

**Adelman, A. (1995). "Traumatic Memory and the Intergenerational Transmission of Holocaust Narratives." *The Psychoanalytic Study of the Child* 50: 343 - 367.**

By comparing reminiscences of mothers who are Holocaust survivors to their daughters' reflections on the Holocaust, this study exposes the process of transmission and the roles of affect regulation, narrative cohesion, and symbolic representation in the transmission process. The extent of the parent's integration of affect significantly alters her child's ability to express her knowledge of the Holocaust and cope with painful emotions.

**Apfel, R. J. and B. Simon (1996). *Psychosocial Interventions for Children of War: The Value of a Model of Resiliency, Medicine and Global Survival*: 21.**

"The authors focus first on psychosocial interventions that enhance the resiliency of children. Utilizing the focus on interventions that enhance resiliency, the authors address the question of how basic relief and development programs and interventions (providing food, clothing, shelter, basic medical needs, and education) already provide important psycho-social interventions, and how specifically designated psychosocial interventions can be integrated with and enhance these ongoing programs."

**Auerhahn, N. and D. Laub, Eds. (1998). *Intergenerational Memory of the Holocaust. International Handbook of Multigenerational Legacies of Trauma*. New York Plenum Press.**

"In this chapter, we summarize our current understanding of the many ways massive psychic trauma is known, for central to the response to trauma are the issues of knowing and forgetting. The chapter focuses on the attempt to know, the defenses against knowledge, the different levels of knowing that are possible, the inevitable limits of knowing, and implications for healing, and will progress from an initial focus on survivors to a later focus on the next generation."

**Auerhahn, N. and E. Prelinger (1983). "Repetition in the Concentration Camp Survivor and Her Child." *International Review of Psycho-Analysis* 10(31 - 46).**

Analysis of a child with survivor parents led to this discussion of transference and parent-child psychodynamic relationships. Both the child and the parent are dependant upon each other to reconstruct certain aspects of the past, to redress a damaged sense of self. The child seeks to imagine the parent's experiences to obtain a better understanding, while the parent needs the child to be a sympathetic listener and be understood. An analyst working with such patients should attempt to reveal what the child is trying to understand and reconstruct, the atmosphere at home and how it is affected, and the world view the child forms because of these dynamics and events.

**Axelrod, S., O. L. Schnipper, et al. (1980). "Hospitalized Offspring of Holocaust Survivors." *Bulletin of the Menninger Clinic* 44(1): 1 - 14.**

After six survivor children were admitted to a Jewish hospital, observations of the hospitalized survivor child were conducted. This article reviews these observations and asserts that adequate treatment of psychiatric hospitalized survivor children requires a deep understanding of the role as a survivor child on development, behavior, and personality.

**Bachar, E., M. Cale, et al. (1994). "Aggression Expression in Grandchildren of Holocaust Survivors - A Comparative Study." *Israel Journal of Psychiatry and Related Sciences* 31(1): 41 - 47.**

97 Israeli children were studied, with 54 being grandchildren of Holocaust survivors and the rest being controls. Each child was administered a test that assesses the extent of externalization of aggression in response to frustrating events. The two groups did not differ in aggressive expression, leading to the conclusion that transgenerational effects may cease in the third generation.

**Baider, L., T. Peretz, et al. (2000). "Transmission of Response to Trauma? Second Generation Holocaust Survivors' Reaction to Cancer." *American Journal of Psychiatry* 157: 904 - 910.**

In a study population of women with breast cancer, 106 second generation women were compared to a 102 women control group. All were assessed using the Mental Attitude to Cancer Scale, the Brief Symptom Inventory, and the Impact of Event Scale, while considering background information. Offspring of Holocaust survivors scored higher on the Brief Symptom Inventory and the Impact of Event Scale. In conclusion, second-generation survivors are more susceptible to psychological distress in a traumatic situation, such as breast cancer.

**Baranowsky, A., M. Young, et al. (1998). "PTSD Transmission: A Review of Secondary Traumatization in Holocaust Survivor Families." *Canadian Psychology* 39(4): 247 - 255.**

Many survivors of the Holocaust quickly established families, and within families the phenomena of trauma transmission can be observed. Parents tend to either obsess over re-telling their stories or keep an all-consuming silence, which are cited in the literature. Current literature also supports the evidence for transgenerational transmission, and a call is made for rigorous empirical studies to test these theories.

**Barocas, H. A. and C. B. Barocas (1973). "Manifestations of Concentration Camp Effects on the Second Generation." *American Journal of Psychiatry* 130(7): 820 - 821.**

The authors summarize the means in which survivor syndrome is translated to the children of Holocaust survivors, manifesting itself through symptoms such as depression, guilt, and aggression and inhibiting autonomous growth. They end with a call for further research and treatment options.

**Barocas, H. A. and C. B. Barocas (1979). "Wounds of the Fathers: The Next Generation of Holocaust Victims." *International Review of Psycho-Analysis* 6: 331 - 340.**

The authors explore the transgenerational effects of the Holocaust on the children of survivors. A significant number of survivors' children seek professional help as adults. The authors examine child rearing techniques practiced by survivors parents and the implications of these socializing practices on transference and psychological development.

**Barocas, H. A. and C. B. Barocas (1980). "Separation-Individuation Conflicts in Children of Holocaust Survivors." *Journal of Contemporary Psychotherapy* 11(1): 6 - 14.**

This article specifically addresses psychic trauma and transmission effects on offspring of Holocaust survivors. Mahler's separation-individuation theories are applied to ailments such as depression, guilt, and aggression. These children may be more susceptible to low self-esteem, narcissistic vulnerability, and other identity problems. Further research is needed to develop preventive measures.

**Bar-On, D. (1990). "The Use of a Limited Personal Morality to Rationalize Horrendous Evil: Interviews with an Auschwitz Doctor and His Son." *Journal of Traumatic Stress* 3(3): 415 - 427.**

"In the present study, an interview with a German physician from Auschwitz who deliberately did not take part in the massive selection process, and an interview with his son are analyzed. The father-physician creates an effect of normalization by a careful selective description of his moral and emotional reactions to what he experienced in Auschwitz and since then. It is proposed that the selection is motivated by the father's covert quest for mastery together with an overt perception of himself as, paradoxically, 'moral.' An analysis of the son's report suggests that the father's strategy has been transmitted unwittingly to the son. The son's interview is interpreted as a limited vehicle for going beyond what the parent transmitted and for partially confronting and working through the parent's role during the Nazi era."

**Bar-On, D. (1995). "Four Encounters Between Descendants of Survivors and Descendants of Perpetrators of the Holocaust: Building Social Bonds Out of Silence." *Psychiatry* 58: 225 - 245.**

"This report tries to describe how transgenerational effects of man-made catastrophes, such as the Holocaust, can be acknowledged and worked through many years after their occurrence, in a slightly different way than previously reported: through an open dialogue in a self-structured group, composed of descendants of Jewish survivors and descendants of Nazi perpetrators."

**Bar-On, D. (1996). "Descendants of Nazi Perpetrators: Seven Years After the First Interviews." *Journal of Humanistic Psychology* 36(1): 55 - 74.**

"Numerous publications describe the original sample of descendants of Nazi perpetrators in Germany: the silencing by both their families and the German society of their parents' participation in the extermination process during the Third Reich, their working-through process, the "double wall" phenomenon between them and their parents, the logic of descendants' moral arguments, their parents' paradoxical morality, the descendants' identification and pseudoidentification with the victims. In addition, several television programs and journalists have interviewed the German self-help group that evolved as a by-product of this study. The present discussion is a follow-up of that study, 7 1/2 years after the initial interviews took place, and concentrates on three perspectives: (1) The perspective of the German interviewees: In what way did the numerous interviews, the group work, or both affect their life perspective? (2) the positive and

negative roles of the media in this process; and (3) the role of the author as interviewer, participator, observer."

**Bar-On, D., J. Eland, et al. (1998). "Multigenerational Perspectives on Coping with the Holocaust Experience: An Attachment Perspective for Understanding the Developmental Sequelae of Trauma across Generations." *International Journal of Behavioral Development* 22(2): 315 - 338.**

"In this paper, we advance a new approach to the intergenerational transmission of Holocaust experiences, by focusing on attachment theory. The approach is used as a framework for interpretation of the results of three studies on Holocaust survivors and their offspring, from different countries (The Netherlands, Canada, and Israel) and based on different conceptual approaches and methods of data collection (quantitative as well as qualitative).

**Bar-On, D. and A. Gaon (1991). "'We Suffered Too': Nazi Children's Inability to Relate to the Suffering of the Victims of the Holocaust." *Journal of Humanistic Psychology* 31(4): 77 - 95.**

Direct narratives from three groups were analyzed using the following criteria: distinctiveness of description, target of events, and distance from the describer. The three groups analyzed were children of perpetrators, children of Holocaust witnesses, and descendents of children of war, who were not involved in Nazi activities. From the data, the researchers argue that the inability to empathize with others' suffering may encourage those who promote discrimination and persecution of minorities.

**Baron, L., M. Reznikoff, et al. (1993). "Narcissism, Interpersonal Adjustment, and Coping in Children of Holocaust Survivors." *The Journal of Psychology* 127(3): 257 - 269.**

The theory of intergenerational transmission was tested by studying two groups of children. The first group consisted of children with parents who lost their own parents early in life, were child survivors, or were in hiding and the children themselves were either an only child or the first born and did not participate in survivors group. The second group were children of survivors without these circumstances or that their parents immigrated before WWII. While the theory suggests that the first group would result in lower personal adjustment and coping mechanisms and higher narcissistic beliefs, the results did not support personality differences associated with their parents' survivor status.

**Berger, L. (1988). "The Long-Term Psychological Consequences of the Holocaust on the Survivors and their Offspring." *The Psychological Perspectives of the Holocaust and of Its Aftermath*: 175-221.**

After the liberation of the concentration camps, many survivors remained stateless in displaced persons' (DP) camps. It took months if not years for these people to be relocated, where an attempt at "normal" life again could finally begin. Remarkably, few people considered the psychiatric needs of the survivors, except for Friedman. This article reviews the literature previously published on psychological needs for survivors, and the continuing need for studying this unique population.

**Brody, S. (1973). "The Son of a Refugee." *The Psychoanalytic Study of the Child* 28: 169 - 191.**

This case study hopes to reveal some connections between a father's escape from Nazi Germany and his son's neurotic behavior. At age 9, the boy began therapy due to his behavior, namely extreme irritability, negativism, restlessness, and stomach pains. After all symptoms subsided besides some irritability and anxiety, the boy's unconscious fantasies about his father's escape were found to be the cause. Only when these hidden material became vocalized did the patient recover fully.

**Buchholz, M. B. (1999). "Modern Families: the Nazi Past and "Fatherlessness"." *International Forum of Psychoanalysis* 8: 61 - 71.**

"I would like to present here experiences from the family therapy standpoint, showing how from virtually 'underneath' the level of modern, present-day conflict disposition, unconscious inheritances and unconscious identifications continue to have an effect and are manifested in the formation of psychic structure and in couple relationships. How unconscious inheritances from the Nazi period are entangled with modern conflict disposition will be described here with the use of case material."

**Chaitin, J. (2002). "Issues and Interpersonal Values Among Three Generations in Families of Holocaust Survivors." *Journal of Social and Personal Relationships* 19(3): 379 - 402.**

This study analyzed how each of the three generations of Israeli Holocaust survivor families cope with their traumatic past. Interviews were conducted and categorized based on central themes and values. Family relationships and emotional difficulty were emphasized in all generations. Survivors also focused on family unity, and their children emphasized resolving family conflicts. Grandchildren also stressed family unity and conflict resolution, but in addition they placed importance on educating younger generations about the Holocaust. In essence, working through the past varies for each generation.

**Chaitin, J. (2003). "'Living with' the Past: Coping and Patterns in Families of Holocaust Survivors." *Family Process* 42(2): 305 - 322.**

This study analyzes the coping patterns used by families of Holocaust survivors. Life-story interviews from three generations were used to assess the significance attached to the Holocaust. Danieli's typology of adaptation was used to categorize the interviews (victim families, fighter families, those who made it, and numb families), although two new categories were added: "life goes on" and "split families". Several distinct coping mechanisms were used in families with the Holocaust as a past.

**Cooper, H. (1995). "The Second Generation 'Syndrome'." *The Journal of Holocaust Education* 4(2): 131 - 146.**

The author critiques the notion of the second-generation syndrome, arguing that this categorization diminishes the personal psychological development of children of survivors and overemphasizes the influence of the parents. He argues that generalities

made from specific studies of individuals are too case dependant, and that fiction may be just as revealing as learned papers about the psyche of children of survivors.

**Danieli, Y. (1980). "Countertransference in the Treatment and Study of Nazi Holocaust Survivors and Their Children." *Victimology: An International Journal* 5: 355 – 367.**

This paper presents a discussion on the 13 most commonly observed countertransference reactions among therapists, survivors and their children. These reactions include bystander's guilt, rage, dread and horror, shame, murder versus death, me too, victim and hero, the America liberator, grief and mourning, Jewish identity, reduction to method and theory and privileged voyeurism.

**Danieli, Y., Ed. (1998). *Conclusions and Future Directions. International Handbook of Multigenerational Legacies of Trauma.* New York, Plenum Press.**

"The goal of this book is to map the international landscape of this emerging field by bringing together the work of different scholars/researchers from around the world. This volume reveals how they view, understand, and conceptualize the multigenerational legacies of trauma of multiple populations and places their findings within the multidimensional, multidisciplinary, integrative (TCMI) framework. For some of these populations, this is the first time such issues have appeared in print."

**Danieli, Y., Ed. (1998). *Introduction: History and Conceptual Foundations. International Handbook of Multigenerational Legacies of Trauma.* New York, Plenum Press.**

"This is the first book on traumatic stress that examines multigenerational effects of trauma across various victim/survivor populations around the world from multidimensional, multidisciplinary perspectives. It seeks to provide a comprehensive picture of the knowledge accumulated worldwide to date including clinical, theoretical research, and policy perspectives."

**Dasberg, H. (1987). "Psychological Distress of Holocaust Survivors and Offspring in Israel, Forty Years Later: A Review." *Israel Journal of Psychiatry and Related Sciences* 24(4): 243 - 256.**

This paper is a product of the rising interest in the treatment of Holocaust survivors, revealing seven categories of survivors that may need psychosocial support. Forty years later, there is still a need for mental health care for survivors and their families, and these services are still highly necessary.

**de Graaf, T. K. (1998). "A Family Therapeutic Approach to Transgenerational Traumatization." *Family Process* 37(2): 233 - 243.**

While transgenerational mechanisms have been positively identified in Holocaust survivors and their families, parents who have been traumatized in other ways, such as child neglect or becoming orphaned, may also transmit their feelings and anxieties to their children. A case study is described where the mother had been traumatically separated from her parents at a young age, and how that event affected her relationship with her daughter is discussed.

**Felsen, I., Ed. (1998). *Transgenerational Transmission of the Effects of the Holocaust. International Handbook of Multigenerational Legacies of Trauma.* New York, Plenum Press.**

"This chapter presents a review of the finding of empirical, controlled studies of North America, nonclinical samples of Holocaust offspring (HOF), including not only published articles but also an extensive list of over 30 unpublished doctoral dissertations. A conceptual framework is proposed, which organizes and unifies the diverse empirical observations regarding cognitive-affective, interpersonal, and defensive styles among HOF, and offers possible explanations for the discrepancies between clinical reports and empirical studies."

**Felsen, I. and S. Erlich (1990). "Identification Patterns of Offspring of Holocaust Survivors with Their Parents." *American Journal of Orthopsychiatry* 60(4): 506 - 520.**

A sample of children of Holocaust survivors and a control group were studied to investigate identification patterns with their parents. Clear differences were found, and this divergence suggests a specific character organization. Finally, an explanation for these differences is proposed and defended.

**Fogelman, E. (1988). "Intergenerational Group Therapy: Child Survivors of the Holocaust and Offspring of Survivors." *Psychoanalytic Review* 75(4): 619 - 640.**

Group therapy seems to be an effective venue for expression of painful memories. Feelings of hope and cohesiveness can develop through group sessions, acting as curative factors for all generations of Holocaust survivors and their families.

**Fogelman, E. (1998). "Group Belonging and Mourning as Factors in Resilience in Second Generation of Holocaust Survivors." *Psychoanalytic Review* 85(4): 537 - 549.**

As a child of a Holocaust survivor, the author discusses her experiences in group settings with other second generation individuals. The mourning process and benefits to group mourning are particularly emphasized. The author believes that resilience is developed by creating a self more engaged with the outside world.

**Fogelman, E. and B. Savran (1979). "Therapeutic Groups for Children of Holocaust Survivors." *International Journal of Group Psychotherapy* 29(2): 211 - 235.**

This paper explores some of the issues and problems with treating children of survivors. A common dilemma is to find a sympathetic and appropriate listener to retell their stories. As a result, the authors formed therapeutic awareness groups for children of survivors where feelings could be shared in an understanding environment. The support groups were enormously useful, and this article details the process of forming groups, composition of participants, leadership roles, and group development.

**Fogelman, E. and B. Savran (1980). "Brief Group Therapy with Offspring of Holocaust Survivors." *American Journal of Orthopsychiatry* 50(1): 96 - 108.**

"The authors, themselves children of Holocaust survivors, discuss their reactions and experiences in leading nine short-term awareness groups designed for this population. They evaluate their role as leaders, and examine countertransference, personal motivation, and the establishment of goals within the group context. Preparation for therapists leading short-term homogenous groups of which they are not members is also explored."

**Fonagy, P. (1999). "The Transgenerational Transmission of Holocaust Trauma: Lessons learned from the Analysis of an Adolescent with Obsessive-Compulsive Disorder." *Attachment & Human Development* 1(1): 92 - 114.**

"This paper outlines an attachment-theory based model of transgenerational trauma inspired by the successful psychoanalytic treatment of a severely disturbed adolescent with obsessive-compulsive disorder who was the first child of the first daughter of a holocaust survivor. It is proposed that the transmission of specific traumatic ideas across generations may be mediated by a vulnerability to dissociative states established in the infant by frightened of frightening caregiving, which, in its turn, is trauma-related. Disorganized attachment behavior in infancy may indicate an absence of self-organization, or a dissociative core self."

**Fresco, N. (1984). "Remembering the Unknown." *International Review of Psycho-Analysis* 11: 417 - 427.**

This paper is based on eight interviews and the author's personal reminiscence of the silence in her family about the war era. All interviewees are Jews who were born right after WWII, all of them having at least one parent as a survivor. They all experienced the conspiracy of silence in their families as children, some not even knowing their parents were Jewish. Silence, nostalgia and substitution are the main recurrent themes.

**Freyberg, J. T. (1980). "Difficulties in Separation-Individuation as Experienced by Offspring of Nazi Holocaust Survivors." *American Journal of Orthopsychiatry* 50(1): 87 - 95.**

Survivor parents are usually viewed as emotionally detached by their offspring, creating an environment of dependency. Parents may regard their children's individuation as another familial loss. Possible therapeutic strategies for addressing these family dynamics are considered.

**Grubrich-Simitis, I. (1984). "From Concretism to Metaphor: Thoughts on Some Theoretical and Technical Aspects of the Psychoanalytic Work with Children of Holocaust Survivors." *Psychoanalytic Study of the Child* 39: 301 - 319.**

The author writes about concretism noticed during psychoanalysis of second generation Holocaust survivors. She considers possible origins of concretism, such as damage to the ego being transmitted from the first generation, and suggests general treatment to move from concretism to metaphor. In order to achieve this process, she coins the phrase in the analytic process, "phase of joint acceptance of the Holocaust reality." The aim is to diminish concretism and replace it with proper metaphoric function.



**Haesler, L. (1992). "Modes of Transgenerational Transmission of the Trauma of Nazi Persecution and Their Appearance in Treatment." *Journal of Social Work and Policy in Israel* 5-6: 51 - 60.**

As a non-Jewish German psychoanalyst, the author explores the difficulties in treating a Jewish patient, with the phenomenon of transference of Holocaust trauma as the background. Three case studies are provided as illustrations, exploring the viewpoints of both the analyst and the patient.

**Hal, E. V. D., Y. Tauber, et al. (1996). "Open Groups for Children of Holocaust Survivors." *International Journal of Group Psychotherapy* 46(2): 193 - 208.**

Group therapy is an effective means to break the conspiracy of silence present in families of survivors. AMCHA offered several group sessions, but surprisingly commitment to regular participation was low and a monthly open group setting was organized. This article describes the environment created and rationale behind these open groups, and a discussion of advantages and shortcomings is offered.

**Halik, V., D. A. Rosenthal, et al. (1990). "INTEGENERATIONAL EFFECTS OF THE HOLOCAUST - PATTERNS OF ENGAGEMENT IN THE MOTHER-DAUGHTER RELATIONSHIP." *Family Process* 29(3): 325-339.**

"The present study explored the quality of engagement between mothers and adult daughters. Daughters of Holocaust survivors, European immigrants and nonimmigrants were compared on mothers' protectiveness and care during their daughters' first 16 years and on daughters' individualization from the family of origin. The survivor group perceived themselves as less individualized from both their parents. There were no significant group differences found on intergenerational intimidation or competing loyalties. There was a tendency for mothers in the survivor group to be perceived as more indulgently protective. These findings suggest that the relationship between survivor mothers and their daughters may be characterized by a lower degree of individualization, though not at the cost of intimacy."

**Halligan, S. L. and R. Yehuda (2002). "Assessing Dissociation as a Risk Factor for Posttraumatic Stress Disorder: A Study of Adult Offspring of Holocaust Survivors." *The Journal of Nervous and Mental Disease* 190(7): 429 - 436.**

This research study investigated the possibility of dissociative symptoms as a risk factor for PTSD. The study involved 87 adult offspring of Holocaust survivors and 39 in a control group, where each individual completed the Dissociative Experiences Scale, and was assessed for trauma exposure. Dissociative symptoms were elevated for those with current PTSD, but not for those with past PTSD or with the risk factor of parental PTSD. Dissociative symptoms seem to be related to current psychiatric symptomatology rather than a preexisting risk factor for the development of PTSD.

**Hardtmann, G., Ed. (1998). *Children of Nazis: A Psychodynamic Perspective. International Handbook of Multigenerational Legacies of Trauma.* New York, Plenum Press.**

"National Socialism left traces in the children of the victims and the perpetrators. Denial, splitting, projection, and projective identification are not only characteristics of

the perpetrators during the Nazi period. These defense mechanisms were also maintained after 1945. Through denial and splitting, the majority of German people entered an alliance with the Nazis against the Jewish minority in 1933. Thereby, they spared themselves from a critical argument with themselves and their own failures."

**Hazani, E. and S. M. Shasha (2008). "Effects of the Holocaust on the physical health of the offspring of survivors." *Israel Medical Association Journal* 10(4): 251-255.**

"This review examines the suggestion that pregnancy in times of hunger and stress, which were an integral part of life during the Holocaust and affected the health of the survivors, may also affect the health of their offspring not only in the immediate postnatal period but throughout their adult lives. Of particular interest is the possible emergence of medical problems, such as diabetes and cardiovascular and bone disease, late in life. Moreover, there are indications that this effect does not stop at first-generation offspring but continues to affect the second and third generations as well. It is therefore possible that the Holocaust scarred not just the millions of people who lived through it but its stigmata are passed on to their children and children's children."

**Kaslow, F. W. (1999). "The Lingering Holocaust: Legacies in Lives of Descendants of Victims and Perpetrators." *Professional Psychology* 30(6): 611 - 616.**

This is the fourth article in a series of annual sessions with mental health professionals who all have a personal family history in the Holocaust. The goal of the articles is to motivate the reader to become more proficient in treatment of survivors through individual, family, or group therapies.

**Kav-Venaki, S., A. Nadler, et al. (1983). "Sharing past traumas: a comparison of communication behaviours in two groups of Holocaust survivors." *Int J Soc Psychiatry* 29(1): 49-59.**

"The present study explores patterns of sharing past traumatic experiences. Holocaust related communication behaviours and their consequences in terms of attitudes and knowledge were studied in two groups of families who survived the Holocaust; fifteen families whose parents were imprisoned in a concentration camp, and fifteen families whose parents were involved in resistance activities during WWII. Both parents and first-born child were interviewed by means of a structured interview. The results indicated that there was more sharing of the traumatic experiences in the families of ex-partisans." This article discusses these interviews and the overall implications of the results for psychological and familial health.

**Kellermann, N. P. F. (1999). "Diagnosis of Holocaust Survivors and Their Children." *Israel Journal of Psychiatry and Related Sciences* 36(1): 55 - 64.**

Many Holocaust survivors and their children never undergo formal diagnoses by their therapists. The DSM serves as a useful diagnostic tool, with survivors suffering from chronic PTSD and their children from complex PTSD. Comparable research can be conducted using this diagnostic approach.

**Kellermann, N. P. F. (2001). "Transmission of Holocaust Trauma - An Integrative View." *Psychiatry* 64(3): 256 - 267.**

This article explores the mechanism for transmission from parents to children and the factors that impact susceptibility. A brief review of transmission symptoms and theories of trauma transmission is followed by a discussion of risk factors for survivor children and a development of second-generation psychopathology.

**Kestenberg, J. (1980). "Psychoanalyses of Children of Survivors from the Holocaust: Case Presentations and Assessment." *Journal of the American Psychoanalytic Association* 28(4): 775 - 804.**

This article exposes two phenomena: the way survivor parents' messages are expressed by their children, and the correlation between the parents' experiences and the stories revealed by their children during psychoanalyses. Two cases are presented to examine these topics, one using the profile of a survivor child created by Anna Freud to assess metapsychological structure. The goal is to use this profile as a methodological tool to apply the hypothesis that the themes used by children of survivors and the process of forming these themes are unique.

**Kestenberg, J. (1993). "What a Psychoanalyst Learned from the Holocaust and Genocide." *International Journal of Psycho-Analysis* 74: 1117 - 1129.**

As a psychoanalyst, the author considers the transposition of children of survivors into their parents' past, the split in superego, and the psychosomatic problems arising in the second generation. The author also addresses these themes specifically in child survivors, comparing the psychological differences and varying adaptive skills between adult and child survivors. Finally, the author adds a brief summary of treatment ideas for child survivors now in their adult lives.

**Kestenberg, R. (1983). "History's Role in the Psychoanalyses of Survivors and Their Children." *The American Journal of Social Psychiatry* 3(1).**

For treatment of the survivor family, familial history is an essential aspect to understand the transmission process and to help children of survivors cope with their parents' traumatic past. Second generation survivors often attempt to apply the present to their parent's past, and once this mechanism of transmission is exposed, treatment becomes much more beneficial. It can also be helpful to discern what their parents wanted them to know from what they hoped to shield from them. It is also important to help children of bystanders or persecutors so they can understand their parents' past.

**Klein, H. (1971). "Families of holocaust survivors in the kibbutz: psychological studies." *Int Psychiatry Clin* 8(1): 67-92.**

"In this research we are concerned with the study of the aftereffects of massive psychic traumatization by man-made disaster, such as the Nazi persecution...dealing with the problem of readaptation and reintegration of the survivors and his family. Our own work, as well as other reaseach, indicates that the survivors' functions as parents and mates are often serious impaired. However, it has been observed that many of the survivors' families have shown adequate adjustment and considerable achievement in the psychosocial and occupational lives." The research was conducted on 25 families living in three kibbutzim.

**Kogan, I. (1989). "The Search for the Self." *International Journal of Psycho-Analysis* 70: 661 - 671.**

This case study deals with a patient who was the daughter of a survivor who lost his first family in the Holocaust. Analysis of her father's secret and the defensive use of the Holocaust led to therapy to differentiate from primary object representation and developing sense of self. Another traumatic event in the patient's life, the death of her boyfriend, allowed her to rework her personal view of her father's first family. Therapy was ended after the patient strengthened her self identity and dealt with transference issues from these events in her life.

**Kogan, I. (1992). "FROM ACTING-OUT TO WORDS AND MEANING." *International Journal of Psycho-Analysis* 73: 455-465.**

This paper presents an explanation and illustration of the behavioural phenomenon of concretization through acting out. The phenomenon refers to the realization of fantasies and psychic conflicts pertaining to the traumatic past of Holocaust survivor parents, which might have been transmitted to the next generation narratively or beyond words. I have illustrated this phenomenon by material taken from the first stages of the analysis of a young man who shot and wounded his father during the latter's attempt to save him from suicide. The analytic experience facilitated the stabilization of ego boundaries and the emergence of a more secure sense of self.

**Kogan, I. (1993). "CURATIVE FACTORS IN THE PSYCHOANALYSIS OF HOLOCAUST SURVIVORS OFFSPRING BEFORE AND DURING THE GULF-WAR." *International Journal of Psycho-Analysis* 74: 803-814.**

In this paper, I have attempted to explore the curative effect of insight and relational factors in the analyses of Holocaust survivors' offspring before and during the Gulf War. A particular characteristic of children of survivors is their tendency to recreate their parents' experiences in their own life through concretisation. An important analytic goal is to help these patients become aware of the unconscious meaning embedded in their acting out through increased insight, so they will be able to extricate themselves from the need to concretise and verbalise instead. The impact of the Gulf War on the children of Holocaust survivors was particularly strong. These patients reacted to the existential threat with feelings of impotence and terror, perceiving it as a repetition of the past. Thus, strengthening the ego forces became the focus of treatment during the war period, and this was facilitated by relational factors. Only near the end of the war was it possible to begin working through the regressive transferences evoked by the traumatic situation through increased insight, or to attempt to disentangle the present from the past through interpretation.

**Kogan, I. (1995). "LOVE AND THE HERITAGE OF THE PAST." *International Journal of Psycho-Analysis* 76: 805-823.**

In this paper, the author explores the difficulties in developing the capacity to fall and remain in love, as shown in a case study of a Holocaust survivor's daughter whose mother lived through the Holocaust as a child. These difficulties arose from the inability of the daughter to go through the mourning processes necessary for the separation from her bereaved mother, as well as from the daughter's fixation on the mother's interminable,

Unresolved mourning. The daughter exploited her relationships with the love objects in her life to play the role of the victim/persecutor. She thus enacted the drama effacing death and being rescued through flight or promiscuity, elements which were dominant in her fantasies relating to her mother's past. The working through of the transference relationship helped her become aware of the unconscious meaning embedded in her actions and eventually lessened her need to live her mother's past in her own life.

**Kogan, I. (2002). "'Enactment' in the Lives and Treatment of Holocaust Survivors' Offspring." *Psychoanalytic Quarterly* 71: 251 - 272.**

For children of Holocaust survivors, "enactment" is defined as the compulsion to recreate their parents' experiences in their own lives through concrete acts. There is a gap in the child's understanding of their parents' experiences and identification issues. The article contains several clinical examples to illustrate how these compulsions to enact can be modified into a cognitive mode.

**Krell, R. (1979). "Holocaust Families: The Survivors and Their Children." *Comprehensive Psychiatry* 20(6): 560 - 568.**

This paper describes general phenomena in "normal" as well as "treatment" survivors families: that is, those that seek professional treatment versus those that do not.

**Krell, R. (1982). "Family Therapy with Children of Concentration Camp Survivors." *American Journal of Psychotherapy* 36(4): 513 - 522.**

"For children of Holocaust survivors who experience emotional problems, the parental background may complicate their symptomatology and therapy. This paper describes two young patients where involvement of family clarified otherwise incomprehensible behavior and contributed to a relatively successful therapeutic outcome. Given the reported failure of individual therapy, family assessment therapy appears to better serve the children of survivors."

**Krell, R. (1984). "Holocaust Survivors and Their Children: Comments on Psychiatric Consequences and Psychiatric Terminology." *Comprehensive Psychiatry* 25(5): 521 - 528.**

Incorrect terminology for describing survivor symptoms has interfered with therapy. Aggression has been misconstrued by therapists trying to understand perpetrators through survivors. The concept of survivor guilt is not as common as assumed, and improper terminology has led to mistreatment.

**Krell, R., P. Suedfeld, et al. (2004). "Child Holocaust Survivors as Parents: A Transgenerational Perspective." *American Journal of Orthopsychiatry* 74(4): 502 - 508.**

This study addresses relationship issues between child survivors and their children. There are large discrepancies between how child survivor parents and their children view parental expectations and behaviors. These differences are categorized into four paradoxes: pride and praise, materialism and idealism, reasons for success, and silence about the Holocaust.

**Levine, H. (1982). "Toward a Psychoanalytic Understanding of Children of Survivors of the Holocaust." *Psychoanalytic Quarterly* L1: 70 - 92.**

Studying children of Holocaust survivors had two advantages: creating more effects treatment options for this specific population while furthering research on the effects of psychic trauma on personality development. The article addresses transmission factors and effects, specifically separation-individuation, superego formation, aggression management, and development of imaginative or "make-believe" fantasies.

**Lichtman, H. (1984). "PARENTAL COMMUNICATION OF HOLOCAUST EXPERIENCES AND PERSONALITY-CHARACTERISTICS AMONG 2ND-GENERATION SURVIVORS." *Journal of Clinical Psychology* 40(4): 914-924.**

"Examined communication concerning wartime experiences that went on in survivor families. Sixty-four Jewish children of survivors filled out questionnaires on parental communication, as well as the MMPI, Moshier's Forced Choice Scale of Guilt, and Hogan's Scale of Empathy. Findings indicate that mother's willingness to talk about her experiences and the frequency of her communication were related significantly to the presence of negative personality traits in the second generation. Guilt-inducing communication (by both parents), early experiential awareness of the Holocaust, and indirect communication about the Holocaust also were related significantly to negative characteristics. Father's willingness to talk about his experiences and the frequency of his communication, however, were related to positive factors among his offspring. When separated along gender lines, most forms of communication were related to negative personality factors for female, but not male, children of survivors."

**Litvak-Hirsch, T. and D. Bar-On (2006). "To Rebuild Lives: A Longitudinal Study of the Influences of the Holocaust on Relationships Among Three Generations of Women in One Family." *Family Process* 45(4): 465-483.**

The current article presents an analysis of the life stories of three generations of women within a family headed by a Holocaust survivor. Its uniqueness lies in its double analysis of the stories told by these women, with an interval of 12 years between telling. The first series of interviews were conducted in the early 1990s within the framework of a pioneering study in which, for the first time, three generations in each of 20 families were interviewed and their narratives analyzed. The current analyses are based on the perspective that, through life narratives, it is possible to view the transformations of relationships over time and that these transformations in relationships are central to personal development. We will examine the relationships of the women in these three generations, both with significant others and with each other. We will trace processes of development and changes in these relationships over the 12 years. Finally, we will discuss the social and methodological implications of our study.

**Major, E. F. (1996). "The Impact of the Holocaust on the Second Generation: Norwegian Jewish Holocaust Survivors and Their Children." *Journal of Traumatic Stress* 9(3): 441 - 454.**

This study involved the whole population of Norwegian Jewish survivors and their children compared to Norwegian-born Jews who escaped to Sweden. The study sought to verify the existence of the second generation syndrome, but the data did not

support significant psychopathology differences among these two groups, but the children of survivors were fairly more psychologically vulnerable.

**Napoli, J. C. (1999). "Letters to the Editor: Posttraumatic Stress Disorder in the Adult Offspring of Holocaust Survivors." *American Journal of Psychiatry* 156(11): 1838 - 1839.**

This letter is a response to Rachel Yehuda et al.'s article published about PTSD in the offspring of Holocaust survivors. The author raises important questions for further research, including investigating low-risk groups for PTSD and examining why only some offspring of survivors develop PTSD. Does maternal versus paternal exposure to trauma affect development and susceptibility to psychological problems? The author calls for more investigative research into the parents' individual experiences and more in-depth screening questions.

**Phillips, R. (1978). "Impact of Nazi Holocaust on Children of Survivors." *American Journal of Psychotherapy* 32(3): 370 - 378.**

"Case reports of children of Nazi Holocaust survivors are sparse in psychiatric literature despite a relative abundance of material on the 'survivor syndrome'. The case presented here illustrates that the long-range effects of the holocaust include intrapsychic, familial, and cultural pathogenic factors that may influence the psychological development of the offspring of survivors."

**Pines, D. (1986). "Working with Women Survivors of the Holocaust: Affective Experiences in Transference and Countertransference." *International Journal of Psycho-Analysis* 67: 295 - 307.**

For female survivors, children serve as a manifestation of adaptation and a return to normalcy after the Holocaust. While mothering involves encouraging a child's self-development, for many Holocaust survivors the process of separation-individuation serves as a reminder of those lost during the Holocaust. Two case studies of survivors of Auschwitz are analyzed, and both of these mothers can no longer identify with their children or live through them once the separation process begins in adolescence.

**Prince, R. M. (1980). "A Case Study of a Psychohistorical Figure: The Influence of the Holocaust on Identity." *Journal of Contemporary Psychotherapy* 11(1): 44 - 60.**

This case study involves the daughter of a Holocaust survivor who views herself as a Jewish American Princess and denies any reaction to her father's status. She has unconsciously created her identity around Holocaust themes and family relationships. Psychic numbing is then discussed, with regards to the existence of a psychohistorical identity.

**Rosenthal, P. A. and S. Rosenthal (1980). "Holocaust Effect in the Third Generation: Child of Another Time." *American Journal of Psychotherapy* 34(4): 572 - 580.**

The purpose of this case study is to make psychiatrists aware of the necessity for treating third generation Holocaust patients with a "psychohistorical" approach. Also, the

paper addresses the mechanisms for multigenerational transmission within a survivor family.

**Rustin, S. L. and F. S. Lipsig (1972). "Psychotherapy with the adolescent children of concentration camp survivors." *Journal of Contemporary Psychotherapy* 4(2): 87-94.**

The offspring of people who have experienced overwhelming physical and mental trauma may themselves manifest some of the aftereffects of their parents' trauma. Some children of survivors manifest aspects of their parents' survivor syndrome. These children appear depressed, withdrawn and have difficulty establishing and maintaining interpersonal relationships. Crucial aspects of psychotherapy with survivors' children involve helping the patient deal with the emotional impoverishment and depression of his parents and alleviating resulting guilt feelings.

**Safford, F. (1995). "Aging Stressors for Holocaust Survivors and their Families." *Journal of Gerontological Social Work* 24(1/2): 131 - 153.**

The last of the Holocaust survivors are particularly vulnerable to stressors of aging such as loss of work, loss of spouse, and health issues. Former coping strategies may no longer be effective, and various triggers may reactivate Holocaust memories, adding an additional burden to caregivers. This role may be overwhelmed by transgenerational effects and specialty programs and professional services may be necessary.

**Segal, S. A. (1983). *Children of Holocaust Survivors. Annual Meeting of the National Council on Family Relations. St. Paul, MN: 12.***

Many children of survivors with PTSD also develop PTSD symptoms by adolescence. This paper reviews the literature on survivor children and presents data from personal interviews conducted by the author. PTSD symptoms are described and the transmission process is outlined. The author concludes with offering clinical advice for treating children of survivors.

**Shoshan, T. (1989). "Mourning and Longing from Generation to Generation." *American Journal of Psychotherapy* 43(2): 193 - 207.**

Children of survivors are particularly sensitive to the lack of memories and absence of extended family members, as incomplete mourning and depression have been transmitted from survivors to their children. As adults, these children seek more knowledge and understanding to diminish feelings of shame and guilt, thereby creating a deeper understanding of transgenerational effects.

**Sigal, J. J. (1998). "Long-Term Effects of the Holocaust: Empirical Evidence for Resilience in the First, Second, and Third Generation." *Psychoanalytic Review* 85(4): 579 - 585.**

Children of survivors have been found to be a dysfunctional group, either hyperactive overachievers or depressed underachievers. While many survivors are more at-risk for physical diseases, psychiatric distress, and death from unnatural causes, children of survivors express a high level of resiliency. Keeping in mind that resiliency



in a certain area does not indicate resilience in all areas, the author discusses mechanisms for resilience and reasons for it.

**Solomon, Z., Ed. (1998). *Transgenerational Effects of the Holocaust. International Handbook of Multigenerational Legacies of Trauma.* New York, Plenum Press.**

"Second Generation' has now become an accepted term in Israel to refer to adult children of Holocaust survivors. The term has been current in Israeli professional literature since at least the early 1980s and has made its way into music, film, literature, and other arts, as well as into common parlance. In Israel, as elsewhere, children of survivors themselves have banded together to form commemorative organizations and self-help groups, thereby defining themselves as a group of people with a good deal in common. Their assumption, and the assumption of all who use the term second generation, is that it is more than merely a biological marker and that somehow or other the trauma of the Holocaust has been transmitted from the survivors to their children. The current chapter investigates the concept of this term in Israel."

**Sorscher, N. and L. J. Cohen (1997). "Trauma in Children of Holocaust Survivors: Transgenerational Effects." *American Journal of Orthopsychiatry* 67(3): 493 - 500.**

The purpose of this study was to measure the effects of parental Holocaust trauma on children's Jewish identity and Holocaust ideation. Survivors' children versus American Jewish children were compared. Survivors' children expressed more Holocaust ideation, but did not differ on measures of Jewish identity. Parental communication style was also addressed, suggesting its role in transference of parental trauma.

**Steinitz, L. Y. (1982). "Psycho-Social Effects of the Holocaust on Aging Survivors and Their Families." *Journal of Gerontological Social Work* 4(3/4): 145 - 152**

"In this exploratory study, aspects of aging are identified in which survivors and their families tend to experience intense or unique reactions to the residual effects of the War's trauma. Issues of intergenerational communication, care and positive coping capacities are described, especially as they affect feelings of independence, losses and mourning, family intimacy, and guilt by aging survivors and their adult children. Several treatment, program, and research implications are also raised."

**van Ijzendoorn, M. H., M. J. Bakermans-Kranenburg, et al. (2003). "Are children of Holocaust survivors less well-adapted? A meta-analytic investigation of secondary traumatization." *Journal of Traumatic Stress* 16(5): 459-469.**

H. Keilson (1979) coined the term "sequential traumatization" for the accumulation of traumatic stresses confronting the Holocaust survivors before, during, and after the war. A central question is whether survivors were able to raise their children without transmitting the traumas of their past. Through a series of meta-analyses on 32 samples involving 4,418 participants, we tested the hypothesis of secondary traumatization in Holocaust survivor families. In the set of adequately designed nonclinical studies, no evidence for the influence of the parents' traumatic Holocaust experiences on their children was found. Secondary traumatization emerged only in studies on clinical participants, who were stressed for other reasons. A stress-diathesis

model is used to interpret the absence of secondary traumatization in nonclinical offspring of Holocaust survivors.

**Virag, T. (1984). "Children of the Holocaust and their Children's Children: Working Through Current Trauma in the Psychotherapeutic Process." *Dynamic Psychotherapy* 2(1): 47 - 60.**

After an extensive individual case study, the author relates several other cases to the effects of transgenerational transmission of Holocaust trauma. The direct aim of therapy is to halt the transmission of symptoms from severe trauma. In order to accomplish this goal, the survivors themselves must reconcile their incomplete mourning and grief.

**Waldfoegel, S. (1991). "Physical Illness in Children of Holocaust Survivors." *General Hospital Psychiatry* 13: 267 - 269.**

Psychiatrists need to be aware of possible ailments in children of survivors due to their parents' Holocaust experiences. Two cases are presented to highlight adaptive versus maladaptive manifestations of effects of the Holocaust to medical illness.

**Weiss, M. and S. Weiss (2000). "Second Generation to Holocaust Survivors: Enhanced Differentiation of Trauma Transmission." *American Journal of Psychotherapy* 54(3): 372 - 385.**

This paper seeks to differentiate between two methods of transmission: direct versus indirect. Direct transmission is usually studied in clinical trials, whereas indirect is usually expressed in experimental publications. A group therapy study is presented as an example of indirect transmission, with the individuals development and sense of self being contributed to the relative type of transmission they experienced. In conclusion, this distinction has significant clinical consequences and should not be overlooked.

**Wilson, M. B. and M. Sinason (1999). "Paralysis of Symbolic Functioning in the Child of Holocaust Survivor." *Psychoanalytic Psychotherapy* 13(2): 117 - 134.**

This paper is a case study on the second attempt at psychotherapy for a child of a Holocaust survivor. The patient was suffering from general dissatisfaction with life and problems with understanding symbolism and metaphors. While the literature suggests a connection between the parents' silence about their experiences and using their use of symbolism with the inability of the their children to use and understand symbolism or metaphor. However, it is difficult to make a direct correlation between these two phenomena, as the patient's defect in symbolic capacity could have arisen due to other developmental difficulties. These difficulties are discussed in detail with relation to the case material and in respect to conceptual, diagnostic and therapeutic issues.

**Winnik, H. Z. (1968). "Contribution to Symposium on Psychic Traumatization Through Social Catastrophe." *International Journal of Psycho-Analysis* 49: 298 - 301.**

In the first part we have briefly dealt with the psychic changes due to extreme mental stress based on prolonged observations and the literature on survivors of Nazi persecution. Two cases we then presented, 'marginal' from the point of persecution,

which exhibited typical symptoms of the 'survivor syndrome' without having actually been internees of concentration camps. These cases prove how far-reaching the sequelae of such persecution can be and that they may appear even in the second generation, the children of the persecutees.

**Wiseman, H. (2008). "On Failed Intersubjectivity: Recollections of Loneliness Experiences in Offspring of Holocaust Survivors." *American Journal of Orthopsychiatry* 78(3): 350-358.**

Intergenerational consequences of extensive trauma experienced by parents for the loneliness experienced by their children were explored in 52 adults (26 men and 26 women) who grew up in Holocaust survivor families. These adults, children of mothers who had survived Nazi concentration camps, were recruited from a random nonclinical Israeli sample. A narrative analysis of their recollected accounts of loneliness in childhood and adolescence yielded 4 major categories of loneliness experiences in the context of growing up in Holocaust survivor families: (a) echoes of parental intrusive traumatic memories; (b) echoes of parental numbing and detachment; (c) perceived parents' caregiving style; and (d) social comparison with other families, in particular the lack of grandparents. The echoes of the parental trauma in the recollected loneliness accounts are conceptualized as representing a sense of failed intersubjectivity in these interpersonal processes. The experiences of not being understood by others, not understanding others, and the lack of shared understanding involved in failed intersubjectivity are discussed and related to the importance of opening lines of communication between survivors and their descendants.

**Wiseman, H., J. P. Barber, et al. (2002). "Parental communication of Holocaust experiences and interpersonal patterns in offspring of Holocaust survivors." *International Journal of Behavioral Development* 26(4): 371-381.**

This study examined the interpersonal problems and central relationship patterns of Holocaust Survivors' Offspring (HSO) who were characterised by different patterns of parental communication of their parents' Holocaust trauma. Fifty-six adults born to mothers who were survivors of Nazi concentration camps and 54 adults born to parents who immigrated to Israel before 1939 with their own parents (non-HSO) were recruited randomly from an Israeli sample. While the groups did not differ in their current mental health, HSO who reported nonverbal communication with little information about their mother's trauma endorsed more interpersonal distress than HSO who experienced informative verbal communication and less affiliation than either HSO who experienced informative verbal communication or non-HSO. They also differed in their central relationship patterns with their parents and spouses. The findings are discussed in the context of the unique dynamics of growing up with the silent presence of the mother's trauma.

**Yehuda, R., A. Bell, et al. (2008). "Maternal, not paternal, PTSD is related to increased risk for PTSD in offspring of Holocaust survivors." *Journal of Psychiatric Research* 42(13): 1104-1111.**

Background: A significant association between parental PTSD and the occurrence of PTSD in offspring has been noted, consistent with the idea that risk for the

development of PTSD is transmitted from parent to child. Two recent reports linking maternal PTSD and low offspring cortisol prompted us to examine the relative contributions of maternal vs. paternal PTSD in the prediction of PTSD and other psychiatric diagnoses in offspring. Methods: One hundred seventeen men and 167 women, recruited from the community, were evaluated using a comprehensive psychiatric battery designed to identify traumatic life experiences and lifetime psychiatric diagnoses. 211 of these subjects were the adult offspring of Holocaust survivors and 73 were demographically comparable Jewish controls. Participants were further subdivided based on whether their mother, father, neither, or both parents met diagnostic criteria for lifetime PTSD. Results: A higher prevalence of lifetime PTSD, mood, anxiety disorders, and to a lesser extent, substance abuse disorders, was observed in offspring of Holocaust survivors than controls. The presence of maternal PTSD was specifically associated with PTSD in adult offspring of Holocaust Survivors. However, other psychiatric diagnoses did not show specific effects associated with maternal PTSD. Conclusion: The tendency for maternal PTSD to make a greater contribution than paternal PTSD to PTSD risk suggests that classic genetic mechanisms are not the sole model of transmission, and paves way for the speculation that epigenetic factors may be involved. In contrast, PTSD in any parent contributes to risk for depression, and parental traumatization is associated with increased anxiety disorders in offspring. Published by Elsevier Ltd.

**Yehuda, R., J. Schmeidler, et al. (1998). "Relationship Between Posttraumatic Stress Disorder Characteristics of Holocaust Survivors and Their Adult Offspring." *American Journal of Psychiatry* 155(6): 841 - 843.**

This study examined the relationship between PTSD symptoms in Holocaust survivors and their children. The severity of the symptoms in the parents seemed to affect the level of risk for PTSD in the offspring.

**Yehuda, R., J. Schmeidler, et al. (1998). "Vulnerability to Posttraumatic Stress Disorder in Adult Offspring of Holocaust Survivors." *The American Journal of Psychiatry* 155(9): 1163 - 1171.**

This study sought to empirically evaluate the impact of the Holocaust on the second generation with regards to the development of PTSD. The results indicate that while the offspring of survivors did not experience more traumatic events, they had a greater occurrence of PTSD and other psychiatric diagnoses than the comparison group. The adult offspring of Holocaust survivors are at an elevated risk level for PTSD and therefore should be studied further to understand individual differences that constitute risk factors.

**Zilberfein, F. (1996). "Children of Holocaust Survivors: Separation, Obstacles, Attachments, and Anxiety." *Social Work in Health Care* 23(3): 35 - 55.**

This study addresses the effects of trauma experiences by survivor parents has on their children in three areas: separation obstacles, ability to form intimate relationship, and anxiety. Separation is seen in a negative light by many survivor parents, so this variable is mainly discussed with regards to interpretation within different survivor families.

^ Adelman, A. (1995). "Traumatic memory and the intergenerational transmission of Holocaust narratives". *The Psychoanalytic Study of the Child*, 50: 343-367. ISSN 0079-7308. Stewart, S. (1993) 'Objects of desire. Part I: The Souvenir', *On Longing: Narratives of the Miniature, the Gigantic, the Souvenir, the Collection*. Durham, NC: Duke University Press, 132-151. Sturken, M. (1999) 'The Image as Memorial: Personal Photographs in Cultural Memory', Marianne Hirsch (ed.) (1995). *Psychoanalytic Study of the Child*, 50:343-367. Traumatic Memory and the Intergenerational Transmission of Holocaust Narratives. Anne Adelman, Ph.D. A study of the reminiscences of mothers who are Holocaust survivors and their daughters' reflections about the Holocaust illustrates the process of the transmission of trauma by tracing the transgenerational evolution of narrative forms, dynamic themes, and affective organization. The quality of the survivor parent's organization and integration of affect has significant bearing on how her child assimilates her knowledge of the Holocaust and develops the capacity to tolerate and express painful emotions.