

## 7 Measuring Adaptability

Six months after Paul Friedman concluded his first survey on the DPs' situation in December of 1946, he had another encounter with Europe's Uprooted: only this time around, the setting and the DPs' circumstances had changed dramatically. Friedman was to encounter the DPs on the Island of Cyprus where – after a failed attempt of emigration to Palestine<sup>1</sup> – they were interned by the British in what shockingly resembled concentration camps.<sup>2</sup>

On August 13, 1946, a memo by the British Mandatory Power in Palestine had made known that all attempts of immigration to Palestine would be diverted to Cyprus until visas to Palestine were issued.<sup>3</sup> These visas were issued at a harassing rate of 750 a month.<sup>4</sup> Consequently, the majority of the *Ma'apilim* (clandestine immigrants) were diverted to the hastily erected, inhospitable internment camps of Cyprus to curb immigration to Palestine. Cyprus, another outpost of British colonial rule, was 124 miles northwest of Palestine, positioned on the edge of the Mediterranean. The details of the internment camps of Cyprus will be discussed during the close reading of Friedman's administrative report on his work in Cyprus.

Once again, Friedman was enlisted by the JDC to conduct a survey on the mental constitution of DPs, this time on the group of the so-called Cyprus detainees. While, from the outset, Friedman's agenda resembled that of 1946, decisive factors had shifted significantly. His task was similar to that of 1946 – investigating the DPs' mental constitution through the perspective of mental hygiene and drawing up a plan for a mental hygiene project – but the commissioners of the Cyprus survey, as well as its functions were different, by virtue of the shifting postwar political tectonics: it was representatives of the *Yishuv*,<sup>5</sup> the Jewish minority in Palestine, who approached JDC headquarters in New York City in April 1947 asking to fund another enlistment of Friedman.<sup>6</sup> After having been introduced to Friedman and his work with DPs a year earlier in Europe, *Yishuv* psychiatrist Theodor Grush-

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1 From 1920 until 1948, the correct historical term for "Palestine" was "Mandatory Palestine," signaling the British Mandate provided by the League of Nations, as will be discussed in the historical background portion of this chapter. For the sake of ease, I will from now on refer to it simply as "Palestine," meaning the whole of Mandatory until 1948.

2 Cf. Friedman, "Some Aspects of Concentration Camp Psychology," 602.

3 Hadjisavvas, "From Dachau to Cyprus," 148.

4 Ibid.

5 *Yishuv* (literally meaning settlement) is the Jewish population settling in Palestine prior to the establishment of the modern state of Israel. Cf. Laqueur, *A History of Zionism*, 8.

6 "Letter I.S. Wechsler to H. Yassky Appendix: Background Material on Psychiatric Team," in *Cyprus: Psychiatric Report Dr. Paul Friedman* (1947), 8.

ka wished to assign his Polish-American colleague Friedman to conduct a preparatory survey for the *Yishuv* to get a better idea about the prospective immigrants and their psychic constitution, and to devise a strategy of psychological rehabilitation for immigrants once they finally settled in Palestine. The *Yishuv* wished to get a picture not only of the mental constitution of the Cyprus DPs but also of the extent to which the DPs could be expected to assimilate without problems into the emerging state of Eretz Israel. The *Yishuv* worked towards building a nation and they wished Friedman to measure to which degree the prospective immigrants were potentially adaptable to that new state. Paul Friedman and his colleagues Mildred Buchwalder and Sadie Oppenheim subsequently spent about six weeks in Cyprus and another few in Palestine between July and September of 1947.<sup>7</sup> While there they conducted an investigation which Friedman laid out in an extensive report for the JDC.<sup>8</sup>

Friedman's main impressions from Cyprus, which he conveyed in an administrative report for the JDC<sup>9</sup> as well as in multiple publications<sup>10</sup> over the following years, will serve as the springboard for the following analysis of Friedman's work in Cyprus. For one, Friedman was appalled by the conditions in the Cyprus camps, deeming it a "purgatory" reminiscent of the horrid concentration camps many of the detainees had just survived.<sup>11</sup> But Friedman also acknowledged that, purely scientifically speaking, his investigation in Cyprus presented him with an invaluable opportunity for observing the psychic reactions of a group of traumatized people – the DPs – under laboratory conditions: "A psychological laboratory," as he put it in hindsight during a talk he gave at the American Psychiatric Association in 1948.<sup>12</sup>

Thus, the following questions will guide us through the coming investigation into Friedman's work in Cyprus: what was Friedman's agenda for his work in Cyprus, both scientifically and politically? To what degree did he advance the Zionist strife for a Jewish homeland by measuring the adaptability of the Cyprus detainees into Palestine/Eretz Israel? And to what extent did he use the camps on the Island of Cyprus as a "psychological laboratory"<sup>13</sup> in which he could gain new insight into the ways in which humans coped with trauma of hitherto unknown dimensions?

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7 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 4–5.

8 "Letter I.S. Wechsler to H. Yassky Appendix: Background Material on Psychiatric Team."

9 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman."

10 Friedman, "Some Aspects of Concentration Camp Psychology"; Friedman, "The Road Back for the DP's"; Friedman, "Can Freedom Be Taught?: The Role of the Social Worker in the Adjustment of the New Immigrant"; Friedman, "The Effects of Imprisonment."

11 Friedman, "Some Aspects of Concentration Camp Psychology," 602.

12 Ibid.

13 Ibid.

Was Friedman able to adapt his (prewar) psychiatric framework to the new situation that presented himself in Cyprus?

Therefore, we will again take a closer look at the bodies of knowledge he applied, the methods he employed, and the diagnoses he made. While Friedman conducted his 1946 survey in Europe based on interviews with both DPs and welfare workers, his Cyprus investigation was based to a large degree on the employment of testing schemes. Thus, taking a closer look at his methodology in Cyprus is especially pertinent in light of the immense cultural heterogeneity that emerged among the Cyprus detainees: the degree to which Friedman sought to universalize the DP experience on the basis of personality tests invented in the US will be telling as to his gaze onto the DPs.

As we will discuss later, the Cyprus structures were internment camps, almost identical with concentration or POW camps: so, the question arises whether Friedman accounted for this in his psychological analysis. Did he reflect on the opportunity and limits of rehabilitation in such an adverse setting?

Lastly, we will continue weaving the thread established in the first case study of this part of the study by inquiring into a potential continuity between the two surveys: to what extent did Friedman amend his stance on certain questions of rehabilitation – especially regarding the question of the psychological merits of *kibbutz* community living – in this report, by virtue of the fact that he was composing the survey for the *Yishuv*?

Obviously, to understand the predicament of the Cyprus DPs in more depth we must first establish the historical background against which it all took place in 1947: therefore, we will first discuss briefly the British Mandate in Palestine 1917–1948, as well as the decision of British authorities to reroute the streams of refugee ships from the port of Haifa to the inhospitable camps of Cyprus. Before we then dive deeper into Friedman’s work among Cyprus’s DPs, we will take a closer look at the adverse setting it all took place in – the “purgatory”<sup>14</sup> of the Cyprus camps, as well as the role of both the *Yishuv* and the JDC on site.

## 7.1 Palestine Under British Mandatory Rule

On February 24, 1947, Dr. Theodor Grushka<sup>15</sup> and fellow psychiatrists Arnold Merzbach<sup>16</sup> and Lipman Halpern<sup>17</sup> from the newly founded Society for Mental Hygiene

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<sup>14</sup> Ibid.

<sup>15</sup> Theodor Grushka (1888–1967) was born in Moravia and emigrated to Palestine in 1939 where he became the director of Hadassah Hospital and later of the Immigration Health Service of the Jewish Agency.

in Palestine<sup>18</sup> wrote a letter to JDC Headquarters (HQ) in New York. In it, the doctors laid out the need for psychiatric evaluation of Holocaust survivors that were on the brink of immigrating to Palestine, conducted by a qualified, JDC-funded psychiatrist. They argued: “The immigrant of our day arrives at the shores of Eretz Yisrael after he has past suffering and frustration for many years, and heavy traces have remained engraved on his soul.”<sup>19</sup>

The gentlemen were concerned about the consequences that years of war, persecution, and life in DP camps had wrought on the potential immigrants to the nascent country of Eretz Israel – the Land of Israel. The doctors’ concerns, however, were not focused on the individual psychic wellbeing of the prospective immigrants; they had the bigger picture in mind, “the building of [their Jewish] homeland.” The letter continued: “We feel that this problem obligates us from a sense of duty to give the best aid to every victim of persecution in Europe who will come to us, as well as from a deep concern for the future of our endeavors in the building of our homeland.”<sup>20</sup>

What they outlined as the problem at hand, “the heavy traces” on the immigrants’ “souls,” held – in their view – the dangerous potential of thwarting “the endeavor” of building the homeland, Eretz Israel, the desired and fought for prospective nation in the Levant.

Grushka, Halpern, and Merzbach were members of the *Yishuv*, the Jewish population in Palestine, who worked tirelessly to achieve the realization of the Zionist dream: the homeland of the Jews in an independent modern state of Israel.<sup>21</sup> Men (and women) like Grushka et al. were in the process of building a nation and they were careful to survey or control – cynically speaking – the “human resources” that were about to join their endeavor. At the end of the process that was set off by the above letter stood the enlistment of Dr. Paul Friedman to conduct the Mental Hygiene Survey for Cyprus and Palestine in the summer of 1947.<sup>22</sup>

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16 Arnold Merzbach (1898–1956) was a German neurologist from Frankfurt/Main, who emigrated to Palestine in 1939.

17 Ben Shlomo Lipman-Heilprin [Halpern] (1902–1968) was a Polish-born neurologist who emigrated to Palestine in 1934 where he became the director of the neurology department of Hadassah Hospital.

18 The Society for Mental Hygiene in Palestine was founded in October 1946. Its objectives were to improve the “health of soul and spirit” of the Jewish population and to act within existing special education institutions, child guidance clinics, and immigration facilities as well as to conduct research. Cf. Zalashik and Davidovitch, “Measuring Adaptability,” 427.

19 “Letter I.S. Wechsler to H. Yassky Appendix: Background Material on Psychiatric Team,” 8.  
20 Ibid.

21 For an extensive history of Zionism, see *Laqueur; A History of Zionism*.

22 “Letter I.S. Wechsler to H. Yassky Appendix: Background Material on Psychiatric Team,” 8.

In early 1947, when the idea for a mental hygiene delegation for Cyprus and Palestine was born, the realization of Eretz Israel was still a dream – albeit a politically highly contested one. In order to better understand the historical backdrop against which the happenings in Cyprus took place, we will now cast a brief look back at the history of Palestine/Israel in the early twentieth century.

In December of 1917, Britain assumed the role of the de facto ruler of Palestine, and by 1920 the League of Nations appointed Britain Mandatory Power over Palestine, which remained until 1948.<sup>23</sup> Backed by the Balfour agreement, which ensured British support of a Jewish homeland in Palestine, the stream of Jewish refugees from Europe would not cease in the interwar period, contributing a sanctuary for European Jews, leading the immigration numbers to climb exponentially.<sup>24</sup> As a result, Britain tried to curb immigration by instating the British White Paper in 1939, capping immigration at 75,000 over the next five years, with the rest being dependent on Arab consent.<sup>25</sup> However, following the advent of Nazi rule in Germany, Palestine became a sanctuary for the lucky European Jews who made it out in time.<sup>26</sup> Jews and Arabs, who had settled for centuries in Palestine, coexisted with uneasy encounters, while the *Yishuv*, with its main institutional body, the Jewish Agency, worked to realize their dream of an independent Jewish homeland.

The period of WWII saw several phases of immigration from Europe.<sup>27</sup> Suffice to say, immigration became more difficult by the year, which triggered an exponential rise in clandestine passages that reached its peak in the years between 1946 and 1948.<sup>28</sup>

When WWII finally ended in 1945, the constant stream of refugees from Europe making their way to Palestine would not cease. On the contrary, as we have established at length previously, many of the Jewish survivors of the Nazi war sought to make their way to Palestine, in the hopes of being the first generation to live in Eretz Israel. The first influx of Holocaust survivors attempted to make their way to Palestine between 1946 and 1948 (the year of the end of the Brit-

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23 For an in-depth look on its history, see Miller, *Britain, Palestine and Empire*; Tom Segev, *One Palestine, Complete: Jews and Arabs under the Mandate*, 1st American ed (New York: Metropolitan Books, 2000).

24 Dalia Ofer, *Escaping the Holocaust: Illegal Immigration to the Land of Israel, 1939–1944*, Studies in Jewish History (New York: Oxford University Press, 1990).

25 Ibid., 128–42.

26 Hadjisavvas, “From Dachau to Cyprus,” 146–47.

27 Dalia Ofer does so extensively in *Ofer, Escaping the Holocaust*.

28 For an extensive study on clandestine immigration, see *ibid*.

ish Mandate).<sup>29</sup> This first set of Holocaust survivor immigrants consisted of multiple groups of Jewish survivors, who had survived Nazi persecution, be it those waiting in the DP camps, those living in countries allied with Germany (i.e. Romania, Bulgaria, Hungary, Slovakia, and Croatia), or those surviving hiding in the Soviet Union. The heterogeneity of the group subsumed under the term “Holocaust survivor” reflected the Zionist understanding of those who needed to be supported to immigrate.<sup>30</sup>

The great push for immigration by the survivors, however, came up against the ever-tightening immigration rules of the British colonial power in Palestine that had not relaxed even after what had happened in the Nazis extermination camps had become undeniable fact.<sup>31</sup> The British Mandatory power refused to extend their immigration quota, contributing to even more activity within the clandestine immigration schemes devised by the incipient governing body of the Jewish population in Palestine, the Jewish Agency,<sup>32</sup> or Zionist organizations. The Jewish Agency, as the representative of the *Yishuv*, aided in facilitating *Aliyah* (*Bet*), clandestine immigration, or *Brichah*, escape from Europe: the Agency helped European Holocaust survivors in transcending British immigration quotas. The reason for this was simple: they needed people to build and populate their envisioned Jewish homeland.

All the while, the British became even more anxious in light of the heightened clandestine immigrations, leading to the events of August 13, 1946, that would shape the trajectory of *Aliyah* for the next three years: immigration to Palestine became even more restricted and immigrants were rerouted to the internment camps of Cyprus.

By November 1947, UN Declaration 181 (III) recommended the partition of Palestine into two states – an Arab and a Jewish state – factually ending the British Mandate over Palestine.<sup>33</sup> The Jewish Agency accepted the plan, the Arab fraction rejected it, the Independence War broke out, and the plan was not implemented.

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<sup>29</sup> Ofer, “Holocaust Survivors as Immigrants,” 2.

<sup>30</sup> *Ibid.*

<sup>31</sup> Hadjisavvas, “From Dachau to Cyprus,” 148.

<sup>32</sup> The Jewish Agency was the representation of the Jewish population in Palestine vis-à-vis the Mandate administration, representing the interest of the Jewish population and serving as an “incipient governing body.” It was established in 1929 and was recognized by the World Zionist Congress. David Ben-Gurion chaired the Jewish Agency from 1935 until 1948 when he left the position to become Israel’s first prime minister. Ofer, *Escaping the Holocaust*, 5.

<sup>33</sup> Hadjisavvas, “From Dachau to Cyprus,” 151.

On May 1948, one day before the official end of the British Mandate, David Ben-Gurion announced the establishment of the Jewish state *Eretz Israel*.<sup>34</sup>

This is the historical constellation in which hopeful survivors tried to make their way to Eretz Israel, only to be diverted to another internment camp on Cyprus, in which the *Yishuv* tried to support emigration to the homeland, and where the JDC was caught up in the maelstrom of postwar politics, while Britain fought to keep its last colonial outpost in the East against all odds. This situation is important to keep in mind when trying to trace the impetus of Paul Friedman's work in Cyprus.

## 7.2 Inquiry into the Mental State of Cyprus DPs

After having outlined the historical background against which the Cyprus internment camps came to be, we will now hark back to the first steps of enlisting a psychiatrist to screen the Cyprus DPs in order to gain first insight into the motivations of the whole endeavor.

The aforementioned letter by Grushka et al. from February 1947 concluded in a plea towards the JDC to fund a specialist being sent to Palestine to address the mental health of prospective immigrants.<sup>35</sup> Grushka, Merzbach, and Halpern already had a potential person in mind due to that person's previous experience with DPs: Dr. Paul Friedman.<sup>36</sup>

Grushka, by 1947 the head of the Immigrant Health Service of the Jewish Agency to Palestine, had met Friedman while they both worked in European DP camps in 1946.<sup>37</sup> Grushka came away from their encounter impressed by Friedman's linguistic capabilities as well as his rapport with the DPs.<sup>38</sup> The authors of the letter lauded Friedman for "his warm human approach and keen desire to bring help to the object of his studies."<sup>39</sup>

Eventually, after back-and-forth correspondence between JDC HQ, Friedman, and the *Yishuv* in Jerusalem it was decided that Paul Friedman be sent to Palestine and Cyprus over a three-month period to conduct his investigation into the mental

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<sup>34</sup> Ofer, *Escaping the Holocaust*, 3.

<sup>35</sup> "Letter Grushka et al to JDC HQ, Appendix: Background Material on Psychiatric Team," in *Cyprus: Psychiatric Report Dr. Paul Friedman* (1947), 8.

<sup>36</sup> "Letter I.S. Wechsler to H. Yassky Appendix: Background Material on Psychiatric Team," 8.

<sup>37</sup> "Letter Grushka et al to JDC HQ, Appendix: Background Material on Psychiatric Team," 8.

<sup>38</sup> *Ibid.*

<sup>39</sup> "Letter I.S. Wechsler to H. Yassky Appendix: Background Material on Psychiatric Team," 8.

health of the immigrants in Cyprus and Palestine.<sup>40</sup> Friedman would head the American delegation assisted by two psychologists and they would be supported by a parallel delegation from Palestine with similar objectives. They all were expected to be able to speak Yiddish, Hebrew, and Polish as well as have a Jewish background in order to be able to “make good emotional contact.”<sup>41</sup>

Friedman and his American colleagues would conduct a psychiatric screening through short interviews and psychological personality and intelligence tests, and they would train local Cyprus staff.<sup>42</sup> The Palestinian delegation would echo the work and they would compare their findings at a conference in Palestine in September 1947, with the aim of outlining a mental health program based on mental hygiene, focusing on the prevention and treatment of mental illness among immigrants in Palestine.<sup>43</sup> The JDC would fund the Cyprus portion of the trip with a budget of 10,000 dollars, while the expenses of the Palestinian leg of the trip would be financed by the *Hadassah* hospital,<sup>44</sup> which was directed by Chaim Yassky.<sup>45</sup> Yassky, too, had far-reaching aspirations for the data Friedman gathered, hoping it would serve “as a paradigm” for the psychiatric work at *Hadassah*.<sup>46</sup>

After having traced the genesis of the enlistment of Friedman for the screening of the Cyprus DPs, it has become obvious that the *Yishuv*’s immigration authorities in Palestine wanted to get a picture of the psychiatric needs and problems that could be expected after the internees arrived in Palestine. Free and unrestricted immigration, according to Dalia Ofer, had been a “basic tenet of Zionism”:<sup>47</sup> officially, everybody could immigrate – people “from all walks of life” as Dalia Ofer put it, and especially those from the DP camps in Europe, since the organization of the *Brichah* was so professionalized in the camps.<sup>48</sup> Nevertheless, the immigration authorities of the *Yishuv* had a preference for able-bodied immigrants who were physically and mentally able to build a country.<sup>49</sup> The *Yishuv* felt the need to screen and evaluate the “human resources” that were about to land on the shores of Eretz, those waiting in the camps of Cyprus for immigration. The Jewish

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<sup>40</sup> Ibid.

<sup>41</sup> Ibid., 9.

<sup>42</sup> “Memorandum on Conference, Appendix: Background Material on Psychiatric Team,” in *Cyprus: Psychiatric Report Dr. Paul Friedman*, 1947.

<sup>43</sup> Ibid.

<sup>44</sup> US financed hospital in Israel.

<sup>45</sup> “Letter Dr. Golub to J. Schwartz, Appendix: Background Material on Psychiatric Team,” in *Cyprus: Psychiatric Report Dr. Paul Friedman*, 1947, 11.

<sup>46</sup> “Letter I.S. Wechsler to H. Yassky Appendix: Background Material on Psychiatric Team,” 9.

<sup>47</sup> Ofer, “Holocaust Survivors as Immigrants,” 2.

<sup>48</sup> Ibid.

<sup>49</sup> Cf. Ibid.



authorities in Palestine wanted to know about the mental state of the prospective immigrants to prepare for their arrival and to gauge the extent to which the immigrants could be expected to be “absorbed,” a contemporary rhetoric pointing towards the potential of assimilation in the new country.<sup>50</sup>

In fact, fears surrounding the mental constitution of those about to enter Palestine were real among those struggling to realize the Israeli state. Israel’s first prime minister and previously head of the Jewish Agency David Ben-Gurion (1886–1973) is quoted to have noted when travelling DP camps in Germany in October of 1945, quite cynically: “5000 Jews such as these in Palestine [...] can turn the country into one big lunatic asylum.”<sup>51</sup> This was to be avoided. The way the *Yishuv* chose to try to avoid such an epidemic of mental disease among the newcomers in Palestine was by relying on scientific techniques to measure the adaptability of the immigrants, thereby trying to ensure “normal development” in Palestine by preventing major mental pathologies.<sup>52</sup> Once again, the paradigm of mental hygiene, with its focus on the realm of public health and prevention of mental disease to “normalize” a population, took center stage in the deliberations of the psychiatrists responsible for the task.

Noteworthy here is that the *Yishuv* reached out to the JDC to enlist a (Polish)-American psychiatrist – Paul Friedman – who considered himself to be a Mental Hygienist. Not only did the *Yishuv* psychiatrists invite Jewish-American “experts” to instruct *Yishuv* doctors in matters of immigrant psychiatry, but they also looked towards the American influenced mental hygiene paradigm<sup>53</sup> which focused more on the training of mental health staff and the prevention of mental illness to ensure societal coherence, while the German branch focused on eugenics.<sup>54</sup> The American Mental Hygiene paradigm slowly replaced the German influence in psychiatry in Palestine, as Zalashik has shown.<sup>55</sup> Until the mid-1940s, German influenced psychiatry was the paradigm in the *Yishuv*’s psychiatric departments,

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50 For an investigation into the interrelations between Zionism, immigration, and public health, see Shifra Shvarts et al., “Medical Selection and the Debate over Mass Immigration in the New State of Israel (1948–1951),” *Canadian Bulletin of Medical History* 22, no. 1 (April 2005): 5–34, <https://doi.org/10.3138/cbmh.22.1.5>.

51 Interview with Aahron Hoter-Yishai, 10, quoted in Bauer, *Out of the Ashes*, 83.

52 Zalashik and Davidovitch, “Measuring Adaptability.”

53 Mental hygiene had been previously discussed in Palestine too, albeit with a different orientation, drawing on the German interpretation of Psychohygiene with its focus on eugenics (coined in 1900 in Giessen by psychiatrist Dr. Robert Sommer). A local branch of the Mental Hygiene League was opened in 1935 but later ceased its activities. Cf. Rakefet J. Zalashik, *Das unselige Erbe: die Geschichte der Psychiatrie in Palästina und Israel* (Frankfurt am Main: Campus, 2012), 101.

54 Ibid., 55–101.

55 Ibid.

owing to the fact that many German psychiatrists had emigrated to Palestine in the 1930s. Arnold Merzbach, co-author of the letter to the JDC asking for funds for a psychiatrist, was one of these German psychiatrists coming to Palestine.<sup>56</sup> Starting in the mid 1940s, when the *Yishuv* was increasingly worried about the “health” of its population, the American-style mental hygiene gained the upper-hand in Palestine’s and later Israel’s psychiatric circles.<sup>57</sup>

As has been discussed in the considerations surrounding Friedman’s 1946 survey, the Americanization,<sup>58</sup> through the enlistment of American “experts,” was part of the larger effort of psychological rehabilitation advanced and funded by the American JDC. The reasons for the Americanization of psychiatry within the *Yishuv* are manifold: for one, German psychiatry had gained a horrific reputation during WWII due to the medial atrocities German psychiatrists perpetrated against POWs, concentration camp inmates, disabled people, and others.<sup>59</sup> Moreover, increasingly, psychiatrist immigrants from England and South Africa arrived at the shores of Palestine, bringing with them anglophone psychiatry. And, as the case of Friedman’s work for the JDC illustrates, Jewish-American organizations were the ones with deep donor pockets, funding psychiatrists to travel to Palestine and training psychiatrists. Furthermore, starting in the mid 1940s, America established itself as the scientific center of the postwar period.<sup>60</sup>

As we have established earlier, the deployment of the two delegations to Cyprus in 1947 came at a politically highly eruptive time: relations between the British power in Palestine and the *Yishuv* and its immigrants were extremely tense, due to the tight immigration quota and the rerouting of immigrant ships to Cyprus. Hence, the members of the JDC board deciding about sending Friedman and his

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<sup>56</sup> See *ibid.*, 98–100.

<sup>57</sup> *Ibid.*, 101–81.

<sup>58</sup> The Americanization of *Yishuv* psychiatry can be read in the context of the internationalization of the US American mental hygiene movement, advanced by institution like the Rockefeller foundation. Thomson interprets this process as “cultural imperialism.” Cf. Thomson, “Mental Hygiene as an International Movement,” 294.

<sup>59</sup> For studies on psychiatry in National Socialism, see V. Roelcke, “Psychiatrie im Nationalsozialismus: Historische Kenntnisse, Implikationen für aktuelle ethische Debatten,” *Der Nervenarzt* 81, no. 11 (November 2010): 1317–25, <https://doi.org/10.1007/s00115-010-3051-3>; Frank Schneider, *Psychiatrie im Nationalsozialismus: Erinnerung und Verantwortung* (Berlin: Springer Medizin, 2011).

<sup>60</sup> Cf. Zalashik, *Das unselige Erbe*, 101–2. For more broad studies on the rising American dominance in science, see Michael H. Hunt, *The American Ascendancy: How the United States Gained and Wielded Global Dominance* (Chapel Hill: University of North Carolina Press, 2007), <https://public.ebookcentral.proquest.com/choice/publicfullrecord.aspx?p=361346>; David Ekbladh, *The Great American Mission: Modernization and the Construction of an American World Order* (Princeton, N.J.; Woodstock: Princeton University Press, 2011).

colleagues were unabashed in the political function they hoped their trip would have. Chaim Yassky elaborated on his hope that besides medical insight the survey into the mental state of the Cyprus DPs could have a favorable political function. Yassky is quoted as saying:

It would be of paramount importance if it were possible to furnish scientific proof of psychological differences between the inmates of camps while abroad and between those same people when in Cyprus on the eve of their departure for Palestine. Such testimony was liable to be of far-reaching importance in the present negotiations with the United Nations.<sup>61</sup>

This quote by the then director of the American funded *Hadassah* hospital is telling in multiple ways. Yassky hoped that the Cyprus investigation would point towards differences in the mental state between those in DP camps and those in Cyprus. Yassky's comment shows the ways in which he was ready to rely upon (or exploit) science to advance the Zionist cause of swift immigration to Palestine. Here, a central axiom of mental hygiene becomes palpable: the conviction that scientific insight could serve a political goal (in this case the Zionist goal of an independent Jewish homeland), leading to the exploitation of science for political reasons. Lastly, the comment indicates a conviction many held, which was that the immigration to Palestine itself (or the prospect of it) would have a therapeutic effect.

After having taken the time to investigate both the historical as well as the administrative setup of the Cyprus mission, we were able to draw important first insights about the nature of the whole endeavor, and especially the underlying motivations of enlisting Friedman and the Palestinian delegation: the *Yishuv* felt the need to learn more about the mental state of prospective immigrants in order to be prepared for what kind of "human capital" would eventually emerge on the shores of the homeland, and to prepare the local psychiatric and mental hygiene structures for what was to come.

We are now sufficiently prepared to take a look at the actual work of Friedman and his colleagues on the ground.

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<sup>61</sup> "Meeting with the American Team for Inquiry into the Mental State of the Cyprus Immigrants," July 2, 1947, 3, Central Zionist Archives, Jerusalem.

### 7.3 The Cyprus Mission

Speaking on a Meeting of the American Psychiatric Association in May 1948, Paul Friedman noted, “The purgatory of Cyprus was a real psychological laboratory.”<sup>62</sup> Despite his dismay about the “purgatorial” conditions of the camp – which we will investigate shortly – Friedman acknowledged the unique opportunity his work in the camps presented to acquire scientific insight into the ways in which humans reacted to wartime trauma.<sup>63</sup> Consequently, after having written up his administrative Report for the JDC in September 1947, Friedman saw to it that the insight gained by the American team was disseminated widely in professional circles, presenting his findings at the seminal International Congress on Mental Hygiene in London in 1948<sup>64</sup> and the American Psychiatric Association in May 1948. The administrative report for the JDC<sup>65</sup> and the articles<sup>66</sup> he produced on his experience in Cyprus are the basis of my investigation, along with publications by his colleagues Sadie Oppenheim and Mildred Buchwalder.<sup>67</sup>

Incidentally, the internment camps for Jewish survivors run by the British on Cyprus have remained at the periphery of postwar research. Rakefet Zalashik has contributed most to research on Cyprus, viewing the psychiatric work done there

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62 Friedman, “Some Aspects of Concentration Camp Psychology,” 602.

63 As Zalashik and Davidovitch pointed out, Friedman was not alone in viewing the postwar refugee camps as a psychological laboratory. John Rees, Director of the International Federation of Mental Health and erstwhile boss of Rickman et al. at the British War Ministry’s Psychological Unit, compiled the foreword to H.B.M. Murphy’s psychiatric study of refugee mental health in 1955. In it, Rees notes “The authors have made wise use of the laboratory material provided by the catastrophic circumstances of the war and the post-war period.” Murphy, *Flight and Resettlement*, 2; Zalashik and Davidovitch, “Measuring Adaptability,” 432.

64 The International Congress on Mental Health in London in August of 1948 presented a watershed moment in the history of mental hygiene and mental health. Organized by the British National Association for Mental Hygiene the Conference had been convened under the motto of “Mental Health and World Citizenship,” echoing the political dimension of the mental hygiene movement and its aspiration of contributing to a peaceful future. The lineup of the conference consisted of the most influential mental hygienists and psychiatrists of their times, some of which had been concerned with DP mental health, such as Anna Freud, John Rickman, and Paul Friedman. Cf. Bertolote, “The Roots of the Concept of Mental Health.”

65 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman.”

66 Friedman, “Some Aspects of Concentration Camp Psychology”; Friedman, “The Road Back for the DP’s”; Friedman, “Can Freedom Be Taught?: The Role of the Social Worker in the Adjustment of the New Immigrant”; Friedman, “The Effects of Imprisonment.”

67 Mildred Buchwalder, “Operation Cyprus,” *Journal of Psychiatric Social Work* 18, no. 2 (1948): 35–42; Sadi Oppenheim and Miriam L. Goldwasser, “Psychological Report of the Cyprus Psychiatric Mission,” *Journal of Projective Techniques* 14, no. 3 (September 1950): 245–61, <https://doi.org/10.1080/08853126.1950.10380328>.

in the context of psychiatry in Palestine and later Israel,<sup>68</sup> Eliana Hadjisavvas<sup>69</sup> and Anat Kutner<sup>70</sup> have investigated the camps through the perspective of the JDC, and Dalia Ofer provided valuable insight into the demographic of the Cyprus detainees.<sup>71</sup> The fact that the Cyprus years of Jewish Holocaust survivors have not gathered more interest in research is surprising, as the Cyprus constellation is highly informative about the ongoing dislocations of the postwar years and the ways in which Jewish survivors kept getting caught between the fronts of geopolitical conflicts even after the end of the Nazi rule.<sup>72</sup> Investigating the ways in which psychiatric knowledge was used as a lever in political negotiations and strategizing in this situation delivers an especially fruitful perspective. My study thus presents a much-needed and as of yet missing take on the work of the American psychiatric delegation by looking more closely at the psychiatric framework the team applied to the internees' mental state and the ways in which the *Yishuv* – supported by an officially neutral philanthropic organization like the JDC – employed the psy-sciences to monitor their prospective immigrants.

In the summer of 1947, the US delegation made its way to Cyprus.<sup>73</sup> The American delegation consisted of Paul Friedman, who directed the mission, as well as of Sadie Oppenheim and Mildred Buchwalder. Oppenheim, a psychologist, was on leave from the Bellevue hospital's psychiatric division in New York City;<sup>74</sup> Mildred Buchwalder was a psychiatric social worker on leave from the New York Committee on Mental Hygiene.<sup>75</sup> The focus of the American delegation was on the condition of the children, while the Palestinian delegation focused on the mental state of adults and on training of local staff.<sup>76</sup>

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68 Zalashik, *Das unselige Erbe*; Zalashik and Davidovitch, "Measuring Adaptability."

69 Hadjisavvas, "From Dachau to Cyprus."

70 Anat Kutner, "Reconstructing Lives, Creating Citizens. The Role of JDC in the Rehabilitation of Cyprus Detainees, 1946–1949" (forthcoming paper; n.d.).

71 Ofer, "Holocaust Survivors as Immigrants."

72 One reason for this might be the fact that the JDC administration had done little to both produce and conserve documents from their work in Cyprus. The British cloaked most of the mission in secrecy, restricting media and allegedly destroying most of the documentation from the internment in Cyprus. Cf. Yitzhak Teutsch, *The Cyprus Detention Camps: The Essential Research Guide*, 2019, 4–5.

73 As did the Palestinian mission, which will not be discussed further in this study. For more on the Palestinian delegation, see Zalashik and Davidovitch, "Measuring Adaptability."

74 Oppenheim and Goldwasser, "Psychological Report of the Cyprus Psychiatric Mission."

75 Buchwalder, "Operation Cyprus."

76 The Palestinian delegation consisted of Dr. Franz Brull, psychiatrist, Dr. Miryam Hoffert-Horani, psychiatric social worker, Miriam Goldwasser from Hadassah Hospital, and Ruth Swerdlow, secretary. Zalashik and Davidovitch, "Measuring Adaptability," 429.

The agreed upon schedule of the American team provided that they would begin their three-month long trip in Palestine before they spent six weeks in Cyprus (July 10–August 23), and then another three in Palestine.<sup>77</sup> Upon their initial arrival in Palestine, the team was given a tour through government installations, kibbutzim, settlements, and children's villages and had extensive talks with immigration authorities. The fact that the first stop was the *Yishuv's* immigration bodies in Palestine is telling as to the agenda of the whole trip: the JDC funded American team was working in close cooperation with immigration authorities in Palestine, and the team's work in Cyprus presented an extension of the immigration monitoring done by the *Yishuv*.

Once in Cyprus, the team focused on investigating the mental state of the interned children. They conducted their research at the children's village *Kfar Han-oar*.<sup>78</sup> Sadie Oppenheim describes the dire conditions the team's "office" was under: since the team arrived during Cyprus' scorching summer, they erected it on "five feet of parched earth between two Nissen huts," with a straw mat shielding them from the sun.<sup>79</sup> The desk was a "rough plank table," the chairs two benches that frequently collapsed.<sup>80</sup> The setup of the makeshift office is telling of the state of the whole camp. In the following we will take a look at the general setup of the internment camp as it will be informative regarding the effect of the environment on rehabilitation and the mental state of the detainees.

### Setting the Scene: The "Purgatory of Cyprus"<sup>81</sup>

"Cyprus has all the characteristics of a concentration camp," Paul Friedman noted in his JDC report on his trip to Cyprus.<sup>82</sup> After having spent time with DPs in the European DP camps a year prior, listening to their accounts from the Nazi camps, Friedman was particularly sensitive towards camp facilities resembling concentration camps in any way. Hence, he passed a damning verdict on the Cyprus camps, reporting: "Many inmates liken the camps to Auschwitz and Dachau."<sup>83</sup> And indeed, drawing from the historic accounts describing the Cyprus camps, conditions

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77 Itinerary, Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 4.

78 Ibid., 33.

79 Oppenheim and Goldwasser, "Psychological Report of the Cyprus Psychiatric Mission," 245.

80 Ibid.

81 Friedman, "Some Aspects of Concentration Camp Psychology," 602.

82 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 47.

83 Ibid, 48.

were dire. When the first *ma'apilim* (illegal immigrants), who had tried to make it to Haifa in Palestine aboard the “Yagur” and “Henrietta Szold” but were rerouted to Cyprus, embarked in Famagusta, Cyprus on August 13, 1946, they encountered a *déjà-vu*: one journalist described the treatment of the Cyprus internees as a treatment that was fit for “terrorists rather than simple illegal immigrants.”<sup>84</sup>

After Britain had issued a memo on August 13, 1946, ordering all immigration attempts in Palestine to be diverted to Cyprus, the local British military forces hastily erected the camp facilities that amounted to nine different camps in Dekhelia and Caraolos over the next two and a half years.<sup>85</sup> Run by British military with administrative support by the JDC, the camps existed from August 14, 1946, until February 10, 1949, when the last immigrants were able to make their way to what was then Israel. Some 52,000 people passed through the camps on their way to Eretz Israel, with 31,000 interned at a time during the peak.<sup>86</sup>

The inmates, or “detainees,” as the British called them, consisted of different groups of visa-less Holocaust survivors. Most of them had been in European DP camps previously (60 %), but there were also other groups like Jews from Northern Africa or those who had survived in the Soviet Union or the Balkan.<sup>87</sup> They all had previously tried to enter Palestine without visa. Prior to August 1946, they would have been detained in infamous detention center Atlit in Palestine, which by the summer of 1946 was overcrowded. Many of the DPs had spent years in the DP camps, getting prepared to make *Aliyah* (immigration to Palestine) with the help of Zionist emissaries active in the DP camps.<sup>88</sup> Thus, years of hoping for swift emigration to the homeland were shattered for the Cyprus internees, painting a somber picture of the camps.

In Dekhelia and Caraolos, the British military directed the camps and the food supply, and the JDC gave supplementary aid in the form of additional welfare, trainings, and cultural activities.<sup>89</sup> The JDC tried to take off the edge of the worst conditions, but they were able to alleviate only a little of the conundrum

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<sup>84</sup> Cyprus Gazette, no. 2357, in Teutsch, *The Cyprus Detention Camps*, 63.

<sup>85</sup> The camp structures to this day are occasionally used as camps for refugees from the Middle East, as Eliana Hadjisavvas has pointed out. Hadjisavvas, “From Dachau to Cyprus,” 145.

<sup>86</sup> Teutsch, *The Cyprus Detention Camps*, 1.

<sup>87</sup> Ofer, “Holocaust Survivors as Immigrants,” 3.

<sup>88</sup> See Patt for detailed depiction of the preparation for *Aliyah* in the DP camps; Patt, *Finding Home and Homeland*.

<sup>89</sup> Kutner, Anat. “Reconstructing Lives, Creating Citizens: The role of the American Jewish Joint Distribution Committee (JDC) in the rehabilitation of detainees on Cyprus, 1946–49” In *Internment Refugee Camps: Historical and Contemporary Perspectives* edited by Gabriele Anderl, Linda Erker and Christoph Reinprecht, 111–124. Bielefeld: transcript Verlag, 2022.



of Cyprus camp life.<sup>90</sup> The JDC's engagement in Cyprus was controversial because the officially politically neutral American-Jewish organization was indirectly facilitating illegal immigration by supporting the Cyprus internees. Their work in Cyprus produced deepening tensions between the US and Britain, as the latter considered the support as "anti-British."<sup>91</sup> Nevertheless, the JDC funded Friedman's trip to Cyprus to help ameliorate the conditions on site. Friedman was to monitor the work of the four doctors, one dentist, and eight nurses that served the up to 31,000 inmates.<sup>92</sup> Psychiatric cases were sent to the government hospital in Nicosia, where the language was Greek.<sup>93</sup>

The internment camps were surrounded by 10 foot high barbed wire and guarded by watchtowers with armed British soldiers. There was no communication between the different camps, except for a bridge. That bridge was laconically dubbed the "ghetto bridge" as it was reminiscent of bridges in the death camps where people "were led for the last time," as Friedman put it.<sup>94</sup> The camps were located right by the Mediterranean but inmates were not allowed to go for a swim as they would have had to leave the fenced premises. During the summer, Cyprus became scorching hot and water was constantly in little supply. Friedman spends some time in the *Survey* illustrating the psychological torture that was caused by the fact that while the ocean was near, water was scarce, and the summers were hot, the inmates nevertheless weren't allowed to go for a swim.<sup>95</sup>

In the Dekhelia camps, the inmates lived in Nissen huts, poorly ventilated steel structures with a rounded roof, which housed 12 to 20 people at a time. Privacy was unthinkable. In the Caraolos camp, the so-called summer camp, people lived in overly crowded tents without beds or mattresses.<sup>96</sup> To emphasize his shock facing the camps condition, Friedman did not shy away from pictorial descriptions. He wrote:

The camp grounds present a dismal appearance because of the powdery red-brown soil, the absence of greenery within the camp, the glare of the intense sunlight, which emphasizes the ugly appearance of the Nissen huts and the close proximity of the huts to each other. The rough terrain is extremely difficult on unshod feet. Ill clad or partially dressed people covered

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<sup>90</sup> Hadjisavvas, "From Dachau to Cyprus," 148.

<sup>91</sup> For more on the JDC between the fronts in Cyprus see *ibid.*, 149.

<sup>92</sup> Kutner, "Reconstructing Lives, Creating Citizens. The Role of JDC in the Rehabilitation of Cyprus Detainees, 1946–1949," 3.

<sup>93</sup> *Ibid.*

<sup>94</sup> Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 10.

<sup>95</sup> *Ibid.*

<sup>96</sup> *Ibid.*, 12.



with grime and perspiration- caked dust wander about aimlessly adding to the impression of squalor.<sup>97</sup>

What is more, according to Friedman, the food, supplied by British military, was “almost inedible,” consisting mostly of canned food and the occasional spoiled vegetables. Due to the heat, “cooking became a test of human endurance,” as Friedman put it.<sup>98</sup>

The camps were organized around affiliation to different Zionist movements, according to Dalia Ofer, with 90% of the detainees being part of one of the groups.<sup>99</sup> The structure of the camps with its different *kibbutzim* was to mirror life in Palestine, and prospective Israel, with its collective settlements that were supposed to help build a nation and make large swathes of land agrarian. The eight *kibbutzim* present in Cyprus were to approximate the collective settlements in Palestine.<sup>100</sup> As a consequence of the group focus, people who had trouble adjusting to one of the groups were considered problematic, as group membership was desired as expression of the adaptability of the internees.<sup>101</sup> The perspective on such *bodedims* (loners) within the psychiatric investigation will be sufficiently discussed later.

The question of occupation was equally dire, while training courses, facilitated by the JDC, were few and far between, prompting the adult DPs to often remain “idle.”<sup>102</sup> This perceived idleness was viewed as especially detrimental by emissaries of the *Yishuv*, as it was considered to be problematic in light of the ultimate objective to eventually gain productive immigrants for Palestine.<sup>103</sup>

Orphaned children were housed in the children’s camp, as we will discuss later. They were taught in makeshift schools, where there was a dearth of trained teachers. The many unqualified, mostly young teachers had, according to Friedman, their own battles to fight. He observed: “all of them appeared to be fatigued, depressed and in need of education and guidance themselves.”<sup>104</sup> Visualizing the setting of the camps has been vital to think deeper about the effects of the external conditions on the mental rehabilitation and, most importantly, about the validity

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97 Ibid., 10.

98 Ibid., 12.

99 Ofer, “Holocaust Survivors as Immigrants,” 9.

100 Oppenheim and Goldwasser, “Psychological Report of the Cyprus Psychiatric Mission,” 245–46.

101 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 20.

102 Ibid., 13.

103 Hadjisavvas, “From Dachau to Cyprus,” 147.

104 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 15.

of a psychological investigation of wartime trauma in such an adverse setting. Clearly, the limits of any form of psychological rehabilitation are literally drawn in the sand here. The more obvious question to ask here is to what extent internment on Cyprus constituted a re-traumatization for the former DP: the camps were clearly reminiscent of concentration camps and there was no room for privacy and processing, as well as a constant ongoing battle for food, water, and bodily security. The only thing that was decidedly different was that the internees were not waiting to be killed by the British but waited to be finally allowed to make their way to Palestine. Friedman certainly accounted for this in making these conditions obvious and kept on criticizing them for years to come.

### Scientific Setup

After we have established both the administrative as well as the physical setting of the Cyprus camps and the psychiatric delegation, we will now take a closer look at the scientific work done by the American team. Drawing from the methodology and the diagnoses the team employed, we will glean insights into the ways in which the delegation classified and defined the DPs' mental state in order to measure their potential adaptability in Palestine later.

Friedman, Oppenheim, and Buchwalder spent six weeks in the Cyprus camps.<sup>105</sup> The product of their investigation was an administrative report to JDC HQ.<sup>106</sup> Unfortunately, we do not learn who wrote the report or who wrote which section. However, drawing from other texts written by Friedman it is safe to say the *Report* bears his tone and style of writing. Generally, the hierarchy within the team was clearly organized along gender lines and along the hierarchy of the professions, with the male doctor at the top, the psychologist in the middle, and the practitioner (the female social worker) at the bottom: Friedman, the psychiatrist, was responsible for the psychiatric branch of the program, supervising the whole team's work, diagnostics, and teaching local staff, while psychologist Sadie Oppenheim<sup>107</sup> was responsible for psychometric testing and social worker Mildred Buchwalder was to assist Friedman and instruct local staff.<sup>108</sup>

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<sup>105</sup> Ibid., 1.

<sup>106</sup> Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman."

<sup>107</sup> Sadie Oppenheim was a psychologist at the Bellevue hospital where the Bellevue-Wechsler test had been conceived by her colleague David Wechsler (who was once considered to join the delegation but did not in the end for unknown reasons). Buchwalder, "Operation Cyprus," 35.

<sup>108</sup> "Outline of the General and Specific Functions of the Members of the Psychiatric Team Going to Cyprus and Palestine," n.d., Box 257, AJDC Archives.

At the time of the investigation, Cyprus housed 18,000 internees from birth to 84 years of age;<sup>109</sup> the team saw 172 of them, among them 84 children of 18 years of age and under.<sup>110</sup> The focus of the investigation were children but the team occasionally also examined adults. In the *Report* there is no mention of an ideological reason as to why the focus was on children. It rather seemed to have been for practical reasons as the conditions in the children's village Kfar Hanoar were "more favorable for both clinical and educational work,"<sup>111</sup> as it was put in the *Report*.

The team screened three different groups within the overall group of 172 internees.<sup>112</sup> Some 54 of them were referred to the team by the camp doctors or instructors due to somatic complaints without organic root cause and so-called "adjustment"<sup>113</sup> problems. The second group were 36 children randomly selected from three different kibbutzim active in Kfar Hanoar.<sup>114</sup> The third group consisted of internees across all nine camps in Cyprus.<sup>115</sup> The three groups were interviewed, both individually and in groups, and some were psychologically tested. The main focus of the survey was clearly the degree to which the people studied were willing and able to adapt to a community and become productive members of it. In Kfar Hanoar, the Children's Camp, six different youth movements were represented. They were to settle in kibbutzim upon arrival in Palestine. Of them, three groups were chosen as representative case studies. These three kibbutz groups were Coordinatia (orphaned children from Poland),<sup>116</sup> Betar (an extremist Revisionist youth group with a military slant),<sup>117</sup> and Noar Zioni (a more liberal Zionist youth

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109 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman,," 35.

110 *Ibid.*, 33.

111 *Ibid.*, 8.

112 *Ibid.*, 33.

113 *Ibid.*, 50.

114 *Ibid.*, 33.

115 *Ibid.*, 25.

116 Coordinatia or Koordynacja ("The Zionist Coordinatsia for the Redemption of Children in Poland") was an organization in postwar Poland that sought to remove Jewish children from monasteries and catholic families where they had spent the war years. The goal was to prevent Jewish children growing up in a gentile environment and to (re-)acquaint them with Jewish customs and Zionism. Coordinatia children were usually orphaned and they spent the war years in kibbutz groups where they got a Zionist education. See "The Koordynacja: The Zionist Koordinatsia for the Redemption of Children in Poland" (Beit Lohamei Haghetat Archives, n.d.), Ghetto Fighters Archive.

117 Betar was the youth organization of the Revisionist Zionists; a branch of right-wing Zionism initiated by Ze'ev Jabotinsky that was considered "extremist" in the DP camps of Europe due to its territorial maximization demands. It advocated for a territorial maximization of the heartland of Israel, including all of the Mandate territory and the Transjordan area (today's Jordan). In 1947, the Revisionists positioned themselves adamantly against the UN Declaration and the partition plans. Menachem Begin became the Israeli premier in 1950 as a Zionist Revisionist. The Revisionist Move-

group),<sup>118</sup> all Zionist youth groups with varying degrees of adherence to Zionist ideals.

### Methodology

Contrary to Friedman's 1946 *Survey*, the sources on Cyprus give detailed insight into the methodology the American team employed to collect their data. This reinforces the impression that the Cyprus endeavor was much more scientifically oriented than Friedman's 1946 *Survey*.

The 1947 *Cyprus Report* allows us to gauge far more insights into both the epistemes and the methodology that were underlying the *Report*. In the following, I will trace the methods employed by the team, and then will look at the results and diagnoses that were made. Investigating the methodology gives us important hints as to the frame of reference that was employed, its key assumptions and general outlook.

The methods the team employed were individual interviews and the implementation of a battery of psychometric tests. While the report contains extensive information about the psychological tests that were done, little is known about the contents and structure of the interviews. We know that the detainees were first interviewed by Buchwalder, the social worker, with possible follow ups by Oppenheim or Friedman.<sup>119</sup> Twice, Friedman, the psychiatrist, resorted to prescribing sodium amytal to get a patient to talk. Sodium amytal, also known as "truth serum," was used frequently during WWII to get a patient to talk (especially in intelligence contexts) or treat soldiers with shell shock.<sup>120</sup> It was also known to interrupt catatonic stupors<sup>121</sup> of schizophrenic patients, for which Friedman used it.<sup>122</sup> The degree to which the team employed psychotherapeutic talk therapy is unknown and, due to the length of their stay, relatively improbable.<sup>123</sup>

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ment rejected basic tenets of Zionism, such as the World Zionist Movement, and advocated towards revising the British decision to exclude Jordan from a future national home for Jews. Mankowitz, *Life between Memory and Hope*, 258; Patt, *Finding Home and Homeland*, 110.

**118** Noar Zioni, or Hanoar Zioni, the *Zionist Youth* was a liberal Zionist youth movement that adhered to Zionist principles, without the more extreme positions other Zionist movements perpetuated. Cf. Mankowitz, *Life between Memory and Hope*, 93–94.

**119** Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 34.

**120** Cf. Zalashik and Davidovitch, "Measuring Adaptability," 432.

**121** A catatonic stupor is an episode of decreased or no activity, often as part of a schizophrenic episode. Cf. "Catatonic Stupor," in *APA Dictionary of Psychology* (n.d.), <https://dictionary.apa.org/catatonic-stupor>.

**122** Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 37.

**123** In one case, Friedman prescribed the sedative Somnifene which, according to Zalashik and Davidovitch, was "inappropriate" because by 1947 it was known to produce pneumonia. Somnifene

The core tool for clinical diagnostics were psychometric tests. A battery of tests was used for both individual testing as well as comparatively for the three *Kibbutzim* groups (*Coordinata*, *Betar*, *Noar Zioni*).<sup>124</sup> The application of psychometric testing in the *Cyprus Report* allows us a deeper insight into the ways in which the American team tried to gain their understanding into the mental state of the Cyprus DPs. Looking at the psychometric tests also raises important questions about psychological work with a culturally as heterogeneous a group as the Cyprus DPs were.

Sadie Oppenheim was responsible for monitoring the testing. A total of 54 individuals were given psychometric tests, in an age range from 11 to 40, with the mode being 17.<sup>125</sup> The group study of the three *kibbutzim* consisted of 34 children from across the three groups: 20 boys and 14 girls, ranging in age from 9 to 17, with the mode of 13 years.<sup>126</sup>

The following tests were used:<sup>127</sup>

1. **Comprehension Subtest from the Wechsler-Bellevue Intelligence Scale:** a popular intelligence test used in both psychiatric and non-psychiatric settings, developed in the 1930s and still used today in an updated version.<sup>128</sup>
2. **Three cards from the Thematic Apperception Test:** a projective personality test based on Freud's psychoanalytic concept of repression. It was developed in the 1930s by Murray and is supposed to reveal what a subject projects on ambiguous pictures and how it constructs a narrative around the images. The TAT seeks to highlight needs, attitudes, and patterns of reaction.<sup>129</sup>
3. **Cards of the Rorschach Test:** developed by Hermann Rorschach in the 1920s, the Rorschach Test is supposed to lay open innermost conflicts and desires of the psyche by interpreting inkblots.<sup>130</sup>
4. **Three Wishes Test:** asks a subject about the three most important personal or impersonal wishes.

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had been used in the 1920s for sleep therapy but by 1947 it was out of date. Cf. Zalashik and Davidovitch, "Measuring Adaptability," 432.

<sup>124</sup> Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 24.

<sup>125</sup> *Ibid.*, 25.

<sup>126</sup> *Ibid.*

<sup>127</sup> Oppenheim and Goldwasser, "Psychological Report of the Cyprus Psychiatric Mission," 245.

<sup>128</sup> Robert J. Gregory, *Psychological Testing: History, Principles, and Applications*, Updated seventh edition (Boston: Pearson, 2016), 118–28.

<sup>129</sup> *Ibid.*, 43.

<sup>130</sup> *Ibid.*

5. **Draw-A-Person Test (“Goodenough Drawing of a Man”):** a projective test that asks children to draw a person. The drawing is then scrutinized to evaluate their cognitive abilities.<sup>131</sup>

The epistemological interest – what the team sought to find out through testing – unfortunately remains somewhat unclear. What we can glean from the *Cyprus Report* is that the team sought to check their preconceptions of the behavior of the three groups.

As an example, for the use of psychometric testing we will now turn our attention towards the comparative kibbutz study of the groups *Coordinatia*, *Betar*, and *Noar Zioni*. Children between nine and 17 years of age were tested from the three respective groups.<sup>132</sup> *Coordinatia* was a group comprised of orphans between 10 and 13 years of age who were redeemed from non-Jewish, often Christian, rescuers to go to Palestine. *Betar* was a Revisionist Zionist Youth group and *Noar Zioni* a more liberal-minded, pluralistic Zionist group.<sup>133</sup>

For the comparative setup between the three *Kibbutzim* groups, the team had observed certain “trends” beforehand, which they sought to confirm or deny by way of testing.<sup>134</sup> Oppenheim framed the trends in an article on her work in Cyprus. For *Coordinatia* they assumed “emphasis on their bond of common loss, since all were orphans, with vague and ill-defined political ideas”; for *Betar* they projected “emphasis on a group ideal of service to the state, with authoritarian leadership demanding sacrifice of personal to group ideals”; for the group of children belonging to *Noar Zioni* they assumed “emphasis on group ideals to be gained through constructive interpersonal relationships.”<sup>135</sup>

The use of psychometric testing is, historically as well as contemporarily, highly contested. Historically, projective and intelligence testing had been used to measure the functionality of an individual for work in specific industries or to measure the adaptability of a person into a group.<sup>136</sup> Beginning around the 1940s, psychometric tests were increasingly used in a clinical setting to survey “normal development.”<sup>137</sup> I concur with Thomson and Rose who noted that mental testing was (and is) a tool of regulation, aiming at normativization of individuals, and can be under-

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131 Ibid.

132 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 24.

133 For more on the various kibbutzim within DP structures in both European DP camps and Cyprus, see Patt, *Finding Home and Homeland*, 107–249.

134 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 246.

135 Oppenheim and Goldwasser, “Psychological Report of the Cyprus Psychiatric Mission,” 246.

136 Gregory, *Psychological Testing*, 28.

137 Ibid., 28–46.

stood as a “natural ally of eugenics” because of its tendency to measure the “fitness” of an individual for a project, and an assumption of intelligence as inherited as was the case in the early twentieth century.<sup>138</sup> However, the question of intelligence as inherited was not discussed in Cyprus. Nevertheless, the implementation of testing as a reductive way of judging an individual is one aspect in the tendency of the emerging science of psychology to make the individual “knowable, calculable and administrable,”<sup>139</sup> as Rose put it aptly. In that way, the fact that the psychiatric team employed testing schemes<sup>140</sup> hints at the Foucauldian type of “governance via norms” that was taking place in Cyprus.<sup>141</sup>

Especially considering the cultural heterogeneity of the Cyprus internees, the implementation of psychometric tests appears retrospectively problematic. The Cyprus internees had different cultural and national backgrounds, different sets of experiences during the war, and different linguistic abilities. The tests demanded associative interpretation that is of course highly dependent on the individual’s cultural background. All tests used, except the Rorschach test, were developed in the US with American test persons and were now applied to oftentimes traumatized children from all over Europe and Northern Africa, with decidedly different associative capabilities and tendencies.

Naturally, the cultural and linguistic background of the members of the American and Palestinian team also had a role to play in the implementation and interpretation of the tests. There were, however, attempts at bridging the differences between the team and the internees: all members of the teams were required to have a Jewish background,<sup>142</sup> and strides were made by trying to cover all linguistic demands. Friedman was fluent in Polish, Russian, German, Yiddish, and some Hebrew, and the staff from Palestine spoke German, Yiddish, and Hebrew. However, other Eastern European languages were not covered. Some tests were translated into Yiddish, like the Bellevue-Wechsler Test (by David Wechsler himself), but not all the children spoke Yiddish.<sup>143</sup>

Over the course of the evaluation of the tests, the difficulties and fallibility of the testing scheme are reflected in the *Cyprus Report*. The authors acknowledge the

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138 Cf. Thomson, *Psychological Subjects*, 71.

139 Rose, *The Psychological Complex*, 65.

140 For an social history of intelligence testing, see Brian Evans and Bernard Waites, *IQ and Mental Testing: An Unnatural Science and Its Social History*, Critical Social Studies (London: Macmillan, 1981).

141 The argument of governance through quantification and the establishment of psychological norms runs through Rose, *Governing the Soul* and *Psychological Complex*. Thomson also discusses it; Thomson, *Psychological Subjects*, 111; Rose, *Governing the Soul*; Rose, *The Psychological Complex*.

142 Zalachik and Davidovitch, “Measuring Adaptability,” 432.

143 *Ibid.*, 431.

problems of language, as well as what they call “a lack of common background” and very different “developmental experiences.”<sup>144</sup> They also mourned the “unreliability of the chronological age” due to the ability of the children to adjust their age to purpose, as has been discussed multiple times before.<sup>145</sup>

**Results**

The results of the testing scheme, especially that of the Three Wishes test, are not only fascinating but an apt example of the ways in which the American team approached the investigation of the children. The results of the testing scheme provide us with an insight into the condition of the children, and the ways in which they might had been indoctrinated by the ideology of their respective kibbutz groups, as well as their mental state after the traumatic events of war and persecution. I will therefore provide one example of the outcome of the testing scheme by reproducing the results of the Three Wishes test. For the sake of clarity, the results of the Three Wishes test from the Report will be reproduced verbatim.<sup>146</sup>

	Coordinatia	Betar	Noar Zioni
Personal	78 %	24 %	61 %
Impersonal	22 %	76 %	39 %

Typical sets of composite responses follow:

Coordinatia

- I should like to be with my mother.
- I should like to get to Aretz.
- There should be a Homeland for the Jews.

Betar

1. There should be a Jewish state on both sides of the Jordan.
2. We should defend Aretz against its enemies.
3. Aretz should flourish.

Noar Zioni

1. For wisdom, understanding, a “good life.”
2. For Aretz, as a homeland.
3. To study, work, have peace and freedom. <sup>147</sup>

<sup>144</sup> Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 26.  
<sup>145</sup> See also Burgard, “Contested Childhood.”  
<sup>146</sup> Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 29.  
<sup>147</sup> Ibid.



The answers to the test seem to reflect the ideology of the respective groups, as well as the shared common war experience. The *Betar* group can be classified as the most rigid and nationalist group of the three. This is reflected in the percentage of personal wishes of only 24%: individual wishes were subordinated to the shared goal of a “flourishing” Jewish homeland. In the composite responses (unfortunately we do not have a list of all wishes mentioned) not one of the responses is personal; they all aim at immigration and nation building. When confronted with a hypothetical question, “What should you do if while sitting in the movies, you were the first to notice smoke and fire?”, one child from *Betar* responded: “It depends on where it happened. If in Arets [sic Eretz Israel], I would let it burn. If someone set it on fire, there must be a reason.”<sup>148</sup> This response impressively illustrates the degree to which the children put their faith not only on a good life in Eretz Israel, but also on the local Zionist authorities, reflecting the steep hierarchy that was perpetuated in the *Betar* group.

Of the three groups, the children from *Coordinatia* presented the most personal wishes. These children were the youngest in the study and shared a bond of loss of parents. This reflects in the most popular wish – to be with the mother. The results of the tests for *Coordinatia* shows the ways in which the loss of parents was woven into the identity of the group. Here, the shared trauma was not sublimated, but became a unifying narrative for the coherence of the group.

The answers of the *Noar Zioni* children reflect the more liberal outlook of the group. The first wish is a generalized, rather aloof, wish for “a good life.” While the *Coordinatia* kids wished for a mother, and the *Betar* kids wished for a territorially maximized Jewish homeland, the *Noar Zioni* kids basically just wished to be happy. The strife for a Jewish homeland ranked only second. The *Report* does not draw bigger conclusions other than the observation that the Three Wishes responses echoed the overall group identity. Friedman and his colleagues do not judge or otherwise interpret their observation. It is important to note that today’s psychology, having dealt with the effects of childhood trauma for the last decades, has observed that traumatized children are oftentimes incapable of expressing personal wishes and desires.<sup>149</sup> Their access to their own emotional world, from which their own desires spring, is often extremely minimized or shielded as a protective mechanism. Not feeling much thus becomes a core coping strategy of the traumatized child. The fact that Friedman et al. do not consider a possible nexus of a traumatizing experience with the (in-)ability of expressing wishes points us towards the state of the art of child psychology at the time and the little

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148 Ibid.

149 Exchange of the author with a psychotherapist, 1.2.2022.

attention that was given by Friedman and his colleagues to the effect of trauma on the children they investigated.

Instead, Friedman et al. focus on the level of “indoctrination”<sup>150</sup> (a word used frequently in the *Cyprus Report*) present in the groups. It would have been interesting to learn how Friedman et al. evaluated the indoctrination of the group, but they shy away from that. Interestingly, when Friedman travelled the European DP camps in 1946, he had taken a more concrete stance on the question of ideology in the rehabilitation process. As we have discussed in the chapter on Friedman’s 1946 *Survey*, he thought identification with Zionist ideals within children to be a “theoretically sound idea,” but thought that they had before made to be able “to live with each other” and he feared a culture of coercion within ideological groups.<sup>151</sup>

Whether Friedman’s stance on ideology and children had changed, or whether he simply stayed silent on his views and sublimated them to the overall goal of measuring the adaptability of prospective immigrants to Palestine can only be speculated. It is clear from the *Cyprus Report* that Friedman relied on a more descriptive style than in his 1946 *Survey*; evaluating or even judging the level of indoctrination of the children would not fit the overall impression of the *Cyprus Report*. Here, Friedman remains the aloof, striving to be neutral scientist analyzing the children.

The results of the remaining tests seemed to confirm the impression raised by the Three Wishes test that affiliation to the respective groups ideals determined the outcome of the tests. The aggression levels that were revealed in the projective tests such as TAT and Rorschach confirmed that the *Betar* kids had a tendency to express their aggression through “righteousness” and “resistance to restraint,”<sup>152</sup> while the *Coordinatia* children sought “love” and the *Noar Zioni* focused their energies towards “selfless service [...] in the *kibbutz*.”<sup>153</sup>

## Diagnoses

Of the 84 children the team saw in the Children’s Camp they only made 31 diagnoses.<sup>154</sup> The most common diagnosis there was depression (6 cases in girls, 3 in boys), the second highest ranking diagnosis was “conversion hysteria” (5 girls, 1 boy), a diagnosis that is no longer made but refers to a blanket diagnoses that cov-

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150 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 29.

151 Friedman, “Report on a Survey of the Psychological Conditions of the Surviving Children in Europe,” 19.

152 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 30.

153 Ibid.

154 Ibid., 35.

ers several inexplicable symptoms, where anxiety is “assumed to have been converted into physical symptoms” such as sensory disturbances, tremors, convulsions etc.<sup>155</sup> It is almost surprising how little psychiatric diagnoses were made, considering the enormous trauma the children had encountered.<sup>156</sup>

There were, however, major behavioral significances and psychosomatic complaints. Speaking at the American Psychiatric Association in 1948, Friedman recounted how 50–60% of the children presented “somatic conditions to which no organic cause could be found.”<sup>157</sup> Those were headaches, dizziness, abdominal pains, and pains in the throat (“globus hystericus”). All of the symptoms were, according to Friedman, accompanied by anxiety that sometimes evolved into panic.<sup>158</sup>

It is here that Friedman encounters once again the phenomenon that is mentioned repeatedly when dealing with the mental state of the children in the post-war period: fatigue, accompanied by shallowness of emotion or “affective anesthesia,” as Eugène Minkowsky called it.<sup>159</sup> As discussed, Friedman had already encountered this phenomenon in the DP camps in 1946. In Cyprus, in turn, he again encountered “hundreds of children in utter apathy.”<sup>160</sup> Like in 1946, he explains affective anesthesia through the Freudian concept of repression: the repression of any form of feelings as a defense mechanism to withstand the “repeated traumata of their daily lives.”<sup>161</sup>

A symptom that is similar to apathy but came more into focus than in the DP camps was the issue of prolonged sleep. Friedman spends some time in conceptualizing his understanding of what he calls “sleeping spells.”<sup>162</sup> Friedman’s way of making sense of the phenomenon tells us a lot about his general view on life in Cyprus, the mental suffering of the children he encountered, as well as about his conceptualization of the traumatic events that precipitated the symptoms.

Friedman notes that he had not encountered the issue of lethargy and prolonged sleep in the European DP camps to such a degree as he did in Cyprus. He reports on a boy of 17, who slept for a solid 72 hours. Apart from the sleeping,

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155 “Conversion Disorder | Psychology | Britannica,” accessed February 22, 2022, <https://www.britannica.com/science/conversion-disorder>.

156 The other diagnoses were: “Hypochondriasis, Acute Anxiety, Mental Deficiency, Schizophrenia, Combat Fatigue.” Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 35.

157 Friedman, “Some Aspects of Concentration Camp Psychology,” 602.

158 Ibid.

159 Minkowski, “L’anesthésie Affective.”

160 Friedman, “Some Aspects of Concentration Camp Psychology,” 602.

161 Ibid.

162 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 37.

the boy did not exhibit other physical symptoms. The way Friedman conceived of the boy's condition, he had totally withdrawn from a "painful reality" that had overcome him in Cyprus.<sup>163</sup> The ways in which Friedman conceptualizes the symptoms he encountered deliver important insights into his overall conceptualization of the children's mental condition.

### Considering the Root Cause of Neuroses

Another case study Friedman recounts provides us with even more insight into the ways in which he conceptualized the suffering he witnessed. He reports about an 18-year-old girl hailing originally from Poland, who was presented to him because she suffered from "violent headaches, dizziness and prolonged sleeping spells."<sup>164</sup> It had come to Friedman's attention that her symptoms had started 18 months prior when she was at a kibbutz adjacent to a DP camp in Eschwege, Germany. While there, she was reported to have been run over by an ox when milking a cow. While she was shaken by the event, she was reported to have returned to work the next day. A few days later she began manifesting "great fear" and complained of headaches. Friedman reports, "She was afraid to leave her room alone and when she did so she came back in a state of anxiety followed by a crying spell. She then fell into a deep sleep which lasted for several hours."<sup>165</sup> She had been treated in several hospitals before entering Cyprus, and her condition improved somewhat.

However, when she arrived in Cyprus, her condition worsened. Her anxiety and headaches returned, only this time they were followed by bouts of "deep sleep through 24 hours."<sup>166</sup> The dizziness and headaches became so intense that she was handicapped in her work, and she was accompanied by constant fatigue. At the peak, she slept for 48 hours.<sup>167</sup>

Upon closer examination of the girl's biography,<sup>168</sup> Friedman learned that the girl had had an uneventful childhood from the outset, as the oldest of three sisters and a cattle merchant as a father. Since early childhood, she had accompanied her father to milking the cows. When the war broke out the family went into hiding in the woods, but her mother and sisters were murdered. She survived along with

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<sup>163</sup> Friedman, "Some Aspects of Concentration Camp Psychology," 603.

<sup>164</sup> Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 37.

<sup>165</sup> *Ibid.*

<sup>166</sup> *Ibid.*

<sup>167</sup> *Ibid.*

<sup>168</sup> Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 37.

one sister (who was also in Cyprus) and her father who was still in a DP camp in Austria.

To gain more insight into the patient's condition, Friedman administered sodium amytal, the "truth serum" discussed above. During one session, Friedman confronted the girl with memories of the ox incident, upon which the girl erupted into what Friedman describes as "jerky movements typical of sexual intercourse. She continually repeated 'mother' and 'father' in the voice of a small child."<sup>169</sup> Directly after, she fell into another deep sleep episode. The next day, she had no recollection of the incidence, but claimed to have felt better.<sup>170</sup>

The ways in which Friedman conceptualizes the girl's suffering are telling to us. Friedman gleaned from that episode the assumption that what he called "the disposition toward development of neurotic symptoms" was caused by events in early childhood.<sup>171</sup> The "recent hardships" – her current stay in Cyprus and before in DP camps as well as the experience of war, persecution, and hiding during the Nazi reign, as well as losing two sisters and her mother – had merely "activated" the girl's reaction as he put it. He identified the incidence of the ox running the girl over as "the precipitating factor."<sup>172</sup> His conceptualization points us toward an important trajectory in Friedman's perspective: Friedman recognized the root of the girl's suffering in early childhood; without mentioning it explicitly it seems like he understood the girl's behavior under sodium amytal to be proof that she was raped in early childhood. Interestingly, he does not point towards the experience of hiding for years in a forest and losing mother and two sisters explicitly; he subsumes both the war years and the post liberation years under "recent hardships" that had "activated" her suffering. The ox incident was the catalyst, the recent experience was the "activator," but the true root of her suffering lay in childhood. Thus, according to Friedman, the potential for traumatization during the war years were only secondary, and events of early childhood must have been the primary reasons for the girls suffering.

This anecdote illuminates the fact that wartime trauma was not considered as impactful as it came to be seen in later years in psychiatry and psychotherapy.<sup>173</sup> In the following, I will provide a brief excursion about the state of the art in the mid-century regarding the conceptualization of trauma and the impact of experi-

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<sup>169</sup> Ibid.

<sup>170</sup> Ibid.

<sup>171</sup> Friedman, "Some Aspects of Concentration Camp Psychology," 603.

<sup>172</sup> Ibid.

<sup>173</sup> On the recognition of childhood specific wartime trauma in the early 1990s, see Krell, "Child Survivors of the Holocaust – Strategies of Adaptation."

ence of psychic suffering, as this is what Friedman's reading of the girl's suffering refers to.

In Friedman's account of the ox event and its impact on the girl something is alluded to that moved into the center of debates only years later: the debate within psychoanalytic circles regarding the impact of so-called extra-psychic events on the psyche. For a long time, certainly during Friedman's work with DPs, there were considered to be only three reasons as to why a person was suffering mentally: either there were somatic, physiological reasons, or a person had inherited a problematic psychic disposition (certainly rudiments from eugenic ideas of the early twentieth century), or a person had suffered in early childhood. The latter option was the dominant episteme in psychoanalytically informed psychiatry. This conviction was attributed to Freud by the psychiatrists who employed it, even though Freud himself, ever the self-reviser, certainly did not have such a clear-cut position on this.<sup>174</sup>

Upon closer look it emerges that this very question – whether a human can accumulate experience over the course of his or her life that can result in psychic suffering – became highly contentious, with political implications. Dagmar Herzog illustrates the discourse surrounding the impact of extra-psychic events (such as war, persecution, displacement, or loss) on psychic pathologies regarding its political significance (and instrumentalization) in the debates surrounding reparations in the late 1950s and 1960s. These debates took place in an environment that Herzog describes as “toxic post-fascist climate filled with resentment against the survivors.”<sup>175</sup> For the sake of arguing against reparations for Jewish survivors, the presumably Freudian conviction of the negligible impact of extra-psychic factors on suffering became instrumentalized: German psychiatrists, who examined Jewish survivors' pleas for reparations on the grounds of mental suffering, often argued against the impact of the war experience on the psyche, contending that if a person suffered in later years it must have been early childhood experience that caused it. Herzog maintains that this Freudian interpretation was only the veneer to deeper antisemitism as this form of racism and discrimination still was rampant in postwar Germany of the 1960s. Anti-Jewish sentiment was not uncommon among German psychiatrists, who often described Jewish survivors applying for reparations as “Rentenneurotiker,”<sup>176</sup> cloaking their antisemitic resentment in a veil of psychoanalytic rhetoric of “secondary illness gain” (*sekundärer Krankheitsgewinn*).

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174 Herzog, *Cold War Freud*, 2.

175 Ibid., 92.

176 Ibid., 101.

Nevertheless, the discourse surrounding what would today be called Holocaust trauma eventually led to the acknowledgement of a reaction to traumatic events called post-traumatic stress disorder (PTSD) that made its way into the DSM-III in 1980. Dagmar Herzog elegantly traces the evolution of this concept<sup>177</sup> and links it intricately with the discourse surrounding the trauma of the Holocaust, as it was negotiated by psychiatrists such as Kurt Eissler,<sup>178</sup> William Niederland,<sup>179</sup> Robert Jay Lifton,<sup>180</sup> Henry Krystal,<sup>181</sup> Nancy Andraesen,<sup>182</sup> and others. Paul Friedman's work with DPs in the 1940s, though severely under-researched, can however be seen as a precursor to the reparation debates in Germany in the 1960s and, ultimately, the coining of the concept of PTSD, as it is an early example of the early scientific confrontation with the long-term psychological consequences of traumatic events.<sup>183</sup>

Coming back to Friedman's work with DPs it can be asserted that he was still strictly focused on intrapsychic processes, almost to the point of isolation from the outside world. It was understood that a person with a previously healthy disposition should have been able to recover from their experiences without displaying mental pathologies; a person suffering after the war must have been mentally compromised before. This shows that when psychoanalyst Friedman encountered the immediate psychic results of an extra-psychic event of such proportions as the Holocaust, he must have been immensely challenged in his scientific worldview. Of course, I would argue, it depended on the sensitivity of the individual psychoana-

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177 Since this happened decades after the timeframe of this study we will not go into the genesis of PTSD as a psychiatric diagnosis. Suffice it to say that it took another event of momentous proportions, the Vietnam War of 1955–1975, to acknowledge PTSD. *Ibid.*, 89–123.

178 Kurt R. Eissler, "Die Ermordung von wievielen seiner Kinder muss ein Mensch symptomfrei ertragen können, um eine normale Konstitution zu haben?," *Psyche* 17, no. 5 (1963): 241.

179 William Niederland, "The Problem of the Survivor: Part I, Some Remarks on the Psychiatric Evaluation of Emotional Disorders in Survivors of Nazi Persecution"; Niederland, *Folgen Der Verfolgung*; Claudia Moisel, "William G. Niederland (1904–1993) und die Ursprünge des 'Überlebens-Syndroms'"

180 Robert Jay Lifton, *Witness to an Extreme Century: A Memoir*, first Free Press hardcover edition (New York: Free Press, 2011).

181 Krystal, Henry, *Massive Psychic Trauma*.

182 Nancy C. Andraesen, "Posttraumatic Stress Disorder: A History and a Critique," *Annals of the New York Academy of Sciences* 1208 (October 2010): 67–71, <https://doi.org/10.1111/j.1749-6632.2010.05699.x>.

183 For more on the ascent of the diagnosis of PTSD see, besides Herzog, Derek Summerfield, "The Invention of Post-Traumatic Stress Disorder and the Social Usefulness of a Psychiatric Category," *BMJ: British Medical Journal* 322, no. 7278 (January 13, 2001): 95–98; Allan Young, *The Harmony of Illusions: Inventing Post-Traumatic Stress Disorder*; 3. print., 1. paperback young, Princeton Paperbacks (Princeton, NJ: Princeton University Press, 1997).

lyst and their ability to distance themselves from psychoanalytic paradigms, whether they looked at a person's condition purely through the lens of psychoanalytic theory or whether they were able to apply what we today call therapeutic empathy that would sometimes lead to transcending theoretical beliefs. Through extensive study of Friedman's sources, it has to be acknowledged that he becomes visible as a rather sensitive physician who, nevertheless, remained a product of his Freudian psychoanalytic training.

However, Friedman's conceptualizations also point us towards a larger aspect: Friedman was confronted with people who had experienced a human catastrophe of unprecedented magnitude in their own bodies and souls. Accordingly, the psychological consequences could not be measured by previous standards. It took a lot of empathy and mental independence from theoretical paradigms to not just apply the prewar frameworks but let one's self be guided by the current situation. Confrontation with the survivors immediately after the war should have forced Friedman to acknowledge the uniqueness and "*noncomparability*"<sup>184</sup> of the Holocaust experience, and he would have had to allow his prewar psychiatric notions to be toppled by his own empiric observations in the survivors. In the case of the girl run over by the ox, however, he, to a large degree, did not manage to transcend his own epistemology.

What Friedman is sensitive to, however, is the current camp environment in Cyprus. Repeatedly, he acknowledges the adverse effect of the camp structure of Cyprus on the rehabilitation. Regarding the phenomenon of prolonged sleep in the interned children, he argued that Cyprus "reactivated conditioned responses" previously experienced in the Nazi camps.<sup>185</sup> However, while in the Nazis camps the fears and anxieties – responses to Nazi torture – had to be repressed for the sake of survival, in Cyprus they could be acted out, as the internees could relax to the degree that it allowed manifest fears to be displayed. In the Nazi camps, any display of weakness would have led to extermination, as Friedman acknowledges, thus "the threat of death was strong enough to repress any symptoms."<sup>186</sup>

Friedman makes two points here: for one, he is unabashed in his criticism of the Cyprus camps and about the adverse psychic impact it had on the internees. Secondly, he acknowledges here what would today be called re-traumatization. He points towards the barbed wire and the restriction of movement that had an especially negative impact on the internees' psyches because it reminded them

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184 Herzog, *Cold War Freud*, 92–95.

185 Friedman, "Some Aspects of Concentration Camp Psychology," 603.

186 Ibid.



of their past, only that the threat of death was not present, so that anxieties and fears could be lived out, contrary to the Nazi camps where weakness would have led to death. The question arises here as to whether this observation was politically motivated, supporting the Zionist goal of speedy immigration to Palestine by criticizing the conditions of the Cyprus camps. However, gathering as much information as possible on the conditions in the camps (not just through sources of Zionists) had made it palpable that the conditions were indeed sufficiently harsh, and that anybody in their right mind would have criticized the British to expose the Jewish survivors to such a scene. But criticism of the camps also served the argument for speedy immigration to Palestine. While he directly compared Cyprus to concentration camps, he opted for a more subtle tone a year later when he spoke at the International Mental Hygiene Congress in 1948. There, he conceded, “There can be no real parallel to the Nazi camps.”<sup>187</sup> The chasm between his positioning in the JDC report and his paper from 1948 could point towards a political motivation that was underlying his reporting to JDC in September of 1947. There, his work was motivated by the *Yishuv* who had asked the JDC to finance Friedman’s employment. The *Yishuv* clearly wished to see the Cyprus internment camps dissolved as soon as possible, and thus Friedman’s strong condemnation of them and his comparison with concentration camps could have played into this objective.

Looking more closely at Friedman’s way of making sense of the suffering he observed in his patients has been helpful in surveying his epistemologies but also the limits of his discourse which, in turn, pointed toward the state of the art of psychiatry and psychoanalysis in the mid-1940s.

### Preoccupation with Sexuality

Paul Friedman, ever the psychoanalyst, was continuously preoccupied by questions of sexuality in the concentration camps, in the DP camps, and in Cyprus. This focus on sexual functions confirms, once again, Friedman’s Freudian influenced epistemology.

Through interviews Friedman had gathered that the men he spoke to had ceased any sexual activity in concentration camps and became “impotent,” while the women became “amenorrhoeic.”<sup>188</sup> He employs the Freudian concept of regression to explain this phenomenon, stipulating that concentration camp in-

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<sup>187</sup> Friedman, “The Effects of Imprisonment,” 166.

<sup>188</sup> Amenorrhea describes the absence of menstruation in women. Cf. “Amenorrhea | Physical Disorder | Britannica,” accessed February 24, 2022, <https://www.britannica.com/science/amenorrhea>.

mates had regressed onto an infantile stage, thus sublimating their sexuality entirely.<sup>189</sup> For children who entered the concentration camps during their “latency period”<sup>190</sup> between five and 15 years of age, puberty was delayed and girls started their period late, around the age of 17 or 18.<sup>191</sup>

To today’s reader, Friedman’s explanation as to why inmates would stop sexual activity (especially masturbation) in the camps seems very theoretical and somewhat out of touch. He focuses especially on the issue of masturbation, but only with regards to men. The possibility of masturbation in women is not discussed. The discourse about female sexuality is restricted to amenorrhea. In any case, Friedman’s focus on (male) sexuality confirms his heavy Freudian thinking, when he muses that the constant threat to life in the camps “reawakened old castration fears.”<sup>192</sup> These castration fears,<sup>193</sup> according to Friedman, might have produced the conviction that abstaining from sexual activity would “avoid the punishment of the gas chamber and the crematorium.”<sup>194</sup> Of course, this statement underlies a conviction that sex was inherently “indulgent”<sup>195</sup> and could produce punishment. In any case, Friedman conceded that the instinct to self-preservation became the most prominent in the camps, overriding other instincts like sexuality. He speculated, that the suppression of sexuality, which continued in Cyprus, was cause for psychosomatic symptoms.<sup>196</sup>

Friedman recounts the story of a 22-year-old man who thought he had survived Auschwitz precisely because he had conserved his energies by abstaining from masturbation.<sup>197</sup> Friedman notes that the man claimed that those who continued masturbation in Auschwitz did not survive because they became so weakened by it. Upon arrival in Cyprus, the man had become impotent and complained

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189 Friedman, “Some Aspects of Concentration Camp Psychology,” 604.

190 Krell, “Child Survivors of the Holocaust – Strategies of Adaptation,” 388.

191 Friedman, “Some Aspects of Concentration Camp Psychology,” 604.

192 Ibid.

193 “Castration anxiety is a psychoanalytic concept introduced by Sigmund Freud to describe a boy’s fear of loss of or damage to the genital organ as punishment for incestuous wishes toward the mother and murderous fantasies toward the rival father.” Graeme Taylor, “Castration Anxiety,” in *Encyclopedia of Personality and Individual Differences*, ed. Virgil Zeigler-Hill and Todd K. Shackelford (Cham: Springer International Publishing, 2016), 1–2, [https://doi.org/10.1007/978-3-319-28099-8\\_1365-1](https://doi.org/10.1007/978-3-319-28099-8_1365-1). Friedman seems to have used the term “castration fears” here more loosely, pointing at castration as punishment for perceived indecency (in this case masturbation) or extermination as a substitute to castration.

194 Friedman, “Some Aspects of Concentration Camp Psychology,” 604.

195 Ibid.

196 Ibid.

197 Friedman, “Some Aspects of Concentration Camp Psychology,” 604.

of “gastrointestinal disturbances and muscular pains in the legs.”<sup>198</sup> The man was sure that Cyprus was a reenactment of the concentration camps, “here, too, one was compelled to stop masturbating and conserve one’s strength.”<sup>199</sup> Friedman seemed to use the 22-year old man’s story to confirm the textbook Freudian interpretation as restriction of masturbation out of a fear of punishment, be it theoretically, castration, or death in the crematorium. Again, the female experience is entirely neglected, mirroring the inability, and fear, of dealing with female sexuality at the time.<sup>200</sup> With the recourse to the castration fear theory Friedman employed a theory of Freud’s that ranged back to his early considerations of sexuality, which he had revised later.<sup>201</sup>

Friedman also notes how the educators of the children in Cyprus were concerned that the children were “curiously uninterested in sex.”<sup>202</sup> What Friedman does not mention, however, is the rate at which Jewish babies were born in the DP camps in Europe where, clearly, sexuality had been revived.<sup>203</sup>

In sum, Friedman’s preoccupation with the (male) internees’ sexuality once again consolidates the impression that his whole body of knowledge was shaped decisively by Freudian thought. At this point in Friedman’s discourse his application of psychoanalytic thought seems immensely orthodox and detached from the reality of concentration camp life. At no point does he include the camp conditions, the absence of privacy, the starvation diet, and general misery that very well could have stifled a sexual impulse. Starvation diet and the resulting nutrient deficiency is today known to produce amenorrhoea. While Friedman in other points comes across as a sensitive observer, he remains detached and theoretical when it comes to questions of sexuality, recouring to outdated Freudian theories. The realities of sexual urges in concentration camps surroundings elude him entirely. Surely his fellow psychoanalysts had something to say about this curious displacement of his.

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198 Ibid.

199 Ibid.

200 It would be too far-reaching to discuss a possible castration fear in women to try to explain further Friedman’s focus on male sexuality. According to Freud, women suffered of general “penis envy” so in a sense they conceived of themselves as “already castrated.” Apart from that, the sources of Friedman suggest that he simply did not consider the possibility of female masturbation. For more on Freud’s theories on female sexuality, see Sarah Kofman, *The Enigma of Woman: Woman in Freud’s Writings*, Cornell Paperbacks (Ithaca: Cornell University Press, 1985).

201 On Freud’s evolution of theories of sexuality, see *Freud, Drei Abhandlungen zur Sexualtheorie; Freud and Rieff, Collected Papers Sigmund Freud: Sexuality and the Psychology of Love*.

202 Friedman, “Some Aspects of Concentration Camp Psychology,” 604.

203 On the so called “DP baby boom” see Grossmann, *Jews, Germans, and Allies*, 184.

## Adaptability and Productivity

Let us now turn to an aspect of Friedman's study that provides a visceral insight into the social structure of the Cyprus camps, into Zionist plans for Palestine/Israel, and into the political dimension of the work done by the American team: the integration of the DPs into Zionist groups. The Cyprus camps were organized by affiliation to varying Zionist *kibbutzim* groups. Thus, the question – or problem – of integration into the existing *Kkibbutzim* groups that were at the core of the social system in the Cyprus camps is a recurring theme in the *Report*.<sup>204</sup>

It becomes obvious quickly that reluctance to join a group was considered deeply problematic by the Yishuv and its emissaries in Cyprus and by extension the psychiatric team, and it was something that needed to be remedied immediately in order to salvage the Zionist goal of building the state of Israel through pioneering *kibbutz* collectives. The issue of the “*bodedim*” (the loners) thus became contentious.<sup>205</sup>

Upon arrival in Cyprus, the team, and especially Friedman, got several people referred to for examination (through interviews) because they were considered unwilling to integrate into a group. As Friedman put it: “We helped them to understand the real reasons for their attitude of defiance and reluctance to live a community life. It was gratifying that they returned to the *kibbutzim* before we left Cyprus.”<sup>206</sup>

Sadly, Friedman does not provide us with any more information on the ways in which he understood “the real reasons” for reluctance to join a group. However, the fact that he employed his psychoanalytic and psychotherapeutic strategies and expertise to convince individuals to join a group, albeit with a political trajectory, emphasizes the impression that the American psychiatric team acted in accordance with Zionist policy. Thus, the team (financed by the JDC) ensured the Zionist endeavor of building the envisioned social structure in Palestine. As a psychotherapist, Friedman would have been expected to try and understand the reasons for an individual's insistence on independence from a group, but Friedman followed the Zionist maxim of group integration as an indicator of normality.

Back in 1946, after touring the European DP camps, Friedman had positioned himself quite differently, postulating that the children he interviewed had “had

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<sup>204</sup> See i.e. Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 19.

<sup>205</sup> *Ibid.*, 20.

<sup>206</sup> *Ibid.*, 36.

enough” of (forced) group living, advocating for individual care and attention for children.<sup>207</sup>

And indeed, even in Cyprus there were indicators that some children sought individual lives beyond the *kibbutz* groups, as Mildred Buchwalder remarks in an article. She penned, “The internees run away from collective settlements? Perhaps it isn’t entirely without reason. Collectives mean group living. Many internees are saturated with group living.”<sup>208</sup>

The degree to which Buchwalder contradicts Friedman (her boss) in the article that she authored herself (while officially she was the co-author of the JDC Report, Friedman obviously had the last word about the ways in which things were framed) is striking. She obviously was not convinced that group living was beneficial for all. Some had rather different ideas about their futures, she conceded: “They want their own homes, money of their own to spend as they wish and, perhaps, an illusory kind of independence.”<sup>209</sup> Unfortunately, we do not have any more knowledge regarding the circumstances of Buchwalder writing the article or the ways in which it was perceived by Friedman or the JDC.

In any case, individuality clearly was not the guiding principle for neither the *Yishuv* nor Friedman as representative of the American psychiatric mission to Cyprus. The goal for the prospective immigrants to Palestine was always for the immigrants to be able to adapt and assimilate into a group, a group that would literally build a nation with their own hands. *Kibbutz* life was to be desired by all; if someone rejected that they were considered a problem.

According to Dalia Ofer, that was because great expectations weighed on the *kibbutzniks*. The new immigrants coming from the European DP camps were hoped to replace *kibbutz* members in Palestine who were engaged in “missions” in Palestine like the Independence War in 1948.<sup>210</sup> However, as Zalashik and Davidovitch point out, this exchange of duties did not happen. Upon arrival in Palestine, many still rejected *kibbutz* life, which caused disappointment.<sup>211</sup>

Another focus of the work of the American team that fell into the same vein as the discourse surrounding group adaptability was the question of “idleness” and, ultimately, prospective productivity of the new immigrants. Mildred Buchwalder (and Friedman in the JDC Report to a lesser extent) describes the ways in which

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207 Friedman, “Report on a Survey of the Psychological Conditions of the Surviving Children in Europe,” 12.

208 Buchwalder, “Operation Cyprus,” 42.

209 Ibid.

210 Cf. Ofer, “Holocaust Survivors as Immigrants,” 14.

211 Cf. Zalashik and Davidovitch, “Measuring Adaptability,” 435.

the Cyprus internees were forced into “idleness.”<sup>212</sup> According to Buchwalder, the JDC had proposed (whether to the British military authorities or emissaries of the *Yishuv* active in Cyprus remains unclear in Buchwalder’s account) to establish a work programs for the internees, but those calls were repeatedly rejected.<sup>213</sup> Thus, inactivity on the part of the internees ensued, that worried the American team and raised anxieties in the *Yishuv*. The Zionists were worried that Palestine would soon be welcoming “Luftmenschen,” “unskilled, listless, ambitionless, unemployed and more or less discontented people”<sup>214</sup> who would be of no use to the budding Israeli state.

The American team was to investigate that prejudice.<sup>215</sup> Not surprisingly, Friedman concurred with the *Yishuv* and Buchwalder, considering idleness as “one of the most serious problems of the camps.”<sup>216</sup> In a stark departure from the DP camps in Europe, people who previously had worked and were well-trained had nothing to do, adolescents did not receive training of any kind, and children received only basic education, if at all. This was not an ideal preparation to become productive members of a new state. Friedman noted: “The fact that these people have survived is important, but the manner of their survival is equally so. Idleness, such as we have seen in Cyprus, is no training for pioneer work in Palestine. It only increases anxieties and fosters neurotic tendencies. They should survive as productive citizens of Palestine.”<sup>217</sup>

The notion of “productivity” is an important one here, as it tells us that the *Yishuv*, and by extension the American team, sought to screen the prospective immigrants regarding their productivity, whether they would be able to help build a country and become active in the labor force. “Idle,” untrained people who did not wish to work – “Luftmenschen” – were not helpful to that endeavor. Such was the thinking of the *Yishuv*, and the American team delivered the psychological screening to assess the “human resources” that were about to land on Palestine’s shores regarding their adaptability and productivity.<sup>218</sup>

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212 Buchwalder, “Operation Cyprus,” 39.

213 Ibid., 38.

214 Ibid., 35.

215 Ibid.

216 Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 13.

217 Ibid., 49.

218 Both Zalashik and Davidovitch and Ofer claim that Zionist leadership in Cyprus kept the internees idle in order to increase the desire to immigrate to Palestine. However, I was not able to substantiate that claim through primary sources. The argument is not very convincing as the internees in Cyprus were to immigrate to Palestine anyway (the only question was when), and the Zionists were not the only authority in Cyprus (the British military authorities had powers,

On the issue of the political nature of Friedman et al.'s JDC Report the question arises whether the American team supported the *Yishuv's* stance regarding the mental state of the Cyprus internees: the *Yishuv* generally assumed that the prospect of immigration alone would have a therapeutic effect, even despite the harsh conditions of Cyprus. Friedman rejects this assumption. In his concluding remarks in the JDC Report, Friedman concedes:

There is a common assumption that the Jewish refugees in Cyprus should show more vitality and better spirit than those in the camps in Europe because they are so much closer to their ultimate goal – Palestine. Often we found this to be untrue. For those who have no ideological incentives, no family ties in Palestine, no special skills [...], Cyprus means more anxiety, precisely because it is so close to Palestine. To them it means a reality they are not equipped to handle [...].<sup>219</sup>

Friedman opposes the *Yishuv's* stance on Cyprus and rebuts Chaim Yassky's hope that the *Survey* would prove that the Cyprus DPs were happier than those in Europe because of their proximity to Palestine – which turned out to be a rather naïve and ideological assumption. This shows that while Friedman occasionally seemed to have been harnessed for the Zionist cause, he still maintained some scientific objectivity by rejecting the notion of Cyprus's therapeutic effect on the internees.

Friedman was, however, unambiguous in his demand of immediate liquidation of the DP camps both in Europe and in Cyprus. For him, rehabilitation was not possible in any kind of camp environment, noting: "There is only one satisfactory solution to the problems of the Jewish refugees: Immediate evacuation from the camps in Cyprus and in Europe. This is the indispensable condition to insure adequate rehabilitation and adjustment of these people."<sup>220</sup>

While Friedman does not specify where the internees should be released to, he specifies the desired local whereabouts in another paragraph of the Report. In his concluding remarks he notes: "Palestine alone will not cure all the ailments of the people, but it will be the first requisite for adequate rehabilitation."<sup>221</sup> The degree to which Friedman was as unambiguous about immigration to Palestine as his colleagues from the *Yishuv* is unclear, because the Cyprus internees were planned to immigrate anyways, thus there was no point in questioning the benefits of *Aliyah* at this point. What comes across here, though, is that Friedman did not con-

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too). Zalashik and Davidovitch, "Measuring Adaptability," 436; Ofer, "From Illegal Immigrant to New Immigrants," 737.

<sup>219</sup> Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 47.

<sup>220</sup> *Ibid.*, 50.

<sup>221</sup> *Ibid.*, 49.

sider immigration to Palestine alone to be the salve to the internees' souls that would solve all their issues, as some more extreme Zionists postulated. He does, however, insinuate that immigration to Palestine was the prerequisite to psychological rehabilitation. Whether that statement sprang from his criticism of the camp environment, or whether he was as convinced of the therapeutic effect of life in Eretz Israel, remains unclear at this point. After having read all of his work on Cyprus and the DP camps in Europe, however, I presume that his stance was a practical one: since the Cyprus immigrants were on their way to Palestine anyways, he advocated for speedy immigration because he regarded the camp environment as deeply detrimental to the internees' mental states. However, this is not to say that he was not harnessed by the Zionist cause when supporting them in measuring the adaptability and productivity of the future immigrants.

## 7.4 Healing the DPs, Restoring Peace

To conclude, we will widen the lens from the concrete scientific work on the ground to Friedman's more philosophical and theoretical considerations that provide important concluding findings into his conceptualization of the situation of Jewish survivors in the postwar years.

After Friedman returned from Cyprus, he spent years processing his work with the DPs in Europe and Cyprus, publishing multiple papers, and giving several talks, as discussed above. In it, he reveals himself once again and very explicitly as an orthodox Freudian who derives his epistemology, his way of making sense of his world and work, from Sigmund Freud, specifically from Freud's 1929 *Civilization and its Discontents*,<sup>222</sup> as well as from the principles of the international mental hygiene movement.

For Friedman, the horrors of the Holocaust seemed to confirm Freud's atavistic, bellicose view of human nature. As we have discussed in part I of this study, Freud saw humans suspected of an inner battle between competing drives that needed "civilization" to temper the more destructive instincts. Drawing from *Civilization and its Discontents*, Friedman repeatedly brought up Freud's theory that humans straddled competing inner-psychic instincts – Eros and Thanatos, the life instinct versus the death instinct, or (simplified) the constructive social instincts versus primitive destructive drives.<sup>223</sup> As discussed in part I of this study, according

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<sup>222</sup> Freud, *Civilization, Society and Religion*.

<sup>223</sup> *Ibid.*, 123–27.



to Freud, “civilization” (or “Kultur”) and social restrictions were imperative to moderate and curb the dangerous inner forces of humans, otherwise “homo homini lupus,” as Thomas Hobbes put it, would come into effect.<sup>224</sup> Against this background, it becomes clear that, when Friedman was faced with the extent and the results of the Nazi horrors, he saw Freud’s theory confirmed. To him, the concentration camps were “built on the social instinct.” Friedman explained this in his article for *Commentary*: “Freud has claimed that culture has been built on the ruins of the primitive instinctual drives. The concentration camp, that sadistic embodiment of all that is hostile to culture, was in its turn built upon the ruins of the social instinct.”<sup>225</sup>

Speaking in the terms Friedman employed drawing from Freud, Thanatos had (temporarily) won over Eros and thus had enabled the horrors of the concentration camps. Hence, to make up for the horrors, Eros needed to win over from Thanatos – the social instincts thus needed to be restored.

Friedman enlisted the Freudian theory laid out in *Civilization and its Discontents*, Freud’s seminal interwar publication on culture and civilization that was conceived at the height of the world economic crisis and when Jewish Freud was faced with rising antisemitism in both his home of Austria and in neighboring Germany. Nevertheless, Freud’s theories were conceived unbeknownst to what would come over the world ten years later. Employing the concept of Thanatos to explain the murder of 6 million Jews thus obliterates the Jewish context in the extermination – centuries of antisemitism – as Beth Cohen rightfully pointed out.<sup>226</sup> Friedman who, as we have established earlier, as a Jew himself was well versed in Jewish history and tradition, who himself had to escape Europe because of the Nazi reign in 1938, comes across as weirdly detached and somewhat blinded by the lens of Freudian theory. He disconnected Freudian theory from its context and applied it to the Holocaust – to make sense of it. Perhaps Friedman here did what he criticized his colleagues to have done in *The Road Back for DPs*: out of an inner inability to deal with the realities of what humans were capable of doing, he resorted to a reductionist, detached, and unsympathetic seeming model of theory. Maybe it was literally “too close to home” for him. But this is for psychoanalysts to discuss.

In any case, to Friedman, for Jewish Holocaust survivors to psychologically rehabilitate, they needed Eros to win the battle of their instincts. Friedman argued

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<sup>224</sup> Franz Hespe, “Homo homini lupus – Naturzustand und Kriegszustand bei Thomas Hobbes,” in *Handbuch Kriegstheorien*, ed. Thomas Jäger and Rasmus Beckmann (Wiesbaden: VS Verlag für Sozialwissenschaften, 2011), 178–90, [https://doi.org/10.1007/978-3-531-93299-6\\_14](https://doi.org/10.1007/978-3-531-93299-6_14).

<sup>225</sup> Friedman, “The Road Back for the DP’s,” 7.

<sup>226</sup> Cohen, *Case Closed*, 139–40.

that “the civilizing forces in man “needed to win victory.”<sup>227</sup> It is here that a familiar theme arises once again in the importance that is bestowed on the rehabilitation of Displaced Persons: the theme of the DP’s rehabilitation as groundwork for a larger, even global, project of ensuring peace. Reminiscent of the UNRRA Study Group that aimed to “heal a large wound in world society” by rehabilitating the DP’s,<sup>228</sup> Friedman (without being aware of his colleagues’ work) asserted: “So, the importance of rehabilitating the DP’s is much more than that of salvaging one small group of human beings who have suffered. It is a project that has significance for the whole world; it is, indeed, a reassertion of our belief that the civilizing forces in man may yet win to victory.”<sup>229</sup>

Those “civilizing forces” were driven by *Eros*, the social instincts, and they had to be strengthened. Naturally, the question arises of how these constructive forces would be strengthened. Here we come full circle. Friedman relies on the international mental hygiene movement to “build a world” in which another war will not happen again. Friedman writes in *The Effects of Imprisonment* in 1948: “Let us also hope that the Mental Hygiene Movement will help to build a world in which the other of the two heavenly forces – to quote Freud – eternal *Eros*, will put forth his strength to maintain himself alongside of his equally immortal adversary – to build a world in which such things cannot happen again.”<sup>230</sup>

Friedman was unwavering in his faith in mental hygiene principles. To him, the mental hygiene movement was to ensure that the survivors were being supported in becoming assimilable into societies and to help channel their inner destructive drives, their *Thanatos*, into healthy outlets. For Palestine especially, he was worried that aggressive drives could gain the upper hand. In 1948, after the emergence of the Israeli state, Friedman observed “an intense preoccupation with the rifle”<sup>231</sup> which he saw caused by aggression that had not found its proper outlets. Here, too, he hoped that mental hygiene could remedy that. In 1949, he became part of a mental hygienecommittee for Palestine to help build mental health structures in Israel.<sup>232</sup> The goal was a big one, finding, as he put it “a moral equiv-

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227 Friedman, “The Road Back for the DP’s,” 11.

228 Inter Allied Psychological Study Group, “Report on Psychological Problems of Displaced Persons,” 41.

229 Friedman, “The Road Back for the DP’s,” 11.

230 Friedman, “The Effects of Imprisonment,” 137.

231 Friedman, “The Road Back for the DP’s,” 16.

232 The delegation was headed by Ralph Kaufmann of the American Mental Health Committee and Mount Sinai Hospital, Paul Friedman, and Dale Cameron of the Mental Hygiene Department of the US Public Health Service. The goal of the mission was to design a mental hygiene action plan for the Israeli Ministry of Health. Drawing from experience in the US, the delegation promoted the view that curative psychiatric work would not suffice but preventative measures should be instated, too,

alent to war,”<sup>233</sup> a society, in which the less beneficial human instincts were harnessed to productive activities to preserve peace.

## 7.5 Conclusion

Closely reading Friedman’s Cyprus Report has been highly valuable to gauge how Friedman’s gaze on DPs evolved from 1946 and to understand more about the body of knowledge he applied to the DPs. The Psychiatric Report of Cyprus, compiled by Paul Friedman, Mildred Buchwalder, and Sadie Oppenheim, presents a departure from Friedman’s previous work for the Joint. While in Europe in 1946, Friedman mostly took on the observer role; his work in Cyprus was oriented to meet the (perceived) needs of the budding state of Israel. Concluding his 1946 observations, Friedman was clear that he favored psychotherapy over any ideology and wished to see the children integrate into a democratic society of the future. He did not support Zionist solutions because he was critical of its collective nature. His focus in 1946 was on ensuring the prevention of mental illness in the future and improving the training of care staff.

In Cyprus, less than a year later, things were different: for the sake of supporting the Zionist call to build a Jewish nation, Friedman and his colleagues let themselves and their expertise be harnessed to screen and ultimately measure the “human capital” that was about to land on Palestine’s shores. Thus, I argue that the whole setup of the study was geared towards measuring the adaptability and productivity of the future citizens of Eretz Israel. Zionist emissaries active in the Cyprus camps promoted the organization of the camps along varying *kibbutz* groups to prepare them for collective living in Palestine. Consequently, adaptiveness and integration into a group became an indicator of normality; deviation from the group, or a desire for individuality, was looked upon as problematic. Friedman, Oppenheim, and Buchwalder provided the psychiatric testing scheme to measure these aspects.

Friedman stipulated in retrospect that the conditions in the Cyprus camps presented a laboratory environment in which he could test and enhance his psychiatric and psychoanalytic theories.<sup>234</sup> What kinds of new insights he derived, whether they even changed his view of the human psyche, unfortunately are unclear. From what has been gathered from both the administrative and later sources, the Amer-

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to handle the many traumatized Holocaust survivors entering the new state. According to Rakefet Zalashik, the demands were not implemented. Cf. Zalashik, *Das unselige Erbe*, 102–7.

<sup>233</sup> Friedman, “The Road Back for the DP’s,” 16.

<sup>234</sup> Friedman, “Some Aspects of Concentration Camp Psychology,” 602.

ican team and Friedman applied their established prewar frameworks to a cohort that had experienced life in conditions that had been unknown to those who developed the methods used. Friedman applied the strict Freudian framework to the internees, locating the origin of their psychic suffering in early childhood, thus attributing less importance to the experience of war and persecution in the development of symptoms. There, he proved to be incapable of deviating from his orthodox theoretical framework that was conceived before the events of WWII. In the discourse surrounding the origins of the symptoms of Holocaust survivors and the importance this question gained in later decades when restitution claims were negotiated, Friedman proved to be one of the first who had, unknowingly, grappled with it. The fact, too, that the American delegation applied psychometric tests that were predominantly developed in the US (except the Rorschach test, which was developed by Friedman's Burghölzli colleague) shows that at least upon planning their study the team was not privy to the cultural heterogeneity they were about to encounter in the camps. However, during the testing process, they acknowledged the difficulty arising from the divergent backgrounds of the internees. The differences in testing premises point toward the general impression that has been gathered: the fact that the JDC (and the *Yishuv*) employed American psychosocial experts armed with Mental Hygiene principles shows the heavy US-American influence on (humanitarian) psychiatry in the postwar era, as well as on the medical establishment later in Israel.<sup>235</sup>

The fact that Friedman provided the exploratory groundwork for the *Yishuv*'s political endeavor of screening immigrants again points to principles of the international mental hygiene movement. The idea of screening a population to prevent mental disease in the future was central to the international mental hygiene movement. Even in 1946, the notion of prevention of mental disease had always been central in Friedman's thinking. While in his 1946 *Survey* prevention of mental illness in any future society the children would live in was his prime objective, in 1947 Cyprus he worked towards preventing mental disease in Eretz Israel. In summary, it can be said that the principles of the international mental hygiene movement permeate Friedman's work with DPs, both in 1946 and in 1947. Because of that, his psychiatric work always had a political notion to it, because in the IMHM psychiatry was harnessed to support political projects by preparing the psychological groundwork for it through screening a population and training suitable mental hygiene staff.<sup>236</sup>

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235 Zalashik, *Das unselige Erbe*, 100–110.

236 Pols, "Beyond the Clinical Frontiers' The American Mental Hygiene Movement, 1910–1945," 111.

In the *JDC Report*, Friedman seems, for the most part, aligned with the Zionist call, willingly gearing the investigation towards measuring the adaptability and productivity of the internees. In later publications, however, we have seen that his interpretation of his findings and his opinion on the therapeutic value of immigration is more nuanced. He was generally of the opinion that survivors should be able to live in “a society of their own choice.”<sup>237</sup> For the Cyprus internees, since they were about to immigrate to Palestine anyway, his expectation of the therapeutic value of immigration was decidedly more tempered than that of his colleagues from the *Yishuv*. To Friedman, immigration was not the (sole) salve for the survivors’ souls that was needed to regain their mental strength. Friedman believed that, yes, immigration was the precondition for “adequate rehabilitation” but once settled in the new country survivors needed to be taken care of through mental hygiene strategies.<sup>238</sup> He therefore kept working towards the implementation of a mental hygiene project in Palestine in 1949.<sup>239</sup>

In Cyprus, the *Yishuv* (assisted by the JDC and Friedman) wanted to make sure that the internees would not become a burden for the budding Israeli nation. Once they were in Palestine/Israel they would become or remain productive citizens eager to build a new country. It is, however, essential to note that the work done by Friedman et al. did not serve to weed out mentally challenged immigrants ultimately; it was merely the purpose of taking stock of the “human resources.” Nevertheless, in Cyprus, Friedman was instrumentalized to fulfill the *Yishuv*’s endeavor of screening the “human resources” that would soon enter Palestine. In that, Friedman supported the *Yishuv* in fulfilling their political goal of a) fighting for a Jewish homeland and b) gauging how the prospective country would have an adaptable and productive body of immigrants to integrate. In Cyprus, Friedman did not act as the (more or less) neutral observer he had been when compiling the *Survey* in Europe’s DP camps, but as a psychiatrist who narrowed his gaze towards aspects considered beneficial for the *Yishuv*’s cause. In that I argue that Friedman’s 1947 work in Cyprus provided the psychiatric exploratory work for the “successful” integration of Holocaust survivors in the prospective Israeli society.

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<sup>237</sup> Friedman, “The Effects of Imprisonment,” 167.

<sup>238</sup> Friedman, Buchwalder, and Oppenheim, “Cyprus: Psychiatric Report Dr. Paul Friedman,” 49.

<sup>239</sup> The stance of the young Israeli state towards immigration of mentally ill people or those with TBC changed in 1949. On May 3, the immigration medical service decided to prohibit the entry of mentally ill and those with tuberculosis. For those cases already immigrated JDC founded MALBEN – Institutions for the Care of Handicapped Immigrants Between 1949 and 1968, Malben-JDC helped some 250,000 immigrants. Zalashik and Davidovitch, “Measuring Adaptability,” 439–40.

