Workshop Report—Children of Survivors

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It is difficult for analysts to examine the effects of the holocaust on those who experienced it and on those of their children born during or after the war. It was hoped that our workshop might examine the psychic condition of children of survivors and establish the specific effects of growing up with survivor-parents. A review of past studies of survivors and their children indicates that the effects of overwhelming psychic trauma may not be readily visible for long periods, but that unresolved parental conflicts can affect the parent-child relationship. The survivor shares the holocaust experience with the child, makes it a shared "secret," which is often denied or symbolically disguised; the child participates in the denial or the symbolic reworking of the triumph of survival.

Formal clinical presentations included the analysis of a boy whose father had fled the Nazis. Partly as a result of his experience, the father was markedly depressed. In consequence, the patient experienced serious difficulties in identifying with his father and resolving his oedipal conflicts. The boy also had phobic symptoms concerning travel and strange places, which were connected with his ideas about his father's escape. His belief that his father had fled the Nazis in panic turned out to represent a projection of the boy's oedipal fear of capture and retaliation. It was this unconscious fear that led the boy to experience fear of traveling. Only after completion of his analysis did he ascertain the facts concerning his father's orderly migration to the United States.

The analysis of a boy with a learning disturbance was also reported. As a baby this patient was in hiding with his mother and was extremely close to her. He was nursed so that he would not cry, lest noise lead to discovery. This boy could not cope with his postwar experience, which included oedipal rivalry with a stepfather and greater distance from his mother. His learning disturbance represented a rejection of this new inner and outer reality.

A final presentation described a boy born after the war. The war left his mother guilty, and dependent on her own parents. She was unable to promote successful separation-individuation in her child. This child entered analysis, then, with severe defects in ego function.

In the latter cases, the mothers of the patients were in their late adolescence during the war. The reaction to this experience continued during maternal development. The strengths and weaknesses of these women were determined by their previous personality development, war experiences, and later circumstances. All these factors influenced the ability of these women to be successful mothers, and no specific difficulty with specific war experiences could be seen as the major determinant of psychopathological development in either of the boys.

Two problems confronted the workshop from the outset: (1) How should "survivor" be defined? Should a definition reflect specific experiences, specific psychological states, or some combination of both? (2) What constitutes specificity in the psychological condition of the children of survivors? For an observation to be considered specific, must it be of something seen only in the children of survivors? Must such a psychic state be observed in all such children, or with a particular frequency? Do we depend exclusively on observation from psychoanalysis? Do we search for common factors in metapsychological observation, or behavioral observation, or some combination of both?

What follows were our attempts at answers; attempts to develop working definitions for use during
1. **Definition of survivor**: We came to a *broad* definition, which depended on disruption of a way of life, as well as psychological experience and reaction. The survivor lost his property, his homeland. He had been branded a sinner, his sin being that he was Jewish. He was rejected by his social group and condemned to die. He experienced a severe narcissistic injury, with accompanying change in the self representation, at times feeling himself to be worthless. He experienced a world in which sadomasochistic fantasies became realities. This formed an assault on the habitual defense structure. A renewed effort at characterological integration of the related preoedipal drives was necessary. The mere fact of having survived resulted in enormous guilt, because the survivor felt, often with justification, that if he had died, another might have lived. In some cases, when the failure to integrate preoedipal drives resulted in the emergence of sadistic fantasies, there was guilt over the recognition of such fantasies as well.

2. **Definition of specificity and source of observation**: It was suggested that a combination of metapsychological factors, rather than behavioral ones, might prove to be specific. Assessment should be based on psychoanalytic exploration, and workshops should discuss case material. This task was difficult, because of the scarcity of analytic data. Several participants thought that some children of survivors cannot tolerate the abstinence of analysis. Others emphasized that analysts need to overcome their own resistances, both to accepting survivors' children into analysis and recognizing the effect of the holocaust on parents and children. Participants brought in case material from both analysis and intensive therapy, noting the source and reliability of the data. As for specificity, it was hoped that we would define conditions seen in all, or most, children of survivors.

Clinical evidence supported the position that every child of a survivor is unique and responds to life experiences uniquely. Generalizations did not seem to be justified. However, many voiced the view that further metapsychological assessment in psychoanalysis might reveal common denominators. Although not enough is known to formulate generalizations, this should not stifle further efforts. The mechanisms so far defined were not universally found, and were not unique to these children. No mechanism could be considered specific or exclusive, if specificity was taken to mean something observed in all or most such children, and exclusiveness was taken to mean something seen in no other children.

Members of the workshop suggested the following as frequently observed phenomena in the children of survivors.

**Parent-Child Interaction**

1. Survivors frequently experience great anxiety about their children, wish to avoid having their children experience suffering or pain.

2. Parents identify their children with exterminated siblings. There is a resurrection fantasy, and the child is forced to fit into a mold reflecting parental expectations for the dead child. This prevents maturation.

3. Survivors are furious at their parents for abandoning them. It is unclear how this anger is brought into the relationship with the next generation.

4. Parental overcloseness results in adolescent delinquency. Possibly, parental superego defects induced during camp experiences result in superego defects in children. This, too, can result in delinquency.

5. In the parent, there is a disruption of "integration for parenthood." Ego functions necessary for child rearing are lost, to some degree, in each survivor. Capacity to reintegrate varies.

**The Ego—Identifications, Splitting, Ideals**

1. A trend to "psychopathy" (a term used here to reflect styles of ego function, as well as the quality of superego formation) was noted in the children of survivors. They showed a need to "get away with things."

2. "Psychopathy" was the result of identification with the surviving parent, who "got away."

3. There was empathy and identification with the parent as the object of persecution, and identification with the Nazi aggressor. Confusing and contradictory identifications led to
ego splitting in children.

4. Oedipal resolution was impeded because of difficulties the children experienced in identifying with parents. The better the parents had integrated the camp experience, the more successfully guilt and depression were resolved, the easier it was for children to form parental identifications.

5. Some parental ego ideals the children did conform to—exaggerated ethnic identity, for example—reflect attempts to undo the humiliation of the camp. Another of the children's reactions was rejection of parental ideals, exemplified by marrying out of the faith.

6. Acting out was seen in survivor parents and children. The latter acted out parental experiences as they either knew or fantasied them. In some cases this led to paranoid, psychotic feelings of persecution.

7. The way public rejection of the survivor is conveyed to children reflects parental attitudes concerning their Jewishness. It was tentatively suggested that this societal rejection and narcissistic humiliation was quite different from the experience of political prisoners in camps.

**Sadomasochism, the Superego, Guilt, and Mourning**

1. The survivor has an altered self representation, a view of himself as sadistically omnipotent. An archaic-like superego develops in both survivors and children. Both generations experience guilt at having survived.

2. It was suggested that there was an uncommonly great influx of sadomasochistic fantasies and behavior in survivors and children. This question was not resolved.

3. The effect mourning parents have on their children was raised and needs more examination.

**Conclusion**

The mechanisms described were neither specific nor exclusive for the children of survivors. Participants wondered to what extent resistance to treatment explained why few survivors' children have been analyzed. In some cases, severe ego damage precludes analysis of survivors and their children. A possible factor in the scarcity of reported and/or analyzed cases is the failure of analysts to connect parental holocaust experiences and the problems of child analysands. It was regrettable that more specific information did not emerge, and it was hoped that the lack of specific conclusions will not discourage future work. One final idea was that more could be learned by studying the analyses of surviving parents in conjunction with the analyses of their children. One such case is known, and might be discussed in the future.