Isr J Psychiatry Relat Sci Vol 38 No. 1 (2001) 58-68

Perceived Parental Rearing Behavior in Children of Holocaust Survivors

Natan P. F. Kellermann

AMCHA, the National Israeli Center for Psychosocial Support of Holocaust Survivors and the Second Generation, Jerusalem, Israel

Abstract: Holocaust survivors have often been described as inadequate parents. Their multiple losses were assumed to create child-rearing problems around both attachment and detachment. Empirical research, however, has yielded contradictory evidence regarding the parenting behavior of Holocaust survivors when investigated with classical parenting instruments. The present pilot-study investigated parental behavior with a new self-report instrument that also included salient Holocaust dimensions. The parent perception of 159 adult children of Holocaust survivors was thus compared with 151 control subjects. Factor analysis of data yielded four major kinds of parental rearing behaviors: transmission; affection; punishing and over-protection. While the second-generation group rated their parents higher on transmission, other differences in child-rearing practices were small, if taken as a whole. These findings largely support the descriptive literature on transgenerational transmission of trauma while at the same time refuting the view that Holocaust survivors function more inadequately than other parents do.

It has long been assumed that the extreme traumatization experienced by Holocaust survivors has had a detrimental effect on their capacity for parenting. Typically, Holocaust survivor parents have been regarded as too anxious, depressed and pre-occupied with mourning their multiple losses to be able to provide an adequate maturational environment for their children. As a result, such mothers and fathers have been thought to pass on their emotional burden to their sons and daughters, thus creating child-rearing problems around both attachment (1) and detachment (2). During the past 30 years, almost 400 papers have described the process of intergenerational transmission of trauma from Holocaust survivors to their "Second Generation" offspring (3-7).

Much of this literature, however, is based on anecdotal evidence, on single-case descriptive reports and/or on empirical studies with methodological limitations, which make generalizations of their findings highly problematic. Thus we still do not know if Holocaust survivor parents actually were very different in their child-rearing practices from other parents. The purpose of the present study is to further investigate this issue in order to attempt to verify the above assumptions by more objective means. After a brief overview of the literature on parental rearing behavior in Holocaust survivor families, some of the difficulties of measuring children's evaluations of parent behavior will be discussed. Thereafter, a new Holocaust survivor-parenting questionnaire will be constructed and validated with a preliminary comparative pilot-study.

Address for correspondence: Natan P. F. Kellermann, AMCHA, P.O.B. 2930, Jerusalem 91029, Israel
E-mail: natank@netmedia.net.il

Holocaust Survivors as Parents

Anecdotal reports tended to ascribe much of the behavior of Holocaust survivor parents to the culture of any traditional Jewish home in which the basic attitudes towards children were generally characterized by overfeeding, worrying and parental sacrifice. For example, Jewish parents were often depicted as asking their children: "What have you done? What are you going to do? You will bring me to the death! Are you warm enough? Have you had enough to eat? Take just a little more of this good soup!" Anthropologists described a typical Jewish home in the following manner: "All the sacrifice, all the suffering, all the solicitude pile up into a monument to parental love, the dimensions of which define the vastness of filial indebtedness" (8, p. 298). But the stereotype of the "Yiddishe Mammeh," familiar in many Jewish families, took on a new meaning in the anecdotal reports of Holocaust survivor families. Here, the overt messages were described as containing a more desperate and anxious undertone. For example, regarding food and eating: "Don't leave food on your plate, because... *then and there*, we had nothing!" Regarding trust: "These people are all anti-Semitic, they would kill us immediately if they could." Regarding coping with difficulties: "It could be worse, you know. What do you cry about?" Or "You have to do more if you want to *survive*. You have to be strong!"

Such anecdotal reports were later replaced with single case studies, interviews or questionnaire surveys of self-selected groups. Thus, sketches of "typical" Holocaust survivor families emerged over time (9) in which such families were depicted as more or less dysfunctional in terms of structure, relational patterns and the handling of intimacy, control and conflict (10). The home atmosphere was described as being weighed down by tension, sadness, conflict and distrust of strangers and/or extensive worries of something terrible happening. Attachments were found to be tighter and family members were perceived as more closely engaged, with separations being more difficult than in other families (11-13). Such caretaking patterns were assumed to hinder the healthy development (and differentiation) of self in the second generation (14). Further, Holocaust survivor parents were depicted as either too involved and overprotective, or too neglectful and indulgent, too rigid or too permissive, often with huge unrealistic expectations of their children (15). Finally, parent-child interactions in Holocaust survivor families were characterized by over-anxiety, intense emotional investment in the child with idealization and over-identification (16, p. 93).

Being based largely on clinical experience with children of Holocaust survivors in psychotherapy or on survey studies without a control group, such generalizations were criticized for painting an overly grim picture of Holocaust survivor parents in general. Therefore, empirical controlled studies started to appear in the 1970s that attempted to investigate Holocaust survivor parenting also in the non-clinical population. Over a period of 20 years some objective evidence started to appear. These studies were more or less focused on two main areas: (1) over-involvement and over-protection by Holocaust survivor parents with the resulting lack of individuation, separation, differentiation and autonomy in the children, sometimes described as family "enmeshment"; and (2) enforcement of control, "strictness" and disciplinary issues (17). These two areas were investigated in these studies with some of the prevalent and well-known self-report measures that required subjects to score their parents' behavior on various dimensions of parenthood as remembered during childhood. Four

such instruments were employed, while a fifth instrument, EMBU (18), includes much of the same factors (rejection, emotional warmth and overprotection), but has not yet been used in second-generation research.

(1) The Parental Behavior Inventory (19) focused on three major bi-polar dimensions of parental child-rearing patterns that repeatedly emerged as especially influential: 1. warmth or hostility of the parent-child relation (acceptance-rejection), 2. control or autonomy of the disciplinary approach (destructiveness-permissiveness), and 3. consistencies or inconsistencies that parents show in using discipline. In research on the second-generation, this instrument was used by Rosenberger (20), Gay et al. (21), Gay and Shulman (22), Last and Klein (23), and by Gross (24). For example, basing their findings on a small group of six patients in a youth clinic, Gay et al. (21) found that Holocaust survivor parents rated high in positive involvement and child centeredness, but also created difficulties for the children when moving out from home. Because of the small groups of investigated subjects, however, this early research cannot be regarded as representative of the larger population.

(2) The Semantic Differential Instrument (25) included three factors: 1. potency (fast-slow, strong-weak), 2. tension (happy-sad, calm-agitated), and 3. Attractiveness (hot-cold, gentle-harsh). This instrument was used by Keinan et al. (26) with 47 offspring compared with 46 control immigrant subjects and by Felsen and Erlich (27), who compared 32 offspring with 30 control subjects in a nonclinical setting. Neither study found significant differences in the children's perception of parents.

(3) The PBI: Parental Bonding Instrument (28) included two sub-scales: 1. care (affection, understanding, warmth), and 2. overprotection (control, intrusion, infantilization, encourage dependency). This instrument was used by Halik et al. (29) and by Zilberfein (30), but neither of them found significant differences in the mother-daughter relationship and/or in maternal protectiveness.

Similarly, (4) Weiss (31) found no significant differences between survivor and control families in the degree of parental permissiveness as measured with the *Cornell Parent Behavior Inventory*.

To sum up, when using reliable and valid measures of perceived parental rearing behavior, the above-mentioned studies did not find significant differences between Holocaust survivor parents and other parents. Neither did Leon et al. (32) with a different instrument, nor did Zlotogorski (33) and Sigal and Weinfeld (34) regarding enmeshment. Thus, we are faced with a clear discrepancy between descriptive reports of dysfunctional Holocaust survivor parents' behavior that empirical evidence cannot substantiate with more objective means. This discrepancy has in the past been explained as an effect of differences between clinical and non-clinical populations. Others have attributed the discrepant findings to various flaws in research methodology (3) that may have limited the generalizability of the findings from the empirical research. Such methodological difficulties will be further discussed below.

Difficulties in Studying Parental Rearing Behavior

Dealing with "normal" people, and using measures that are subjective and part of the spectrum of everyday experience, anyone attempting to investigate Holocaust survivors as parents is entering a minefield of methodological difficulties. For example, many studies included a small number of children of Holocaust survivors, often with

only one sex represented and without a control group. Though it is questionable whether there can ever be a homogeneous population of the second generation, demographic information on variables such as age, gender and the mental state of respondents and on the Holocaust background of their parents may increase the generalizability of findings.

First, *age* may have a significant impact on parent perception. Older respondents may be assumed to have resolved much of the normative rebellion of adolescence and be either more objective or more favorably inclined towards their elderly parents than they would have been at an earlier age. "As adolescents, they resented their parents for having burdened them with their traumatic past, but more recently, as they were growing older, they had developed a greater acceptance and a greater degree of empathy toward their parents" (35, p. 114).

Secondly, *gender* itself may influence the development of a second-generation identity, with daughters and sons feeling very differently about the same childrearing practices. Gender also plays an important role in determining the responses of Holocaust survivors' offspring to parental communication (or lack thereof) (36, 37). Some studies included only female subjects (e.g., 29) and various findings (e.g., 38), as well as classical psychoanalytic observations, indicate that the various relational constellations of mother-daughter, mother-son and father-daughter, father-son may be very different.

Thirdly, the *mental state* of respondents may have an influence on comparative studies. A possible source of disagreement between studies is that some used psychopathologically identified children and others were based on offspring from the general population. As clinical and non-clinical populations may view their parents differently, it is better to focus on well-functioning respondents (17).

Fourth, the survivor parent's age and background seems to be crucial for explaining the findings and a parent being alive or dead might also influence the children's perceptions, assuming that perceptions become more favorable when the parent dies. Similarly, data on the parents' Holocaust experiences may be important, for example, the extent of the parents' loss, survival age at the time of persecution, their country of origin and pre-Holocaust experiences as well as their country of resettlement and post-Holocaust experiences, their quality of marriage and intra-familial interactions, their general adaptional functioning, their ability to communicate and talk about their traumatic experiences, and psychopathology (23, 39, 40). For example, a child who grew up hearing parents screaming at night or who had to take care of a depressed parent would be more affected. However, while these variables seem relevant, they may be difficult to collect in a reliable manner.

Finally, a control group is crucial. Studies conducted outside Israel attempted to control for the "immigrant-effect" by including people with immigrant parents who were not Holocaust survivors. In Israel, control subjects with parents without any experiences of the Holocaust may be suitable because of their similar cultural and religious background. However, it may be that Jews in Israel or elsewhere have had parents who were traumatized by resettlement, war and grief of mourning. Further, if the collective trauma of the Jewish people influence child-rearing behavior, a non-Jewish control sample would provide a more adequate comparison.

Regarding measurement instrument, the most utilized self-report measures may introduce some ambiguity in the results. They may be too sensitive to social desirability (41) and therefore be unable to record the

internal experiences of the second generation (37). Other more delicate instruments may be more suitable in investigating how the various reciprocal interactions between parents and children influence the transgenerational transmission of Holocaust trauma. On the other hand, the advantage of self-report measures is that individuals report what they subjectively have perceived rather than what actually happened, which sometimes is more influential than the reality itself, as emphasized by Levenson (42), who asserted that the actions of the parents as *perceived* by the child may be more decisive than the parent's actions in themselves. For example, the impact of parental discipline methods appears to be based more on the child's perception than on the parent's action (43). College students' ratings of their mothers and fathers and the parents' rating of themselves were significantly correlated, demonstrating veridicality between parents' self-image and their offspring's perceptions (44).

A final problem with the earlier studies might have been that they failed to study the relevant aspects of Holocaust survivor parent behaviors. For example, while the above-mentioned instruments seem to include the essential dimensions of parenting in general, none fully covers the specific dimensions of parenting behavior observed among Holocaust survivor parents. These studies would thus fail to investigate the various child-rearing behaviors that may be crucial in the particular transmission of Holocaust trauma. It is my view that because these earlier instruments did not cover a representative sample, a new instrument has to be constructed. This will be the aim of the present pilot-study.

Constructing a New Holocaust Survivor Parenting Questionnaire

From the literature on transgenerational transmission of trauma as well as from the literature on perceived parental rearing behavior, several categories of parental behavior were identified. These included both many of the repeatedly found general aspects, such as rejection-acceptance, disciplinary approach and (over)-protection and/or (over)-involvement as well as some more specific aspects of Holocaust survivor parenting mentioned in the literature, such as excessive parental expectations, guilt infliction and anger regulation, role reversal with parents, parents being too busy, and actual Holocaust-related issues, such as being related to as a replacement of a relative who perished in the Holocaust, being influenced by parents' Holocaust past, feeling that a burden had been transmitted upon them, and having absorbed the inner pain of their parents. A few items were written to convey a phenomenological manifestation of each aspect, including various versions of some items found in previous questionnaires. These items were then translated into Hebrew and examined for content validity by 20 psychotherapists working in a treatment center for Holocaust survivors and the second generation. Each item was written on a card and given to these judges who were asked to indicate their relevance to the process of transgenerational transmission of Holocaust trauma. Items with poor correspondence and/or unclear content were discarded or re-written.

Thus, a total of 30 items were collected to cover divergent aspects of parental rearing behavior which respondents would be asked to rate on a five-point Likert-scale for mothers and fathers separately.

Method

Participants. Two groups of participants, some of whom were studying or teaching in various educational institutions, were asked to complete the above-mentioned parenting

questionnaire. They were told that the purpose of the study was to investigate how children of Holocaust survivors (Second Generation) and how children in general (Controls who reported that their parents had no personal experience of the Holocaust) view their parents. A total of 310 questionnaires were thus completed. The reason for the inconsistencies of rated mothers (159) and fathers (151) was that some had no memories of one parent (usually their father). Both groups included self-selected, mostly well-educated and apparently non-clinical, well-functioning Israelis whose demographic characteristics are reported in Table 1.

Both groups seem to be comparable on gender, with a dominant participation of female subjects. However, the second generation group was a little older, had a few more children, and included a larger number of married subjects (85%) than the control group (74%). Furthermore, there was a difference in parent status. About half of the Holocaust survivors had died compared to only a third of the general Israeli population. This difference, however, may be due to the somewhat higher age of the Holocaust survivor parents (Mean: 71 compared to Mean 66).

Results

The main purpose of the present pilot-study was to validate the new questionnaire. In order to find the underlying variables among the items included in the new questionnaire, generalized least squares method of factor analysis was computed separately for mother data and father data since their ratings are not independent. This was followed by an oblique rotation of the 30 items (after dropping items with dual factor loading and with primary factor loading lower than .50). This yielded four primary factors: a seven-item "*transmission*" sub-scale, with a Cronbach alpha coefficient of .89, a seven-item "*affection*" (or emotional warmth) sub-scale with an alpha coefficient of .87, a three-item "*punishing*" (or rejection) sub-scale with an alpha coefficient of .75, and a three-item "*over-involvement*" (or over-protection) sub-scale with an alpha coefficient of .73. The Eigenvalues and Pct of variance for each factor are listed in Table 2.

Table 1. *Demographic Characteristics*

		Second Generation n=159		Control n=151	
Parent	Mother	(81)	51%	(78)	52%
	Father	(78)	49%	(83)	48%
Sex	Female	84%		84%	
	Male	16%		16%	
Age	Mean age (range)	43 (22-54)		41 (19-65)	
Marital status	Single	6.5 %		13%	
	Married	85 %		75%	
	Divorced	8.5 %		12%	
Number of Children	Mean	3.2		2.7	
Parent status	Alive (Mean age, range)	53% (71, 60-86)		71% (66, 45-92)	
	Dead	47%		29%	

Table 2. *Factor Loading and % of Variance*

Factor	Eigenvalue	Pct of variance	Cum Pct
1. Transmission	8.52	28.4	28.4
2. Affection	3.75	12.5	40.9
3. Punishing	2.03	6.8	47.7
4. Over-involvement/protection	1.09	3.6	51.3

Table 3. *Items Included in Each Subscale*

Transmission

1. I felt that I had to protect my parent
4. I felt responsible for the feelings of my parent
11. I felt guilty when my parent was unhappy.
13. My parent transmitted his/her burden onto me.
23. The past of my parent had an influence on my life.
24. I felt like a parent to my parent.
26. I absorbed the inner pain of my parent.

Affection

8. I felt that my parent accepted me.
14. My parent showed me that s/he loved me.
15. In times of difficulty I could get help from my parent.
21. When I was sad, I could get support from my parent.
22. My parent respected the fact that I had different opinions than he/she.
25. My parent hugged me.
27. I could trust my parent.

Punishing

3. My parent punished me.
12. My parent hit me.
28. My parent shouted at me.

Over-involvement/protection

9. My parent was too involved in my life.
19. My parent warned me of various dangers that might happen.
20. My parent was afraid that something might happen to me when I was far away.

The items included in each of these four parenting subscales are listed in Table 3.

Similar to numerous studies on parenting reviewed above, affection, punishing and over-involvement were again found as salient factors. In addition, a distinct transmission factor emerged.

Though not a part of the main focus of the present study, comparison with *t*-tests between the second-generation group and the control group and for mothers and fathers computed separately yielded the following results. Two-way ANOVA (between by within) group and parent are presented in Table 4.

Table 4. *Means and SD of Dependent Variables for Mothers & Fathers*

	Second Generation		Control		F Values	p
	Mean	SD	Mean	SD		
MOTHERS n=159						
transmission	20.2	7.3	17.8	6.8	4.48	*
affection	24.6	5.7	21.9	5.9	.663	
punishing	6.2	2.1	6.6	2.5	1.48	
over-protection	9.0	3.2	9.0	3.0	.013	
FATHERS n=151						
transmission	16.9	7.2	13.9	6.3	7.41	**
affection	19.9	6.0	21.1	5.9	1.50	
punishing	6.4	2.8	5.5	2.2	5.03	*
over-protection	7.2	2.8	7.3	2.7	.1105	

* p<.05. ** p<.01

When analyzing findings of mothers and fathers separately, both Holocaust survivor mothers and fathers tended to rate higher on transmission than other parents. Except for a higher rating on the punishing factor for Holocaust survivor fathers, no other significant differences were found between the two groups. Holocaust survivor mothers were not rated higher on over-protection, than other mothers. As expected, mothers in general (Means 18.9) tended to transmit more than fathers (Means 15.3) and tended to be more over-protective (Means 9.0) than fathers (Means 7.2), but no significant differences were found on the other two factors for the entire population.

Discussion

The present pilot-study indicates that, except for Holocaust survivors rating higher on transmission, difference in general child-rearing practices such as affection, punishing and over-protection seemed to be small, if taken as a whole. Thus, the assumption that Holocaust survivor parents are viewed by their children as dysfunctional was not confirmed by the present study. Contrariwise, the present findings indicate that Holocaust survivor parents are viewed by their children in a positive light. This supports earlier findings (29, 30) that Holocaust survivor mothers and other mothers are seen as similarly caring and protective, and that Holocaust survivor parents are viewed as basically "dependable, responsible, industrious, and intelligent" (45, p. 1073).

Three main methodological problems, however, make it somewhat difficult to interpret these findings unequivocally. First, sampling procedures, particularly important in validating a new measure such as this, were not sufficiently rigorous. For example, the groups were self-selected without considering possible differences in, for example, ethnicity, socio-economic status and education. Furthermore, the two groups were different in important aspects: the children of survivors were somewhat older, were more likely to be married, had more children, and their parent was more likely to be dead. All of these factors may make one more likely to think better of one's parent. Whether these differences were merely a sampling problem or a manifestation of true differences in parental perception remains to be investigated further. Second, the participants were told that the study was about the effects of the Holocaust and the only

significant finding was that the transmission score was higher. Having brought this to their attention may account for some or all of the score difference. Finally, issues of construct validity and reliability clearly needed to be further addressed.

Because of the inherent problems in the present study, the appearance of a salient transmission factor in the results should therefore be interpreted with some caution. If one can accept the limitations of this study, however, the findings here seem consistent with the descriptive literature that depicts children of Holocaust survivors as feeling more protective and responsible of their parents than other children. As if they were themselves parents to their parents and through some "invisible loyalties" (46), children thus seem to adopt the role/s of a "parental/parentified child" (47). Such exaggerated commitment may be characterized as a kind of role reversal with the traumatized parent that explains part of the process involved in all transgenerational transmission of trauma.

Taking into consideration the various methodological problems in this pilot-study, the present findings should be clearly looked upon only as a tentative first step in investigating perceived parental rearing behavior in children of Holocaust survivors. It is still unknown how meaningful the findings of the present study are after all the calculations have been carried out. For this reason, and given the new questionnaire, and the mixed sample, this might suggest a promising direction for future research. The questionnaire seemed to be a valid measure of Holocaust survivor's (and perhaps other traumatized population's) parental behaviors; people understood it and it is worth repeating it with more controlled populations.

Acknowledgement

The author gratefully acknowledges the help of Danny Brom and Krishna Kumar for their advice on the analysis of data.

References

1. Klein-Parker F. Dominant attitudes of adult children of Holocaust survivors toward their parents. In: Wilson JP, Kahana B, editors. Human adaptation to extreme stress. New York: Plenum, 1988: pp. 193-217.
2. Rose SL, Garske J. Family environment, adjustment, and coping among children of Holocaust survivors: A comparative investigation. Am J Orthopsychiatry 1987;57:332-344.
3. Solkoff N. Children of survivors of the Nazi Holocaust: A critical review of the literature. Am J Orthopsychiatry 1992;62:342-358.
4. Danieli Y, editor. International handbook of multigenerational legacies of trauma. New York & London: Plenum, 1998.
5. Kellermann NPF. Bibliography: Children of Holocaust survivors. AMCHA, the National Israeli Center for Psychosocial Support of Holocaust Survivors and the Second Generation, Jerusalem, 1997.
6. Krell R, Sherman MI, editors. Medical and psychological effects of concentration camps on Holocaust survivors: A bibliography. New Brunswick & London: Transaction, 1997.
7. Baranowsky AB, Young M, Johnson-Douglas S, Williams-Keeler L, McCarrey M. PTSD Transmission: A review of secondary traumatization in Holocaust survivor families. Can Psych 1998;39:247-256.
8. Zborowski M, Herzog E. Life is with people: The culture of the shtetl. New York: International Universities, 1952.
9. Danieli Y. The heterogeneity of post-war adaptation in families of Holocaust survivors. In: Braham RL, editor. The psychological perspectives of the Holocaust and of its aftermath. New York: Plenum, 1988: pp. 109-128.
10. Freyberg JT. Difficulties in separation-individuation as experienced by offspring of

Nazi Holocaust survivors. Am J Orthopsychiatry 1980;50:87-95.
11. Barocas HA, Barocas C. Separation-individuation conflicts in children of Holocaust survivors. J Contemp Psychother 1980;11:6-14.
12. Podietz L, Zwerling I, Ficher II, Belmont H, Eisenstein T, Shapiro M, Levick M. Engagement in families of Holocaust survivors. J Mar Fam Ther 1984;10:43-51.
13. Bar-On D, Eland J, Kleber RJ, Krell R, Moore Y, Sagi A, Soriano E, Suedenfeld P, van der Velden PG, van Ijzendoorn MH. Multigenerational perspectives on coping with the Holocaust experience: An attachment perspective for understanding the developmental sequelae of trauma across generations. Int J Behav Dev 1998;22:315-338.
14. Metzger-Brown E. The transmission of trauma through caretaking patterns of behavior in Holocaust families: Re-enactment in a facilitated long-term second-generation group. Smith Coll Stud Soc W 1998;68:267-285.
15. Almagor M, Leon GR. Transgenerational effects of the concentration camp experience. In: Marcus P, Rosenberg A, editors. Healing their wounds: Psychotherapy with Holocaust survivors and their families. New York: Praeger, 1989.
16. Davidson S. Holding on to humanity: The message of Holocaust survivors: The Shamai Davidson papers. Charny IW, editor. New York: New York University, 1992.
17. Perris C, Arindell WA, Eisemann E, editors. Parenting and psychopathology. New York: Wiley, 1994.
18. Perris C, Jacobsson L, Lindstrom H, von Knorring L, Perris H. Development of a new inventory for assessing memories of parental rearing behavior. Act Psychiat Scand 1980; 61:265-274.
19. Schaefer ES. A circumplex model for maternal behavior. J Abnorm Soc Psychol 1959; 59:232-245.
20. Rosenberger L. Children of survivors. In: Anthony EJ, Koupernik C, editors. The child in his family: The impact of disease and death. New York: Wiley, 1973: pp. 375-377.
21. Gay M, Fuchs J, Blittner M. Characteristics of the offspring of Holocaust survivors in Israel. Ment Health & Soc 1974;1:302-312.
22. Gay M, Shulman S. Comparison of children of Holocaust survivors with children of the general population in Israel. Ment Health & Soc 1978;5:252-256.
23. Last U, Klein H. The impact of parental Holocaust traumatization on offspring's reports of parental child-rearing practices. J Youth Adolesc 1984;13: 267-283.
24. Gross S. The relationship of severity of the Holocaust condition to survivors' child-rearing abilities and their offspring's mental health. J Cal Grad S Mar Fam Ther 1988;15: 211-222.
25. Osgood CE, Suci GJ, Tannenbaum PH. The measurement of meaning. Urbana: University of Illinois, 1957.
26. Keinan G, Mikulincer M, Rybnicki A. Perception of self and parents by second-generation Holocaust survivors. Behav Med 1988;14:6-12.
27. Felsen I, Erlich S. Identification patterns of offspring of Holocaust survivors with their parents. Am J Orthopsychiatry 1990;60:506-520.
28. Parker G. Parental style and parental loss. In: Henderson I, Burrows A, editors. Handbook of social psychiatry. New York: Elsevier Science, 1988.
29. Halik V, Rosenthal DA, Pattison PE. Intergenerational effects of the Holocaust: Patterns of engagement in the mother-daughter relationship. Fam Proc 1990;29:325-339.
30. Zilberfein F. Children of Holocaust survivors: Separation obstacles, attachments and anxiety. Soc Work Health Care 1996;23:35-55.
31. Weiss MD. Parental uses of authority and discipline by Holocaust survivors. Special Issue: Children and the Holocaust. Fam Ther 1988;15:199-209.
32. Leon GR, Butcher JN, Kleinman M, Goldberg A, Almagor M. Survivors of the Holocaust and their children: Current status and adjustment. J Pers Soc Psychol 1981;41:503-516.
33. Zlotogorski Z. Offspring of concentration camp survivors: A study of levels of ego

functioning. Isr J Psychiat Rel Sci 1985;22: 201-209.
34. Sigal J, Weinfeld M. Trauma and rebirth: Intergenerational effects of the Holocaust. New York: Praeger, 1989.
35. Marcus P, Rosenberg A. Treatment issues with survivors and their offspring: An interview with Anna Ornstein. In: Marcus P, Rosenberg A, editors. Healing their wounds: Psychotherapy with Holocaust survivors and their families. New York: Praeger, 1989: pp. 105-116.
36. Vogel ML. Gender as a factor in the transgenerational transmission of trauma. Wom & Ther 1994;15:35-47.
37. Felsen I. Transgenerational transmission of effects of the Holocaust: The north American research perspective. In: Danieli Y, editor. International handbook of multigenerational legacies of trauma. New York & London: Plenum, 1998: pp. 43-68.
38. Lichtman H. Parental communication of Holocaust experiences and personality characteristics among second generation survivors. J Clin Psychol 1984;40:914-924.
39. Solomon Z, Kotler M, Mikulincer M. Combat-related post-traumatic stress disorder among second-generation Holocaust survivors: Preliminary findings. Am J Psychiatry 1988;145:865-868.
40. Yehuda R, Schmeidler J, Giller EL, Siever LJ, Binder-Brynes K. Relationship between posttraumatic stress disorder characteristics of Holocaust survivors and their adult offspring. Am J Psychiatry 1998;155:841-843.
41. Solomon Z. Transgenerational effects of the Holocaust: The Israeli research perspective. In: Danieli Y, editor. International handbook of multigenerational legacies of trauma. New York & London: Plenum, 1998: pp. 69-84.
42. Levenson H. Perceived parental antecedents of internal, powerful others, and chance locus of control orientations. Dev Psychol 1973;9:260-265.
43. Grusec JE, Goodnow JJ. Impact of parental discipline methods on child's internalization of values: A reconceptualization of current points of view. Dev Psychol 1994;30:4-19.
44. Spence J, Helmreich R. Masculinity and femininity. Austin, Texas: University of Texas, 1978.
45. Leventhal G, Ontell MK. A descriptive demographic and personality study of second-generation Jewish Holocaust survivors. Psychol Rep 1989;64:1067-1073.
46. Boszormenyi-Nagy I, Spark GM. Invisible loyalties. New York: Harper & Row, 1973.
47. Miller A. The drama of the gifted child: The search for the true self. New York: Basic Books, 1981.