The Aging Holocaust Survivor

L. Eitinger*

When asked to discuss a group of people like aging survivors the first thing one must know about them is: Who are they?, and in this actual case: Who were they before they became aging survivors? The answer would be: Average people, typical for the general Jewish populations in Europe before WW II.

Then Hitler came and they were all under irrevocable sentence of death. According to the Nazi view, the war ended “too soon”, and this was the main reason that they survived. Most of them had been inmates of camps, but there were other “hellish” environments, writes Maria Rosenbloom, from which survivors crawled out at the time of liberation. These included hiding places, sometimes not larger than a closet in an apartment or a haystack in a barn; or the experience of living in forests as partisan fighters. Some managed to stay alive by concealing their identity and trying to pass as “Aryans”.

Each of these environments contained unique stresses which are virtually impossible to describe. I happen to know the camps rather well, but how can I expect that anyone will understand for example the hunger that ravaged the inmates, bringing them not only to the limits of human behaviour, but also beyond them, as when a prisoner, formerly a high ranking official, with a really intellectual personality, fell on his knees and licked like a dog, a few drops of soup that had ran out of the soup kettle.

How can I make you understand what it meant to live literally in the shadow of the chimneys of the crematoria and their steady stream of smoke, which became fatter and darker and more threatening every time a new transport of prisoners arrived. That happened

* Professor L. Eitinger, Ovre Ullern Terrasse 67, N - 0380 Oslo 3, Norway.
nearly every day. And every day one could see hundreds of killed and thousands of maltreated prisoners in the most hopeless of conditions and situations.

For every thinking person, not only for a psychiatrist, there was one problem that was nearly always considered when it was possible to raise oneself above the daily worries and over the despair: What will the future be — if there will be one — how will we and all the other people who suffered so incredibly, who were humiliated to a degree never heard of before, how will we be able to adjust ourselves again to the world?

How can one understand what happened in a camp (just to give you one example) like Bergen-Belsen before it was liberated. This camp was planned for about one thousand prisoners. Then, without any special change being made in the construction, it contained over 40,000 prisoners by March 1945, of whom 26,000 were women. During the month of March, and until the liberation on April 15, more than 25,000 people died, but the number of registered inmates had then risen to over 60,000. The British found dead all over the camp, 8-10 thousand naked emaciated corpses in various stages of decomposition.

Can one get somebody to understand what these survivors had endured of hunger and thirst, of desperation and hopelessness, suffering and ordeals, but also of waiting and hoping, anticipation and dreams.

When against all the odds they survived until the moment of their liberation, their death rate was still appalling for many weeks after the gates of the camp had been opened.

All the liberated ex-prisoners went “home” with the main exception of the Jewish survivors. They were suddenly confronted with the reality of their isolation, with the lack of meaning and purpose in a life so unexpectedly regained. There was no one left, nowhere to go. The old life was finished, and few if any had the faintest idea what to do with the new one.

Many of the liberated survivors tried to get back to their home-towns in the hope that, in spite of everything, some member of their family, their vital anchorage, might still be alive. The hopelessness of this quest soon became evident for most of them, and they fled westward again. The main reason for this was the continuing but vain hope of finding some surviving family member in the new Displaced Persons’ Camps they had heard about. There, international organizations took care of them, but still individuals were of very little importance, they had no right to
determine their own fate. Boards from various countries, decided whether or not a survivor could be considered eligible for immigration there. Those who were admitted had to adjust to strange new surroundings, learn new languages, absorb new laws, and build new lives. The complete breakdown of former family and community ties inevitably caused radical changes in their conception of themselves and this was not easy.

Of the Jewish survivors I examined in Norway and Israel, 80-90 percent had lost the majority of their closest relatives, i.e., parents, siblings, husband or wife, and children. Every single one had lost at least one near relative, and three out of four had lost their entire family. The findings were about the same in other countries. The psycho-traumatic influence of losses like these can hardly be evaluated fully, particularly in view of the very close-knit ties in the Jewish family.

In the new countries none of those who should help the survivors knew much about the traumas they had suffered. When they learned what had happened they could not believe it. Consequently, a “conspiracy of silence” evolved between the therapists and their patients to be. One of the symptoms many psychoanalysts were concerned with is the feeling of guilt endured by many survivors, because unlike most of their family members and friends, they were still alive. This is a very complicated feeling.

In the emotionally overloaded atmosphere of the first postwar years when the annihilation of the Jewish people in Europe and the passivity of the Allies but also of the Jewish communities outside Nazi Europe slowly became common knowledge, the attitude of Jewish psychiatrists in America could not be an “objective” one. It is possible that the postwar importance attached to the “persisting guilt complex” as a central symptom of the survivor syndrome may have its roots in unconscious guilt feelings that the American therapists had and projected on their survivor patients.

Thanks to the incredible capability of human beings to adapt, and the regenerative powers of the ego, many survivors have discovered coping mechanisms in their new surroundings, many have found their place in postwar societies, and many have successfully integrated their past trauma into present reality.

Many survivors have striven, once again, to be an active part of a family and a community, to belong and to create, and many of them have succeeded.
And yet, the extreme war related traumatization inflicted deep wounds on the survivors. Those wounds have healed slowly. Studies show that even after 45 years the scars are still present. The psychic wounds hurt and sometimes reopen. The strength to deny or fight old memories diminishes when vitality is reduced by old age. But while survivors continue to exhibit increased vulnerability to stress situations, they may also show a greater sensitivity toward fellow humans, a greater capacity for empathy, and a greater appreciation for the higher values in life.

Let us look at some of their problems.

1. They are refugees. Among the frequent, but little discussed problems of a refugee is the fact that everything which, up to the time of arrival, he or she had considered a matter of course — natural, standard-creating, and correct — is suddenly no longer valid. Still more depressing is the realization that nobody is interested in the refugees' experiences, neither individual or national. Nobody wants to know anything about their nation's authors, their cultural inheritance, national history or holidays, and, if possible, less than anything about their personal problems, what they have gone through, why they had to leave their native country and so on. So they must resign, accept that nobody listens, and remain isolated.

2. They are people in old age and with these we find a similar situation: hardly anybody is interested in their life experiences and adventures. What they learned is out of date, obsolete, antiquated. What they have to tell, everybody had heard many times before — or believes so. So these old people must resign, accept that nobody listens, and remain isolated.

3. They are survivors. At a conference I had with Austrian — non-Jewish concentration camp survivors, one of them described their social situation in the following way: When you are sitting an evening in a pub together with men who had been active soldiers during WW II everybody will listen eagerly to what they have to tell, but as soon as a concentration camp survivor starts mentioning the slightest hint of what he had gone through, everybody starts to sigh or groan and says "Oh, here he is again . . ." That is the difference between a hero and a victim. What a survivor has to tell, everybody has heard many times before, or so he/she believes, nobody wants to know anything about them, they are the disturbing victims, so they must resign, accept that nobody listens, and remain isolated.
Our survivors combine thus all the reasons for remaining isolated; they are refugees, oldaged people and survivors of the Holocaust, of a period everybody wants to forget, and on top of all they are Jews. More than enough to think about, more than enough to worry about, more than enough not to be listened to, not to be understood, but to be distrusted and misjudged.

But there are still some other problems: Old age is characterised by the inescapable necessity of facing one’s past, but also by the shift from doing to thinking, from planning to reminiscing, from preoccupation with everyday events to viewing and rethinking one’s life. The old are in one way or other forced to choose between accepting their past or rejecting it. It is obvious that acceptance will lead to greater harmony and achievement of integrity, while rejecting the past, totally or partially, will result in new psychological difficulties.

For a survivor of the Holocaust it is not easy to accept one’s past, and to reach inner harmony. Primo Levi the Italian Jewish chemist has come to a very depressive conclusion. In his book, The Drowned and the Saved, he puts the following question on behalf of and to every single survivor: “Are you ashamed because you are alive in place of another? And in particular, of a man more generous, more sensitive, wiser, more useful, more worthy of living than you? You cannot exclude this: you examine yourself, you review your memories, hoping to find them all; no, you find no obvious transgressions, you did not usurp anyone’s place, you did not beat anyone (but would have had the strength to do so?), you did not accept positions (but none were offered to you . . .), you did not steal anyone’s bread; nevertheless, you can not exclude it. It is no more than a supposition, indeed the shadow of a suspicion; that everyone is his brother’s Cain”.

Overwhelmed by unfounded feelings of guilt combined with feelings of hopelessness Primo Levi became melancholic to such a degree that he committed suicide, many years after his liberation. Or was he — were we — ever completely liberated? He committed suicide just like Jean Améry, the Austrian philosopher who escaped to Belgium, was caught and tortured by the Gestapo as a Belgian resistance fighter, sent to Auschwitz as a Jew, and “liberated” in 1945. Like Paul Célan, the Romanian born poet and survivor, who lived in France after the war and wrote the most moving poems. Or like Jerzy Kosinski, the Polish born Holocaust survivor who became such a successful writer here in the U.S. They
all and many others could not stand it anymore to be alive. Everything they had gone through had become meaningless. They died of what Primo Levi had called the survivors' disease, just like his friend Lorenzo, an Italian mason who never had been a concentration camp prisoner, only a civil worker in Auschwitz Buna. In constant danger for his life he had helped prisoners there, but after the war he was unable to take up his former way of life, ads if nothing had happened.

What exactly is this “survivors’ disease”? To put it simply: The survivors who committed suicide did it because they could neither understand nor accept that the world so easily has forgotten what happened during WW II and especially in the camps. In 1945 the famous philosopher Adorno wondered if anybody would ever be able to write a poem after Auschwitz or discuss philosophy after Treblinka. He and all the others who thought that the Holocaust had changed both the world and mankind, had to learn that seemingly nothing and nobody has changed. The world continued as if the death of 50 million human beings, the industrialized slaughter of six million Jews, of two million children, had never taken place. Ex-prisoners whose motivation for survival was mainly based on their wish “to tell the world” what had been happening in the camps, to shake the world out of its indifference and lethargy, felt lost and betrayed by this same world, a world that did not want to be told, a world that did not want to listen, did not want to understand. After several years of vain efforts they gave up, stopped trying and — committed suicide.

Elie Wiesel has chosen another way. Perhaps because he felt that his survival was the result of the moral and medical help he got from others and the moral help he could be and had been to others, mainly his father. He also knows, that to commit suicide is only an escape, which can not be of any help to others. And helping others is just what many survivors see as the purpose in life.

Elie has studied many of the survivors described in the bible and portrays their problems in a poetic vein. He knows that it is not easy to be a survivor, his own struggle and the way of his victory, are vividly depicted in his favorite survival stories.

Let me quote only one of them: Noah the first, the main survivor. What is the first thing he does after he left the ark? He discovered the empty, devastated land, he looked for cities of light and life, he knew that they had vanished, still he went
on looking for them. Then he was confronted by a choice: anger or gratitude. He chose gratitude. He offered thanks to heaven, for having been spared, the special gratitude of the survivor. Every survivor knows that each single moment means grace, for he or she could have been in another’s place, another who is gone. So Noah builds an altar and offers a sacrifice to God. It is right, it is normal, it is the right thing to do, writes Elie Wiesel. After all, he owes God his survival, he owes him everything.

And yet, many survivors are haunted, if not plagued, by unjust guilt feelings at one time or another. At one point Noah must have wondered, “Why me?” Surely he did not think he was chosen because he was a better person? He could not have been so vain as to think that. Nevertheless he must have asked this painful question, “Why me?” over and over. Granted, he had saved his wife and their children. But what about his relatives, his neighbors, his acquaintances? dead, all dead. Only he and his immediate family are alive.

Had Noah tried to understand what had happened to him — and to all the others? He listens to God who promises him “never again will he punish mankind that way”.

A survivor of cosmic tragedy, he is haunted by his memories, he escapes into . . . drink and sleep. Is this his response to other people’s suffering?, asks Elie. Of course not. Noah is anguished. He trusts God, but he knows people: What God will not do, they very well may. God will not destroy them, but they could destroy themselves.

Elie’s main conclusion concerning the problem of survivors is expressed in his essay on the two sages Hillel and Shamai. They have disagreed in practically everything. But both subscribe to the conclusion that it is not man’s privilege to choose his life neither the time or the place of his birth, but it is his privilege to give his life a direction — and a justification. Elie writes: “None of my contemporaries knows why he is alive — or rather, why he has survived, why he and not someone else. For us every moment is a moment of grace and wonder — we and we alone can give it meaning”.

I am quite aware of the fact that not all survivors have all these problems on a conscious level, but I know that some survivors have some of them consciously, and many of them, unconsciously. And since survivors have learned through many years of contact with medical personnel that it is more or less futile trying to discuss these questions with others, because they are not understood — so they, like
their doctors and would be helpers speak about something else, more acceptable, more tangible, more concrete. And they have a lot to talk about: they do not sleep properly at night and need sleeping pills, their muscles are aching, their digestion is not as it should be and so on.

What they achieve is that their pseudoproblems are taken seriously, are being discussed; new x-rays are being taken, new medicines, pills, tablets are prescribed and new laboratory tests performed. One may say: Something is better than nothing. Perhaps, but as a psychiatrist I am not so sure about it. On the other hand it is rather doubtful if a detailed and searching analysis of all the secrets of an old, aged, soul is of any therapeutic value, or even possible at all. So the most important approach would then be that of human openness and a real will to listen and to understand. It is important that we know about them, but it is not our duty to explain them, it is not our duty to make life more complicated by “explaining” that all survivors are bound to have guilt feelings, and thus add difficulties to their problems. No one who has not been there is in a position to judge others.

Let me summarize what I would like to convey: Survivors of the Holocaust have their share of problems which is difficult to bear and difficult to solve. With the passage of time health deteriorates, strength is reduced and mental capacities dwindle. The traumatic experiences return therefore in reinforced strength. Survivors are of course in need of help, for all their somatic ailments, but still more for their psychological isolation, their feeling of having lost their anchorage in the world and in humanity, their feeling that nobody cares if they are alive or not. If we manage to reverse this tragic evolution by establishing at least traces of real interhuman relationships and reduce the deep existential isolation, then we have made an important step, because it reduces the total sum of suffering in this world — and this is — so I believe — the most important task and activity for all of us.