Chapter 9

Psychological Witnessing of My Mother’s Holocaust Testimony

George Halasz

If you have listened (repeatedly) to old lessons, you will listen to new ones.

Berachos, 40a

Trauma—and its impact on the hearer—leaves, indeed, no hiding place. As one comes to know the survivor, one generally comes to know oneself; and that is not a simple task. (p. 72) ... Silence is for them a fated exile, yet also a home, a destination, and a binding oath. To not return from this silence is rule rather than exception. (p. 58)

Dori Laub (1992, italics in original)

After the Black Saturday bushfires in Victoria, Australia in February 2009, I was asked how to manage traumatized children. Having struggled for years to come to terms with my own family’s history of Holocaust trauma, I offered two principles: first, to do no harm; second, to normalize children’s traumatic experiences. When one person asked if I meant that children should be encouraged to forget their losses or that parents should distract them when they spoke of trauma, it became clear that I must explain normalization.

The priority for children’s physical safety is a given. Next, children should resume daily routines as soon as possible: school, their favorite hobbies and sports, family and social relationships. However, it is my experience that while this approach is necessary for all children, it is not sufficient for some. Should a child not return to health after some weeks or show disruptive behavior or withdrawal, this may signal that masked emotional responses to the trauma are “stored” in the body. The body remembers trauma even if the mind cannot and expresses it either as over- or underactivity of the nervous system.

Traumatized children need their experience of trauma to be coaxed from them. The psychological witness to their trauma should be prepared to be overwhelmed by disorientation, numbness or “compassion fatigue,” which are symptoms reflecting vicarious trauma. If a child’s caregivers are unable
or unprepared to take on the demanding role of witnesses to trauma, then I recommend specialist intervention.

The task of the psychological witness—to remain receptive to what for lack of a more specific term we call trauma—is not for the faint-hearted. Often, I have found myself, as a child psychiatrist, overwhelmed during or after meeting with trauma survivors. Over the years, I have learned to pay special attention during such encounters, to recognize the onset of vicarious trauma in even a vague sense of uneasiness, before it progresses to a feeling of becoming “unreal.” This lesson I keep on relearning.

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I have a particular need to be mindful of trauma because of my own experience as a child of Holocaust survivors. In retrospect, I have realized that the traumatic experiences I was witnessing as a psychiatrist were unknown yet strangely familiar. I came to understand this part of my personality through my professional focus on how children and infants cope with their traumatized parents, and they with their children. Indeed, this focus on the simultaneous operation of psychological coping mechanisms, by infants with their parents and between traumatized parents, is at the heart of my research into psychological witnessing of relational trauma, the term introduced by Schore (2001).

Children, being emotionally dependent on parents, are naturally receptive to their parents’ emotions. According to current research, the children of parents who are reenacting past trauma both receive parental trauma directly and may also experience vicarious trauma. In other words, infants and children may be said to be immersed in an environment of subtle or overt traumatic enactments.

If children can experience their parents’ trauma both directly and vicariously, how is such trauma, I wondered, passed from parents to children? Is trauma transmitted between the generations? If so, how is such trauma repaired?

At a personal level, I wondered how I had dealt with my experience of my parents’ Holocaust trauma. In midlife, I reflected on my family relationships from infancy to early adulthood and saw that I have lived in a state of denial about the deep impact of my parents’ trauma on my personality. To overcome my deepest level of denial, I decided to research the subtle communications with my mother and to explore the paths and processes that trauma might follow between parent and child.

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1 Trauma victims who lack the cognitive and emotional structures to assimilate the experience immediately use the state of consciousness known as dissociation to escape from the full psychological impact of the event (Classen, Koopman, & Spiegel, 1993).

In 1998, the year after my father, Laci Halasz, of blessed memory, passed away, my mother was interviewed at length by the interviewer from the Visual History Foundation. I was present through the interview and asked to join my mother near the end of her Holocaust testimony. The question posed to my mother, while I was sitting next to her, confronted the impact of the Holocaust on her parenting of me:

INTERVIEWER: Do you think your experiences affected the way that you brought up George?

GEORGE HALASZ: This is the question.

MRS. HALASZ: I want to know, you know, we were really very protective parents but I’m not so sure that our bring up or from the war, that I’m not so sure. Maybe it’s both of them.

INTERVIEWER: Do you think much about that time, or do you have dreams about the Holocaust and the experiences?

MRS. HALASZ: No. Never, never. I never. I had the dreams soon after the war about the ... but not anymore, no.

This transcript has a fragmented quality. This is my mother’s normal style. I had repeatedly asked myself such questions and had addressed them in therapy during my 20s and 30s and in ongoing self-therapy. For me to explore such questions meant breaking the then-taboo of silence and secrecy. A few years later, I would come to realize that I needed to focus more systematically to uncover what really happened between my mother and father “after” (some claim it never finishes for survivors) the Holocaust, before I was born and years later between my parents and me. But here, in my midlife, an interviewer openly and directly confronted my mother. Next, the interviewer questioned me:

INTERVIEWER: George, I was ... speaking of your mother with respect to your own reflections as a child and adolescent of survivors. You study in a clinical manner the effects war has on children, your mother was a child at the outbreak of the war. ... She was 12 years old. From your own, your professional view, how do you think that her war experiences have affected her?

GEORGE HALASZ: I understand the question very clearly, but it’s probably beyond the limit of one’s imagination to respond to such a question. If you were to ask me how a third party is affected, I could give you chapter and verse I think, very easily. I think because of the emotional bonds and the history that we share, personally I’m not very comfortable to let my imagination just freely roam in this setting.

Also, I think, because after we’ve finished [this interview] there’s still a relationship that we have. Having said that I actually feel that my mother would probably have been affected more at the ages of 15
and 16 when Budapest was actually invaded, and from the accounts that I've heard, the first few years whilst their lives in Budapest was constricted, there was nothing very dramatic.

Nearly 2 years after this VHF interview with my mother (Halasz, 1998), I returned to view that video. My hope was to observe and to capture some fleeting moments seen on my mother's face as her reactions to her narrative, and juxtapose my reactions to her. Then, so I thought, I might become a more reliable witness to what was transmitted between us, to qualify for evidence for the "transmission of trauma" between the generations.

This review of my mother's testimony video resulted in my decision to produce a split-screen video, Many Faces of Trauma (see Plate 3). The split-screen technique is a research approach used in mother-infant studies that focus on the fine interaction between mothers and their babies. I thought that I could adapt that approach to capture my mother's facial expressions during her narrative of her Holocaust experiences while showing my own facial reactions while I was filmed watching her. The two video films were then synchronized into split screen. I then viewed this split screen in my subsequent research in which I became a "witness," witnessing her at the same time as my own reactions to her.

During the filming of my reactions to viewing my mother's video, the filmmaker asked about my reaction:

INTERVIEWER: All right George, what was happening to you when you were watching your Mum's video?

GEORGE HALASZ: Yes, I, I think at different times the overall happening I think was times of quite a lot of headache, of tension, and in a surprising way what happened was when I myself became emotional, I felt a lot of the headachy tension state relieved and then I'd be in a much more relieved state until the next sort of wave of tension, headache started. Then again it would be relieved by either laughter or if there's an emotional reaction.

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Now, as I look back over the last decade, it is clear to me that my motive for seeking visible evidence for transmitted trauma had its provenance in my experience as a silent child witness to many fleeting, recurrent moments of invisible experiences. I wanted validation if not vindication. I wanted to understand more precisely what I had witnessed. I had decided to become my own psychological witness. Were those "fleeting moments" of intense switching between my face "matching" and then becoming "detached" markers of my internal emotional state in which I was attuned up to a point and then had to dissociate? Could my facial expressions be equated to a psychological process of attunement and dissociation, markers of relational trauma? If so, what made these moments "traumatic"?

Others who knew me as a child have suggested that I was an excessively sensitive child. Might that mean that I experienced ordinary parenting as traumatic due possibly to a heightened sense of empathy with my mother and father? Could that account for my excessive absorbing of my parents' unspoken traumatic experiences?

Some writers have observed and written of the double life of survivors—the manifest coping life that masks the hidden trauma. It seemed at least possible that I also lived a kind of double life, my chosen profession as a child psychiatrist masking the silent child witness of parental trauma. I likened this child witness to a participant in a self-imposed witness protection program who was anxiously waiting to give evidence in a case of transmitted trauma.

I will try to describe how I arrived at giving my "testimony" from an infant's perspective. An infant obviously cannot speak of his experience being "traumatic." The split-screen images afforded me the opportunity to study closely my facial expressions, as I witnessed my mother, and to capture fleeting moments of detachment as seen on my face. These occurred as a response to my mother experiencing overwhelming emotional states, in either intensity or prolonged time.

When I say that I came to "testify" from an infant's perspective to my mother's extreme trauma by studying our facial images on the split screen, I suggest that I found a way to speak of the silent moments, to tell my story in images, beyond words, with the images testifying of my detached states of mind (dissociations). I made the assumption that such moments represented an outer marker of my inner dissociation, the fleeting moments of relational trauma.

Here, I need to update the impact of my increased awareness of my dissociations on my relationship with my mother. After these years of exploring the subtle cues that triggered my adult reactions to my mother's Holocaust video testimony, a major change has been occurring in our "lived" relationship. I found that I was more and more able to relate with her, and others, in authentic ways. This occurred as I learned to track our social interactions, to register new levels of my awareness to subtle triggers from my mother, as fleeting moments that previously had passed below my radar.

It is precisely those moments that in the past would have rendered me numb that I now nip in the bud. For example, when I start to register my own discomfort in response to my mother's intensity reflected in her breathing rate, which I have learned as a trigger, I now tend to speak up, to ask her if she is aware that she is getting tense or nervous. This is a slow but profound change in the way that we are relating. Thus, over time, incrementally changing each time, the accumulated reshaping of our relating has resulted in our ability to sustain longer and more meaningful conversations before our inevitable disconnection sets in.
This emerging capacity, to recognize and thus regulate the onset of potential relational trauma in our relationship, prevents me succumbing to dissociation, depersonalization, or derealization—marked by my detached face. I make an effort to prepare myself before I see her, to remain mindful during our time together, and to leave some time to debrief myself following potentially traumatic meetings.

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Those of us who are trained professionally to look unflinchingly into the faces and meet the eyes of trauma survivors see fleeting instances of frozen faces or averted or blank gazes. Less frequently are we taught to pay careful attention to the patterns of breathing, theirs and ours.

I have discovered that paying special attention to the face, gaze, voice, and breathing patterns of my mother is critically important if I am to avoid a reenactment, becoming yet again the traumatized child of a survivor. I have learned to confront, by making visible and audible, those invisible and silent barriers that now I increasingly respect as the gateway to my becoming mindless in the past. For once those barriers have been breached, the trauma stored in the body has the power to trigger processes below our threshold of awareness. Vicarious trauma sets in.

These frozen moments beyond our ordinary awareness are measured in microseconds, but they can be captured on video and then analyzed using freeze-frames. During these fleeting moments of reenactment, an animated face becomes still; a musical and rhythmic voice becomes robotic or silent and is perhaps accompanied by a critical look; or a familiar gentle touch is withdrawn, as responses become erratic or unpredictable.

I have become aware that I am entitled, indeed that I need, to claim such moments as my own experiences of trauma, direct or vicarious, even as they parallel my mother’s reliving of her own moments of trauma. And this understanding opens up new questions. How do the symptoms of traumatized children affect their carers? It seems to me that the responses of witnesses to trauma depend on the balance between their capacity to allow themselves to empathize with—to let in emotionally—the other’s experience and their need to keep such powerful identifications at arm’s length.

Each traumatized person, whether infant, child, or adult, is entitled to have his or her experience witnessed and validated. Yet, the playing out of these competing entitlements between family members is fraught with problems, as are definitions of the nature of those traumatic and fleeting experiences. For example, when a child feels a sense of shame, humiliation, or embarrassment on learning that a survivor parent had witnessed members of his or her family being murdered, can that child be said to be traumatized? Or, likewise, is the child traumatized when the child learns that a parent lives with the scars of torture and starvation or has been treated as subhuman? That moment of learning extends beyond the “facts.”

For the child, the emotional undercurrent that accompanied that fact may reverberate for decades, each time that fact is recalled. This undercurrent, the Gestalt of sensations and emotions; subtle changes in facial expressions, breathing patterns, and skin tones; alteration of the tone and rhythm in speech is my focus when I try to testify as a psychological witness to transmitted trauma.

As parents, carers, and professionals we need to be aware that trauma, both direct and vicarious, produces similar effects—it disrupts awareness, alters levels of consciousness, and in the extreme we literally faint. We should also be mindful that changes in awareness, including dissociation, depersonalization, and derealization, differ markedly in adults and children.

Such differences arise in part from the immaturity of children’s brains. For example, clinical and research experience highlights that children’s symptoms may be so fleeting they are easily overlooked by busy or untrained adults. This partly explains why we perpetuate the mistaken notions that “children will get over it,” that “they are resilient,” or that “they’re just children.” The fact is that the younger the child when he or she experiences trauma, the greater the risk that the child will face long-term developmental consequences.

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My personal experience of relational trauma has deepened my understanding, informed by my 30 years as a psychiatrist, that subtle, intimate moments when the infant’s or child’s attachments are disrupted can be as traumatic as earthquakes, tsunamis, floods, or fires or as wars, torture, or deliberate terror attacks.

It may seem inappropriate for relational disruptions in otherwise loving and caring homes to be labeled traumatic. Yet, sleeper effects experienced later in life, such as “anniversary reactions” that recall losses of significant others, sometimes decades after the event, are evidence of such relational trauma.

I learned as a 7-year-old child, when we escaped during the Hungarian revolution in 1956, that even my devoted parents were unable to shield me from experiences of loss of some of my most intimate attachments: family and school friends, my pet dog, toys, my bedroom, in fact home and country. These were my known, visible losses. Later, I learned about the less-visible ones. My memory of those events, as reconstructed during a lengthy and intensive personal analysis in my late 20s to mid-30s, included the smells associated with seeing my parents digging up our kitchen floor, the damp earth hiding buried valuables that they needed to retrieve before we escaped.

I have no memory of what my mother’s and father’s face might have looked like in this childhood scene, but I do know their instruction to
me—this incident was to be our secret. This was one of many secrets, part and parcel of our family plans to prepare for our eventual escape to Austria and Australia. Later in life, I learned that family friends who had also tried to escape were captured, mother, father, and daughter, detained by the police in Hungary. I can only wonder how many times an anxious small boy’s gaze was met in return, or mirrored, by his parents equally anxious, silent, frozen faces.

In my video, I try to elicit how suppression of these seemingly invisible experiences that leave the traces of trauma in the body may trigger mental events, undercurrents, more subtle than those visible losses that I could recall.

To start a new life often demands a necessary forgetting of the old life in order both to survive and to free up the energy that grief and mourning consume. Such was my parents’ fate after they survived the Holocaust. Just over a decade later, they started all over again in Australia, and on this second beginning of a new life, I also was there. But, neither they nor I had psychological witnesses to our less-visible losses to whom we could articulate our feelings of loss of safety and security, of the need for regular and predictable mealtimes, and so on.

As a child, I had some sense that my parents’ worded worries on arrival in Australia took priority over anything that I might have been experiencing. For example, it was self-evident that while my uncle and aunt temporarily took us in to their small home on our arrival, my parents’ priority was clearly to find a new home, to find work to earn some money, and to send me to school, as soon as possible. My worries on being unable to speak English, starting school after the disruption of leaving my home, escaping and being unable to speak even in my mother tongue with my parents about what had happened to my world, or was happening to me each day, seemed to be low on the list of priorities in the chaos that was my experience of the grown-up world.

It was to try to find and, if possible, to identify these invisible and inaudible transformations and to learn how to read the many faces of stress and trauma—frozen faces, whispered voices, stilted gestures—that I began to explore the potential of split-screen video.

My approach may offend some people. Some may rightly say that my parents faced “real” threat to their lives during times of capture, imprisonment, starvation. As evidence, they may cite that my family members were murdered by gas, bullets, or drowning. There is admissible, visible evidence for my parents’ trauma. How could I compare that trauma with my focus on the “soft” evidence of losses experienced by an infant or child—as I suggest that follows from changes from a familiar soft, reactive face to a frozen one; or a gentle musical voice to a robotic one; a warm lingering hug to a quick pat on the head; a fleeting but constant eye gaze to an aversion of that gaze? Critics may claim that to label these experiences as “traumatic” is absurd or obscene. How dare I compare or even juxtapose these events with my parents’ real traumatic experiences?

It is certainly not my intention to set up competition between experiences of suffering due to trauma, for that would miss the point. Rather, my point is to highlight that children can and do experience trauma, and that they are entitled to that experience, even if it is their parents’ view that they are not, for many survivor parents find it impossible to be psychological witnesses of their children’s traumas. I understand that one of the barriers to this understanding arises from the fact that it is precisely the legacy of the parents’ trauma that is the source of the relational trauma for the infant.

Many people who have had no parental witnesses to validate their experiences of childhood trauma have turned to therapy groups or workshops to find that validation or authentication. Over the years, I have learned in such workshops that there are some survivors who keep reminding others of their own traumas while seeming incapable of understanding or empathizing with their own children’s experience of similar events that may also be traumatic.

In other settings, during my intensive psychoanalysis, I began to discover how my parents’ Holocaust experiences had shaped my life. However, in that phase of my life as a young adult I could tolerate only a limited understanding of the power of trauma. So, along with many children of survivors, a great part of my life’s quest continues to center on restoring missing and vanished narratives and associated visceral experiences that derive from the losses in my family’s past.

As I restore more and more of my past, I gradually see how much of that unresolved family trauma was connected to my family’s tendency to catastrophize even relatively minor everyday mishaps as if they were occurring during the Holocaust.

One outcome from my work on psychological witnessing has been to claim permission to include as legitimate my own trauma experiences as part of my family history of trauma. To do so demanded that I apply a double construct of family trauma: my parents’ alongside mine—not in competition, but insisting that both needed to be acknowledged. To this day, my insistence sits uncomfortably with me. My struggle is to transform my sense of identity that professionals label as a “parentified child,” one whose role is to parent the parent, to now assume an identity as an “ordinary” person with personal needs and desires separate from looking after my parent’s feelings.

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It is now a decade since the making of the video *Many Faces of Trauma.* In the years immediately afterward, I reviewed segments of my mother’s
Holocaust testimony many times. I spoke professionally at conferences and personally with my mother, family, and friends. I continued to research and write about my experiences. Now, I have returned to those moments, to continue my exploration at a deeper level.

Heeding the warning of Dori Laub, that the speakers of trauma on some level prefer silence as a means of protecting themselves, I asked myself if I dared to disturb my survivor mother’s “fated exile”—to use Laub’s term. In asking that question, I realized that if there was exile to be disturbed, it would not be hers, as she had already recorded her testimony. Could it be mine? In observing my own reactions on the split screen, I considered the possibility that ours was a double exile.

To explore this thesis, I reviewed many times the split screen, to analyze my moment-by-moment facial expressions. I made the assumption that my facial expression would serve as a marker of microreactions to verbal and nonverbal triggers in my mother’s testimony. Through freeze-frame analysis, I found that many fleeting moments and vanishing facial reactions, hers and mine, had indeed been captured. As psychological witness, I could then analyze these moments as a sort of afterimage, much like pressures on an eyeball can create images not actually seen.

A core theory of psychological trauma posits that people’s reactions to trauma are instinctive and physiological, using the mechanism of flight, flight, or freeze, and that dissociation is part of this stress and shock reaction. This process, it is claimed, limits memory and recall of events, leaving the person with “traumatic amnesia.” Their access to these memories is limited, but under special conditions like hypnosis, flashbacks (as in the flashbulb memories of posttraumatic stress syndrome), or dreams, recall may be possible.

The split-screen video enabled me to explore the impact on her adult child of the adult survivor’s narrative and facial expressions when relating events of personal trauma. I was curious to see my reactions to my mother’s traumatized face and to track the alterations in my facial patterns. For example, would I find a synchronicity between our facial reactions when my mother was relating to her most traumatic autobiographical memories? Would I be dissociated if she was dissociated? And here I stress that such moments are not to be confused with facial expressions that accompany states of depression.

The details of my findings have been published in “Can Trauma Be Transmitted Across the Generations?” (Halasz, 2002). I offered four explanations to account for the periods on the split-screen video that I labeled “absence of resonance,” both in my mother’s facial expressions and in the absence of facial responsiveness on my part. I interpreted these as habitation, dissociation, moments of psychic retreat, and finally as expression of the “exiled self.”

I concluded that article with Laub’s observation that the survivor’s plight of silence is a “fated exile, yet also a home, a destination, and a binding oath,” and ventured some trajectories for how such silence may affect the second generation—the infant who was “the bystander, an intimate witness to the survivor’s fated exile.” For that infant was also “a participant witness, precisely to those exiled moments when he, the infant, was hungering for relatedness. Instead he met the survivor parent’s ‘fated exile,’ a wall of silence.” I asked whether exile can be transmitted: “Can those predictable, intolerable moments, when the wall of silence between survivor parent and child seems impenetrable, be breached?” (Halasz, 2002, p. 218).

In the most recent years, I feel blessed to have shared experiences with my mother that offer a possible response to these questions. Based on our experiences, I am starting to believe that it is possible to breach what seems to have been an impenetrable wall of silence between us. For me, this breaching of the ever-deeper layers of that wall continues. I am mindful that my curiosity has been paralleled by and entwined with my mother’s own committed explorations.

I am left to conclude that we both needed to be willing partners in this journey, to return from our respective exiled selves. Some suggest that this requires courage on both our parts. That may be so. I would suggest it arises from a familiar sense of desperation that all families experience when they feel unable to make connections with loved ones. In our case, we have been fortunate to find a creative approach as we continue to try to bridge the well-known abyss of Holocaust trauma’s generational legacy.

POSTSCRIPT

Since starting my research with the Many Faces of Trauma, during the last decade my mother and I have shared the following Holocaust-related experiences: first, the intergenerational dialogue workshop organized by Tania Nahum; second, the Adult March of the Living (AMoL) organized by Pauline Rockman; third, this chapter, invited by Marilyn and Nancy. Finally, all this research I apply to my real daily relationship with my mother, Alice.

Tania Nahum’s intergenerational workshops provided an ongoing annual forum (2000–2006) with six to eight weekly sessions of regular group work that provided safe, ongoing professional settings to “normalize” the struggles in communication faced by survivors. They attended knowing that the agenda would be personal—hurdles in the “simple” daily tasks of talking with their families and children. In the later years of the group, we turned to the third generation—grandchildren. For my mother, the added agenda was a meeting place with her son, as I was a facilitator in these annual workshops.
Pauline Rockman, director of AMotL, provided a once-in-a-lifetime shared experience for my mother and I. Based on the success of the March of the Living program (initiated by Sue Hampel), to coincide with the 60th anniversary of the liberation of Auschwitz, 1945–2005, my mother returned to the site where she “witnessed” the disappearance of Esther and Zsuzsi, her mother and sister—murdered in the gas chambers. Before our pilgrimage, I asked her why she wanted to return with me. She answered in Hungarian that she wanted to return to that place so that we could breathe the same air, and that on this occasion she could walk out of the camp with a living relative.

The invitation to write this chapter on witnessing arose unexpectedly when I received an e-mail from Marilyn, in which she referred to my work on trauma transmission in the video Many Faces of Trauma. She asked to view the video as she was then writing a chapter for a book dealing with Holocaust trauma. I sent her a copy. A year or so later, she sent me a copy of her published chapter.

Another year later, as I was preparing a trip to the United States, I e-mailed Marilyn to arrange a catch-up meeting in person during my visit to Washington. It turned out Marilyn and Nancy were about to start writing a book on witnessing the Holocaust. The rest, as they say, is history.

One example of my mother’s keen interest in all my Holocaust research work was her eagerness to understand and to make sense of her experiences. At the same time as she gained deeper insights, I also clarified many areas of confusion. One such moment centered on my use of the word overwhelmed in an earlier draft of this chapter.

For some reason, she read the word phonetically, which ended up with her misreading it as overhelmed. So convinced was she of this word that she asked friends for its meaning. Of course, no one had heard of the word. A little time later, during a visit, she asked me for its meaning. Naturally, I also had not heard of the word, so I asked her to show it me. We eventually found the word in the text as overwhelmed, found it in her English-Hungarian dictionary, and here perhaps pictures explain the joy of discovery better than words (see Plate 4).

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The Power of Witnessing

Reflections, Reverberations, and Traces of the Holocaust

Trauma, Psychoanalysis, and the Living Mind

Edited by Nancy R. Goodman and Marilyn B. Meyer

Plate 3 (Chapter 9) Split-screen of George Halasz and his mother, Alice, from Many Faces of Trauma. (Courtesy of the Visual History Foundation [VHF].)

Plate 4 (Chapter 9) George's mother, Alice Halasz. (Courtesy of the Visual History Foundation [VHF].)