

Hear the Voices

THE NEED FOR PERSONAL NARRATIVES IN HOLOCAUST STUDIES

by Margarete Myers Feinstein

It may come as a surprise to scholars in gender studies that the use of personal narratives as historical sources is controversial in Holocaust studies. Surprising because oral history and women's history have grown up together. Both are engaged in recovering experiences that the dominant historiography has ignored and neglected. At the same time, the influence of feminist scholars on oral history has led to greater understanding of the interview process itself. Concerned with hierarchies and power relationships, feminist scholars

recognized that the dynamics between interviewer and interviewee influenced what was remembered, how it was recalled, and what was shared. Increasing awareness of the subjectivity and shifting nature of memories led scholars to focus on discourse and language. These developments only seemed to confirm the opinion of leading Holocaust scholars that survivor narratives had no value as documents.

Despite famous collections of videotaped survivor testimonies at the USC Shoah Foundation Institute for Visual History and

Education and at Yale University's Fortunoff Video Archive for Holocaust Testimonies, many Holocaust scholars long rejected the study of the recollections of victims and favored instead the use of written evidence provided by the perpetrators. The preeminent Holocaust scholar Raul Hilberg, for example, rejected survivor testimony on principle. Trained as a political scientist, he was interested in how the bureaucratic state could be turned to use in mass murder. The memories of victims were not important from that perspective, especially since

viewed through German documents, the victims appeared to have cooperated with or offered little resistance to the Germans. Historians are also trained to give preference to the written word over the verbal and visual. Saul Friedländer did use survivor testimonies in his Pulitzer Prize-winning book, *The Years of Extermination: Nazi Germany and the Jews*, where he intended them to disrupt the historical analysis by provoking in the reader a sense of disbelief. He did not use them, however, to gain knowledge.

I had undergone similar historical training, but when I submitted my first article about Holocaust survivors in the displaced persons (DP) camps, the journal editors recommended that I supplement my research with oral history. The result had a profound impact on the course of my research. By coincidence the first survivors whom I interviewed were women. I had conceived of my study as one focusing on national identity, but I carefully asked interviewees broad, open-ended questions so as not to influence unduly the memories recalled by my subjects. Often I would not

receive any information about national identity or politics until the end of the interview when I did ask more directed questions. Soon, I realized that I needed to listen to what the survivors were telling me rather than what they were not.

The women spoke overwhelmingly about domestic concerns. They had quickly married men they had met after liberation and then found themselves confronted with pregnancies. They shared their fears of German doctors, the toll that pregnancy took on their ravaged bodies. Their time became consumed with the task of providing for their young families: washing diapers could take all night and standing in the line for milk rations could take a good part of the morning. These activities rarely entered the written record and yet they were vital to the renewal of Holocaust survivors as they struggled to recreate family and to establish a sense of normalcy in the immediate aftermath of the Holocaust.

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Holocaust experiences and to create Jewish life while still on German soil. Drawing on scholarship that suggests that women and men experienced the Holocaust differently, I explored how their recovery might also be gendered. I first entered the field in the 1990s when women historians were asserting that women had survived the Holocaust “better” than men. They based their claims on women’s social networking and domestic skills. My work and that of other young scholars suggested that too literal readings of survivor narratives were leading to faulty conclusions. Pascale Bos, for example, pointed out that some scholars have mistakenly concluded that women were singled out for the humiliation of shaving off of hair because women survivors’ narratives dwell on this event more so than men’s (33–34). While the Nazis’ treatment of men and women in this regard was the same, the narratives tell how the shaving was experienced and recounted differently by women and men.

Along the same lines, I found myself wondering why survivors frequently referred to caring women, regardless of their ages, as

mothers and foster mothers while helpful men were never referred to as fathers. In one memoir, I finally encountered one man described as a father figure in the post-liberation period, only to learn a few pages later that he was an SS man attempting to escape detection by infiltrating a band of survivors. That the one father figure I had encountered turned out to have been a wolf in sheep’s clothing led me to investigate further the absence of father figures. Was it a sign of a crisis of Jewish paternal authority or did it say something about how survivors constructed their narratives? I concluded that men acted in ways that could have been interpreted as fatherly, but that men had more terms to describe these caring relationships than did women. They could be comrades, soldiers at arms, colleagues, brothers, and uncles. Women tended to have fewer points of reference and chose to describe their behavior in maternal terms. What this study demonstrated is that gender is an important factor in determining the actual ordeals men and women faced as well as in the ways in which they interpreted and narrated those events (Feinstein).

In the past, sources have been an obstacle to the study of the private lives of DPs. The records most commonly used by historians to document their work on DPs, such as reports written by military and United Nations Relief and Rehabilitation Administration (UNRRA) personnel, frequently ignored domestic life. Often women and children were only mentioned when their marriages and births were registered. Social workers, psychologists, and other observers recorded their interpretations of DP attitudes and living conditions in reports and journals, but often they imposed their own preconceived ideas onto the DPs. Thus, they often tell us more about the attitudes of the observers than of the DPs themselves. The study of domestic life and identity construction requires the use of new sources, such as memoirs and oral history interviews.

Personal narratives can illuminate the meanings behind DP behavior, helping us to understand the significance of religious ritual after the Holocaust, to explain attitudes toward revenge and questions of gender and ethnic identity. In

my book, *Holocaust Survivors in Postwar Germany, 1945–1957*, published this January by Cambridge University Press, I have supplemented the written record of DP documents with diaries, memoirs, and oral history interviews. It is essential to treat personal narratives of the Holocaust with great care. Scholars have discussed the difficulties that survivors have articulating their memories and that their audiences have comprehending them; researchers have warned against the temptation of infusing meaning into survivors' suffering. Memories of the DP experience, however, are usually less traumatic than those of the Holocaust. While the ability to communicate the trauma of the Holocaust is limited by what is "tellable" by the survivor and "hearable" by the reader or interviewer, memories of the DP period are easier to convey. Like all historical documents, however, DP narratives need to be analyzed by taking into account their manner of creation, the purpose for which they were created, and the intended audience. An awareness of the conditions in which the recounted memory was encoded and in which it was retrieved

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as well as how the gender of the survivor shaped the memory can help the historian gauge its usefulness for historical evidence.

In the cases of a few survivors, I was able to compare both earlier and later interviews, and interviews with memoirs. The central memories remained constant with slight variations in the details that the survivor remembered or chose to share at a particular time. Historian Christopher Browning has also discovered that survivor memories are more stable and less alterable over time than one might expect, affirming their usefulness as historical documents, particularly when no other records exist (47). Memory studies also show that individual memories are surprisingly consistent over time. When one has access to a large number of personal narratives, they can help isolate core memories and screen out any distortions. Neuroscientist Daniel Schacter has argued that videotaped interviews with Holocaust survivors “can help to ensure that forgetting and distortion—which can infiltrate any individual rememberer’s story—are counteracted by the overwhelming truths that emerge from core elements that

are shared by numerous rememberers” (305). Carefully read and analyzed, DP personal narratives can provide important information about events as well as about the meanings survivors have given them.

My determination to use oral histories was strengthened when I viewed videotaped interviews at the USC Shoah Foundation Institute. I had already gathered much material about pregnancy in the DP camps, but I was interested in learning more about abortions, and the index at the archive allowed me to identify which testimonies discussed abortion. Of the five Holocaust survivor interviews in the archives that discuss abortion in the DP camps, only one, a German Jewish survivor, actually had an abortion in postwar Germany. The second woman suffered a miscarriage that required a dilation and curettage that she mistakenly referred to as an abortion. In the third interview, the DP contemplated an abortion but chose not to risk an illegal procedure. Tragically her son died when his skull was crushed during a forceps delivery.

Two remaining testimonies about abortion reveal that German doctors recommended

that the women terminate their pregnancies. The outcomes of these two pregnancies, the successful deliveries of healthy babies with no ill effect to the mothers, raise questions about whether the doctors had been genuinely concerned about the mothers' health or whether they were using the excuse of maternal risk to encourage DPs to terminate viable pregnancies. Most DP women expressed fear at being treated by German medical personnel, remembering the role that German physicians had played in grotesque human experiments and also recalling that Jewish mothers and infants had been targeted for death. Pregnancy and childbirth revived Holocaust terrors and left the women feeling particularly vulnerable. Watching their interviews, I wondered, whether their feelings of victimization were simply an understandable reaction based on past experience or whether the women had indeed been victimized in the postwar period.

As I investigated the experiences of DP women with German medical personnel, I compared the reported experiences of the DPs to German medical standards of the

time in order to determine whether the women's complaints suggested incompetence or worse on the part of the caregivers. In both cases mentioned above, the doctors had not followed German medical standards when recommending abortions. Many DPs interpreted the lack of pain relief during childbirth as a deliberate, antisemitic withholding of care; however, the use of pain medication during delivery was not standard medical practice. Also, many medications were not to be had because of postwar shortages. These survivors, many of whom experienced the pain of childbirth for the first time while under the care of German healthcare workers, interpreted the lack of relief as a continuation of their mistreatment by the Nazis. Later, when they contrasted their experiences with those of their daughters, many of whom gave birth in the U.S. during a time when anesthesia was commonly used, they felt convinced that the Germans had deliberately tormented them. At the same time, it soon became apparent that more than a quarter of the women who discussed the medical care they received during pregnancy described events that did

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not meet the standards of care of the time. Some of the cases were likely the result of incompetence but others rose to the standard of malpractice. A few notable cases suggested that malice was at play. This aspect of survivors' experiences would not have come to light were it not for the oral histories.

On a visit to the DP camps, the future prime minister of Israel, David Ben-Gurion, questioned why so few DP women were in leadership positions. The answer lies in the tremendous domestic responsibilities they had assumed because of the harsh conditions of camp life. The arrival of children had encouraged the reestablishment of prewar gender roles. Women assumed household duties of diapering, laundry, cleaning, and procuring and preparing food. Fears that Jewish children would not be allowed to survive heightened natural maternal concern, putting great pressure on Jewish women to protect their children. Although some women managed to continue their employment or schooling, most gave up these activities when their children were born. Men worked (for the Allies, in DP vocational schools and workshops, or on the

black market), dealt with emigration issues and the authorities. This division of labor was encouraged both by the conditions of camp life and by attempts to recreate the "normalcy" of their prewar homes. This domestic situation rarely made it into the written record.

Personal narratives can teach us much about aspects of people's lives that do not enter the documents that historians prefer. In the case of Holocaust survivors, the written documents were often created by outsiders who had their own agendas and prejudices. To ignore the survivors' memoirs and oral histories would be to create history based on sources no more credible. In some instances, there would be no other documents at all. To ignore the survivors' testimonies in those cases would be to let their history go untold.

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