made to systematically outline the history of research and theory on children of survivors from its origin to the present. In section 1, the pioneering research in this field is explored. The second section outlines the subsequent development of theory regarding the impact of parental Holocaust past on the intrafamilial dynamics and functioning of the second generation. These views describe children of survivors as being negatively affected by the Holocaust experiences of their parents. The third section presents the current difficulties in contemplating how "Holocaust effects" are transmitted intergenerationally. This is a complex problem and mechanisms or modes of transmission are difficult to specify. Very little literature regarding this issue exists.

As in the development of theory in relation to survivors, the current focus shifts away from a negatively skewed picture of the detrimental influence of the Holocaust within survivor families. Section 4 outlines a critique of the early views, which is aimed especially at addressing the emphasis on the transmission of negative effects within Holocaust families. Thus, the conceptual framework is now broadened to include the possibility of the existence and transmission of effects which could be both positive and negative. In line with this, the issue of resilience in children of survivors is discussed in section 5. In section 6, communication as a key means of the transmission of knowledge and effects is assessed, and in section 7, problems with the early studies are outlined. Findings from more recent studies are discussed in section 8. Lastly, the key areas of Jewish identity, group affiliation and religious adherence as related to children of survivors are addressed. This section is included, as these concepts, while comprising an important part of the identity of children of survivors, are conflictual as they are intricately interrelated with the Holocaust experience of their parents.

1). Early Studies:

Interest arose in this population group in the late 1960's and the first study was conducted by Rakoff, Sigal and Epstein (1967) in Montreal. Their interest had been generated by the disproportionately large percentage of children of survivors seeking psychiatric aid. Citing clinical examples they identified a need for children to fulfill the role of the lost family members, and the unwillingness of parents to respond to the real concerns of their children whom they perceived as reincarnations of lost loved ones. This, they felt, led to depression and apathy in children who are unable to develop a separate and unique identity. Their work stimulated researchers to begin to delve into the possibility of the transmission of trauma into the second generation.

Another clinician to highlight the possible implications of parental Holocaust experience on their subsequent children was Trossman (1968). He assessed numerous children of Canadian survivors who presented with clinical symptomatology and discovered the existence of certain prevalent patterns or dynamics within survivor families. According to Trossman the parents of his patients were excessively overprotective and smothering of their children, while constantly alluding to the possibility of impending danger. As a result many of the children became "moderately phobic" or alternatively were involved in a constant struggle to break free of their parents. A further feature of many survivor families was the suspicion and hostility which survivors displayed toward the non Jewish world. Imparting this to their children could result in them becoming mistrustful of the external environment. Additionally, within families, overt and covert implications existed that the child must provide meaning for their parents, after the suffering which they had experienced. The child becomes viewed by parents as a symbol of rebirth. The last pattern

noted by Trossman is when one spouse dominates the family, as the other is too debilitated to function adequately. The emotional and supportive absence of one parent may have immense implications for the child, especially in late adolescence, and if the parent is the same gender as the child.

Trossman did note, however, that the presenting problems of his patients were in no way uniform, and symptomatology ranged from mild problems of adjustment and academic difficulty to borderline states. Thus, it is notable that there is no definition of a specific syndrome which may be attributed to survivor children as a result of their parents' experience, rather the dynamics in the survivor family give rise to certain difficulties experienced by the children which appears to result in problems in their functioning.

In relation to this point, Sigal and Rakoff (1971) conducted the first systematic pilot study of the effects of parental trauma on the second generation in an attempt to determine whether one can define a syndrome typical of survivor families. They selected 32 families from an Outpatient Psychiatric Department in Montreal. Their control group consisted of 24 Jewish children referred to the outpatient facilities, whose parents were central European immigrants, but did not meet the criteria necessary for a definition of survivor.

Findings suggested that survivor families display more difficulty in imposing control over their children than the comparison group. Survivor parents tend to be far more involved with and overvalue their children, while complaining more often about fighting among the children. Their data indicates that difficulties which arise for these children follow an identifiable pattern. However the authors do caution that based on the nature of their sample, their findings cannot be generalized to a non-clinical population. They suggest that a familial survivor syndrome may exist, but specify that this is only in relation to clinical cases. Therefore the flaw encountered in early work on survivors, i.e. over generalization of findings from clinical samples, does not exist to the same degree in the early work on the second generation.

Sigal and Rakoff also touch on the issue of the difficulty in establishing a causal link between the manifestation of psychological disturbances in the children and their parents' Holocaust experience. According to them the means of transmission of trauma may be related to parents' preoccupation with their Holocaust experience. Parents' resources are so bound up with Holocaust memories and attempts to repress them, that they have little emotional energy and attention with which to provide their children. The children are directly and indirectly pleaded with not to make emotional demands on their parents, while they react to this with depression and guilt. Survivor parents are also preoccupied with

mourning other lost loved ones and the demands of children may be viewed by the parent as an obstacle to the process of diverting all energy into mourning.

Sigal, Silver, Rakoff and Ellin (1973) conducted a study using 25 clinical survivor families along with a control group comprising 20 families. They found that children of survivors tend to report a greater sense of alienation than control group children. Additionally, survivor parents perceived a greater amount of personality problems in their children and felt their children to be more psychologically disturbed than did control parents.

Barocas (1971; 1975) and Barocas and Barocas (1973), basing their perceptions on a clinical sample, suggest that children of survivors present symptoms and psychiatric features similar to the "survivor-syndrome". They feel that the price paid for survival is deeply rooted psychological disturbances which manifest in families created in the post-war period. These psychological disturbances are then transmitted to the children. The parent uses the child as a transference object and the child becomes the recipient of a large amount of unconscious rage. The expression of repressed rage by the survivor may be unconsciously reinforced in the children, so that the children act out this aggression and vicariously gratify the wishes of the parents. Barocas and Barocas (1979) also outline separation-individuation problems in children of survivors resulting from a symbiotic relationship with their parents. The individuation process of the child threatens survivors with further object loss.

These authors believe that the survivor syndrome is perpetuated into the second generation and they comment on the complexity of the nature of the transmission of pathology across the generations. However, their articles provide very little coherent insight into the mechanisms involved in this process of transmission of the survivor syndrome. Additionally, while depicting children of survivors as displaying certain psychological difficulties, these authors do not shed light on their belief that the manifestation of symptomatology represents a cluster similar to the survivor syndrome. Their starting point also incorporates the idea that survivor parents are irreversibly damaged by their past trauma.

The early studies identified that children of survivors may experience a range of problems which follow as Sigal (1973) pointed out, a similar course among members of that population group. However, these researchers provide very little information in terms of a systematic understanding of either the manifestation of psychopathology or of the mechanisms involved in the transmission of the effects of trauma across the generations. Findings from these initial studies combined with the work on survivors laid the

foundations for the development of theoretical conceptualizations regarding the manifestation of symptomatology in children of survivors.

2). Patterns of Psychological Effects:

Aside from Barocas and Barocas, most researchers and theorists studying the second generation do not believe that children display a specific psychological syndrome, but rather that they experience common "patterns of psychological effects" which are related to their parents' past. The extent to which these psychological effects are present varies according to the unique attributes of each child of survivors (Fogelman and. Savran, 1979; 1980). Kestenberg (1982) adds that the psychological difficulties displayed by children of survivors cannot be termed a syndrome as this alludes to pathology. The literature, based largely on clinical case studies and subjective reports, which developed following the early studies, yields a number of trends and findings related to particular manifestations of effects of parental trauma in families of survivors.

According to Davidson (1980a; 1980b), in order to understand the potential for the transmission of trauma across the generation, it is important to take account of the structure of the family created in the post-Holocaust period. As a result of the camp experiences, the inability to trust others undermined the establishment of positive and fulfilling relationships. Survivors were hesitant to re-invest love in new objects for fear of losing them as well. In the period following liberation, many hasty post-war marriages between survivors took place, which have been termed "marriages of despair" by Danieli (1981a, 1981b). Survivors often found spouses based on factors such as the individual having a minor association with that person's past. Marriage partners were sought primarily on the level of companionship and were often later found to be incompatible. The bond of survivorship did not provide the means to sustain a positive relationship. Survivors who initially chose a partner with the aim of creating a new life came to view this partner as a haunting reminder of the past (Perel and Saul, 1989).

"A common background of camp experiences sometimes resulted in the creation of a dyadic victim unit in which the couple clung together in the face of a hostile, threatening environment, thus reinforcing persecutory and even paranoid feelings in each other." (Davidson, 1980a:13).

Survivors usually clung to unsatisfactory marriages rather than again facing separation and loneliness. Having children was viewed as a means to wipe out past destruction, to compensate for losses and recreate a family. Additionally, in unhappy marriages all meaning was sought through the bearing of children (Davidson, 1980a; 1980b; Freyberg, 1980; Danieli, 1981a, 1981b). For most survivors, these new families were an existential

must, and were intended to provide security, identity, continuity, and belonging (Klein, 1973). During pregnancy, women often felt that were abnormal or damaged and hence could not bring children into the world. Negative self image and a low sense of self esteem also led survivor women to believe that children born to them would be deformed (Davidson, 1980a; 1980b). According to Mor (1990), survivor parents displayed characteristics of over-protection, insecurity, separation anxiety, guilt and excessive expectations of their children. Sonnenberg (1974) outlines five patterns characteristic of the interaction between the survivor parents and their children.

(1). Parents display frequent anxiety regarding the safety of their children. This pattern is linked to the over-protectiveness of survivor parents towards their children. According to Davidson (1980a:14)

"They [survivor parents] were constantly on the alert in case some catastrophe would occur. They overfed their babies, slept with them beyond the appropriate age, and examined them frequently during the night to see that they were still breathing."

This pattern of behaviour can manifest adversely in irrational fears, especially with regard to separation (Klein, 1971), or in the children being over attached or over-indulged (Klein-Parker, 1988). The over-protectiveness of parents may promote difficulties in the separation-individuation process of the child (Klein, 1973; Steinberg, 1989).

According to Freyberg (1980; 1989), there are numerous impediments to the child's establishment of autonomy within the survivor family. Survivor parents impart mistrust and hostility regarding the external world to their children, thus the child learns early on that the external environment is dangerous. The sense of loss displayed by survivor parents and the absence of an extended family network bind the children and parents together. Separation from children on both an emotional and physical level is threatening to the parents, as separation has become associated with death and absolute loss. Furthermore, survivor parents may display difficulties with separation as many of them experienced abrupt and inadequate separation from their own parents (Rose and Garske, 1987). The children manifest a difficulty in separating from their parents, as they fear the repercussions of this "abandonment" on parents. The wish to protect parents from further emotional turmoil is also coupled with the feeling of being smothered. Freyberg reports that children often experience their parents as over-controlling and demanding, however any rage which this may evoke within the child is repressed or internalized in order to protect the parent. Some children even view themselves as their parents' protectors, i.e. fulfilling a parental role (Epstein, 1979; Podietz et al, 1984). Children may cope with this

conflict by postponing separation issues until later in their adult lives (Fogelman and Savran, 1979).

(2). The second familial interaction outlined by Sonnenberg (1974) revolves around parental identification of children with exterminated siblings.

"[T]he child born after Hitler's defeat represented a victory over the persecutor and yet created guilt about the many who had died, especially the survivors' close families who could only symbolically be revived in the child, born in liberty."
(Kestenberg and Kestenberg, 1982:47).

The lost loved object is resurrected and the child is forced to fit into the mould of parental expectations for the dead child. This pattern also has repercussion on separation-individuation and identity formation. The Jewish custom perpetuates the naming of children after dead relatives. Being named after a relative or sibling who perished in the Holocaust increases the identification of children with those who died and decreases their ability to establish a separate and stable self identity (Freyberg, 1980; 1989).

Children desperately feel that they must provide meaning to their parents' lives. The fact of a survivor child's very existence is often expressed as being a miracle. Frequently, the child feels that they have a special mission to perform which is derived from a need to compensate parents for their experience, and attempt to undo their parents' trauma (Kestenberg, 1980, 1982; Bergmann M.S., 1982; Steinberg, 1989). "The child is invested with meanings which far exceed his own, treated not as an individual but as a symbol" (Wanderman, 1976:116). "Such a child feels that one has to 'pay' for having been born and surviving" (Bergmann, M.V. 1982:295).

In fantasy the child is meant to resemble and "be" the lost loved one. This has numerous implications for his or her adequate psychic functioning. The reality testing functioning of the ego may be disturbed, while the high standards of ego ideal and superego demands suggest that the individual will constantly fall short of his or her psychic requirements. Taking the lost loved one into self representation may also be a product of attempting to establish a bridge between parents and self, allowing the child to share and understand the parents' past life and to feel accepted. However the parent may present the dead child as superior and this perception may be internalized by the living child, especially as it is impossible to compete with an idealized rival. Thus the dead child may become viewed in terms of "hated sibling rivalry" (Bergmann, M.V., 1982:296).

Idealization of the child results from the parents attempts to restore their damaged self image. The child becomes a symbol for the renewal of life. However this leads to tremendous burdens being placed on the child

"...who became the receptacle for all the shattered aspirations and hopes of their parents... It was as if the parents' existence and the justification for their guilt-ridden survival depended on the child's conformity with their idealized wishes. As a result these parents are unable to respond appropriately to the specific individual needs, thoughts and feelings of the child, who is seen entirely in terms of the parent's psychic needs." (Davidson, 1980a:14).

Consequently, many such children express a strong desire to achieve and succeed and display intense reactions to minor setbacks (Russell, 1974). "Failure meant that the child could not fulfill the role of validating the parental existence and confirmed the parents' impaired self image." However, attempts to fulfill parental expectations are often unrewarding as these are based on an unattainable ideal (Davidson, 1980a: 15). M.V. Bergmann (1982:294) believes that

"Externalization of superego and ego-ideal features may have put the realization of the survivor's child's goals into a utopian realm, and the child who has thus suffered will remain dependent on the parents and on approval from external authority."

The final three familial interaction patterns outlined by Sonnenberg (1974) include the following:

- (3). Survivors rage at abandonment by their parents is communicated to their children (however, Sonnenberg states that he is unclear of how this impacts on the second generation).
- (4). Superego deficits within the parent as a result of camp experience (as outlined in the previous section on survivors) may result in deficits of superego functioning within the child. This may then increase the potential for delinquency. According to Kinsler (1981), children of survivors display poor impulse control, which may lead to anti-social acts such as stealing and drug abuse. This type of acting out behaviour may serve as a release for pent up tension and frustration. Children may view parents as more than human for surviving the Holocaust and may continually test themselves, by placing themselves in dangerous situations (Fogelman and Savran, 1979).
- (5). The capacity and ego functions necessary for parenthood are disrupted to varying degrees within each survivor.

"The family atmosphere, because of the parent survivor's mental state, was often a pathogenic one for child rearing. Because of their depression, pessimism and general emotional depletion, parents were unable to enjoy family events together with their children; they isolated themselves from social life, and family life lacked vitality, zest and warmth." (Davidson, 1980a:13).

Joyous events for children, such as weddings or Bar Mitzvahs, may be met with ambivalent feelings on the part of the parents. Similarly parental belief that they can never again be happy impacts on the child's belief in their own happiness (Barocas and Barocas, 1979). Thus the Holocaust becomes the single most important event in the life of the family of survivors.

Survivor parents are often imprisoned within their past, while the children are committed to a past heritage, culture and family which they are unable to understand (Mor, 1990). The parents' preoccupation with the past may result in inadequate resources available to meet the present emotional needs of their children. In addition, parents may realize their parenting behaviour is deficient and respond with material over-indulgence (Rosenberger, 1973; Davidson, 1980a). When children feel that their demands are not being attended to they may become withdrawn or disruptive, hence taxing their parents limited resources further. Thus a cycle of dynamics are established which may continually undermine intrafamilial functioning (Sigal, 1971). Children of survivors also feel as though they are different to others in that they belong to small families, while their parents speak a foreign language and have accents which mark them as foreigners. As a result of adherence to two cultures, one which they never knew but constantly surrounds them, and one which they live in, the child may be stripped of stable roots and a sense of belonging, factors which provide continuity for ego identity.

Guilt is also a common theme among survivor families. Feelings of guilt maintains the relationship of both generations with those who perished (Danieli; 1981). The children may experience guilt at feeling angry towards their parents (Fogelman and Savran, 1979). Survivor parents often over-indulge their children materially as a result of guilt at not providing real affection and emotional support (Phillips, 1978). Difficulties in an adequate resolution of separation-individuation promotes both guilt and rage, and these two emotions appear to feed into one another. Fear of expression of rage towards parents may lead to guilt feelings, which, in turn increases anger. The suppression of rage for fear of hurting the parent may draw the child into greater dependency on their parents. The child experiencing intense anger towards the parents may cling to them in attempt to establish a superego support and aid in controlling these feelings of anger. Hence expression of rage within the family is prevented. The introjection by children of such intense rage may lead

to numerous psychological disturbances, i.e. phobias, sexual dysfunction and somatic ailments. Unresolved anger may also result in the establishment of punitive and rigid superego components. It must also be noted that overt psychological or somatic dysfunctions within one member of the family serves to maintain and strengthen the family bond (Freyberg, 1989).

Hearing stories of the degradation and humiliation of parents in the Nazi concentration camps may undermine the belief of the young child in the omnipotence of parents. Loss of respect and trust in parents can lead to the transference of viewing parents as all-powerful onto the Nazi's (Kestenberg, 1980; 1982). The child's identification with the parent as a persecuted victim may lead to splitting in the ego and superego representations. Parents who suffered victimization are not worthy of the idealization of their children. This may result in a devaluation of the perception of parents as authority figures (Sonnenberg, 1974; Bergmann, M.V., 1982). Degradation and guilt experienced by the parent may be transmitted to the child so that the child questions the parent's morality in surviving (Kestenberg, 1980). In some families children were often treated as if they represented the reincarnation of Nazi oppressors. A traumatized parent created the impression that they felt threatened by a defiant child and experienced him/her as the return of the aggressor (Grubrich-Simitis, 1981). Children displaying aggressive or defiant behaviour would be termed "little Hitlers" by their parents. (Davidson, 1980b).

3). Understanding the Transmission of Holocaust Effects:

"[T]he child of a Holocaust survivor is exposed to the Holocaust as filtered through the experiences of the parents. Although diluted, this exposure to the Holocaust can nevertheless serve as a significant organizing experience for subsequent developmental conflict in the child" (Jucovy, 1985:33).

Many theorists have highlighted the existence of numerous psychological difficulties which are manifest in children of survivors. These difficulties are believed to form certain specific and clearly identifiable patterns. The "patterns of psychological effects" manifest in children in relation to their parents' Holocaust experience and the impact which this has on intrafamilial dynamics.

The isolation of a clearly defined causal connection between parental experiences and children's functioning is clearly impossible because of the historical nature of the traumatic event. Exposure to the trauma was time specific and the birth of the child occurs after the event. Hence the only form of connection which can be established is correlation in terms of research and inferential in terms of theory. Hass (1990:34) notes that "Perhaps it is

unrealistic to expect a clear understanding of the transmission process that occurred in survivor families." Fogelman and Savran (1980) point out that some of the psychological difficulties displayed by the second generation may also be a function of being a child of immigrants. Furthermore, according to Herzog (1982) and Last (1988), the post-Holocaust development of each survivor varies substantially from another survivor and so too does their intrafamilial dynamics and experiences. As noted in the literature on survivors, there are numerous variables which interact in determining the subsequent course of the survivors life. Therefore the isolation of specific mechanisms which promote the transmission of trauma to the second generation is a complex task. Many features of this process of transmission are likely to be unique, however this is not to discount the possibility of the existence of aspects which may be universally recognizable within this population.

Epstein (1982) postulates two possible means of transmission of trauma. The first one he suggests involves learning, complete with identifications and introjections, while his second hypothesis encompasses a biological explanation. The only elaboration which he provides regarding the latter postulate, is that the registration of an event in the neural tissue may be composed of a unique structure if the event is associated with intense affect. These two explanations do not appear adequate to explain the complexities involved in the transmission of the effects of trauma. They may play a role in the promotion of intergenerational effects, but they are likely to be only two of many more numerous and varied influences which increase transgenerational impact. For example, in noting the complexities involved in intergenerational transmission of trauma, Herzog (1982) believes that the developmental stage of the child is an important variable to take into account. According to him, there appear to be certain "sensitive periods" at which the child is more open to parental conscious and unconscious communications. Conflicts may have a greater impact on a child depending on their specific developmental stage. This factor would also serve to explain differences in the manifestation of psychological difficulties among siblings.

Mor (1990) believes that Holocaust messages are transmitted through frequent exposure to Holocaust stories, as survivor parents have an obsessive need to talk about their past. Alternatively parents display a "protective silence" regarding Holocaust events which suggests to the child that their parents' past contained frightening and painful elements. Mor (p. 377) writes

"Information was also transmitted through symbols. Sometimes, it was the way in which their parents swallowed bread, or the way in which they reacted to the whistle of the kettle that reminded them of the trains to the death camp. Through

such symbols, sensation became imprinted on the youngsters' minds that were beyond any logical understanding. The children sensed their parents vulnerability and knew that probing into the past would inflict too much pain."

Davidson (1980a:14) feels that intergenerational transmission of trauma occurs through

"Projective identification onto the child of the parents' experiences and affects resulted from the utilization of the child by the parent attempting to work through and free himself from tormenting memories and affects by splitting them off from himself."

In line with this, Auerhaun and Prelinger (1983:42) describe what they term the process of repetition in survivors' and their children, in explaining trauma transmission. Repetition of the parents' experience through communication and vicarious reinforcement is utilized in the survivor family to effect change. It constitutes an intrafamilial attempt to provide meaning to the parent and hence aid in their healing process. According to them, this repetition occurs in the parent and child through the use of identifications and introjections.

"The parent seems to strive to incorporate the healthy otherness of her child-to take the child inside and thereby heal herself.... since the child may represent what the survivor might have become had the Holocaust not occurred."

The parent may utilize the child to fulfill his or her own narcissistic needs by reliving their childhood through their children (Rosenberger, 1973). The child internalizes the parent in an attempt to heal the parent out of both love for the parent and the need for a healthy caregiver. Survivors' children also display a desire to make sense of the history of the parent, while simultaneously hoping ultimately to internalize the new healed aspects of the parent.

The above theorists outline some of the mechanisms which may promote the transmission of trauma across the generations. Holocaust awareness and communication is an obvious variable in this process, as is behaviour and reactions of parents to stimuli which provide reminders of the past. However, it is difficult to define general means of transmission, because of the unique nature of each family coupled with the specific implications of parental behaviour and communication within their respective families.

4). Criticism of Earlier Views:

As with the early work on survivors of the Holocaust, initial research and theory on the second generation displayed numerous flaws. Current literature highlights various deficits in the existing understanding of this population; deficits which are similar in nature to those encountered in the theory related to the survivors.

Theoretical postulations regarding the second generation also initially developed in a manner which was negatively skewed in terms of an emphasis on pathology. As with survivors, the early studies on the second generation utilized clinical samples and worked within the framework of the stress-pathology model. This approach generally presumed intergenerational transmission of trauma (Last, 1988). According to Solkoff (1981:34) the predominant thought underpinning early research into the second generation assumed "...that psychological damage must have been perpetrated upon the children, and then proceeded to search for the evidence to confirm their impressions." However, as a result of both the different nature of this population (i.e. no identifiable psychological syndrome) and the growth of criticism regarding survivor theories, flawed conceptualizations did not become as rigidly structured into a specific theoretical paradigm as with the theory on survivors. Furthermore the development of a traditionally psychoanalytic understanding of this population was less likely given the historical period in which research was being conducted. As, Steinberg (1989) notes, although there was still a tendency to "syndromize" and label the second generation, these tendencies were not as strong as with the first generation.

Current theory on children of survivors displays a decreased emphasis on generalizations and a greater focus on the heterogeneity of this population (Danieli, 1985; Steinberg, 1989). Every child of survivors is unique and responds to his/her situation in a unique fashion (Sonnenberg, 1974). Whether a child of survivors manifests psychological disturbances depends on many variables which are specific to the history (i.e. birth order, number of siblings etc.) and personality functioning (ego strength) of the child; and also upon numerous factors involved in parental experience, survival and post-war adaption. (Alexsandrowicz, 1973; Fogelman and Savran, 1979; Kestenberg, 1980;1982). A further point which highlights this heterogeneity of the survivor and second generation groups relates to geographical differences. As noted, survivors living in Israel appear to fare better in terms of adaption than those living in the Diaspora. The second generation in Israel may also display greater adaption and coping behaviours than those in the Diaspora. A primary reason for this may be that Israeli children of survivors respond to stories of their parents' Holocaust experiences by emphasizing the military victories of Israel (Klein, 1973; Last, 1988).

In recognizing that not all survivors suffered psychopathology and some display remarkable psychic reintegration, coping behaviour and post-war adaption, it follows that not all will have raised traumatized children (Newman, 1979; Almagor and Leon, 1989). Hass (1990) believes that one cannot adopt the assumption of the inevitability of the transmission of pathology from survivors to their children. The recent alterations in the conceptualizations regarding the survivor impacts on research and theory regarding children of survivors on two levels. Firstly, if the experience of exposure to massive psychic trauma no longer immediately implies the manifestation of post-traumatic psychopathological functioning, then the manifestation of psychological difficulties does not follow children's exposure to their parents' experience. Secondly, noted resilience and coping behaviour within the survivor population suggests that these ego strengths may also be present in members of the second generation.

The current emphasis on the heterogeneity of the survivor and second generation populations has promoted research into the unique intrafamilial dynamics of each survivor family. Focus on the family dynamics has also led to theoretical understandings in terms of family-oriented approaches as opposed to previous conceptualizations based on individually-oriented approaches (Steinberg, 1989).

Danieli (1981a, 1981b; 1985; 1988) outlines four possible patterns which may characterized survivor families. **Victim Families:** The dominant identification is that of victim. In these families the home environment is characterized by a pervasive atmosphere of depression, worry, mistrust and fear of the external environment. Paranoid and over reactions to external events are common. This results in a symbiotic clinging relationship among family members. Emphasis is placed on the physical and material issues and somatic manifestation of psychological disturbances is common. Physical problems represent a more acceptable form as psychological and emotional disturbances may represent "Hitler's posthumous victory" to this type of family. Seeking psychological aid is also viewed as threatening and children are trained so as to be survivors in the event of another Holocaust. Separation-individuation represents a severe problem and attempts by children to separate is seen as undermining the structure of the family. It is in these families that children often feel as though they are protectors of their parents, and the parents' ability to serve as authority figures for their children is inhibited. Rage and guilt are dominant in the underlying dynamics of the family structure and guilt is used as a mechanism of control within the victim family, which is maintained as a closed system.

Fighter Families: According to Danieli this term is used to describe either the survivors' description of his/her physical or spiritual role during the Holocaust, or the perception adopted in the post-war period to counteract feelings of passivity and helplessness

experienced in the Holocaust. The home environment is characterized by compulsive activity and an intense drive to restore the destruction through creation. Physical or psychological illness is not tolerated and viewed as "narcissistic insults". Aggression and defiance in relation to the external world is encouraged. Children in this family prefer to be in control and there is a dread of passivity and helplessness in self and an intolerance of these characteristics in others. This attitude may serve to undermine the establishment of positive and fulfilling interpersonal relationships. In search of a positive self identification in relation to the dominant atmosphere within the home environment, these children often create dangerous situations in order to test and prove themselves.

Numb Families: Within these families, both parents are often sole survivors of entire pre-war family. The home environment is characterized by pervasive silence and emotional depletion. Parents are only able to tolerate limited stimulation with regard to their already taxed resources. Hence children do not receive adequate emotional attention and are often expected to grow up by themselves. The dynamics within the family follow the pattern of the parents protecting each other and the children protecting the parents. Children reacted by numbing themselves, or displaying anger in order to provoke some reaction from parents. They often seek more stable authority figures outside of the home. As a result of the limited attention received from parents, these children may develop a low sense of self esteem and feel that they are unworthy of the attentions and affections of others.

Families of "those who made it": This family group is less homogeneous than the other three. What motivates this group is characterized as a desire to "make it big" and in so doing undo the effects of the Holocaust. These families seek success and high socio-economic and political status. Families are outwardly assimilated, however children complain about discovering parental past history indirectly. The children are proud of parental achievements, but also feel emotionally neglected by them. This groups' characteristic pattern of denial of past by parents may lead to inner numbing and an inability to recognise the long term effects of exposure to trauma. This is the only group where the divorce rate is high, and there is a tendency for these survivors to marry non-survivors.

Danieli's model provides understanding of a range of patterns of post-Holocaust functioning among survivor families. Her categories are not mutually exclusive and while they provide the means to alert people to possible patterns of family pathology, they do not rigidly classify the family solely in terms of a specific manifestation of intrafamilial conflict. However, her approach still emphasizes pathology and incorporates the assumption of the inevitable transmission of trauma to the second generation. In contrast, Zlotogorski (1983) argues that the functioning of survivor families cannot be classified

into general trends, as they are characterized by very diverse patterns of family behaviour, which include coping and adaptive strategies.

This discussion also raises an important issue related to the distinction between transmission of pathology and transmission of psychological effects. The former term incorporates only that which is psychologically deviant, whereas the latter term refers to specific manifestations in children related to parental experience which may take either an ego undermining or ego strengthening form. Hence, incorporated in the term transmission of psychological effects is the recognition that these effects can have both a psychological life diminishing or life enhancing property and is more than likely a combination and interrelation of both positive (ego strengthening) and negative (psychological and emotional disruptions to adequate functioning) factors.

5). The Concept of Resilience:

Recent literature portrays children of survivors to be far more resilient and well adjusted than originally believed (Klein-Parker, 1988). Those working with this population have become more sensitive to the strengths of survivor children and try not to categorize and "syndromize" them (Steinberg, 1989). Resilience was first noted in relation to survivors and their ability to achieve psychic reintegration and ego regeneration within the post-Holocaust period. This concept was then applied in understanding the second generation and stemmed largely from the finding that not all children of survivors manifest psychological disturbances.

The concept of resilience as related to children of survivors may take two forms. The first being resilience to actual transmission of the effects of parental trauma, while the second refers to the development of psychological resilience (i.e. resourcefulness, tenacity and "hardiness" to exposure to stressful situations). The development of the second form of resilience in children is likely to be related the presence of these qualities in parents. Thus in the latter conceptualization resilience is one of the psychological effects (ego strengthening) which is transmitted intergenerationally. The distinction in terms of understanding these two forms of the concept has not been outlined in the literature. Points made in the literature haphazardly address either one of these two forms of the term.

Psychological resilience to the exposure to parental trauma may be a product of parental resilience and post camp adaptability. These qualities within the survivor are likely inspire their children (Jucovy, 1985; 1989). According to Almagor and Leon (1989) that which the parents' transmit to the children may not only be pathology, but may also include a transmission of the means and strengths to cope with severe stress. Similarly Davidson

(1980b:98) comments that within children of survivors. "...We can observe the meeting of traumatized and damaged processes with coping and adaptation processes in response to psychosocial forces." On the other hand, resilience to transmission, takes a similar form to that outlined by Straker, Moosa, Becker and Nkwale (1992: 85-86). In their discussion of black youths in South African Townships they note that their findings

"...on the whole support the notion that young people are potentially resilient and that given the opportunity to heal they do. This does not mean that they are unaffected by their experiences; it simply means that they have the capacity to resist being overwhelmed by them in the long term."

Although Straker et al is discussing individuals who have experienced direct exposure to violence, children of survivors similarly may display resilience to being psychologically undermined by their parents' experience of trauma.

Epstein (1979) and Krell (1982) note that much of the clinical impressions related to the second generation, ignore their strengths. According to Hass (1990) survivor children display certain positive patterns, illustrating that the psychological effects found in the second generation are not necessarily negative. These patterns include increased compassion, resilience and heightened appreciation for life. He believes that resilience is the most common strength which these children display and incorporates their increased resourcefulness and tenacity. He notes further, that usually the child of survivors acquires both detrimental and life enhancing qualities from their parents, and he argues that although many parents demonstrated over-protective behaviour towards their children, this also served to increase the child's appreciation of the importance of the family. Thus Hass implies that certain dynamics within the survivor family which have been viewed solely as detrimental to adaptive psychological functioning of the child, may, in an alternative conceptual framework, also be viewed as containing life enhancing properties.

Raising the issue of resilience begs numerous questions such as why some children of survivors manifest adverse effects and other show resilient behaviour. This leads to the question of the variables and parenting styles involved in the promotion of ego strength and resilience. Future work in this area must also account for the distinction outlined above in understanding this concept in relation to children of survivors, and attention must be paid to both resilience to transmission and the transmission of resilience.

6). Holocaust Communication:

One key factor which appears related to both the issues of resilience and transmission of effects is that of parental communication of Holocaust experiences. This area is very

account of their parents' experiences. This may be related to resilience as providing the child with a realistic account of their parents' experiences may create the means for the child to work through this trauma with their parents. Additionally, open and well communicated expression of experiences may also signify the presence of other important intrafamilial variables which may encourage resiliency in the child. It could suggest that the parents' psychological and emotional functioning is such that they are able to communicate at an adequate level with their child; implying that this pattern of communication may characterize those parents who have been able to achieve ego regeneration and post-Holocaust adaptation.

7). Shortcomings of Early Studies:

Before presenting a discussion on the current empirical and observational research, it is important to note the shortcomings of the earlier work. Some of the current research still contains numerous methodological flaws. As with survivors, the initial emphasis on pathology resulted in a pre-existing belief as to the existence of psychological disturbances in children of survivors. Additionally, no attempt was made to suggest possible factors which may increase or decrease psychological vulnerability, what accounts for differences between children, or what mechanisms are operating in the transmission process (Solkoff, 1981). One of the most significant problems of the early research relates to the small sample sizes derived from clinical populations, with very little focus on well-functioning survivors and their children. Findings from these sample groups were then generalized to the entire population (Fogelman, 1979; Sigal and Weinfeld, 1985; Rose and Garske, 1987).

Other methodological problems noted within the early work includes viewing the survivor and second generation as homogeneous groups, use of poorly validated measures and lack of adequate control groups. Without the use of immigrant comparison groups, studies do not control for immigration effects (Weiss, O'Connell and Siiter, 1986; Rose and Garske, 1987). For example, Hass (1990) argues that survivor protectiveness and over-indulgence may not be a function solely of Holocaust experiences, but may represent a pattern of behaviour modeled on the child rearing norm of the particular European community in which parents lived prior to the Holocaust. Therefore comparisons between Jewish immigrant families who left their Eastern European country before the outbreak of World War II, and survivor families, is likely to provide important insights into the influence of the Holocaust within the intrafamilial dynamics of the latter group.

According to Prince (1980:46) any study of survivor children must take into account numerous variables. He lists six such variables which include (1). degree and style of communication regarding Holocaust occurrences. (2). The nature and duration of the

trauma to which the parent was exposed and the parents' age at incarceration (I would add the issue of whether one or both parents experienced the Holocaust). (3). The capacity of the parents for parenting. (4). The degree to which pre-Holocaust norms and values are perpetuated within the family structure. (5). Social support systems established within the new country, and (6). "The study of children of Survivors also must be considered, not on the basis of unitary impingements but in terms of an ongoing adaption to family, social, and historical forces."

Research on children of survivors touches on numerous complex and interacting variables. In addition, the study of this population has similar problems to that of studying survivors, although to a lesser degree. The sensitive nature of the topic under investigation may result in difficulties in data gathering as a result of subjects' unwillingness to disclose. However, it appears, from the author's previous contact with children of survivors, that this population group are willing to communicate with those who are prepared to listen. Being provided with the occasion to discuss their parents' past and their own reactions to this, appears to be highly valued as a result of the limited opportunities open to them to self disclose (Parallel Workshops).

8). Experimental and Observational Studies:

The findings from current studies tend to refute the early emphasis on the transmission of generalized patterns of negative intergenerational effects within survivor families and note, instead, the normal functioning of survivor children. The emphasis of these studies is still on determining the existence of psychological effects in children of survivors, however these are viewed as incorporating both negative and positive qualities. This change in approach was brought to the fore with Solkoff's (1981) critical review of research related to children of survivors, as he cited a number of studies that show no pathology or unusual differences in children of survivors.

Zlotogorski (1985) studied levels of ego functioning in children of survivors. His sample comprised of 73 second generation subjects compared to a control group of 68 subjects matched for sex, age and socio-economic status. Findings from this study do not support the description of survivor children as over-protected, fearful, mistrusting with low levels of ego functioning. Zlotogorski argues that the impact of the Holocaust has unique implications for each survivor and their children. He found no significant correlation between any of the following variables and level of children's ego-functioning; duration of parental internment, age at internment or number of extended family that survived the Holocaust. He did find that open communication within the family was positively correlated with the child's level of ego functioning, although this correlation did not reach statistical significance. Degree of communication was also significantly correlated with

the child's perception of involvement in shared mourning and other Holocaust issues. Findings from this study raises two significant points (1). the heterogeneity of the second generation sample and (2). the importance of communication and its interdependence with other relevant ego strengthening variables.

In relation to the issue of heterogeneity of the second generation population, Zlotogorski (1983) in an earlier study, compared children of survivors and a control group with regard to perceptions of family cohesion and adaptability to levels of ego functioning. Findings reveal a wide variety of different family structures within the survivor community. On level of cohesion, survivor families ranged from enmeshed to disengaged, as did the control group families. According to his results, the average survivor family is characterized by structured separateness, as opposed to the view that all survivor families are extremely enmeshed with blurred boundaries. These findings give rise to the following conclusion "... that there is no demonstrable long-range effect on perception of family cohesion that is solely attributable to being a child of holocaust survivors." (p. 351). The indication of a wide variety of family structures reflects the heterogeneity of this population and the unique personalities and histories of survivors and their children.

Findings from a study by Leventhal and Ontell (1989) of 73 children of survivors, challenge the pathology notion, as they found that the their sample displayed relatively stable behaviour, were highly educated and had a high socio-economic status. They did, however, find a relatively significant incidence of minor physical and emotional problems which may necessitate therapy. These second generation subjects perceived their parents to be dependable, responsible, industrious and caring. Thus the children appeared to focus on positive attributes within their survivor parents, as opposed to on the qualities which may reflect bad parenting. Parents were also perceived as displaying active coping behaviour. Although this study utilizes a fairly large sample, a major shortcoming is the lack of a comparison group.

Sigal and Weinfeld (1985) studied the issue of control of aggression in a second generation population. In contrast to the early literature which suggested that the intrafamilial dynamics of the survivor family promotes difficulties in dealing with aggression, they found almost no evidence of this among their sample. Weiss, O'Connell and Siiter (1986) compared a non-clinical survivor children group to immigrants and non-immigrants on levels of mental health. They found no significant difference between the second generation sample and immigrant controls on alienation and feelings of guilt.

Similarly Leon, Butcher, Kleinman, Goldberg and Almagor (1981) using a non-clinical sample with a control group matched on demographic and religious variables, noted that

children of survivors did not necessarily manifest any serious problems in functioning. Although they may experience psychological difficulties related to their being children of survivors, they are able to cope with these. Both the survivor and control groups indicated similar attitudes towards their parents. These authors also suggest that patterns within the survivor family such as parental over-concern with children may be related to cultural variables, as the matched control group exhibited similar attitudes of concern for their children.

Gay and Shulman (1978) using a non-clinical sample studied the perceptions of survivors' children regarding parenting, as compared to a control group of the general population in Israel. This study comprised four subject groups (1). both parents are Holocaust survivors (n=15) (2). only the father is a survivor (n=13) (3). only the mother is a Holocaust survivor (n=1) (4). parents were not in the Holocaust (n=21). Their findings show no difference between Holocaust and non-Holocaust survivors in the way in which children perceive child rearing practices. Perceptions of self between the two groups are also similar. These findings suggest that although survivor parents may be lacking in some parenting skills, their children are still able to perceive their child rearing abilities as positive and adequate.

In line with the current emphasis, Russell, Plotkin and Heapy (1985) studied adaptive abilities in the second generation by comparing 68 survivors and 51 controls. They assessed the role of variables related to family dynamics and social development thought to contribute to the positive adaption of survivor families. One important finding of this study is that survivor children demonstrated a tendency to be involved in human service professions and displayed high motivation for academic success. According to Russell et al (p.575)

"The attitudes and belief-systems expressed by the second-generation survivor sample represented a constructive, acceptable compromise (as seen by them) between the heavy weight of the past, and their present positive behaviors, which continue to integrate them adaptively with their 'normal' communities."

Rose and Garske (1987) studied the family environment, coping behaviour and adjustment among children of survivors. In a well designed study, using two target groups and two control groups from a non-clinical population, they found that all group means were in the normal range, therefore disputing the assumption of a higher incidence of pathology in the children of survivor population. These children of survivors did not show evidence of utilizing maladaptive coping or defense mechanisms. However, differences with regard to family interaction between survivor and control groups did exist. Survivor children were more likely to perceive their families as discouraging of independent or assertive

behaviour. These families placed stronger emphasis on moral and religious values and on life achievement and academic success. Findings from this study suggest that as a group, children of survivors have been able to adjust adequately and cope within their environments, but there are certain patterns which occur within survivor families which are different to other families.

According to Last (1988) the findings from his study conducted on a sample of 67 Israeli adolescent offspring of at least one parent who was a Holocaust survivor, and 76 controls matched on numerous variables, suggests a correlation between the severity and duration of parental experiences and the child's perception of their parents' child rearing practices. The findings are complex and they constitute an intricate pattern of specific correlations which are related to the child and parent gender. In general his findings appear to indicate

"...the probable activation of highly specific intrafamilial and intrapsychic processes that could mediate between parental Holocaust traumatization and the kinds of experiences with these parents that were reported by the adolescent offspring."(p. 83).

Greenblatt (1978), interviewed a group of clinical and non-clinical children of survivors. Although there were only 5 subjects in each sample, clear differences between the two were discernible. The clinical children exhibited much stronger identification with the experiences of their parents and guilt was more prominent in this group. Findings suggest that the non-clinical group has a more positive home environment, closely knit, non secretive family and they perceived their family unit to be well functioning. In contrast, the clinical group displayed more negative feelings regarding their home environment and felt that they received little and inconsistent communication regarding parental Holocaust experiences. The non-clinical group emphasized a greater need for a strong personal identity, which incorporated an identification with their Jewish culture and heritage. In contrast, the clinical group displayed symptoms similar in nature to those outlined by the early theorists. They felt that their perceptions of reality were distorted as a result of their involvement in their parents' past and that their parents constantly tried to create an environment which would represent a means to undo their past trauma. The non-clinical group displayed none of these conflicts. The findings of this study highlights the distinction between clinical and non-clinical groups. It thus illustrates the shortcomings of early work which generalized results from a clinical sample.

The above discussion does not suggest that survivor children experience no difficulties related to their parents past. Some of the studies mentioned [i.e. Rose and Garske; 1987 and Leventhal and Ontell; 1989] do note differences between the survivor and control

families, however, these fall within the normal range. It appears that although many subjects' report having experienced certain difficulties in relation to their parents' experience of trauma, they are able to cope with and overcome these difficulties (Almagor and Leon, 1989).

However, four recent studies using non-clinical samples have found contrasting results. The findings of these studies tend to agree with previous views regarding survivors' children. In assessing 40 Holocaust families and comparing them to 11 control group families, Rubinstein, Cutter and Templer (1989-90) found that children of survivors did evidence a higher degree of pathology than the controls. Survivors' children demonstrated greater fear, neurotic behaviour, aggression, social withdrawal, inhibition and depression. Weinfeld and Sigal (1986), using a fairly large sample and control group, found that children of survivors perceive that the Holocaust trauma had long lasting effects on both themselves and their parents.

Nadler, Kav-Venaki and Gleitman (1985) found that children of survivors react differently to frustrating situations than controls, by internalizing as opposed to externalizing aggressive tendencies. Children of survivors appear burdened by feelings of responsibility towards their parents and learn to repress their aggressive feelings in order to protect parents. Subjects also reported feeling smothered by parents. These findings agree with the earlier work on the second generation. Similarly results from a study conducted by Peoditz, Belmont, Shapiro, Zwerling, Ficher, Eisenstein and Levick (1984) on a non-clinical sample found that members of survivor families are more engaged and attached than control group families. Subjects also displayed greater protectiveness over parents and worried more about their emotional stability and health than control subjects.

Although the majority of studies tend to suggest that children of survivors are well functioning, there are studies that have found otherwise and demonstrate that children of survivors clearly show difficulties in certain areas. The notable problem with many of the studies and one reason which may explain contradictory findings, is the different measurements utilized, and hence the different areas and features of this group which are assessed by each study. Studies are also influenced by the orientation of the researcher, that is if one is specifically looking for either pathology or ego strength variables, then the design of the measurement is more likely to tap into that particular quality. What is required are more studies that attempt to measure global functioning of the second generation, as it has been noted that life enhancing and detrimental factors related to parental experience are most probably interwoven within the general make-up of each child of survivors.

The above discussion highlights the relevance of accounting for coping behaviour and resiliency of children of survivors within a theoretical paradigm. However, the four studies which suggest contradictory findings illustrate the importance of maintaining a holistic picture of both survivors and their children. This means that in stressing one aspect, i.e. either resiliency or psychological difficulty, the other aspects must not be ignored.

The above point may be clarified in the following discussion. The author had the opportunity to attend two workshops conducted with 40 adult children of survivors at the Second International Conference of Children of Survivors held in Jerusalem. The workshops were approximately two hours long and the same people attended both workshops. Two facilitators were present. The group comprised of children from over nine different countries. Most participants, while well educated and functioning successfully within their environment, displayed common patterns of psychological difficulties.

The key areas of concern for the group revolved around the following issues: (1). **Separation-Individuation:** Numerous members mentioned difficulties associated with both concrete separation from parents and with regard to boundary distinction. People had experienced difficulty separating themselves physically from their parents and in terms of defining themselves as separate from parents. (2). **Need to Fulfill Parental Ideal:** Many felt the need to live up to some parental ideal in order to compensate for their parents' experience. (3). **Being Part of a Minority Group:** Most felt acutely aware of being part of a historically vulnerable group and tended to associate largely with other Jewish people. These children of survivors felt that they had experienced difficulties related to their parents past, and that others who were not children of survivors could not adequately understand their conflicts. The majority of subjects either belonged to survivor support groups and were active in Holocaust programs, or were inspired to do so after the conference.

It appears that children of survivors do experience particular patterns of psychological effects related to parental Holocaust experiences. Members of the group did not necessarily evidence any form of psychopathology, but rather displayed difficulties in areas which were common to a large percentage of the group. However with regard to coping and resiliency, as noted, most functioned highly adaptively within their respective societies. A large percentage of subjects were involved in the helping professions and displayed a desire to help others. This discussion highlights the importance of accounting for the complexity of the nature of the variables involved in understanding the second generation.

The current view of the second generation is that many possess the capabilities and resources to overcome any difficulties which may be related to their parents' past. The majority of studies suggest that while children of survivors may experience particular difficulties which are related to their parents' past, they still present as well functioning and highly adaptive. Once coping processes are acknowledged to exist within survivors, this may suggest that the influence of the Holocaust within families is not as pervasive as previously believed. This points to the importance of distinguishing between findings from clinical and non-clinical samples.

9). Jewish Identity and Religious Affiliation in the Second Generation:

As with survivors, Jewish identity and group affiliation are important issues to take account of in relation to the second generation. This is especially so within the South African environment as, according to Herman (1977), the group identity of South African Jews is particularly strong because of the division of the society along group lines. As a result of the nature of the persecution experienced by their parents, these two elements of identification may be highly conflictual for children of survivors as they are interrelated with their parents' Holocaust past.

Fogelman and Savran (1979; in Marcus and Rosenberg, 1989) report that children of survivors very often display difficulty in establishing a positive sense of Jewish identity, as they associate being Jewish with being massacred. In contrast, exaggerated ethnic identity may represent a means for the second generation to undo the humiliation of parental experience. Studies have found that survivor children attribute special meaning to their culture and Jewish heritage (Trossman, 1968; Russell, 1974; Hass, 1990). In a study by Heller (1982), he found that children of survivors possess greater sensitivity to culture and ancestry than the control group. On the basis of these findings he believes that the second generation respond as a unique group to the threats to culture which the Holocaust represented. Cultural preservation is also held in high regard by children of survivors, who display a strong opposition to intermarriage. Accordingly, he argues that this enhanced sensitivity to culture represents a reaction against the possibility of group extinction. Similarly Porter (1981) notes that many survivor children are involved with some form of Jewish commitment and this is based on the idea that assimilation is equivalent to a posthumous victory for Hitler. Only Hass (1990:146), in a questionnaire based study has briefly assessed the religious behaviour of the second generation. His findings suggest that although there appears to be a strong adherence to custom this is not related to a "...fundamental belief in religious precepts." Within his sample there is clearly a loss of religious identity, which is made up for in terms of increased cultural or group affiliation.

As with survivors, the importance of assessing these identifications stems from the need to gain a more holistic understanding of the implications of the Holocaust on the total functioning of the second generation. According to Krell (1979:564 and 565) inherent in the messages which survivors relay to their children are "...strong reminders to preserve the faith (even if the parent survivor is ambivalent and skeptical about religion)...". He also notes that the child of survivors may received mixed messages regarding religious adherence and "Within this context of ambivalence, the child of survivor parents struggles with Judaism values that may be totally enmeshed in the Holocaust experience."

The nature of children of survivors' pattern of identification with their Jewishness and Jewish group, and their religious adherence is very likely to be influenced by the Holocaust past of their parent. Specific feelings towards these issues within the second generation may be suggestive of particular Holocaust related dynamics within families. Hence the areas of Jewish group affiliation and religious adherence may be conflictual for the survivor child because of messages received by survivor parents. However, as noted in the section on survivors, either one or both of these two areas may also provide an important framework with promotes resiliency and coping in children of survivors.

Holocaust survivors represent a unique population in terms of their exposure to systematic mass scale genocide and a vast amount of literature in numerous fields exists on this subject. Recent years have witnessed a growth of psychological research on both survivors and their children, however very little attempt has been made to systematically formulate a coherent theoretical framework for understanding the post-Holocaust experiences of survivor families. The early work which was largely psychoanalytic in orientation, has been found to present with a bias in terms of pathology, while current work focuses on more balanced assessment of survivors in terms of both the negative repercussions of exposure to extreme trauma and the ability to overcome the effects of this trauma. The current focus highlights the ability of the target population and following generations to utilize means to adapt in the post-traumatic period.

No longer is the Holocaust recognised as a unitary event and the survivor population as a homogeneous group. Recognition of the heterogeneity of pre-war, Holocaust and post-war experiences provides new insight into the functioning of both the survivors and the subsequent generation, especially in terms of acknowledging post-war adaption in survivors and resiliency in their children. The study of the second generation, while highlighting the transmission of patterns of psychological effects in response to parental exposure to trauma, also emphasizes the heterogeneity of this population and hence the

broad range of possible responses to parental experience, which include both negative and resilient reactions.

Important issues have been raised in the current work, such as the possibility of ego-regeneration and psychic reintegration of survivors and resiliency in their children. This view does not undermine the extent of the atrocities and the effects which this may have on survivors' psychological functioning and subsequent family, however a balanced viewpoint must also account for the coping behaviour displayed by survivors in the post-Holocaust period. Current work on survivors and their children must tap into the potential for the transmission of both detrimental and life enhancing forces which may occur within the dynamics of the survivor family. Patterns of survivor child rearing practices must be assessed in order to attempt to determine whether and if the influence of the Holocaust past of the parents is transmitted to their children, and the pervasiveness of this transmission. Similarly, in revising and expanding theoretical understanding, factors which promote ego-regeneration and coping in survivors and resilience in children must be identified and examined.

CHAPTER 3

ACCULTURATION AND ADAPTION AFTER MIGRATION: SOME THEORETICAL PERSPECTIVES.

Not only have survivors of the Nazi Holocaust been exposed to massive trauma in terms of persecution, incarceration and loss of family, but they have also experienced the process of resettlement in a new country. Along with coping with past trauma, they have to learn to adjust to a changed cultural environment. Previous literature points out that conceptualizing the functioning of the survivor family without a comparative immigrant sample represents a major failure in terms of understanding these dynamics as also related to the process of immigration and adaption. How survivors and immigrants experience immigration and adaption, and whether this is similar or dissimilar, will provide interesting insight into their family functioning. A comparison of these two groups represents a means to understand the situation of survivor families as immigrants as well as survivors.

In the following chapter a theoretical overview of literature related to immigration and adaption to a new culture is presented. The focus of this chapter, therefore, is on outlining a conceptual framework through which to understand this process of adaption and acculturation of survivors and of Jewish migrants who arrived in Central and Southern Africa before World War II.

In section 1 the problematic nature of the current definitions of refugee and immigrants are discussed as are some contentious issues and terminology in the area of migration and adaption. Section 2 outlines different theoretical postulations regarding migration and adaption, culminating in Section 3 and the presentation of a model of acculturation. Important issues raised by theorists are the need to take account of numerous variables in both the home and host county which may aid adaption, as well as understanding adaption and acculturation as composed of various options available to the individual. Section 4 and 5 focus on an areas in which little theoretical work exists, that of the experiences of migrant children and second generation children of immigrants. In the final section the literature is contextualized in relation to the current research.

1). Contemplating Definitions:

At the outset it is difficult to determine whether survivors of the Holocaust fall within the rubric of immigrant or refugee. The major distinction in defining immigrants and refugees appears to involve the issue of voluntary versus involuntary movement. Movement of the immigrant is voluntary and planned, with the intention of residing permanently in the new

place of settlement (Berry, 1988). Mangalam (1968 in Berry, 1988: 220) defines immigration as follows:

"Migration is a relatively permanent moving away of a collectivity, called migrants, from one geographical location to another, preceded by decision-making on the part of the migrants".

In contrast, the U.N. convention on the status of refugees (1951, in Berry,) defined a refugee as a person who

"owing to well-founded fear of being persecuted for reasons of race, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable, or owing to such fear, is unwilling to avail himself of the protection of that country."

However this definition is viewed as particularly narrow by social scientists who usually include those still inside the country or those displaced by regional war, famine, or other natural disaster. According to Berry, most relevant in terms of a psychological understanding of refugee status is the existence of prior trauma, loss and fear which led to movement.

Bernard (1977 in Gold, 1992) argues that although social science literature generally regards refugees and immigrants as distinctly different social groups, the difference between the two is a matter of degree or continuum rather than a categorical difference. Nevertheless, Gold still argues for specific political, economic and legal differences between the two groups. For example in the United States refugees receive immediate permanent residence accompanied by work permits, whereas very highly educated and skilled immigrants may be required to wait for long periods before entering the United States.

Other differences which are pointed out by Gold between the two groups, are that voluntary immigrants are able to take capital to their new country, and to plan to partake actively in the economy of their new country. Immigrants may return to their home country, they may borrow money and may recruit countrypeople into business. They are also able to re-immense themselves in their native culture. However, not all of these points clearly distinguish an immigrant from a refugee. Aside from the immigrant possibly being in a financially more sound and occupationally more secure position than the refugee, and perhaps being able to return to their home country, the other points raised by Gold could apply equally to refugees.

From the brief discussion presented above, it is apparent that differentiating between characteristics peculiar to refugees and immigrants may be difficult. Essentially the most clear-cut distinction, as highlighted earlier, centres around the issue of whether the move was voluntary or not. Economic factors may also play a role in defining the two groups, however political and legal distinctions as a category may present problems, as these definitions may differ on the basis of the country the individual wishes to enter.

The question which now arises involves the classification of survivors of the Holocaust as refugees or immigrants, and also whether those Jewish people who migrated before the second world war may correctly be termed immigrants. In addressing both these issues numerous difficulties with the definitions of refugee and immigrant become apparent.

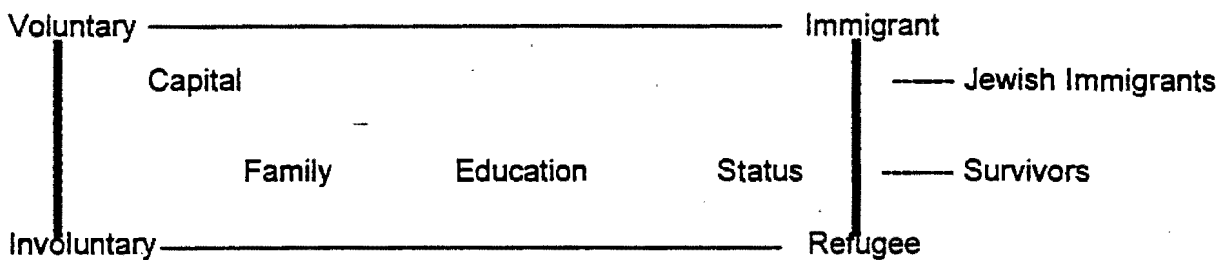
Previous literature which compares survivors to a group of Jewish people who left Europe before World War Two, automatically classifies this group as immigrants, without an assessment of the relative fit of this definition. These are people who left their country of origin voluntarily and who were still able to take assets with them. However for those who left in the late 1930's, the rise of Nazism and the implementation of numerous racial laws, coupled with sporadic yet intense violence against the Jewish population, may have led to emigration for reasons of personal safety (Gilbert, 1986). Although they were able to return to their homelands, they were unlikely to do so. Hence, while voluntary, the move had elements of force attached to it, especially as Hitler's initial policy towards the Jews was aimed at forcing them to leave the countries which he occupied (Gilbert, 1986). This agrees with David's (1970:79) statement that voluntary migration may not always be that voluntary, and the element of choice in emigration may be intimately linked to the anticipation of possible danger to self. "Psychologically a voluntary migrant may be as much a refugee as an involuntary migrant. (Weinberg, 1955)."

The definition of immigrant is even more difficult to apply to survivors of the Holocaust. They had experienced extreme institutional persecution and virtual genocide, and were left destitute following liberation. However, the experience of persecution had been terminated, and although without financial means, the element of choice had been re-established in that they were able to choose to emigrate or return to their original country. That for many it was inconceivable to return does not undermine this re-establishment of individual choice. It seems fair to state that survivors were more immigrants than refugees, however this point becomes less clear when referring to Berry's (1992) addition to the U.N. definition of refugee. Berry includes the occurrence of a traumatic experience, loss and fear, all of which relate to the plight of the survivors. But given that the experience of

trauma and loss had ceased for survivors, this may be the key factor elevating them to immigrant status.

The latter issue is by no means clear cut, and attempting to define survivors as immigrants or refugees still remains contentious. For the purposes of this review adequate support has been given in terms of the claim for immigrant status of survivors essentially in relation to the issue of voluntary movement. Bernard (1977, in Gold, 1992) does point out that it appears preferable to view the refugee-immigrant distinction as falling along a continuum, as opposed to into two distinct categories. It may then be argued that Jewish people who immigrated prior to 1939 fall along the immigrant dimension of a refugee-immigrant continuum, as do survivors of the Holocaust, but perhaps to a lesser degree.

Figure 1:



There are four poles in the diagram, these distinguish between voluntary and involuntary movement and immigrant or refugee status. The lines linking the four poles represent the continuum between refugee and immigrant status and their relationship to voluntary versus involuntary movement. The placement of Jewish immigrant and survivors represents their relative position along the continuum between the four poles. Listed in the centre are four variables which are noted as influencing the definition of refugee or immigrant. Capital is placed closer to the voluntary-immigrant end of the scale, while family, education and status falls in the middle of this continuum. Although the latter three variables are more likely to be present in the case of the immigrant, they may also exist for the refugee.

1.1). Contentious Issues in Theory on Acculturation:

Research into acculturation has been conducted from numerous different theoretical disciplines, such as anthropology, sociology and psychology. Very often the various disciplines have different understandings of phenomena as well as differing operationalizations of these phenomena for measurement. It follows that there is a lack of agreement on definitions of important terms (Searle and Ward, 1990). According to

Olmedo (1979:1063) the field of acculturation has benefited from the input of numerous different approaches, however it has also suffered from the application and interpretation of events in a manner specific to particular disciplines. He further notes that

"...divergent definitions of culture as well as differing conceptual orientations and methodologies have complicated the development of acculturation research into an integrated body of knowledge within the domain of behavioural science. As a result, it is difficult to specify a consensual operational definition of the term; furthermore, it is difficult to establish criteria for deciding what is and is not acculturation research."

These difficulties within the field of migration and adaption obviously impact on defining one theory that will adequately encompass a well rounded understanding of the effects of exposure to a new society. It must be noted, however, that the focus of inquiry shifts in accordance with the theoretical perspective from which the researcher perceives the field. Thus, in relation to the current research which assesses the acculturation of individuals, it would be adequate to adopt the most well conceptualized psychological theory of migration and adaption.

2). Theoretical Perspectives on Acculturation:

This section presents an overview of different theoretical perspectives in the field of acculturation and adaption after migration. There are numerous processes involved between individuals who decides to emigrate, their old environment and their new environment. The following theoretical perspectives all account for various aspects of the migratory process and the experiences of the migrant. Different issues involved in the process as proposed by different theorist are highlighted and a finally a model of acculturation is presented.

A vast amount of literature is available on the specific subject of Jewish immigration, the majority of which stems from abroad. Some of the key texts in this area are noted (Sklare, 1958; Glazer and Moynihan, 1963; Gordon, 1964; Feldstein and Costello, 1974, Krausz, 1980), however as the focus of this study is on Holocaust survivors and on understanding the general phenomenon of immigration, these texts are not addressed in any detail.

2.1) Factors involved in Migration:

Murphy, writing in the 1970's on adaption and culture change, focused directly on the link between immigration and mental health.. According to him (1973a; 1973b) there are six main elements which occur in social change and may impinge on the mental health of the

immigrant. These include Origin, Motive, Target, Means, Perceived Feasibility and Extraneous Demands.

Origin, refers to the country of origin of the immigrant. Depending on the situation within the home country and the state of the new country, change could be perceived as a loss or as an improvement. The former view may lead to better mental functioning while the latter may serve to undermine mental health. The original country may also have required a specific and rigid pattern of behaviour, so that change demands major adjustment.

Motive refers to the reasons why change has occurred. An important determining factor in adaption to a new environment may be found in the reasons for movement. For example, change could be forced, as in the case of the refugee, or self selected, as in immigration. Forced change is less likely to be accompanied by adequate adaption and has implications for the mental health of the immigrant. Murphy also points out that voluntary change may be associated with discontent with the original environment. This discontent, even after change, may have caused enough disturbance to impact on the individual's mental health.

Target is the third element. A limited target is likely to be associated with less risk to mental health. Emphasis is placed on the nature of the target goal, in that it must be realistic and clearly defined. The fourth element relates to the **Means** available to attain the new goals. Incorporated in the concept of means is information regarding the new culture, for example level of education, existence of a support system in the new environment, as well as attributes of the individual such as health and physical and mental strengths. Thus the means include the personal and social resources available to the individual to achieve their desired goal.

Perceived Feasibility refers to whether a discrepancy exists between the ideal and realistic goal. Lastly, **Extraneous Demands** encompasses possibilities for conflict in the environment. In terms of the mental health paradigm, disturbances are less likely to occur if people experiencing change have conflicting demands or make conflicting demands on each other. This point highlights the need for positive social support from members in the environment.

Although the factors outlined by Murphy relate largely to the assessment of the mental functioning of immigrants, they have implications for increasing understanding of issues involved in immigration and adaption. In a later paper, Murphy (1977) argues that migration cannot be viewed as a unitary concept, but comprises of three different stages (1). culture of origin (2). circumstances of migration (3). society of resettlement. This conceptualization incorporates the need to account for factors existing in the original

country which result in immigration as well as viewing the home and host countries comparatively. It also allows for differentiation between different types of migratory experience. For example, refugees are likely to have different experiences to immigrants at all three stages, while the different experiences of specific migratory groups in the first two stages will impact on adjustment to the third stage.

2.2). Developing a Theory:

Taft (1973) believes that the ways of adapting that are learnt in a specific culture are threatened with movement to a new culture as these original patterns may be inappropriate in the new context. He further argues that the difficulty in coping with change varies according to (1). the size of the gap between the two cultures (2). the abruptness of the move (3). the amount which those who have moved experience changes in behavioural functioning and (4). whether these changes are appropriate to the new environment.

The greater the difference between the home country and new country the more difficult it is to bridge the cultural gap. Examples of factors which broaden this disparity include, the language of the new society, the economic structure and level of technology, political structure and so on. The second relevant issue addressed by Taft is the abruptness of change. Abrupt change is more likely to occur in the case of refugees than immigrants who may experience a transitional stage allowing them to prepare for the forthcoming change. Having social support within the new environment is one variable which may serve to mitigate against the possible effects of abruptness of change. Taft qualifies this discussion by stating that whether sudden change is debilitating to the functioning of the individual is related to the importance of the behaviour which undergoes change. This concept involves the idea that certain behaviours are more central to the ego functioning of a specific individual than others. Changes in behaviour in which the ego is heavily invested may have greater implications for an individual than if the behaviour was not salient to ego functioning. Thus difficulties in adaption could result for individuals who perceive new cultural demands to be directly contrary to or impinging on specific ego demands.

A further factor of significance raised by Taft is the degree to which the new society is able to encompass different cultural groups. New arrivals very often only want to complete the minimum requirements for adaption. From this it follows that societies which encompass a broad range of diversity are likely to promote adaption by allowing for the existence of different ethnic groups. This brings into the conceptual framework the important distinction between culturally plural and culturally monistic societies which will be discussed in relation to later theorists. Taft argues that cultures provide specific means for satisfying certain universal human needs. Newcomers to a society can attempt to do this by either finding culturally approved means or by belonging to sub societies through

which they are able to fulfill their needs in a manner similar to their original culture. Taft feels that newcomers adopt both these strategies in accordance with numerous variables, including whether the society is of a pluralistic nature.

He further argues that full acculturation to a new society involves a fundamental change in the newcomer, in so much as the person has adopted both the internal and external aspects of the culture. This occurs partly through the internalization of patterns of reaction to external symbols. When this happens, the culture becomes familiar to the individual on every level and she or he is able to partake fully in this new culture. The ultimate test of acculturation occurs not only when the individual has acquired appropriate cognitive knowledge, but when that individual is able to fulfill appropriate role performance. This is viewed as dependent on cognitive and dynamic acculturation and also on the knowledge of particular technical and social skills.

Taft sums up his idea of complete adaption and acculturation as follows:

"When the performance of social roles - and, of course, the use of a language - become automatic, an environmental or internal cue brings into action a mental set which trips off the skilled sequence of behaviour without intervention of internal mini-hypotheses. These 'mental sets' are equivalent to engagement of a system of unformulated postulates and premises, which then operate in learned sequence, appropriate to the intentions of the person, his own cognitive and motor aptitudes, and the demands of the environment."(p137).

Culture shock is the term used to refer to the inability to cope with the demands of the new environment. Taft defines this as the experience of being in an unfamiliar surrounding, where previously learnt coping behaviours are inadequate to promote coping and the outcome is emotional disturbance or culture shock. If the person is emotionally overwhelmed by this experience it may lead to debilitating stress. He outlines six possible contributors to culture shock:

- (1). The pressure of trying to operate in a social environment where the rules of behaviour are not clear and the person cannot rely on automatic performance in responding to the environment. This places strain on attempts to adapt and may lead to cognitive overload.
- (2). Sense of loss which arises from movement coupled with feelings of deprivation in the new culture with regard to companions, cultural stimulation and social status.
- (3). Rejection by the newcomer of the host population or rejection by the host community of the individual. This has obvious implications for integration within the new society and may also increase anxiety and depreciating thoughts in the individual.

(4). Confusion with the new role and expectations of this role which impacts on the person's sense of identity. This may vary from vague uncertainty in behaviour to an overwhelming emotional experience which may be debilitating for the individual.

(5). Intense realization of the difference of the two cultures and feelings which accompany this realization i.e. surprise, discomfort, anxiety or disgust.

(6). Essentially the term culture shock embodies the impotence experienced by the individual who cannot deal competently with their new environment, because of cognitive unfamiliarity with the culture and lack of ability to perform required skills. This incompetence may exacerbate the other areas of culture shock.

Taft does note that the required adaption is usually not so severe as to cause extreme shock and that humans display resilience to numerous stressors. The importance of this point in terms of the theoretical framework outlined, is that it lessens the emphasis on the likelihood of maladaptive outcomes for individual's experiencing culture change. However, Taft does not attempt to highlight variables within the home and host country which may serve to mitigate against the experience of culture shock.

Finally Taft proposes a multi-facet framework for analysing long term adaption to new cultures and societies. He defines the process of coping with an unfamiliar culture in relation to four major aspects. (a) **Cultural Adjustment** - the functioning of the personality in the changed environment (b) **Identification** - which involves the alterations in the individual's reference groups, personal models and social identity. (c) **Cultural Competence** - which includes the acquisition of new cultural knowledge and skills. (d) **Role Acculturation** - adoption of new culturally defined roles.

The above aspects require input from cognitive, dynamic and performance processes, in that change applies to the world view of the individual and the person's available behavioural skills. The first two points relate more specifically to the dynamic aspect, while the last two encompass what is usually understood by acculturation which includes: "a combination of the acquisition of competence in performing culturally relevant behaviour and the adoption of culturally defined roles and attitudes with respect to that behaviour."(p.146). Hence "Full integration into the new group involves a combination of the three processes, cognitive, dynamic and performance, operating in an integrated manner with respect to all four aspects of adaption."(p.146).

Taft's framework presents an assessment of relative integration or assimilation into a new society and, although he does note that assimilation is only one of the ways of coping with a new culture, he does not focus on any other possible means. The framework he proposes is broad and obviously cannot account for specifics in each experience of acculturation and

coping. There are numerous issues of importance, for example, status prior to movement, nature of the country of origin and motivating factors for promoting movement, which this framework does contemplate. Hence migration is viewed solely in terms of the contact with a new culture, in contrast to the three stage approach put forward by Murphy (1977), while assimilation is the only coping strategy tackled in any depth.

2.3). Strategies of Acculturation:

The following theory includes a dimension missing from Taft's formulations, that being the existence of different strategies which may be adopted by the acculturating individual or group. Moghaddam (1988) suggests a Mobility Model of Integration, in explaining his assumption that groups are essentially aiming to be upwardly mobile. The adoption of a particular acculturation strategy is presumably dependent upon numerous variables, as this paper focuses on mobility, it views the utilization of a particular group acculturation strategy as being the most beneficial to fulfilling group defined aims.

Before assessing the different mobility strategies, the distinction between two relevant concepts, that of **normative** and **non-normative** behaviour, must be noted. According to Moghaddam (1988) normative behaviour refers to all behaviours sanctioned by the majority group as being appropriate behaviour for a minority group. This is behaviour which reinforces the existing power hierarchy. In contrast, non-normative behaviour refers to behaviour which represents a move towards changing or threatening existing power relations and is viewed adversely by the dominant group.

This theory suggests that there are four mobility strategies open to immigrants:

- (1). Normative/Assimilation
- (2). Normative/Heritage Culture Maintenance
- (3). Non-normative/Assimilation
- (4). Non-normative/Heritage Culture Maintenance.

In relation to **Normative/Assimilation** he argues that assimilation is likely to be the most normative strategy, because it occurs when the group integrates itself into the existing structure within the new society. This has relatively few consequences in terms of threatening existing power structures, especially in countries which follow a policy of promoting cultural homogeneity. The second strategy of **Normative/Heritage Culture Maintenance** is largely relevant within a country that encourages multi-culturalism, as this strategy is only viewed as appropriate in enhancing the aims of the group if that group feels secure in maintaining their ethnic identity.

Non-normative/Assimilation represents an assimilationist strategy involving the means for individual mobility. An immigrant could attempt to achieve social mobility within the wider society, while not using conventional means to do so. This strategy may even

require identity switching, i.e. retaining ethnic identity or adopting characteristics of the majority culture, according to the demands of the situation. This is a group based strategy as it is condoned by the minority group to which the individual belongs. The final strategy is **Non-normative/Heritage Culture Maintenance**. This refers to a situation in which the group develops greater ethnic cohesion and solidarity by focusing on their heritage and culture. The objective is to present a strong challenge to try change existing intergroup power hierarchies so that the minority group can achieve more power and status.

Moghaddam's theory is based on the assumption that immigrants are motivated to improve their life conditions and achieve within the new country. He brings into the theoretical arena the important variable of the nature of the new society, recognising this in relation to the first two strategies, but failing to address it in the second two strategies. For example, with regard to Non-normative/Heritage Culture Maintenance, it is fair to assume that this strategy would be adopted in the event that the group perceived themselves to be unaccepted by the majority group, so that Normative/Assimilation was blocked. As a result of possible discontent with the inability to improve their status through normative strategies, the group adopts a non-normative strategy to achieve their ends (which now includes the dimension of attempting to change existing social hierarchies).

A second critique is that while the aims of a group may be to improve their own status, this may not be the sole aim and may not even be the most important one. Therefore, the acculturation strategy adopted may not necessarily be the one most beneficial to the group in terms of acquiring a more prestigious status, but will be the one that fulfills the most dominant need of the group. For example, groups may be more concerned with maintenance of ethnic identity, and if upward mobility of an individual who belongs to this group threatens his or her ethnic identity, the group may not condone that behaviour. A further problem with this theory is the group based emphasis, as a psychological perspective needs to incorporate and isolate the different factors involved in the process of both group and individual acculturation.

3). A Model of Acculturation

3.1). Group and Individual Acculturation:

Even with the incorporation of numerous strategies which may be adopted in response to acculturation, the theories outlined above fall short of providing an adequate understanding of the complexities involved in adapting and acculturating to a new environment. The early papers by Berry (1980) and Berry, Trimble and Olembo (1986) laid the foundations of a framework which was to become an extensive theoretical outline of numerous group and individual processes involved in culture change. According to these theorists there needs, firstly, to be contact between cultures which is continuous, the

result being some change in the culture among those in contact. There is also activity both during and after contact and this process may be relatively stable, but requires ongoing change. According to Berry (1988, 1992), while the definition implies mutual change, most changes occur in the non-dominant, i.e. acculturating group. Acculturation is recognized as both a group and individual phenomenon, at the individual level this is termed psychological acculturation.

In terms of group of acculturation, the changes that have taken place for the acculturating group occur at various levels, including, physical changes, biological changes, political changes, economic changes, cultural changes and alteration of social relationships (Berry, Trimble, Olmedo, 1986; Berry, Kim, Minde and Mok, 1987; Berry, 1988; Berry and Kim, 1988; Berry, 1992). At an individual level acculturating changes are noted in shifts in values, attitudes, abilities and motives which are referred to as behavioural shifts. Hence identities undergo a transformation in relation to contact with the new culture. There are also differences which the individual brings to the acculturation process, so that the process itself is different for each individual (Berry et al, 1986; Berry, 1992). The negative consequences arising from acculturation is termed acculturative stress, a concept used to define those reactions which can be linked solely to the acculturation process.

Acculturative stress may be a factor involved in poor adaptational outcomes for the individual, and may be related to lowered mental health, feelings of alienation and identity confusion. An important point to note is that the stress must not be viewed only as negative, as it may be utilized by the individual as a positive and creative force hence enhancing psychological functioning. The extent to which an individual may experience acculturative stress is influenced by the characteristics that he or she brings into the acculturative arena (Berry, et al, 1987; Berry and Kim, 1988; Berry, 1992). For example, Gold (1992) in his study of Soviet Jewish and Vietnam refugees found that patterns of adaption are partly shaped by the personal history of the individual, in the sense that previous preferences and animosities are retained and influence the way in which people choose to acculturate within a new society.

According to Berry (1992), psychological acculturation of the individual can be defined in relation to four factors, acculturation experience, stressors, stress and adaption. Stressors may result for some individuals in relation to their specific experience of acculturation. Acculturative changes are only viewed by some as stressors, and may even be seen as opportunities by others.

Berry bases his theory of stress, coping and acculturation on the formulations of Lazarus, Cohen, Folkman, Kanner and Schaefer (1980: 91). According to them, the key feature of

psychological stress which makes it unique from other forms of stress, is the incorporation of a cognitive dimension.

"The person is said to appraise each ongoing and changing transaction (or bit of commerce) with the environment with respect to its significance for that person's well-being. This appraisal includes judgments (whether conscious or unconscious) about the environmental demands and constraints as well as about the persons resources and options for managing them."

This view emphasizes the distinction between the nature of the stressful event and the individual's cognitive appraisal of the event, paving the way for a psychological understanding of the occurrence of stress. This cognitive dimension is all important in the understanding of stress, adaption and coping. As Lazarus et al state, some people will appraise environmental events as threatening, while others view such demands as challenging. The implication is that the perception of an environmental demand as threatening or challenging has different implications for adaptational outcomes. According to these authors, those who are able to view demands as challenging are likely to have higher morale, experience more confidence and less emotional turmoil. Thus cognitive appraisal feeds into and may enhance or undermine adaption to the environment.

According to these authors, emotions are also intricately interrelated with the process of appraisal and coping. The three processes of cognitive appraisal, emotions and coping are viewed as interdependent while their influence in relation to one another is bidirectional. Appraisal of an event evokes an emotional response, which, in turn influences coping behaviour. Similarly, feedback about the coping strategy adopted influences further appraisals and stimulates the entire process once again. Appraisals are constantly altering, being influenced by the individual's cognitive and behavioural activity. Successful adaptation requires that the individual is able to respond to the demands of each specific situation. Thus stress is not conceptualized solely in relation to the duration and intensity of the environmental stressor, but rather is dependent on the appraisal of the event in terms of the individual's feelings regarding their ability to cope with that stressor.

The understanding of stress and coping presented by Lazarus et al, while recognizing the need for inclusion of the psychological dimension of cognitive appraisal, is essentially over-restrictive in the emphasis placed on this variable in determining responses to stressful events. In a revised definition, Lazarus and Folkman (1984) describe coping as the cognitive or behavioural effort by an individual to implement control over either external or internal demands, these demands being viewed by the individual as taxing or exceeding their resources. They also note that coping style is not solely determined by the

individual's appraisal of the situation, but also by the resources available to that individual. Included in a discussion of these resources are health, energy, commitment, problem solving skills, social skills, social support, material resources and locus of control (in Chataway and Berry, 1989).

What is not included in this definition is prior experience of the individual, which is important in the study of adaptation and coping. At a general level, the inclusion of this variable may be understood in terms of prior stressful experiences which required coping responses and the manner in which prior stressors were successfully contemplated. With reference to the specific issue of migration, prior experience of the person undergoing change would incorporate experiences leading to the desire for or movement towards change. This broad understanding could also be conceptualized to include personality variables as linked to past experience, in the sense of both promoting certain coping behaviour and being influenced by the outcome of previous coping strategies adopted.

3.2). Processes Involved in Acculturation:

According to Berry and Kim, acculturation may be viewed as a series of phases including precontact phase, contact phase, conflict phase, crisis phase and adaption phase; and each is defined as having its own specific characteristics in relation to acculturation (for more insight the reader is referred to Berry and Kim, 1988). The final stage of adaption, refers to strategies used by the group or individual during acculturation and the outcome of the adoption of a particular acculturation strategy. There are a variety of different strategies which may be utilized, and while different strategies lead to differences in adaption, not all are equally successful (Berry, 1992).

Berry (1992) identifies three different strategies of adaption for the individual. **Adjustment** is the strategy most often intended by the use of the term adaption, and refers to changes in the individual in a manner which diminishes conflict between the individual and the environment. **Reaction** refers to changes which are in a direction which reacts or retaliates against the environment and may be used to alter the environment. Congruence between the individual and the environment would be increased through changing the environment. If the strategy of **Withdrawal** is adopted change still reduces conflict arising from incongruencies between the individual and the environment, but in the sense that the individual is "removed from the adaptive arena" through either self imposed exclusion or forced withdrawal. The first strategy is often the only realistic option open to the individual (Berry, 1988:43).

Paralleling these different strategies of adaption are different ways that individuals attempt to acculturate. An important contrast to Taft's (1977) theory is raised in that acculturation

is not the only adaptive strategy, while assimilation represents only one means of acculturation. According to Berry, depending on the nature of the new society, i.e. if it is pluralistic, then individuals and groups confront two distinct and important issues which largely determine the strategy adopted for adaptation. The first relates to whether the group believes that maintaining cultural identity and customs is important, hence promoting ethnic distinctiveness. The second refers to whether the group feels that contact with the larger society is of value. Depending on the view adopted in relation to the above issues, four possible acculturation strategies are open to the individual.

- (1). **Assimilation** refers to a relinquishing of previous cultural identity, coupled with a movement into the broader society.
- (2). The **Integration** option involves a degree of maintenance of the original culture of the group as well as a movement to become part of the wider society.
- (3). The third option is defined by either **Segregation** or **Separation** depending on which group promotes the situation. This option refers to little relations with the wider society and a strong maintenance of ethnic culture and identity. If the pattern is imposed by the larger society, this option is referred to as segregation, and if it is self imposed by the acculturating group, it is termed separation.
- (4). The final option is **Marginalization** and is characterized by stress, and group and individual confusion. It encompasses feelings of alienation, loss of identity and acculturative stress. Marginalization exists when the group is no longer in contact with their own culture and yet are unable to integrate into the culture of the wider society.

At a general level, when groups and individuals experience migration, shifts occur in behavioural functioning as behaviours are learnt from the new culture, while others, from the old culture, are shed. This process does give rise to the possibility of conflict between newly acquired and old patterns of behaviour. Conflict would then exacerbate any experience of acculturative stress. Acculturative stress is defined as the second change which takes place in an acculturating group, when a number of potentially stressful psychological phenomena that involve conflict may result in new behaviour which may be harmful to the general functioning of the individual (Berry, 1992).

The adoption of different acculturation strategies has differing implications for behavioural shifts and acculturative stress, i.e. the most culture learning and shedding occurs with the assimilation strategy and the least with the separation strategy. A high amount of culture learning with limited culture shedding occurs in integration, with the opposite occurring in the case of marginalization. High conflict is found in those who adopt separation or marginalization, while less conflict is present in the case of assimilation or integration. Similar differences in behavioural outcome are largely a

function of the different acculturation strategy adopted. For example, an assimilationist will experience marked change in behaviour so that the behaviour resembles that of the new society. Integrationists, on the other hand, select behaviour from both the old and new cultures, while the separatist remains steeped in traditional and heritage behaviour. The most important point according to Berry (1992) is that large amounts of within group variations occur in terms of the acculturative strategies adopted by different individuals.

3.3). Mediating Factors in Stress, Coping and Adaption:

Berry includes those important variables which impact on the acculturative experience of the individual by introducing the concept of factors which mediate between acculturation experience, stressors, stress and adaption. These include personality variables, e.g. self esteem, achievement motivation, rigidity or flexibility of the individual and cognitive style; motivation for migration; appraisal of nature of the host society; degree of prior knowledge of the culture and language of the new society. Level of education and the existence of social support systems within the new country are believed to act as buffers in the development of stress in the acculturation experience, as these factors are likely to enhance the view that stressors are manageable. Another issue noted by Berry as mitigating against the effect of stressors is an enlargement on Taft's (1977) argument regarding increased stress as a function of the size of the gap between the original and new cultures. Berry extends this point to refer to whether the individual is able to succeed in establishing their desired amount of contact with the new society. The larger the discrepancy between desired contact and actual contact the greater the stressors.

Acculturative strategies also effects acculturative stress. For example, the strategy of marginalization is the most stressful, while integration is the least, and the stress evoked with the adoption of assimilation and separation strategies lies in between the other two strategies (Berry, 1992). Berry, Kim, Minde and Mok (1987), in their comparative study of different migrant groups in Canada, found that individuals favouring integration experienced less stress, while adopting a separation strategy tended to lead to a greater experience of stress.

Other variables also defined as important are the nature of the larger society and the nature and characteristics of the acculturating group. An essential factor impinging on the experience of the acculturating group is whether a society advocates a culturally plural or culturally monistic ideology. The two societies differ in that the tolerance of ethnic diversity will be greater in culturally plural societies. Murphy (1973b) notes that less problems of mental health are found in immigrant populations in countries which advocate culturally plural policies. However it is important to note that even though a country may be culturally plural, certain groups may still be more accepted than others.

Berry and Kim (1988) argue that the nature of the acculturating group is also important in determining adaptational outcomes. They identified five different classifications of migrating groups: Refugees, Immigrants, Sojourners, Native People and Ethnic Groups. The features of each group differ in terms of degree of voluntariness involved in movement, and permanence of contact with the new society. Berry et al (1987) further argue that individuals involved in voluntary migration may have a more positive attitude towards movement and therefore experience less difficulty in acculturation as opposed to non-voluntary migrants. Groups who are not involved in permanent contact e.g. Sojourners may experience more stress than those already established, e.g. Ethnic Groups. The findings of their study bear out this assumption in that Native People and Refugees experience relatively high levels of stress in relation to Immigrants and Ethnic Groups who experience less stress. The stress level of Sojourners, who do not have permanent contact with the new society, fall in between these two groupings.

According to Murphy (1973b) and Berry and Kim (1988) there are numerous social and cultural characteristics associated with acculturating groups which impacts their acculturation experience. Status is one of these, as status on entry to a country is often lower than status within the original environment. Closely linked to status is education, higher levels of education are often helpful in acculturating. In the study by Berry et al (1987) they found that across all samples education was a consistent predictor of low stress. Two possible reasons are provided for this. Firstly, education could be of a Western nature and hence may provide the migrant with some experience in Western cultures. Secondly, education equips the individual with more resources, on an economic and intellectual level, to cope with change. Other factors which impact on acculturation include age, gender and marital status (Brody, 1970; Berry and Kim, 1988; Berry, 1992). The status which the group is afforded by the society, is also important. Murphy (1973b) notes that racial and religious characteristics play a significant role in the stability of mental health of immigrants.

Social support is viewed as an important variable in providing the individual with a familiar and supportive framework. Factors involved here include the existence of ethnic associations or extended families, residential groupings of people of similar cultural backgrounds, access and availability of origin cultural group and formal institutions which may aid the individual or group in acclimitising to the new culture. Chataway and Berry (1989) report that studies have found that social support systems may moderate the severity of stress, while lack of support appears to be more correlated to psychiatric symptoms than any other environmental stressors.

Gold (1992) in a study of Soviet Jewish refugees in America found that close connections with family and friends provided an important source of social attachment. This supportive system included the provision of services to one another and the exchange of vital social information regarding the new society. Extended families also provided job referrals and financial means to aid in the establishment of businesses. This social group was very important for Soviet Jewish refugees, especially for the elderly, as many were unable to learn English and became dependent on one another for a social life. There also tended to be a selection of friends within the Soviet Jewish group and the refugees' dislike of American culture provided support for strong in-group cohesion. However this pattern was not without variations, as dissatisfaction with personal status in the new country often led to refugees expressing their discontent by distancing themselves from their own ethnic group. Regionalism was also an area of conflict among refugees, as those from certain areas in their country of origin, perceived themselves to be superior to refugees from other areas. On the whole, however, the family and social support network of refugees served to ease the psychological trauma experienced by these individuals, especially as support networks provided continuity with the past and previous roles of the individual.

3.4). Acculturative Outcomes:

According to Berry (1992) the outcome of acculturation is adaption, ranging in form from adequate and relatively complete adjustment (possibly as conceptualized by Taft in his discussion of full integration) to maladaptation. Two concepts established empirically by Ward and Searle (1990) have been included in Berry's theoretical framework. These refer to the distinction between psychological and sociocultural forms of adjustment. The concepts are interrelated, but are predicted by different types of variables. Psychological and sociocultural adaption must be viewed as two separate entities in terms of the factors that impinge on each aspect, and also in relation to promotion of behaviours particular to each type of adaption for positive outcomes.

3.5). Benefits of This Model:

The theoretical paradigm of acculturation postulated by Berry and others represents largely a synthesis and expansion of previous theories. This theory accounts for the shortfalls of other theoretical postulates by incorporating a range of strategies involved in acculturation and the relation of these strategies to the acculturative stress experiences. It also includes numerous variables in the precontact, contact and postcontact stages of adaption which may mitigate against the effects of environmental stressors and acculturative stress. This general framework encompasses the various intricate relationships involved in acculturation and adaption and promotes understanding regarding these complex patterns so as to be applicable to the assessment of specific groups and individuals who are experiencing migration.

4). Acculturation and Child Migrants:

In relation to the current research, it may be assumed, as with survivors, that many of the immigrants who are currently the same age as survivors, were children or young adolescents during their immigration experience. Berry and others have noted the importance of the relationship between the developmental stage of the individual and their experience of acculturation. It is difficult, however, to assess the dynamics of this relationship as very little theoretical and empirical literature on the experiences of migration in childhood exists. Encounters of a child in a new environment, while intricately connected to their parents' experiences, are likely to incorporate important differences, as is illustrated in some rough theoretical sketches on childhood migration.

4.1). The Experiences of Children in New Societies:

Metraux (1992) raises important differences between child and adult refugees. Children are able to incorporate themselves relatively easily into the structures of the new society, especially at school level, and hence learn the culture and the language with more ease than adults. They are also able to begin to establish their own social network within the new country. However Taft (1979) feels that entry into academic structures may enhance the difficulties in adaption for children, as most often they must begin school on immediate arrival in the new environment. Therefore they face the problem of being forced to integrate from the outset, not allowing much time for developing familiarity with the new culture. An additional problem may arise in that in school there is constant emphasis on literary competency. This may be especially threatening to migrants who do not know the language. Migrant children may also be ridiculed for not knowing the appropriate behaviours or games, or for dressing inappropriately, especially as children are quicker in expressing their disapproval of their peers than adults. The last point raised by Taft is that the newcomer child may be confronted with a situation in which different behaviours are expected from a migrant as opposed to the established group, and dual messages for a child already facing a new situation may be difficult to cope with. The child may experience confusion in learning which behaviour to perform as a migrant within a new culture.

Ambiguous role expectations of children in a new culture may be one of the greatest risk factors impacting on adequate adaption (Salvendy, 1983). Confusion as to which role to adopt exists for these children not only in relation to their peers, but also with regard to parental expectations. For example, the parent may still be in a state of denial of change and locked in their past, or alternatively adopt a separation strategy of acculturation, while the child is already establishing their future within this new society. Entering school represents the first tie with the new society for both the child and the family. This may be

threatening to the maintenance of the parents' denial or separation. The child may receive double messages regarding acquiring an education, which is viewed as positive, and mixing within the new context, which is viewed as negative. This may in turn lead to a problem of double or mixed loyalties for the child (Metraux, 1992). Adjustment difficulties may also arise if the home environment is stricter than the school environment. According to Salvendy, children may respond with acting out behaviour either at home or at school. These children may also experience feelings of shame at the traditions, manners and habits of their parents, while on the other hand, parents may demand that children maintain the dress and customs of the old country for fear of losing past traditions.

The consequences of migration for the child are also intricately linked to the manner in which the parent responds to the migration experience. For example, parental difficulties in adjustment to a new environment may impact on their ability to provide adequate attention to both the child's needs and to any possible difficulties which the child may be experiencing in the changed environment. Children are often more flexible and adaptable than adults and may achieve quicker integration into the new society. Therefore immigrant families may experience not only the usual generational gap between parents and children, but also adaptational differences. The child may be faced with separation from family members who had played an important role in their life prior to migration, and from their extended family. Furthermore, the migration process may upset traditional child rearing practices (Salvendy, 1983). Thus the parent may be caught trying to alter their child rearing practices in accordance with the new culture, without having a full knowledge of those cultural practices, while simultaneously relinquishing previously known patterns of parenting behaviour. On the other hand, children have the benefit of having parents who may be able to buffer them from the hardships involved in culture change, and act as a familiar mediator between the child and the new environment (Taft, 1979).

From the discussion of theoretical points outlined above, three interrelated conclusions may be drawn. Firstly, there are numerous differences or special issues involved in the acculturating experiences of child migrants. Secondly, the theoretical literature on this topic is far too sketchy and lacking in empirical validation to draw any conclusions. Thirdly, there is too little overall theoretical and empirical evidence to attempt to establish the framework for a theory relating to the specialized issue of childhood and migration. Even an adaptation of Berry's proposed paradigm is inadequate given the different nature of this group and leaves many questions unanswerable. For example, would one define the choice of the child's acculturation strategy as based on the strategy adopted by the parent? Similarly stressors experienced by the child may be coupled with parental demands and expectations as discussed above. Further work is also necessary in developing an understanding of the dynamics of the immigrant family as a unit. Viewing each member

separately does not aid in understanding how the experience of immigration impacts on and influences the family unit.

5). Children of Immigrants:

Reviewing literature related to children of immigrants is relevant in terms of the focus of this study on the adaption and acculturation of survivor and immigrant families. However, in general, the study of second generation immigrants has received little attention, as researchers show a preference for focusing on those experiencing the process of migration and adaption first hand. Work in this area is commonly presented as an addition to the study of first generation immigrants (Archdeacon, 1985). Literature on second generation immigrants in Southern or Central Africa is not available. Caution is required in relating information based on American research to the South African context, because of the different nature of these societies and hence different experiences of respective migrants and their families.

According to Goldstein and Goldscheider (1968:7-8), children of Jewish immigrants in America were very receptive to their new culture. They describe the acculturation of the second generation as "overwhelmingly successful.". At an extrinsic level these children appeared very similar to their native born counterparts. Through schooling and mass media, they acquired the essential knowledge of the requirements and demands of their new society. The second generation were well educated, upwardly mobile and usually successful. However, they were also faced with the pressures of adhering to two different cultural worlds,

"the world of the ghetto, foreign to America, limiting social and economic expression and advancement, and the new world of America with unlimited economic opportunity and the apparent welcome sign to become American. The adjustment to the conflict of these two worlds characterized the second generation"

This conflict resulted in difficulties for the second generation in reconciling their Jewishness in the new American environment. The increasing upward mobility of this generation led to a rejection of their Jewish heritage, and of these values and customs in their parents. Lazerwitz and Rowitz (1964) present statistical data which illustrates this decline of religious adherence between first and second immigrant generations, and they comment that immigrant Jewish patterns show a drop in synagogue attendance from generation to generation.

"The reaction of the second generation was one of escape - a rejection of the foreignness of their parents, of the stifling and limiting ghetto environment, and of

the focal values of the social world of the first generation, Judaism. However, their rejection of ghetto life and its implications left the second generation in search of an identity." (Goldstein and Goldscheider, 1968:8).

Many tried to enter white Christian institutions, into which they were not totally accepted. Hence, the second generation became characterized by marginality through self imposed alienation from their own heritage, while not being completely accepted into the structures of white Protestant America. The result was that this generation began to develop their own institutions which complimented their new found social status. Thus the second generation immigrants developed an identity which was distinct both from the parallel social strata of their new society and from the ghetto lifestyle of their parents generation. According to Goldstein and Goldscheider (p. 8) the patterns displayed by this generation of immigrants suggest that extrinsic acculturation occurred more quickly than "structural assimilation and intrinsic culture change...".

The process of adaption and acculturation of Jewish second generation immigrants to American society is likely to contain differences to the adaption and acculturation of this population to the South African environment. This is related to the difference in the nature of the respective societies and resulting different acculturation patterns of the first generation immigrants. In societies with established economies, upward mobility for first generation immigrants, who usually had little formal education and a limited knowledge of the language of the new society, was difficult. First generation immigrants in America were occupationally unskilled and "Their goal in America was to survive economically in the voluntary ghettos in which they resided." (Goldstein and Goldscheider, 1968:6). These immigrants tended to maintain their Eastern European lifestyle in insular and segregated communities where religion played an important role. This first generation occupied a relatively low socio-economic position which contributed to ensuring that structural assimilation did not occur. However, the middle class values that were to enhance the social movement of their children were also present in this generation, epitomized in the emphasis placed on formal education for their children. (Glazer and Moynihan, 1963). Social mobility occurred for the children of these immigrants, who were highly educated and occupationally skilled. This social mobility was coupled with a reaction against the Jewish values of their parents and insular nature of their "foreign" community.

In contrast, the situation of South African first generation Jewish immigrants is characterized by upward social mobility (Dubb, personal communication). In this new society the structure of the economy was not as entrenched as in America. Hence the new environment provided the immigrant with opportunities to enhance their social status. Many of these first generation immigrants started their own small businesses which

eventually began to prosper. A product of this upward mobility was more interaction with the external community coupled with less need to maintain the segregated communal life of their Eastern European background.

Children of these immigrants were born to families that were already upwardly mobile and less insular than their American counterparts. It is thus less likely that this generation is characterized by a reaction against the values and behaviour of their parents. Foreign accents and mannerism may still be a source of shame or embarrassment to these children, however, the rejection of parental Jewish traditions and values is hypothesized to be less intense within the South African environment because of the greater financial success and integration achieved by immigrant parents.

6). Acculturation theory in the Context of the Research:

Comparisons between survivors and immigrants is significant in terms of assessing the forms of acculturation and adaption between the two different groups and in establishing how these patterns influence successive generations. If differences exist between immigrants and survivors in terms of the experience of acculturative stress, this does not necessarily suggest that the difficulty displayed by survivors and their families is related to the Holocaust event. It may be that the presence of some of the noted variables which aid adaption to a new environment, such as status, education and family support may not be present for Holocaust survivors. Viewing survivors as also partaking in the process of immigration results in a more indepth description of this population in relation to numerous groups, such as other immigrants, the existing Jewish population and the host society. This involves a greater contextualization of functioning of survivors and their families in their new society in the post-Holocaust period.

Assessment of children of immigrants and immigrant families provides some means to account for the confounding of the experience of immigration with Holocaust effects in survivor families. Based on reports from the second generation immigrant literature it is likely that some rejection of the "foreignness" of immigrant parents is present among their children, although possibly not to the same extent as in the American situation. These patterns of familial interaction may be similar among immigrant and survivor families. Thus, conflicts which exist within survivor families may be related to the immigrant status of the survivor parent and not solely to their Holocaust past. This highlights the significance of understanding the acculturation and adaption processes of Eastern European immigrant families to their new society.

CHAPTER 4

THE RESEARCH QUESTIONS, METHODOLOGY AND PROCEDURE.

Drawing on the literature presented in the first three chapters, the major issues which this research aims to assess, are discussed. The focal areas refer to: (1) transmission of Holocaust effects within survivor families (1.1) coping and adaption of survivors (1.2) the acculturation of survivors and immigrants and (1.3) resilience in children of survivors. Assumptions regarding findings in relation to the different areas outlined, are drawn on the basis of past inquiries. Thus, this study aims to establish whether the South African sample of survivors and their families evidence similar patterns of psychological effects to that found in previous research. Assessment of family patterns is combined with an inquiry into both the adaption of survivors to their new environment and their coping behaviour displayed after the Holocaust. Understanding patterns of adaption, acculturation and coping behaviour of survivors, may contribute to the understanding of the dynamics which exist within the post-war survivor family. As no previous research on survivors and their families has been conducted in South Africa, the geographical location of the research is also discussed as an unknown quantity which may influence research findings.

1). Intrafamilial Functioning: Survivors and Immigrants:

Previous research suggests that survivorship impacts on parenting behaviour. This literature concludes that there is always some influence of the Holocaust within survivor families, however in line with the current emphasis, this may be either positive or negative or an interaction of both elements. The influence of the Holocaust on intrafamilial functioning is difficult to define, both because of its complex nature and its particular manifestation within the dynamics of each family. Similarly, the process of transmission of Holocaust effects is not easily identifiable nor are the modes of transmission. The factors most likely to comprise modes of transmission would seem to be parental communication of Holocaust experiences as well as parental behaviours, reactions and child rearing patterns which may be Holocaust related. In the current literature Holocaust effects are described as most prominently present in the child rearing behaviours of parents, promoting the generalized patterns of negative psychological effects in children outlined below. However, as noted, patterns of psychological effects in children are not only present in clinical symptoms and can be both life enhancing and detrimental (Hass, 1990; Dawes, in press). The positive form relates to characteristics such as resilience and resourcefulness in children of survivors, modeled on the presence of these qualities within their survivor parents (Almagor and Leon, 1989). The existence of patterns of psychological effects in children suggests that intergenerational transmission of Holocaust effects has occurred.

In summarizing reports from the literature it may be expected that the following patterns would be prominent within survivor families. Parents may either over invest in children or be unable to invest adequately. In the case of over investment, parents tend to display over protective behaviour towards their children. This may then lead to patterns of difficulty in separation-individuation and in the child's ability to establish his/her autonomy (Freyberg, 1980). Under investment is usually related to emotional constriction on the part of parents, who remain captured in their past (Rosenberger, 1973; Davidson, 1980a). Hence they may be unable to provide a warm and nurturant family environment for their children. Both cases may lead to rage and anger at parental behaviour, however this becomes repressed for fear of hurting parents. Guilt may also be a prominent pattern characterizing survivor families. For example, children may experience guilt related to what their parents endured. Guilt also ties the child to the past life of the parent. (Danieli, 1981a).

If the parent had lost children in the Holocaust, the new child may become identified with their lost sibling (Sonnenberg, 1974). Previous reports suggest that parents may view the living child as a reincarnation of the dead child. This will impact on the ability of the child to develop as an autonomous individual (Freyberg, 1989). Children then may also feel that they are committed to the past life of the parent which they cannot comprehend (Mor, 1990). Additionally, children may perceive that they have a "special mission" to undo the past of their parent and to provide meaning to their parents' lives (Kestenberg, 1980). Therefore they may strive very hard for academic and financial success and over react to minor setbacks (Freyberg, 1980; Russell, 1974). Children may also experience difficulties in identifying with parents after hearing stories of their degradation and humiliation in the camps, and parents may become devalued as authorities figures (Sonnenberg, 1974; Bergmann, M.V., 1982). The survivor parent may also be unable to cope with defiant behaviour by the child and may experience the child as the return of the Nazi aggressor (Gubrich-Simitis, 1981).

The most common patterns of psychological effects which are transmitted to children fall under the following major categories:

- (1). Difficulties in Separation-Individuation.
- (2). Repression of Anger.
- (3). Identification with Exterminated Siblings.
- (4). Need to Fulfill a Special "Mission".
- (5). Imprisonment in the Parents' Past.
- (6). Guilt.
- (7). Loss of Idealization of Parents.
- (8). Feelings of Being Equated with the Oppressor.

As a unit the family may be characterized by the patterns of survivor family interactions recorded by Danieli (1981a, 1981b, 1985, 1988). As discussed in chapter two, these include Victim Families, Fighter Families, Numb Families, and Families of "those who made it". Each family type is characterized by different patterns of interactions and attitudes among its members, which are promoted by the post-Holocaust behaviour of the survivor parents. According to Danieli, the manner in which survivors understand their survival results in specific patterns of family interactions. For example, in the Victim family, the dominant pattern of identification is of being a victim and this promotes attitudes and behaviours within this family which are common to all "victim families".

The framework of the McMaster Model of Family Functions is used to comment on survivor family interaction and dynamics. This model is based on a systems approach to understanding family functioning and identifies six dimensions found to be relevant in the assessment of families presenting with clinical problems. These include (a). problem solving (b). communication (c). roles (d). affective responsiveness (e). affective involvement (f). behaviour control. Family functioning is classified as varying from effective to ineffective on each of these dimensions (Epstein and Bishop, 1981). The originators of this model (e.g. Rakoff, Sigal and Epstein, 1967) were instrumental in promoting the study of children of survivors.

According to this model the varieties of problems and issues which the family is confronted with can be divided into three categories. (1). The basic task area, which refers to the fulfillment of fundamental needs such as the provision of food, money, transport and shelter. (2). The developmental task area, which relates to issues arising within the family as a result of the natural course of development of both the individual and the family. This category is divided into two parts. The first part incorporates those issues related to the individual developmental stages occurring in each individual within the family, e.g. infancy, childhood, adolescence etc. The second part refers to those issues which are related to family stages such as the initial period of marriage, the birth of the first child etc. (3) The last category is termed the hazardous task area. This includes crisis, which result in critical periods, which the family may face in relation to experiences of illness, forced job changes, loss of income, accidents and moving.

From the above discussion, it appears that survivor families may experience ineffectual functioning on most dimensions of the model. Therefore, transmission of Holocaust effects can occur on any dimension. It may also be that conflict on all dimensions relating to the hazardous task level may result in the most ineffectual patterns of functioning within survivor families, as survivors' resources may be so taxed that they are unable to cope with

crisis situations. These crisis situations may invoke feelings and thoughts associated with their experience of trauma.

On the **problem solving dimension**, survivor parents who are emotionally depleted after their experience and unable to invest energy and resources in their child, may be ineffectual in dealing with family problems. These parents may display specific difficulties in contemplating affective problems. For parents' who have over invested in their children, problems which touch on issues of separation-individuation of the child may not be effectively resolved. These survivor families may especially experience conflict in relation to problems within the developmental task categories.

Difficulties experienced at the level of **communication** may include either minimal or over communication about the Holocaust past of the parent. Limited communication may create a gap for the child in continuity between the past and the present. As highlighted in the literature this may also lead to children constructing shameful fantasies around parental survival (Porter, 1981; Perel and Saul, 1989). Minimal communication about the Holocaust may be indicative of constriction on this dimension in relation to other areas of family communication. Constant communication by parents regarding their trauma, on the other hand, may be overwhelming for the child and serve to continually remind them of their parents' past.

Problems which may be anticipated on the **roles dimension** relate to children perceiving themselves as their parents' protectors and hence adopting parental roles in relation to their parent (Epstein, 1979; Podietz et al, 1984). Survivor families may experience severe depletion in relation to **affective responsiveness**. If survivors are emotionally depleted after their experience of trauma, they may be restricted in their ability to respond to their children. These survivors may be so immersed in their past, that they are unable to invest energy in responding appropriately to the demands and needs of their children. Survivors may also be unable to experience pleasure and enjoy family events (Davidson, 1980a) or are emotionally constricted as a result of the ego investment in the maintenance of defensive functioning (Rosenberger, 1973). These survivors may not be able to relate to their children with the full range of emotions. They may also display inappropriate responses to environmental stimuli which invoke Holocaust related thoughts. If this reaction occurs in relation to children, then it could encompass the pattern of identification of children with the aggressor when children become angry or defiant.

The dimension of **affective involvement** includes different patterns of over or under involvement with children. If parents are emotionally constricted after their Holocaust experiences they may display an absence of affective involvement or involvement devoid of

feelings. Narcissistic involvement may occur if the child is used by the parent to work through their own trauma, as in the example of the child being viewed as a reincarnation of a lost child. Idealization of the child may also represent a pattern of narcissistic involvement with the child, where the child becomes the symbol of renewed life and the means to restore the parents' damaged self image (Davidson, 1980a). This pattern of relating to the child may promote "mission" fulfilling behaviour in the child in order for them to attempt to realize their parents' ideal.

Survivor families may experience difficulties on the **behaviour control dimension**, especially in relation to interpersonal socializing behaviour. For example, survivors who are emotionally depleted after the Holocaust, and do not have the resources to cope with maintaining specific patterns of behavioural control across different situations may adopt either rigid or laissez faire behaviour control. The behaviour of the survivor parent may also lack control, i.e. they may experience violent outbursts. Chaotic behaviour control may occur in survivor families where the parent is so effected by their Holocaust experience that any attempt to establish patterns of behaviour control become erratic and inconsistent.

The above discussion does not take into account both the potential for coping within survivors and resiliency among children. If survivors are able to overcome their experience of trauma, then they may be able to provide a warm and positive child rearing environment. The more recent research on survivor families has found little difference between their functioning and the functioning of children of immigrants or of the established Jewish community (Gay and Shulman, 1978; Leon et al, 1981; Zlotogorski, 1983, 1985; Sigal and Weinfeld, 1985, Weiss et al, 1986, Rose and Garske, 1987).

1.1). Coping and Adaption: The Survivors:

Although the current focus now accounts for positive resources among survivors, little attempt has been made to define factors that promote coping. In order to enhance understanding of post-Holocaust coping it is important to attempt to tease out these factors aiding survivors in functioning adequately and adaptively after their experience of trauma. Certain variables have been hypothesized to influence coping behaviour after the war, such as age at persecution, pre-Holocaust personality functioning, having family alive after the war, duration of incarceration, type of persecution experience and country of immigration (Venzlaff, 1964; Winnik, 1966; Hafner, 1968; Jaffe, 1970; De Wind, 1971; Krell, 1979; Newman, 1979; Bergmann and Jucovy, 1982; Klein, 1983; Steinberg, 1989; Hass, 1990). Some of these variables have been assessed either independently or in combination, and differing results have emerged. What is important to determine in relation to this study, is whether differences in these factors have different implications for understanding family functioning. For example, is family functioning less effectual in families where survivors

were of a young age during incarceration; in cases that parents' were death camp survivors and so on. A strong support group in the new country and having family alive after the Holocaust are known to be factors which promote coping. Survivors who experienced these two support systems may provide a more effective child raising environment than survivors who had neither after the war. The nature of the new society in terms of whether it is receptive to survivors is also a relevant issue in understanding family functioning.

Factors such as the cognitive appraisals and justifications for survival may also provide important sources of information regarding post-Holocaust coping. Little research has been conducted on this. If survivors utilize internal resources as a means of coping, then this may have a positive impact on children as they are able to view their parents as having strong internal resources to cope with their trauma. This, in turn, may lead to the transmission of positive psychological effects across the generations, as these cognitive coping strategies may be modeled by children and comprise aspects of their own resilient behaviour.

1.2). Acculturation: Survivors and Immigrants:

Jewish immigrants from Europe have experienced similar backgrounds to Holocaust survivors. Therefore, how these immigrants adapt and acculturate within their new environments may shed light on the coping and adaption of survivors. Comparisons between survivors and immigrants from similar countries, increases understanding of the effects of survivors exposure to trauma on their family functioning. If the processes between the two groups are similar this may imply that survivors are able to cope well after the trauma and integrate in a similar manner to their brethren who have not experienced trauma. The latter argument is based on the assumption that the immigrant group is well adapted to their new society and cultural group. Similarly, in the alternate circumstance, i.e. if immigrants from similar backgrounds to survivors are not well integrated into their new society, ineffectual adaptation by survivors may not necessarily be related to their experience of trauma.

If adaption and acculturation has occurred adequately among survivors, this may suggest that the Holocaust dynamic is not very influential within the survivor family. It will also highlight whether difficulties within survivor families may be attributable to the Holocaust past of the parent, or to their experience of immigration and adaption to a new society. This relates to the example raised in the literature where specific family patterns may be more a product of child rearing practices within the home culture, rather than related to the parents' experience of trauma (Hass, 1990). Again, factors which promote coping, (i.e. support group and family in new country, nature of new society) are important to assess, because if these are similar between the two groups, and yet their patterns of adaption and acculturation show differences, then this may be related to the survivor's experience of trauma.

The nature of the Jewish identity of survivors and immigrants, and their level of affiliation with the Jewish community, is also relevant in understanding their adaptation and coping. The Jewish group, which is fairly insular within the South African context, adopts specific attitudes and behaviours in relation to the wider society. If the acculturation strategies utilized by survivors and immigrants are similar to those of the Jewish group to which they belong, then it is adaptive in relation to that group. If both are dissimilar to the Jewish group and similar to one another, then it signifies that a particular pattern of adaptation and acculturation exists among Jews of a specific origin. Thirdly, if differences between the immigrant and survivor group exist, and one group is in line with the strategies of the established group, then this suggests that there may be some source of influence that has promoted these differences in adaptation in the second group.

Previous literature suggests that children of survivors and of immigrants feel that their parents are different because of their accents and different cultural habits (Mor, 1990). For children of survivors this may increase their difficulties in coping with the effects of their parents' experiences of trauma. However these patterns may also reflect that children are more aware of and troubled by their parents' immigrant status than parental behaviour and functioning as related to the Holocaust. Experiences of children of survivors and children of immigrants also provide an interesting comparison. Reports from these two groups will reflect whether the immigrants status and experience of parents impacts substantially on adjustment and adaptation of children within the new country. How and if the experience of children of survivors differs from children of immigrants may thus be related to their parents' Holocaust past.

Aside from depicting similar experiences resulting from the immigrant status of parents, similarities between accounts of the two groups of children could also be related to the immigrant parents' experience of persecution in their country of origin. Immigrants' experience of persecution and discrimination may result in similar dynamics within immigrant and survivor families. It may, for example, create a dynamic of insecurity within families and promote child rearing patterns or behavioural reactions in parents which are similar to that experienced by survivor families. Therefore, it is important to establish the reasons for immigration of these parents. The extent of Holocaust awareness and feelings of being "close" to the Holocaust in immigrant families, is also a factor which must be accounted for.

1.3) Resilience: Children of Survivors:

As noted in the literature, it is important to distinguish between two forms of this concept. Firstly, children may be able to resist being undermined by the influence of their parents' Holocaust experience as expressed in the family dynamics. Secondly, children of survivors

may develop and utilize strengths and resources similar to those which their parents display. Based on the new conceptualizations regarding survivors, it can be assumed that if these survivors are able to cope with their exposure to trauma, children are able to cope with the possible effects of their parents' experiences. In fact, if it is found that there is a process of coping and ego regeneration within survivors who have experienced the trauma, it may be considered undermining to their children to assume that they will not display similar qualities. Working within this theoretical framework, it is then essential to attempt to define factors which promote coping and resilience within children of survivors.

In assessing whether children of survivors display both forms of resilience, some important points must be raised. In the first definition, resilience to the transmission of effects is based on the assumption that these effects are present. Given some of the recent empirical findings (e.g. Zlotogorski, 1983, 1985, Rose and Garske, 1987), the possibility exists that the influence of the Holocaust may be minimal among these families. In this instance the issue of resilience to the transmission of effects may be less relevant. However, these findings may then point to the significance of the second form of the concept. For example, if the Holocaust experiences of the parents present little influence within the family dynamics, this may suggest that survivor parents have the strength to overcome their past trauma, and these strengths may be passed on to their children. The converse may also be true, in that within families in which Holocaust influences are pervasive, parents may be displaying ineffectual coping patterns. Therefore, children may have little to learn from their parents coping strategies, but may be able to develop their own resilience to the transmission of the effects of their parents' trauma.

2). Location and Population Differences:

This research contains numerous novel components. One of the most relevant refers to the geographical location of the target population groups. Very little general literature exists on survivors who settled in Central and Southern Africa, and no psychological inquiries into post traumatic states of these survivors and their intrafamilial functioning has been conducted. Therefore, work in this context is new, and may turn up differing findings to studies conducted in North America, Europe and Israel. Different factors may be operative in the African environment in terms of both adaption and acculturation of the immigrant and survivor groups, as well as in relation to the experience of survivorship and its influence on the families of survivors. There are also specific circumstances around resettlement after the Holocaust in the case of these survivors (and immigrants), as compared to their counterparts who emigrated to other countries. For example, all of those survivors and immigrants who immigrated to African countries outside of South Africa, faced an additional migration to South Africa. The terms of this later immigration differed depending on the original African country in which the individual settled.

OUTLINING THE QUESTION:

The following section focuses on the methodology and subjects of the current study. Firstly, the research questions are presented. This is followed by an outline of the populations from which the samples are drawn and characteristics of both the population (where possible), and the samples are discussed. These populations include (a). Cape Town Jewry, which is divided into (i) Sephardic Jews (ii) Ashkenazi Jews; (b). the survivor population in Cape Town (c). the immigrant population in Cape Town (d). children of survivors (e). children of immigrants. This is followed by a theoretical discussion supporting choice of methodology. Potential shortcomings of the methodology adopted are also noted in relation to the manner in which these may impact on the research. The final section includes an outline of the specific research procedures utilized in this study to collect and analyse the data.

1). Focal Areas:

Given the findings of past literature, the emphasis of the current study is on determining whether survivor families display any commonalities in a number of specific areas.

- 1). Transmission of knowledge and awareness of the Holocaust.
- 2). The existence of Holocaust effects within survivor families.
- 3). Whether survivor children indicate any common patterns of parenting and childhood experience which could be related to the Holocaust (such as the patterns noted in the first part of the section), and whether survivor families are characterized by common patterns of attitudes and behaviours such as those outlined by Danieli (1981a, 1981b, 1985, 1988).

This was assessed through accounts of parents' and children regarding their patterns of intrafamilial relationships and perceptions of child rearing behaviour.

If these commonalities exist the question which follows is; are these patterns related to the Holocaust past of the parent? As the literature points out, a comparative immigrant sample is necessary, as Holocaust effects within families may be obscured with immigration effects (Hass, 1990). In order to account for this and for the implications of resettlement for survivors, the process of adaption and acculturation of survivors is compared to an immigrant sample and hence the question becomes more complex:

- (4). Do survivors display different patterns of adaption and acculturation to immigrants of the same Eastern European background?
- (5). Are there similarities in patterns of intrafamilial dynamics between survivor and immigrant families?

These two questions are addressed, firstly, by comparing the adjustment of survivors in general to that of immigrants in general, and secondly by comparing survivor family

dynamics to those of immigrant families. With regard to the latter, and as noted previously, if patterns are similar between the two, then these may related to the immigrant status of survivor parents' as opposed to their Holocaust experience. In line with the current theoretical emphasis, whether survivors displayed coping behaviour and factors promoting coping are also assessed, as is resilience among children of survivors. All findings in relation to these questions are based on the subjective reports of respondents.

2). Cape Town Jewry: The Ashkenazi and Sephardic communities:

The population of survivors in Cape Town represents a very small and ever diminishing group. Until recently this group was comprised solely of Ashkenazi Jews. Then as most of the Jewish community in Zaire (previously known as Belgian Congo) fled during the civil war in 1960, Cape Town witnessed the development of a Sephardic community. The beginning of the Ashkenazi community in South Africa can be traced back as far as the early to mid nineteenth century, with an influx of Lithuanian and Russian Jews during the gold rush years. This continued, despite the establishment of numerous laws in the twentieth century, to restrict immigration of Jews (Cohen, 1984). In contrast the history of the Sephardic community in Cape Town does not extend for longer than approximately thirty years. Immigration of Sephardic Jews to countries such as Zaire and Zimbabwe, only began at the end of the nineteen twenties, or beginning of the nineteen thirties. Geographically the Sephardic community that settled in Zaire was relatively homogeneous comprising largely of Jews from Rhodes Island and Turkey. In contrast Ashkenazi immigrants arrived from numerous countries throughout Western and Eastern Europe.

Sephardic Jews are in a minority in Cape Town and in South Africa. However the number of Sephardic survivors is disproportionate to the size of their group in relation to the Jewish population. Their respective patterns of immigration are such that Ashkenazi survivors settled in South African and Sephardic survivors in Zaire, with Zimbabwe representing a country that attracted proportionately equal settlement from both groups (with an increase in Sephardic settlement after the independence of Zaire). Ashkenazi survivors were few relative to the total Jewish population in South Africa, while Sephardic survivors were of greater numbers relative to their total group in Zaire. The influx of Sephardic survivors from Zimbabwe over the past thirteen years (many arrived in S.A. after leaving Zaire for Zimbabwe, and then moving again after Zimbabwe's independence), has also led to an increase in the Sephardic survivor community in Cape Town.

Sephardic and Ashkenazi Jews have developed relatively independently of one another over centuries. The origins of Ashkenazic Jewry is rooted in early medieval Christendom in Western Europe, while Sephardim was the name give to Jews who originated in Spain as derived from Sepharad, the medieval Hebrew name for Spain (Seltzer, 1980). Both groups

are defined as being Jewish and observe the same traditions and festivals. Variations among the two groups occur largely along traditional, cultural and linguistic lines. The societies in which these two distinct groups were separately embedded for centuries influenced their cultural and traditional practices of Judaism. As an example, each group developed a dialect of the language of the country in which they lived, for the Ashkenazi group this was Yiddish and for the Sephardics, Ladino. No Sephardic survivors settled in Cape Town immediately following the war. Not only are these two groups different in terms of their pre-Holocaust history and traditions, and their Holocaust experiences (the Sephardic Jews from Rhodes Island all experienced immediate deportation to Aushwitz), but also with respect to their post-Holocaust history and group resettlement.

3). Survivor Population and Sample Characteristics:

A list available from the Survivor Association in Cape Town reflects that there are 51 known survivors currently residing here. One third of the sample are Sephardic and two thirds Ashkenazi. Similarly, one third are male and two thirds female.

From the above group only forty seven people were contactable. Twenty one survivors agreed to be interviewed. This sample consists of six males and fifteen females. Six subjects are of Sephardic origin and fifteen of Ashkenazi origin. This adequately reflects the composition of the population, although there is a slightly higher Ashkenazi representation and lowered Sephardic one. This could be due to the inability of many of the Sephardic survivors to speak English fluently, hence excluding them from being interviewed.

In keeping with the definition of a Holocaust survivor, the experience of subjects included ranged from incarceration in death or labour camps, to spending the war period in hiding. Of the six Sephardic subjects all were incarcerated in death camps, in contrast only three of the Ashkenazi sample were in death camps. Similarly all six Sephardic survivors had lived in Rhodes Island, while the Ashkenazi sample was comprised of survivors from six different countries. All Sephardic survivors who immigrated to Zaire faced the added trauma of having to leave as refugees during the civil war.

Table 1 outlines the characteristics of the survivor population and their children interviewed. The first column lists the case number, and the second refers to whether the survivor is of Sephardic or Ashkenazi extraction. Column 3 cites the country of origin of the survivor.

The majority of subjects were in late adolescence or early adulthood when the Holocaust occurred. The age cited in Table 1 refers to the age of the survivor when intense persecution and ghettoization of Jews started and not necessarily age at incarceration or hiding. This would have occurred approximately one or two years later with the implementation of

Hitler's Final Solution in 1942 (Gilbert, 1986). In relation to the Sephardic survivors, Rhodes Island was only invaded in 1944 and Jews were sent immediately to the concentration camps. The age cited for these subjects refers to this year, whereas the age of the Ashkenazi subjects relates roughly to the period of invasion of their country, usually 1940. The age of subject 21, a survivor from Marseilles, is given in the year 1943, when this region was occupied by the Germans.

The fifth column lists the war time experiences of each survivors and in column six the country to which the survivor emigrated after the war is cited. Column seven indicates year of arrival in South Africa. The penultimate column lists the number of children of each survivor and the final column indicates those who were interviewed.

Table 1. SURVIVOR CHARACTERISTICS:

S	Sect	Origin	Age	War Experience.	Emigration	S.A.	No. of Children	Children interviewed
1	S	Rhodes	33	D.C.	Za/Zim.	1975	1M	No
2	A	France	14	Hiding	S.A.	1947	3F	No
3	A	Germany	13	Hiding	S.A.	1941	3M	3M
4	A	Lithuania	14	Hiding	S.A.	1949	1M 1F	1F
5	A	Poland	16	D.C.	Zim.	1948	2F 1F	1F
6	A	Poland	14	Partisan	Ger./S.A.	1950	2M 1M	1M
7	A	Germany	22	Hiding	Isr./S.A.	1950	No	No
8	S	Rhodes	22	D.C.	Za.	1964	No	No
9	A	Austria	8	Hiding	Hol./S.A.	1956	1M 1F	No
10	A	Poland	21	D.C.	Pol./S.A.	1951	2F	No
11	S	Rhodes	18	D.C.	Za.	1974	2F 1M	1F
12	A	Germany	7	Hiding	S.A.	1946	2F 2M	2F 1M
13	S	Rhodes	17	D.C.	Za.	1975	3M 1M	1M
14	A	Holland	18	Hiding	Zim.	1984	1F 1M	No
15	A	Holland	15	Hiding	S.A.	1948	No	No
16	A	Poland	11	D.C.	Arg./S.A.	1957	2F	No
17	S	Rhodes	13	D.C.	Zim.	1972	1F 1M	No
18	S	Rhodes	15	D.C.	Za.	1971	No	No
19	A	Poland	26	R.Lab	S.A.	1947	1F 1M	No
20	A	Poland	20	R.Lab	Isr./S.A.	1953	1F	No
21	A	France	7	Hiding	Fr./S.A.	1955	3F	No

KEY:

A/S - Ashkenazi/ Sephardic

Zim. - Zimbabwe

Hol. - Holland

D.C. - Death camps

Ger. - Germany

Pol. - Poland

R. Lab - Russian Labour Camps

Isr.- Israel

Arg. - Argentina

Za - Zaire

Fr. - France

M. - Male

F. - Female

All subjects lost extended family in the war. Only one survivor lost no immediate family, the rest lost between one and all members of their immediate family. Table 1.1 provides these family details of each subject. Only immediate family is outlined. Column 3 lists all family members of each subject who were still alive after the war. This includes those who either emigrated before the war, or who survived persecution or incarceration in Europe.

Table 1.1 SURVIVORS FAMILIES:

S	Family before war	Family after war
1	Parents, 5 siblings	One sibling
2	Parents, 2 siblings	All
3	Parents, 4 siblings	Two siblings
4	Grandparents, parents	Parents
5	Parents, 5 siblings	None
6	Parents, 5 siblings	Two siblings
7	Parents, 1 sibling	One sibling
8	Parents, 3 siblings	One sibling
9	Grandmother, Parents, sister	Mother, sister
10	Parents	None
11	Parents, 5 siblings	Three siblings
12	Grandparents, Parents	Grandmother
13	Mother, 3 siblings	Two siblings
14	Parents, 3 siblings	One sibling
15	Grandparents, Parents	None
16	Parents, 7 siblings	One sibling
17	7 siblings	Two siblings Four siblings
18	Parents, 4 siblings	Four siblings
19	Father, 1 sibling	None
20	Mother, 6 siblings	One sibling
21	Parents, 4 siblings	Mother, 4 siblings

3.1) Children of Survivors:

The children of survivors are drawn from a limited population of children whose parents are still alive, in Cape Town, and were prepared to be interviewed. Survivors were asked whether they had children and if their children would be willing to speak with the interviewer. Eleven such children were found, six males and five females. Only three of the survivors in the sample did not have children, one had never been married (S18). Out of a possible thirty nine children (total children of the survivor sample), three refused and twenty five were unavailable to be interviewed.

3.2). Survivor Families:

The survivor families interviewed are as follows:

- 1). **Family One:** Female Ashkenazi survivor (S3) from Germany, in hiding, and her three sons age 51, 42, and 38, all born in Cape Town.
- 2). **Family Two:** Female Ashkenazi survivor (S4) from Lithuania, in hiding during the war, and her daughter, age 38 years, who was born and lives in Cape Town.
- 3). **Family Three:** Female Ashkenazi death camp survivor (S5) from Poland and her daughter of 41 years, born and living in Cape Town.
- 4). **Family Four:** Male Ashkenazi partisan (S6) born in Poland and one of his sons, age 21 years, who lives with the family.
- 5). **Family Five:** Female Sephardic survivor (S11) from Rhodes Island who experienced incarceration in death camps, and her daughter of 42 years who lives in Cape Town and was born in Zaire.
- 6). **Family Six:** Female Ashkenazi survivor (S12) from Germany, in hiding during the war, and her two daughters, 40 and 28 years respectively, and one son, 40 years, who were born and live in Cape Town.
- 7). **Family Seven:** Rhodes Island Sephardic female survivor (S13) of the death camps and her son, age 42 years, born in Zaire and currently living in Cape Town.

4). Immigrant Sample Characteristics:

The immigrant sample comprises of Jewish people who immigrated to South Africa, Zimbabwe, Zaire (or other African countries) prior to the outbreak of World War Two. Fourteen immigrants were interviewed, seven females and seven males. Three are Sephardic and eleven are Ashkenazi. This represents a relatively realistic representation of the Sephardic to Ashkenazi ratio within the total population. However, these immigrants were found by networking and as the researcher is part of the Ashkenazi community, this population was more accessible. As with the survivors, the three Sephardic Jews all came from Rhodes Island.

Table 2 depicts the characteristics of the immigrant sample and their children interviewed. In the first column the immigrant is listed. The following four columns outline the ethnic subgroup to which each immigrant belongs, where they were born, date of emigration and their country of origin. The fifth column cites the country to which immigrants migrated and date of arrival in South Africa is listed in the sixth column. The second last column outlines the number of children of each immigrant and the final column indicates those children interviewed.

I.	Sect	Born	Emigration	Origin	Immigration	S.A.	No. of Children	Children Interviewed
1	A	1912	1930	Lithuania	S.A.	1930	3F 1M	1F 1M
2	A	1926	1938	Poland	S.A.	1938	1F 1M	No
3	S	1916	1938	Rhodes	Za	1960	1F 2M	1F 1M
4	S	1922	1938	Rhodes	Zim/Za	1977	1F 1M	No
5	A	1930	1936	Germany	S.A.	1936	2M	No
6	A	1930	1937	Germany	Swa	1947	3F	No
7	A	1924	1936	Lithuania	S.A.	1936	2F 1M	No
8	S	1914	1936	Rhodes	Zim	1983	No	No
9	A	1916	1936	Lithuania	S.A.	1936	1F 1M	No
10	A	1910	1920	Lithuania	S.A.	1920	2F*	2F
11	A	1924	1938	Germany	Zim	1956	1F 2M	1F 1M
12	A	1908	1936	Germany	S.A.	1936	3M	No
13	A	1926	1932	Lithuania	S.A.	1932	2F 2M	1F
14	A	1924	1936	Poland	S.A.	1936	2M	1M

KEY

I. - Immigrant

Za. - Zaire

M. - Male

A. - Ashkenazi

Zim. - Zimbabwe

F. - Female

S. - Sephardic

Swa. - Swaziland

4.1) Children of Immigrants:

As with the second generation survivor sample, the sample of children of immigrants was derived after interviewing parents. The criteria for this sample was that they had been born after the immigration process, were currently residing in Cape Town, and that their parents had been interviewed. Parents were asked whether they had children and if their children would be willing to be interviewed. All immigrants had been or were married and only one immigrant did not have children. Out of a potential thirty five children, two refused and

twenty three were unavailable to be interviewed. The sample of second generation immigrants consists of ten children, five males and five females.

4.2). Immigrant Families:

Immigrant families interviewed consist of the following:

- 1). **Family One:** Female Ashkenazi immigrant (I1) from Lithuania, and her daughter, 50 years of age, and son, 56 years old, both born and residing in Cape Town.
- 2). **Family Two:** Female Sephardic immigrant (I3) born in Rhodes Island, and her daughter, age 50 years and son, age 37 years, both born in Zaire and living in Cape Town.
- 3). **Family Three:** Lithuanian Ashkenazi male immigrant (I10) and his two daughters, 52 years and 48 years respectively, born and residing in Cape Town.
- 4). **Family Four:** Ashkenazi female immigrant (I11) from Germany and her son and daughter, 48 and 46 years, born and residing in Cape Town.
- 5). **Family Five:** Male Ashkenazi immigrant (I13) from Lithuania and his daughter of 31 years who lives and was born in Cape Town.
- 6). **Family Six:** Female Ashkenazi immigrant (I14) from Poland and her son, 44 years of age, born and residing in Cape Town.

5). Establishing the Methodological Strategy:

The question of choosing a particular methodological strategy is largely a circular one, as defining the means to derive information in relation to an area under study is primarily a function of the type of information one aims to obtain. In assessing the benefits of adopting a specific strategy, the aim of the research must be combined with the nature of the subjects and subject matter (Mouton and Marais, 1990). The qualitative-quantitative distinction represents the most major categorization of forms of research. Kirk and Miller (1986:9) distinguish between the two in the following manner: "Technically a 'qualitative observation' identifies the presence or absence of something, in contrast to 'quantitative observation', which involves measuring the degree to which some feature is present." If the aim of the research is the descriptive understanding of a phenomenon, as opposed to the measurement of the occurrence of a phenomena, the research strategy adopted is qualitative.

5.1) Defining Qualitative Research:

The study of the intrafamilial dynamics of Holocaust survivors demands a qualitative approach in terms of presenting a description of the characteristics of and processes occurring within survivor families. The emphasis is not on defining and measuring patterns, but rather on understanding and describing a process. This is especially so, as there is no means to determine either causation or correlation in the case of an event which is (a). past

(b). confounded with the total life history of the individual and (c). where the children are born after termination of the event.

The sensitive nature of the material being assessed also warrants the use qualitative procedures. In order to elicit such material the researcher needs to establish rapport with the interviewee. The qualitative design also provides a means to promote a full understanding of the area under study by situating people in their environments (Mouton and Marais, 1990). This, in accordance with point (b) cited above, is a necessary requirement of the descriptive study of intra and interfamilial processes in a traumatized population.

Qualitative information is the acquisition of verbal (and non verbal) information about the event or experiences which the researcher wishes to understand and describe. Raw data is transformed through analysis which requires inferences. According to Mostyn (1985) the inferences involved in the analysis of qualitative data are essentially similar to the common, everyday activity of making inferences from what we hear or read. Hence the experience of assessing this type of information is essentially part of the normal repertoire of human skills and behaviour. A further benefit of qualitative data is that there is room for exploration of the topic by both participants. This allows for the collection of a range of descriptive data, while the flexibility of the research procedure provides the means for the collection of complex and rich data regarding different topics (Miles and Huberman, 1984). The major weakness of this technique is the lack of control which the researcher has over the data generated. Thus there is ample opportunity for bias in data collection and analysis to occur. This impacts on the validity and reliability of the research, as will be discussed in relation to specific forms of qualitative methodology (Brown and Sime, 1981; Brenner et al 1985; Lolas, 1986; Morgan, 1988).

Qualitative analysis involves not only inference, but also interpretation. The information obtained is seen to reflect phenomenon encoded in overt and covert messages contained in non verbal and verbal information. Hence the information collected must be analysed in terms of its apparent and symbolic content in order to discover or describe the phenomenon and its interrelation with other phenomenon. Mostyn (1985:118) explains this in relation to the specific procedure of content analysis

"The purpose of content analysis of open-ended material is to understand the meaning of communication; that is, both its manifest and latent meaning within the context of the respondents own frame of reference; for example, phenomenologically how does he/she experience it?"

5.2) Forms of Qualitative Research: The Interview:

Once the qualitative option has been adopted, determining the strategy within this framework also depends on the nature of subjects, subject matter, number of subjects, and amount of information obtained. In relation to this research, individual indepth and open ended interviews appears the most beneficial method to obtain the necessary accounts from the focal samples.

Interviews vary along a range of dimensions which consists of (a). the scale of the interview, i.e. whether it is long or short and the number of subjects involved (b). the scope; whether the content of the interview is related to broad or focused areas (c). the time, which refers to the duration of the interview and the time period being assessed (d). the interpretive schemes used to analyse the data and (e). the format of the interview, whether it is open or closed (Brenner, Brown and Canter, 1985). All of these dimensions will be addressed in the section which deals with the methodology and procedures of the current research.

These authors define the interview situation as involving the interaction of two or more people for the purposes of one individual gaining information from another. The interview consists of three basic components, informants, interviewers and information, while the setting of the interview also influences the interview process and information obtained (Brenner et al, 1985).

"[T]he reporting of information is, however, necessarily and inevitably embedded in a social situation, the interview, with its own peculiar social psychological organization. Thus, we can never assume that the accounts given are simply answers to questions; they are the joint product of the questions as perceived by informants and the social situation circumstance within which the questions were put to them." (Brenner, 1985:151).

He further argues that as a result of this, bias may occur at numerous levels within the interview.

"... [T]hey are pictures that are 'blurred' by the gatekeeping and distorting influences of informants' cognitions of their experience, which is further modified by the effects of interviewer-respondent interaction within the totality of the interview situation." (p.154).

Brenner notes that there are three possible strategies to attempt to control for any biases inherent in this situation: (1). the accounts given can be compared against verification data. (2). assessing the accounts for any noticeable undesirable influences within the interview

situation (3). adopting a cognitive approach to assess the individual's cognitive and motivational states during the interview. However he outlines numerous problems involved with the utilization of any one of these bias detecting techniques.

Verification data may not be free from errors itself. Furthermore it is impossible to provide such data for emotional experiences and personal judgments. Verification data is also very difficult to come by, however according to Brown and Sime (in Brenner, 1985), one means of verifying data is to compare the accounts from different individuals to see if they correlate. Bias within the interview may also be difficult to detect, as the possible sources are numerous. Personal characteristics of the interviewer e.g. race, age, religion and sex, and interviewing style are potential areas of bias, while the motivational state of the informant may impact on the information obtained. The nature of both the topic and the questions also influence the interview situation. Ambiguous or leading questions may lead to bias. Discussing sensitive and personal material may deter informants from answering truthfully or accurately, while many non verbal cues may provide signs for the informant as to the 'right' answer. The latter two points are related to the issue of social desirability, that is attempting to respond in a manner that confirms socially desirable behaviours (Gorden, 1975; Brenner, 1981; 1985).

The means to avoid some of these problems is to structure the questions clearly and in a non-leading manner. The stance adopted by the interviewer should be neutral, avoiding the expression of personal opinion, non-argumentative and supportive, in order to provide a non-judgmental forum for informants to express themselves honestly. This will allow the interview process to meet the two requirements specified by Brenner; that the accounting process is not biased, and an effective social interaction between the interviewer and informant is ensured in order to aid in adequate reporting of information.

5.3). The Life Story:

Understanding the current functioning of immigrant and survivor families involves a detailed assessment of their respective life histories. Life story interviews possess unique attributes compared to other forms of interviews. The life story typically covers a sequence of events which may be interrelated, in their occurrence and their effects, across the history of the individual. Hence life stories provide a rich, but complicated data source (Tagg, 1985). The life story, being retrospective, is reconstructed by the individual in relation to their current situation and functioning. This represents the major source of bias inherent this technique.

Brown and Sime (1981) distinguish three processes of summarizing and interpreting life stories (1). a qualitative quoting of data (2). description of the processes and events in order to aid in the development of theories (3). content analysis or indexing of data. Due to the

complexity of life stories it is difficult to define one process of analyzing data. The researcher might focus on the order of events in terms of a chronological sequence so as to draw them into some consistency. Although there are limitations to this approach, it is often utilized in the assessment of life stories, as it groups events into relatively self contained accounts. Tagg does, however, point out that there are likely to be other relationships which fall across a time sequence analysis, for example actors, themes and places.

A second means of analysis is concentrating on the major themes which occur in the accounts, this is termed themal analysis. Depending on the nature of the information obtained, themal analysis may provide the most coherent means to analyse qualitative data. This is especially so in the case of life stories and unstructured interviews, as the respondent is free to engage in numerous issues and the researcher may have more information than she or he is able to discuss in detail. Covering too many topics in too much depth will only lead to confusion and obscure the important discoveries (Morgan, 1988; Potter and Mulkay, 1985). Furthermore, Miles and Huberman (1984) point out that finding patterns is an easy and relatively natural process for researchers. However they note that this may be one of the pitfalls of themal analysis, as there must always be real evidence of the existence of these patterns, and the researcher must be open to evidence which disagrees with selected themes.

Tagg outlines the main sources of bias in obtaining life histories. The first issue is memory, which involves salience and encoding (on the presumption that the more salient the event, the better it will be encoded), and intervening similar events, that is distinguishing between features specific to one particular event may be difficult for the respondent. Baddeley (1979) suggests that confusion and forgetting will be maximal when details are requested of event which is very similar to others. Tagg notes that although particularly salient events are more likely to be remembered, constant rehearsal on salient events may distort the memory of the event. Secondly, within the interviewing process itself there are demand characteristics, while the manner in which questions are asked and the methods of recording are also potential elements of bias. The final issue involves the reconstruction of past events in terms of the narrative style, the cognitive load and the present constructive system of the individual. To this, of course, must be added all the potential bias sources discussed earlier.

Aside from the pitfalls, especially in relation to validity and reliability, qualitative data provides the means to obtain rich accounts of phenomenon in order to aid in understanding and describing that phenomenon. Given the topic under study, the nature of the population and the sensitivity of the material to be elicited, the qualitative approach of indepth individual interviews was determined to be the most useful research strategy.

6). Procedure:

A standard letter was mailed to the survivor population. This letter contained a brief outline of the focus of the research and explained that the study aimed to interview survivors and their children. Following this, all survivors were contacted telephonically and asked whether they would participate. Any refusal to be interviewed was not queried. Survivors were asked whether they have children residing in Cape Town, and if these children would be willing to be interviewed. Parents' generally informed their children of the research prior to the interviewer contacting them. If parents' had discussed the content of their interview with their child, this may have presented a source of bias. In order to attempt to control for this, a question was included in the children's interview regarding whether their parents' had discussed their interview with them. Children generally reported their parents' only informed them of the nature of the research and that they would be contacted.

Immigrants were not sent a letter, but only contacted telephonically and the research was explained. Refusals were largely due to the individuals not having the time to be interviewed. As with survivors, immigrant parents were asked whether they have children in Cape Town. In general parents did not inform the children of the research before they were contacted by the interviewer.

Holocaust survivors were interviewed for an average of three hours. Interviews with children of survivors lasted approximately one and a half to two hours. Immigrant interviews were between one and two hours, while interviews with their children lasted an hour on average. Interviews with Sephardic survivors were more difficult to conduct (as well as to analyse) as of the six, four were not fluent in English. The interviews were carried out over a four month period.

Hindley (1979) outlines several forms of retrospective data which may be obtained through interviewing, these being (1). information regarding clear cut events (2). information regarding past behaviour of self or others and (3). information regarding past feelings, beliefs and attitudes. The collection of all three forms of data was essential to this study. For example, the first form of data refers to obtaining information regarding specific Holocaust or immigratory events, the second to specific parenting behaviour or behaviour during the Holocaust or immigration; and the third relates to the individuals beliefs and feelings regarding these events or behaviours.

Specific areas were focused on in the interview in order to obtain information relevant to the research questions. Interviews with survivors and children were constructed to address all six points outlined by Prince (1980) as relevant in the assessment of survivor families. Questions were asked in an informal and open ended manner. With regard to survivors, questions

generally followed a chronological time sequence. For example the interview opened with the question "Tell me about your life before the war, where you were born and about your family". In accordance with the point raised by Kahana et al (1989) interviews covered a broad time span, including the following focal areas pre-war experience and family life (b). Holocaust experiences (c). immediate post-war experiences (d). immigration and adaption (e). long term adaption and coping (f). post-war family relations. Specific questions were then asked in relation to issues which the subject raised or details they had omitted.

The interviews with children of survivors focused primarily on their relationship with their parents in terms of parenting behaviour and communication of parents regarding their Holocaust experience. Questions were based on a modified version of a questionnaire constructed by Hass (1990) which included inquiry as to: how children felt about their parents; how they felt about the past trauma experienced by their parents; how much they knew about their parents past and how they became aware of this. They were also asked to describe their childhood and their perceptions regarding their family environment while growing up. The framework of McMaster Model of Family Functions is utilized as a theoretical backdrop to comment on the overall functioning of the survivor families (Epstein and Bishop, 1981). The McMaster Family Assessment Device could have been utilized to support these commentaries, however, survivors refused to complete this scale.

The immigrant interviews began with an open ended question similar to the survivors, for example "Tell me about the country that you came from and what you and your families life was like there." The focal areas for immigrants included (a). pre-immigration experiences and family life (b). immigration experiences (c). post-immigration adaption and coping (d). post-immigration family patterns and relations (e). feelings regarding the Holocaust. Parenting behaviour of immigrants was assessed in the interviews with their children, as was communication by parents about their lives in their country of origin and immigration experiences. Immigrants' children were asked similar questions to children of survivors, and their parents' experiences of immigration was substituted for the experience of trauma of survivor parents. These children were also asked to describe their childhood and their perceptions regarding their family environment while growing up. For all groups, questions were phrased in relation to points raised by respondents which required greater elaboration. Specific questions were asked of all subjects in relation to Judaism, religion and Israel. The information was recorded and transcribed.

7). Sources of Bias:

As discussed above, the indepth interview is open to numerous sources of bias. Strategies to control for bias, outlined by Brenner (1985), were difficult to adopt. The research focused on topics involving a large degree of subjectivity, for example the individual's perception of his

or her coping, adaption and parenting behaviour. Scales may have been utilized as forms of verification data. However, as argued, given the nature of the topic and subjects, indepth interviews was perceived as the best option to obtain the relevant information. This was substantiated by subjects' refusal to complete the McMaster Family Assessment Device. One area where verification data may be useful is in terms of the historical accounts of Holocaust experiences and immigration of the survivors and immigrants. However, there is no alternate data on individual immigrant history and very limited information on historical accounts of survivors. There is the option of comparing historical accounts among Sephardic survivors as their war histories were relatively homogeneous (Brown and Sime, 1981).

In an attempt to avoid bias as a function of the manner in which the interview was conducted, the interviewer adopted a non-judgmental and supportive approach to interviewing (Brenner, 1985). Leading questions were avoided where possible and broad questions were followed with the request for specific details, so as to prevent confusion. Tape recording of data aided in avoiding reconstructive bias on the part of the researcher (Brenner, 1985). One characteristic of the interviewer which undoubtedly influenced the process of the interview was her ethnic affiliation. A majority of the survivors raised this issue and became visibly more relaxed in their recollections when it was confirmed that the researcher was Jewish.

Major events in the life history of the individual are likely to provide extremely salient memories and, as Tagg (1985) has pointed out, are usually well encoded. However, exposure to extreme trauma may require the use of defense mechanisms to aid the individual in coping, hence details of that trauma may be repressed or distorted. Nemeth (1971) points out that obtaining an accurate and detailed history from the survivor may be difficult as retelling of these experiences may be threatening to both the survivor and the listener. Reconstructive bias is a particular problem in relation to this research as the event occurred over fifty years ago. Forgetting and distortion of events increases with time (Baddeley, 1979). Furthermore survival during the Holocaust was very difficult especially in the death camps and truthful reports of survival may be influenced by social desirability. Among survivors interviewed, forgetting and distortion of places, events and people was common. The basic outline of their story remained constant, but reports of the more minor details displayed inconsistencies. However, it must also be pointed out that survivors, especially those in the camps, had no knowledge of time or of dates. All subjects who were death camp survivors showed difficulty in discussing specific incidents of beating and humiliation which they experienced

8). Analysis of Data:

The data is analysed thematically which corresponds to the second strategy in analyzing life stories as outlined by Brown and Sime (1981), i.e. description of processes and events.

Ample support for use of this method is provided above (e.g. Potter and Mulkay, 1985; Morgan, 1988). The idea is to promote understanding of the designated populations through description of their characteristics and specific behavioural patterns as related to the focus of the research, e.g. accounts of patterns of interactions between survivors and their children are elicited and described. Patterns of behaviour and attitudes of survivor families are analysed in terms of whether they are similar to the four family types outlined by Danieli (1981a, 1981b, 1985, 1988). The functioning of the survivor family is also commented on using the McMaster Model of Family Functioning. As noted, attempts were made to administer the McMaster Family Assessment Device in order to substantiate these commentaries, however, the survivor sample refused to complete this scale. Findings regarding these samples are compared to previous literature and research on survivors and their families.

Accounts are also comparatively reviewed in terms of the similarities and differences in patterns existing within the survivor and immigrant groups, and between the survivor and the immigrant groups, and their children. This comparison addresses the issue of Holocaust effects being obscured with the implications of immigration and adaption. The noted difference in pre-Holocaust, Holocaust and post-Holocaust experiences of Ashkenazi and Sephardic survivors, and similarly with Ashkenazi immigrants regarding pre-immigration and post-immigration experience (as well as differences in cultural and traditional heritage), demands that these groups are also assessed comparatively. Therefore comparison groups are divided into (1). Ashkenazi versus Sephardic survivors (2). Ashkenazi versus Sephardic immigrants (3). Ashkenazi survivors versus Ashkenazi immigrants and their respective families, and (4). Sephardic survivors versus Sephardic immigrants and their respective families. Assessing the survivor family as a unit represents a departure from the large majority of prior research that has focused on either group only and encourages a more holistic understanding of the dynamics of these families by including the perception and experiences of both parties involved.

CHAPTER 5

KNOWLEDGE, AWARENESS AND PATTERNS OF INTRAFAMILIAL DYNAMICS IN SURVIVOR FAMILIES.

The research findings are presented and discussed in the following chapter. Analysis of the data focuses on assessing patterns of intrafamilial relations and behaviours in survivor families. Assessment of the intergenerational transmission of effects is conducted through interview material in which both the parents and their children discussed their child rearing process. The major areas which are addressed relate to (1). whether families display the specific patterns of functioning outlined in the literature and (2). how families function in relation to Danieli's four characteristic patterns of the survivor family and with regard to the dimensions of the McMaster Family Model. The intergenerational transmission of knowledge is addressed first through the assessment of (1). Holocaust communication within families and (2). children's level awareness of their parents' Holocaust experience.

The findings suggest that in there are no clear cut implications of the Holocaust which influences survivor family patterns so that they are differentiated from the immigrant sample. There is in fact considerable interfamily variation in both groups. This suggests that neither the Holocaust nor immigration per se are sufficient causes in themselves of the patterns observed, or that both variables have differential effects depending on a range of other variables.

Families were not observed as a unit, nor did they complete the McMaster Family Assessment Device. Therefore comments in relation to the following discussions are based on the subject's perceptions of intrafamilial communication and family functioning. As no standardized measure of family functioning could be utilized, it must be noted that subjective reports from subjects may not adequately reflect the intrafamilial processes occurring within survivor families. Responses to questions may also be influenced very much by social desirability and by the numerous other sources of bias outlined in chapter 4. Therefore caution is warranted in interpreting and understanding findings based on subjective reports. Some means of corroboration is obtained by comparing the reports of parents and children regarding these issues. Reports of feelings and experiences by children refer to the period of their childhood, unless otherwise stated.

1). Transmission of Holocaust Knowledge:

Holocaust communication between parents and children is one of the means whereby knowledge of parents' past is transmitted. Transmission of knowledge may also lead to

transmission of effects, depending on the form and content of this communication (Mor, 1990). According to the literature both minimal and excessive communication have their drawbacks. Constant communication about the past by the parent may be overwhelming to the child, while little communication may lead the child to construct shameful fantasies around parental survival (Davidson, 1980a, Porter, 1981; Perel and Saul, 1989; Charney, 1990). Communication is also a key dimension listed in the McMaster Model of Family Functioning. According to this framework clear and direct communication is the most effective in terms of family functioning (Epstein and Bishop, 1981). Current literature points out that the type of communication may be more relevant than the quantity (Lichtman, 1984).

On the whole, subjects' reported that communication about Holocaust experiences between both Ashkenazi and Sephardic survivors and their children was very limited. In only two cases did survivors recount their whole Holocaust story to their children. Children appear to have learnt about the Holocaust through numerous other sources, for example from the other parent or from written accounts. Survivor parents tended to relate small incidents of their experiences, these being triggered in relation to current events. Aside for one child, all have only learnt more about the history of their parents recently, and it appears that with time parents are more willing to discuss their experiences. This agrees with the point raised by Kahana (1989) that old age may be accompanied by a realization of the need to bear witness and hence increased willingness to talk about Holocaust experiences.

A). Attitudes Towards Lack of Communication:

Patterns of communication within these families resembles that of "protective silence" (Mor, 1990). The reported absence of communication appears to indicate the existence of Holocaust effects. From children's reports and perceptions, it seems that they are able to cope adaptively with this Holocaust silence. This finding disagrees with Davidson's (1980a) argument that in families where little Holocaust communication occurs, the children are more likely to suffer severe psychological problems. The majority of these children attribute little intrafamilial Holocaust communication to an interaction of their own and their parents' feelings. Seven children feel that lack of communication is a product of both parents' unwillingness to talk and their difficulty in listening. This is illustrated in the following statement by a Sephardic child:

"But I never had the courage to ask her, I don't know why, but maybe I don't want to face the idea or maybe I don't want to face the reality of what happened, and yet I know it, I read that and I know what they went through and I never asked her did they do that or this and how did you survive."

However, this "collaboration" between parents and children in maintaining silence about the Holocaust is not reported to result in the negative consequences outlined by Krell (1979). The silence regarding the Holocaust is tacitly "negotiated" within the family arena, as is illustrated in the children's attribution for limited Holocaust communication to both themselves and their parents. The form that this "negotiation" takes is reported to lead to acceptance and understanding of parental silence by children. Based on these perceptions of the children, it appears that the presence of some intrafamilial effects related to parental experience does not necessarily imply negative outcomes in children. Effects and their impact do not occur in a simple linear fashion, but rather the adaptive processes and resilience of children is evident in the way in which these effects are negotiated.

Understanding and negotiation of this silence may also take other forms. Four children believe that their parents feel a need to protect them from the horror of their past. However they also feel that their parents should give them credit for being able to hear about their experiences (An example of this is cited below in the case study discussion of family two). Lack of Holocaust communication is reported by five children to undermine their sense of family history. A third child felt frustrated and angry that her mother would not speak to her about the Holocaust and yet had been interviewed regarding her life story. The bitterness and feelings of exclusion experienced by this child is illustrated in the following statement:

"She broached the subject a few weeks ago and said to me would you like to hear about the Holocaust, and I said to her I have been wanting to hear about the Holocaust for the last twenty five years and you would never tell me, and now that you are prepared to tell me, I don't even know if I want to hear any more."

Currently she is still not willing to hear her mother's story. Only one child states the lack of communication stemmed from an overall negative relationship with her mother. In this instance the relationship between child and mother was not conducive to any form of open communication. However the reports from all the other children appear to indicate that little communication of Holocaust experiences between children and parents did not imply that communication between the two was lacking in other areas.

B). Sephardic and Ashkenazi Communication:

As a result of the insular nature of the Sephardic community, its relatively homogeneous population, and the numerous survivors which comprise this population, it could be assumed that Sephardic children's Holocaust knowledge will be greater. The Holocaust story is tightly interwoven in the experiences of this community. For example, one child reports that he learnt about the Holocaust through overhearing his mother's and her friend's

conversations. However, while awareness of the Holocaust may be greater, it does not appear to imply that communication between parents and children occurs with increased frequency compared to the Ashkenazi community, as all of the Sephardic children report little Holocaust communication between themselves and their parents.

C). Implications of Minimal Communication:

Although previous studies have found that open communication has less of a negative consequence than a lack of communication (e.g. Lichtman 1984), based on the reports of the children, findings from this study tend to suggest that limited Holocaust communication may not always result in negative consequences for the child. This appears to be largely dependent on the child's ability to cope with this Holocaust silence and the way in which this is understood and negotiated within families.

A discussion of the perceptions and feelings of children from two families regarding intrafamilial Holocaust communication is presented. Contained within these reports are issues related to parental communication which are common across families.

i). Family one:

This family consists of a survivor parent, Mrs. T. and her three sons, P. M. and D. aged 51, 42 and 38 years respectively. Mrs. T. was born in Germany had experienced hiding and forced evacuation. She came to South Africa in 1940. Her twin, younger siblings and parents were killed in the death camps.. She had two remaining elder siblings who had previously emigrated to South Africa.

All three sons felt that when they were young, there was very little direct Holocaust communication between them and their mother. Thus this family pattern regarding Holocaust communication also appears characterized by protective silence (Mor, 1990).

As D. reports:

"She used to speak very little about them [her experiences] at first. I think she tried to hide a lot of it, she very seldom spoke German... So the first time that my mother really opened up was with the East and West Germany amalgamating. I think with us gaining property in Germany, that she discussed things with the family."

The three children show similar understandings of this lack of communication. D. feels that their mother tried to keep her traumatic past secret in order to protect them, while P. believes that it was due to the dual process of him not wishing to ask and his mother not volunteering to speak.

"Well, that was almost like a closed book . She never really discussed it and I somehow never questioned it at all... I almost got the feeling that she did not want to talk about it, so I didn't ask her or question her about it."

Although Holocaust communication between Mrs. T. and her children appears limited, her sons do not report any of the negative effects which the literature suggests may be associated with this. For example, these children do not mention constructing shameful fantasies around their mother's survival nor questioning her morality in surviving (Porter, 1981; Perel and Saul, 1989).

The children do report an awareness of the early history and family life of their mother before the war, however until recently the Holocaust issue remained hidden:

"Yes, she used to speak quite often about being chauffeur driven here and there, and about having lots of property in those days. But she did not speak about the Nazi side of it, just very little, about the property and about the fact that they lost it all, but very seldom about the Nazi issue."

Thus the Holocaust past of their mother represents a gap in the continuity between past and present and may undermine the sense of personal and family history of these children. All three sons presently report experiencing feelings of personal loss in not knowing about their mother's past. They believe that it is important that the past is openly discussed as it provides them with a greater sense of their own history. This need to understand their family history is reflected in M.'s desire to go to Germany:

"...I would like to know about our family history. In fact I would like to go to Germany and see my mom's house and all the places that we have spoken about, which I am hoping to do next year."

These children also report that their mother's descriptions of her experiences appear unreal and are incomprehensible to them. M. feels sad when his mother discusses her lost family and twin, however to him they are just names. D. similarly states that as he never knew his lost relatives, he can only feel sorry for his mother's losses. This inability to empathize with their mother appears to trouble the children.

The children report that they do not avoid discussing the Holocaust, although it may be difficult and painful to do so. Currently all parties within this family are more receptive to Holocaust communication and there is a greater knowledge of their mother's Holocaust past. Mrs. T. also reports that she spoke very little to her children when they were young,

however, now she feels able to communicate more freely. This, she believes, is a product of numerous factors, the most relevant being, her increased resolution of her past, coupled with the recognition that her children want and need to know more about her experiences.

ii). Family Two:

This family consists of a survivor mother, Mrs. H. and her daughter, S. aged 38 years. Mrs. H. experienced ghettoization and then hiding during the last two years of the war. She was an only child. Her parents also survived the war in hiding. Mrs. H. lost most of her extended family and her grandparents. She came to South Africa in 1949.

S. also reports that her mother did not really communicate with her about the Holocaust, but would allude to her experiences in passing. So there was an awareness that her mother had experienced a traumatic event in her past. S. appears to understand this lack of communication as a pattern of adaptive defensive behaviour on the part of her mother:

"I always got the feeling with my mother that she said as much as she wanted to say and it was not for anyone to really probe. She never dwells on it, I mean she never dwelt on it then, and she never dwells on it now. In fact she was saying to me the other day that she was invited to come to some sort of survivors' meeting and she just sees no point in it whatsoever."

Perel and Saul (1989) argue that if the Holocaust past of the parent is referred to elusively, this may result in the child feeling confused and bewildered. However, S. reports that she never felt overwhelmed by the allusions which her mother made to the Holocaust.

"It never bothered me, she never told it in such a way that it would, she just told us a tale, something she had experienced, an episode in her life..."

Reporting of Holocaust experiences as "tales" may be less threatening for both the parent and the child. This may also represent another defensive reaction adopted by Mrs. H., whereby she is able to distance herself from her memories and avoid recollecting the horrors of her experiences. S. initially states that she understands her mother's lack of communication, as she acknowledges that people need to repress painful memories in order to cope. She feels that her mother must behave in a way which helps her to cope best. However S. also displays some very negative feelings towards her mother's silence:

"...I would rather she spoke about it, it is very difficult to understand a situation and handle a situation when you don't really know what that situation is that you are understanding. So I wish she would be less protective of me, because I am still convinced that to some

extent she is protecting herself and protecting me. I wish she wouldn't do that, that she would just think that she has been through it and she has survived it, I can listen to it. I am a grown person and I can handle it, and that she would stop playing the.. game of being a Mommy and protecting certain people and that she would just sit down and talk about it"

The children of both families report little Holocaust communication during their youth, while currently more communication occurs. All children state that their survivor parent would describe or allude to some past events, this increased awareness of the Holocaust past of the parent. From the reports of these children it appears that they display adaptive patterns in coping with and negotiating the Holocaust silence within their families. Although, all four children would appreciate having more insight into their parents past, and do not avoid hearing about their parent's experiences. It appears that currently these families have reached a level where Holocaust communication is more freely and openly conducted, although not without difficulty and restrictions.

2). Holocaust Awareness:

All children in the sample report varying degrees of awareness of their parents' Holocaust past a young age. Although verbal communication among parents and their children is minimal, Holocaust awareness is communicated to children through numerous other means. Establishing the awareness of children as to the Holocaust past of their parent highlights the means whereby transmission of knowledge occurs. Awareness of children of their parents' past trauma, also may illustrate the existence of Holocaust effects within families. The major sources noted by children as generating awareness of the past of the parent include:

A). Lack of Extended Families:

Children knew about lost relatives, and four subjects state that photographs of members of their family who died in the Holocaust were prominently displayed in their homes. Six children report feelings of a personal loss at never having grandparents. This also created awareness of the losses their families had experienced, as the following example illustrates:

"I think the first time I knew that we were different was when a very good friend of mine, her grandmother came from Turkey to visit her, could have been when we were about nine years old, and she knitted for my friend a shawl and it was only then that I realized that I didn't have grandparents." "The word envious is not the right word. I just felt why me, I wanted a Granny. In those days a Granny was the real thing, you know with a little bun...

it is the most beautiful picture, and I used to go and visit and there were always story times, and I used to think that I wish I was in her place, I wish I also had a Granny."

B). Patterns of Parental Behaviour:

Children also report behaviour of survivor parents' which created awareness as to the trauma in their parent's past. For example, one child experienced the following feelings in relation to a specific pattern of behaviour displayed by her mother, who used to stand in the garden and meditate for long periods.

"I used to get irritated by it, because I could not make sense of it. You know if it took a form that I would have identified with, like lighting some incense, sitting cross legged and calling that meditation, then that would have been different."

One child remembered an incident when a man recognised his mother as being a survivor. She recalls this upset her mother terribly. This child also reports that when the family applied for German citizenship, her mother showed tremendous conflict in going to the German consulate. Five children mention that their parents could not view anything related to the Holocaust on television. Another subject reports that his first awareness of his mother's concentration camp past was promoted by viewing a specific Holocaust related symbol; the number on his mother's arm. His memory of this incident, he feels, is very vividly encoded, which illustrates the impact of this experience of early awareness.

"...the first time I heard of concentration camp I was extremely young, I couldn't even read or write, but I remember, and that is really in my memory, that I was sitting on the armrest of an armchair, and then I saw her arm, and I asked 'why you have the number there?' She told me it was a telephone number in Rhodes Island, and then I didn't understand very much and I didn't ask many questions. But then I recall again myself writing my telephone number on my arm and getting punished by my Hebrew teacher saying to us that was a sin to write [on the skin]. And from there the questions came and that's where I heard for the first time concentration camp and that's where I became aware of it."

C). Effects of Awareness:

For all children there was an awareness of the Holocaust in their family, either through parental communication or behaviour, lack of extended family, or Holocaust related symbols. However, this awareness is not reported to be either constant or overwhelming. Children knew that something terrible had happened to their parents, but they do not perceive that the focus of the family revolved around the Holocaust past of the parent. Seven children report that they do not think about their parents' Holocaust experiences often. Four of these mention that the Holocaust is only brought into awareness when

discussed with their parents'. Even two children, who state that thoughts related to the Holocaust past of their parent are prominent for them, feel that this does not have an extensive influence on their daily functioning.

"I think that it is continually on my mind, but there are no permanent problems with it, I cope with the situation and with what happened, it is just that I will never forget what happened and what they went through, it will always be with me."

Currently children's awareness has been transformed to a greater degree into knowledge, because of increased communication between parents and children. Although Holocaust thoughts related to their parents' experience feature in the consciousness of the second generation, for most subjects these do not appear to be at all overwhelming. In reports of all but one family, awareness of the Holocaust was not continually enforced in the structure and dynamic of the families.

3). Influence of Survival on Intrafamilial Dynamics: Parents' Perspectives:

The following section outlines parents' perspectives regarding their child rearing practices and perceptions of the influence of their Holocaust experience within their family. Parents do not believe that they experienced tremendous difficulties relating to and raising their children. In general, they describe relatively minor patterns of behaviour and attitudes which they feel are related to their Holocaust experience and may have influenced their family functioning in small ways.

Reports from survivors suggests that the negative circumstances surrounding the marital relations of survivors as outlined in the literature, does not appear to exist. Seven of the twenty married survivors, married very quickly after the war. Contrary to the marital relations described by Perel and Saul (1989) and Davidson, (1980a), all aside for two survivors described themselves as sharing loving and positive relationships with their spouses. Ten of the eleven children report the relationships between their parents to be warm and caring.

A). Attitudes Towards Children:

All survivors describe themselves as very close to their children. The following statement illustrates how having children may have aided survivors in overcoming their experience of trauma.

"For me, I didn't have children. I put my heart for all my life what they do to me... and it is very sad everything what happened, I am very sad."

Survivors did not report that any of their children were named for lost relatives, as has been found in previous literature (Freyberg, 1980). This impediment to the development of autonomy of the child does not appear to exist within these survivor families. These survivors also report feeling adequately oriented to and focused on the present and aside from two, they do not appear to be fixated in the past (Mor, 1990). Based on the reports of survivor parents, it appears that they do not display constricted emotional investment in children as a result of being bound up in their past, and therefore children may not experience the feelings outlined by Mor, of commitment to a past heritage and culture.

B). Patterns of Parental Behaviours and Attitudes:

One theme which is mentioned by nine subjects, is that they perceived themselves to be protective over their children. This protectiveness may be viewed in the following example:

"My first son-in-law came to see me and I had a good chat with him and I told him if he had no intention of marrying or staying with her, he must go. The other one also came to me and asked for her hand. You don't see it today."

Over-protective behaviour of survivors towards their children is noted as a common pattern in the literature, which suggests that this leads to problems in children's resolution of separation-individuation (Freyberg, 1980, 1989). No evidence of this was found among reports from the parents. Parents believe that children have developed as completely independent individuals, and no subject feels that their relationship with their child is excessively close or enmeshed. Additionally, all subjects, but one, (and except where children were too young) report that their children had successfully negotiated moving out of their parents' home and started lives and families of their own. Based on parents' reports, it appears that they are able to cope effectively with affective problem solving, even in relation to the developmental task category.

Four survivors feel that the second generation experience problems related to their Holocaust experiences, as the following examples illustrate:

"...it is not only the parents that have got problems, but the children have got problems from the survivors. I don't know. It is maybe the environment of the survivors that brought in the problems to the children."

"Because I am neurotic obviously it influences my children. Even my child said they were scared about things because I was scared. Being scared of the light in your room is

abnormal. Being scared if someone rings as your door, that is not normal... If you are insecure your children feel insecure as well. Even if you know it and you are aware of it, it is there, you can't take it away."

There are small ways in which survivors noted that their experiences influenced their parenting behaviour. However, based on survivors reports, it does not appear that these relatively minor occurrences relate to some broader pattern of Holocaust influence within the family. One, survivor notes that he stresses to his children the importance of having the correct legal papers, as his German passport saved his life. Three survivors report that they taught their children not to hate Germans, and one subject stated that he did not allow his children to use the word hate. Another four subjects feel that they tried to create a very stable environment for their children, which was related to their experience of extreme instability in childhood. Four survivors report not spoiling their children materially, as they wanted their children to understand that material possessions are transient.

These attitudes and behaviours of parents' are likely to promote Holocaust awareness in their children. However, reports from survivor parents suggest that the occurrence of Holocaust related influences within the family may not be pervasive enough to lead to the transmission of patterns of negative Holocaust effects. In general, these parents imply that there are only small ways in which their children have been made aware of their Holocaust background. However it is important to note that children may experience covert Holocaust messages and be influenced in subtle ways, over which parents have little control. This is illustrated in the following statement:

"My daughter married a Cohen, then she says to me 'Mummy what about my husband is a Cohen... if something happens, how can I hide it?' And I say 'No you don't need, please God'. It's true the name they know you are Jewish."

One of the major differences between this sample and reports in the literature, is that aside from one subject who viewed her aim in life as bearing witness to the Holocaust, no survivors appear to be totally immersed in their past trauma (Sigal and Rakoff, 1971). Ten survivors even report that focusing on their present life helped them to cope after the Holocaust. Parents reported that they tended to devote much time to other endeavours including rearing their children, while similarly, their lives did not revolve around the latter practice. Therefore, subjects' perceptions regarding their parenting behaviour, suggests that it is relatively well balanced in terms of time and resources available to children.

The reports of these survivors imply that their functioning on the dimensions of affective involvement is effective. Parents' do not perceive themselves to be emotionally depleted by their Holocaust experience, and suggest, rather that they are able to invest resources and energy into raising their children. Nor do parents believe that they are over-involved with their children as a result of their Holocaust experiences. Therefore, based on these findings, it does not appear that parents display patterns of either narcissistic involvement or involvement devoid of feeling. Similarly in the case of all but one family, there does not appear to be an absence of involvement on the part of survivor parents.

C). Sephardic and Ashkenazi Survivors:

The reports of Sephardic survivors suggest that they may be more protective over their children than the Ashkenazi survivors. All the Sephardic survivors experienced incarceration in death camps and this could be one explanation for the different findings between Ashkenazi and Sephardic survivors. This more protective behaviour displayed by Sephardic survivors toward their children may also be related to their having to resettle fairly recently in South Africa. Usually the Sephardic children left Zaire before their parents, and were often sent to Zimbabwe or South Africa to be educated. Therefore the children had a knowledge of English and had established themselves socially and even financially in their new country. The older generation of Sephardic Jews were often reliant on their children in the new country. Of the six Sephardic subjects, four do not speak English well, and the same four came as refugees from Zaire to South Africa. Three of these subjects report being dependent on their children on arrival in South Africa. Thus, this pattern of over-protectiveness among Sephardic survivor parents' may not only be related to their Holocaust experience, but may also be a product of numerous migrations; the final one in old age and as refugees.

Perspectives of parent survivors suggest that while there is some impact of the Holocaust on family functioning, this is not extremely undermining to the child's long term development. In general the reports of survivor parents appear to indicate that they were able to provide stable and loving environments for their children. Survivors' perceptions suggest that the influence of the Holocaust on the functioning of their families takes subtle forms, and the outcome on child rearing behaviour and related effects in the second generation is not as severe as reported in the literature. From parents' reports, it also appears the much interfamily variation exists and therefore families do not seem to display the generalized patterns outlined by Danieli (1981a, 1981b, 1985, 1988) In order to verify these conclusions, children's reports and perceptions must also be addressed.

4). Intrafamilial Dynamics: The Children's Perspective:

A). The influence of the Holocaust:

In general children's reports suggest that they do not view the Holocaust past of their parents as representing a major influence on their family functioning. Only one child experienced a highly turbulent and conflictual relationship with her mother, which she attributes to her mother's Holocaust past. Ten children perceive the impact of their parents' Holocaust experience within the family dynamics as minimal. The predominant view of these subjects is that influences in their upbringing are many and varied, and that the child rearing practices adopted by their parents are shaped by numerous forces, the Holocaust being only one of these.

Four children believe that their survivor parents' raised them in a manner similar to their own pre-war upbringing. Hence, in these cases, upbringing is perceived of more as a product of the survivor parents' childhood experiences than as related to their Holocaust experience. Six survivors also reported that they based their child rearing practices on the manner in which they were raised.

B). Nature of the Holocaust Dynamic:

The survivors' children point to particular manifestations of the Holocaust dynamic within their families. However the occurrence of these influences is reported to be present in relatively minor patterns of behaviour or ideals of the parents, as opposed to being embodied in parents' child rearing practices. This was also found in the reports of parents. The major issues which children highlight relate largely to specific parental attitudes.

(a). Lack of Materialism:

Six children report that material possessions were not important to their parents, and two of these note that their survivor parent specifically attempted to live in a non materialistic fashion. This pattern disagrees with finding by Rosenberger (1973) and Davidson (1980a), that survivor parents' may be constricted in investing emotionally in the child and hence compensate materially. For one subject a lack of emphasis on material possessions coupled with a focus on "that which cannot be taken away from you" was the only Holocaust related influence in her family that she could pinpoint:

"The only conscious thing is her lack of materialism, that's something she did often allude... she spoke about often, saying 'don't chase material things, because you lose them overnight, and the things you can't lose overnight are your values and your education, those are the important things.'"

(b). Emphasis on Close Family Bonds:

Nine children report that their parents' emphasized the importance of close bonds among family members. However that they do not attribute this solely to the Holocaust past of the parent is illustrated in the following quotation:

"...[the] family unit is very important in the Jewish community, and it is interesting whether it is because of various war experiences, or just because we are different."

In this example closeness among families is questioned as to whether it is a general product of the nature of Jewish families, or a specific pattern related to parental losses and trauma experienced during the Holocaust. This child, therefore, acknowledges other important influences which determine the structure of Jewish families.

(c). Attitudes Towards Germans and the External World:

Six subjects state that they do not feel any negativity towards Germans. This attitude is reported to stem from their parents who consciously taught them not to dislike Germans. In contrast, three subjects feel that they do bear grudges towards the German people. Six children state that they feel a sense of despair at the general nature and plight of humanity. This feeling is related to their parent's Holocaust experience, as the following example shows:

"So I don't feel any specific bitterness, I feel a kind of despair that people are so like sheep, it is despair more than anything, and they don't seem to have learnt, because it just carries on, this hatred and suffering just carries on."

An interesting finding is that, unlike survivors, who all believed in the possibility of a second Jewish Holocaust, more than half (six) of the children of survivors, feel that another Holocaust will not occur. This disagrees with the earlier theoretical belief that survivor parents impart hostility and mistrust to their children (Freyberg, 1989). Zlotogorski (1985) similarly found that survivor children are not fearful and mistrusting of the external environment. Five children are, however, very aware of and troubled by anti-semitism. An extreme example of this is illustrated in the feelings of one child:

"There could be another Holocaust when the Blacks take over... But believe me they will throw the Jews out... They don't want the Jews. You might think I am talking nonsense, but I have worked in companies in my holidays and I have seen how these people behave and especially the coloured people, they all think Jews, Jews, Jews. They are not going to kill us, they are going to throw us out of the country... Jews are persecuted where ever they

go, Jews always get the blame... I have got a friend who is AWB and they hate the Jews so much... they will also start with the Jews."

For another three children the Holocaust does not appear unique to other events occurring world-wide.

"I think that there is a Holocaust in this country with the Blacks. We are living in a country where I think the Blacks are being treated as badly as Jews have been treated."

Comments such as these suggest that the salience of the Holocaust within these families is not so great as to make this event appear incomparable to other atrocities which are continually occurring.

(d). Parental Protectiveness:

Parental protectiveness is the only pattern noted among this sample which may be similar to the pattern of over-protectiveness outlined in the literature. It is also the only familial pattern raised by children and parents that is related to child rearing practices. Five children state that their parents display very protective behaviour towards them. However, as with parental findings, this behaviour is not felt to be over-protective or stifling to the child's autonomy as was noted by Freyberg (1980). Furthermore, no children report difficulties in separation-individuation (Klein, 1973; Steinberg, 1989). Thus, according to the perspectives of these children, the protectiveness displayed by the survivor parent does not appear to encourage the negative ramifications outlined in the literature. This finding is consistent with parental reports.

Three of these children understand their parents' protective behaviour as related to their being a parent, rather than as a product of being a survivor. In the two other cases where this pattern is seen as a function of the Holocaust, children are able to understand and accept their parents' need to behave in this way, as the following example illustrates:

"I am... very close to my parents and I can feel how much she... she want to hold on to something and they hold on to each other and they hold on to their children. And sometimes you feel that they become too possessive... they don't want to lose any more, so you are trying to protect them all the time. Sometimes they over protect, they do things for you. But I just leave them because I feel like they need to do it, so they might as well do it."

This child may be able to accept this parental pattern of behaviour, as she does not report it to be undermining to her autonomy. She does note that this protective behaviour of her

parents has influenced her own behaviour, as is illustrated in her description of her behaviour towards her own family.

"... [my husband and children] told me it is because I am Cancerian, I'm like a crab and I want to keep everybody under my claws. Maybe I have seen her doing it for her family and how she puts her family under her wing. I want to do the same with my family, I want to keep them all close with me."

(e). Parental Fears and Dependencies:

There are some other patterns of behaviour displayed by parents which children evaluate more negatively. Four children report that their survivor mothers' display irrational fears, insecurities and dependencies which they feel are related to their Holocaust experiences.

"...not so much lately, but when I was younger she would go through certain times when she would be very anxious, and just anxious over all sorts of things...But dependency, she just generally is dependent. She won't even drive for instance, she says that she has not got the temperament for it. She has got a driver's license, but she refuses to drive, which means that she can't really do anything for herself, especially as she gets older, and it means that she gets more and more dependent. ... I don't know, maybe she just wants someone to look after her,"

C). Coping With Holocaust influences:

Based on the perceptions of these children of survivors, it appears that the nature of the Holocaust dynamic is not embodied in intrafamilial patterns similar to those outlined in the literature. The influence of the Holocaust within these families is not reported by children and parents to be as pervasive as noted in the early studies. In agreement with the views of Zlotogorski (1983) and Steinberg (1989), the reports of both parents and children indicate that limited conclusions regarding generalized patterns of Holocaust influence within families can be drawn. This finding coupled with coping behaviour reported by these children, implies that the negative patterns of survivor family functioning outlined by Danieli do seem apparent among these families.

Subjects' reports suggest that the Holocaust experiences of parents in ten of the families do not appear to be a predominant force within the family dynamics. Difficulties noted by children in their youth are never related solely to their parents' Holocaust past. For example, one child mentions experiencing problems and insecurities as a child. He relates this to the divorce of his parents which was difficult for him to cope with. Thus, events other than the Holocaust presented a more direct and substantial influence for this child.

Ten of the eleven children felt that they were able to cope adequately with parental behaviour which may have been Holocaust related. The following statement illustrates one of the ways in which children were able to understand and cope with certain "Holocaust" related behaviour evidenced by a survivor parent.

"she always gets quite worked up if there is anything to do with concentration camps on TV., but I think we would, not in a nasty way, but we would laugh at the whole thing."

(a). Viewing Positive Resources in Parents:

In agreement with the findings of Leventhal and Ontell (1989), children report to focus on the positive qualities and coping behaviour of their parents. The manner in which children construct their understanding of their parents as survivors may promote the means to cope with the past of their parents. This includes a focus on parental strength and coping behaviour displayed after the war. All children state that they admire their parents' ability to survive the Holocaust. Nine subjects describe their survivor parent as a very strong person. Six report that this parent copes well under crisis. That children relate these qualities in their parents to their war experience is illustrated in the following example:

"I remember when I was in G.--- Primary school... and there was a march by, and all the mothers were neurotic, and for my mother this was nothing. After going through a war, everyone is really over-reacting, and she said it was bullshit that everyone was scared because there were a few people walking on the street."

A second child describes her mother's strength in the context of what their family endured in Zaire. She admires her mother's ability to provide a safe environment for her children during the conflicts in Zaire.

"So although you knew what was happening all around you, when you were at home you felt strong, and when she was near you, you felt that you were totally safe."

Three siblings report that they admire the charitable nature of their mother, who enjoys aiding other, less privileged people. This, they feel, is a function of her Holocaust experiences. As the eldest son remarks:

"I remember when we were young, in a nice way, the characters that we used to have at home, because she felt sorry for them. That has been the story of her life, she always had a warm feeling for the underdog, or the underprivileged. I think my mother is strong, her life made her strong."

D). Feelings Towards Parents:

In general all children (aside from the one family) report that they had close relationships with their survivor parent. Relations among siblings is also reported to be very good. All subjects describe negative and positive attributes in both their parents, without specifically focusing on behaviours which they feel may be related to the Holocaust. Four children define their relationship with their survivor parent as conflictual. Only one relates this to the Holocaust. The other three feel that their relationships with this parent is the product of usual patterns of relations within families.

"...I think that in most families, if you have a normal family, if there are three or so children, that some side with the one and some with the other. Some are extra close to the one and some are extra close to the other."

One child feels that her relationship with her parents is very much influenced by their past experience of trauma. However, she does not perceive this as having negative implications, but rather believes that it has fostered close relations within the family which are viewed positively by this child.

"So I think I have become very possessive of my family and I will do everything for my parents, everything. If I have to go to the moon for them, I think I will do so. I love them very much, I will do anything for them. You know, I would have been much happier knowing that they had a happy childhood and youth and that's why I feel that the children must give them what they missed."

The two Sephardic children report that their parents especially created a home environment that was warm and loving, because this is what they had lost as adolescents. These parents attempted to compensate their children for their own losses. This also occurred in a way that was perceived positively by the children:

"...she gave us so much, all the things that she missed in her youth she made sure we had it, so you want to reciprocate, you want to give the love back."

The latter two patterns represent Holocaust influences which could have impacted negatively on the family functioning. However, the children reporting these patterns perceive them as having a positive influence on the interactions and dynamic within their family. This highlights an important point, that certain patterns, although related to the parents experience of trauma, may present as positive influences within the family dynamics. This findings provides support for Hass's (1990) point that not only detrimental, but also life enhancing forces may be transmitted to children.

E). Parents' and Children's Reports:

Parents' reports about their behaviour towards their children and the extent of Holocaust influences within their families coincide with children's reports for ten of the eleven families. Any influence of the Holocaust on parents, aside from one family which will be discussed later, is described as relatively minor. Children tend to focus on the positive qualities of their parents as related to their war experiences and very few negative processes are noted. There are some features of parents and their behaviour which children relate to the Holocaust, but these are not reported to form pervasive patterns within families. In accordance with current findings (e.g. Klein-Parker, 1988), all children in this sample appear to be well adjusted and have achieved occupationally and financially. Reports of parents and children suggest that the parents' Holocaust experiences had a limited negative influence on the long term development of their children. Based on these reports, it appears that this non-clinical sample of children of survivors do not display generalized negative patterns of psychological effects similar to those outlined in the early reports. Parents' perceptions of their child rearing behaviour suggests that they neither over-invest nor under-invest in children, two over-riding trends which leads to the numerous other difficulties cited in the literature. Nor do families appear to display the negative patterns of interactions hypothesized by Danieli (1981a, 1981b, 1985, 1988). The views of parents and children suggest that the functioning of the majority of families on all dimensions of the McMaster Model of Family Functioning appears to fall towards the effective end of each continuum.

5). Resilience in Children:

Although the presence of Holocaust effects as transmitted through child rearing practices is not reported to be prevalent within these families, Holocaust effects are clearly evident in transmission of knowledge, i.e. silence regarding the Holocaust past of the parent. As noted, children feel that they are able to cope with and negotiate the existence of these effects within their families.

The coping behaviour reported by survivors is likely to have some positive influence on their children. As argued by Jucovy (1985) and Almagor and Leon (1989) coping qualities within survivor parents may inspire children to develop similar qualities. The reports of limited transmission of negative psychological effects within families may be a product of both the coping behaviour of the parents and the transmission of this to the children. For example, that children tend to focus on the strengths derived by their parents from their war experience, may be one way in which this transmission of coping is present. This finding agrees with the second formulation regarding the concept of resilience, that children may develop a psychological hardiness as transmitted from their parents. If, as

perceived by subjects, the transmission of negative effects through child rearing practices is only minimally present among these families, then the other definition of this term, developing resilience to the transmission of trauma, appears less relevant in relation to this sample. This finding highlights the importance of distinguishing more than one understanding of this concept when assessing the behaviour of children of survivors.

6). The Status of the Current Research:

The perception of parents and children regarding the nature of the Holocaust influence within their families suggest that the findings of this study are different to the early theoretical literature on children of survivors. These differences may be related to the non-clinical nature of the sample. Other studies which focus on a non-clinical sample (Gay and Shulman, 1978; Leon et al, 1981; Zlotogorski, 1983; 1985; Sigal and Weinfeld, 1985; Weiss et al, 1986, Rose and Garske, 1987; Klein-Parker, 1988; Leventhal and Ontell, 1989) have found very few differences between their comparison group and survivor group. All these studies report their second generation sample to be functioning productively and adaptively. Where differences did exist between the functioning of the comparison group and the second generation, children were able to cope adequately with any difficulties related to the past of their parent. The findings of this study point to similar conclusions. Reports of parents and children also appear to support Zlotogorski's (1983, 1985) conclusion, that survivor families are heterogeneous, and the implications of survivor parents' Holocaust experiences on their children is largely unique.

This research displays some features which are different to the studies listed above. This may contribute to understanding the reports of the minimal transmission of negative patterns of Holocaust effects within these families. In this study only one parent in all families was a survivor. Any influences of the Holocaust experience could have been altered by the second partner. Additionally, no survivors lost children in the Holocaust. Hence the nature of the experiences of this sample precludes the occurrence of patterns such as "Identification with Exterminated Siblings". The last point to raise in relation to differences between this study and previous research refers to the context of the current research. Differences between the South African and North American or Israeli context in relation to the construction of survivorship could have resulted in differences in the expression of survivorship by survivors. This point will be discussed in greater detail in the concluding chapter.

In understanding the finding of relatively positive perceptions among this sample of Holocaust survivors and children regarding the influence of the Holocaust within their family, the nature of the sample must also be taken into account. Only half of the survivor population were interviewed. As noted, those who refused to be interviewed or refused

permission for their children to be interviewed, were not asked for explanations. It is possible that those survivors and children who were prepared to be interviewed were the most resolved as to the implications of the Holocaust within their families. Hence the reports of the limited presence of pervasive patterns of negative effects in these survivor families could be a product of the nature of the sample group, which restricts the generalizability of findings.

7). Case Studies:

A discussion of two families is presented below, one Sephardic and one Ashkenazi. In each family the mother is a death camp survivor. Both of these women struggled to come to terms with their Holocaust experience, and display evident signs of the effects of this. Although the Holocaust dynamic is clearly present in both families, the impact of the Holocaust past of one mother on her subsequent family appears to be far more substantial than in the other. Patterns of Holocaust effects which occur in the first family are largely of a negative nature, while in the second case, positive processes within the mother and the family seem to ensure that the influence of the Holocaust past is far more subtle and unthreatening to her son.

i). Family Three:

Mrs. C. was born in 1926, in a small town in Poland. She was the eldest of five children. At sixteen years of age she was transported to Treblinka concentration camp and was then sent to Aushwitz. She spent three years in concentration camps and was liberated from Bergen-Belsen in 1945. All four siblings and her parents were murdered by the Nazi's.

Mrs. C. emigrated to Zimbabwe in 1948 and an uncle adopted her. She met her husband in 1948; married him within three months and came to live in South Africa. Her eldest daughter was born in 1949 and her second daughter in 1951. Both are married. The eldest lives in Germany, and the youngest, N., in Cape Town.

N. reports that her childhood was very traumatic, and describes herself as an abused child. She relates numerous incidents of random, fairly severe physical and verbal abuse by her mother, which her sister did not experience. N. also states that she could never have friends over, because of the strange behaviour of her mother. She mentions hiding from her mother under her bed when she came home from school, only coming out when her father arrived home. N. describes her mother's behaviour in the following manner:

"My mother was unpredictable and very irrational the way she just lashed out, for no rhyme or reason, and so it's just very unbalanced, and I think as time has gone on it has become more balanced. But the difficult part for me when there were these times, people

used to say to me I was such a bad child and how could I be so difficult. There were things of no support as a child, ridicule."

From N's reports it appears that Mrs. C. displays conflicts in relating to those close to her. Davidson (1980a, 1980b) argues that this is a common pattern among survivors. N. describes the relationship between her parents as conflictual and she remembers them constantly fighting. Her father often tried to protect her from her mother. This resulted in friction within the family: "...because my father had looked after me, they always used to say, 'this is my daughter and this is my daughter', and she always used to tell my sister that my father did not care about her,".

N. reports that Mrs. C. even experiences a conflictual relationship with her grandchildren, which includes punitive and irrational behaviour: "But there was a period of time where they didn't see her either and then after a few years I tried to make contact again, and then it was okay. But there was a period when she just wouldn't,... you were dead and all that kind of thing. For example, my daughter's Bat Mitzvah, she didn't come to, because there was a fight, so it was very difficult for my daughter."

And that her mother has alienated her entire family: "... and the family had experiences with her as well, and I mean a lot of family will not go near her, even her family,"

Mrs. C.'s descriptions of her marital relations appear to confirm that she has difficulty relating positively and non-conflictually to those close to her. She describes her marriage as conflictual and views her husband largely in negative terms. "We were different people. He didn't let me grow. He was always trying to keep me down. I have grown a little bit more since I have been on my own." "Basically he was very stingy and I think he was jealous of me. He tried to keep me down. I couldn't grow."

This is further supported in her feelings regarding the behaviour of her uncle who adopted her after the war "...and my uncle wanted to marry me off for money and for an old man and I ran away." Mrs. C. divorced her husband sixteen years ago.

Mrs. C. tends to blame others for the disharmony in these relationships. Similarly she does not feel that she contributed to the dividing the family, even though both she and N. report that Mrs. C. displayed favouritism towards her eldest daughter. She views both N. and her husband as unstable and irrational, and believes that their behaviour is motivated to hurt her. The following statement regarding her understanding of her husband's behaviour illustrates this: "Also if he wanted to punish me he would take one [child] for a walk or a drive and leave the other at home."

Mrs. C. does not recognise that she abused N, but rather views N. as a difficult child, whom she feels did things just to spite her mother. This belief displays her mistrust of those close to her.

"My daughter will tell you lots of things, because she used to accuse me of lots of things. My daughter is more mixed up than me. She used to accuse me that I tried to strangle her and things like this which were not true." "She was a difficult child when she was small, very difficult. Like if you told her not to eat raw mince or raw fish, she would do it. I had hell from her... She must be strange. When you speak to her you will see that butter doesn't melt in her mouth. Now she is very attentive to me, because she feels guilty..."

That Mrs. C. feels that her daughter is only attentive to her out of guilt feelings, illustrates her belief that there are negative motives behind the exhibition of caring and affection of those close to her. This belief is contrary to N.'s reports of wanting to maintain a bond between herself and her mother in order to try and restore some happiness to her mother.

Both N. and Mrs. C. recognise that the Holocaust has had a substantial influence on the child rearing patterns of their family. N. depicts this largely in terms of negative patterns of abuse and other punitive behaviours which she experienced from her mother. On the other hand, Mrs. C. believes that the motivation for her behaviour was essentially positive. She reports that her own losses in childhood influenced her to try to provide her children with all that she was deprived of. However, Mrs. C. is able to recognise that the outcome of this attitude for her children may have had negative implications.

"What hurts the most is that my future was gone, my education, I wanted to do such a lot of things. I have two daughters and it brought, maybe, a lot of misunderstandings and frictions, because I wanted to give them things that I always wanted so much." "...I only see it now that maybe it was my fault that I wanted to make up in the children what I missed. I personally think, definitely, that my main problem is that the things that I missed, that were so precious to me, that I tried to enforce on the children."

The favouritism which Mrs. C. displays towards her elder daughter may be because this daughter fulfills her mother's ideal more closely than the younger daughter. This identification with the elder daughter is such that it provides Mrs. C. with the means to fulfill her desires related to her own losses in childhood, as is illustrated in the following: "My eldest daughter was a very keen scholar. She never missed a day at school, even when she was sick, I couldn't stop her going to school. And I loved school."

From Mrs. C's reports it appears that her behaviour may represent the means for her to relive her childhood through her children and hence fulfill her own narcissistic needs

(Rosenberger, 1973). Mrs. C. does recognise that trying to recreate her lost life through her children has resulted in conflicts between them, however it does not appear that she realizes the extent to which her behaviour affected N. or served to divide the family. This is illustrated in her perception of her family functioning, which is quite contrary to N.'s:

"We lived a very normal life. A Jewish home and the kids were brought up with everything. The children were short of nothing. I really tried to give them the best of everything, their education. Basically I think that I made the best of the family, because we were quite a happy family, in a way."

N. also notes another pattern of behaviour displayed by her mother which is reported to be common among Holocaust survivors. She has difficulty experiencing pleasurable emotions and enjoyment, and appears unable to share in N.'s pleasure and celebrate in her joyous occasions (Davidson, 1980a). This is illustrated in the following reports by N. She states that after the birth of her second child, her mother did not see him for six weeks. When N.'s third child was born, her mother would not acknowledge either her daughter or the child. Her mother first saw this child over a year later. As noted above, Mrs. C. did not attend her granddaughter's Bat Mitzvah. N. reports similar conflict occurring when she got married:

"There was also tremendous fighting about my marriage... There was also jealousy on the part of my mother that I had something that my sister did not have, and also trying to keep that relationship apart. She would phone my sister and say how selfish I was and tell her not to do anything for me."

N.'s current response to this behaviour of her mother is feelings of sadness: "because the sad thing was that I had two wonderful children and here was someone who had been through so much trauma and was on her own and wasn't even enjoying life." By relating her mother's difficulty in experiencing pleasure to her Holocaust experiences, N. appears able to accept and understand it, even though it impacted on her and her children substantially.

The relationship between N. and her mother is characterized by conflict and abuse, which suggests that functioning along the dimensions of affective responsiveness and affective involvement is ineffective. In relation to the former dimension, the mother's behaviour incorporates inconsistency and irrational reactions to events occurring within the family. N. relates small incidents which would lead to inappropriate responses on the part of her mother, usually to some form of abuse. With regard to the latter dimension, Mrs. C. appeared to display little involvement in N.'s life or interests, signifying an absence of involvement. The abusive nature of this parent may also indicate the existence of chaotic behaviour control mechanisms.

Within this family communication was also largely ineffective. N. reports little communication between herself and her mother because of the nature of their relationship. Although she experienced a close and loving relationship with her father, she was unable to discuss the abuse she experienced. Therefore N. could not communicate her most severe conflict to the parent with whom she shared the most responsive relationship.

N. is able to view positive attributes in her mother, however, none of these refer to child rearing practices. She feels that her mother is a remarkably strong person, in that she lives alone, and is able to keep herself busy and active. She uses the term "survivor instinct" in describing the strength and resourcefulness of her mother, which illustrates the dominance of Holocaust related thoughts. N. feels that Mrs. C.'s positive attributes have aided her in developing the strength to cope with her own traumatic childhood experiences.

N. currently accepts her mother's past behaviour, as she relates it to the Holocaust and this provides some justification for her mother's functioning. Although she still struggles to come to terms with this erratic and conflictual relationship, she feels that maintaining a bond with her mother is important. Holocaust awareness and Holocaust thoughts are very pervasive within this family, and seem to have played a major role in shaping Mrs. C.'s behaviour towards her child. It appears that the family arena provided a means for this survivor to continually repeat conflictual feelings related to her Holocaust past. N. reports attempting to master her childhood trauma and overcome the effects of this. She feels that she has developed coping strategies which include a desire to provide a positive family environment for her own children. N.'s behaviour incorporates a resiliency to the transmission of trauma. Despite her difficult childhood, N. appears to be well adjusted, in relation to both her own family and other areas of social functioning.

ii). Family Seven:

Mrs. P. was born in Rhodes Island in 1927. There were five daughters in her family, of which she was the youngest. Her father died when she was three years old. Two of her sisters emigrated to Zimbabwe before the war. Mrs. P. was 17 years old when she was taken to Aushwitz concentration camp, with her mother, aunt and three sisters. Her mother and aunt did not survive the first selections, and one sister died one month later. Mrs. P. was liberated from Bergen-Belsen in April 1945, approximately a year and 3 months after she was arrested. Her only surviving sister from the camps died two months after liberation.

Mrs. P. tried to emigrate to Zimbabwe to be with her two sisters. She was not permitted entry and went instead to Zaire, where she had a cousin. In 1946 she met her husband, also from Rhodes, and they were married in December of the same year. Her three sons were

born in 1947, 1948 and 1951. The eldest lives in France, the second in Zaire and the youngest, H., in Cape Town.

H. reports that he believes that he as a very realistic view of his family life. He feels that in general the relationship between his parents was a well balanced and caring one. As with Mrs. C., he feels that his parents tried to ensure that their children had everything they were denied because of the war. However, H. does not perceive this pattern of behaviour of his parents' to have resulted in conflictual and negative experiences within his family. Instead it appears that he largely views his parents' past experience of loss to have had a positive impact on the manner in which they raised their family. Thus, similar patterns in different families were perceived by the children to be either positive or negative, depending on the way in which these influences are played out within the family structure.

"... we had everything of the best, I must say I think we had everything of the best, because they didn't have everything of the best. They tried to give us as much as they could. We had love, we had everything. Still they are two different people, they had fights, like anybody else we watched sometimes fights, we watched bad moments, happy moments. But as a general rule I think it was well balanced."

H. notes that his parents encouraged close bonds between members of the family, and he feels that this is related to the losses experienced by both his parents (his father, an immigrant, lost family in the Holocaust). "...I think something that my parents taught us is that we have to care for each other, you know, and that's very important. The one brother will always phone and see if the other is all right or if we need anything. He is wealthier, I am a teacher, and he makes sure, he cares about that, and that I think is taught by the parents." Mrs. P. also reports that she encouraged the maintenance of close bonds between the family.

H. mentions that his mother suffered numerous psychological breakdowns: "...maybe all these nervous breakdowns she had were a consequence and they were bad... she had to take trips here and go for treatment. But whether that was the reason or not, she never told us, so I can't tell you... she had these terrible things that would reoccur every five, six or seven years, where she would lose her sleep, believe that she was dying, and believe that she would be alone in the whole world, and be totally disinterested by us, the family, not cooking, not nothing. Then she had to go for treatment and then slowly they would bring her back again to normal, and then she would go on living."

H. mentions feeling very frightened during these breakdowns. As a young child he could never understand what was happening to his mother, nor why she would be sent away.

However, H. reports that aside from these periods of psychological instability, his mother was able to provide a very nurturant and supportive environment for her children. H. also states that he feels that his mother is a strong woman and that his father was able to provide a loving and caring environment when his mother was absent. Mrs. P. does not address the issue of her psychological difficulties in such a direct manner. However, she does allude to periods where she felt completely overwhelmed by her Holocaust experience, and where she paid little attention to her family. She reports that after these episodes she would try to compensate for her self-involved behaviour by being very attentive and giving towards her children.

H. does not perceive these breakdowns to be solely related to his mother's war experiences. He feels that they may be a function of her past trauma, but also states that there are numerous other factors which may also contribute to her psychological difficulties, such as, having children at a young age, and experiencing problems living in Zaire. It appears that although the potential exists for the Holocaust experiences of the mother to assume a very salient position within the structure of the family, this is not reported to have occurred.

That H. does not attribute other characteristics which he ascribes to his mother, to her Holocaust experience, further supports this point. For example H. reports that his mother is "... a little bit anxious, a little bit nervous, always a little bit worrying, but I think it is typical of a mother...". Thus, H. believes that the anxiety displayed by his mother is a product of both her nature and her role as a mother, rather than related to her trauma. Similarly, while describing the relationship between himself and his mother as difficult, conflicts and arguments which occur between the two, are viewed by H. as a product of the interaction of two different characters, rather than resulting from any other external influence. Based on these reports of H. it appears that while the past trauma of the mother does influence the family dynamics, this is not perceived to be very negative or detrimental. Similarly, Mrs. P. feels that her child rearing patterns were not influenced substantially by her Holocaust past. She further believes that her own childhood experiences were more important in understanding her current child rearing patterns. Therefore, both mother and son feel that there are other important sources of influence which play a role in determining the family dynamics. This suggests that neither perceive the Holocaust past of the parent to be a particularly salient feature in defining family functioning.

Mrs. P.'s breakdowns are reported to be the only major Holocaust effect which impacted on her child raising ability. From H.'s descriptions of his mother's breakdowns, it appears that there was a lack of both affective responsiveness and effective involvement towards

her family during these periods. However functioning on these dimensions is only reported by both parties to be ineffective during the breakdown periods. Involvement and investment in the children once again became active on recovery. Affective involvement and responsiveness was also reported to be present in the father's relationship with the children, perhaps more so during these periods, in order to compensate for the mother's absence.

Mrs. P. did encounter difficulties in coping after the war; the extent to which this influenced the family seems limited to her experience of periods of extreme psychological stress which necessitated clinical treatment. These were relatively short lived, with immediate reinvestment in the family occurring on recovery. H. does not report the Holocaust to be the most major event within the dynamics of the family. This is highlighted in that his attributions for his mother's psychological breakdowns are not solely related to her Holocaust past. The following quotation further illustrates H.'s feelings regarding the influence of his mother past in relation to how he was raised:

"But that I am going to tell you that she went to the camp and I am like this, no. But because the way she brought us up, and the way my father brought us up, and the two together probably, and on top of it you are born the way you are and they teach you the things, and at the end you have got the personality. But to tell you it is from her suffering, no I don't think so."

Although the Holocaust past of Mrs. P. is prominent, it is not perceived by H. to feature negatively within the total dynamics of the family, as in the first example. Nor is her past trauma reported by either party to result in specific patterns of interactions and relationships between herself and other members of the family, as with Mrs. C.'s family. H. reports being able to cope with mother's difficulties, especially as both parents are otherwise able to provide a supporting and nurturant environment for their children.

iii). A Comparison of the Two Families:

The families discussed above display numerous differences in terms of the pervasiveness of Holocaust influences within families and the effects of the parents' Holocaust past on the family. Both survivors struggled with the long term effects of their exposure to trauma, but the manner in which this manifests within their respective family dynamics is reported to be very different. In the first example, the family setting provided the arena for the survivor to re-experience and re-enact conflict related to the past. The form which this takes in relation to the daughter appears to have been damaging and undermining. N. clearly feels that Mrs. C. was unable to provide a positive and caring family environment. This does not appear to be the case in the second family. Based on H.'s reports, it appears

that Mrs. P. did not utilize her family in expressing her conflicts. These conflicts formed part of internal struggle, which occasionally completely undermined her coping, but is not reported to have impaired patterns of family relations and dynamics. During periods of normal functioning, which were predominant, Mrs. P. appears able to provide a warm and loving child raising environment.

Based on the perceptions of parents and children, it is apparent that in both families the existence of Holocaust effects are evident. However, the dynamics of the Holocaust within the structure and functioning of the first family increases the possibility for the transmission of negative psychological effects to the child. In the first case, the mother displays many of the patterns outlined in the literature. The long term development of both children does not appear to be undermined, even though the potential for this is great in the first example. Given the reports of the two children, it seems that they both display coping abilities and resilience to the transmission of Holocaust effects. Both children report that they believe themselves to be well functioning and well adjusted individuals.

From the above discussion it is apparent that Danieli's patterns of survivor family functioning are insufficient in providing an understanding of the dynamics of the survivor family. Both families evidence patterns of Holocaust effects which fall across all four categories which she outlines, and hence cannot be rigidly classified into any one "family-type". Additionally, children in both families report that they display coping and resilient behaviour, characteristics which are not incorporated in her model. Findings from the general discussion on survivor families and the case studies thus support the criticisms of Danieli's formulations as not accounting for positive processes within survivor families which may promote coping in children.

CHAPTER 6

COPING, ADAPTION AND ACCULTURATION OF SURVIVORS AND IMMIGRANTS.

The perceptions of these survivors and their children regarding the influence of the Holocaust within their families, suggest that there are very few negative patterns of psychological effects which are transmitted from survivor parent to child, and which may be generalized across the sample. Factors that may contribute to these findings are discussed below. These include (a). coping of survivors and (b). adaption and acculturation of survivors. Patterns of acculturation and adaption among the immigrant sample are then discussed in order to assess whether these differ from survivor patterns. Lastly a discussion of immigrant families is presented to determine if patterns which may exist within survivor families are obscured by the effects of immigration and adaption.

1). Resilience and Coping: The Survivor sample:

One important factor which may contribute to the above finding relates to the coping behaviour displayed by survivor parents after the war. All survivors in the sample appear to have exhibited long term coping abilities and were able to function adaptively within their new society. This may suggest that they are able to overcome many of the negative implications of exposure to trauma, and hence may be able to provide a warm and stable environment in which to raise children. Recent literature supports this claim (Newman, 1979; Almagor and Leon, 1989). The coping behaviour displayed by survivors is especially significant in relation to the two points raised in chapter one. The majority of subjects were adolescents during their experiences of persecution and numerous researchers have argued that the earlier the developmental stage during which the survivor experienced the Holocaust, the more psychological damage incurred (De Wind, 1971; Robinson, 1979; Hass, 1990). This point does not appear to be supported as findings suggest that all survivors displayed coping behaviour. Furthermore, all survivors are currently in or nearing old age and still display coping patterns. Only some of the major factors which promote coping and may influence intrafamilial functioning are outlined.

A). Family and Social Support:

Two issues noted in the literature to impact on coping are (1). having family alive after the war (2). having a social support network in the new country (Hass, 1990; Berry, 1992). These two factors were similarly important in promoting coping within the current sample. The psychological implications of having family alive after the war is illustrated in the following examples.

"...when I came from the concentration camp I feel empty, I was very sad, I can't imagine to live... to kill your parents that is the worst thing that can happen to a person... and my brother wrote to me in Italy and I feel happy because... when you sad you don't care the life, but when still you have family... I have somebody who will care for me and that helped me very much."

In contrast a survivor who had no family after the war states:

"It is actually difficult to explain what hurt you more, what was more hurtful to you, because you always hoped still that you would find somebody after the war. But when you remain by yourself and you found nobody from the whole family, you also found that you were a nobody."

B). Country of Emigration:

A further factor which is reported by six survivors to have aided in overcoming their experience of trauma relates to the new countries in Africa in which survivors settled. Other authors have noted there appears to be differences in post-war adaption depending on the country to which survivors emigrated. Their findings indicate that survivors in Israel cope better than survivors in other countries (Winnik, 1966; Klein, 1971; Krell, 1979; Newman, 1979; Bergmann and Jucovy, 1982; Hass, 1990). Central and Southern Africa may also hold specific benefits for the survivor. It was far removed from the war situation and, unlike Europe, did not experience the devastating after effects of the war. Leaving Europe for a completely new environment, as one survivor notes, may have aided coping:

"I still wasn't happy [in Holland] because I had depressions and so on. I said 'I want to get away' because everybody was talking about the War. They still do, on the television, on the radio. I couldn't stand that."

C). Cognitive Coping Strategies:

Survivors' also appear to utilize active cognitive coping strategies, which demonstrates their inner resourcefulness and strength. These patterns of survivor resourcefulness may contribute to the type of qualities within parents that inspire their children, and hence may be related to the development of resilience in children (Almagor and Leon, 1989). Cognitive coping strategies are viewed in the following perspectives of survivors:

(a). Focus on Positive:

Seventeen survivors report that they are able to view positive factors in terms of either pre-war, war or post-war experiences. This represents an extension on Dimsdale's (1980)

coping theme of differential focus on good, to include pre and post-Holocaust events. For example, twelve subjects noted that they were fortunate to have a loving and caring family during their early lives. Ten focus on the families which they created in the post-war period. Nine subjects define themselves as being lucky during the Holocaust, e.g. being helped by people or not experiencing much physical abuse. This focus on the positive is particularly well illustrated in the following quotation:

"But I feel that the troubles which we went through took themselves in the good times we had afterwards. Although you cannot bring your family back. I used to say that there is a lady luck for me, I didn't go to war with children... and lose them."

(b). Feeling Fortunate to Survive:

Survivors saw themselves as being fortunate to survive, which promoted positive feelings towards life after the Holocaust:

"Mentally, I don't think the Holocaust provided for me afterwards some kind of mental fatigue. It was an experience in life, which I was privileged to live through"

A function of this outlook appears to be a strong determination to continue with the life process. This is important in understanding family processes and substantiates the point raised earlier, that these survivors appear able to focus on the present and do not remain encapsulated in their past experiences. The following example aptly illustrates how feeling fortunate to survive may promote strength and resourcefulness in survivors. After the war an Ashkenazi survivor reports that she was faced with two alternatives, either to commit suicide or to create some "mission" that she could fulfill. She decided on the latter and set about aiding oppressed people in South Africa by establishing the first centre for "Coloured" Mentally Handicapped people in Cape Town. This demonstrates not only coping behaviour, but the use of resources to aid in the promotion of the well being of others.

(c). Increased Psychological Hardiness:

Surviving the Holocaust is viewed by ten survivors as creating the strength and resilience to cope with any future hardship. These findings are similar to that of Shuval (1958) and Antonovsky et al (1971) regarding the increased "hardiness" of survivors. This perspective is illustrated in the following statement:

"... if you could survive that, you could survive anything, because those experiences when you could see death in the face and when you didn't know what was going to happen the

next moment,... no matter what happens today, it gives you a certain strength... I think the survival instinct becomes very strong."

Similarly another subject indicates that her experiences are used as a measurement against which other hardships are compared; the latter always appears more favourable. This is a strategy in which her past experiences are utilized as a means to aid in coping with current events.

"The only thing is whatever happens to me, whenever something bad happened to me I always used to say 'it can't be as bad as the war.' I put everyday into perspective, a comparison."

For a third survivor, her Holocaust experiences provides her with the strength to appreciate and accept her current life.

"... I take everyday as it comes and enjoy it because you never know what will happen. I have been so near to be destroyed... I was near death. I don't like fighting. I don't like being bad friends with people. I take them as they come... I think I have got strength out of it."

As noted in the previous chapter, a majority of the children of survivors also appear to focus on positive aspects of their parents' survival, and on their post-Holocaust strength and resourcefulness. As these qualities are found in both parents and children, this substantiates the hypothesis that these attitudes in parents may promote resiliency in children.

D). Jewish Identity and the State of Israel:

Jewish identity and group belonging appears central in aiding coping and adaption among survivors. The Jewish group, for both Ashkenazi and Sephardic survivors, provides the main source of attachment and identification. Belonging to this group is believed, by subjects, to encourage stability and security reminiscent of their past lives. Being Jewish is reported to be a key element in the identity of the majority of survivors of this sample. In general, survivors report feeling proud of being Jewish. Despite experiencing prejudice on the sole basis of being Jewish, these survivors do not reject their Jewishness. Aside for two survivors, there is no conflict related to maintenance of Jewish identity after the Holocaust.

Belonging to a closely knit and generally supportive community is also an important aspect of being Jewish, and only two survivors do not identify with the Jewish group. This

is often the major source of reference for these individuals, especially for the Sephardic Jews. The nature of this sense of belonging and identity derived from affiliation with the Jewish group is clearly illustrated in the example of an Ashkenazi subject who, both before and after the war had little ties with any Jewish community. His father had been Christian and he did not consider himself to be Jewish until, in his thirties, he decided to make contact with the Jewish group.

"I was made very welcome, and I felt that is what I have been looking for all my life. You know, the Jewish atmosphere. You can't describe what is a Jew, it is very simple, you feel it."

The importance of being Jewish is also noted in survivors' views regarding their children marrying non-Jews. Eighty six percent of the survivors would prefer their children to be married to a Jew. Only two survivors would not feel less unhappy with their child's choice of a non-Jewish partner if the partner converted to Judaism. The most important issue for all survivors, even those who report not to mind if their children marry a non-Jew, is that their grandchildren are Jewish.

Nineteen survivors believe very strongly in the State of Israel. Porter (1981) reports similar findings regarding the centrality of Israel for Holocaust survivors. Subjects believe that Israel provides a homeland and place of refuge for the Jews, and is viewed as the protector of the Diaspora Jewry. They feel that with the existence of Israel a second Holocaust is unlikely to occur. Jews are now able to defend themselves, and hence reverse the circumstances in which the Holocaust occurred. Knowledge of the less precarious position of the Jews in the Diaspora and the security of having their own state, is reported to have aided the survivors in coping in the post-Holocaust period. The positive feeling of survivors for Israel is coupled with a strong identification with Israel. Most survivors view Israel rather than South Africa as their homeland, and although strongly bonded to this country, their affiliation to Israel is greater. Zionism is also a notable feature of South African Jewry in general (Cohen, 1984).

E). Sephardic and Ashkenazi Survivors:

Sephardic survivors appear to experience more difficulty in post-war coping and adaption than the Ashkenazi survivors. This point is interesting especially as the community (in Zaire) to which most Sephardic survivors emigrated after the war comprised solely of Sephardic Jews, most of whom were of the same origins as survivors. Thus Sephardic survivors experienced immediate entry into a tightly knit and receptive community, one of the factors noted above as aiding in coping.

Those of the Sephardic sample who immigrated to Zaire described themselves as very happy there, especially as they had a strong social support network. The peacefulness of Zaire relative to Europe, and its remoteness from the war situation, was also mentioned by four subjects as a factor aiding their ability to cope with past experiences. In such a small migratory community of similar origin, comprising of a fair proportion of survivors, the Holocaust story is intricately interwoven into the fabric of the community. This saliency of the Holocaust within this community could have positive or negative effects for survivors, by either allowing them to communicate and integrate their experiences, or alternatively providing a constant and overwhelming reminder of their Holocaust past.

There are two other major factors which may contribute to the greater difficulties in coping displayed by the Sephardic survivors in the post-Holocaust period. Firstly, all Sephardic survivors experienced incarceration in death camps. As noted in the literature (Klein, Zellermyer and Shanan, 1963), death camps experiences may be more difficult to come to terms with. The severity of the trauma experienced by this sample may undermine adequate coping after the trauma. Secondly, Sephardic survivors who settled in Zaire experienced an added traumatic occurrence numerous years after the Holocaust. As a result of the conflicts in Zaire, all survivors (and most of the Jewish population) were forced to leave on refugee status, therefore again experiencing material and social loss.

If different patterns of behaviour or child rearing practices had been found among Sephardic and Ashkenazi survivor families, then this may be attributable to differences in coping ability displayed by these survivors. However, firstly the reports of parents and children regarding family functioning is similar between the two, in terms of both appearing to present with little negative Holocaust effects or related psychological effects. Secondly, assessing these two groups comparatively is complicated. Sephardic children of survivors are themselves immigrants and have faced the turbulence of adapting to a new environment. Additionally, the cultural and traditional family patterns between these two groups are different. Sephardic children are often far better adapted to South Africa than their parents who arrived here late in life. These children may provide services for their parents which do not form part of the Ashkenazi child's behaviour towards parents.

F). Coping and Intrafamilial Functioning:

Survivors' ability to cope after the war is likely to have a positive impact on their ability to adequately raise their children. Factors such as having family alive after the war, having family in the new country and being incorporated into a vibrant Jewish group, may provide these survivors with extended supportive networks which help to combat the negative implications of their experience of trauma, and aid in creating a positive child rearing arena. The cognitive strengths displayed by the majority of survivors may suggest

that these strengths can be generalized from the coping sphere to also apply to child rearing. In other words, these survivors may display similar internal strengths in coping with effectively raising their children. Additionally, children's reports suggest that they appear to have developed attitudes towards understanding their family and parents' situation, which are based on the positive attitudes and resources displayed by parents.

2). Adaption and Coping: The Survivor sample.

There are numerous reasons why the assessment of survivors' ability to cope with and adapt to their new environment is important in promoting an understanding of the influence of the Holocaust on the post traumatic functioning of survivors. The two most salient ones refer to:

- (1). the long term implications of exposure to trauma on general functioning.
- (2). the implications of the Holocaust versus immigration in determining specific familial patterns.

(1). Understanding survivors adaption to their new environment provides one means to assess the implications of the Holocaust in influencing later functioning. For example, if survivors were able to adequately adjust to their new environment, then this may illustrate that their experience of past trauma does not completely undermine general functioning, as the early psychoanalytic theory suggests. This points to the resourcefulness and strength of the survivor, and is related to the issue of ego regeneration. However, coping with the Holocaust and adaption to a new country, while probably interlinked are not linearly related. Numerous patterns and variations exist in terms of this relationship. It is possible that adaption to a new environment may occur while coping with the Holocaust trauma does not; or that failure to adapt may further undermine coping with the Holocaust trauma or the reverse. On the other hand the individual may cope adequately with the trauma, while not experiencing adequate adaption to the new environment.

(2). Adaption and acculturation of survivors must be accounted for in attempting to determine factors which influence family patterns. If survivors were unable to adapt to their new environment, this may suggest that the experience of immigration and adaption may be a more or equally influential in understanding the dynamic of the survivor family. Hence the specific patterns of difficulty within families may be a product of the immigrant status of the survivor, rather than of their survivor status.

A). Factors Promoting Adaption:

Initial contact with the new environment was generally positive for survivors. They were far removed from the source of the trauma and all survivors chose their new country because they had relatives there. Factors such as the existence of social support networks,

reasons for leaving and nature of the new society are noted to influence the acculturation process (Berry, 1992).

a). Social Support Networks:

Sixteen survivors report that they were immediately received by warm and loving families, which has been noted as aiding their ability to cope. These families helped survivors, financially, materially and emotionally, to re-establish themselves; providing the means to aid them in acclimatizing to the new society. As with coping after the Holocaust, having a supportive family network is a generalized coping factor also aiding in adaption to a new environment.

(b). Nature of The New Society:

The nature of South African society specifically was such that aside from the growth of anti-semitism among the Afrikaners during the rise of Nazism, Jews were largely allowed live unhindered (Cohen, 1984). Although South Africa with its policy of institutionalized racism cannot be called a culturally pluralistic society, institutionalized racism encouraged the partitioning of this society along group lines, with emphasis and loyalty being focused on the in-group. The Jewish group in South Africa developed strong in-group ties, especially as a result of tolerance of the wider society towards Jews. Therefore, Ashkenazi survivors in South Africa entered into a well established Jewish community. Similarly Sephardic survivors who immigrated to Zaire were immediately incorporated into a closed and tightly knit existing Jewish community, in a colonial country, which also encouraged group distinctiveness.

(c). Jewish Group Belonging:

Survivors report that incorporation into the Jewish community allowed for the perpetuation of their ethnic group identity, and appears to have provided them with some form of continuity with the past. Survivors were able to continue to adhere to traditions and customs of their heritage, although the manifestation of these were altered in accordance with differences in their form and content within the new Jewish environment. Immediate incorporation into an ethnic community provides security and comfort, and may present a replacement for lost communities. Conversely, if the new community is not viewed as being as adequate as the old one, then this may constantly remind survivors of their losses. However, in general, survivors reported being happy with the Jewish community into which they migrated.

B). Coping with Adaption:

Survivors report that they displayed initial difficulties in adapting to their new environment. These difficulties appear to be similar to that which would be experienced by

any migratory group, i.e. learning a new language and culture. The Ashkenazi Jews who immigrated directly to South Africa and Zimbabwe were generally able to establish themselves very well financially, usually with the aid of family or existing Jewish organizations. This supports the findings of Schneider (1975), Porter (1981) and Weinfeld et al (1981) regarding the post-Holocaust financial status of survivors. Similarly Sephardic Jews in Zaire also prospered, however with the move after independence, the majority lost all their possessions and finances and were forced to re-adapt to a new English speaking society.

Survivors were also faced with coming to terms with their missed education, that is altering their goals, and utilizing the skills which they had available. However, as reported by survivors, exposure to extreme trauma may enhance the ability to cope with other hardships, where difficult events become more manageable in relation to Holocaust experiences. Therefore, while cumulative trauma and hardships could further serve to undermine the functioning of the survivor, this survivor sample appeared to follow the former pattern. Based on reports of survivors, it appears that adaption to the new environment seems to have represented a secondary issue in relation to coping with the aftermath of the experience of Holocaust events. The resources utilized in this coping after the Holocaust could also play a role in promoting adaption within their new environment.

Despite reports of adequate adaption and acculturation, most survivors do not view South Africa as their home, but nor is their country of origin, especially given the destruction of their original communities. Israel is viewed as their nation, and is the place which appears to offer them the only security (there are two exceptions to this among survivors who do not identify strongly with the Jewish community). The sense of insecurity in their host country is manifested in the belief of the necessity of the existence of Israel as a haven for Diaspora Jews, in the event of anti-semitic prejudice occurring in Diaspora countries. Having the state of Israel allows survivors to live comfortably in their host country and yet not feel permanently attached to the country within which they live.

C). Acculturation Strategies:

It appears that, on the whole, survivors adopted the strategy of adjustment in learning to cope with their new environment (Berry, 1988). There are no reports of any individual's adopting a withdrawal strategy. Withdrawal may have occurred if survivors had been considerably overwhelmed by their experience of trauma and lacked the resources to effectively interact with the wider society. That this is not reported by any survivors to have occurred, appears to point to their ability to cope with their trauma, and hence further substantiates the finding regarding ego regeneration among the survivor sample.

At a group level the acculturation strategy adopted by the South African Jewish community is that of integration, where the importance of maintaining ethnic heritage and traditions are recognised, as is the need for interactions with the wider society. As a function of this, the Ashkenazi survivors appear to have also adopted this strategy of integration. Although they form a subgroup within the general Jewish population, Ashkenazi survivors do not report to group along any other lines, for example country of origin. Contrary to Porters' (1981) findings and in accordance with those of Weinfeld, Sigal and Eaton (1981), Ashkenazi survivors report that they do not associate only with other survivors and feel well integrated into both the total Jewish population and the wider society. In terms of Ashkenazi survivors' acculturation to the Jewish group, it appears that the option of assimilation has occurred, where customs specific to being Jewish in their original culture have altered in accordance with the demands of the Jewish group in the new culture.

For Sephardic Jews, in their original countries of immigration, (Zaire or Zimbabwe), integration appears to be the reported strategy adopted both in relation to the host society, and specifically toward the Jewish group. The reason for this difference in the second strategy adopted in relation to the Jewish group, is that the existing Sephardic community and the survivor community were relatively homogeneous in terms of their origin. The entire Sephardic community was a recent migratory group and, therefore, most of the customs and traditions remained similar between the two groups. Any evolution or changes which did occur were most probably in the period after the survivors arrived. A further difference relates to the Sephardic survivors' resettlement in Cape Town. Here, it appears that the strategy of separation is adopted in relation to both the wider society and the majority group of Ashkenazi Jews. This move occurred when survivors were already approaching their senior years, which may make the potential for adaption more difficult, especially after numerous other migrations. Currently the majority of Sephardic survivors remain unable to speak English fluently (especially being beyond employment age on arrival in South Africa). Additionally, the Sephardic survivors report remaining fairly insular socially, and interacting mainly with other Sephardic Jews. Another reason for the adoption of a separation strategy of acculturation may be related to the minority status of Sephardic Jews in relation to Ashkenazi Jews, and the need to maintain their own culture. It is likely that this problem was not confronted in Zaire, as the only Jewish community there was Sephardic.

Whatever the adaption strategy adopted by either Ashkenazi or Sephardic survivors, the importance of belonging to their ethnic Jewish group and maintaining this culture and tradition appears to be one of the most salient features of survivors' adaption. As noted, there is an element of continuity with the past involved in this, as well as ties to lost family

and lost communities. Once assimilation is no longer viewed as the only and best means of acculturation (Berry, 1992), it appears that survivors have adapted to their new society in a manner that allows them to feel most comfortable, especially the Sephardics, who have experienced more than one migratory process occurring at different life stages.

D). The Status of Survivors' Adaption:

Survivors' perceptions of their adaption to their new country, suggest that this has occurred adequately. Their own reports appear to indicate that their process of adaption mirrors the patterns of acculturation and integration which their ethnic group has adopted. In terms of the two points outlined at the beginning of this section, reports of subjects suggest the following. Firstly, there appears to be little perceived influence of the Holocaust on general functioning and coping with hardship. In fact, exposure to trauma is noted as aiding in coping with any further difficulties. Secondly, in relation to family patterns, if survivors feel that they have adapted adequately to their new Jewish group, this may suggest that specific intrafamilial patterns which exist in survivor families are not necessarily related to the immigration and adaption experiences of the survivor, but rather to other experiences such as their exposure to trauma. In other words, as a result of adequate adaption there is likely to be a limited amount of confounding between Holocaust effects and immigration effects in influencing family patterns. This point must be clarified through the assessment of the immigrant sample.

Adequate adaption among survivors may illustrate the degree to which survivors are able to cope after the Holocaust. This point is substantiated in that survivors report both to display coping behaviour after their trauma and to be well integrated into their ethnic group. Thus, the adequate adaption of survivors appear to point, once again, to the resourcefulness and strength of survivors displayed in the post-Holocaust period.

3). Adaption and Coping: The Immigrant Sample:

Assessing the adaption and coping of immigrants of similar background to survivors will provide insight as to whether the experience of immigration and adaption is influential in structuring specific patterns of family functioning. If these patterns exist, and are common among survivors and immigrant families, this may suggest that the immigrant status of the survivor parent has as much, or more of an effect in determining family functioning. This section aims to clarify whether attributions for any specific intrafamilial patterns among Holocaust survivors has been confounded with their history of migration. Given that the perceptions of survivors point to their adequate adaption, it may be assumed that immigrants will similarly feel well adapted to their new country, and their experience of immigration will be perceived to have a limited influence on family functioning.

In the first part of this section, patterns of coping, adaption and acculturation among immigrants are addressed and compared to findings on survivors. The subsequent section deals with immigrants' feelings and thoughts about the Holocaust in order to assess whether persecutory experiences of immigrants may have been confounded with their experience of immigration. This is essential in terms of understanding the intrafamilial patterns of immigrant families and in comparing immigrant and survivor families, as outlined in chapter 4. Following this, a discussion of communication between immigrant parents and children regarding their past and immigration experiences is presented in order to compare this with communication within survivor families. Given that immigrants experienced difficulty, but not extreme trauma (although they may have been subject to discrimination) it is likely that patterns of communication and transmission of knowledge within these families will be far greater than the "silence" encountered in survivor families. These children may have a greater knowledge of their parents past and are therefore less likely to feel lacking in knowledge of family and personal history.

In the final section a discussion of immigrant families is presented, in order to compare the patterns and dynamics within these families to survivor families. Findings are based on the perceptions of children and parents regarding their family functioning. Once again, the discussion focuses on immigrant children's experiences during their childhood, unless otherwise indicated.

A). Coping With Emigration:

The immigrant group appear to have coped very well with adaption and acculturation to their new society. They note some issues which are similar and some which are dissimilar to survivors in defining factors which promoted adaption.

(a). Reasons for Leaving:

The majority of immigrants report leaving their country of origin as a result of either economic hardships or threat to self and family because of anti-semitism and racial laws against the Jews. Three subjects reported leaving primarily because of the former reasons and nine as a result of the latter. For example one subject notes what pushed her to leave Rhodes Island:

"I don't want to go to Africa, and my brother say come here, you don't know nothing because Mussolini he is with Hitler, you must not stay there, the Jewish people must go. The day I see everyone going to the concentration camp, I think of me and my mother and I am glad to be in Africa."

Reasons for leaving the country of origin are noted to be important in determining adaption to the new environment (Berry, 1992). All immigrants appeared to have a positive outlook towards the new country, viewing it as a means to escape past hardships and to create a better life for themselves and their families. Immigration was perceived as an improvement rather than a loss (Murphy, 1973a). At best, it presented new opportunities to the immigrant, and, at worse, as an environment safe from persecution.

(b). Being Prepared for Emigration:

Circumstances surrounding migration is an important contributing factor in determining outcome of adaption (Berry, 1992). The literature reports that one feature which differentiates refugees from immigrants is that immigrants, being voluntary, are often able to prepare for the move (Taft, 1977). Three immigrants stated that their fathers had already come to South Africa because it was too tough economically in their country of origin. These immigrants always knew that they were going to South Africa, hence they were mentally prepared for the process of migration and came to a base that was already established.

(c). Developmental Stage at Emigration:

Ten immigrants were of school going age and arrived in their new country with their parents. Unlike many of the survivors, these immigrants had their closest immediate family member with them. They state that their parents' tended to act as buffers against the hardship of migration (Taft, 1977). Eight of these immigrants report that after some initial difficulties, their parents adapted very well. They had positive outlooks towards the new environment, which was related their belief in the opportunities of the new country. Four subjects state that this positive attitude and strength displayed by their parents helped them to cope and adapt. It appears, from the immigrant children's reports, that parents did not necessarily require them to adhere to past traditions. This could be due to the parents' positive attitude towards adaption and may also be related to the nature of the new society, in that these new immigrants were able to continue their Jewish practices and traditions.

Although these young immigrants initially struggled with attending school in a foreign language, all but one reports being able to learn the language without much difficulty. School was perceived to be an arena which allowed these children to acclimatize to their new environment and develop a social network (Metraux, 1992). Two subjects report that there were numerous other immigrant children attending the same school, and this aided them in feeling less alienated.

(d). Social Support Networks:

Six immigrant families had family in the country to which they immigrated. This is noted to aid adaptation (Berry, 1992). Immigrants from the same country were also reported to be ready to help new immigrants. All immigrants, like survivors, feel that they were able to achieve financially and prosper.

(e). Jewish Identity and the State of Israel:

The new environment is described by four subjects as being receptive to the Jewish immigrants and free from persecution. As noted in the section on survivors, the Jewish group was allowed to function unhindered by any overt prejudicial restrictions in the new society. The newcomers were free to continue their religious or cultural practices, and, as with survivors, this was felt to provide continuity with their past life. For immigrants this link with the past was more direct and immediate. (Although as a result of the Holocaust, immigrants also lost their past communities). Immigrants' report that they were able to integrate into their new Jewish group, and continue to function in relation to this group, in a similar manner to the period prior to immigration. Incorporation into the Jewish community was also perceived to ensure the perpetuation of ethnic group identity and thereby provide a sense of belonging.

The Jewish group was not always as supportive of immigrants as they were of survivors. Four subjects reported that immigrants were distinguished among the Jewish population. They were termed "Greeners" and viewed as inferior by the established Jewish community. For a local Jewish female to marry a "Greener" was viewed as a step down on the social scale. One immigrant even reported that "Greeners" were treated as second class citizens by the established Jewry. The difficulty for immigrants arising from this classification is aptly illustrated in the following quotation:

"... and so they brushed everybody with the same brush, once you were seen as a Greener, you were obviously put in the same compartment. This was a difficult period, until one built up your own circle of people that you liked."

As with survivors, the salience of Jewish identity is a central theme among immigrants. All immigrants report that being Jewish and belonging to the Jewish group is of primary importance. Immigrants are proud of being Jewish and very attached to their Jewish heritage. While immigrants may have to learn to adapt and alter their behaviour in accordance with the culture of a new society, Jewish cultures and traditions remain relatively stable across different environments. Although the outward manifestations of religious practices may differ as impacted on by the majority culture, the essential nature of these customs and reasons for performing them remain constant, hence providing the

individual with a sense of identity which transcends national locations. For example, one subject states that the culture change from a small shtetl in Lithuania to a predominantly Afrikaans town in South Africa was large, but in both places he went to Cheder (Jewish learning). Therefore, his Jewishness was familiar across cultures.

Jewish group belonging is viewed as equally important in providing the immigrant with an extensive social network. This is especially so for Sephardic Jews in terms of their tightly knit and insular Jewish community, which helped to bridge the gap between the different societies to which they migrated. Sephardic immigrants do not report experiencing any negative stigmatization by their established group. Jewish group belonging is currently considered important by all Sephardic and Ashkenazi Jews, and eight subjects report being involved in Jewish organizations.

Immigrants, like survivors, would prefer that their children marry a Jewish person. They would also be happier if their child's non-Jewish spouse converted to Judaism. Survivors and immigrants report that they essentially favour partners for their children who would reinforce their Judaism. This is viewed as imperative for both groups in relation to their grandchildren. Thus immigrants place equal emphasis on the importance of the perpetuation of Judaism through their generations.

Israel is also of central importance to the immigrant sample. Like survivors, they feel that Israel ensures that the Jews in the Diaspora will feel more secure. In periods of insecurity within Diaspora communities, especially in South Africa, Jews now have a country to which they are able to return. All immigrants feel that another Holocaust is possible, but the state of Israel would prevent this from occurring. Immigrants, as with survivors, believe that the State of Israel reverses the helpless position of the Jews during the Holocaust and allows Jews to defend themselves. Similar to survivors, the affiliation of immigrants to Israel appears greater than to South Africa, although all subjects report being happy and comfortable in this country. Therefore, immigrants' feelings regarding Jewish group belonging and attitudes towards Israel, which are similar to survivors, illustrate that these attitudes in survivors may not necessarily be related to their experience of trauma.

B). Similarities in Factors Promoting Coping:

Social support networks and strong group affiliation represent common factors reported by both survivors and immigrants as promoting coping. These factors which aid in coping after exposure to trauma, appear to similarly aid coping in any generalized situation of hardship. That survivors generally feel that they have coped adequately with both their experience of trauma and immigration, suggests that having social support networks and

being incorporated into an existing ethnic group may represent particularly powerful coping devices.

C). Difficulties in Adaption:

All subjects' mention that the initial phase of contact with the new society was not easy, but with time they were able to learn the customs and culture of the new society and adapt. In fact, ten of the subjects note that they were eventually able to achieve academically and socially in their new environments. One young immigrant, after spending less than three years in her new junior school, was voted head girl. However all subjects did report that learning and adapting to a new culture presented some difficulties. For example, one subject notes that there were areas where she felt lacking as an immigrant, such as having no knowledge of the nursery rhymes that children in South Africa had grown up with. Another young immigrant also states that his mother used to dress him in clothes that were inappropriate to the South African environment.

Those immigrants who arrived as children (except two), report that aside from the initial phase, adaption was not particularly problematic. These subjects describe their parents as struggling more with the new environment than themselves. One immigrant reports that his father never really adjusted to the new society. Two immigrants, one whose family settled in Zimbabwe and the other in Swaziland, felt that it was difficult for their parents to cope with the relatively underdeveloped nature of the new society in relation to their previous European society. Immigrants who arrived from Germany, and were not allowed into South Africa, faced the added burden of being considered enemy aliens during the years of World War II. One subject who experienced this notes how his family relinquished ties to their old country and yet were not accepted into the new one:

"We were sort of in limbo, because we had no German nationality, but we were enemy aliens, so we did not fit into the one and we did not fit into the other."

Whether these immigrants report experiencing few or many difficulties in coming to terms with a new environment, all feel that they were able to learn English, and develop an understanding of the requirements and norms of the new society (Taft, 1977). All subjects note that after the Holocaust their parents expressed sentiments of feeling lucky to have left their country of origin. Therefore it appears that for these people, the occurrence of the Holocaust justified immigration.

D). The Current Status of Adaption:

Currently immigrants feel well integrated within South African society. Only three mention that there are small issues related to their immigration experiences which still

hinder them. This is illustrated in the example of an immigrant who felt that she was effected by the anxiety experienced by her parents before they emigrated, as a result of the rising anti-semitism:

"That spills over onto the children, and I think it stays with you all your life when it happens at that time. My son keeps on telling me 'Mom you are an eternal refugee because you had that anxiety in you all the time.'"

Immigrants' feelings regarding South Africa as their home are similar to survivors, although perhaps less intense. Ashkenazi immigrants' reports suggest that they are more settled in South Africa than Ashkenazi survivors. Yet South Africa is still not viewed as their primary nationality, nor is their country of origin, because of the Holocaust and the destruction their previous Jewish communities. Sephardic immigrants are in a more precarious position regarding national identification, having moved numerous times. The prevalence of anti-semitism world wide is also recognised by this immigrant population, especially after the occurrence of the Holocaust. Therefore, although being settled in this country, all immigrants do entertain the thought of leaving South Africa. This is reported to be related to the political insecurity in the country. It may be that their prior experiences of immigration coupled with the history of persecution of the Jewish group and political instability in the new country, contributes to these thoughts of having to leave South Africa. It is also hypothesized, that entertaining thoughts of leaving South Africa is a feature of the Jewish group in general, where children are openly encouraged to obtain a transferable profession and to consider countries to which they would like to emigrate. This may reflect a pattern of behaviour among the total Jewish population which has been influenced by their past history of persecution and especially by the Holocaust.

E). Sephardic and Ashkenazi Immigrants:

As with Sephardic survivors, the experiences of Sephardic immigrants were different to Ashkenazi immigrants. Of the three Sephardic immigrants, one went to Zimbabwe and two to Zaire. All three state that they adapted very well to their new countries and report being very happy. Belonging to this close knit, homogeneous immigrant Jewish community is likely to have provided great continuity with the past, especially as this community comprised of people who had known each other when living in Rhodes Island. The nature of this communal network is also reported to be very supportive. None of these immigrants were of school going age, but through the support of their group they were able to find work relatively easily. Sephardic immigrants, as with Sephardic survivors, faced the additional trauma of being forced to leave Zaire and Zimbabwe. All three immigrants left their respective countries as refugees.

The period perceived of as most difficult by these three subjects was not their initial move, but rather the move to South Africa. As with survivors, the factors reported to have helped them the most were: having children in South Africa who could aid and support them, and belonging to a close, supportive ethnic group. They report being very close to and reliant on their children in the South African context. With reference to the point raised in the discussion of survivor families, these findings suggest that close relations between Sephardic survivors and their children are not solely attributable to the Holocaust experiences of Sephardic survivors. As similar patterns are found among Sephardic immigrants, it appears that the movement to South Africa in old age and as refugees, plays a role in promoting close intrafamilial relations. The Sephardic Jews in Cape Town maintain a very strong sense of ethnic identity, which is distinctly different from the Ashkenazi group who belong to a far broader population and display different and looser patterns of identification.

F). Survivors and Immigrants:

There are numerous similarities in the coping and adaption patterns displayed between survivors and immigrants. For many survivors and immigrants existing family in the new country aided in coping as did supportive group networks. Group belonging also provided an important source of identification and continuity with the past. However, survivors had little family, whereas all immigrants had at least one member, and usually more, of their immediate family in their new country. Both immigrants and survivors suffered loss in terms of their previous life style, social network and community. However the loss experienced by survivors included those close to them, plus intangible issues such as the loss of an adequate childhood. Therefore, while both groups coped in their new environments, without the added burden of exposure to trauma, the coping process was easier for immigrants. It is important to note, however, that some of the factors which promoted coping were similar for both groups.

G). Acculturation Strategies:

The immigrant groups in general, report to have adopted acculturation strategies which are similar to the survivors. At an individual level, adjustment to the new environment is reported to be the most prevalent strategy adopted by immigrants (Berry, 1992). Similarly, Ashkenazi immigrants appear to adopt an integration strategy of acculturation in line with the strategy of the total Jewish group. As group belonging is an essential feature of South African society, the importance of ethnic group identity is promoted. Immigrants' acculturation, like survivors, reflects the desire of the Jewish group to maintain their cultural heritage, while recognizing the need to interact within the general society. Ashkenazi immigrants feel that they are particularly well integrated into the Ashkenazi Jewish population, more so than survivors, who are distinguished by being Holocaust

survivors. As with Ashkenazi survivors, Ashkenazi immigrants, report that they adopt an assimilationist strategy in acculturating to their group.

In relation to their first experience of migration either in Zimbabwe or Zaire, Sephardic immigrants, like survivors report to have followed the acculturation strategy of integration in adapting to both their group and the wider society. This difference from Ashkenazis in the acculturation strategy adopted in relation to their ethnic group, occurred for the same reasons cited in the discussion of Sephardic survivors' patterns of acculturation. The Sephardic immigrant strategy on resettlement in Cape Town also appears similar to that of Sephardic survivors, but perhaps less insular. Although these subjects seem to interact largely with their own group, their knowledge of English and contact with the broader society appears greater than that of the survivors. It still seems that the acculturative strategy which most aptly describes this sample is separation, however the fit of this category is not exact. The acculturative behaviours of this group are defined as separation because of the emphasis placed by these individuals on the maintenance of ethnic heritage and culture as distinct from the Ashkenazi Jews. The immigrant generation of Sephardics also report to associate mainly with each other and prefer speaking their native language.

As with survivors, maintenance of Jewish heritage and culture is one of the most salient features of the entire immigrant group. Being Jewish is felt to comprise an important part of the identity of both survivors and immigrants, as illustrated in their choice of acculturation strategies. As noted in the section on survivors, the acculturative strategy adopted by each individual is the one that allows them to adapt most comfortably to their new society. Among Jewish survivors and immigrants, this strategy also appears to be the one which enables them to most adequately balance maintenance of Jewish identity and group belonging with any need to interact with the wider society.

4). The Holocaust and the Immigrant Sample:

Understanding the salience of the Holocaust for Jewish pre-war immigrants is significant in attempting to account for possible confounding of experiences of persecution in their original country with the experience of immigration. As discussed in Chapter four, specific intrafamilial patterns which may occur within immigrant families could be related to their previous experiences of persecution (as this is noted as one reason for leaving), rather than being a product of the immigration and adaption. Therefore, similarities between patterns within survivor and immigrant families may then be related to both having experienced persecution, rather than migration.

For Jewish immigrants who left their country of origin just prior to World War II, there is a direct link to the Holocaust. These people also experienced a loss of their original

communities in the Holocaust and destruction of places familiar to them. Six immigrants report that they would not return to their birth place, as their original communities have been destroyed. They are also able to describe how their communities were destroyed and display sadness when discussing this destruction. One subject reported being very unhappy when visiting Germany. Another stated that when in Germany, she would not speak German and had a constant fear that every German she met was an ex-Nazi.

All immigrants note that they were lucky to leave Europe before the Holocaust. This event is particularly close to them, having occurred to their communities and friends, and there is the distinct feeling among these immigrants that it could have been to them. Ten of the immigrants lost some extended family in the Holocaust. All subjects report that awareness of Holocaust is great and that they feel a particular closeness to survivors. One has even become a special member of the Survivor Association. The impact of the Holocaust on the consciousness of immigrants is illustrated in the following statement by this immigrant:

"But I do, I read a lot, I try to understand the barbaric mind...that is one of the reasons I went to Germany in 1954, to see what the beast on two legs looks like, and you saw them, plenty of them."

Immigrants, unlike survivors, seek out Holocaust related literature, and reflect a desire to know exactly what happened to their communities. Only two immigrants report that they are unable to read Holocaust literature. All immigrants state that while they may read about the Holocaust, they experience difficulties or get upset doing so. One subject even notes that he is unable to watch television programs on the starving children of Somalia, as it reminds him of the Holocaust. This is similar to the reports of numerous survivors and lends weight to the claim of the salience of the Holocaust in the consciousness of immigrants.

Holocaust thoughts appear to be prevalent among immigrants. Eight mention that hardships faced in their new country were later justified by the knowledge of having escaped the Holocaust. Despite this, only one immigrant states that she feels her experience of persecution influenced the way in which she raised her family. She reports that these experiences made her extremely insecure and believes that this was transmitted to her children. Therefore, despite the apparent salience of the Holocaust for immigrants, this "near escape" is not perceived to have had any substantial impact on their behaviour in relation to their children. Based on these reports, it seems that any specific intrafamilial patterns which may exist among immigrants, would be related to their experience of immigration and adaption rather than to persecutory experiences in their country of origin.

5). Communication of Past: The Immigrant Sample:

Unlike survivors, all immigrants report that they discussed their life in their country of origin and immigratory experiences with their children. Twelve subjects stated that they enjoyed talking about their childhood to their children, and all feel that it is important that their children have an awareness of the history of their parents. As noted, survivors do report to communicate with their children about their lives before the Holocaust. However, it is likely that these communications are tinged with sadness and awareness of past losses. For immigrants the process of immigration may have been difficult, but this did not detract from the fond memories which they had of their original country.

All ten children report that their parents discussed their past with them. No children mention being afraid to question their parents about their past. For example, one child attributes little knowledge of her parents' past solely to her own lack of interest. Children of immigrants' thoughts and feelings regarding parental communication of their past is very different to that of children of survivors, as one child reports:

"It was very exciting, I used to love to hear these stories, but I am sure that children love to hear the stories of their parents."

Knowledge of the their parents' past is viewed as very important by four children. They feel that this provides them with an understanding of their own personal history. This point is well summed up in the following statement by an immigrants' child.

"I think it is interesting to know where everyone has come from and going to, or where they are at the moment."

It is in this area where the survivor child may be lacking. The continuity of past to present is shattered by the Holocaust, and lack of communication by parents to children of this event may represent a break in the understanding and continuity of personal history. Survivor children report these feelings of loss of personal history as a result of their parents silence about their past. Communication among immigrant parents and their children is not as difficult or conflictual as with the survivor sample. It therefore appears that there is far greater continuity with and understanding of the past for children of immigrants as opposed to children of survivors.

6). Family Patterns: The Immigrant Sample:

Findings based on the perceptions of survivors and immigrants suggest that minimal intergenerational transmission of negative patterns of psychological effects has been found among survivor families, and that the adaption of survivors and immigrants to their new

environment appears similar. The final step is to outline the functioning of immigrant families and compare this to survivor families. Those studies which report that survivor families are well functioning and that the children experience little difficulties, do so in relation to an immigrant comparison group (e.g. Gay and Shulman, 1978; Leon et al, 1981; Zlotogorski, 1983; 1985; Weiss et al, 1985; Rose and Garske, 1987).

A). The Influence of Immigration on Intrafamilial Functioning:

All of the immigrants were fairly young when they arrived in their new country, the oldest being twenty eight years, while the majority were under twenty. Those who were young, report being able to integrate well into their new society. For the children of these immigrants, their parents were already well adjusted to the demands of the new environment and their upbringing is generally reported to be no different to other South African children. All immigrants feel that their children are very well integrated into the new society.

Accounts by parents suggest that their immigration experience does not appear to have had much of an effect on the second generation. Children report being aware of their parents' background and history, but the immigrant status of parents is not felt to present a substantial influence within the dynamics of the family, nor inform the child rearing practices of parents. Eight children believe that they were raised in a manner similar to other South Africans. This sentiment is illustrated in the following statement by one child: "I am South African born and South African brought up in every way."

Only one immigrant reports that her migratory experiences had a pervasive influence on her life and describes ways in which this may have impacted on her sons. She believes that her early experiences of immigration contributed to her continual feelings of insecurity which are exacerbated by the political situation in South Africa:

"I have never been secure in my life. Then I start on my children and I say get out of here, get out of here, you've got to go, and, and I carried on so much they said to me: "If you don't stop we are not coming to visit you. We can't stand this ranting and raving."

Another child who lived in an Afrikaans environment, felt more differentiated from other children as a Jew than as a child of immigrants. The two Sephardic children report that they experienced a close and insular environment in Zaire. There was no difference between their experiences and the experiences of other children, because of the immigrant nature of the entire community. One child describes her upbringing in Zaire as follows:

"There was also a very close community in the Congo, because it was a very small place, and everyone knew each other, all my parents friends and the children, we all grew up together."

Two siblings did feel different to children of the established Jewish community, as the traditions and customs in their family were based on the norms of their parents' country of origin.

"Our traditions, Jewish traditions, the Haggim, you know, the German Jews had different traditions to the Eastern Jews, so we had different traditions. Different words used for the same thing, certain modes of bringing up children, which is different to the South African mode. I remember that she would sometimes make us wear pants, short pants, with things across and we hated to wear them, but that was German-like pants."

These two children state that because they were of German extraction, there was some animosity towards them in their neighbourhood. As a result, they report some degree of rejection of their past heritage.

"My parents used to speak German at home and we, the three children, used to take offense at it. We did not like German, because it had that enormous connotation... Because there was a stronger and inexplicable not favouring of Germans and favouring those of Eastern European extraction."

B). Adaption and Intrafamilial Functioning:

The majority of children do not feel that their parents' immigrant status differentiated them from other children of more established Jewish families. Only two report that the different background of their parents impacted on the way in which they were raised. However, the extent to which this influenced these two children is not reported to be undermining to their development. They feel that there were some subtle differences between them and other families, which created awareness of the different heritage of their parents, but did not hinder long term adaption to the South African society. The reports of the limited impact of the immigrant status of parents on their subsequent family dynamics, appears to point towards the adequate adaption of parents to their new Jewish community and host society.

All children report that their parents were able to cope and adapt adequately to their new environment. Six mention that their parents reported experiencing initial difficulties on arrival in their new country, but these were quickly overcome. All describe their parents as being happy in their new country, and able to establish themselves well socially and

financially. The two Sephardic children feel that their parents were able to create positive and fulfilling lives in Zaire, as both the host society and immigrant Jewish community were receptive to new immigrants. They also point out that although movement to South Africa was difficult for their parents, there was already a growing Sephardic community into which they were immediately accepted.

Children of immigrants, like children of survivors, are able to recognise the strengths which parents' displayed in overcoming difficulties related to their immigration experiences. This is illustrated in the following statement:

"I think she is a very intelligent women. I think she would have done a lot with her life if she had not had to leave her country at a crucial stage in her development and everything became insecure... I think that made a difference to my mother enormously. She is a very powerful women, demonstrative, gregarious. I think she had a lot of resources and always strived to do well whatever she did."

As with survivors, all immigrants describe themselves as close to their children. They speak with and see their children often. Similarly, all children report to be very close to either one or both parents. Close relations between parents and children, therefore, is not only a feature of the survivor population, but is characteristic of Jewish immigrant families as well. It is likely that this pattern of parent-children interaction is a feature of the South African Jewish population in general, especially as neither immigrants nor their children report their close relations to be linked to their family history of immigration.

Children do not report that their immigrant parents impose any other form of loyalties on them, for example to their country of origin (Metraux, 1992). As noted earlier, this may be a product of parents' positive attitude towards the new country, coupled with the destruction of their past communities. Therefore, there is no other existing community which the immigrant could hold a preference for, while the Jewish community in the new country appears to provide sufficient similarities with the past community to promote and ensure investment of loyalties. In addition, knowledge of what occurred in their previous countries is likely to destroy any affinity for that country. However, complete loss of a community could promote unconscious loyalties to a past life that was wiped out. Like survivors, this does not appear to be the case, as immigrants and their children report themselves to be well adjusted to the new society and to the Jewish group. There are no reports of alienation or stigmatization of children of immigrants by the established Jewish community, as with first generation immigrants.

From reports of children of immigrants it appears that they do not display the conflicts outlined in the literature (Goldstein and Goldscheider, 1968). As noted, only two children express some rejection of their parents' past. The majority feel well integrated into South African society and appear to have experienced not only adequate extrinsic acculturation, but are intrinsically familiar with the norms and behaviours of this society. They are not as religious as their parents, but all report that being Jewish is a central part of their identity. The conflict and rejection of past experienced by American second generation Jewry is related to their parents maintenance of ghetto life and customs and traditions similar to their Eastern Europe origins. In contrast, these children's reports of their parents successful adaption and financial achievements in their new country seems to illustrate the upward mobility and adequate integration of first generation Southern and Central African immigrants. As a result, it appears that children do not feel stifled by their parents continued adherence to a past life and there is no attempts to "escape" this, as in the American example.

C). Sephardic and Ashkenazi Immigrant Families:

As discussed in the survivor section, there are numerous differences in the circumstances of Sephardic and Ashkenazi immigrants, which may promote different familial relations between these two groups. Children of Sephardic immigrants are immigrants themselves. Therefore, they may experience difficulties in adapting to the new society, not as a result of their parents' past, but because of their own migratory experiences.

One Sephardic child reports that the initial move to the South African society was very difficult. She faced the problem of adapting to a new culture and learning a new language, while caring for her young children. However, she states that after some time they were able to adapt adequately, and are now financially and socially well established within the Sephardic Jewish community in Cape Town. Currently she describes herself as very happy in South Africa. The other child feels that he adapted very easily to this society as he arrived here at the age of ten.

D). Immigrant Families and Survivor families:

Reports of immigrants and their children suggest that patterns of family relations among immigrants appear similar to the patterns among their respective ethnic Jewish groups. In terms of adaption, immigrant families do not report any difficulties, nor do they perceive their child rearing practices to be fundamentally different to the established Jewish population. This refers primarily to Ashkenazi Jews. Children of Sephardic immigrant/refugees have obviously undergone a different experience being immigrants themselves. Additionally, the entire Sephardic population are immigrants, therefore child rearing practices and familial dynamics are likely to be similar across the group.

Based on the perceptions of these survivors, immigrants and their respective children, it appears that immigration presents a minimal influence on child rearing practices. This may be related to the reported adequate adaption of both to their new community. These findings imply that if specific patterns existed within survivor families, these would be related to the survivors' experience of trauma rather than that of immigration. However, the transmission of negative Holocaust effects from survivor parents to children, is not reported to occur to the extent which the early literature suggests. Similarly, the perspectives of these survivors and their children, appear to indicate that the generalized patterns of intrafamilial functioning outlined in the early research do not exist within these families. Currently both survivors' children and immigrants' children believe themselves to be well integrated and functioning adaptively within their new societies. This finding supports the claim that children of survivors are able to cope with and overcome any difficulties related to their parents' experience of trauma.

CHAPTER 7

CONCLUSIONS.

The most important research findings related to the intrafamilial patterns and dynamics within survivor families are summarized below. Some of the novel components of this research are then contemplated. These include the nature of the sample and the context in which the research was conducted. In the concluding section methodological limitations of the study are highlighted as recommendations for future research.

1). The Major Findings on Survivor Family Dynamics:

The study was conducted to reflect the narrative of the subjects, that being their own views of their situation. Findings are based on an analysis of survivors' and children's stories about their family lives. From this methodological approach it was apparent that the offspring showed no evidence of negative outcomes which had a serious impact on their coping and adult lives. The reports of survivors and their children suggest that certain differences in perceptions of family functioning exists among this sample as compared to previous literature. Findings outlined in the right column of the following table are based on these perceptions of parents and children regarding their family functioning.

Table A

Major Findings:

The Literature Suggests	The Study Shows
1). Knowledge/awareness Constant or limited communication. Both have negative implications.	Limited communication, but is awareness of parents' past. Children able to cope with and negotiate an understanding of minimal Holocaust communication.
2). Intergenerational Effects Always present. Interaction of negative and positive effects.	Minimal negative patterns. Positive patterns of coping among parents and children.
3). Child Rearing patterns A). Parental Patterns Over-protectiveness. Over-investment. Under-investment.	Appear to provide a warm and nurturant child raising environment. Holocaust

Emotional depletion\constriction.	past has limited implications for child rearing behaviour.
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B). Psychological Effects in Children

Negative Psychological effects:	Limited generalized negative patterns. Children display coping and resilient behaviour.
a). Separation-Individuation Problems.	
b). Repression of Anger.	Transmission of positive patterns of coping and hardiness from parents.
c). Identification with Exterminated Siblings.	Minimal negative implications of parental Holocaust past on the long term adult functioning of children.
d). Need to Fulfill Special Mission.	
e). Imprisonment in Parents Past.	
f). Guilt Feelings.	
g). Loss of Idealization of Parent.	
h). Feelings of Being Equated with the Oppressor.	

Holocaust effects are present within survivor families. Findings suggest that these occur largely at the level of transmission of knowledge and children's awareness of the Holocaust past of their parents. The silence of these families regarding the Holocaust represents one of the most major Holocaust effects. While the transmission of knowledge does not always occur through verbal communication, it does exist in parental patterns of behaviour and attitudes which increase children's awareness of their parents' past. Children feel that they are able to display adaptive coping behaviours in contemplating these Holocaust effects.

The findings from this study appear to support other recent studies which have found little difference between the functioning of children of survivors as compared to second generation immigrants (Gay and Shulman, 1978; Sigal and Weinfeld, 1985; Weiss et al, 1986, Rose and Garske, 1987) and that these children display little psychological disturbance in daily functioning (Greenblatt, 1978; Sigal and Weinfeld, 1985, Weiss et al, 1986). These studies also report that children of survivors focus on the positive qualities in their parents (Leventhal and Ontell, 1989) are able to cope with Holocaust effects within their family (Leon et al, 1981) and display resilient behaviour (Fogelman and Savran, 1979; 1980, Russell et al, 1985).

It is evident that research is embedded within a specific historical context. Developments in theory from the original stress-pathology model inherent in the psychoanalytic framework, has lead to the present recognition of the possibility of the existence of

resilience and coping after exposure to trauma. The findings of this study regarding survivor families support the current historical position on survivors, their children and their family dynamics.

The perceptions of survivors and their children suggest, firstly, that limited transmission of generalized patterns of negative effects exists within families, and, secondly, that both parents and children display adaptive coping behaviour. These second generation children are able to identify coping resources in their parents and develop their own coping abilities in relation to this. Coping in survivors also suggests that they may be able to overcome their trauma and provide a positive and effective child raising arena. An important finding is that within this sample Holocaust effects are not reported to exist in the child rearing practices of parents. According to the majority of children, conflicts which are related to the Holocaust are not usually re-enacted by the parent in relation to their patterns and practices of child rearing, in contrast to the findings of the early clinical research.

These survivor parents believe that they are able to create positive family environments and have warm, intimate interpersonal relationships. Children's reports, on the whole, confirm this. In agreement with Zlotogorski (1983; 1985), subjects' reports also suggest that a large degree of variance between families exists, therefore, generalized conclusions regarding the functioning of these families is limited. In only one of seven families were the intrafamilial dynamics undermined by the survivor mother's inability to adequately provide an emotionally supportive and caring environment for her daughter. Within the other families, the reports of both parents and their children suggest that the parental trauma did not undermine the parent/child relationship to a serious degree. There are small occurrences within families which create awareness of their parents' past among children. However these were not experienced by the children as having a negative impact on their childhoods, and do not appear to have compromised their adult psychological status.

Specific patterns of psychological effects among these children as related to parental experience of the Holocaust, are not reported to exist in the negative form outlined in the early literature (e.g. Sonnenberg, 1974). Children's reports of modeling the coping and resourceful behaviour displayed their parents, illustrates the existence of positive patterns of psychological effects in families. This suggests that the transmission of effects which promote life-enhancing forces may be greater than the transmission of detrimental ones (Hass, 1990). Alternatively children may be able to find an "acceptable compromise" between the negative implications of their parents' past and the development of positive qualities, based both on combating these effects and on their parents ability to display active coping (Russell et al, 1985:575).

Reports of survivor parents and their children point towards the general conclusion that there is very little transmission of generalized patterns of negative effects among survivors and children. The Holocaust influence is not perceived as very salient within these families as compared to previous reports. Both parents and children do not view the Holocaust to be entrenched within the structure of the family, nor do they perceive their familial relationships as heavily influenced by Holocaust related dynamics. Parents' and children's accounts regarding family patterns largely coincide, and the majority indicate that their family is well adjusted and well functioning. Patterns of resilience reported among children, as modeled on parental coping behaviours, also indicate the positive environments created within these families.

Within this sample, it appears that confounding effects of immigration for survivors and prior experience of persecution for immigrants is minimal. The reports of survivors and immigrants suggest that they were well adapted to their first country of migration. The majority of children of both immigrants and survivors do not to feel different to children of the established Jewish community. In relation to family patterns, similarities between survivor and immigrant family functioning do not appear to be related to either their similar background or to experiences of persecution or immigration. This may, therefore, be a product of their ability to adapt adequately to their new society.

2). The Nature and Context of the Sample:

Although this research agrees with the findings of recent studies on survivor families, there are numerous differences in this study which may play a role in the findings of reports of minimal intergenerational transmission of patterns of negative effects. Two of the most salient points refer to (1). the nature of the sample and (2). the context of the research.

As noted in the previous chapter, only one parent in all sample families was a Holocaust survivor. In families where only one parent experienced trauma, the input from this parent relating to the Holocaust may be lessened by the input of the other parent. Similarly, in this sample there was no opportunity for the development of "dyadic victim units" where the each parents' experience of trauma contributes to and reinforces the experience of the other (Davidson, 1980a:13). Having one parent who is not a survivor, may ensure that the dynamic of the Holocaust is not predominant within the family, whereas with two survivor parents' the opposite may occur. In one-parent survivor families, the other parent may be able to aid the survivor in coping with and working through their past trauma. Additionally none of these parents lost children in the Holocaust. Loss of a child may be one of the most damaging consequences of the Holocaust (Sonnenberg, 1974; Kestenberg and Kestenberg, 1982). Specific patterns related to this loss could not occur within these

families. Similarly, the point has also been raised regarding the restricted nature of the sample. Those who agreed to be interviewed could be more aware of and perhaps more resolved as to the implications of being a Holocaust survivor, or child of survivors. This could then play a role in the overall findings of limited perceived influence of the Holocaust on intrafamilial dynamics.

The context of the research is also different to previous research. Survivors in Central and Southern Africa underwent a unique experience of survivorship in relation to survivors elsewhere. Points have already been raised which illustrate potential advantages for the survivor in Africa, for example, they were removed from the war situation and its aftermath. Over and above this, the vast amount of literature and interest generated in North America and Israel regarding survivors led to a specific manner of understanding the post traumatic functioning of survivors in those countries. This did not occur in the Central and Southern African context.

Knowledge and understanding of phenomena is constructed in relation to a given historical period. Construction of understanding impacts on the form and nature of the phenomenon being described. There is a good deal of evidence that psychological states and reactions to them are influenced by the production of professional knowledge about these matters (Swartz and Levett, 1990). What needs to be considered is whether the Holocaust literature tended to produce a variety of pictures of the Holocaust survivor and the existence of intergenerational effects, during the post-war period. The probability of these constructs entering the public domain and serving to shape the understanding which survivors themselves have of the way the Holocaust affected them, must also be considered. If survivors and their offspring live in communities within which a certain form of "survivor psychology" has been produced and internalized, then this may well take on a life of its own in determining "the Holocaust effects" which are reported by researchers. It thus becomes expected that survivor families will have a particular psychological profile.

The review of literature on survivors depicts the development of the theory surrounding survivorship. When the initial conspiracy of silence regarding survivors was broken in the 1960's, extensive psychoanalytically oriented research into this population began. This theorizing and study of survivors and their children was based in North America and Israel with some European input (e.g. Eitinger, 1961; 1962; 1965; 1971). The theory which developed within a psychoanalytically based framework utilized the stress-pathology model in understanding the post traumatic functioning of survivors (e.g. Neiderland, 1961; 1964; 1968a; 1968b). The survivor was depicted as inevitably displaying severe difficulties in coping and functioning within the post-war period. Similarly, the early theory on survivor families also characterized their intrafamilial functioning as being

adversely influenced by the Holocaust past of the parents, with negative implications for children of survivors. Therefore, the early work focused on assessing and understanding psychopathology in survivors and the damaging consequences of this for their children. Over the next thirty years, the orientation of theorists began to swing slowly towards a focus on concepts of coping and adaption in survivors and resilience in their children. Research conducted with non-clinical survivor and second generation samples from the late 1970's, reported degrees of ego regeneration and coping in survivors, and limited differences between children of survivors and controls. The understanding of the functioning of survivors and their families, therefore, altered in accordance with changing theory which broadened conceptualizations.

The construction and understanding of survivorship within South Africa may to be different to that of North America or Israel. In the South and Central African contexts, no psychological literature on survivors exists. This may be because relative to North America, Israel and even some European countries, very few survivors settled in Africa. There has also been little influx of the overseas notions of the psychology of the survivor, so that the influence of professional knowledge regarding survivorship may not be as prominent within this society. The current study, being the first conducted on the survivor population in Cape Town, adopts a focus which is in line with the recent theoretical emphasis on coping and resilience. Thus, the period of research which emphasized pathology in survivors did not occur within this context.

The experience of survivors in other countries also differed in terms of their continual exposure to Holocaust related stimuli. Within the North American, Israeli or European environment, at a psychological or social level, survivors were continually faced with the repercussions of their experiences. In Europe this referred to being exposed to the aftermath of the devastation and destruction created by the war. Within the Israeli context, the Holocaust story represents part of the social fabric of this community, while in the North America there was a continually developing interest in the psychological functioning of this population. In contrast, given the limited literature which exists on survivors in Central and Southern Africa, it appears that the predominant professional attitude within this context was the perpetuation of the conspiracy of silence. Therefore, survivors in Africa were left to develop very much unhindered by theoretical constructs regarding the psychological profile the survivor.

Differences in construction of survivorship between the African context and the North American or Israeli context is highlighted in the following examples:

Currently in Cape Town there is a survivor association. However this association only meets once or twice a year, for example to commemorate the Holocaust on Yom Hashoa (Day of Remembrance of the Holocaust). It is not a formal meeting environment where issues are raised and discussed, but appears to represent a social gathering of a supportive nature. In relation to children of survivors, there are no formal second generation support groups in Cape Town. These groups are prominent in North America. At the Second International Conference of Children of Holocaust Survivors, which the author attended, more than half of the group of forty children of survivors were involved in survivor support groups (Parallel Workshops). Interestingly, the issues raised in the workshop groups centred around similar patterns to those outlined in the theoretical literature. This displays the difference in awareness of the possible implications of the Holocaust among children of survivors in South Africa and those abroad. In the latter instance, these children are more cognisant of processing their situation in terms of the prevalent psychological and social understanding. This difference in awareness of the consequences of the Holocaust among survivors and their children may be related to the salience of Holocaust related constructs within the larger survivor centres overseas.

3). Limitations and Recommendations:

The major limitations of this study refer to the research methodology and sample utilized. The scale of the research in terms of number of survivor families, was small for studying intergenerational processes. No formal means of assessment of family functioning was conducted, because of subjects' refusal to complete the McMaster Family Assessment Device. Therefore, conclusions are drawn solely on the basis of subjects' perceptions regarding their family functioning, with no standardized measure to assess whether these perceptions reflect the reality of the situation. Future research would be well instructed to combine a qualitative and quantitative design, including the use of a structured measure of family functioning. Additionally, comparisons between the qualitative and quantitative data derived by these two measurements, could result in some interesting findings. Observation of family patterns and interactions may also provide greater indepth understanding of survivor families. The drawback of this method is of course time constraints and its considerable demands on the family.

A research design which includes families where both parents are survivors and families with only one survivor parent may provide an interesting comparison. However, this research cannot be conducted in Cape Town, as only three known couples consist of two survivors, one family is untraceable, and two refused to be interviewed. It is also unknown whether these couples have children. As an addition to the current research design, future research could include a comparison group of established Jewish families in order to determine if family patterns common to survivors and immigrants are similar to the

established Jewry. This would clarify whether patterns of family functioning and behaviour of immigrants and survivors are similar because they are related to their origin culture or because they have adopted the behavioural repertoire of the new dominant Jewish culture. Additionally, patterns such as the protectiveness of survivor and immigrant parents, feelings of affinity towards Israel and strong identification with the Jewish group are known to represent predominant patterns of South African Jewry (Herman, 1977; Cohen, 1986). Use of this comparative design would allow for clarification of these points.

As outlined in chapter four, this type of research lends itself to the inevitable problem of reconstructive bias, and presents difficulties when attempting to obtain verification data. The Holocaust occurred almost fifty years ago, and the passage of history coupled with the nature of the traumatic event may obscure the process of recollection. In relation to children of survivors, many appear better able to understand and come to terms with their parents' trauma in their adult lives, and all report currently to have a greater knowledge of the Holocaust past of their parent. These factors may influence their childhood recollections. A further point to note in relation to the restricted nature of the sample, is that those survivors who refused to be interviewed or refused permission for their children to be contacted, could be suffering the most from the aftereffects of their experience of trauma. As noted earlier, this lead to limitations in the generalizability of findings and undermines the external validity of this study.

The current focus of research includes the assessment of the third generation or grandchildren of survivors (Rosenthal and Rosenthal, 1980; Rubinstein, Cutter and Templer et al, 1989-90; Hass, 1990). The findings of the existence of Holocaust effects within survivor families points to the relevance of the study of this population in order to determine whether these occur in second and third generation families. Reports of limited intergenerational transmission of generalized negative patterns of effects may suggest that these types of psychological effects will not be prominent in later generations. If this is the case, study of these populations may support the claims of coping and resilience within the second generation. It is likely, however, that future generations of survivor families will not be allowed to forget their parents' or grandparents' trauma, especially given the degree of interest which is generated in relation to survivors and their children abroad. Professional knowledge regarding survivors and the second generation may contribute in promoting awareness of the Holocaust within subsequent generations.

One of the most disturbing findings on embarking on this research was the discovery of the dearth of literature on survivors who settled in Central and Southern Africa. This applies not only to the psychological inquiries, but to numerous other disciplines.

Survivors in Africa have been living here since the war. Their numbers are small and diminishing, yet they represent a distinct segment of the Jewish population. Given the interesting and varied history of this group, which includes numerous migrations and further losses, and incorporates distinct ethnic divisions, this population could prove to be particularly fascinating to researchers. Many have had to confront cumulative hardships after the Holocaust (such as being refugees). This contributes to understanding how survivors cope not only with everyday existence, but also with further adversity. Additionally, the distinction of two ethnic groups provides depth to understanding factors such as coping and adaption, which are common across these groups. Caution is warranted, however, when studying this population, in that intensive research may result in continual revoking of the experience of the Holocaust and this may, in itself, promote negative effects.

The novel aspects of this population provide for numerous variations in terms of research and in promoting understanding of survivors in general. It is hoped that this research will foster further inquiries into this population of survivors and their families, especially in order to ameliorate the lack of existing literature. As is illustrated by the findings of this study, research on survivors in South Africa has much to contribute to an understanding of survivors of the Holocaust and other traumatized populations.

References:

- Aleksandrowicz, D.R. (1973). Children of Concentration Camp Survivors. In E.J. Anthony and C. Koupernik (eds.). The Child in His Family (Vol. 2). New York: John Wiley and sons.
- Almagor, M and Leon, G.R. (1989). Transgenerational Effects of the Concentration-Camp Experience. In P. Marcus and A. Rosenberg (eds.). Healing Their Wounds: Psychotherapy with Holocaust Survivors and Their Families. New York: Praeger.
- Amery J. (1986). At the Mind's Limits: Contemplations by a Survivor on Aushwitz and its Realities. New York: Schocken Books.
- Antonovsky, A.; Moaz, B.; Dowty, N. and Wijsenbeek, H. (1971). Twenty-five Years Later: A limited Study of the Sequelae of the Concentration Camp Experience. Social Psychiatry, 6, 186-193.
- Archdeacon, T.J. (1985). Problems and Possibilities in the Study of American Immigration and Ethnic History. International Migration Review, 19 (1), 112-34.
- Auerhahn, N.C. and Prelinger, E. (1983). Repetition in the Concentration Camp Survivor and Her Child. International Review of Psycho-Analysis, 10, 31-46.
- Baddeley, A. (1979). The Limitations of Human Memory: Implication for the Design of Retrospective Surveys. In L. Moss and H. Goldstein (eds.). The Recall Method in Social Survey. London: University of London Institute of Education.
- Barocas, H.A. (1971). A Note on the Children of Concentration Camp Survivors. Psychotherapy: Theory, Research and Practice, 8 (2), 189-190.
- Barocas, H.A. (1975). Children of Purgatory: Reflections on the Concentration Camp Survival Syndrome. International Journal of Social Psychiatry, 21, 87-92.
- Barocas, H.A. and Barocas, C.B. (1973). Manifestations of Concentration Camp Effects on the Second Generation. American Journal of Psychiatry, 130 (7), 820-821.
- Barocas, H.A. and Barocas, C.B. (1979). Wounds of the Fathers: The Next Generation of Holocaust Victims. International Review of Psycho-Analysis, 6, 331-340.

- Berger, D.M. (1977). The Survivor Syndrome: A Problem of Nosology and Treatment. American Journal of Psychotherapy, 31, 238-251.
- Berger, D.M. (1985). Recovery and Repression in Concentration Camps Survivors: A Psychodynamic Reevaluation. Canadian Journal of Psychiatry, 30, 54-59.
- Berger, L. (1988). The Long-Term Psychological Consequences of the Holocaust on Survivors and Their Offspring. In R.L. Braham (ed.). The Psychological Perspectives of the Holocaust and of Its Aftermath. New York: Columbia Universities Press.
- Bergmann, M.S. (1982). Recurrent Problems in the Treatment of Survivors and Their Children. In M.S. Bergmann and M.E. Jucovy (eds.). Generations of the Holocaust. New York: Basic Book Publishers.
- Bergmann, M.S. and Jucovy, M.E. (1982). Generations of the Holocaust. New York: Basic Book Publishers.
- Bergmann, M.V. (1982). Thoughts on Superego Pathology of Survivors and Their Children. In M.S. Bergmann and M.E. Jucovy (eds.). Generations of the Holocaust. New York: Basic Books Publishers.
- Berry, J.W. (1980). Acculturation as Varieties of Adaption. In A.M. Padilla (ed.). Acculturation Theory, Models and Some New Findings. Boulder CO: Westview Press.
- Berry, J.W. (1988). Acculturation and Psychological Adaption: A Conceptual Overview. In J.W. Berry and R.C. Annis (eds.). Ethnic Psychology: Research and Practice with Immigrants, Refugees, Native Peoples, Ethnic Groups and Sojourners. Amsterdam: Swets and Zeitinger.
- Berry, J.W. (1992). Acculturation and Adaption in a New Society. In Migration Quarterly Review, 30, 69-85.
- Berry, J.W. and Kim, U. (1988). Acculturation and Mental Health. In P.R. Dasen, J.W. Berry and N. Sartorius. Health and Cross Cultural Psychology: Towards Applications. London: Sage Publications.

(Eds)

- Berry, J.W.; Kim, U.; Minde, T. and Mok, D. (1987). Comparative Studies of Acculturative Stress. International Migration Review, 21, 491-511.
- Berry, J.W., Tribble, J.E. and Olmedo, E.L. (1986). Assessment of Acculturation. In J. Lonner and J.W. Berry (eds.). Field Methods in Cross-Cultural Research. London: Sage Publications.
- Bettelheim, B. (1943). Individual and Mass Behaviour in Extreme Situations. Journal of Abnormal and Social Psychology, 38, 417-452.
- Bettelheim, B. (1952). Surviving and Other Essays. New York: Alfred A. Knopf.
- Bettelheim, B. (1986). Surviving the Holocaust. London: Fontana.
- Brenner, M. (1981). Patterns of Social Structure in the Research Interview. In M. Brenner (ed.). Social Method and Social Life. London: Academic Press.
- Brenner, M. (1985). Intensive Interviewing. In M. Brenner, J. Brown and D. Canter (eds.). The Research Interview: Uses and Approaches. Chicago: Academic Press.
- Brenner, M., Brown, J. and Canter, D. (1985). The Research Interview: Uses and Approaches. Chicago: Academic Press.
- Brenner, R. (1980). The Faith and Doubt of Holocaust Survivors. New York: The Free Press.
- Brody, E.B. (1970). Migration and Adaption: The Nature of the Problem. In E. Brody (ed.). Behavior in New Environments. Newbury Park: Sage Publications.
- Brown, J. and Sime J. (1981). A Methodology for Accounts. In M. Brenner (ed.). Social Method and Social Life. London: Academic Press.
- Carmelly, F. (1975). Guilt Feelings in Concentration Camp Survivors: Comments of a Survivor. Journal of Jewish Communal Services, 2, 139-144.
- Carmil, D. and Breznitz, S. (1991). Personal Trauma and World View - Are Extremely Stressful Experiences Related to Political Attitudes, Religious Beliefs, and Future Orientation? Journal of Traumatic Stress, 4 (3), 393-405.

- Carmil, D. and Carel, S. (1986). Emotional Distress and Satisfaction in Life Among Holocaust Survivors - A Community Study of Survivors and Controls. Psychological Medicine, 16, 141-149.
- Cath, S.H. (1981). The Aging Survivor of the Holocaust. Discussion: The Effects of the Holocaust on Life-Cycle Experiences: The Creation and Recreation of Families. Journal of Geriatric Psychiatry, 14 (2), 155-163.
- Charney, I.W. (1990). To Commit or Not Commit to Human Life: Children of Victims and Victimizerers - All. Contemporary Family Therapy, 12 (5), 407-426.
- Chataway, C.J. (1989). Acculturation Experiences, Appraisal, Coping and Adaption: A Comparison of Hong Kong Chinese, French, and English Students in Canada. Canadian Journal of Behavioral Sciences, 21, 295-209.
- Chodoff, P. (1970). The German Concentration Camp as a Psychological Stress. Archives of General Psychiatry, 22, 78-87.
- Cohen, S. (1984). The Historical Background. In M. Arkin (ed.). South African Jewry. Cape Town: Oxford University Press.
- Danieli, Y. (1980). Countertransference in the Treatment and Study of Nazi Holocaust Survivors and Their Children. Victimology, 5 (2-4), 355-367.
- Danieli, Y. (1981a). The Group Project for Holocaust Survivors and Their Children. Children Today, 16 (5), 11-33.
- Danieli, Y. (1981b). Differing Adaptational Styles in Families of Survivors of the Nazi Holocaust. Children Today, 16, 6-34.
- Danieli, Y. (1981c) The Treatment of Prevention of Long-Term Effects of Intergenerational Transmission of Victimization: A Lesson from Holocaust Survivors and Their Children. In C.R. Fiddley (ed.). Trauma and Its Wake: The study and Treatment of Post-Traumatic Stress Disorder. New York: Brunner/Mazel.
- Danieli, Y. (1985). The Aging Survivor of the Holocaust. Discussion: On the Achievement of Integration in Aging Survivors of the Nazi Holocaust. Journal of Geriatric Psychiatry, 14 (2), 191-210.

- Danieli, Y. (1988). The Heterogeneity of Postwar Adaption in Families of Holocaust Survivors. In R.L. Braham (ed.). The Psychological Perspectives of the Holocaust and Its Aftermath. New York: Columbia Universities Press.
- David, H.P. (1970). Involuntary International Migration: Adaptation of Refugees. In E. Brody (ed.). Behavior in New Environments. Newbury Park: Sage Publications
- Davidson, S. (1980a). The Clinical Effects of Massive Psychic Trauma in Families of Holocaust Survivors. Journal of Marital and Family Therapy, 6, 11-21.
- Davidson, S. (1980b). Transgenerational Transmission in the Families of Holocaust Survivors. International Journal of Family Psychiatry, 1, 95-112.
- Dawes, A. (in press). The Emotional Impact of Political Violence. In A. Dawes and D. Donald (eds.). Childhood and Adversity: Psychological Perspectives From South African Research. Cape Town: David Phillip
- De Wind, E. (1971). Psychotherapy After Traumatization Caused by Persecution. In H. Krystal and W.G. Niederland (eds.). Psychic Traumatization in Individuals and Communities. Boston: Little, Brown and Company.
- Des Pres, T. (1976). The Survivor: An Anatomy of Life in the Death Camps. New York: Pocket Books.
- Des Pres, T. (1989). Excremental Assault. In J.K. Roth and M. Berenbaum (eds.). Holocaust: Religious and Philosophical Implications. New York: Paragon House.
- Dimsdale, J.E. (1980). The Coping Behavior of Nazi Concentration-Camp Survivors. In J.E. Dimsdale (ed.). Survivors, Victims and Perpetrators. Essays on the Nazi Holocaust. New York: Publishing Corporation.
- Dor-Shav, N.K. (1978). On the Long-Range Effects of Concentration Camp Internment on Nazi Victims: 25 Years Later. Journal of Consulting and Clinical Psychology, 40 (1), 1-11.
- Dwork, D. (1991). Children With A Star: Jewish Youth in Nazi Europe. London: Yale University Press.

- Eaton, W.W.; Sigal, J.J. and Weinfeld, M. (1982). Impairment in Holocaust Survivors After 33 Years: Data from an Unbiased Community Sample. American Journal of Psychiatry, 139 (6), 773-777.
- Eitinger, L. (1961). Pathology of the Concentration Camp Syndrome. Preliminary Report. Archives of General Psychiatry, 6 371-379.
- Eitinger, L. (1962). Concentration Camp Survivors in the Post-War World. American Journal of Orthopsychiatry, 32, 367-375.
- Eitinger, L. (1965). Concentration Camp Survivors in Norway and Israel. New York: Humanities Press.
- Eitinger, L. (1971). Organic and Psychosomatic Aftereffects of Concentration Camp Imprisonment. In H. Krystal and W.G. Niederland (eds.). Psychic Traumatization. Aftereffects in Individuals and Communities. Boston: Little Brown.
- Eitinger, L. (1981). Studies on Concentration Camp Survivors: The Norwegian and Global Contexts. Journal of Psychology and Judaism, 6 (1), 23-32.
- Eitinger, L. and Strom, A. (1973). Mortality and Morbidity after Excessive Stress: A Follow-up Study of Norwegian Concentration Camp Survivors. New York: Humanities Press.
- Eitinger, L. and Strom, A. (1981). New Investigation on the Mortality and Morbidity of Norwegian Ex-Concentration Camp Prisoners. Israel Journal of Psychiatry and Related Sciences, 18 (3), 173-195.
- Epstein, A. (1982). Mental Phenomena Across Generations: The Holocaust. Journal of the American Academy of Psychoanalysis, 10 (4), 565-570.
- Epstein, H. (1979). Children of the Holocaust: Conversations with Sons and Daughters of Survivors. New York: Putnam.
- Epstein, N.B. and Bishop, D.S. (1981). Problem-Centered Systems Therapy of the Family. In A.S. Gurman and D.P. Kniskern (eds.). Handbook of Family Therapy. New York: Brunner/Mazel Publications.
- Feldstein, S. and Costello, L. (1974). The Ordeal of Assimilation. NY: Anchor Books.

- Fogelman, E. and Savran, B. (1979). Therapeutic Groups for Children of Holocaust Survivors. International Journal of Group Psychotherapy, 29 (2), 211-235.
- Fogelman, E. and Savran, B. (1980). Brief Group Therapy with Offspring of Holocaust Survivors: Leaders' Reactions. American Journal of Orthopsychiatry, 50 (1), 96-107.
- Foster, D. (1987). Detention and Torture in South Africa: Psychological, Legal and Historical studies. Cape Town: David Phillip.
- Frankl, V. (1959). Man's Search for Meaning: An Introduction to Logotherapy. New York: Pocket Books.
- Freud, A. and Dann, S. (1951). An Experiment in Group Upbringing. Psychoanalytic Study of the Child, 6, 241-263.
- Freyberg, J.T. (1980). Difficulties in Separation-Individuation as Experienced by Offspring of Nazi Holocaust Survivors. American Journal of Orthopsychiatry, 50 (1), 87-95.
- Freyberg, J.T. (1989). The Emerging Self in the Survivor Family. In P. Marcus and A. Rosenberg (eds.). Healing Their Wounds: Psychotherapy with Holocaust Survivors and their Families. New York: Praeger.
- Friedman, P. (1949). Some Aspects of Concentration Camp Psychology, American Journal of Psychiatry, 4 (2), 601-605.
- Furman, E. (1973). The Impact of the Nazi Concentration Camps on the Children of Survivors. In E.J. Anthony and C. Koupernik (eds.). The Child in his Family (vol. 2). New York: John Wiley & Sons.
- Gay M. and Shulman, S. (1978). Comparison of Children of Holocaust Survivors with Children of the General Population in Israel. Mental Health and Society, 5, 252-256.
- Gilbert, M. (1986). The Holocaust: The Jewish Tragedy. Great Britain: William Collins.

- Glazer, N. and Moynihan, D.P. (1963). Beyond the Melting Pot. Cambridge, Mass: MIT Press
- Gold, S.J. (1992). Refugee Communities: A Comparative Field Study: London: Sage Publications.
- Goldstein, S. and Goldscheider, C. (1968). Jewish Americans, Three Generations in a Jewish Community. New Jersey: Prentice Hall
- Gorden, R.L. (1975). Interviewing: Strategy, Techniques and Tactics. London: The Dorsey Press.
- Gordon, M.M. (1964). Assimilation in American Life. NY: OUP Press.
- Greenblatt, S. (1978). The Influence of Survival Guilt on Chronic Family Crises. Journal of Psychology and Judaism, 2, 19-28.
- Grossman, F.G. (1989). The Art of the Children of Terezin. A Psychological Study. Holocaust and Genocide Studies, 4 (2), 213-229.
- Grubrich-Simitis, I. (1981). Extreme Traumatization as Cumulative Trauma. The Psychoanalytic Study of the Child, 36, 415-450.
- Grubrich-Simitis, I. (1984). From Concretism to Metaphor. Thoughts in Some Theoretical and Technical Aspects of the Psychoanalytic Work with Children of Holocaust Survivors. The Psychoanalytic Study of the Child, 39, 301-319.
- Hafner, H. (1968). Psychological Disturbances Following Prolonged Persecution. Social Psychiatry, 3 (3), 79-88.
- Hass, A. (1990). In the Shadow of the Holocaust: the Second Generation. Ithaca: Cornell University Press
- Heller, D. (1982). Themes of Culture and Ancestry Among Children of Concentration Camp Survivors. Psychiatry, 45, 247-261.
- Herman, S. (1977). Jewish Identity: a Social Psychological Perspective. Beverly Hills: Sage Publications.

- Hertz, D.G. (1990). Trauma and Nostalgia: New Aspects on the Coping of Aging Holocaust Survivors. Israel Journal of Psychiatry and Related Sciences, 27 (4), 189-198.
- Herzog, J. (1982). World Beyond Metaphor: Thought on the Transmission of Trauma. In M.S. Bergmann and M.E. Jucovy (eds.). Generations of the Holocaust. New York: Basic Books Publishers.
- Hindley, C.B. (1979). Problems of Interviewing in Obtaining Retrospective Information. In L. Moss and H. Goldstein (eds.). The Recall Method in Social Survey. London: University of London Institute of Education.
- Hoppe, K.D. (1968a). Re-somatization of Affects in Survivors of Persecution. International Journal of Psycho-Analysis, 49, 324.
- Hoppe, K.D. (1968b). Psychotherapy with Survivors of Nazi Persecution. In H. Krystal (ed.). Massive Psychic Trauma. New York: International Universities Press.
- Hoppe, K.D. (1971a). Chronic Reactive Aggression in Survivors of Severe Persecution. Comprehensive Psychiatry, 12 (3), 230-237.
- Hoppe, K.D. (1971b). The Aftermath of Nazi Persecution Reflected in Recent Psychiatric Literature. In H. Krystal and W.G. Niederland (eds.). Psychic Traumatization Aftereffects in Individuals and Communities. Boston: Little Brown.
- Hoppe, K.D. (1984). Severed Ties. In S.A. Luel and P. Marcus (eds.). Psychoanalytic Reflections on the Holocaust: Selected Essays. New York: KTAV Publishing House.
- Jaffe, R. (1970). The Sense of Guilt Within Holocaust Survivors. Jewish Social Studies, 32, 307-314.
- Jucovy, M.E. (1985). Telling the Holocaust Story: A Link Between the Generations. Psychoanalytic Inquiry, 5, 31-49.
- Jucovy, M.E. (1989). Therapeutic Work with Survivors and Their Children: Recurrent Themes and Problems. In P. Marcus and A. Rosenberg (eds.). Healing Their Wounds: Psychotherapy with Holocaust Survivors and Their Families. New York: Praeger.

- Kahana, B.; Harel, Z; and Kahana, E. (1989). Clinical and Gerontological Issues Facing Survivors of the Nazi Holocaust. In P. Marcus and A. Rosenberg (eds.). Healing Their Wounds: Psychotherapy with Holocaust Survivors and Their Families. New York: Praeger.
- Katz, S. (1985). Post Holocaust Dialogues: Critical Studies in Modern Jewish Thought. N.Y.: NY. University Press.
- Kestenberg, J.S. (1972). Psychoanalytic Contributions to the Problem of Children of Survivors from Nazi Persecution. Israel Annals of Psychiatry and Related Disciplines, 10, 311-325.
- Kestenberg, J.S. (1980). Psychoanalyses of Children of Survivors from the Holocaust: Case Presentations and Assessment. Journal of the American Psychoanalytic Association, 28, 775-804.
- Kestenberg, J.S. (1982). Survivor Parents and Their Children. In M.S. Bergmann and M.E. Jucovy (eds.). Generations of the Holocaust. New York: Basic Books.
- Kestenberg, J.S. (1987). The Development of the Ego-Ideal, its Structure in Nazi Youth and in Persecuted Jewish Children. Issues in Ego Psychology, 10 (2), 22-34.
- Kestenberg, J.S. and Kestenberg, M. (1980). Psychoanalyses of Children of Survivors from the Nazi Persecution: The Continuing Struggle of Survivor Parents. Victimology, 5 (2-4) 368-373.
- Kestenberg, J.S. and Kestenberg, M. (1982). The Experience of Survivor-Parents. In M.S. Bergmann and M.E. Jucovy (eds.). Generations of the Holocaust. New York: Basic Books Publishers.
- Kijak, M. and Funtowicz, S. (1982). The Syndrome of the Survivor of Extreme Situations. Definitions, Difficulties, Hypotheses. International Review of Psycho-Analysis, 9, 25-33.
- Kinsler, F. (1981). Second Generation Effects of the Holocaust: The Effectiveness of Group Therapy in the Resolution of the Transmission of Parental Trauma. Journal of Psychology and Judaism, 6 (1), 53-67.

- Kirk, J. and Miller, M.L. (1986). Reliability and Validity in Qualitative Research. London: Sage Publications.
- Klein, H. (1971). Families of Holocaust Survivors in the Kibbutz: Psychological Studies. In H. Krystal and W.G. Niederland (eds.). Psychic Traumatization: Aftereffects in Individuals and Communities. Boston: Little, Brown & Company.
- Klein, H. (1973). Children of the Holocaust: Mourning and Bereavement. In E.J. Anthony and C. Koupernik (eds.). The Child in His Family (Vol. 2). New York: John Wiley & sons.
- Klein, H. (1983). The Meaning of the Holocaust. Israel Journal of Psychiatry and Related Sciences, 20 (1-2), 119-128.
- Klein, H.; Zellermyer, J. and Shanan, J. (1963). Former Concentration Camp Inmates on a Psychiatric Ward. Archives of General Psychiatry, 8, 334-342.
- Klein-Parker, F. (1988). Dominant Attitudes of Adult Children of Holocaust Survivors Toward Their Parents. In J.P. Wilson; Z. Harel and B. Kahana (eds.). Human Adaption to Extreme Stress: From the Holocaust to Vietnam. New York: Plenum Press.
- Kral, V.A. (1951). Psychiatric Observations Under Severe Chronic Stress. American Journal of Psychiatry, 108, 185-192.
- Krausz, E. (1980). Studies of Israeli Society. Vol. 1. Migration, Ethnicity and Community. New Brunswick: Transaction Books.
- Krell, R. (1979). Holocaust Families: The Survivors and Their Children. Comprehensive Psychiatry, 20, 560-568.
- Krell, R. (1982). Family Therapy with Children of Concentration Camp Survivors. American Journal of Psychotherapy, 37 (4), 513-522.
- Krell, R. (1985). Holocaust Survivors and Their Children: Comments on Psychiatric Consequences and Psychiatric Terminology. Annual Progress in Child Psychiatry and Development, 631-641.

- Krystal H. (1968). Massive Psychic Trauma. New York: International Universities Press.
- Krystal, H. (1984). Integration and Self Healing in Posttraumatic States. In A. Luel and P. Marcus (eds.). Psychoanalytic Reflections on the Holocaust: Selected Essays. New York: KTAV Publishing House.
- Krystal, H. (1991). Integration and Self-Healing in Post-Traumatic States: A Ten Year Retrospective. American Imago, 48 (1), 93-118.
- Krystal, H. and Niederland, W.G. (1968). Clinical Observations on the Survivor Syndrome. In H. Krystal (ed.). Massive Psychic Trauma. New York: International Universities Press.
- Krystal, H. and Niederland, W.G. (1971). Psychic Traumatization. Aftereffects in Communities and Individuals. Boston: Little Brown & Company.
- Last, U. (1988). The Transgenerational Impact of Holocaust Trammatization. International Journal of Mental Health, 17 (4), 72-89.
- Lazarus, R.S.; Cohen, J.B.; Folkman, S.; Kanner, A. and Schaefer, C. (1980). Psychological Stress and Adaption: Some Unresolved Issues. In H. Selye (ed.). Selye's Guide to Stress Research. 1. New York: Van Nostrand Reinhold.
- Lazarus, R.S. and Folkman, S. (1984). Stress, Appraisal and Coping. New York: Springer Publishing Company.
- Lazerwitz, B. and Rowitz, L. (1964). The Three-Generations Hypothesis. American Journal of Sociology. 69 529-538.
- Leon, G.R.; Butcher, J.N.; Kleinman, M.; Goldberg, A. and Almagor, M. (1981). Survivors of the Holocaust and Their Children: Current State and Adjustment. Journal of Personality and Social Psychology, 41 (3), 503-516.
- Leventhal, G. and Ontell, M.K. (1989). A Descriptive Demographic and Personality Study of Second-Generation Jewish Holocaust Survivors. Psychological Reports, 64, 1067-1073.

- Lichtman, H. (1984) Parental Communication of Holocaust Experiences and Personality Characteristics Among Second-Generation Survivors. Journal of Clinical Psychology, 40, 914-924.
- Lifton, R.J. (1967). Death in Life: Survivors of Hiroshima. New York: Simon & Schuster.
- Lifton, R.J. (1968). Observation on Hiroshima Survivors. In H. Krystal (ed.). Massive Psychic Trauma. New York: International Universities Press.
- Lifton, R.J. (1973). The Sense of Immortality: On Death and the Continuity of Life. American Journal of Psychoanalysis, 33, 3-15.
- Lifton, R.J. and Markusen, E. (1990). The Genocidal Mentality: Nazi Holocaust and Nuclear Threat. London: Macmillan.
- Lobel, T.E.; Kav-Venaki, S. and Yahia, M. (1985). Guilt Feelings and Locus of Control of Concentration Camp Survivors. International Journal of Social Psychology, 31 (3), 170-175.
- Lolas, F. (1986). Behavioral Text and Psychological Context: On Pragmatic Verbal Behavior Analysis. In L.A. Gottschalk, F. Lolas and L.L. Viney (eds.). Content Analysis of Verbal Behavior. Berlin: Springer-Verlag.
- Lomranz, J.; Shmotkin, D.; Zechovy, A. and Rosenberg, E. (1985). Time Orientation in Nazi Concentration Camp Survivors: Forty Years After. American Journal of Orthopsychiatry, 55 (2), 230-236.
- Luchterhand, E. (1967) Prisoner Behavior and Social System in the Nazi Concentration Camps. International Journal of Social Psychiatry, 13, 245-264.
- Luchterhand, E. (1970). Early and Late Effects of Imprisonment in Nazi Concentration Camps: Conflicting Interpretation in Survivor Research. Social Psychiatry, 5, 102-110.
- Luchterhand, E.G. (1971). Sociological Approaches to Massive Stress in Natural and Man-Made Disasters. In H. Krystal and W.G. Niederland (eds.). Psychic Traumatization: Aftereffects in Individuals and Communities. Little, Brown & Company.

- Marcus, P. (1984). Jewish Consciousness After the Holocaust. In A. Luel and P. Marcus (eds.). Psychoanalytic Reflections on the Holocaust: Selected Essays. KTAV Publishing House.
- Marcus, P. and Rosenberg, A. (1988). A Philosophical Critique of the 'Survivor Syndrome' and Some Implications for Treatment. In R.L. Braham (ed.). The Psychological Perspectives of the Holocaust and of Its Aftermath. New York: Columbia Universities.
- Marcus P. and Rosenberg, A. (1989). The Religious Life of Holocaust Survivors and Its Significance for Psychotherapy. In P. Marcus and A. Rosenberg (eds.). Healing Their Wounds: Psychotherapy with Holocaust Survivors and Their Families. New York: Praeger.
- Matussek, P. (1971). Internment in Concentration Camps and its Consequences. N.Y. Springer
- Meerloo, J.A.M. (1963). Delayed Mourning in Victims of Extermination Camps. Journal of the Hillside Hospital, 12, 96-98.
- Meerloo, J.A.M. (1969). Persecution Trauma and the Reconditioning of emotional Life: A Brief Survey. American Journal of Psychiatry, 125 (9), 1187-1191.
- Metraux, J.-C. (1992). Loss, Loyalty to One's Origins and Conception of Time. Three Key-Concepts for the Understanding of the Refugee's Crisis and Acculturation Process. Paper presented to the Symposium on Refugee Children.
- Miles, M.B. and Huberman, A.M. (1984). Qualitative Data Analysis: A Sourcebook of New Methods. London: Sage Publications
- Moghaddam, F.M. (1988). Individualistic and Collective Integration Strategies Among Immigrants: Toward a Mobility Model of Cultural Integration. In J.W. Berry and R.C. Annis (eds.). Ethnic Psychology: Research and Practice with Immigrants, Refugees, Native Peoples, Ethnic Groups and Sojourners Amsterdam: Swets & Zeitinger.
- Mor, N. (1990). Holocaust Messages from the Past. Contemporary Family Therapy, 12 (5), 371- 379.

- Morgan, D.L. (1988). Focus groups as Qualitative research. Newbury Park: Sage.
- Mouton, J. and Marais, H.C. (1990). Basic Concepts in the Methodology of the Social Sciences. HSRC
- Murphy, H.M.B. (1973a). The Low Rate of Mental Hospitalization Shown by Immigrants to Canada. In C. Zwingmann and M. Pfister-Ammende (eds.). Uprooting and After. New York: Springer-Verlag.
- Murphy, H.M.B. (1973b). Migration and the Major Mental Disorders: A Reappraisal. In C. Zwingmann and M. Pfister-Ammende (eds.). Uprooting and After. New York: Springer-Verlag.
- Murphy, H.M.B. (1977). Migration, Culture and Mental Health. Psychological Medicine, 7, 677-684.
- Nadler, A.; Kav-Venaki and Gleitman, B. (1985). Transgenerational Effects of the Holocaust: Externalization of Aggression in Second Generation of Holocaust Survivors. Journal of Consulting and Clinical Psychology, 53 (3), 365-369.
- Nathan, T.S.; Eitinger, L. and Winnik, H.Z. (1963). The Psychiatric Pathology of Survivors of the Nazi Holocaust. Israel Annals of Psychiatry and Related Disciplines, 1, 133.
- Nemeth, M.C. (1971). Psychosis in a Concentration Camp Survivor: A Case Presentation. In H. Krystal and W.G. Niederland (eds.). Psychic Traumatization. Aftereffects in Communities and Individuals. Boston: Little, Brown & Company.
- Newman, L. (1979). Emotional Disturbance in Children of Holocaust Survivors. Social Casework: The Journal of Contemporary Social Work, 43-50.
- Niederland, W.G. (1961). The Problem of the Survivor. Journal of the Hillside Hospital, 10, 233-247.
- Niederland, W.G. (1964). Psychiatric Disorders Among Persecution Victims. Journal of Nervous and Mental Disorders, 139, 458-474.

- Niederland, W.G. (1968a). Clinical Observations on the "Survivor Syndrome".
International Journal of Psycho-Analysis, 49, 313.
- Niederland, W.G. (1968b). The Problem of the Survivor. In H. Krystal (ed.). Massive
Psychic Trauma. New York: International Universities Press.
- Niederland, W.G. (1981) The Survivor Syndrome: Further Observations and Dimensions.
Journal of the American Psychoanalytic Association, 29, 413-425.
- Niederland, W.G. (1982). Psychiatric Status of Holocaust Survivors. American Journal of
Psychiatry, 139 (12), 1646.
- Olmedo, E.L. (1979). Acculturation: A Psychometric Perspective. American
Psychologist, 34 (11), 1061-1070.
- Ornstein, A. (1985). Survival and Recovery. Psychoanalytic Inquiry, 5, 99-130.
- Parallel Workshops. Second International Conference of Children of Holocaust Survivors.
July 1992, Jerusalem.
- Pedersen, S. (1949). Psychopathological Reactions to Extreme Social Displacements.
Psycho-Analytic Review, 36, 344-354.
- Perel, E. and Saul, J. (1989). A Family Therapy approach to Holocaust Survivor
Families. In P. Marcus and A. Rosenberg (eds.). Healing Their Wounds:
Psychotherapy with Holocaust Survivors and Their Families. New York: Praeger.
- Phillips, R.E. (1978). Impact of Nazi Holocaust on Children of Survivors. American
Journal of Psychotherapy, 32, 370-377.
- Podietz, L.; Belmont, H.; Shapiro, M., Zwerling, I.; Ficher, I.; Eisenstein, T. and Levick
(1984). Engagement in Families of Holocaust Survivors. Journal of Marital and
Family Therapy, 10 (1), 43-51.
- Porter, N. (1981). Is There a Survivor's Syndrome? Psychological and Socio-Political
Implications. Journal of Psychology and Judaism, 6 (1), 33-52.
- Potter, J. and Mulkay, M. (1985). Scientists Interview Talk. Interviews as a Technique for
Revealing Participants' Interpretative Practices. In M. Brenner, J. Brown and D.

- Cantor (eds.). The Research Interview: Uses and Approaches. London: Academic Press.
- Prince, R.M. (1980). A Case Study of a Psychohistorical Figure: The Influence of the Holocaust in Identity. Journal of Contemporary Psychotherapy, 11 (1), 44-60.
- Rakoff, V., Sigal, J. and Epstein, N. (1967). Children and Families of Concentration Camp Survivors. Canada's Mental Health, 14, 24-26.
- Rappaport, E.A. (1968). Beyond Traumatic Neurosis. International Journal of Psycho-Analysis, 49, 719-731.
- Rappaport, E.A. (1971) Survivor Guilt. Midstream, August- September, 41-47.
- Robinson, S. (1979). Late Effects of Persecution in Persons Who - as Children or Young Adolescents - Survived Nazi Occupation in Europe. Israel Annals of Psychiatry, 17, 209-214.
- Robinson, S and Winnik, H.Z. (1980). Second Generation of the Holocaust. Holocaust Survivors' Communication of Experience to their Children and its Effects. Israel Journal of Psychiatry and Related Sciences, 18 (2), 99-107.
- Rose, S.L. and Garske, J. (1987). Family Environment, Adjustment, and Coping Among Children of Holocaust Survivors: A Comparative Investigation. American Journal of Orthopsychiatry, 57 (3), 332-344.
- Roseman, S. and Handelsman, I. (1992). The Psychohistorian as Delegate of a Double-Binding Community. The Journal of Psychohistory, 19 (3), 343-350.
- Rosenberger, L. (1973). Children of Survivors. In E.J. Anthony and C. Koupernik (eds.). The Child in His Family (Vol. 2). New York: John Wiley & sons.
- Rosenbloom, R. (1983). Implications of the Holocaust For Social Work. Social Casework: The Journal of Contemporary Social Work, April, 205-213.
- Rosenman, S. (1984). The Psychoanalytic Writer on the Holocaust and Bettelheim. The American Journal of Social Psychiatry, 4 (2), 62-71.

- Rosenthal, P.A. and Rosenthal, S. (1980). Holocaust Effect in the Third Generation: Child of Another Time. American Journal of Psychotherapy, 34, 572-580.
- Rubinstein, I; Cutter, F. and Templer, D.I. (1989-90). Multigenerational Occurrence of Survivor Syndrome Symptoms in Families of Holocaust survivors. Omega: Journal of Death and Dying, 20 (3), 239-244.
- Russell, A. (1974). Late Psychosocial Consequences in Concentration Camp Survivor Families. American Journal of Orthopsychiatry, 44 (4), 611-618.
- Russell, A; Plotkin, D. and Heapy, N. (1985). Adaptive Abilities in Nonclinical Second-Generation Holocaust Survivors and Controls: A Comparison. American Journal of Psychotherapy, 39 (4), 564-579.
- Salvendy, J.T. (1983). The Mental Health of Immigrants: a Reassessment of Concepts. Canada's Mental Health, 31, 9-16.
- Schappes, M. (1980). Holocaust and Resistance. Journal of Contemporary Psychotherapy, 11 (1), 61-69.
- Schneider, G. (1975). Survival and Guilt Feelings of Jewish Concentration Camp Victims. Jewish Social Studies, 37 (1), 74-83.
- Searle, W. and Ward, C. (1990). The Prediction of Psychological and Sociocultural Adjustment During Cross-Cultural Transitions. International Journal of Intercultural Relations, 14, 449-464.
- Seltzer, R. (1980). Jewish People. Jewish Thought. New York: Macmillan.
- Shanan, J. (1989). Surviving the Survivors: Late Personality Development of Jewish Holocaust Survivors. International Journal of Mental Health, 17 (4), 42-71.
- Shanan, J. and Shahar, O. (1983). Cognitive and Personality Functioning of Jewish Holocaust Survivors During Midlife Transition (46-65) in Israel. Archives of Psychology, 135, 275-294.
- Shanon, J. (1970a). The Subconscious Motivation for the Appearance of Psychosomatic Skin Disorders in Concentration Camp Survivors and Their Rehabilitation. Psychosomatics, 3, 178-182.

- Shanon, J. (1970b). Psychosomatic Skin Disorders in Survivors of Nazi Concentration Camps. Psychosomatics, 2, 95-98.
- Shuval, J. (1957-58). Some Persistent Effects of Trauma: Five Years After the Nazi Concentration Camps. Social Problems, 5, 230-243.
- Siegal, L.M. (1980). Holocaust Survivors in Hasidic and Ultra-Orthodox Jewish Populations. Journal of Contemporary Psychotherapy, 11 (1), 15-31.
- Sigal, J.J. (1971). Second-Generation Effects of Massive Psychic Trauma. In H. Krystal and W.G. Niederland (eds.). Psychic Traumatization: Aftereffects in Individuals and Communities. Boston: Little Brown & Company.
- Sigal, J.J. (1973). Hypotheses and Methodology in the Study of Families of Holocaust Survivors. In E.J. Anthony and C. Koupernik (eds.). The Child in His family (vol. 2). New York: John Wiley & sons.
- Sigal, J. J. and Rakoff, V. (1971). Concentration Camp Survival: A Pilot Study of the Effects on the Second Generation. Journal of the Canadian Psychiatric Association, 16, 393-397.
- Sigal, J.J.; Silver, D.; Rakoff, V. and Ellin, B. (1973). Some Second-Generation Effects of Survival of the Nazi Persecution. American Journal of Orthopsychiatry, 43 (3), 320-327.
- Sigal, J.J. and Weinfeld, M. (1985). Control of Aggression in Adult Children of Survivors of the Nazi Persecution. Journal of Abnormal Psychology, 94 (4), 556-564.
- Sklare, M. (1958). The Jews. Social Patterns of an American Group. Glencoe: Free Press.
- Solkoff, N. (1981). Children of Survivors of the Nazi Holocaust: A Critical Review of the Literature. American Journal of Orthopsychiatry, 51 (1), 29-41.
- Solkoff, N (1982). Survivors of the Holocaust: A Critical Review of the Literature. Catalogue of Selected Documents in Psychology, 12 (4), 47.

- Sonnenberg, S. (1974). Children of Survivors. Journal of the American Psychoanalytic Association, 22, 200-204.
- Steinberg, A. (1989). Holocaust Survivors and Their Children; A Review of the Clinical Literature. In P. Marcus and A. Rosenberg (eds.). Healing Their Wounds: Psychotherapy with Holocaust Survivors and Their Families. New York: Praeger.
- Straker, G.; Moosa, F.; Becker, R. and Nkwale, M. (1992). Faces in the Revolution. The Psychological Effects of Violence on Township Youth in South Africa. Claremont: David Phillip Publishers.
- Swartz, L. and Levett, A. (1990). Political Oppression and Children in South Africa: the Social Construction of Damaging Effects. In N.C. Manganyi and A. du Toit. Political Violence and the Struggle in South Africa. London: Macmillan.
- Taft, R. (1973). Migration: Problems of Adjustment and Assimilation in Immigrants. In P. Watson (ed.). Psychology and Race. Middlesex: Penguin Books.
- Taft, R. (1977). Coping with Unfamiliar Cultures. In N. Warren (ed.). Studies in Cross Cultural Psychology (Vol. 1). London: Academic Press.
- Taft, R. (1979). A Comparative Study of the Initial Adjustment of Immigrant Schoolchildren in Australia. International Migration Review, 13, 71-80.
- Tagg, S.K. (1985). Life Story Interviews and Their Interpretation. In M. Brenner, J. Brown and D. Canter (eds.). The Research Interview: Uses and Approaches Chicago: Academic Press.
- Terry, J. (1984). The Damaging Effects of the "Survivor Syndrome". In A. Luel and P. Marcus (eds.). Psychoanalytic Reflections on the Holocaust: Selected Essays. New York: KTAV Publishing House.
- Trautman, E.C. (1971). Violence and Victims in Nazi Concentration Camps and the Psychopathology of the Survivors. In H. Krystal and W.G. Niederland (eds.). Psychic Traumatization. Aftereffects in Individuals and Communities. Boston: Little Brown.
- Trossman, B (1968). Adolescent Children of Concentration Camp Survivors. Canadian Psychiatric Association Journal, 13, 121-123.

- Tuteur, W. (1966). One Hundred Concentration Camp Survivors. Twenty Years Later. Israel Annals of Psychiatry and Related Disciplines, 4 (1), 78-90.
- Venzlaff, U. (1964). Mental Disorders Resulting From Racial Persecution Outside of Concentration Camps. International Journal of Social Psychiatry, 10, 177-183.
- Wanderman, E. (1976). Children of Families of Holocaust Survivors: A Psychological Overview. In L.Y. Steinitz and D.M. Szonyi (eds.). Living After the Holocaust. Reflections by the Post-War Generation in America. New York: Bloch Publishing Company.
- Weinfeld, M.; Sigal, J.J. and Eaton, W.W. (1981). Long-Term Effects of the Holocaust on Selected Social Attitudes and Behaviors of Survivors: A Cautionary Note. Social Forces, 60 (1), 1-19.
- Weinfeld, M and Sigal, J.J. (1986). Knowledge of the Holocaust Among Adult Children of Survivors. Canadian Ethnic Studies, 18, 60-78.
- Weiss, E.; O'Connell A.N. and Siiter, R. (1986). Comparisons of Second-Generation Holocaust Survivors, Immigrants, and Nonimmigrants on Measures of Mental Health. Journal of Personality and Social Psychology, 50 (4), 828-831.
- Winnik, H.Z. (1966). Further Comments Concerning Problems of Late Psychopathological Effects of Nazi-Persecution and their Therapy. Israel Annals of Psychiatry and Related Disciplines, 5, 1-16.
- Zlotogorski, Z. (1983). Offspring of Concentration Camp Survivors: The Relationship of Perceptions of Family Cohesion and Adaptability to Levels of ego-functioning. Comprehensive Psychiatry, 24 (4), 345-355.
- Zlotogorski, Z. (1985). Offspring of Concentration Camp Survivors: A Study of Levels of Ego Functioning. Israel Journal of Psychiatry and Related Sciences, 22 (3), 201-209.