

Person-Centered Trauma Informed care for Holocaust Survivors



The Jewish Federations®
OF NORTH AMERICA

Holocaust
Survivor Initiative



jewish family service
Center for Holocaust Survivors

PCTI is a holistic approach to supportive services that promotes the dignity, strength, and empowerment of trauma survivors by incorporating knowledge about trauma into programs, policies, and procedures.

What should I know about the Holocaust?

The Holocaust was the systematic, bureaucratic, state-sponsored persecution and murder of six million Jews by the Nazi regime and its collaborators. Nazis believed that Germans were “racially superior” and that Jews were a threat. Other groups were also targeted because of a believed “racial inferiority”.

In the 1930s, nine million European Jews lived in countries that would later be occupied or influenced by Nazi Germany during WWII. Jews were murdered or confined to ghettos, concentration and extermination camps, and forced-labor camps. In labor camps Jews were barely kept alive and used for slave labor. In concentration camps Jews were starved to death, used in inhumane medical experiments, or were eventually killed. By the end of the war these camps became death or extermination camps where inmates were killed. Following the end of WWII, many surviving Jews emigrated to Israel, the United States, and other countries.

Who is a Holocaust survivor?

Holocaust survivors are defined as people who lived in one of the countries that were occupied or under the influence of the Nazi regime for any time during 1933 and 1945. Included are people who were forced to flee because of persecution and those interred in forced labor or extermination camps.

Survivors have shared traumatic experiences including:

- Constant threat of death
- Exposure to extreme violence
- Prolonged physical, mental, sexual, or medical abuse
- Extreme deprivation, thirst, and hunger
- Dehumanizing treatment
- Exposure to unbearable weather
- Lethal hard labor
- Extermination of entire families and communities
- Guilt over surviving or inability to save others
- Immigration to new lands

What makes a Holocaust survivor different from any other older adult?

Holocaust survivors may speak with heavily accented English. They may not have any family members of the same generational age. Survivors of camps may have a number tattoo on their arm.

Many survivors were the subject of medical experiments. As a caregiver, be aware of the trauma that many Holocaust survivors associate with visiting a doctor and having blood drawn.

How can I effectively communicate with a Holocaust Survivor?

- Listen carefully
- Speak calmly and patiently
- Thoroughly explain all parts of the care you are providing, whether a shower or medical procedure
- Validate their feelings
- Ask open-ended questions instead of “yes” or “no”
- Follow up any medical care with discussion verifying the survivors understanding of information
- Be aware of how you are presenting yourself – your body language, facial expressions, and even dress can influence the trust or distrust a survivor has with you.

How can I effectively care for a Holocaust Survivor?

Holocaust survivors at the end of life may respond differently than other patients to everyday activities, sounds, conversations, and experiences. Be aware of potential triggers.

Personal hygiene – harsh smells, showering, inhalation masks, or being handled roughly can provoke flashbacks of being pushed and beaten, delousing procedures, and medical experiments.

Sounds – dogs, alarms, loudspeakers, and loud voices were part of the attacks and intimidation used against camp inmates. The sound of high heels or boots as footwear can remind survivors of German soldiers.

Medical care - A distrust of the medical community is based on memories of selections for death and experiments. In the camps, any sign of weakness or illness was likely to bring immediate death.

Sights - Religious symbols, like crucifixes, or Christmas decorations can unsettle survivors. They were a symbol of the enemy during the war. Harsh lighting or flashlights are a reminder of spotlights in concentration camps.

Meal time and food – Many starved to death during the war. Those that survived experienced extreme ever-present hunger and starvation. This can manifest as food hoarding, overeating, or refusal to eat food that is unappetizing or new.

Secure or locked areas – Survivors were forced into walled ghettos, barbed wire enclosures, and barred prisons. Any sense of limited movement or restraint can be very difficult.

Separation from loved ones – during war years, family members were forcibly separated, never to meet again.

Disclosure of personal information – refusing to share personal, financial, or clinical information is based on a mistrust of anyone who is not close family. Discussions around advanced care planning is counter-intuitive to the will to live and survive during the Holocaust.

Jewish holidays – Nazis often killed and rounded up Jews on Jewish holidays, knowing that their targets would be vulnerable. Being aware of upcoming Jewish holidays will help you prepare for any reaction.

Relocation – survivors may have strong reactions to being relocated to a hospital or even to a different location within a long-term care facility. This is a reminder of forced relocation and never seeing loved ones again.

Our experiences in life make us what we are today. Through compassion, sensitivity, patience, and understanding, you can be an effective caregiver for a Holocaust survivor.

References:

ACL Guidance to the Aging Services Network: Outreach and Service Provision to Holocaust Survivors

Baycrest Caring for Holocaust Survivors – Potential Triggers for Holocaust Survivors