Stella Maria Frei

Healing Holocaust Survivors

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Stella Maria Frei

Healing Holocaust Survivors

Politics of Psychological Rehabilitation
in Postwar Europe

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To my grandmother, Helma Berty Frei, who instilled in me a passion for stories and a deep curiosity for the wonders and complexities of the human spirit.

History is not just facts and events. History
is also a pain in the heart, and we repeat history
until we are able to make another's pain in the heart our own.
Julius Lester

Es ist nicht bequem, Gefühle wissenschaftlich zu bearbeiten.
Sigmund Freud

Man muss Heimat haben, um sie nicht nötig zu haben.
Jean Améry

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1 Introduction

Who Can Feel With Us?[1]

Months after Michal Kraus[2] was liberated from the concentration camp of Mauthausen, the 15-year-old struggled to find words to convey what he had been through: surviving the concentration camps of Theresienstadt, Auschwitz, and Mauthausen as well as a death march, he felt, could not be comprehended if one had not felt it "on his own skin."[3] Who, then, he pleaded, could "feel with" him and his fellow survivors? Who would be able to understand them?[4] Between 1945 and 1947, while recuperating from the horrors of the war, Kraus reconstructed his diary which had been destroyed by the Nazis.[5] In it, he describes a cold, ambiguous liberation: what did it mean to be liberated when the family and the homeland is gone?

For survivors like Michal Kraus, death continued into the postwar years. He was free. But being free also meant coming to terms with the gaping wounds the Nazi reign had inflicted on his soul: years of persecution, fear, and incarceration lay behind him. Now, uncertainty, loss of family and homeland, along with physical and mental devastation, and deep uncertainty about the future were his present.

Throughout liberated Germany, Austria, and France, the United Nations Relief and Rehabilitation Administration (UNRRA) set up refugee camps to facilitate the emergence of what was for many Nazi victims "life after death.[6]" Soberly sub-

1 Michal J. Kraus, "Introduction to Michael J. Kraus 'Diary,'" Michael J. Kraus Papers (United States Holocaust Memorial Museum Archive, 1945), 1.

2 Michal Kraus was the youngest of a large Jewish family in Moravia, Czechoslovakia (today's Czech Republic). Severely ill with typhoid fever, he experienced liberation in the Mauthausen concentration camp where he had been deported via Auschwitz and Theresienstadt. Over the course of the first postwar months he learned that only an aunt and one cousin had survived of his large family.

3 Michal J. Kraus, "Introduction to Michael J. Kraus 'Diary,'" Michael J. Kraus Papers (United States Holocaust Memorial Museum Archive, 1945), 1.

4 "It is impossible to describe the horrors of the KZ as they really were, because no mere words can accurately describe the reality of the hardships and horrors. Surely nobody can believe the SS methods if he did not feel them on his own skin. Who can feel with us? Who can understand us?" Michal J. Kraus, "Introduction to Michael J. Kraus 'Diary,'" Michael J. Kraus Papers (United States Holocaust Memorial Museum Archive, 1945), 1.

5 Kraus, "Introduction to Michael J. Kraus 'Diary.'"

6 Richard Bessel et al., *Life after Death: Approaches to a Cultural and Social History of Europe During the 1940s and 1950s* (Cambridge, United Kingdom: Cambridge University Press, 2003), http://ebookcentral.proquest.com/lib/unigiessen/detail.action?docID=217784.

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sumed under the administrative moniker Displaced Persons (DPs), people from various countries and with varying war experiences were scrambled together in the DP camps. There, the DPs were provided with much needed medical attention and material aid. But it was also here, in the utter transientness of the DP camps, that the DPs had to come to terms with what one DP described aptly as the "human and soul murdering inferno of the Holocaust."[7]

Slowly, it emerged that there were wounds that ran more than just skin deep: the emotional toll years of war, persecution, and loss had taken – the psychic wounds. And the question remained, as Michal Kraus so eloquently had put it – who could feel with the survivors? Who was able to even approximate helping to heal the psychological wounds the war and Nazi persecution had left?

The story of postwar survival and rehabilitation of DPs is a story of loss, trauma, and suffering, but also one of resilience, hope, strength, and the "rage to live," as Greta Fischer who worked with DP children put it.[8] Thus, it would be imperative to include the DP voices into a study to obtain a holistic view of the intricacies of psychological rehabilitation of these people. This book, however, focuses on those who, by way of their profession, set out to help the DPs to deal with the emotional toll of the war: the psychiatrists, psychologists, and social workers who encountered the DPs. Or did they? Did the psychosocial personnel work towards ameliorating the psychic suffering in the wake of the war, or did they rather work towards the administrative and political goals of their respective international organizations?

The psychosocial personnel employed by UNRRA and the Jewish Joint Distribution Committee (JDC) was faced with a momentous task: in the utter chaos of the postwar months, with its shifting borders, allegiances, and responsibilities it fell upon them to facilitate material, and medical aid but also, ideally, caring for the psychological wounds of their charges. It was up to these people, some trained and some untrained, to at least try to feel with the DPs.

Caring for the DPs in the trenches of the DP camps meant that the psychosocial personnel were faced with the implications of a human catastrophe of hitherto unknown dimensions: the extent of the suffering inflicted by the Nazis on its victims, especially on the Jews, transcended any previous frame of reference. Thus, caring for the psychological wounds of the DPs also meant being constantly educated about not only the horrors of the war but also about what humans were able to do to one another, albeit in a technocratic fashion. The psychosocial personnel wit-

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7 Samuel Gringauz, "Psychische Schäden und Besonderheiten des Verfahrens: Brückensymptome und spätere Anmeldungen," *Die Wiedergutmachung*, July 21, 1967, 1.

8 Anna Andlauer, *The Rage to Live: The International D.P. Children's Center Kloster Indersdorf 1945–46* (2012), 1.

nessed the emotional legacies of unprecedented and unimaginable horrors while trying to devise schemes to support them in their psychological rehabilitation, without being able to relate to any prior example. As a result, to meet the needs of the DPs, the psychiatrists, psychologists, and social workers working with them had to be able to reconcile their prewar frame of reference regarding what exactly constituted psychological health as well as psychological rehabilitation with the reality of the aftermath of years of suffering under the Nazis. In that sense, thinking about the response of the psychosocial community to the Holocaust[9] is also a history of professional shock of and for the psychosocial personnel.[10]

This book explores the assumptions and modes of thought with which the psychosocial personnel – psychiatrists, psychologists, and social workers of UNRRA and JDC – conceptualized the psychological condition of DPs and what they considered to be the goal of their rehabilitative work. From this, the political dimension of the psychosocial rehabilitation is gleaned. All this will be investigated against the backdrop of the emerging institutionalized interrelation between mental health and politics in the first half of the twentieth century. This study further seeks to trace to what extent the psychosocial experts designed their psychological strategies and their practices with an eye toward the visions of the reconstruction of Europe and the future whereabouts of the DPs.

This study is a pioneer in multiple ways: it is the first that takes an in-depth look at the psychosocial community's earliest instance of interest and engagement in the psychological constitution of Holocaust survivors specifically, and of a refugee population in general.[11] In research,[12] the disciplinary interest of psychiatry in

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9 The term "Holocaust" is employed as a shorthand and blanket term for the atrocities the National Socialists perpetrated. It is, however, imperative to consider that it is a retrospective construction and not a term that had been used at the time, Baher Ibrahim, "Uprooting, Trauma, and Confinement: Psychiatry in Refugee Camps, 1945–1993" (Glasgow: University of Glasgow, 2021), 38–39; Peter Novick, *The Holocaust in American Life*, Mariner Books, A Mariner Book (Boston: Houghton Mifflin, 2007), 20.

10 I am indebted to Dr. Emily Manktelow of Royal Holloway College, London for this apt observation.

11 For another pioneer study in refugee psychiatry, see: Ibrahim, "Uprooting, Trauma, and Confinement: Psychiatry in Refugee Camps, 1945–1993," 31.

12 Ruth Leys calls the reaction of the psychiatric community to the Holocaust "belated" and "delayed." Ruth Leys, *Trauma: A Genealogy* (Chicago: University of Chicago Press, 2000), 15–16. Ben Shephard discusses the perceived restraint in the psychiatric community in Ben Shephard, "Die frühen Befunde der Psychiatrie zum Holocaust (1945–1950)," in *Holocaust und Trauma: kritische Perspektiven zur Entstehung und Wirkung eines Paradigmas*, ed. José Brunner and Nathalie Zajde, Tel Aviver Jahrbuch für deutsche Geschichte 39 (Göttingen: Wallstein-Verl, 2011), 74–75.

the mental condition of Holocaust survivors has usually been dated to the late 1950s and 1960s[13], as we will discuss over the course of this introduction. What is more, the institutionalization of psychiatry within the transnational humanitarian context has been attributed to as late as the 1980s[14] or, at the earliest, 1948 with the inception of the World Health Organization.[15] My study challenges this assumption: in fact, the "psy-disciplines" (psychiatrists, psychologists, and social workers) displayed an interest in the mental health of survivors[16] and DPs immediately after the war, and even prior to war's end.

Investigating the varying psychosocial rehabilitation approaches of DPs provides new and innovative insight into the history of the immediate postwar period, the ways in which psychological expertise and particularly psychoanalytic thought

13 For example William Niederland, "The Problem of the Survivor : Part I, Some Remarks on the Psychiatric Evaluation of Emotional Disorders in Survivors of Nazi Persecution," *Journal of the Hillside Hospital* 10 (1961): 233 – 47; Mark Dvorjetski, "Adjustment of Detainees to Camp and Ghetto Life and Their Subsequent Readjustment to Normal Society," *Yad Vashem Studies* 5 (1963): 193 – 220; Henry Krystal, *Massive Psychic Trauma* (International Universities Press, 1968).

14 Fassin and Rechtman, as well as Becker – all three influential scholars on humanitarian psychiatry and trauma – locate the advent of humanitarian psychiatry in post-catastrophe settings as late as the 1980s, postulating that there were no real attempts of such previously. On December 7, 1988, a massive earthquake with a magnitude of 6.9 on the Richter scale shook Northern Armenia, killing up to 50,000 people and leaving 130,000 injured. In the wake of this globally covered disaster, Fassin locates the advent of the institutionalization of psychiatry within humanitarian organizations (here Médecins sans frontières). Didier Fassin and Richard Rechtman, *The Empire of Trauma: An Inquiry into the Condition of Victimhood* (Princeton; Oxford: Princeton University Press, 2009), 163 – 71; David Becker, "Dealing with the Consequences of Organised Violence in Trauma Work," in *Transforming Ethnopolitical Conflict*, ed. Alex Austin, Martina Fischer, and Norbert Ropers (Wiesbaden: VS Verlag für Sozialwissenschaften, 2004), 1, https://doi.org/10.1007/978-3-663-05642-3_19.

15 Harry Yi-Jui Wu, "World Citizenship and the Emergence of the Social Psychiatry Project of the World Health Organization, 1948–c.1965," *History of Psychiatry* 26, no. 2 (June 2015): 166 – 81, https://doi.org/10.1177/0957154X14554375.

16 Over the course of the study, the terms survivors and refugees are used synonymously for Displaced Persons (DPs) to avoid excessive repetition of the term "DP." This is being done, however, with the knowledge that, historically, the term survivor has not been used as a distinct category and only colloquially, and refugees in the UNRRA context were considered internally displaced people, such as German expellees. For the category of "child survivors" Zalashik argues that these were formed only once the children were adults. This had the function of avoiding the classification of a "victim" leading, for some, to the normalization of postwar life; see Rakefet Zalashik, "Differenziertes Trauma – Die Wiederentdeckung der 'Child Survivor' Kategorie," in *Holocaust und Trauma: kritische Perspektiven zur Entstehung und Wirkung eines Paradigmas*, ed. José Brunner and Nathalie Zajde, Tel Aviver Jahrbuch für deutsche Geschichte 39 (Göttingen: Wallstein-Verl, 2011), 116 – 33; Laura Megan Greaves, "'Concerned Not Only with Relief': UNRRA's Work Rehabilitating the Displaced Persons in the American Zone of Occupation in Germany, 1945 – 1947" (PhD Dissertation, Waterloo, Ontario, Canada, University of Waterloo, 2013), 1.

was used to impress power upon Europe's scattered populations, as well as shedding light onto the diverging regulatory policies in the postwar and the ways in which these permeated into all aspects of rehabilitation.

In the politically highly charged postwar period, the rehabilitation of DPs was a politicized matter, and the psychosocial staff became actors in the contentious questions around the DPs condition and future whereabouts. Thus, the psychosocial staff acted at the intersection of mental health and politics, seeking "to heal a large wound in world society," as one of the primary sources put it.[17]

Questions, Arguments, and Significance

This book will investigate the administrative, regulatory, and ultimately political dimensions of UNRRA and JDC's psychosocial rehabilitation strategies. Its main research interest rests on two central pillars: the epistemological conceptualization of the DPs' psychic condition and the political dimension of psychological rehabilitation strategies.

By way of their profession, psychosocial experts are concerned with the "conditio humana." The two world wars of the young twentieth century that faced the protagonists of this study showed what humans were capable of, both in perpetrating violence and in surviving it. WWII with the Nazi's cold-blooded technocratic way of killing especially confronted the psychosocial personnel with new and disconcerting questions about human nature: what humans were able to do to each other and, in the wake of such catastrophe, how humans could be able to survive such pain and suffering psychologically. To live a life after death. This is the first research endeavor wholly dedicated to analyzing the very early attempts of the psychosocial community – within the institutional setting of UNRRA and JDC – of trying to make sense of what happened to the victims of the Nazis psychologically.

Consequently, one of the goals of this study lies in scrutinizing with which bodies of knowledge the psychosocial personnel encountered the DPs' psychic condition, and how they used those to make sense of what they expected and experienced with the DPs. This book is going to explore the foundations of the conceptualization of psychosocial work by UNRRA and JDC, examining the bodies of knowledge, underlying assumptions, and modes of thought that underpinned

17 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons" (European Regional Office London: United Nations Relief and Rehabilitation Administration, June 1945), 41, HA5–4/3, Wiener Library.

their approaches. Central to this study is to understand how the authors of the sources conceptualized what happened to the DPs psychologically, what they deemed to be the goal of the rehabilitative work, and how they sought to work towards these goals in practical steps.

Psychological considerations tend to formulate normative assumptions about the human psyche. Thus, this book will trace the extent to which the psychosocial personnel, especially the psychiatrists, worked to formulate a normativity of the DPs' processing of their experience, as well as a norm that was to be (re-) instated. What did the psychiatrists consider to be a "normal reaction" to the DPs' experience, and what was the norm that was to be (re-) made? Or was it, speaking with Viktor Frankl, "an abnormal reaction to Auschwitz is a normal reaction"?[18]

Besides the epistemological research interest, this study will investigate the link between psychiatry and politics in refugee psychiatry for the immediate postwar period. The psychosocial personnel acted at the intersection of mental health, rehabilitation, citizenship, and international relations. This raises the question of whose interest it served to employ psychiatrists in the work with DPs.

This study is written from an institutional perspective. It is not a historical comparison of diverging psychosocial rehabilitation approaches but rather an investigation into the forms that psychological rehabilitation took within the UNRRA and the JDC framework as the treatment of the different DP groups evolved. The chronological continuation that psychological rehabilitation underwent within the condensed period of 1944–1948 will be traced along with the ways in which the meaning, conceptualization, and implementation of psychological rehabilitation changed depending on the shifting conditions in the DP camps and the shifting political landscapes.

The four case studies discussed in this thesis span a time period of three years: the first case study was compiled in 1944[19], the last one in 1947.[20] Since the sources used were produced until the year of 1948, this thesis spans the time period of 1944 until 1948. The two major international organizations working with DPs are the organizations focused on in this study: UNRRA was the major humanitarian organization under whose umbrella all other organizations acted, while the JDC was the largest Jewish philanthropic organization active in Jewish DP camps.

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18 Viktor E. Frankl, Ilse Lasch, and Harold S. Kushner, *Man's Search for Meaning: The Classic Tribute to Hope from Holocaust* (London: Rider, 2008), 27.

19 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons."

20 Paul Friedman, Mildred Buchwalder, and Sadie Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," Psychiatric Team Cyprus, September 27, 1947, JDC Archives.

Roadmap

This study traces the evolution of the psychosocial rehabilitation strategies of UNRRA and JDC through the lens of four case studies. Before we dissect the four case studies, chapter two will situate the postwar humanitarian endeavors vis-à-vis interwar practices and developments, specifically that of the League of Nations. This section will introduce one of this study's guiding historical concepts: Mental Hygiene. The International Mental Hygiene Movement advocated for the transcendence of the clinic toward the broader population to monitor the mental health within the population, to train mental health staff, and to prevent mental disease that was also considered the root cause of societal unrest and war. The International Mental Hygiene Movement will be used to illustrate the growing convergence between psychiatry and politics that began after WWI, continued during and after WWII, and would shape the the response of the psychosocial community after WWII.

The analyses of the case studies are structured along the chronological arc of the evolution psychological rehabilitation undertook within the four years timespan of this study.

Case Study 1 – Planning the Road Home prior to War's End is concerned with UNRRA's initial psychosocial strategy as drawn up by the Inter Allied Psychological Study Group (IAPSG) in 1944. In a first step, the administrative setup of UNRRA will be dissected, and the process of hiring a group of experienced psychiatrists, psychologists, and social workers (the IAPSG) delineated. Moving along, UNRRA's initial psychosocial strategy will be traced through the close reading of two major sources. This chapter circles back to the through line of the whole study, the link between the mental hygiene paradigm and psychological rehabilitation of DPs.

Case Study 2 – Negotiating National Belonging is set in the early years of the postwar. The first UN Children's Center in Kloster Indersdorf constitutes the second case study, the first from "on the ground." The Children's Center served as a litmus test where the anticipatory plans discussed previously were tested out, providing us with insight into the validity, practicality, and limitations of the theoretical plans hatched before war's end.

Part II JDC – Paving the Path toward a New Homeland is concerned with two case studies of Dr. Paul Friedman's work with the JDC in 1946 and 1947. The JDC was an American-Jewish philanthropic, (initially) apolitical organization, with which American Jews sought to support their European brethren, in line with the Jewish tradition of charity. Even though the JDC went on to support Zionist projects in Cyprus and Palestine starting in 1947, it considered itself politically neutral. Mirroring the structure of the UNRRA chapters, the administrative setup

of the JDC's Health Department will be investigated in order to trace the decision-making process of enlisting Polish-American psychiatrist Paul Friedman to inquire into the mental health of Jewish children and why it was deemed important to devise a mental hygiene project for Jewish DPs.

Case Study 3 – Surveying Jewish Displaced Children will investigate the outcome of Paul Friedman's six-month journey through DP camps and DP children's homes in Germany, France, Poland, and Austria.[21]

For **Case Study 4 – Measuring Adaptability** we leave the European mainland and focus on the internment camps on the Island of Cyprus where Jewish immigrants, who attempted to go to Palestine, were diverted by the British, starting in August 1946. Friedman is again sent to make a study of the psychological constitution of the internees, but this time on the basis of a proposal of Jewish authorities in Palestine who sought to find out what kind of "human resources" were about to land on their shores.

The final pages of this book will bring together the different strands established in the study into a synthesized argument about psychological rehabilitation of DPs between 1944 and 1947/8, and the convergence of psychiatry and politics in times of war. It makes a larger point about the biopolitical function of psychosocial expertise in the work with DPs and synthesizes the insights gained about the psychosocial knowledge applied onto the DP psyche.

Sources and Methodology

This book is concerned with the history of the mobilization of psychological expertise – for the sake of psychological rehabilitation – in an institutional context from the point of view of the psychosocial personnel. It is not a study on the actual therapeutic work with DPs, or their individual psychological coping strategies. Ultimately, this study is a case of how international organizations in the midcentury employed psychological expertise to achieve administrative and political ends.

Within a time period from 1944 until 1948 four case studies – two each of UNRRA and JDC – will be discussed. This condensed period is distinct because during it DPs were the center of postwar negotiations and developments. Thus, this study traces the development of the psychosocial strategies of UNRRA and JDC shortly before the war's end, in the immediate postwar years, and until the opening of Palestine/Israel for Jewish DPs in May 1948. From 1944 until 1947, the experi-

21 Paul Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," January 1, 1947, 1, G 45 – 54/4/8/36/GER.569, JDC Archives.

ment of UNRRA dominated the DP sphere, with the international administration technically governing all DP operations and the JDC being responsible for Jewish DPs starting in the fall of 1945. By June 1947, UNRRA, whose specific brand of rehabilitation stands at the heart of the first two case studies, was dissolved and the International Refugee Organization IRO took over. This time period is a time of sweeping change in a very short time span, with the tectonic plates of the postwar shifting at a rapid pace, along with the situation of the DPs who were privy to the shifting circumstances and the repercussions it had on them. Since the psychological rehabilitation depended in large part on the responsibility of the international organizations, and their agency, the timespan of four years lends itself to closer inspection.[22]

My research draws on a rich body of sources. Since the study revolves around the conceptualization of psychological rehabilitation from the perspective of the psychosocial experts working for UNRRA and JDC, the sources I consulted present the point of view of "experts" in institutional sources and administrative reports, journals, letters, talks given at psychiatric association meetings, journalistic articles, and one oral history interview.

The main type of source consulted are institutional sources from the UN Archives in New York City and the JDC Archives in NYC and Jerusalem. From administrative reports, and guidelines written for welfare workers, I gauged the ways in the authors looked upon the psychological condition of their charges, how they presented and discussed their condition, how they conceptualized and made sense of it, and what kind of recommendations they formulated.[23] Institutional sources lend themselves to analyzing the ways in which an organization seeks to act in the field. With these types of sources, in the danger, too, lies its benefits: the ways in which facts were potentially bent to align with administrative/institutional directives need to be considered when analyzing these sources but in that the sources also display the institutional policy that is investigated in this study.

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22 Even after spring of 1947 a so-called "hard core" remained in the camps. For more consult the subchapter Invention of DPs. See also Patt and Crago-Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957," 363.

23 See i. e. Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons" (European Regional Office London: United Nations Relief and Rehabilitation Administration, June 1945), HA5–4/3, Wiener Library; Greta Fischer, "D.P. Children's Center Kloster Indersdorf Kreis Dachau," Greta Fischer Papers, January 1946, Box 2, Folder 8–9, United States Holocaust Memorial Museum Archives, Washington, DC; Paul Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," January 1, 1947, G 45–54/4/8/36/GER.569, JDC Archives; Paul Friedman, Mildred Buchwalder, and Sadie Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," Psychiatric Team Cyprus, September 27, 1947, JDC Archives.

Other types of sources are correspondences (contained in the institutional archives, too), an oral history interview with Greta Fischer (welfare director of the UN Children's Home) conducted by the United States Holocaust Memorial Museum,[24] papers published in journals,[25] and talks given at a psychiatric conference,[26] as well as historical books.[27]

In order to analyze the psychoanalytic bodies of knowledge applied to the DP psyche, it is pertinent to study Sigmund Freud's theories that were later referenced, as well as the equally seminal studies on the psychic effects of war on children done by his daughter, Anna Freud. For that, editions of their most seminal publications were relied upon.[28]

This study is situated at the intersection of the history of psychiatry, psychology and psychoanalysis, and postwar political history. Most importantly, it provides the pioneering step in the direction of the nascent area of the history of humanitarian psychiatry.

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24 "Oral History Interview with Greta Fischer," 1982, RG-50.071.0001, United States Holocaust Memorial Archives.

25 See i. e. Paul Friedman, "Some Aspects of Concentration Camp Psychology," *American Journal of Psychiatry* 105, no. 8 (February 1, 1949): 601–5, https://doi.org/10.1176/ajp.105.8.601; John Rickman, "Evacuation and the Child's Mind," *The Lancet*, originally published as Volume 2, Issue 6066, 234, no. 6066 (December 2, 1939): 1192, https://doi.org/10.1016/S0140–6736(00)58046–5; John Rickman, "Medical Planning," *The Lancet*, originally published as Volume 1, Issue 6132, 237, no. 6132 (March 8, 1941): 329, https://doi.org/10.1016/S0140–6736(00)60768–7.

26 See i. e. Paul Friedman, "Can Freedom Be Taught?: The Role of the Social Worker in the Adjustment of the New Immigrant," *The Journal of Social Casework* 29, no. 7 (August 1948): 247–55.

27 See i. e. Clifford Beers, "A Mind That Found Itself," 1908; A.M. Merloo, *Aftermath of Peace: Psychological Essays* (New York: International Universities Press, 1946); Anna Freud and Dorothy T. Burlingham, *War and Children* (Medical War Books, 1943).

28 Sigmund Freud, *Civilization, society and religion: group psychology, civilization and its discontents and other works* (Harmondsworth: Penguin, 1985); Sigmund Freud, *Studienausgabe: Triebe und Triebschicksale. (1915)*, ed. Alexander Mitscherlich and Limitierte Sonderausgabe, vol. III, Psychologie des Unbewußten (Frankfurt a. M: Fischer-Taschenbuch-Verl, 2000); Sigmund Freud, *Beyond the Pleasure Principle*, reprint (Mansfield Centre, CT: Martino, 2010); Sigmund Freud, *Drei Abhandlungen zur Sexualtheorie*, ed. Lothar Bayer and Hans-Martin Lohmann, bibliographisch ergänzte Ausgabe, Reclams Universal-Bibliothek, Nr. 18710 (Ditzingen: Reclam, 2020); Sigmund Freud and Albert Einstein, *Zeitgemäßes über Krieg und Tod*, ed. Hans-Martin Lohmann, [Nachdruck] 2019, Reclams Universal-Bibliothek, Nr. 18924 (Ditzingen: Reclam, 2012); Anna Freud and Dorothy T. Burlingham, *Infants without Families: Reports on the Hampstead Nurseries, 1939–1945*, The Writings of Anna Freud, v. 3 (New York: International Universities Press, 1973); Anna Freud and Sophie Dann, "An Experiment in Group Upbringing," *The Psychoanalytic Study of the Child* 6, no. 1 (January 1951): 127–68, https://doi.org/10.1080/00797308.1952.11822909; Freud and Burlingham, *War and Children*; Sigmund Freud and Philip Rieff, *Collected Papers Sigmund Freud: Sexuality and the Psychology of Love* (New York: Collier Books, 1963).

Its methodology follows an epistemological approach: the study's focus is on the ways in which the psychosocial experts impressed their (competing) thought schools onto the DPs.

As mentioned above, the psychosocial actors are the protagonists of this study; they are the objects rather than the subjects of this study: Thus, psychiatry, psychoanalysis, and social work[29] are not theories or frameworks I apply but rather "intellectual constellations" I examine.[30] By pointing out on what kinds of assumptions, what kinds of familiar, unchallenged, unconsidered modes of thought the psychosocial strategies of UNRRA and JDC rested, the methodology of this analysis follows the Foucauldian notion of "critique"[31] to illuminate the ways in which the diverging psychosocial strategies were used to meet administrative and, ultimately, political ends.

The Invention of Displaced Persons and the Creation of UNRRA

When the hostilities of WWII finally ceased on May 8, 1945, Europe's war-torn roads became the scene of the unfolding drama of the postwar: as a result of the Nazi war, Europe experienced an unprecedented movement of populations.[32] Besides soldiers returning home from duty, forced laborers, prisoners of war, people who had survived the Nazi camps, those who survived the war in hiding, and others who had to leave their homes because of the war were on the move.[33] But

29 On the history of social work see Stein, *"Jewish Social Work in the United States, 1654–1954"; Ehrenreich, The Altruistic Imagination; Hering and Waaldijk, History of Social Work in Europe (1900–1960).*

30 Shapira, *The War Inside*, 5.

31 Interviewed by Didier Eribon in the wake of Francois Mitterand's election as French president in 1981, Foucault formulated his notion of critique as follows: "A critique is not a matter of saying that things are not right as they are. It is a matter of pointing out on what kinds of assumptions, what kinds of familiar, unchallenged, unconsidered modes of thought the practices that we accept rest. [...] Practicing criticism is a matter of making such facile gestures difficult." Michel Foucault and Alan Sheridan, *Politics, Philosophy, Culture: Interviews and Other Writings 1977–1984*, ed. Lawrence D. Kritzman, Paperback, l. publ. 1988 (New York, NY: Routledge, 1990), 154.

32 Malcolm Proudfoot, *European Refugees, 1939–52: A Study in Forced Population Movement* (London: Faber & Faber, 1957).

33 Eugene M. Kulischer, *Europe on the Move: War and Population Changes, 1917–47* (Columbia University Press, 1948), 1, https://doi.org/10.7312/kuli91052.

where to – they often did not know. Between the outbreak of the war, 1939, until two years after the war, 1947, about 55 million Europeans were forcibly relocated.[34]

On the back of the 12-year rule of the National Socialists, and after six years of a violent war that had been fought both on and off the battlefield with an atrocity hitherto unknown to man, these scattered people were trying to make their way home. For some that meant returning to their old homes, for others the immediate postwar days meant reckoning with the realization that, in fact, there was no home to return to.

Displaced Persons (DPs) were part of this great dislocation. The victorious Allied powers coined the sterile term that cloaked the heterogenous group of people with an assortment of wartime experience in a veil of "administrative fiction"[35] as Anna Holian aptly put it, implying homogeneity where there was none. Trustworthy numbers with regards to the DPs and their whereabouts are hard to come by, expression of the utter confusion of the postwar days and months; Holian, however, figures a convincing 11 million[36] DPs by war's end.[37]

The official definition of Displaced Persons was drawn up in the Memorandum No. 39 by the high command of the Allied military, the Supreme Headquarters of the Allied Expeditionary Force (SHAEF). DPs were considered to be "civilians outside the national boundaries of their country by reason of the war, who are desirous but are unable to return to their home or find homes without assistance."[38] Informed by the benefits of hindsight, this definition turned out to be highly meaning making: its inherent assumption that DPs were "desirous to return" would turn out to be as formative as it was problematic and unrealistic for the heterogenous group of the postwar DPs. Referring to this assumed desire, the main paradigm of all assistance to the DPs was designed to facilitate one goal: repatriation.[39]

Another central fallacy in the administrative coinage of the term "displaced persons" already reverberated in the opening quotation of Michal Kraus: "Who

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34 Ibid., 305; Anna Marta Holian, *Between National Socialism and Soviet Communism: Displaced Persons in Postwar Germany* (Ann Arbor: University of Michigan Press, 2015), 3.

35 Holian, *Between National Socialism and Soviet Communism*, 3.

36 An older but equally seminal study on DPs by Königseder/Wetzel figures the number of DPs upon war's end at 10 million, see Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland* (Fischer-Taschenbuch-Verl, 1994), 1.

37 Holian, *Between National Socialism and Soviet Communism*, 3; Kulischer, *Europe on the Move*, 189–90.

38 SHAEF, "Administrative Memorandum 39: Displaced Persons and Refugees in Germany," November 1944, WO 204/2869, The National Archives, Kew. See also revised edition of April 16, 1945.

39 George Woodbridge, *UNRRA: The History of the United Nations Relief and Rehabilitation Administration*, vol. I (New York: Columbia University Press, 1950), 1.

can feel with us?"[40] The "us" in the question points to the major challenge in the postwar planning and the invention of the DP category: the administrative term of Displaced Person was applied indiscriminately onto a highly heterogenous group of people. DPs were former slave laborers, prisoners of war (POWs), former labor and concentration camp inmates, civilian foreigners, people who had spent the war in hiding, children who had fallen victim to "Germanization" attempts by the Nazis, Jews, and gentiles alike, and others.[41] Of the 8–9 million DPs that were assembled in postwar Germany by war's end, where the majority of the DPs had moved on their way westwards, 6 million were civilian foreigners, 2 million were POWs, and 700,000 were concentration camp survivors.[42] The DPs hailed from a multitude of countries: Poland (within the borders of 1939), the Soviet Union (including Ukraine), Estonia, Lithuania, Latvia, France, Italy, Austria, Belgium, Holland, and Yugoslavia, to name but a few.[43]

These people flocked into hastily erected Displaced Persons camps called "assembly centers" in the administrative rhetoric of the time.[44] Most of the DP camps were located in Germany, along with Italy, Austria, Belgium, and France.[45] The camps were located on the grounds of former military barracks, seized German hotels and compounds, and even on the premises of former concentration and/or labor camps (like Bergen-Belsen).[46] The continuity from the Nazi camps to the Allied DP camps in which the DPs were to be assisted seems highly problematic

40 Kraus, "Introduction to Michael J. Kraus 'Diary,'" 1.

41 In April 1945, an amendment of SHAEF Memorandum No 39 defined DPs more precisely: the umbrella term of displaced persons was divided into "United Nations Displaced Persons UNDPs)" (citizens of UN states), "ex-enemy DPs" (Italians, Finns, Romanians, Bulgarians, Hungarians), "enemy DPs" (Germans, Austrians, Japanese), and stateless persons (persons who could not prove their nationality and could not claim any government protection). Ultimately, "enemy DPs," i.e., primarily German citizens, were excluded from SHAEF's area of responsibility and placed under the German government's duty of care. Hence, German Jews were technically not considered DPs. Although Memorandum 39 considered all of these groups as DPs, what is historically considered to be the DP group relates to UNDPs. Proudfoot, *European Refugees, 1939–52: A Study in Forced Population Movement*, 450.

42 Holian, *Between National Socialism and Soviet Communism*, 3.

43 Laure Humbert, *Reinventing French Aid: The Politics of Humanitarian Relief in French-Occupied Germany, 1945–1952*, First edition (New York: Cambridge University Press, 2021), 1.

44 Wolfgang Jacobmeyer, *Vom Zwangsarbeiter Zum Heimatlosen Ausländer: Die Displaced Persons in Westdeutschland, 1945–1951*, Kritische Studien Zur Geschichtswissenschaft, Bd. 65 (Göttingen: Vandenhoeck & Ruprecht, 1985), 25.

45 Holian, *Between National Socialism and Soviet Communism*, 44.

46 For more on the strange spatial continuity between concentration camps and DP camps, see Holger Köhn, *Die Lage Der Lager: Displaced-Persons-Lager in der Amerikanischen Besatzungszone Deutschlands*, 1. Aufl (Essen: Klartext, 2012).

from today's perspective but not to those who facilitated the camps, as the notion of administration of the DPs was the leading paradigm. For them, the camp environment proved helpful for the management of the DPs in a larger context: it offered protection in the hostile environment of postwar Germany [47] and, I argue, it offered control over the DPs. At the same time, as Peter Gatrell has shown convincingly, the camp model is always a way for the administrators of the camps[48] to ideologically mobilize its inhabitants.[49] In any case, the camp environment hints at the limits of psychological rehabilitation in the DP camps at large.

To administrate the Displaced Persons, the United Nations Relief and Rehabilitation Administration (UNRRA) was created. One of UNRRA's main objectives was to manage Europe's[50] dispersed population by implementing its mandatory regulatory measure: repatriation. The agreement for the establishment of the United Nations Relief and Rehabilitation was initiated on November 9, 1943, in Washington.[51] Forty-four countries signed the founding document, including the United States, Britain, and (after long negotiations) the Soviet Union.[52] UNRRA[53] was incorporated into the administrative system of SHAEF (Surpreme Headquarters Allied Expeditionary Force), under the supervision of commander-in-chief Dwight D. Eisenhower.[54] The administration held patronage over all humanitarian organizations operating in postwar Europe, including the Jewish Joint Distribution Committee (JDC), the biggest Jewish philanthropic organization active with DPs and the second focus of this study.[55]

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47 Cf. Peter Gatrell, *The Making of the Modern Refugee*, First edition (Oxford: Oxford University Press, 2013), 9.

48 For more theoretical considerations of the camp, see theory part of this Introduction.

49 Gatrell, *The Making of the Modern Refugee*, 9.

50 UNRRA's scope was worldwide, with far-reaching operations in countries such as China. For the purposes of this study the focus is on Europe and mostly postwar Germany. For UNRRA's worldwide operations, see J. Reinisch, "Internationalism in Relief: The Birth (and Death) of UNRRA," *Past & Present* 210, no. Supplement 6 (January 1, 2011): 258–89, https://doi.org/10.1093/pastj/gtq050.

51 Jessica Reinisch, "'We Shall Rebuild Anew a Powerful Nation': UNRRA, Internationalism and National Reconstruction in Poland," *Journal of Contemporary History* 43, no. 3 (July 1, 2008): 455, https://doi.org/10.1177/0022009408091835.

52 Reinisch, "Internationalism in Relief," 260.

53 Literature on UNRRA and its importance is still growing: Samantha K. Knapton and Katherine Rossy, eds., *Relief and Rehabilitation for a Post-War World: Humanitarian Intervention and the UNRRA* (London: Bloomsbury Academic, 2024).

54 Holian, *Between National Socialism and Soviet Communism*, 59.

55 Reinisch, "Internationalism in Relief."

UNRRA's signatory countries committed to contributing one percent each of their gross domestic product to the aid efforts of the new administration.[56] However, the United States shouldered 94 % of the financial burden of the new administration and thus became the "motor inside an Anglo-American axis,"[57] as Silvia Salvatici put it. According to Ben Shephard, UNRRA became a vessel into which a form of "postwar idealism" flowed,[58] coupled with a dose of necessary pragmatism, as this study will show. After the humanitarian response to WWI had been deemed a failure by many in the burgeoning international humanitarian community, the founding of UNRRA in November 1943 was accompanied by hopes of being better prepared than ever for a humanitarian challenge greater: perceived mistakes of the aftermath of WWI were supposed to be avoided this time round; certain forms of tackling social problems through an orchestrated institutional response were to be applied, and a new form of international cooperation was to be tested out, as will be shown over the course of this study.[59]

UNRRA boasted 16 recipient countries, however, its focus lay on postwar Germany which, as a stroke of historic irony, had become a haven for those who had only recently been persecuted by the government and its minions of this very country.[60] The DPs flocked into Germany for various reasons, i. e. escaping the advancing Red Army in the East, looking for relatives, and/or hoping to be assisted in making their way to a new home. In the months after the Nazis' defeat, Germany presented a kaleidoscope of the postwar era in Europe in general:[61] The ghosts of the Nazi reign still very much lingered, and as German cities showed signs of intense destruction, an atmosphere of scarcity, resentment, and suspicion took hold. Such was the scene the victims of the Nazis' labor and population policy encoun-

56 Tara Zahra, *The Lost Children Reconstructing Europe's Families After World War II* (Cambridge, MA: Harvard University Press, 2011), 91.

57 Silvia Salvatici and Philip Sanders, *A History of Humanitarianism, 1755–1989: In the Name of Others*, Humanitarianism Series (Manchester: Manchester University Press, 2019), 127.

58 Ben Shephard, "'Becoming Planning Minded': The Theory and Practice of Relief 1940–1945," *Journal of Contemporary History* 43, no. 3 (July 2008): 407, https://doi.org/10.1177/0022009408091820.

59 Reinisch, "Internationalism in Relief," 260.

60 Jessica Reinisch, "'We Shall Rebuild Anew a Powerful Nation': UNRRA, Internationalism and National Reconstruction in Poland," *Journal of Contemporary History* 43, no. 3 (July 1, 2008): 454, https://doi.org/10.1177/0022009408091835.

61 For a cultural and social history of Germany and Europe in the immediate postwar years, see Richard Bessel et al., *Life after Death: Approaches to a Cultural and Social History of Europe During the 1940s and 1950s* (Cambridge, United Kingdom: Cambridge University Press, 2003), http://ebookcentral.proquest.com/lib/unigiessen/detail.action?docID=217784.

tered[62] when they entered Germany. In accordance with the Yalta agreement of February 1945, Germany was divided between the United States,[63] Great Britain,[64] France,[65] and the Soviet Union[66] into four occupation zones.[67] Each occupying

62 In fact, the spheres of the DPs, the occupational powers, UNRRA, and the local German population and the local (disempowered) German authorities must not be understood separate from each other, as has been done in early DP research. Recently, the notion of the entanglement of these different actors has come into focus, rightfully so. Frank Stern, for instance, has long argued that the relation between Jewish DPs, occupiers, and Germans constituted an impactful "historic triangle" while Anna Holian situates the DPs argumentatively "in-between" the occupiers and the Germans. Atina Grossmann built the whole trajectory of her seminal work on DP history on the entanglement of "Jews, Germans, and Allies." Frank Stern, "The Historic Triangle: Occupiers, Germans,and Jews in Post- War Germany," *Tel Aviver Jahrbuch Für Deutsche Geschichte* 19 (1990); Holian, *Between National Socialism and Soviet Communism*, 5; Atina Grossmann, *Jews, Germans, and Allies: Close Encounters in Occupied Germany* (Princeton: Princeton University Press, 2009); Markus Nesselrodt, "(Un)Mögliche Begegnungen: Die Deutschen in Zeugnissen Polnisch-Jüdischer Displaced Persons in Der US-Zone (1945–1950)," in *Juden Und Nicht-Juden Nach Der Shoah. Begegnungen in Deutschland*, ed. Stefanie Fischer, Nathanael Riemer, and Stefanie Schüler-Springorum (Berlin: DeGreuyter, 2019), 77–94.

63 For seminal accounts on the American zone of occupation, see Grossmann, *Jews, Germans, and Allies*; Zeev W. Mankowitz, *Life between Memory and Hope: The Survivors of the Holocaust in Occupied Germany*, Studies in the Social and Cultural History of Modern Warfare (New York: Cambridge University Press, 2002); Avinoam J. Patt, *Finding Home and Homeland: Jewish Youth and Zionism in the Aftermath of the Holocaust* (Detroit: Wayne State University Press, 2009); Dan Diner, "Elemente Der Subjektwerdung: Jüdische DPs in Historischem Kontext," Jahrbuch Zur Geschichte Und Wirkung Des Holocaust (Frankfurt a. M, 1997), 229–48.

64 On the DP operations in the British occupation zone, see Hagit Lavsky, *New Beginnings: Holocaust Survivors in Bergen-Belsen and the British Zone in Germany, 1945–1950* (Detroit: Wayne State University Press, 2002).

65 On DPs in the French zone, see Humbert, *Reinventing French Aid*; Laure Humbert, "When Most Relief Workers Had Never Heard of Freud. UNRRA in the French Occupation Zone, 1945–1947," in *War and Displacement in the Twentieth Century: Global Conflicts*, ed. Sandra Barkhof and Angela K. Smith (Routledge, 2014), 199–223; Julia Maspero, "La question des personnes déplacées polonaises dans les zones françaises d'occupation en Allemagne et en Autriche: un aspect méconnu des relations franco-polonaises (1945–1949)," *Relations internationales* 138, no. 2 (2009): 59, https://doi.org/10.3917/ri.138.0059; Andreas Rinke, *Le Grand Retour: Die Französische Displaced-Person-Politik (1944–1951)*, Europäische Hochschulschriften. Reihe III, Geschichte Und Ihre Hilfswissenschaften, Publications Universitaires Européennes. Série III, Histoire, Sciences Auxiliaires de l'histoire; European University Studies. Series III, History and Allied Studies, Bd. 918 = vol. 918 (Frankfurt am Main; New York: Peter Lang, 2002).

66 The case of DPs in the Soviet Union is highly under-researched. Officially, there were "no DPs" in the Soviet-occupied zone; they were considered returnees who were supposed to "return" to the USSR. See *Grossmann, Jews, Germans, and Allies.*

67 Mankowitz, *Life between Memory and Hope*, 11.

power pursued their own distinct political agendas that influenced their treatment of the DPs.[68]

In spring and early summer of 1945, the first UNRRA teams[69] descended upon newly defeated Germany. After having been subjected to a brief and, according to many accounts, utterly impractical training stint in the French town of Granville,[70] teams of eight to ten UNRRA workers[71] were assigned to take care of up to 8,000–10,000 DPs in the camps.[72] In the Western zones of Germany, UNRRA administered 227 assembly centers.[73]

The first teams, who spearheaded UNRRA's European mission, were tasked with confiscating property in order to set up the premises for the DP camps. When the first large groups of DPs flocked into the camps they were deloused, underwent physical examination, were screened for their nationality, and provided with material assistance.[74]

While it soon dawned on those UNRRA staffers actually working with DPs[75] on the ground that the repatriation paradigm was impossible to follow through for certain DP groups, in the early days of UNRRA's work in Europe the ultimate goal was still speedy repatriation. According to Anna Holian, by fall of 1945,

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68 Holian, *Between National Socialism and Soviet Communism*, 5.

69 The number of UNRRA welfare workers rose between spring of 1945 and 1946. By mid 1946, 4,600 welfare workers had enlisted with UNRRA. Mankowitz, *Life between Memory and Hope*, 12.

70 On an firsthand account of the training for UNRRA welfare workers in Granville, see Susan T. Pettiss and Lynne Taylor, *After the Shooting Stopped: The Story of an UNRRA Welfare Worker in Germany 1945–1947* (Victoria, B.C: Trafford, 2004), 33.

71 A closer look at those who enlisted with UNRRA as welfare workers reveals a fascinating and heterogenous group of people. People from all walks of life, from retired British army colonels to American free spirits with aspirations of changing the world for the better, came into war-torn Europe, most with highly aspirational goals. A profound investigation into the welfare workers, their background, motivations, and practices, however, remain a research desideratum. There is a host of first-hand memoir style accounts that could present a starting point for further research: Pettiss and Taylor, *After the Shooting Stopped*; Francesca Wilson, *In the Margins of Chaos: Recollections of Relief Work in and between Three Wars* (New York, 1945); Francesca Wilson, *Aftermath. France, Germany, Austria and Yugoslavia 1945 and 1946* (London, 1947); Kathryn Hulme, *The Wild Place* (Boston: Brown Little, 1953).

72 Pettiss and Taylor, *After the Shooting Stopped*, 33.

73 Gerard Daniel Cohen, *In War's Wake: Europe's Displaced Persons in the Postwar Order*, Oxford Studies in International History (Oxford; New York: Oxford University Press, 2011), 38.

74 Suzan Ilcan and Rob Aitken, "Postwar World Order, Displaced Persons, and Biopolitical Management," *Globalizations* 9, no. 5 (October 2012): 631, https://doi.org/10.1080/14747731.2012.732421.

75 Not all DPs were assembled in DP camps; a significant number of DPs made their way beyond the camps. Their fates have been discussed only as an afterthought in research, i. e. see Holian, *Between National Socialism and Soviet Communism*, 40.

33,000 mostly Western European DPs were repatriated a day.[76] By July 1945 4,2 million DPs had already been repatriated and at the end of 1945 6 million had made their way to their prewar countries of origin.[77] There were, however, certain groups of DPs who challenged UNRRA's repatriation paradigm and with that the administrative trajectory UNRRA sought to execute in postwar Europe: it was this remnant population, made up to a large degree of Jewish DPs and "unaccompanied children," that became the focus of longer-term psychological rehabilitation attempts.

It soon emerged that the care of uprooted children would present UNRRA with an enormous challenge.[78] Within a few months after VE Day (Victory-in-Europe Day), UNRRA had approximately 50,000 unaccompanied children in its care.[79] "Unaccompanied children" was the administrative term minted by UNRRA that described children,[80] who were either orphaned, separated from their parents, and/or without legal guardians, as an effect of the war.[81] All other youth under

76 Ibid., 3.

77 Grossmann, *Jews, Germans, and Allies*, 131; Angelika Königseder; Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 18.

78 The issue of "unaccompanied children" attracted a lot of contemporary interest and sympathy. For an insightful and curiously under researched take on Europe's orphan children from a journalistic perspective, see Dorothy Macardle, *Children of Europe: A Study of the Children of Liberated Countries; Their War-Time Experiences, Their Reactions, Their Needs, with a Note on Germany* (Boston: Beacon press, 1951).

79 Mark Wyman, *DPs: Europe's Displaced Persons, 1945–1951* (Ithaca [N.Y.]: Cornell University Press, 1998), 86–88; Dorothy Macardle, *Children of Europe: A Study of the Children of Liberated Countries; Their War-Time Experiences, Their Reactions, Their Needs, with a Note on Germany*, 231.

80 There has been a flurry of interest in the interest of displaced children during and after WWII. For a selection of such material, see Nicholas Stargardt, *Witnesses of War: Children's Lives under the Nazis*, First edition (New York: Vintage Books, 2007); Lynne Taylor, *In the Children's Best Interests: Unaccompanied Children in American-Occupied Germany, 1945–1952*, German and European Studies 27 (Toronto: University of Toronto Press, 2017); James Marten, "Children and War," in *The Routledge History of Childhood in the Western World* (London; New York, 2013), 142–57; Zahra, *The Lost Children Reconstructing Europe's Families After World War II*; Debórah Dwork, *Children with a Star: Jewish Youth in Nazi Europe*, Judaic Studies (New Haven: Yale Univ. Press, 1991); Christian Höschler, "The IRO Children's Village Bad Aibling: A Refuge in the American Zone of Germany, 1948–1951," application/pdf (Ludwig-Maximilians-Universität München, 2017), https://doi.org/10.5282/EDOC.20571.

81 Taylor, *In the Children's Best Interests*, 2017, 5; Verena Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," in *Starting Anew: The Rehabilitation of Child Survivors of the Holocaust in the Early Postwar Years*, ed. Sharon Kangisser Cohen (Yad Vashem: Yad Vashem, 2019), 54.

the age of 18 were called "(displaced) children."[82] In 1945, it was believed that only 60,000 of the, Million Jewish children West of the Soviet Union had survived the war and that 13 million children had lost their parents.[83] The reasons for the fact that so many children were unaccompanied were manifold: some, mostly teens (young children were usually immediately killed in the extermination camps)[84] were liberated from concentration camps; some spent the war in hiding; others were children of forced workers; others were victims of so-called "Germanization" attempts by the Nazis, such as the Lebensborn program.[85]

In the summer of 1947, UNRRA was liquidated and incorporated into its successor organization, the International Refugee Organization (IRO), which in 1952 evolved into the United Nations High Commissioner for Refugees (UNHCR). The short and changeable history of UNRRA has been widely contested because UNRRA had "never overcome its sickly childhood," as Ben Shephard put it.[86] The care of DPs, however, remained an ongoing concern until 1957 when the last DP camp in Föhrenwald closed. The remaining "hard core," those who for a multitude of reasons could not nor did not want to return home or to a new destination, were entrusted to the Federal Republic of Germany in 1951 as "Heimatlose Ausländer" (homeless foreigners). [87]

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82 According to Verena Buser, there were no plans relating specifically to children within UNRRA prior to war's end. Consequently, there were different age classifications regarding the definition of a child: child survivors were considered those who were not older than 16 years of age by war's end. The term "displaced children" generally subsumed all children who were not "unaccompanied" and under the age of 18. Cf. Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," 54.

83 Dorothy Macardle, *Children of Europe: A Study of the Children of Liberated Countries; Their War-Time Experiences, Their Reactions, Their Needs, with a Note on Germany*, 155–56. As is the case with most numbers dating from the immediate postwar time, this number is contested. Marten assumes that 1.5 million Jewish children had perished during the war, see James Marten, "Children and War," 146.

84 Wyman, *DPs*, 86–106.

85 Christian Höschler, "The IRO Children's Village Bad Aibling," 19; Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," 59–61.

86 Shephard, "'Becoming Planning Minded,'" 418.

87 The realm of "Heimatlose Ausländer" has been severely under-researched, but has recently attracted more interest. See Nikolaus Hagen et al., eds., *Displaced Persons-Forschung in Deutschland und Österreich: eine Bestandsaufnahme zu Beginn des 21. Jahrhunderts*, DigiOst, Band 14 (Berlin: Frank & Timme, 2021), 10; Maria Alexopoulou, "The "Niemands" – Heimatlose Ausländer in Mannheim," *Journal of Migration History* 7, no. 3 (November 12, 2021): 220–43, https://doi.org/10.1163/23519924–00703002.

Jewish DPs and the JDC's Emergence in the DP camps

Over the course of the first postwar months, another group's specific circumstances and rehabilitation demands came to the fore: Jewish DPs.[88] The evolution of the recognition and treatment of Jewish DPs as a group with special needs within the DP sphere is a formative development for this study, one that runs congruent with the evolution of the psychological rehabilitation strategies.

While in the initial plans of UNRRA and SHAEF Jewish survivors did not receive special attention "as Jews" (they were considered citizens of their prewar countries[89]), it became clear in the second half of 1945 that this was unrealistic for Jewish survivors.[90] The reasons for the exclusion of the consideration of special needs of Jewish survivors are nebulous and will be discussed in this study. However, one dominant reading of the exclusion was that planners did not want to perpetuate Nazi racial segregation to avoid deepening the chasm between Jewish[91] and non-Jewish DPs in the postwar world.[92] Conflicts[93] within the DP camps between Jewish and non-Jewish DPs (some of them accused of collaboration with the Nazis), along with the realization that repatriation was impossible especially for the majority of Eastern European DPs, forced authorities in the US Zone to acknowledge Jewish DPs as a distinct stateless group, for whom repatriation was out of the question.[94] Due to conflicts between the British occupation authorities[95] and the Jews who wanted to emigrate to Palestine (which was under British mandatory

88 Angelika Königseder and Juliane Wetzel, *Lebensmut Im Wartesaal: Die Jüdischen DPs (Displaced Persons) Im Nachkriegsdeutschland*, 21.

89 Ibid.

90 Mankowitz, *Life between Memory and Hope*, 52–69.

91 However, contemporary sources prove that UNRRA's planners could (and should) have been more aware of the presumed number of Jewish survivors. Zorach Wahrhaftig, emissary of Zionist organization Mizrachi, admonished to UNRRA in 1944 during its planning stage that, an "overwhelming majority" would be Jewish survivors, "[who] had been deported or expelled to foreign countries, and also many of those displaced within their own countries would be unable or unwilling to be repatriated." Zorach Wahrhaftig, *Relief and Rehabilitation: Implications of the UNRRA Program for Jewish Needs* (New York: Institute of Jewish Affairs of the American Jewish Congress and World Jewish Congress, 1944), 162.

92 Grossmann, *Jews, Germans, and Allies*, 133.

93 For an investigation into the relation between Ukrainian and Jewish DPs in Bergen Belsen, see Jan-Hinnerk Antons, *Ukrainische displaced persons in der britischen Zone: Lagerleben zwischen nationaler Fixierung und pragmatischen Zukunftsentwürfen*, 1. Aufl (Essen: Klartext-Verl, 2014).

94 For a precise tracing of the developments of special care for Jewish survivors in 1945, see chapter "On the ground" of this study, and Mankowitz, *Life between Memory and Hope*, 52–69.

95 For a look at British occupation policy, see Lavsky, *New Beginnings*; Arieh J Kochavi, *Post-Holocaust Politics*, 2000.

Power[96]) the American zone, one of the central geographical foci of this study, became a haven for Jewish DPs and a transitory space from which DPs were assisted in emigrating to new homes, preferably in the US[97] or Palestine.

In the Winter of 1945/46, so-called "infiltrees"[98] who had tried to return to their homes in i. e. Poland or those who had survived the war in the Soviet Union[99] flocked into the DP camps, reporting about antisemitic attacks by their Polish[100] compatriots and the total extermination of their villages and shtetls. Pogroms such as that in Kielce,[101] perpetrated by Poles, became the symbol for the widely perceived impossibility of Jewish survivors to return.[102]

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96 For an in-depth look at Britain's power over Palestine, see Rory Miller, *Britain, Palestine and Empire: The Mandate Years* (London; New York: Routledge, 2016), https://www.taylorfrancis.com/books/e/9781315570006.

97 The US for many, especially Jewish DPs was a preferred destination. American emigration quotas, however, were extremely tight and rejected most Jewish postwar immigration attempts. It was not until 1948 that the "DP Act" eased immigration restrictions for Jewish DPs. Grossmann, *Jews, Germans, and Allies*, 251.

98 According to Atina Grossmann, this group (mainly Polish Jews) consisted of three different subgroups: 1) survivors of labor and concentration camps and death marches, who after liberation tried to make their way home; 2) those Jews who survived the war in hiding or with partisans; 3) approx. 200,000 Jews who survived the war in the USSR were repatriated to Poland, but then fled westwards from Polish antisemitism. Ibid., 1–2.

99 For a closer look on DPs surviving the war in the Soviet Union and their winding postwar ways westward, see Atina Grossmann, "Remapping Relief and Rescue: Flight, Displacement, and International Aid for Jewish Refugees during World War II," *New German Critique* 39, no. 3 (117) (November 1, 2012): 61–79, https://doi.org/10.1215/0094033X-1677264; Markus Nesselrodt, *Dem Holocaust entkommen: Polnische Juden in der Sowjetunion, 1939–1946*, Europäisch-Jüdische Studien. Beiträge, Band 44 (Berlin; Boston: De Gruyter Oldenbourg, 2019).

100 This is not the place to conduct more in-depth research on the motives of Polish Jews who set out for the West in 1946. It should not go unmentioned, however, that in the existing literature these motives are often attributed all too one-dimensionally to a "general" Polish antisemitism. On the one hand, 351 Jews are said to have been murdered in Poland between the German withdrawal in November 1944 and October 1945; see Yehuda Bauer and Mazal Holocaust Collection, *Flight and Rescue: Brichah* (New York: Random House, 1970), 116. This should be contrasted with the fact that there were indeed well-assimilated and integrated Jews in Polish society (e. g., Jakub Berman, a member of the Polish Politbüro, Polish Workers Party) and that the political leadership made efforts to integrate Jews willing to assimilate in postwar Poland. The influence of growing Zionism and the "Brichah" movement on the decision of Polish Jews to emigrate to Palestine via the U.S. zone would have to be further explored elsewhere. Assimilation of Jews into Polish society was not desirable for the Zionists, who had an increasing impact in German DP camps. See Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 48.

101 The town of Kielce in central Poland became a symbol for the inaction of the local police when 37 Holocaust survivors were killed in an anti-Jewish pogrom. Konrad Zielinski, "To Pacify,

In August 1945, another major aid organization entered the scene, which will stand at the heart of the second part of this study: the American Jewish Joint Distribution Committee (JDC, or "Joint"). [103] The Joint was subordinate to UNRRA.[104] Over the course of the first postwar months, the JDC assumed responsibility for Jewish DPs. The JDC ran Jewish DP camps where Jewish DPs were provided with material assistance, rehabilitation, and support for eventual emigration to the desired destination, i. e. the United States, Canada, Britain, and Palestine.[105]

When the JDC emerged on the scene, a new chapter of the DP phase began: in the wake of the Harrison Report,[106] Jewish survivors were now recognized as a distinct group with special needs. With the JDC being the lead agency responsible for meeting the needs of Jewish DPs, countless smaller Jewish organizations entered the DP sphere, increasingly proliferating Zionism among the DPs.[107] A kind of functional Zionism[108] emerged among the Jewish DPs as it held the promise of a new home, emigration to Palestine, or Eretz Israel, as it was called among Zionists. Children and youth especially gravitated towards the *kibbutzim* (collective Zionist settlements) and *hakhsharot* (training farms) that were erected on the grounds of DP camps in the US zone, with support of UNRRA and JDC.[109] Within these social frameworks that were established in the DP camps, Jewish DPs prepared for *Aliyah*, emigration to Palestine. Although initially the JDC considered itself apolitical,[110] factually, the philanthropic organization evolved into supporting the Zionist

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Populate and Polonise: Territorial Transformations and the Displacement of Ethnic Minorities in Communist Poland, 1944–49," in *Warlands: Population Resettlement and State Reconstruction in the Soviet-East European Borderlands, 1945–50*, ed. Peter Gatrell and Nick Baron (Basingstoke: Palgrave Macmillan, 2009), 200, http://site.ebrary.com/id/10399982.

102 Ibid., 201.

103 Avinoam J. Patt and Kierra Crago-Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957," in *The JDC at 100: A Century of Humanitarianism*, ed. Atina Grossmann and Linda G. Levi (Detroit: Wayne State University Press, 2019), 366.

104 Mankowitz, *Life between Memory and Hope*, 12.

105 Patt and Crago-Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957."

106 In August of 1945, US President Truman sent his special envoy Earl Harrison to the American zone of Germany to investigate the treatment of Jewish DPs in the camps. Harrison reasoned that the treatment was abysmal, which led to the recognition of Jewish DPs as an independent group in the US zone of Germany. See more in the chapter "The DP Operations begin: The Year 1945 in DP Camps" of this study.

107 Françoise Ouzan, "Rebuilding Jewish Identities in Displaced Persons Camps in Germany," *Bulletin Du Centre de Recherche Français à Jérusalem*, no. 14 (March 30, 2004): 98–111.

108 Cf. Patt, *Finding Home and Homeland*, 259–68.

109 For an extensive look at the Zionist youth movement, see *Patt, Finding Home and Homeland.*

110 Herman D. Stein, "Jewish Social Work in the United States, 1654–1954," *American Jewish Yearbook* 57 (1956): 12.

call for an independent state of Israel on the ground of what, until May 1948, was Mandatory Palestine.[111]

For many of those Jewish DPs who were unable to return to their prewar countries of origin, Palestine (or *Eretz Israel*[112]) became the desired destination. However, until the establishment of the modern state of Israel on May, 14, 1948, emigration quotas were extremely tight, courtesy of the British Mandatory rule there.[113] Hence, a stream of organized clandestine emigration from the DP camps to Palestine – *Brichah* – ensued.[114] The last case study of this thesis revolves around those DPs who tried to make their way to Palestine but were prevented from leaving the ships in Palestine and being rerouted to the Island of Cyprus. In Cyprus, they were interned in internment camps run by the British, waiting to be allowed to enter Palestine.[115] At that point the JDC had abandoned its apolitical stance, as I will show, and supported the *Yishuv* – the Jewish minority in Palestine – in measuring the "human capital" the prospective immigrants made up.

Set against this backdrop, the psychosocial intervention by the actors of this study unfolded. In the following, we will undertake a first consideration of psychosocial work with DPs and its political dimension on a meta level.

The Politics of Psychosocial Rehabilitation

To manage the DPs in their care and help them achieve their administrative goals, UNRRA and JDC enlisted psychosocial "experts." This fact points us towards the

111 See Chapter 7.1. Palestine under British Mandatory Rule.

112 Eretz Israel, or Eretz Yisrael, is the expression used to describe the Land of Israel as it was promised by God to the Jewish people. In the following, I will use the expression until the founding of the Israeli state in May 1948 to signal the Zionist aspiration connected to the expression and the hope of survivors to immigrate. It is important to note, however, that after 1948 the expression was used by some radical Zionist nationalist fractions to describe their demand of a "Greater Israel" stretching from the Jordan River to the Mediterranean. Walter Laqueur, *A History of Zionism* (New York: Schocken Books: Distributed by Pantheon Books, 2003).

113 Dalia Ofer, "From Illegal Immigrant to New Immigrants," in *The Holocaust and History: The Known, the Unknown, the Disputed, and the Reexamined*, ed. Michael Berenbaum (Bloomington: Indiana University Press, 2002), 733–49.

114 *Bauer and Mazal Holocaust Collection, Flight and Rescue.*

115 Eliana Hadjisavvas, "'From Dachau to Cyprus': Jewish Refugees and the Cyprus Internment Camps—Relief and Rehabilitation, 1946–1949," in *Beyond Camps and Forced Labour*, ed. Suzanne Bardgett, Christine Schmidt, and Dan Stone (Cham: Springer International Publishing, 2020), 145–64, https://doi.org/10.1007/978-3-030-56391-2_9.

central trajectory of this study: the mobilization of psychosocial expertise[116] for administrative and, ultimately, political purposes. The psychosocial personnel, the focal group of this study, were enlisted to support and improve the management of the scattered populations of Europe. This is the starting point of this thesis from which its basic assumption was derived: the guiding hypothesis of this study is that psychosocial knowledge and practice and politics converged in the psychosocial treatment of DPs in the DP camps, establishing a nexus of psychosocial knowledge and politics with regards to refugee mental health.

The convergence of the closely related disciplines of medicine, psychiatry, and psychology with politics was not a phenomenon exclusive to the postwar years.[117] In 1848, German doctor Rudolph Virchow had admonished "politics are medicine on a large scale."[118] This study is the first of its kind dedicated wholly to investigating the history of postwar DPs with regards to the mobilization of psychosocial (mostly psychiatric) knowledge to manage displaced populations. In the following I will introduce several concepts that will help to frame this constellation, as well as shed light on the explicit historical entanglement of psychosocial expertise and politics in the work with DPs and leading up to it.

The enlistment of psychosocial expertise to help implement postwar regulatory measures in the DP camps can be seen as an expression of what historian Lutz Raphael coined the "Scientization of the Social" ('Verwissenschaftlichung des Sozialen').[119] As this study will trace with regards to DPs, and through a brief look onto the social policies of UNRRA's predecessor organization the League of Nations

116 There is a plethora of literature to be found on the notion of the "expert." For a selection, see Helmuth Trischler and Martin Kohlrausch, *Building Europe on Expertise: Innovators, Organizers, Networkers* (New York: Palgrave Macmillan, 2014); Davide Rodogno, Bernhard Struck, and Jakob Vogel, *Shaping the Transnational Sphere: Experts, Networks, and Issues from the 1840s to the 1930s* (New York: Berghahn Books, Incorporated, 2014), http://ebookcentral.proquest.com/lib/unigiessen/detail.action?docID=1644347.

117 For accounts on the marriage of psychiatry and politics in other countries, see David Freis, *Psycho-Politics between the World Wars: Psychiatry and Society in Germany, Austria, and Switzerland*, Mental Health in Historical Perspective (Cham: Palgrave Macmillan, 2019); Volker Roelcke, Paul Weindling, and Louise Westwood, *International Relations in Psychiatry: Britain, Germany, and the United States to World War II* (University Rochester Press, 2010); Mathew Thomson, "Mental Hygiene in Britain during the First Half of the Twentieth Century: The Limits of International Influence," in *International Relations in Psychiatry Britain, Germany, and the United States to World War II* (n.d.); Nikolas S. Rose, *The Psychological Complex: Psychology, Politics, and Society in England, 1869–1939* (London ; Boston: Routledge & Kegan Paul, 1985).

118 Quoted in Freis, *Psycho-Politics between the World Wars*, 17.

119 Lutz Raphael, "Die Verwissenschaftlichung des Sozialen als methodische und konzeptionelle Herausforderung für Eine Sozialgeschichte des 20. Jahrhunderts," *Geschichte und Gesellschaft* 22, no. 2 (1996): 165–93.

(LoN), the beginning of the twentieth century was a heyday of attempts of molding "the social" through scientific intervention, relying on the technology of "social engineering"[120] to intervene in social processes. International organizations, like the League of Nations (LoN) and later UNRRA, were part of that phenomenon. The intervention was geared towards shaping charges and/or citizens with the appropriate mindset to fulfill the administrative and political agendas of the organizations. In Raphael's words, the "scientization of the social" was shaped by a "continuing presence of experts from the human sciences, their arguments and their findings in administrations and corporations, in political parties and parliaments to the everyday worlds of meaning ('Sinnwelten') of social groups, classes or milieus."[121]

The "scientization of the social," to Raphael, was one signum of "modernity."[122] In line with Raphael's conceptualization, this study will revolve around four case studies of "experts" who as an expression of the "scientization" were enlisted by UNRRA and JDC on the basis of their expertise and who were granted "decision-making authority or expert judgment over others."[123] The "scientization of the social" was used to reach administrative and political ends with regards to the DPs, and can be seen as a tool of the nexus of psychosocial expertise and politics in this study.

The political dimension of the psychosocial work with DPs was expressed explicitly by the majority of the actors – psychiatrists, psychologists, and social workers – in my study: all but one case study subscribed to a set of ideas pertaining to the marriage of psychosocial expertise and politics called the International Mental Hygiene Movement (IMHM). Developed in the early twentieth century in the US by Clifford Beers,[124] the international strand of the mental hygiene movement held the belief at its core that there was a causal connection between an individual's

120 On social engineering see, Kerstin Brückweh et al., *Engineering Society: The Role of the Human and Social Sciences in Modern Societies, 1880–1980* (Basingstoke: Palgrave Macmillan, 2012); Mathew Thomson, "The Psychological Sciences and the 'Scientization' and 'Engineering' of Society in Twentieth-Century Britain," in *Engineering Society: The Role of the Human and Social Sciences in Modern Societies, 1880–1980* (Basingstoke: Palgrave Macmillan, 2012), 141–58.

121 Raphael, "Die Verwissenschaftlichung Des Sozialen Als Methodische Und Konzeptionelle Herausforderung Für Eine Sozialgeschichte Des 20. Jahrhunderts," 166. Translation in accordance with Freis, *Psycho-Politics between the World Wars*, 16.

122 Raphael, "Die Verwissenschaftlichung Des Sozialen Als Methodische Und Konzeptionelle Herausforderung Für Eine Sozialgeschichte Des 20. Jahrhunderts," 167.

123 Ibid. Translation my own.

124 Cf. José Bertolote, "The Roots of the Concept of Mental Health," *World Psychiatry* 7, no. 2 (June 2008): 113, https://doi.org/10.1002/j.2051–5545.2008.tb00172.x.

mental health,[125] the "health" of a nation, and, ultimately, international relations.[126] The mental hygiene movement revolved around the demand for the expertise of psychiatry to be transcending the clinic towards the population.[127] With the evolution of the international branch of the mental hygiene movement after WWI, psychiatry moved into closer proximity to the state, promoting mental health with the goal of enabling a peaceful international order based on sovereign democratic states.[128] Thus, the mental hygiene approach can be understood as the "public health" branch of psychiatry,[129] to employ a contemporary term for the sake of clarity.

The triangle of treat, train, prevent, as employed by Hans Pols, is helpful to understand the core tenants of the mental hygiene movement: to treat psychiatric patients, train (especially childcare) staff in psychiatric knowledge, and prevent mental illness within the population through information campaigns and education.[130] In that, mental hygiene also promoted defining the boundaries of normality in the early twentieth century, working towards making the individual "knowable, calculable and administrable," as Nikolas Rose put it aptly.[131] The notion of prevention, however, remained the guiding paradigm, which made the ideology of the international mental hygiene movement so prevalent in the work with

125 The terms "mental health" and "mental hygiene" are used synonymously in this study. It is, however, important to keep in mind that "mental health" was very sparingly used until 1946. The World Health Organization (WHO) defined the distinction as follows in 1950: "Mental hygiene refers to all the activities and techniques which encourage and maintain mental health. Mental health is a condition, subject to fluctuations due to biological and social factors, which enables the individual to achieve a satisfactory synthesis of his own potentially conflicting, instinctive drives; to form and maintain harmonious relations with others; and to participate in constructive changes in his social and physical environment." WHO Expert Committee on Mental Health and World Health Organization, "Expert Committee on Mental Health : Report on the Second Session, Geneva, 11–16 September 1950" (World Health Organization, 1951), https://apps.who.int/iris/handle/10665/37982. See Bertolote for the genesis of the terms: Bertolote, "The Roots of the Concept of Mental Health."

126 Mathew Thomson, "Mental Hygiene as an International Movement," in *International Relations in Psychiatry: Britain, Germany, and the United States to World War II* (University Rochester Press, 2010), 283–304.

127 Hans Pols, "'Beyond the Clinical Frontiers' The American Mental Hygiene Movement, 1910–1945," in *International Relations in Psychiatry: Britain, Germany, and the United States to World War II* (University Rochester Press, 2010), 111.

128 Freis, *Psycho-Politics between the World Wars*, 2.

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

130 Ibid.

131 Rose, *The Psychological Complex*, 65.

DPs: the goal of mental hygienists was to prevent mental illness; since mental illness was considered one of the causes for national "ill-health" (like societal discord and war), working on the individual's mental health, ultimately, was considered working towards peaceful international relations. In the context of the postwar period, this meant the prevention of future wars.

To better grasp the connection between psychiatry and politics for the specific context of DPs, and to frame the ways in which psychosocial expertise was mobilized to exercise power over the DPs, it is useful to refer to the work of Michel Foucault. Contextualizing the "history of madness and psychiatry" constituted one of the cornerstones of Foucault's thinking.[132] However, for this study, his concepts of governmentality and biopolitics lend themselves even more to closer inspection and application. Despite their inflationary use in recent years, these concepts help us conceptualize the ways in which UNRRA and JDC employed the techniques of the psy-sciences to achieve their administrative, regulatory, and ultimately political ends.

The concept of governmentality refers to the techniques that are employed for the sake of a stately goal. As James Vernon put it succinctly, albeit for a different context: "power is not exercised solely by the state over its population, but is mobilized as new forms of expertise address different objects of reform, intervening in ways that produce subjects with the appropriate mentality to govern themselves from a discrete distance."[133]

The organizations that will be discussed in this study relied on "expert" forms of psychosocial knowledge to influence the DP population to make sure they rehabilitated towards "the appropriate mentality" that was needed for the political projects (such as creating postwar order through repatriation or promoting an independent Jewish state) the organizations supported. In that, psychiatrists act here as agents of normalization and control – affirming the assumption of Foucault that psychiatry was used to assert stately control within the realm of governmentality.[134]

The very fact that UNRRA sought to "rehabilitate" the DPs not just materially but also psychologically points towards the biopolitical aspirations of the postwar reconstruction efforts. Biopolitics, as sociologist Thomas Lemke notes, "aims at the

132 Michel Foucault, *Histoire de La Folie à l'âge Classique* (Gallimard, 1972).

133 James Vernon, "R," *The American Historical Review* 110, no. 3 (June 2005): 696, https://doi.org/10.1086/ahr.110.3.693.

134 For an extension of the argument to look at political and other authorities that seek to "govern" a population, see Nikolas Rose and Peter Miller, "Political Power beyond the State: Problematics of Government: Political Power beyond the State," *The British Journal of Sociology* 61 (January 14, 2010): 271 – 303, https://doi.org/10.1111/j.1468 – 4446.2009.01247.x.

administration and regulation of life processes on the level of populations."[135] If biopolitics is understood as pertaining to the "management of life," intervening in the bodies and minds of one's charges, the very fact that psychosocial expertise was employed to intervene in the "minds" of the DPs for the purposes of managing Europe's scattered population points to the biopolitical nature of the endeavor. [136]

Since governmentality and biopolitics refer to the techniques with which the state intervenes in the minds and bodies of its populus, one could argue that biopolitics refers to policy rather than politics.[137] Policy points towards the instruments and measures in which, and through which, a political goal is sought to being achieved.[138]

Postulating a nexus between psychosocial expertise and politics in the work with DPs bears the question as to what exactly is meant by "political" in this study, more precisely the "political function" of psychosocial expertise in the work with DPs. Since the 1970s, the static definition of "the political" as mainly the realm of the state and its representative actors has evolved into a more inclusive "dynamic and constructivist understanding of the political," as Ute Frevert put it.[139] In this reading, as Frevert laid out, the boundaries between the political and the apolitical as well as the boundaries between the public and the private are constantly negotiated and depend upon the specific constellations and research problems discussed.[140]

Thus, the definition of the political as it pertains to this thesis is designed to be broad and multilayered. The term "political" in this study relates to three levels: a) the realm of the state and (inter-) national politics, the political projects that framed the (psychological) rehabilitation approaches (like i. e. the restoration of the prewar European states or building a modern state of Israel) to be realized as well as the visions for international cooperation; b) that of the social level, as

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135 Thomas Lemke, *Biopolitics: An Advanced Introduction*, Biopolitics, Medicine, Technoscience, and Health in the 21st Century (New York: New York University Press, 2011), 4.

136 Ilcan and Aitken, "Postwar World Order, Displaced Persons, and Biopolitical Management," 626.

137 Cf. Freis, *Psycho-Politics between the World Wars*, 23.

138 "Policy" is defined as "a theoretical or technical instrument that is formulated to solve specific problems affecting, directly or indirectly, societies across different periods of times and geographical spaces." Mario Arturo Ruiz Estrada, "Policy Modeling: Definition, Classification and Evaluation," *Journal of Policy Modeling* 33, no. 4 (July 2011): 524, https://doi.org/10.1016/j.jpolmod.2011.02.003.

139 Ute Frevert, "Neue Politikgeschichte: Konzepte Und Herausforderungen," in *Neue Politikgeschichte: Perspektiven einer historischen Politikforschung*, ed. Heinz-Gerhard Haupt and Ute Frevert, Historische Politikforschung, Bd. 1 (Frankfurt am Main; New York: Campus, 2005), 26.

140 Ibid.; Freis, *Psycho-Politics between the World Wars*, 24.

it pertains to the frameworks and social units that were perceived as making up the larger container of the state, like families or collective living arrangements; c) the level of the individual/the private sphere, meaning the ways in which states needed their citizens to behave in order for a political project to function and what kinds of characteristics were considered to be needed to achieve said political projects. This kind of multilevel definition of the "political" not only lends itself to the processes of subjectification (like the application of psychiatric principles in the work with DPs) that stand at the heart of this study, but also allows for the consideration of the motivations and self-understandings of the actors in the case studies.[141]

In the following we will briefly meditate on that very environment – the camp – in which the marriage of psychosocial expertise and politics took place.

The Psychology of the Camp

One cannot think about psychological rehabilitation within a camp environment without considering the very nature of the "camp," its attributes and characteristic as a site in which power is exercised. What is more, the structure of the "camp" inspired researchers to generate a body of theoretical considerations that lends itself to meditating on the entanglement of power, control over populations, and incarceration in the twentieth century.

The two attributes of the camp that are central in thinking about psychological rehabilitation are its propensity to being a site in which power is exercised through those who administer the camps and the very fact that a refugee camp constitutes an "in-between" space, a liminal space both spatially and temporally.

The transitory spaces of the DP camps have often been described as "waiting rooms."[142] The inhabitants of the DP camps were "in-between" in more ways than one: the era of persecution, constant danger to one's life, and war had finally come to an end, and "the future," meaning life in the old or a new home, had not yet begun. What is more, for many DPs, where that future was going to take place was still more than nebulous. Thus, the concept of "liminality" as introduced by anthropologist Victor Turner lends itself to the DP experience.[143] The DPs were at "the threshold," the limen (Latin) to a new life, in both the spatial as well as

141 Cf. Freis, *Psycho-Politics between the World Wars*, 24.

142 It is no coincidence that one of the first seminal works on DP history is called "The courage to live in the waiting room." Angelika *Königseder and Juliane Wetzel, Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland.*

143 Victor Turner, *The Forest of Symbols: Aspects of Ndembu Ritual* (Cornell University Press, 1967).

the temporal meaning of the word.[144] The DP camp constituted a "no longer/not yet"[145] stage in a DP's life. This is the operative notion in thinking about the possibilities of psychological rehabilitation in a DP camp scenario: with no stable living arrangement and in many cases utter insecurity about the future, the potentiality of a profound psychological rehabilitation from the outset must be understood as highly limited.

When theorizing "the camp," Italian theorist Giorgio Agamben, who builds on Foucault, is routinely invoked:[146] Agamben fills a gap that Foucault left when he excluded the refugee camp from his biopolitical considerations. According to Agamben, the camp reduces the inmates to "bare life" – homo sacer – and legitimizes it on the grounds of the "state of exception." The structure of the camp, to Agamben, is a metaphor of modernity as "the pure, absolute, and impassable biopolitical space (insofar as it is founded solely on the state of exception),"[147] which makes the camp into the "biopolitical paradigm of the Modern."[148] While it is tempting to read especially UNRRA's administrative paradigm as the mere management of "bare life," I argue that Agamben's conceptualization of the camp is too reductionist regarding the intricacies of DP camp life. As will be shown over the course of this study, Jewish DPs in the US Zone of Germany especially, as well as other (national) groups, did develop at least a degree of agency when organizing in their (national) groups. Zionist groups, especially, appropriated the camps for their purposes, making them, in part, into "self-ruled territory," as Daniel Cohen aptly observed. [149] The notion that DP camps were the sites of biopolitical exercise of power, however, is a formative one for this study. Agamben's contribution here

144 Turner's notion of liminality is oftentimes taken out of context and is, like Foucault's biopolitics, somewhat marred by inflationary use in certain corners of the research landscape. It is vital to consider that "liminality" is embedded in Turner's larger ritual theory which he developed when living with the Ndembu in today's Northwestern Sambia (former Rhodesia). Here, the liminal phase is the middle phase of ritual, flanked by 1) the separation from the known (in the case of the DPs, the reason for the displacement); 2) the liminal phase, the "in-between," staying in the DP camp; 3) (re-) integration in a community (finding old or new home in the case of the DPs). Till Förster, "Victor Turners Ritualtheorie: Eine Ethnologische Lektüre," *Theologische Literaturzeitung* Jg. 128, H. 7/8, S. 704–716 (2003): 4) http://edoc.unibas.ch/dok/A2919693.

145 Ibid., 2.

146 See i. e. Holian, *Between National Socialism and Soviet Communism*, 24; Cohen, *In War's Wake*, 73.

147 Giorgio Agamben, *Homo Sacer: Sovereign Power and Bare Life*, Homo Sacer 1 (Stanford, Calif.: Stanford University Press, 1998), 72–73.

148 Ibid., 69.

149 Cohen, *In War's Wake*, 72.

is that he connected the notion of DP camps with biopolitical management, while Foucault neglected to do so with regards to any refugee camp environments.

Besides Victor Turner, another anthropologist provided a helpful theoretical structure to conceptualize and classify the DP camp environment and its potential implications for psychological rehabilitation: Lisa Malkki has worked extensively on questions of refugeehood, camps, and uprooting, and has produced some of the most helpful conceptualizations for this study.[150] Malkki locates the advent of modern day refugeehood in the post-WWII refugee camps, the DP camps.[151] People seeking refuge, Malkki rightfully points out, certainly were not an invention of modernity; humans have always done so. But specific "key techniques for managing mass displacements of people," like the refugee camp, became "standardized and then globalized" in the wake of WWII, according to Malkki.[152] Refugee camps, thus, became "a vital technology of power."[153] What is more, Malkki along with Benedict Anderson delivers the most apt meta definition of the DP status that serves as the ideal springboard for the investigation of this study: they consider refugees, such as the DPs, as "people who have fallen through the hegemonic, 'totalizing classificatory grid'[154] of the national order and into liminal political spaces."[155] It is precisely this characteristic of the DP space that runs through the investigation in this study: DPs were considered as outside the "meaning-and-order-making" framework of the nation and citizenship and were treated as such: problematic subjects whose "externality" needed to be remedied by speedy repatriation to reinstate order in postwar Europe.

Siding with Malkki in locating the advent of modern refugeehood in the post-WWII DP camps bestows this research endeavor with even more relevance: it is high time to investigate the ways in which the administrators of the DP camps ex-

150 Liisa Malkki, "Citizens of Humanity: Internationalism and the Imagined Community of Nations," *Diaspora: A Journal of Transnational Studies* 3, no. 1 (1994): 41–68, https://doi.org/10.1353/dsp.1994.0013; Liisa Malkki, "National Geographic: The Rooting of Peoples and the Territorialization of National Identity among Scholars and Refugees" (n.d.); Liisa Malkki, "Children, Humanity, and the Infantilization of Peace," in *In the Name of Humanity: The Government of Threat and Care* (Duke University Press, 2010), 58–86; Liisa H. Malkki, *The Need to Help: The Domestic Arts of International Humanitarianism* (Durham: Duke University Press, 2015); Liisa H. Malkki, "Refugees and Exile: From 'Refugee Studies' to the National Order of Things," *Annual Review of Anthropology* 24, no. 1 (October 1995): 495–523, https://doi.org/10.1146/annurev.an.24.100195.002431.

151 Malkki, "Refugees and Exile," 497–500.

152 Ibid., 497.

153 Ibid., 498.

154 Benedict R. O'G Anderson, *Imagined Communities: Reflections on the Origin and Spread of Nationalism*, Revised and extended edition (London; New York: Verso, 1991), 184.

155 Malkki, "Citizens of Humanity," 44.

ercised power through employing psychosocial expertise in this watershed constellation in the history of modern-day refugees.

Terms

Several terms are operative in the trajectory of this study and are therefore in need of clarification and definition. We begin with the title. The term "psychosocial personnel" has been chosen to signal the transdisciplinary assemblage of professionals from psychiatry,[156] psychology,[157] sociology, and social work[158] (the "psy-disciplines"[159]) that were concerned with the explicit surveying and amelioration of the DPs' psychic constitution. The term "psychosocial" is a meta term that has been borrowed from present-day social pedagogy, and not a term derived from historical sources.[160] It is a helpful blanket term that subsumes any efforts in the DP camps that aimed explicitly at improving the psychological condition of Displaced Persons. The term "rehabilitation," however, is a historical source term[161] and relates to the goal of providing the DPs with the material and psychological tools to

156 For a history of psychiatry (a discipline within the larger field of medicine), see i. e. *Ben Shephard, A War of Nerves: Soldiers and Psychiatrists in the Twentieth Century (London: Jonathan Cape, 2000); Paul Frederick Lerner, Hysterical Men: War, Psychiatry, and the Politics of Trauma in Germany, 1890–1930, Cornell Studies in the History of Psychiatry (Ithaca: Cornell University Press, 2003); Roelcke, Weindling, and Westwood, International Relations in Psychiatry.*

157 For an overview for the younger discipline of psychology, see Nikolas Rose, "Inventing Our Selves," January 1, 1996, https://doi.org/10.1017/CBO9780511752179; Nikolas S. Rose, *Governing the Soul: The Shaping of the Private Self*, 2. ed. [reprint] (London: Free Association Books, 2005); Sarah Marks, "Psychotherapy in Historical Perspective," *History of the Human Sciences* 30, no. 2 (April 2017): 3–16, https://doi.org/10.1177/0952695117703243.

158 For a history of social work, see Sabine Hering and Berteke Waaldijk, eds., *History of Social Work in Europe (1900–1960): Female Pioneers and Their Influence on the Development of International Social Organizations* (Bundeskongress Soziale Arbeit, Opladen: Leske + Budrich, 2003). Stein, "Jewish Social Work in the United States, 1654–1954"; Christian Höschler, "'Diejenigen, Die Die Arbeit Wirklich Machen…' Unbegleitete Kinder, Sozialarbeiter Und Die Schwierige Umsetzung Humanitärer Ziele Im Nachkriegsdeutschland, 'Those People Who Actually Do the Job…' Unaccompanied Children, Relief Workers, and the Struggle of Implementing Humanitarian Policy in Postwar Germany," *Historical Social Research / Historische Sozialforschung* 45, no. 4 (2020): 1, https://doi.org/10.12759/HSR.45.2020.4.226–243.

159 For more on the blanket term of "psy-discipines" see Freis, *Psycho-Politics between the World Wars*, 16; Rose, "Inventing Our Selves."

160 Peter Busch, "Ökologische Lernpotenziale in Beratung und Therapie," VS research (Wiesbaden, VS, Verl. für Sozialwiss, 2011), 33–34.

161 See i. e. Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 1.

be able to live their lives independently – to help them, help themselves. It is important to note that only strategies and mechanisms that served explicitly for the surveying and amelioration of the psychological constitution of the DPs are considered in this study, knowing that that realm of "healing" and rehabilitation is decidedly more complex and subtle than just the explicit processes that were employed. The very fact of safe accommodation, food security, and material assistance oftentimes had a beneficial psychic effect, but this is not part of this investigation.

It is important to acknowledge what this book is not: this is not a study on the history of "trauma."[162] In recent years, the Holocaust has become something of a blueprint for trauma, and its problematization in the context of "traumatic events."[163] In fact, it has become the "unavoidable reference point for any experience of pain," as Fassin and Rechtman aptly put it in their seminal study on the "Empire of Trauma."[164] While the DP experience certainly constitutes as a traumatic event this, too, like the term "Holocaust" is a retrospective usage of a term that was not colloquial for psychosocial personnel at the time. It was used very sparingly, as will be pointed out over the course of the study, but not as regularly as it is today, and certainly was not the paradigm it has come to be. Thus, even though the term "wound," which is prominently placed in the title of this study, means "trauma" in Greek, this study does not employ the perspective of trauma studies. Nicholas Stargardt put it aptly when he reflected on the ubiquitous use of the term "trauma": "Like its cultural neighbor, victimhood, trauma is often treated as a psychological and moral absolute. They [the historians who employ the term inflationary] foreclose the past, telling us what we will find before we have looked."[165] To bypass this sort of foreclosure, this study rather focuses on the contemporary conceptualization of the DPs' mental constitutions.

162 For seminal works on the history of trauma after Auschwitz, see Michael S. Roth, *The Ironist's Cage: Memory, Trauma, and the Construction of History* (New York: Columbia University Press, 1995); Dominick LaCapra, *History and Memory after Auschwitz* (Ithaca, NY: Cornell University Press, 1998); Dori Laub and Andreas Hamburger, eds., *Psychoanalysis and Holocaust Testimony: Unwanted Memories of Social Trauma*, Relational Perspectives Book Series, v. 79 (London; New York: Routledge/Taylor & Francis Group, 2017).

163 *Michael Rothberg, "Decolonizing Trauma Studies: A Response," Studies in the Novel 40, no. 1/2 (2008): 224–34; Ruth Leys, From Guilt to Shame: Auschwitz and After, 20–21 (Princeton: Princeton University Press, 2007); Leys, Trauma.*

164 Fassin and Rechtman, *The Empire of Trauma*, 17–18.

165 Stargardt, *Witnesses of War*, 9–10.

Historiographical Literature Review

This study is the first that is dedicated specifically to investigating the psychosocial rehabilitation of DPs in the immediate postwar years, and to carving out the pioneering attempts of psychological rehabilitation of refugees in a camp environment. However, it builds on existing research from multiple areas of history and other disciplines that served to inspire, direct, provide information as well as shape the conceptual framework of this study.

The existing body of literature concerned with the early years after WWII is manifold: it ranges from extensive political[166] histories to social and cultural histories.[167] In German-speaking research, the narrative of the defeat of the Nazis as "hour zero" has been dominant but equally contested.[168] Postwar history has evolved in anglophone research from conceptualizing the postwar years as incubators of the cold war[169] towards shedding a more nuanced and dynamic gaze at the time leading up to the Nazi's defeat, and towards the complex routes of "liberation" that took years of negotiations, consolidation, and restructuring of (social and political) processes.[170] Formative for this study has been the notion of "life after death" which Bessel and Schumann shaped in their eponymous anthology in the realm of cultural history.[171] Ben Shephard's several publications on the postwar years also take a look at postwar planning while the war was still waged, and were hence formative for this study.[172] The merits in Shephard's account lie in the fact that he levers the top-down administrative perspective with testimonies from both welfare workers and refugees.

Equally, the issue of displacement and the emergence of the post-WWII-refugee, too, has undergone a significant evolution. Early accounts on the massive population movement and its institutional responses that had developed as a result of the war were written by men who had served as soldiers themselves or were otherwise involved in the field. These works are shaped by a top-down approach, fo-

166 Tony Judt, *Postwar: A History of Europe since 1945* (New York, NY: Penguin Books, 2006).
167 *Bessel et al., Life after Death.*
168 Christoph Kleßmann, "1945 – welthistorische Zäsur und "Stunde Null,"" *Docupedia-Zeitgeschichte* (2010), https://doi.org/10.14765/ZZF.DOK.2.315.V1.
169 Judt, *Postwar*; István Deák, Jan Tomasz Gross, and Tony Judt, eds., *The Politics of Retribution in Europe: World War II and Its Aftermath* (Princeton, N.J: Princeton University Press, 2000).
170 William I. Hitchcock, *The Bitter Road to Freedom: A New History of the Liberation of Europe*, 1st Free Press hardcover edition (New York: Free Press, 2008).
171 Bessel/Schumann, *Life after Death.*
172 Ben Shephard, *The Long Road Home: The Aftermath of the Second World War*, (New York: Anchor Books, 2012); Shephard, "'Becoming Planning Minded.'"

cusing on institutions (mainly UNRRA[173]), its administrative processes and refugee policies.[174] While the authors' involvement in the endeavors raises questions of objectivity, they still serve as occasional institutional references.

Peter Gatrell's seminal 2013 work on the creation of the category of the refugee in historical perspective has been influential for the thinking in this study.[175] Gatrell dissects the construction of the notion of the refugee, aligning it both with international politics and individual and subjective stories of those displaced. In this amalgamation lies the merit of Gatrell's work.

Since Displaced Persons are the focal group of the psychosocial experts analyzed in this study, the body of DP history has been influential in establishing the background to this investigation. The realm of DP history has evolved substantially over the last decades, mirroring general research trends and the development (if belated) from political history towards social and cultural history. During the first postwar decades, DP history has been severely neglected by historiography, making DPs into an "absentee category,"[176] as Daniel Cohen remarked. The "discovery" of the DPs, especially in German-speaking research, can be dated around 1985 with Jacobmeyer's study.[177] Jacobmeyer's work, while still helpful, focuses on the political and administrative perspective and omits the DPs' perspective. Generally, in the early DP studies, DPs are presented as mere pawns on the chessboard of postwar powers.[178]

Over the last 30 years, DP history has experienced an uptick with favorable developments, starting with the study of Königseder and Wetzel[179] in 1994.[180] For one, researchers zoomed in on specific case studies of regions,[181] groups,

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173 George Woodbridge, *UNRRA: The History of the United Nations Relief and Rehabilitation Administration*, 1950.

174 Proudfoot, *European Refugees, 1939–52: A Study in Forced Population Movement; Kulischer, Europe on the Move.*

175 Gatrell, *The Making of the Modern Refugee*; Peter Gatrell and Nick Baron, *Warlands: Population Resettlement and State Reconstruction in the Soviet-East European Borderlands, 1945–50* (Basingstoke: Palgrave Macmillan, 2009), http://site.ebrary.com/id/10399982.

176 Daniel Cohen, "Remembering Post-War Displaced Persons: From Omission to Resurrection," *Enlarging European Memory: Migration movements in historical perspective*, 2006, 89.

177 Jacobmeyer, *Vom Zwangsarbeiter zum heimatlosen Ausländer.*

178 Kulischer, *Europe on the Move*; Proudfoot, *European Refugees, 1939–52: A Study in Forced Population Movement*; Woodbridge, George, *UNRRA: The History of the United Nations Relief and Rehabilitation Administration*, 1950; H.B.M. Murphy, *Flight and Resettlement* (Paris: UNESCO, 1955).

179 Angelika *Königseder and Juliane Wetzel, Lebensmut Im Wartesaal: Die Jüdischen DPs (Displaced Persons) Im Nachkriegsdeutschland.*

180 Wyman, *DPs.*

181 The work of Anna Andlauer on the UN Children's Center in Kloster Indersdorf has been especially informative for this study. While she delivers a host of valuable information, it is strictly

and specific DP camps.[182] On the other hand, studies have been produced that analyze the ways in which DPs exercised their own agency through self-administration in the camps,[183] political organizing, and a lively cultural life[184] that contributed to shaping their own survivor narratives.[185] In that regard, Jewish DPs have gathered the most interest in research. Over the last ten years specifically, Jewish DPs have been investigated through the lens of their self-organization within the camps and the proliferation of Zionism. Diner and Patt argue that the modern state of Israel was formed in the DP camps in the US zone; the dynamics contributing to this movement have been analyzed regarding the Jewish DPs' need for new "belonging" that was satisfied with the strife for "Eretz Israel."[186] Patt aptly called

speaking not scientific work and raises, at times, questions of objectivity. Anna Andlauer,*"Die Kinder von Indersdorf," in Freilegungen: displaced person; Leben im Transit: Überlebende zwischen Repatriierung, Rehabilitation und Neuanfang, ed. Rebecca L. Boehling, Jahrbuch des International Tracing Service 3 (Göttingen: Wallstein-Verl, 2014), 105–15;* Anna Andlauer, *Zurück ins Leben: Das internationale Kinderzentrum Kloster Indersdorf 1945–46 (Nürnberg: Antogo Verlag, 2011);* Anna Andlauer, *The Rage to Live: The International D.P. Children's Center Kloster Indersdorf 1945–46.*

182 Humbert, *Reinventing French Aid*; Maspero, "La question des personnes déplacées polonaises dans les zones françaises d'occupation en Allemagne et en Autriche"; Lavsky, *New Beginnings*; Antons, *Ukrainische displaced persons in der britischen Zone*; Jim G. Tobias and Nicola Schlichting, *Heimat Auf Zeit: Jüdische Kinder in Rosenheim 1946–47: Zur Geschichte Des "Transient Children's Center" in Rosenheim Und Der Jüdischen DP-Kinderlager in Aschau, Bayerisch Gmain, Indersdorf, Prien Und Pürten* (Nürnberg: Antogo, 2006); Christian Höschler, *"The IRO Children's Village Bad Aibling";* Anna Andlauer, *"Andlauer, Die Kinder von Indersdorf";* Sybille Steinbacher, ed., *Transit US-Zone: Überlebende des Holocaust im Bayern der Nachkriegszeit*, Dachauer Symposien zur Zeitgeschichte 13 (Göttingen: Wallstein-Verl, 2013); Marcus Velke, *"Recreation, Nationalisation, and Integration: Sport in Camps for Estonian and Jewish DPs in Post-War Germany,"* in *Veröffentlichungen des Instituts für Europäische Geschichte Mainz Beihefte*, ed. Gregor Feindt, Anke Hilbrenner, and Dittmar Dahlmann, 1st ed., vol. 119 (Göttingen: Vandenhoeck & Ruprecht, 2018), 223–44, https://doi.org/10.13109/9783666310522.223.

183 *Mankowitz, Life between Memory and Hope.*

184 Tamar Lewinsky, *"Vom Wiederaufbau Jüdischer Kultur in Der Amerikanischen Besatzungszone Deutschlands,"* in *Unser Mut – Juden in Europa 1945–48*, ed. Kata Bohus et al. (De Gruyter, 2020), 200–217, https://doi.org/10.1515/9783110653175–016.

185 Frank Beer and Markus Roth, eds., *Von der letzten Zerstörung: die Zeitschrift "Fun letstn churbn" der Jüdischen Historischen Kommission in München 1946–1948*, trans. Susan Hiep, Sophie Lichtenstein, and Daniel Wartenberg (Berlin: Metropol, 2021).

186 Patt, *Finding Home and Homeland*; Diner, *"Elemente der Subjektwerdung: Jüdische DPs in historischem Kontext";* Jacqueline Giere and Fritz Bauer Institut, eds., *Überlebt und unterwegs: jüdische Displaced Persons im Nachkriegsdeutschland*, Jahrbuch zur Geschichte und Wirkung des Holocaust 1997 (Frankfurt/Main: Campus-Verl, 1997); Mankowitz, *Life between Memory and Hope*; Ouzan, *"Rebuilding Jewish Identities in Displaced Persons Camps in Germany."*

this "functional Zionism,"[187] and Atina Grossmann even calls it "therapeutic Zionism."[188]

Over the last 15 years, DP history has moved away from seeing DPs as isolated from other populations; newer works look at entanglements between DPs, the population of the countries in which the DP camps were situated, the varying organizations caring for them, and the self-agency they developed in that context.[189]

Besides the surge of DP histories having been written in the last twenty years, there are still lacunae to fill:[190] comparative studies of different DP groups in different camps are yet to be written, and the emergence of the "refugee expert" and/or the implementation of expert knowledge in the work with DPs are still underresearched. The latter is this study's contribution.

In recent years, Displaced Children in particular have garnered interest in research.[191] While my study does not focus specifically on the history of childhood, two of the four case studies are concerned with DP children, thus the body of research concerning displaced children has been informative. Several studies concerned with children in the context of international organizations, the emerging interest in the category of the child in general in the interwar years, the issue of children and war, and more theoretical considerations, as well as overviews,

187 Patt, *Finding Home and Homeland,* 259–68.

188 Grossmann, *Jews, Germans, and Allies*, 178–82.

189 Grossmann, *Jews, Germans, and Allies;* Daniella Doron, *Jewish Youth and Identity in Postwar France: Rebuilding Family and Nation, The Modern Jewish Experience (Bloomington and Indianapolis: Indiana University Press, 2015);* Tara Zahra, *"Lost Children: Displacement, Family, and Nation in Postwar Europe," The Journal of Modern History 81, no. 1 (March 2009): 45–86, https://doi.org/10.1086/593155;* Margarete Myers Feinstein, *Holocaust Survivors in Postwar Germany,1945–1957, First paperback edition (New York, NY: Cambridge University Press, 2014);* Holian, *Between National Socialism and Soviet Communism; Cohen, In War's Wake;* Beth Cohen, *Case Closed: Holocaust Survivors in Postwar America (2006), https://www.degruyter.com/isbn/9780813541303;* Mankowitz, *Life between Memory and Hope.*

190 Stella Maria Frei, *"Displaced Persons im Nachkriegseuropa (1945–1950): Zwischen Zwangsmigration, Flucht und der Suche nach einer neuen Heimat,"* H-Soz-Kult. Kommunikation und Fachinformation für die Geschichtswissenschaften (H-Soz-Kult, October 2018), http://www.hsozkult.de/conferencereport/id/tagungsberichte-7963.

191 Dwórk, *Children with a Star*; Stargardt, *Witnesses of War*; Tobias and Schlichting, *Heimat Auf Zeit*; Buser, *"'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II";* Boaz Cohen, "The Children's Voice: Postwar Collection of Testimonies from Child Survivors of the Holocaust," *Holocaust and Genocide Studies* 21, no. 1 (March 1, 2007): 73–95, https://doi.org/10.1093/hgs/dcm004; Antoine Burgard, "Contested Childhood: Assessing the Age of Young Refugees in the Aftermath of the Second World War," *History Workshop Journal* 92 (December 10, 2021): 174–93, https://doi.org/10.1093/hwj/dbab016.

have been insightful.[192] What is more, growing literature that traces the anxieties of child psychologists, social workers, and psychiatrists after the two world wars have been educational.[193] They provided a beneficial overview over emerging practices in childcare as well as child welfare, especially in the context of international organizations and in comparative perspective.[194] Investigations into the treatment of children in international organizations regarding the improvement of social policies, better management of "human resources" in the vein of social engineering, as well as the biopolitics of child rearing have been especially formative for this study.[195]

The work of American historian Tara Zahra on postwar "Lost Children" has arguably attracted the most attention in research and media and served as initial inspiration that led me on this research path.[196] Zahra achieved a sweeping and compellingly written overview of the landscape of the child in the immediate postwar years, weaving in individual case stories to show how children were used as pawns on the chessboard of the war's victors. While this deserves merit, Zahra's study also displays shortcomings, which my study seeks to compensate for: Zahra touches on a multitude of psychological rehabilitation attempts done with children but neglects to do a profound analysis of the sources available. Instead,

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192 Hugh Cunningham, *Children and Childhood in Western Society since 1500*, Third Edition (Pearson Education Limited, 2020); Marshall, "The Construction of Children as an Object of International Relations: The Declaration of Children's Rights and the Child Welfare Committee of League of Nations, 1900–1924," *The International Journal of Children's Rights* 7, no. 2 (February 1, 1999): 103 – 48, https://doi.org/10.1163/15718189920494309; Dominique Marshall, "International Child Saving," in *The Routledge History of Childhood in the Western World*, The Routledge Histories (London New York, 2015), 469 – 91; Joëlle Droux, "A League of Its Own? The League of Nations' Child Welfare Committee (1919 – 1936) and International Monitoring of Child Welfare Policies," March 31, 2016, 89 – 103, https://doi.org/10.18356/4b9f2d0b-en; Marten, James, "Children and War."

193 Zahra, *"Lost Children";* Cohen, *Case Closed*; Burgard, "Contested Childhood"; Rebecca Clifford, *Survivors: Children's Lives after the Holocaust* (New Haven: Yale University Press, 2020); Laura Hobson Faure, "Shaping Children's Lives: American Jewish Aid in Post-World War II France (1944 – 1948)," in *The Jews of Modern France: Images and Identities*, ed. Zvi Jonathan Kaplan, Brill's Series in Jewish Studies, volume 56 (Leiden; Boston: Brill, 2016), 173 – 94.

194 Sara Fieldston, *Raising the World: Child Welfare in the American Century* (Cambridge, Massachusetts: Harvard University Press, 2015).

195 Matthew Hilton et al., "History and Humanitarianism: A Conversation," *Past & Present* 241, no. 1 (November 1, 2018): e1 – 38, https://doi.org/10.1093/pastj/gty040; Emily Baughan and Juliano Fiori, "Save the Children, the Humanitarian Project, and the Politics of Solidarity: Reviving Dorothy Buxton's Vision," *Disasters* 39, no. s2 (October 2015): 129 – 45, https://doi.org/10.1111/disa.12151; Majia Holmer Nadesan, *Governing Childhood into the 21st Century: Biopolitical Technologies of Childhood Management and Education* (Basingstoke: Palgrave Macmillan, 2010).

196 Zahra, *The Lost Children Reconstructing Europe's Families After World War II.*

she boils down the diverging psychological rehabilitation attempts to clashing ideologies: East versus West, familialism versus collectivism, Freud versus Adler.[197] This dichotomic view erases the multitude of nuances that were present, and relieves, among other things, the question of belonging of a child from its legal context, as I will discuss in my study. Lynne Taylor, on the other hand, has provided two valuable histories with a smaller focus and hence more precise look: a microhistorical study[198] of the routes one group of DPs, Polish DPs, took on their road to a new home, and a compelling study of questions of legal identity and citizenship of DP children.[199]

This study centers around the two major humanitarian organizations active with postwar DPs, UNRRA and JDC. As appropriate, the vast humanitarian body of literature has delivered important context for this study. The intricacies of humanitarian history[200] cannot be covered here and have not been at the forefront of this study; as German historian Johannes Paulmann put it, "a whole semantic field comes to mind."[201] Several studies relating to the postwar moment, and specifically UNRRA and JDC, have been insightful, especially in challenging narratives surrounding UNRRA as a "watershed moment" in humanitarian history[202] when really it was more of a continuation of interwar practices, as Paulmann and Silvia Salvatici have argued.[203] The body of literature relating to humanitarianism, gender

197 Ibid., 88–118.

198 Lynne Taylor, *Polish Orphans of Tengeru: The Dramatic Story of Their Long Journey to Canada, 1941–49* (Toronto: Dundurn Press, 2009).

199 Lynne Taylor, *In the Children's Best Interests: Unaccompanied Children in American-Occupied Germany, 1945–1952*, German and European Studies 27 (Toronto: University of Toronto Press, 2017).

200 For overviews with varying foci, see Michael Barnett, *Empire of Humanity: A History of Humanitarianism* (Cornell University Press, 2011), https://www.jstor.org/stable/10.7591/j.ctt7z8ns; Hilton et al., "History and Humanitarianism"; Rodogno, Struck, and Vogel, *Shaping the Transnational Sphere*; Mark Mazower, "The Strange Triumph of Human Rights, 1933–1950," *The Historical Journal* 47, no. 2 (June 2004): 379–98, https://doi.org/10.1017/S0018246X04003723; Ioannis Kampourakis, "Samuel Moyn, Not Enough: Human Rights in an Unequal World," *The Modern Law Review* 83, no. 1 (2020): 229–33, https://doi.org/10.1111/1468–2230.12451.

201 Johannes Paulmann, "Conjunctures in the History of International Humanitarian Aid during the Twentieth Century," *Humanity: An International Journal of Human Rights, Humanitarianism, and Development* 4, no. 2 (2013): 215, https://doi.org/10.1353/hum.2013.0016.

202 i. e. Tara Zahra, "'The Psychological Marshall Plan': Displacement, Gender, and Human Rights after World War II," *Central European History* 44, no. 1 (March 2011): 40, https://doi.org/10.1017/S0008938910001172; Mazower, "The Strange Triumph of Human Rights, 1933–1950," 386–88.

203 Paulmann, "Conjunctures in the History of International Humanitarian Aid during the Twentieth Century," 218; S. Salvatici, "'Help the People to Help Themselves': UNRRA Relief Workers and

and childhood has been especially insightful.[204] Again, the histories of UNRRA[205] and JDC have evolved from institutional histories written by witnesses to more nuanced and critical research: Jessica Reinisch and Silvia Salvatici situate the UNRRA endeavor within internationalism and investigate their rehabilitation practices, while Shephard provided valuable background to postwar planning.[206]

The history of JDC has, for a long time, been severely under-researched.[207] In recent years, research has flourished, both from an institutional perspective[208] as well as relating to JDC's practices in childcare and its attempts at shaping social practices[209] that contributed to a sort of "cultural imperialism," as Maud Mandel put it.[210]

European Displaced Persons," *Journal of Refugee Studies* 25, no. 3 (September 1, 2012): 428–51, https://doi.org/10.1093/jrs/fes019.

204 Dolores Martín-Moruno, Brenda Lynn Edgar, and Marie Leyder, "Feminist Perspectives on the History of Humanitarian Relief (1870–1945)," *Medicine, Conflict and Survival* 36, no. 1 (January 2, 2020): 2–18, https://doi.org/10.1080/13623699.2020.1717720; Möller Esther, Johannes Paulmann, and Katharina Stornig, "Gendering Twentieth-Century Humanitarianism: An Introduction," in *Gendering Global Humanitarianism in the Twentieth Century Practice, Politics and the Power of Representation.* (Palgrave Macmillan Transnational History Series, 2020), 1–32.

205 Marvin Klemme, *The Inside Story of UNRRA: An Experience in Internationalism* (New York: Lifetime Editions, Inc, 1949), https://digital-library.arolsen-archives.org/content/titleinfo/7274173; George Woodbridge, *UNRRA: The History of the United Nations Relief and Rehabilitation Administration* (1950).

206 Jessica Reinisch, "Introduction: Agents of Internationalism," *Contemporary European History* 25, no.02 (May 2016): 195–205, https://doi.org/10.1017/S0960777316000035; Reinisch, "Internationalism in Relief"; Reinisch, "We Shall Rebuild Anew a Powerful Nation"; Salvatici, "Help the People to Help Themselves"; Silvia Salvatici, "'Fighters without Guns': Humanitarianism and Military Action in the Aftermath of the Second World War," *European Review of History: Revue Européenne d'histoire* (October 4, 2017): 1–20, https://doi.org/10.1080/13507486.2017.1374354; Salvatici and Sanders, *A History of Humanitarianism, 1755–1989*; Shephard, "'Becoming Planning Minded.'"

207 The exception being Yehuda Bauer, *American Jewry and the Holocaust: The American Jewish Joint Distribution Committee, 1939–1945* (Detroit (Mich.): Wayne State University Press, 2017); Yehuda Bauer, *My Brother's Keeper; a History of the American Jewish Joint Distribution Committee, 1929–1939*, 1st ed. (Philadelphia: Jewish Publication Society of America, 1974); Yehuda Bauer, *Out of the Ashes: The Impact of American Jews on Post-Holocaust European Jewry*, 1st ed (Oxford; New York: Pergamon Press, 1989); Stein, "Jewish Social Work in the United States, 1654–1954."

208 Avinoam J. Patt et al., eds., *The JDC at 100: A Century of Humanitarianism* (Detroit: Wayne State University Press, 2019).

209 Laura Hobson Faure, *A "Jewish Marshall Plan": The American Jewish Presence in Post-Holocaust France*, The Modern Jewish Experience (Bloomington: Indiana University Press, 2022); Hobson Faure, "Shaping Children's Lives: American Jewish Aid in Post-World War II France (1944–1948)"; Veerle Vanden Daelen and Laura Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust," in *The JDC at 100: A Century of Humanitarianism*, ed. Avinoam J. Patt and Atina Grossmann (Detroit: Wayne State University Press,

Besides the bodies of literature on humanitarianism and DPs, research on the history of the psy-sciences, the nexus of psychiatry and politics, and theoretical considerations on the interrelation of psychology and power have been formative for this study.

Literature that concerns itself with the entanglement of politics and psychiatry usually dates its emergence on the world stage around the inception of the World Health Organization (WHO) in 1948.[211] Harry Wu for instance considers the WHO as the first transnational body that helped psychiatry transcend the clinic in order to be used for international purposes. [212] Fassin and Rechtman as well as Becker – all three influential scholars on humanitarian psychiatry and trauma – locate the advent of humanitarian psychiatry in post-catastrophe settings as late as the 1980s, postulating that there were no real attempts of such previously. [213] My study challenges this view, showing that, for the humanitarian context, this started with UNRRA and JDC and their psychosocial strategies. What is more, the advent of the discourse surrounding mental health specifically of Holocaust survivors usually is dated around the 1960s.[214] This is incorrect: even before war's end and in the years after psychosocial experts did studies on the mental health of Holocaust survivors. My work investigates the beginnings of this discourse for the humanitarian context, which from that perspective can be considered "avant-la-lettre."

For decades, the issue of humanitarian psychiatry – in which my study is situated – has lacked a comprehensive study. Recently, Baher Ibrahim has published

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2019), 279–313; Doron, *Jewish Youth and Identity in Postwar France*; Rakefet Zalashik and Nadav Davidovitch, "Measuring Adaptability: Psychological Examinations of Jewish Detainees in Cyprus Internment Camps," *Science in Context* 19, no. 3 (September 2006): 419–41, https://doi.org/10.1017/S0269889706001001; Sharon Kangisser Cohen, "'Report on a Survey of the Psychological Conditions of the Surviving Children in Europe,' Dr. Paul Friedman," *Yad Vashem Studies* 47, no. 2 (2019); D. Ofer, "Holocaust Survivors as Immigrants: The Case of Israel and the Cyprus Detainees," *Modern Judaism* 16, no. 1 (January 1, 1996): 1–24, https://doi.org/10.1093/mj/16.1.1; Hadjisavvas, "From Dachau to Cyprus."

210 Maud S. Mandel, "Philanthropy or Cultural Imperialism? The Impact of American Jewish Aid in Post-Holocaust France," *Jewish Social Studies* 9, no. 1 (2002): 53–94, https://doi.org/10.1353/jss.2003.0007.

211 Wu, "World Citizenship and the Emergence of the Social Psychiatry Project of the World Health Organization, 1948–c.1965."

212 Ibid., 166.

213 Fassin and Rechtman, *The Empire of Trauma*, 17–18; Becker, "Dealing with the Consequences of Organised Violence in Trauma Work," 1.

214 Henry Krystal, *Massive Psychic Trauma*; William Niederland, "The Problem of the Survivor: Part I, Some Remarks on the Psychiatric Evaluation of Emotional Disorders in Survivors of Nazi Persecution"; Mark Dvorjetski, "Adjustment of Detainees to Camp and Ghetto Life and Their Sub- Sequent Readjustment to Normal Society."

his pioneering work on what he calls "refugee psychiatry." Ibrahim, a psychiatrist and historian himself, has traced the origins of refugee psychiatry back to the DP camps but takes a longer view until the 1980s and the emergence of Post-Traumatic-Stress-Disorder (PTSD).[215]

The history of the psy-sciences has propelled compelling research in both history and anthropology. For a long time, the history of psychiatry has been looked at mostly through the lens of military psychiatry, thus male trauma.[216] This increasingly changed with the emergence and decline of psychoanalysis in the discipline of psychiatry. Some of the most formative studies for my research are situated in the history of psychoanalysis,[217] especially with regards to its interrelation with citizenship, child rearing, democratization,[218] postwar retribution, and the ascent of PTSD.[219] Israeli-American historian Michal Shapira's and German-American historian Dagmar Herzog's work was especially helpful with regards to the history of psychoanalysis not just as a therapeutic modality ("talk therapy") but also as a "cultural toolbox"[220] with which psychoanalysts made sense of the world around them and tried to help shape democratic subjects. Shapira's approach has guided my thinking: seeing the psychosocial personnel (in Shapira's work, psychoanalysts) as "the object rather than the subject" of this study, seeing psychiatry, psychoanalysis, and social work[221] not as theories or frameworks I apply but rather "intellectual constellations" I examine.[222]

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215 Ibrahim, "Uprooting, Trauma, and Confinement: Psychiatry in Refugee Camps, 1945–1993."

216 Lerner, *Hysterical Men*; Ted Bogacz, "War Neurosis and Cultural Change in England, 1914–22: The Work of the War Office Committee of Enquiry into 'Shell-Shock,'" *Journal of Contemporary History* 24, no. 2 (1989): 227–56; Shephard, "A War of Nerves."

217 Nathan G. Hale, *The Rise and Crisis of Psychoanalysis in the United States: Freud and the Americans, 1917–1985*, Freud in America, v. 2 (New York: Oxford University Press, 1995); Stephen Frosh, *The Politics of Psychoanalysis: An Introduction to Freudian and Post-Freudian Theory*, 2. ed (Basingstoke: Macmillan, 1999); Peter Gay, *Freud für Historiker*, trans. Monika Noll, Forum Psychohistorie 2 (Tübingen: edition diskord, 1994); John Forrester and Laura Cameron, *Freud in Cambridge* (Cambridge: Cambridge University Press, 2017); Pearl King, *No Ordinary Analyst: The Exceptional Contributions of John Rickman* (London; New York: Karnac, 2003).

218 Michal Shapira, *The War inside: Psychoanalysis, Total War, and the Making of the Democratic Self in Postwar Britain*, Studies in the Social and Cultural History of Modern Warfare (New York: Cambridge University Press, 2013).

219 Dagmar Herzog, *Cold War Freud: Psychoanalysis in an Age of Catastrophes* (Cambridge, United Kingdom: Cambridge University Press, 2017).

220 Dagmar Herzog, *Cold War Freud: Psychoanalysis in an Age of Catastrophes* (Cambridge, United Kingdom: Cambridge University Press, 2017), 2.

221 On the history of social work, see *Stein, "Jewish Social Work in the United States, 1654–1954"; John Ehrenreich, The Altruistic Imagination: A History of Social Work and Social Policy in the United*

In conceptualizing the implementation of psychosocial expertise in a refugee scenario, several anthropologists[223] and their work have been helpful, as they considered this complex earlier than historians.[224] Several works from the realm of history,[225] anthropology, psychology,[226] and sociology[227] have shaped my thinking with regards to the entanglement of psychology and power. Very early on Jan de Vos work provided a helpful conceptualization of what he calls the "therapeutic turn in humanitarian aid."[228] In history, the entanglement of psychiatry, psychology, and power has attracted little but still beneficial research that has been formative for this study. The explicit historical entanglement of psychiatry and politics, the international mental hygiene movement has been aptly deciphered by

States (Ithaca: Cornell University Press, 1985); Hering and Waaldijk, History of Social Work in Europe (1900–1960).

222 Shapira, *The War Inside*, 5.

223 Liisa Malkki, "National Geographic: The Rooting of Peoples and the Territorialization of National Identity among Scholars and Refugees"; Liiisa Malkki, "Children, Humanity, and the Infantilization of Peace"; Malkki, "Refugees and Exile"; Barbara E. Harrell-Bond, *Imposing Aid: Emergency Assistance to Refugees* (Oxford [Oxfordshire]; New York: Oxford University Press, 1986); B. Harrell-Bond, "Harrell-Bond, B. E. (1999) 'the Experience of Refugees as Recipients of Aid'. in Ager, a. (Ed.) Refugees: Perspectives on the Experience of Forced Migration. New York: Continuum, Pp. 136–168" (n.d.); Fassin and Rechtman, *The Empire of Trauma*; Didier Fassin, *Humanitarian Reason: A Moral History of the Present* (University of California Press, 2012).

224 Recently, the aforementioned Peter Gatrell has become interested in refugee mental health. He graciously shared an early draft of a paper with me. Peter Gatrell, "Population Displacement and Mental Health after the Second World War [Short Unpublished Version)" (n.d.).

225 Marks, "Psychotherapy in Historical Perspective"; Sarah Marks, "Psychotherapy in Europe," *History of the Human Sciences* 31, no. 4 (October 2018): 3–12, https://doi.org/10.1177/0952695118808411; Claudia Moisel, "William G. Niederland (1904–1993) Und Die Ursprünge Des 'Überlebenden-Syndroms,'" 34 (March 20, 2018).

226 Erica Burman, *Deconstructing Developmental Psychology*, Second ed. (London; New York: Routledge, 2008).

227 Vanessa Pupavac, *"Psychosocial Interventions and the Demoralization of Humanitarianism," Journal of Biosocial Science 36, no. 4 (July 2004): 491–504, https://doi.org/10.1017/s0021932004006613; United Nations High Commissioner for Refugees, "Therapeutising Refugees, Pathologising Populations: International Psycho-Social Programmes in Kosovo, Vanessa Pupavac," UNHCR, accessed May 11, 2022, https://www.unhcr.org/research/working/3d57a9864/therapeutising-refugees-pathologising-populations-international-psycho.html; Rose, "Inventing Our Selves"; Rose, Governing the Soul; Rose, The Psychological Complex.*

228 De Vos, too, locates the advent of humanitarian psychiatry in the 1980s, which this study opposes. Jan De Vos, "The Psychologization of Humanitarian Aid: Skimming the Battlefield and the Disaster Zone," *History of the Human Sciences* 24, no. 3 (July 2011): 103–22, https://doi.org/10.1177/0952695111398572.

Pols, Thomson, and Freis.[229] These studies have been important guideposts in thinking about how mental hygiene evolved into being understood as being an important factor in molding citizens and in scientizing societies in the early twentieth century.

Who was able to feel with the DPs? Equipped with the necessary background knowledge, we can now turn to the question of how the psychosocial staff positioned itself between Michal Kraus' question and the larger perspectives of their work.

229 *Pols, "'Beyond the Clinical Frontiers' The American Mental Hygiene Movement, 1910–1945";* Mathew Thomson, *Psychological Subjects: Identity, Culture, and Health in Twentieth-Century Britain (Oxford; New York: Oxford University Press, 2006);* Thomson, *"Mental Hygiene in Britain during the First Half of the Twentieth Century: The Limits of International Influence";* Thomson, *"Mental Hygiene as an International Movement";* Freis, *Psycho-Politics between the World Wars.*

UNRRA – The Road Back to “Normality”?

In the summer of 1944, a year before World War II ended, a group of experienced psychiatrists and social workers compiled a guideline in which they laid out their understanding of the psychological constitution of Displaced Persons.[1] In it, the Inter Allied Psychological Study Group (IAPSG) sought to educate UNRRA welfare workers on what they could expect once they encountered the first DPs in the camps.

In the preamble of the *Report on Psychological Problems of Displaced Persons,* the group stated not only the reason for the composition of the report but also the trajectory postwar humanitarian aid should take in their opinion: "The United Nations Administration is concerned not only with relief – that is with making provision for material needs – but also with rehabilitation – that is with the amelioration of psychological and social suffering and dislocation. For man does not live by bread alone."[2]

The IAPSG used a biblical reference to underscore the importance of their cause: the proverbial provision of "bread alone"[3] was not going to tend sufficiently to the devastation World War II had wrought; according to the IAPSG, a sustainable relief effort conducted by the new transnational humanitarian organization, UNRRA, had to incorporate the mental implications of years of war and persecution. The IAPSG was commissioned by UNRRA's welfare director[4] to draw up its psychosocial strategy, and thus will be "read" in this study as the actors that delivered the theoretical psychosocial strategy upon which those on the ground were supposed to act. From this it is concluded as a basic assumption that despite its administrative mandate, UNRRA aspired to incorporate the psychological dimensions of displacement into its planning. This is the premise of the first part of this study, which is going to analyze UNRRA's psychosocial strategy along two case studies, which are situated within a time frame of two years, from 1944 to 1946. The first case study takes us into the planning phase of UNRRA while the war was still being waged: in 1944, the Inter Allied Psychological Study Group drew up their *Report on Psychological Problems of DPs* in which they anticipated the DPs psychic constitution and provided advice for UNRRA welfare workers on how to deal with the DPs. Dissecting this first case study will establish how the psychological toll of years of war and persecution, and thus the psychological healing

1 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons" (European Regional Office London: United Nations Relief and Rehabilitation Administration, June 1945), 41, HA5–4/3, Wiener Library.

2 Ibid., 1.

3 5 Moses 8,3.

4 UNRRA, "Notes on Interallied Psychological Study Group," n.d., 1, S-1449-0000-0100, United Nations Archives.

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aspect of rehabilitation, was conceptualized by the IAPSG and how it was subsequently factored into UNRRA's planning prior to the war's end.

The second case study of UNRRA's psychosocial work is the first UN Children's Center Kloster Indersdorf. It was set up in the summer of 1945 and operated for a year.[5] The exploration of the psychosocial strategies as implemented on the ground will serve as a litmus test to contrast the theoretically drawn up strategies by the IAPSG prior to war's end with actual experience on the ground. It will illustrate the ways in which practical experience in the everyday work with refugees worked to mitigate and challenge the theories and plans drawn up in the planning stage of UNRRA. Contrasting the sphere of planning with the sphere of action will illustrate a central dilemma of humanitarian aid: the chasm between meticulously thought out plans and their implementation in the chaos of the postwar days.

Before we will begin the in-depth exploration of this study with our first case study, the humanitarian endeavor that was UNRRA will be situated in its historical context and especially vis-à-vis its predecessor organization, the League of Nations. UNRRA's inception has been heralded by contemporary observers[6] and historians[7] alike as a departure from previous humanitarian efforts. Both UNRRA's massive geographic scope and its extended remit towards welfare and rehabilitation have been lauded a watershed moment in humanitarian history social policies.[8] In order to understand whether UNRRA's purported self-awareness[9] as novel in its rehabilitation and welfare approach really was such a departure from interwar humanitarian efforts, a brief retrospective on the League of Nations welfare approach will precede the deep dive into UNRRA's inception in order to locate UNRRA within the traditions of its predecessors. This will further serve to gauge the extent to which the implementation of psychological rehabilitation into UNRRA's remit was entirely new, or whether it built on previous practices.

As we will explore over the course of this study, the DPs' mental health was considered political, meaning mental "good health" was considered the basis for

5 Greta Fischer, "D.P. Children's Center Kloster Indersdorf Kreis Dachau," Greta Fischer Papers, January 1946, Box 2, Folder 8–9, United States Holocaust Memorial Museum Archives, Washington, DC.

6 Philipp Weintraub, "UNRRA: An Experiment in International Welfare Planning," *The Journal of Politics* 7, no. 1 (February 1945): 1–24, https://doi.org/10.2307/2125944; Klemme, *The Inside Story of UNRRA*; Ellen S. Woodward, "UNRRA—A Democratic Plan for International Relief" (n.d.), 4.

7 For this claim see i.e. Zahra, "The Psychological Marshall Plan"; G. Daniel Cohen, "Between Relief and Politics: Refugee Humanitarianism in Occupied Germany 1945–1946," *Journal of Contemporary History* 43, no. 3 (July 2008): 437–49, https://doi.org/10.1177/0022009408091834.

8 Salvatici and Sanders, *A History of Humanitarianism, 1755–1989*, 127.

9 Cf. Paulmann, "Conjunctures in the History of International Humanitarian Aid during the Twentieth Century," 226.

peaceful coexistence within and between states. The nexus between psychology (here used as a pars pro toto for all psy-disciplines involved) and politics is a throughline of this study. Its institutionalization in the international mental hygiene movement was a formative influence for the protagonists of the case studies all throughout this study.[10] This invites the historian to trace the advent of a form of population management that explicitly integrates psychological considerations.

The international mental hygiene movement had gained momentum in the first half of the twentieth century. It greatly influenced the protagonists of the individual case studies in this study. Therefore, a brief overview of its genesis and central tenants will be provided. This will serve as a backdrop to the negotiations of the DPs' mental health in this study: for mental hygienists, mental health was no longer limited to the confines of the psychiatric ward but became a matter of public health in order to secure the stability of the nation and international relations.[11]

It is important to note that it is not the goal of this part to represent the psychosocial strategy of UNRRA in its entirety, not least because this aspiration suggests that there is such a thing. These pages rather take a close look at the initial plans regarding psychological rehabilitation during UNRRA's planning phase, before they set up camp in postwar Europe, as drawn up by the Inter Allied Psychological IAPSG. By looking at the initial psychosocial work in Kloster Indersdorf, UNRRA's first children only camp, only one example is taken out of many, as a sample rather than exemplary. This chapter covers the time period of 1944, when the two main sources were drawn up, until summer of 1946, when the Children Center Kloster Indersdorf closed. It is vital to note that the rehabilitation strategies and, more importantly, practices gradually evolved during UNRRA's tenure in DP camps until its dismantling in 1947. Faced with the practicalities and political contestations on the ground, rehabilitation was adapted to the circumstances. It is therefore impossible and thus not desirable to try to achieve a monolithic picture of the one UNRRA strategy or practice. In the end, there were as many psychosocial rehabilitation strategies and practices (if there were any at all) as there were UNRRA welfare workers.

10 Thomson, "Mental Hygiene as an International Movement."

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

2 UNRRA as a New Beginning in Humanitarian Aid?

With the war still raging on the continent, experienced British nurse Francesca Wilson demanded: "We have at least to become planning minded."[1] Wilson had been active in several crisis settings in the interwar period, making her one of the pioneers of the emerging humanitarian professionals. After the first World War had ravished the continent,[2] Wilson had experienced firsthand the struggle of multiple charity agencies grappling with the enormity of the task Her experience led her to call for a transnational relief project that would not only orchestrate the challenge this time around but also plan for the postwar needs in time. She recalled:

> In the interim of the two wars the idea that it is better to plan beforehand than to muddle through has gained ground, and we have this time an official super-state body in charge of relief, the UNRRA (...). This is an advance of incalculable importance on last time when no prior survey of needs was made and nation was allowed to compete with nation for food and necessities.[3]

The perceived failure of humanitarianism in the wake of World War I on the one hand and the hitherto unknown dimensions of populations in disarray after World War II on the other were conceptualized as forcing a new kind of humanitarian project.[4] On the following pages, the claim of UNRRA as a new kind of transnational organization is going to be dissected against the backdrop of the League of Nations in order to gauge whether UNRRA really was such a departure in humanitarianism or whether it, in fact, built on previous practices and expertise.

Memories of disease, epidemics, malnutrition, starvation, and a lack of organized response after WW I still reverberated through the international community while World War II wreaked havoc in Europe.[5] While planning for the aftermath

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1 Francesca Wilson, *In the Margins of Chaos: Recollections of Relief Work in and between Three Wars*, 269.

2 Wilson published two memoirs about her work as a relief worker with the Quakers. See Francesca *Wilson, In the Margins of Chaos: Recollections of Relief Work in and between Three Wars; Francesca Wilson, Aftermath. France, Germany, Austria and Yugoslavia 1945 and 1946.*

3 Francesca Wilson, *In the Margins of Chaos: Recollections of Relief Work in and between Three Wars*, 293.

4 Shephard, Ben. "'Becoming Planning Minded': The Theory and Practice of Relief 1940–1945." *Journal of Contemporary History* 43, no. 3 (July 2008): 405.

5 Ibid., 405–9.

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of the second world war in 30 years, planners in Washington and London and humanitarian professionals[6] alike proliferated the narrative of a failed post-1918 humanitarian response.[7] Many of the contemporary observers and decision-makers were united in the aspiration that the response to the new war had to be a departure from previous postwar scenarios.[8] After WWI, a perceived lack of humanitarian planning had led to catastrophe: in 1919, 25 million people had fallen victim to the Spanish flu, millions died of typhus in the Soviet Union, and the famine in Ukraine had killed five million people by 1921.[9] Towards the end of WWII, humanitarian administrations felt they needed to be prepared for what was to come.

Francesca Wilson had gained her experience in humanitarian work in a time when the trajectory of humanitarian aid started to shift. The interwar period saw various concepts of international cooperation emerge and compete: the League of Nations as a new transnational body expressing liberal internationalism;[10] governmental agencies such as the American Relief Association (ARA) run by Herbert Hoover bringing food to Eastern Europe;[11] private charity organizations such as Save the Children[12] taking care of those who were perceived as the most vulnerable victims of war; and religious organizations like the Quakers facilitating food provision such as the "Quäkerspeisung" for starving Germans in the 1920s.[13]

The institutionalization of humanitarianism slowly reduced the role of private and confessional organizations in favor of governmental bodies such as the ARA and advanced the development of larger supranational bodies such as the League of Nations.[14] The 1920s and 1930s represented a time of shifting paradigms in humanitarian aid, a time marked by "joint presence, negotiation, and collaboration between different bodies"[15] as Silvia Salvatici aptly pointed out. Humanitarian

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6 Francesca Wilson had served with the Quakers after WWI see Francesca *Wilson, Aftermath. France, Germany, Austria and Yugoslavia 1945 and 1946.*

7 For a historic voice on the perceived novelty of the UNRRA project see i. e. James T. Shotwell, *The Great Decision* (New York, 1944).

8 Shephard, "'Becoming Planning Minded,'" 407.

9 Ibid.

10 Droux, "A League of Its Own?"; Marshall, "The Construction of Children as an Object of International Relations."

11 Zahra, *The Lost Children Reconstructing Europe's Families After World War II*, 38 – 41.

12 Emily Baughan, "'Every Citizen of Empire Implored to Save the Children!' Empire, Internationalism and the Save the Children Fund in Inter-War Britain," *Historical Research* 86, no. 231 (February 1, 2013): 116 – 37, https://doi.org/10.1111/j.1468 – 2281.2012.00608.x; Baughan and Fiori, "Save the Children, the Humanitarian Project, and the Politics of Solidarity."

13 Zahra, *The Lost Children Reconstructing Europe's Families After World War II*, 26.

14 Salvatici and Sanders, *A History of Humanitarianism, 1755 – 1989*, 83.

15 Ibid.

aid became increasingly understood as a matter of international cooperation, a spirit that became foundational in the establishment of UNRRA as an intergovernmental agency in 1943.[16]

UNRRA was not the first transnational, intergovernmental humanitarian project of its kind. Twenty-three years earlier, the inception of the League of Nations marked the birth of the first intergovernmental agency whose premise rested on the idea of international cooperation to secure world peace.[17] Its main trajectory was of a political and diplomatic nature, preventing recourse to arms and ensuring the adherence to international treaties.[18] The League of Nations' humanitarian realm was originally limited to preventing human trafficking and slave trade and to encouraging cooperation between states to fight these phenomena.[19] Even though it failed to contain the rise of Nazi nationalism, which made the foundation of UNRRA necessary in the first place, the League of Nations accelerated the evolution of humanitarianism towards cooperation between private and institutional bodies and advanced the professionalization of humanitarian work: it supported, according to historian Silvia Salvatici, the emergence of "new professionals of international cooperation,"[20] some of whom, like Francesca Wilson and the head of UNRRA's Welfare Division Mary McGeachy,[21] also worked for UNRRA later.

The emerging prototype of the humanitarian professional saw its actors move between different crisis hotspots, serve different organizations, and oscillate between religious associations and intergovernmental agencies: This caused a circulation of differing relief practices and the exchange and proliferation of specific bodies of knowledge and experience that influenced latter humanitarian efforts such as UNRRA's.[22] Transnational networks gained ground that worked to gather existing knowledge beyond borders, and the League of Nations' Child Welfare Committee became an "umbrella" to unite the knowledge, as Dominique Marshall has pointed out.[23]

The profession of the humanitarian worker also opened up new opportunities for women like Francesca Wilson and Mary McGeachy who would go on to serve

16 Ibid., 81.

17 Droux, "A League of Its Own?," 90.

18 Salvatici and Sanders, *A History of Humanitarianism, 1755–1989*, 38.

19 Ibid., 85.

20 Ibid.

21 For a biography of Mary McGeachy, see Mary Kinnear, *Woman of the World: Mary McGeachy and International Cooperation* (Toronto: University of Toronto Press, 2004), https://doi.org/10.3138/9781442683532.

22 Salvatici and Sanders, *A History of Humanitarianism, 1755–1989*, 52.

23 Dominique Marshall, "International Child Saving," in *The Routledge History of Childhood in the Western World*, The Routledge Histories (London; New York, 2015), 478.

as UNRRA's Welfare Director.[24] The female humanitarian worker echoed the emergence of the trope of the female social worker, two types of professions that became ubiquitous in the work of UNRRA later. Working in a humanitarian setting supported increased mobility as well as international networks that had hitherto been out of reach for women.[25] Although, as this study will establish later, the upper echelons of UNRRA's executive level were to an overwhelming degree reserved for male "experts" who issued instructions to their female subordinates.[26]

The characteristics of interwar humanitarian projects, especially those of the League of Nations – the professionalization of humanitarianism and the accompanying emergence of mobile humanitarian professionals, who travelled in between crisis hotspots, thereby generating and circulating specific humanitarian bodies of knowledge; the emphasis on international cooperation in order to tackle transnational challenges, transcending humanitarian religious roots with their "charity" endeavors; and the establishment of transnational humanitarian expertise networks – reveal themselves to be very much the precursor to the type of humanitarian project UNRRA prided itself to be the first of its kind. As Johannes Paulmann points out in his seminal essay on "Conjunctures" in humanitarian aid during the twentieth century, the inception of the League of Nations marked the beginning of an era of a new phase of intergovernmental bodies that would flourish after WWII with the founding of the United Nations, with UNRRA being the first of the post-WWII intergovernmental bodies.[27] Thus, UNRRA was not the first administration of its kind but it rather drew on interwar humanitarianism, like the League of Nations.

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24 Paulmann, "Conjunctures in the History of International Humanitarian Aid during the Twentieth Century."

25 Cf. Salvatici and Sanders, *A History of Humanitarianism, 1755–1989*, 83; Martín-Moruno and Leyder, "Feminist Perspectives on the History of Humanitarian Relief (1870–1945)"; Annemieke van Drenth and Francisca de Haan, *The Rise of Caring Power: Elizabeth Fry and Josephine Butler in Britain and the Netherlands* (Amsterdam: Amsterdam University Press, 1999), 11; Esther Möller, Johannes Paulmann, and Katharina Stornig, "Gendering Twentieth-Century Humanitarianism: An Introduction."

26 On the emergence of the notion of expertise and the expert in a humanitarian context, especially UNRRA, see Trischler and Kohlrausch, *Building Europe on Expertise*; Harry Collins and Robert Evans, *Rethinking Expertise*, accessed November 11, 2018, https://www.press.uchicago.edu/ucp/books/book/chicago/R/bo5485769.html; Jessica Reinisch, "'What Makes an an Expert?' The View from UNRRA, 1943–47," in *Work in Progress: Economy and Environment in the Hands of Experts*, ed. Frank Trentmann, Anna Barbara Sum, and Manuel Rivera (München: oekom Verlag, 2018), 103–30.

27 Paulmann, "Conjunctures in the History of International Humanitarian Aid during the Twentieth Century," 218.

The League of Nations did not only model the organizational setup UNRRA was to emulate but also proved to be the harbinger of a new form of integration of social policies that would pave the path for UNRRA's management of social issues and ultimately its psychosocial strategy, as the following chapter will illuminate.

2.1 How Interwar Social Policies Shaped UNRRA's Psychosocial Strategy

UNRRA was not the humanitarian pioneer it made itself out to be[28] but rather drew heavily on interwar humanitarian practices, regarding its setup as a transnational intergovernmental body and the professionalization of humanitarianism. Significantly, too, pertaining to the psychosocial rehabilitation aspirations of UNRRA is the attention on the social dimensions of humanitarian scenarios and its scientific management, as it increasingly moved into focus during the tenure of the League of Nations.[29]

Consequently, the following pages are going to trace how the social aspects of postwar challenges were becoming more important within the League of Nations' setup after WWI, and how the tackling of social questions took on a more scientific approach, ultimately paving the path for UNRRA's social policy with its focus on psychosocial rehabilitation. Since two of the four case studies in this study are concerned with displaced children, the particular focus on children and childhood as arenas of humanitarian influence, as it developed with the League of Nations and continued with UNRRA, will be introduced as well.

In the wake of World War I, the collapse of empires and the consequent territorial changes gave way to a multitude of conflicts and challenges. Radicalized disputes about ethnic homogeneity, mass expulsions, and genocides, along with starvation, epidemics, and other social dislocations produced a grand-scale dislocation of populations,[30] which produced an unprecedented degree of social suffering:[31] 1 million Russians had to flee a raging civil war and famines and Armenians attempted to escape a genocide against their own people, to name but a few exam-

28 Ibid., 226.

29 Magaly Rodríguez García et al., eds., *The League of Nations' Work on Social Issues: Visions, Endeavours and Experiments*, United Nations Publications, The League of Nations' Work on Social Issues (Geneva: United Nations, 2016); Susan Pedersen, *The Guardians: The League of Nations and the Crisis of Empire* (Oxford; New York: Oxford University Press, 2015).

30 Gatrell, *The Making of the Modern Refugee*, 52–58.

31 Droux, "A League of Its Own?"; Marshall, "The Construction of Children as an Object of International Relations"; Marshall, Dominique, "International Child Saving."

ples.[32] Consequently, the League of Nations was confronted with an influx of people that had left their countries of origin and thus its protection: a quintessentially international problem that prompted humanitarian ventures to focus on relief in favor of displaced civilians,[33] foreshadowing UNRRA's mandate that focused singularly on displaced persons, as they were called by 1944.

Mirroring developments on the national level, the League of Nations increasingly relied on strides made in medicine, psychology, psychiatry, and pedagogy to improve the management and care of their charges. Consequently, the League of Nations did not concern itself solely with emergency relief and established a structure of administrative bodies and scientific networks that were concerned with social questions and the management of populations.[34]

With the enormous challenge the population movements after WWI posed, a group that was perceived as most vulnerable increasingly became a focus of the League of Nations administration: displaced children.[35] As multiple studies have emphasized, the scientifically-supported conviction that children[36] were a specific group of persons that had to be treated as such with extra care and protection had gained ground during the turn of the century.[37] The advent of the science of pedology rallied multiple professions around the figure of the child: medical, psychological, and pedagogical experts.[38] The focus on children was not necessarily a new one in philanthropy but the implementation of social policies for the amelioration of children's lives in a humanitarian setting certainly mirrored innovative developments on national levels in the early decades of the twentieth century.[39]

During the League of Nations' existence, the humanitarian focus on children as in need of protection was refined by the scientific gaze that had emerged in the

32 Salvatici and Sanders, *A History of Humanitarianism, 1755–1989*, 93.

33 Gatrell, *The Making of the Modern Refugee*, 52–58.

34 Droux, "A League of Its Own?," 89–93.

35 Paulmann, "Conjunctures in the History of International Humanitarian Aid during the Twentieth Century," 226.

36 For a thorough review of current trends in research revolving around children, see Till Kössler, "Aktuelle Tendenzen der historischen Kindheitsforschung," *Neue Politische Literatur* 64, no. 3 (November 2019): 537–58, https://doi.org/10.1007/s42520-019-00165-6.

37 There is an extensive body of work on the history of childhood. Particularly formative for this study is Martina Winkler, *Kindheitsgeschichte: eine Einführung*, V&R Academic (Göttingen Bristol, CT, U.S.A: Vandenhoeck & Ruprecht, 2017), 99–131. Cunningham, *Children and Childhood in Western Society since 1500*, 137–62. Kössler, "Aktuelle Tendenzen der historischen Kindheitsforschung," 550–53. *Nadesan, Governing Childhood into the 21st Century.*

38 Droux, "A League of Its Own?," 92.

39 Cunningham, *Children and Childhood in Western Society since 1500*, 109–39.

early decades of the century.[40] Humanitarian endeavors such as the League of Nation and later UNRRA mirrored societal and scientific developments, thus looking to "normalize" human development, especially childhood.[41] Most importantly in terms of this study, child development was no longer viewed as divorced from the adult world of politics and rather became politicized: child rearing or the rehabilitation of children[42] became increasingly regarded as the "arena," as Erica Burman put it, in which "the foundations" of a democratic future would be facilitated.[43]

The future of societies was perceived as decided in childhood. Hugh Cunningham has pointed towards the turn of the twentieth century as the dawn of a new understanding of childhood and the stage that determines not only a person's future but the future of societies in the "century of the child" as Swedish feminist Ellen Key famously dubbed it: by rearing children a certain way, the futures of societies were thought to be shaped.[44] Such was the legitimization to pursue social policies by the state. Tending to the children was perceived not only as serving the amelioration of children's lives but of serving "humanity as a whole"[45] by centering social policies of governments around the child in order to ensure a peaceful future. Children were now considered "the future." And the new transnational humanitarian projects, such as the League of Nations and later UNRRA that emerged after the two World Wars, mirrored this development by bestowing the care of children with the importance of being decisive not only for the individual but also for the "future" of communities and states.

Spurred by advancements in the field of social sciences, psychiatry and psychology international networks established standardized frameworks for the care and assessment of children that aimed at preventing poverty and youth delinquency, but also were supposed to enable children to live a carefree childhood.[46]

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40 For an overview of the instrumentalization of science to control populations, and especially children, see *Nadesan, Governing Childhood into the 21st Century.*

41 Ibid., 9–10; Droux, "A League of Its Own?," 95.

42 As Baughan and Fiori have convincingly argued, the recourse to the image of the child in both the political discourse and in emerging humanitarian public relations provided a twofold merit: the child was perceived as a pre-political subject that could powerfully unite differing political parties and mobilize funds by the power of compassion with the youngest victims of wars and genocide. The condition of children and its depiction offered a powerful "moral basis for relief" as Dominique Marshall pointed out. Baughan and Fiori, "Save the Children, the Humanitarian Project, and the Politics of Solidarity," 129. Dominique Marshall, "International Child Saving," 474.

43 Burman, *Deconstructing Developmental Psychology*, 267.

44 Cunningham, *Children and Childhood in Western Society since 1500*, 144.

45 Ibid., 137.

46 Ibid., 130.

Incrementally, the minds, rather than just the bodies, of the children moved into focus. Children were perceived as malleable. This perceived malleability was being used to shape the future. As Cunningham has shown, child-centered philanthropic projects in the nineteenth and early twentieth century were concerned mostly with the children's "bodies" for poverty relief.[47] But over the course of the first decades of the twentieth century, the emotional constitution, "the minds," of children moved to the center of attention.[48] The League of Nations and later UNRRA affirmed this development with their policies and their enlistment of psychosocial expertise that had one major focus on children.

The 1924 adoption of the Declaration of the Rights of the Child by the General Assembly of the League of Nations (LoN) marked a milestone in the promotion of children as a matter of political interest: Drafted by Save the Children's Eglantyne Jebb (1878–1928), the Declaration turned out to be more of an affirmative mission statement than a concrete set of rights but nevertheless placed children at the center of international attention.[49] The declaration stylized the care of children as an endeavor that was to transcend any political, racial, or national affiliation and positioned children at the forefront of the receiving end of relief activities. Children were described as innocent beings in need of special protection, with an emphasis on the provision of material needs. Nevertheless, point one of the Declaration reads: "The child must be given the means requisite for its normal development, both materially and spiritually."[50] The choice of the word "spiritually" implies that the psychological condition of children became part of the remit of the organization, and the mention of "normal development" mirrors contemporary emerging discourses of developmental psychology that gained ground in the first decades of the twentieth century, beginning to appraise, measure, and standardize "normal development."[51] The emotional welfare of children was slowly entering the discourse of humanitarian aid towards children as a memo of a network working on behalf of children put it in 1923: "By assisting our youth we are

47 Cf. Ibid., 144.

48 Ibid.

49 Baughan, "'Every Citizen of Empire Implored to Save the Children!' Empire, Internationalism and the Save the Children Fund in Inter-War Britain."

50 "Geneva Declaration of the Rights of the Child of 1924 – UN Documents: Gathering a Body of Global Agreements," accessed October 4, 2021, accessed October 4, 2021, http://www.un-documents.net/gdrc1924.htm.

51 For a thorough analysis of developmental psychology from a constructivist perspective, see Burman, *Deconstructing Developmental Psychology*; Dennis Thompson, John D. Hogan, and Philip M. Clark, *Developmental Psychology in Historical Perspective* (Chichester, West Sussex: Wiley-Blackwell, 2012). On the history of psychotherapy in Europe, see Marks, "Psychotherapy in Europe"; Marks, "Psychotherapy in Historical Perspective."

[...] taking part in the physical and emotional education of the next generation; and it is upon this that the future [...] of humanity, depends [...]. [Youngsters] will ensure the future success of our efforts and not be a breeding ground for adversaries inspired by dangerous and harmful doctrine."[52]

Child rearing became both a state's concern and the concern of transnational organizations such as the LoN not out of altruism and charity but out of stately self-interest. Incrementally, a monitored childhood became conflated with democracy: the "right" form of child rearing would yield a democratic future. As a representative of the Child Welfare Committee[53] put it: children are "citizens, politicians, and statesmen of the future. Everything that we can do today, in order to fortify children's constitutions, clarify their intellects and strengthen their moral fiber, will contribute to ensuring peace in the world when these children reach maturity."[54] Working towards an amelioration of the children's plight became conceptualized as the groundwork for a democratic and peaceful future. Children became stylized as guardians of peace. [55]

Taking a closer look at the social practices and policies of the LoN has shown that UNRRA's social policies as well as its remit drew from interwar humanitarian endeavors, mostly the LoN. The practices of the League of Nations introduced four pillars that proved to be defining for UNRRA's work with regards to its psychosocial rehabilitation strategy: displacement as the main repercussion of armed conflict; the scientization of social issues for human resource management purposes; the normativization of a human's constitution and the focus on children and their "normal development"; and their perceived malleability as legitimization for intervention by the state or humanitarian actors.

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52 Second International Meeting of the Youth Movement to Rescue Childhood, Brussels, April 1923, report to Miss Froloff, ILO Archives, D 600/406/0/2, quoted in (with omissions) Droux, "A League of Its Own?," 92.

53 The establishment of the Child Welfare Committee (CWC) as an organ within the League of Nations marked the transnational institutionalization of several networks that worked to protect children.

54 Proceedings of fourth Meeting LoN Assembly, Sept 26, 1924, Australian Delegate M. Allen, quoted in Droux, "A League of Its Own?," 92.

55 Salvatici and Sanders, *A History of Humanitarianism, 1755–1989*, 51. Malkki, Liisa, "Children, Humanity, and the Infantilization of Peace."

2.2 From the Clinic to the International Stage: The Mental Hygiene Movement

The LoN efforts highlighted a growing emphasis of social policies of the interwar period on "the mind. This period also saw the emergence of a scientific movement that proved to be shaping the psychosocial response in international organizations after WWII: the mental hygiene movement.[56] A crucial theme that emerged was the interrelation between mental health and politics, the individual psychological constitution vis-à-vis the state and international relations.

At the heart of the mental hygiene movement stood the conviction that the foundation for peaceful coexistence within states and internationally lay in the individual mental constitutions of those that made up the collective. Simply speaking, peaceful community living was considered as dependent upon the psychic health of individuals. When the Inter Allied Psychological Study Group of UNRRA compiled its *Report on Psychological Problems of DPs* in 1944, the group affirmed this view when they noted: "We know that the health of international relationships grows out of the mental health of nations."[57] And the mental health of nations was considered as building on the mental health of its citizens.[58]

In order to position the post-WWII psychosocial strategies within the broader international mental hygiene movement, it is helpful to cast a look at the history of the movement. In fact, no publication that deals with UNRRA's social policies considered the influence of the international mental hygiene movement, thereby omitting an important conceptual piece of the puzzle.

So-called "mental hygienists" aimed to shift the paradigm of mental health: rather than treating serious (and oftentimes seemingly hopeless) mental cases in psychiatric hospitals or "insane asylums" they wished to intervene earlier to avoid the referral to these institutions and to avoid mental disease in the population.[59] As Hans Pols put it, mental hygiene represents the public health perspective

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56 The dissemination of mental hygiene ideas on the European continent must also be understood within the context of the increase in demand for scientific expertise, and the ways in which "expertise" became an "active commodity." Experts from all fields, including psychiatry, entered the market, competing for research funds, equipment, influence, and power. Cf. Freis, *Psycho-Politics between the World Wars*, 6; Mitchell Ash, "Wissenschaft und Politik als Ressourcen Für Einander," in *Wissenschaften und Wissenschaftspolitik: Bestandsaufnahmen zu Formationen, Brüchen und Kontinuitäten im DeutschlanddDes 20. Jahrhunderts*, ed. Rüdiger Vom Bruch and Brigitte Kaderas (Stuttgart: F. Steiner, 2002).

57 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 41.

58 Ibid.

59 Thomson, "Mental Hygiene as an International Movement," 283.

within psychiatry,[60] the literal and figurative transcendence of the boundaries of the clinic. Public health was within the remit of the state and, thus, mental hygiene, the psychological constitution of a person, became subsumed in the area of responsibility of the state.

The term mental hygiene had initially been coined by Clifford Beers (1876–1943) who had spent many miserable years in mental institutions.[61] Beers documented his struggles in his autobiography *A Mind That Found Itself* and called for a shift in psychiatry: instead of focusing on the treatment of mental illness within the confines of underfunded and understaffed mental institutions, he demanded early intervention, prevention, and the promotion of mental health.[62] In 1909, Beers founded the National Committee for Mental Hygiene (NCMH, today named Mental Hygiene America) in order to promote the reforms of psychiatry. Beers' movement gained momentum in the following decades, producing a shift of perception of the so-called "insane." As Pols put it, "Mental hygiene psychiatrists were guided by the ideal of prevention: they designed and promoted intervention strategies to treat mental illness in its incipient stages, to prevent mental disorder from arising or from becoming worse, and to promote mental health in the general population."[63]

The mental hygiene information campaign took multiple forms. Early mental hygienists motivated teachers and care workers to detect mental issues early or, at best, prevent them.[64] The NCMH sought to improve conditions in mental hospitals, stimulate the establishment of outpatient clinics and research in psychiatry, improve the quality of psychiatric education in medical schools, and develop measures to prevent mental illness, as well as engaging in public health education.[65] Early mental hygienists promoted child guidance clinics and handed out advice for mothers, informing them about the healthy development of their children.[66]

However, the proliferation of the mental hygiene approach also worked to advance the normativization of human development, as has been touched upon in the previous chapter with regards to children. Mental Hygienists viewed psychological health mostly as the level of adjustment a person was able to display in regards to the society he or she lived in, thus having a strong evaluative and norma-

60 Pols, "'Beyond the Clinical Frontiers' The American Mental Hygiene Movement, 1910–1945," 111.
61 Bertolote, "The Roots of the Concept of Mental Health," 113.
62 Beers, "A Mind That Found Itself."
63 Pols, "'Beyond the Clinical Frontiers' The American Mental Hygiene Movement, 1910–1945," 111.
64 Ibid., 111–12.
65 Ibid., 112.
66 Ibid.

tive influence on mental health.[67] In a sense, mental hygienists worked towards bringing citizens up to speed with the demands of modern life, molding them into "functioning" participants in a modern society using insight from human sciences.[68] Mental hygienists determined what behavior was deemed acceptable and which was not, not unlike the psychiatrists working with DPs 30 years later did, as this study will show.

The trajectory of the mental hygiene movement shifted after WWI. Once again, the war proved to be a catalyst for new developments in mental health. Not only did many in the mental hygiene and psychiatric community view the war as a product of "mental malaise"; the war seemed to affirm a rather dark view of human nature.[69] The war was perceived as an affliction that had befallen people across many countries. Consequently, in the 1920s, the mental hygiene movement took on a more international scope, as Mathew Thomson has depicted.[70] The mental health of citizens became progressively seen as paramount for international relations, and psychiatrists demanded to be at the table whenever politicians discussed social policies.[71] An understanding of human nature, through the study of mental health, became seen as vital in order to preserve the social order and national cohesion. If mental health was considered to be as essential "to meet the demand of citizenship"[72] as the early American adopters of mental hygiene saw it, the international dimension of mental health came increasingly into focus in the 1920s with the promotion of international cooperation.

The advent of the mental hygiene movement was driven by laypersons such as Clifford Beers but, as Thomson has shown, the international version of the movement took on a decidedly more scientific and professionalized face.[73] The danger and potential of another war made the cultivation of mental health, in the eyes of psychiatrists who considered themselves to be mental hygienists, even more vital in order to keep at bay "the aggressive drive for war"[74] that had been displayed in WWI and was discussed by Freud.

In the interwar period, mental hygiene took on different trajectories internationally. Anglophone mental hygienists – who are at the center of this study – increasingly relied on Freudian psychoanalysis to promote the importance of early

67 Ibid., 114–16.
68 Cf. Ibid., 111.
69 Cf. Thomson, "Mental Hygiene as an International Movement," 283.
70 Thomson, "Mental Hygiene as an International Movement."
71 Ibid., 284.
72 Pols, "'Beyond the Clinical Frontiers' The American Mental Hygiene Movement, 1910–1945," 111.
73 Thomson, "Mental Hygiene as an International Movement," 295.
74 Ibid., 284.

childhood developments for successful adaptation in later life. The Germans mental hygiene branch[75] – Psychohygiene – relied more on a social Darwinist approach, ultimately falling more and more prey to racist ideology and eugenics, culminating, eventually under Nazi rein, in sterilization of the mentally ill.[76]

I argue that the (international) mental hygiene movement contributed to the convergence of psychiatry and the state and can thus be classified as biopolitical. Spurred by the movement, the state incrementally sought to intervene in the "minds" of its citizens in order to manage populations and to reach certain political goals. The conviction that in order to promote a "healthy" nation the mental health of individuals needed to be monitored and controlled lends itself to the interpretation that the state sought more control over its citizens by employing psychiatric principles. Since the protagonists of this study shared this conviction, the assumption on the biopolitical nature of the psychosocial strategies will be a throughline in the entirety of this study.

As this study will show later, some of the authors of the *Report on Psychological Problems of DPs* acted precisely at this juncture of psychiatry and politics, and Paul Friedman, the protagonist of part II of this study, considered himself to be a mental hygienist. In fact, the spirit of the international mental hygiene movement with its conviction about the interrelations of "healthy" psyches and "healthy" international relations will prove to be foundational for all case studies in this book.

This prelude to the first case study has shown that UNRRA with its social policies drew on interwar practices of the League of Nations. The "scientization of the social"[77] as it was mirrored in the LoN's social policies and taken up by UNRRA manifested, among other things, in the rise of the (international) mental hygiene movement which developed after WWI and whose principles would prove to be formative in the work with DPs later.

Equipped with this important historical contextualization, we will now turn our attention to the first case study.

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75 For a thorough investigation into German-speaking interpretation of mental hygiene/ Psychohygiene see *Freis, Psycho-Politics between the World Wars.*

76 In Germany, Giessen psychiatrist Dr. Robert Sommer coined the term "Psychohygiene" already in 1900, but with a slightly different understanding, emphasizing less the call for transcendence of the mental ward, as did Clifford Beers eight years later, see ibid., 47.

77 Raphael, "Die Verwissenschaftlichung Des Sozialen Als Methodische Und Konzeptionelle Herausforderung Für Eine Sozialgeschichte Des 20. Jahrhunderts."

3 Planning the Road Home Prior to War's End

In August 1944 the Welfare Division, helmed by Mary McGeachy, sanctioned the formation of an Inter Allied Psychological Study Group, an international committee of psychiatrists, psychologists, and social workers. The group was tasked with compiling a guideline aimed at welfare workers on the handling of the psychological implications of the war on DPs. This chapter will provide an in depth look at this source.[1]

3.1 The Meaning of Relief, Rehabilitation, and Welfare

Despite the dominance of UNRRA's administrative task – repatriating Europe's scattered people – psychological considerations were factored into UNRRA's plans: the *Report of Psychological Problems of DPs* clearly established a link between the administrative mammoth task of managing a continent's population in disarray and the integration of the social dimensions of the situation. The report states:

> To deal effectively with the great problems of resettlement in Europe and elsewhere, an understanding is necessary of the basic human needs and strivings (sometimes called instincts or drives) and of the various ways in which people seek to deal with the anxiety and despair which are the inevitable accompaniments of war.[2]

Not only does this quote illuminate how the authors of the *Report* were of the mind that to "effectively" tackle a population in chaos psychological considerations had to be taken into account; it also points towards the psychoanalytical underpinning of the *Report*'s rationale by alluding to terms like "instincts and drives." [3]

However, it is obvious that the IAPSG's document was not as uncontested as it may seem. The integration of psychosocial expertise in the realm of welfare and rehabilitation within UNRRA was received with ambiguity. This was because the precise remit of UNRRA was contested in the planning stages of the administration when the first case study – the IAPSG's work – was compiled.

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1 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons" (European Regional Office London: United Nations Relief and Rehabilitation Administration, June 1945), 41, HA5–4/3, Wiener Library.

2 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 1.

3 Ibid.

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Upon its inception, UNRRA's responsibilities and remit were not clear to all involved. For some, UNRRA was to be purely a supply organization that provided material support to reconstruct Europe, while for others the organization's remit should extend the material aspects of reconstruction, focusing, too, on welfare and the "human element,"[4] as one welfare worker put it. In order to contextualize UNRRA's psychosocial strategy it is worth considering why, if UNRRA mainly sought to create order in Europe by repatriating its people, it still employed psychosocial experts in its structure. To get a better grasp on this question, the negotiations of the meaning of relief, rehabilitation, and welfare in UNRRA will be given some attention over the course of the following pages.

The founding of UNRRA in November 1943 was pregnant with expectation and significance. It was to symbolize a new form of international cooperation after Nazi totalitarianism had managed to crush earlier iterations of internationalism.[5] From the get-go, UNRRA's tenure was bestowed with heavy symbolism and an ideology that drew from the Atlantic Charter.[6] International cooperation and its vessels of operative supranational, humanitarian organizations were the way forward for policy makers opposing authoritarianism in the 1940s, and UNRRA was one of the major institutions to act on that promise.[7]

In order to get the wheels moving on this new transnational endeavor, President of the United States Franklin D. Roosevelt installed Herbert Lehman, German-Jewish lawyer and former governor of New York, as his relief supremo and head of the newly established UNRRA.[8] However, when Lehman and his colleagues set up camp in their offices in Washington's Dupont Circle, the precise remit of the new

4 "Oral History Interview with Greta Fischer."

5 Internationalism is an oft mentioned concept in the context of humanitarianism, but it is seldomly defined. For this study the working definition describes a principle of cooperation of states, bodies, and individuals that transcends the national and embraces the transnational. For internationalism in the context of UNRRA, see Reinisch, "'We Shall Rebuild Anew a Powerful Nation'."

6 The Atlantic Charter was signed by Franklin D. Roosevelt and Winston Churchill on August 14, 1941. While the charter was designed at a time when the war was still raging, it was very much aiming at constructing a new world order that would transcend the beliefs and practices that had led to two World Wars in one century. The charter's most prominent phrase, "all the men in all the lands may live out their lives in freedom from fear and want" signaled the paradigm shift in global human rights and set the stage, amongst other things, for the establishment of UNRRA two years later, in November 1943. Elizabeth Borgwardt, *A New Deal for the World: America's Vision for Human Rights*, 1. Harvard Univ. Press paperback edition (Cambridge, Mass.: Belknap Press of Harvard Univ. Press, 2007), 4.

7 Ibid., 120.

8 Cohen, *In War's Wake*, 59–60.

humanitarian body was still unclear. Some purported UNRRA to be a supply program while others wished to see individual care incorporated.[9]

In accordance with the pivotal Administrative Memorandum No. 39 drawn up by SHAEF and the conference proceedings resulting from the Yalta conference, the main responsibilities of UNRRA revolved around the "four Rs": rescue, relief, rehabilitate, repatriate.[10] The DPs were to be assembled in transitory DP camps ("rescue") in order to be provided with necessary medical assistance and the provision of material goods ("relief"), and stabilized in a way that would enable them ultimately ("rehabilitate") to be repatriated into their prewar countries of origin ("repatriate").[11] So much for the semantics. But what that actually looked like in practice turned out to be highly contested.

For most of the planners that gathered in Washington and London to plan for a time after the defeat of the Nazis, the reconstruction of Europe was first and foremost an administrative challenge: as a result of the war millions were expected to be uprooted, causing disorder that had to be managed.[12] The main task of UNRRA was to administer the restoration of Europe's (prewar) population management by repatriating its people into their prewar countries of origin.[13] The fact that millions had been displaced as a result of the war was considered the defining aspect of the postwar era. Displacement, and not the genocide[14] of singular groups of people, most of all the Jewish people, became what Ben Shephard called "the defining mental construct for the rest of the decade"[15] and certainly UNRRA's core focus. UNRRA's failure to recognize the extent of what by 1946 would be subsumed under genocide – the deliberate persecution and extermination of groups of people – will be discussed over the course of this part of the study. As has been discussed earlier, the repatriation goal would prove unrealistic, especially for Eastern European Jewish DPs, thus posing a huge hindrance for UNRRA's main goal repatriation.[16]

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9 Shephard, "'Becoming Planning Minded,'" 412–14.

10 Jacobmeyer, *Vom Zwangsarbeiter Zum Heimatlosen Ausländer*, 30.

11 Ibid., 30–31.

12 Shephard, "'Becoming Planning Minded,'" 416.

13 Jacobmeyer, *Vom Zwangsarbeiter Zum Heimatlosen Ausländer*, 59–82.

14 The term genocide is used frequently in my study to describe the intentional extermination of the Jewish people as perpetrated by the Nazis, even though the term was coined by Polish lawyer Rafael Lemkin only in 1944, and became officialized in the Genocide Convention in 1948. For more on the genesis of the term, see Philippe Sands, *East West Street: On the Origins of "Genocide" and "Crimes against Humanity"*, First edition (New York: Alfred A. Knopf, 2016).

15 Shephard, *The Long Road Home*, 2.

16 On the issue of Eastern European DPs problems with repatriating, see i. e. Grossmann, *Jews, Germans, and Allies*, 159–68.

Nevertheless, over the course of UNRRA's existence, a chasm emerged between administrative authorities who sought to execute the prerogative of repatriation and the UNRRA Welfare teams whose goal it was to rehabilitate.[17] In general, those who worked closely on a daily basis with the DPs were more attuned to their individual wishes than the administrative and military personnel that sought to execute the repatriation paradigm as swiftly as possible.

Beyond the impossibility of repatriation for many groups, two "Rs" of UNRRA's agenda in particular were cause for discord: relief[18] and rehabilitation. The meditation on the concrete meaning of the two Rs might seem semantic, however, for the purposes of this research, and its focus on humanitarian psychosocial rehabilitation, it is critical. The "two Rs" were blowing smoke. Dean Acheson, assistant secretary of state and one of the architects of the postwar reconstruction of Europe, reminisced laconically: UNRRA "would have done its work and passed away before we were to know what 'rehabilitation' really required from us."[19] As it turned out, the terms welfare, relief, and rehabilitation held different meanings for different people. For the more conservative inclined planners, welfare and relief meant nothing more than the provision of material needs.[20] For those from the US who were socialized professionally during the New Deal, rehabilitation meant the provision of services for people with "special needs" in order to get them back on their own feet, by employing "social experts" such as social workers and professionals from other psy-disciplines.[21] It was this spirit that was echoed in UNRRA's leitmotif, coined by its director Herbert Lehman, "Help the people, help themselves," which was printed on the brochures of UNRRA that were later disseminated in the DP camps.[22]

The exact meaning of the terms relief and rehabilitation nevertheless remained hollow and was cause for much ambiguity and conflict. Rehabilitation implied economic rehabilitation (i. e. the supply of material goods to revive agriculture), as well as the attempt of psychosocial rehabilitation, as this research will outline. The fact that UNRRA employed a range of professionals from the psy-dis-

17 Salvatici, "Help the People to Help Themselves," 434–35.

18 For a historical overview on the term relief, see, Bethall, Relief, in *The Palgrave Dictionary of Transnational History: From the Mid-19th Century to the Present Day*, ed. A. Iriye and P. Saunier, Palgrave Macmillan Transnational History Series (Palgrave Macmillan UK, 2009), 887–92, https://www.springer.com/gp/book/9781403992956. 887–892.

19 Quoted in: Borgwardt, 119; Winant cable quoted in Acheson, *Present at the Creation*, 68, 69.

20 Salvatici, "Help the People to Help Themselves," 431–32.

21 Ibid., 436.

22 Salvatici, "Help the People to Help Themselves."

ciplines to plan for the work with DPs in 1944 points towards the fact that the psychosocial aspect of rehabilitation took a place of value within UNRRA's setup.

The focus on the social aspects of rehabilitation has arguably been derived from US-style social work. Some research suggests[23] quite sweepingly that the planning for a time after the defeat of the Nazis and the subsequent founding of UNRRA was part of a successful American attempt to internationalize the New Deal; to advance it into a "Global New Deal."[24] What is more, Daniel Maul, building on Jessica Reinisch's reasoning,[25] purports UNRRA to be an American attempt "to institutionalize an international regime of emergency relief headed by the US."[26]

Upon closer look it becomes clear that some American social workers within UNRRA's setup advocated for the integration of the psychological aspect of displacement, mirroring New Deal style problem solving attempts. At the heart of the New Deal strategy stood a new way of tackling society's problems: the reliance on reforms and large institutions to cure economic and social problems as well as the conviction that "planning increases efficiency," as one contemporary observer put it.[27] The application of institutionalization, professionalization, and multilateralism in order to solve social and economic problems distinguished New Deal style problem-solving from earlier approaches.[28] The New Deal was hoped by some to be a model for the reconstruction of Europe.

What is more, the reliance within UNRRA on social workers echoed the professionalization of social work[29] that had taken place during the New Deal: social workers, employed by New Deal welfare institutions, received formal training, thereby introducing a new way of assisting their charges: To them, welfare meant assistance in rehabilitating persons according to their individual needs, integrating knowledge from the psy-sciences.[30] The reliance on knowledge and the

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23 i. e. Zahra, *The Lost Children Reconstructing Europe's Families After World War II*, 103. Borgwardt, *A New Deal for the World*, 119; Salvatici, "Help the People to Help Themselves." *Borgwardt, A New Deal for the World.*

24 In the wake of the Great Depression in the United States that saw a historically burgeoning unemployment rate, deflation, and poverty, the Roosevelt administration implemented a set of economic and social reforms that were subsumed under the moniker "New Deal."

25 Reinisch, "Internationalism in Relief," 258 – 89.

26 Daniel Roger Maul, "The Rise of a Humanitarian Superpower: American NGOs and International Relief, 1917–1945," in *Internationalism, Imperialism and the Formation of the Contemporary World*, Palgrave Macmillan Transnational History Series (n.d.), 140.

27 Weintraub, "UNRRA," 4.

28 Borgwardt, *A New Deal for the World*, 119.

29 To this day, the following is the most comprehensive study on the emergence of social work in the United States, especially chapters 1 – 2: *Ehrenreich, The Altruistic Imagination.*

30 Ibid., 150.

subsequent emergence of the social "expert" – social workers trained in psychology and even psychoanalysis[31] – stood at the heart of the developments in welfare during the New Deal. [32] This transformation[33] in the profession of social work became foundational in the welfare spirit of UNRRA,[34] arguably contributing to integrating voices from the psy-disciplines in its planning, as our first case study shows.

However, not all voices within UNRRA shared this background. Staff from "old Europe" and Great Britain had decidedly different outlooks on what was to be done in terms of rehabilitation.[35] This aspect has been overshadowed in research by the dominant narrative of UNRRA as a US-style organization. In fact, there emerged a chasm between European and British welfare workers and American ones. While welfare work took on a more professionalized face in the US, British welfare workers usually had a background in voluntary work and lacked professional training, much to the dismay of their American counterparts. [36] They oftentimes wished to see UNRRA's rehabilitation efforts limited to the provision of material aid and were skeptical about the "American" approach with its focus on the individual, as sources attest.[37] Nevertheless, as we will soon discuss, the majority of the IAPSG were British psychiatrists and psychologists, pointing to the fact that

31 Beth Cohen, *Case Closed: Holocaust Survivors in Postwar America* (2006), 134, https://www.degruyter.com/isbn/9780813541303.

32 Salvatici and Sanders, *A History of Humanitarianism, 1755–1989*, 118.

33 For more on the integration of psychoanalysis in social work training in the US, see chapter 5.2 of this study.

34 Continuities in social work staff illustrate the impact the New Deal years had on UNRRA's work. Social worker Aleta Brownlee had gained her master's degree in Social Work during the New Deal era at the University of Chicago, and served as a consultant at the Children's Bureau in California in the 1930s, before she made her way to Europe to work with UNRRA. Having gained experience in a new form of welfare, she was eager to import this approach overseas. She recalled how she shared with her colleagues the conviction that through their contribution in the humanitarian field they were "making history which [they] experienced during the Depression." Aleta Brownlee, "Whose Children?" (Aleta Brownlee Papers, n.d.), Box 213, Hoover Institution Archives. Brownlee's colleague Susan Thames Pettiss left an abusive husband in Mobile, Alabama in order to join a group of American social workers that were bound together by an "pervasive idealism," as she put it, in order to help rehabilitate Europe's war-stricken people under the helm of UNRRA. Pettiss, too, had gained her laurels in New Deal welfare agencies, namely the Mobile Alabama department of public welfare. Pettiss and Taylor, *After the Shooting Stopped*, 8.

35 Salvatici, "Help the People to Help Themselves," 434.

36 "Interview with W. Harvey Wickwar, during Spring of 1946," Spring 1946, 2, S-0556–0006–0009–00002, United Nations Archives.

37 "Interview with W. Harvey Wickwar, during Spring of 1946."

is was mostly the untrained welfare workers who were skeptical about the psychosocial approach.

Nevertheless, despite the initial disunity surrounding UNRRA's precise remit, the two case studies of UNRRA's work in Europe that will be presented in this study prove that the psychosocial aspect of rehabilitation indeed was considered in UNRRA's setup, even against resistance from more administrative-minded UNRRA officials.

In 1944, UNRRA director Herbert Lehman made a hiring decision that would shape the path the meaning of rehabilitation took within UNRRA. Lehmann appointed the first woman on an executive level within UNRRA to run the newly minted Welfare Division: British-Canadian Mary McGeachy. The appointment of the first – and only – female UNRRA director prompted The *New York Times* to make the significance of this abundantly clear when it titled an article *"Woman Appointed as Chief."*[38] It was not the personality behind that piece of news that made the headline but purely her gender.

Mary "Craig" McGeachy (1901–1991) served as the head of UNRRA's welfare division from its inception in 1944 until 1946.[39] McGeachy was a Scottish-Canadian civil servant who had served in Geneva with the League of Nations before she cofounded the Council for British Societies for Relief Abroad (COBSRA), which helped her attain British diplomatic status as the first woman.[40] UNRRA's level of seniority consisted almost exclusively of men, while women were employed as social workers and un-paid volunteers. The appointment of the only female executive in the welfare division, supervising (mostly female) social workers, was no coincidence and testament to the gendered assumption of social work as a female domain. Indeed, the vast majority of UNRRA's welfare staff was female, fulfilling tasks that resembled classic "mothering" ideas in a broader sense: the care of children, the elderly, and weak.[41] Attractive and charismatic, McGeachy's prominent position soon drew attention of international media outlets that dubbed her "Europe's No.1 Foster Mother,"[42] notwithstanding the fact that her position mostly required administrative and leadership work, as well as office politics and "backbiting"[43]

38 "Woman Appointed as Chief," *New York Times*, January 31, 1944.

39 McGeachy's position as welfare director remained contentious, with an attempt to fire her in March 1946 to no avail. The reason for her staying on is clouded in mystery, with the source stating "The actual deposition scene with Miss McGeachy is veiled in mystery!" "Interview with W. Harvey Wickwar, during Spring of 1946," 1–2.

40 Kinnear, *Woman of the World*, 150.

41 Ibid.

42 "Europe's No.1 Foster Mother," *Toronto Star Weekly*, August 12, 1944.

43 Kinnear, *Woman of the World*, 151.

by rivaling men between London and Washington. As will be shown later, Mary McGeachy was responsible for hiring a host of experienced psychosocial professionals for UNRRA's planning.

These last pages showed this: painting UNRRA's psychosocial rehabilitation and welfare approach as entirely novel and, most importantly, unambiguous does not honor the vast chasms that emerged within the administration. Rehabilitation meant different things to different people. There were chasms between military personnel and civilian workers, chasms between American and British welfare workers and differences between those who planned operations in the upper echelons of the administration and those who implemented these plans on the ground and were constantly faced with the social implications of the war's aftermath. UNRRA, at least in the early stages, was neither a supply organization nor a solely welfare-focused organization. It was a kaleidoscope of those who worked for the organization.

Nevertheless, it is the precise focus on social rehabilitation and thus the dominance of this welfare spirit that UNRRA historian Woodbridge singled out in hindsight as the innovation of UNRRA's particular humanitarian endeavor. He conceded, "it is in the field of human rehabilitation"[44] that UNRRA succeeded first and foremost; rehabilitation (not militarily executed repatriation), in his view, was UNRRA's "vital work – the development of free, independent, self-sufficient human beings."[45] The fact that the social aspect of rehabilitation was as stressed in the official historiography of the administration might point towards the fact that it gained importance over the course of UNRRA's existence until 1947, from where it started prior to war's end.

Finally, it can be argued that those advocating for the integration of the psychosocial aspect of rehabilitation into UNRRA's planning and execution ultimately succeeded, as evidenced by the work of the IAPSG.

Mapping out the Challenge Ahead

When Mary McGeachy assumed her position as UNRRA welfare director in 1944, she is said to have remarked: "We have maps of sheep population and the pig pop-

44 George Woodbridge, *UNRRA: The History of the United Nations Relief and Rehabilitation Administration*, vol. II (New York: Columbia University Press, 1950), 522.

45 George Woodbridge, *UNRRA : The History of the United Nations Relief and Rehabilitation Administration* (1950), I: 532.

ulation of Europe. But there exists no map of the orphan population."[46] McGeachy was intent on changing this, drawing up welfare directives to guide welfare workers and, incidentally, accumulating a body of humanitarian welfare knowledge that has since been neglected by historians. McGeachy, as her deputy put it, "had great faith in studies":[47] she commissioned a range of studies and reports "to make a realistic picture of the problem before us arising from the effects of enemy occupation."[48] The *Report on Psychological Problems of DPs*[49] and the *Report on Special Needs of Women and Girls*[50] as well as a paper on *Special Counselling* were the outcome. These studies were the basis for the handbook *Emergency Welfare Services* that was distributed to welfare staff in early 1945.[51]

With UNRRA headquarters in Washington, the Welfare Division operated out of the European Regional Office of UNRRA in London. McGeachy worked to straddle the British and the US spheres, not least in order to keep the fragile peace in the new administration:[52] she aspired to draw "the best of the training and experience of both sides of the Atlantic."[53]

The plans McGeachy commissioned stand at the core of the first case study – the work of the IAPSG. Therefore, the rationale behind commissioning these studies as a form of a "social lay of the land" will be traced before the focus is narrowed on the Inter Allied Psychological Study Group.

However, when McGeachy's deputy Conrad van Hyning was interviewed in February of 1947, disagreements between them were not far below the surface. Van Hyning proved to be highly critical of his female boss, both for her demeanor and for her fondness of studies. He was not convinced that the studies would serve their purpose. Van Hyning stated that the material did not "reach the field" and

46 UNRRA, "Historical Monographs, Welfare Division," n.d., 3, PAG4/4.0:10(S-05170047), United Nations Archives.

47 UNRRA, "Interview with Conrad van Hyning 26 February 1947," 4.

48 McGeachy to Derek Hoyer-Miller, May 30, 1944, UNA, UNRRA, 8 – 0520 – 0303, quoted in Kinnear, *Woman of the World*, 153.

49 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons" (European Regional Office London: United Nations Relief and Rehabilitation Administration, June 1945), HA5 – 4/3, Wiener Library; Greta Fischer.

50 Welfare Division of the European Regional Office of UNRRA by an International Working Party of Social Workers, Psychiatric Social Workers, Doctors and Psychiatrist [sic], "Special Needs of Women and Girls."

51 Susan E. Armstrong-Reid and David Murray, *Armies of Peace: Canada and the UNRRA Years* (Toronto: University of Toronto Press, 2008), 122 – 23, http://ebookcentral.proquest.com/lib/unigiessen/detail.action?docID=4672538.

52 Ibid., 163 – 64.

53 Ibid., 166.

was not "applicable to the situation." He asserted: "The people who got it did not need it because they already knew the stuff and it was beyond the others understanding even when it did reach them."[54] Especially considering the emphasis on psychoanalytical theory in the *Report on Psychological Problems* it is, however, highly questionable whether all the welfare workers were aware of the psychoanalytical aspects of displacement prior to them reading the *Report.*

What the UNRRA staff actually needed from McGeachy, according to Van Hyning, was support in the administrative aspects of repatriation and "specific definitions of eligible DPs as administrative orders."[55] Here, once again, the chasm between those UNRRA workers who saw the administration's main task in repatriation and those who emphasized the welfare aspect becomes visible.

McGeachy herself, though, remained convinced of her policy regarding the reports, according to Susan Armstrong and David Murray.[56] Murray and Armstrong outline how she was proud of the knowledge production she enabled and that the material had later been forwarded to the United Nations.[57]

3.2 Inter-Allied Psychological Study Group

In August 1944 the Welfare Division, helmed by McGeachy, sanctioned the formation of an Inter Allied Psychological Study Group, an international committee of psychiatrists, psychologists, and social workers. The group was tasked with compiling a guideline aimed at welfare workers on the handling of the psychological implications of the war on DPs.

The IAPSG served as an advisory body to UNRRA's Welfare Division. The report entitled *Report on the Psychological Problems of Displaced Persons* (from now on called *Report*) was largely produced in 1944, before the defeat of the Nazis. It was to serve as a training manual for field officers once hostilities ceased and the camps were liberated.

The *Report* is the first comprehensive survey on the mental implications of the Nazi persecution commissioned by the major humanitarian agent in Europe. For the purposes of this research the *Report* serves as an important insight into the conceptualization of the psychological effects of the war on its victims by leading

54 UNRRA, "Interview with Conrad van Hyning 26 February 1947," 4.

55 Ibid.

56 The official historical account of the Welfare Division is ripe with criticism of McGeachy. Whether this was justified or simply office politics and sexism at a time, when female bosses were hardly the norm, remains speculative. UNRRA, "Historical Monographs, Welfare Division," 3.

57 Armstrong-Reid and Murray, *Armies of Peace*, 123.

figures in the field of psychiatry, psychoanalysis, and social work at the time. Before we take a deep dive into the major points of the *Report*, and the ways in which it conceptualized and anticipated the DPs' mental state, we will take a preparatory excursion: we will take the investigation into the IAPSG's staff composition and their respective professional backgrounds as a springboard to explore the bodies of knowledge the *Report* was based on. I will trace the sociopolitical conditions that spurred the discourse on the mental effects of war in the wake of WWI in order to outline the body of knowledge the authors of the guideline drew from in anticipation of the end of WWII. We will encounter here one of the major through lines of this study: the convergence of psychiatry and politics in times of war.

Composition of the Group

On September 6, 1944, Alexander Kunosi, Chairman of the Technical Sub-Committee on Welfare for UNRRA, wrote a letter to the British Under Secretary of State for War (A.M.D.I)[58] in the British War Office. Kunosi reported about a meeting he had with British army psychiatrists who had, according to Kunosi, "some experience of certain psychological aspects of repatriation."[59] Kunosi went on to say that he had discussed the matter with his boss, Mary McGeachy, and that they had agreed to invite the gentlemen to join a small advisory group on psychological aspects of UNRRA's work.[60] Kunosi now asked the Under Secretary for War for his permission to "loan"[61] the military psychiatrists to UNRRA for the purposes of what was to become the Inter Allied Psychological Study Group (IAPSG). Lo and behold, the Under Secretary granted UNRRA's request and the Inter Allied Psychological Study Group was officially assembled.

The composition of the IAPSG, the choice of members, and their background as well as their experience is worth scrutinizing to better contextualize UNRRA's psychosocial strategy. The previous pages have investigated at length the reason for UNRRA's enhanced welfare strategy and its focus on the social aspects of displacement. The following pages are going to gauge why UNRRA chose this particular

58 Although his name is not provided in the sources, the person in question was presumably conservative party politician Henry Page Lord of Croft who served as Under Secretary of State for War from 1942 until 1945.

59 "Letter A. Kunosi to Under Secretary of State of War," September 6, 1944, United Nations Archives.

60 Ibid.

61 Ibid.

group of experts to consult them on psychosocial matters and are going to ask: what qualified their selection? What were these "experiences" Kunosi talks about?

The IAPSG consisted of five military psychiatrists, a social scientist, and the only two female members, a social worker and a child psychologist, under the helm of British psychiatrist and psychoanalyst John Rickman.[62] What seems random and almost disparate at first becomes more congruent after thorough research: the formation of the IAPSG was the result of several overlapping networks and was not a random selection of personnel. Up until now, the composition of the group, as well as its work, has been entirely neglected by research.

UNRRA chose the most prominent British psychoanalyst of his generation to head the IAPSG: John Rickman. John Rickman (1891–1951) collated and edited the *Report* and headed the IAPSG.[63] Besides his work as psychiatrist, he was an experienced editor of the prestigious *British Journal of Medical Psychology* and was hence closely acquainted with contemporary discourses in his field. Rickman was a pupil of W.H. Rivers (1864–1922),[64] the psychiatrist and anthropologist of late literary fame[65] most famous for his work with shell-shocked soldiers after WWI, while working at Fulbourn Hospital.[66] W.H. Rivers suggested Rickman undertake analysis with Sigmund Freud (1856–1939) in Vienna, which he did over the course of the 1920s. Rickman later took up analysis with Sándor Ferenczi (1873–1933) in Budapest and Melanie Klein (1882–1960) in London in the 1930s.[67] A Quaker himself, Rickman was the sole member of the IAPSG who had prior experience in the humanitarian field dealing with civilians, serving with the Friend's Ambulance in famine stricken Russia in 1920 after having conscientiously objected military service on the grounds of his faith.[68] Forrester and Cameron depict John Rickman as the "key architect" of psychoanalysis in Britain from the early 1920s to his untimely death in 1951.[69] Rickman was described a colorful, charismatic doctor who wore his characteristic Bolshevik beard with pride, reminiscent of his time in Russia during WWI. About his patients at Fulbourn Hospital he famously quipped: "The differ-

62 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 1.

63 UNRRA, "Notes on Interallied Psychological Study Group" (n.d.), 1.

64 Rivers had famously treated poet Siegfried Sassoon, who later produced some of the most impressive poems on the experience as a soldier during the war, by applying Psychoanalysis in lieu of common electro shock therapy to cure Sassoon's war trauma. Shephard, "A War of Nerves," xx.

65 The novel *Regeneration* by Pat Barker depicts the encounter between Rivers and Sassoon and traces the early therapy of war traumas. The novel became a bestseller in 1991.

66 Forrester and Cameron, *Freud in Cambridge*, 84.

67 Ibid., 85.

68 Shephard, "A War of Nerves," 258.

69 Forrester and Cameron, *Freud in Cambridge*, 122.

ence between me and the patients is that I have a key and they haven't."[70] Rickman was married to an American Social Worker and worked to become a well-connected figure in both psychiatry and politics. Forrester and Cameron described Rickman "as the backroom psychoanalytic organizer par excellence," which also could explain why UNRRA chose him to chair the IAPSG.[71]

With another war looming in the 1930s, Rickman exerted "considerable influence" on medical and public opinion, publishing 23 articles in *The Lancet* (the acclaimed medical journal) and advising the British government.[72]

At Northfield Military Clinic, a military hospital in Birmingham, Rickman worked with his former analysand Wilfred Bion (1897–1979) who would become famous for the modality of group therapy. At Northfield, Rickman and Bion were responsible for the first experiments in group therapy, an approach Rickman wished to see incorporated in his work with DPs.[73] In hindsight, it seems like Rickman's experience with soldiers deemed him, in the eyes of Kunosi and McGeachy, suitable to care for victims of the war even though the DPs were civilians. In any case, Rickman was one of the, if not the most, psychoanalytically informed psychiatrist of his generation in Britain and a well-connected one at that, having been a consultant to the British government for a number of causes.[74] His biographer, Pearl King, praised him an "artist in human relationships."[75]

John Rickman was joined in the IAPSG by Henry V. Dicks (1900–1977), Ronald Hargreaves (1908–1962), and Alexander "Tommy" Wilson (1906–1978), with whom he shared both personal and professional ties: they were close friends as well as colleagues (certainly not the norm in London's psychoanalytic circles, ripe with rivalry and resentment).[76] All four of them served as military psychiatrists[77] during World War II and were closely linked to London's eminent psychoanalytic Tavistock clinic. Founded as a clinic treating war neuroses in 1920,[78] the "Tavi" went

70 Ibid., 365.

71 Ibid., 369.

72 Ibid.

73 John A. Mills and Tom Harrison, "John Rickman, Wilfred Ruprecht Bion, and the Origins of the Therapeutic Community," *History of Psychology* 10, no. 1 (2007): 22–43, https://doi.org/10.1037/1093–4510.10.1.22.

74 King, *No Ordinary Analyst*, 1–85.

75 Ibid., 1.

76 Michal Shapira outlines the quarrels in the psychoanalytical circles of London at length; for the dispute between Anna Freud and Melanie Klein in particular see Shapira, *The War Inside*, 87–112.

77 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 1.

78 The "Tavi" was founded in 1920 at No. 51, Tavistock Square by military psychiatrist and shell shock doctor Hugh Crichton-Miller in order to treat war neuroses at home. Crichton-Miller also

on to become a hotbed for the marriage between psychiatry and public health in the interwar period and during WWII. [79] The clinic's psychiatrists subscribed to the view that their work with individuals was indeed of importance to broader society, echoing the mental hygiene movement, as has been described earlier.

During WWII, Tavistock became deeply entangled with the British war efforts; Hargreaves, Dicks, and Wilson were, besides their work at Tavistock, part of the Military Psychological Unit of the British War Office who later "loaned" them to UNRRA, and John Rickman had worked for the American Intelligence Service OSS during the war.[80] The connection to the Tavistock Clinic shows how UNRRA enlisted a set of psychiatrists who had a background in extending the psychiatric realm to political questions of their day, signaling the similar trajectory their work for UNRRA would take.

Besides the former director of the Tavistock Clinic Alexander "Tommy" Wilson, Ronald Hargreaves joined the illustrious group of British psychiatrists. Hargreaves was a close colleague of Rickman in both the Tavistock Clinic and in Northfield, which led him to develop psychological screenings methods for aspiring soldiers for the British army.[81]

In 1948, Hargreaves became the first director of the Mental Health Section of the newly founded World Health Organization. While at this post, Hargreaves was responsible for commissioning John Bowlby (1907–1990) in 1950 to draft his seminal WHO report on maternal attachment that would prove to be groundbreaking in developmental psychology.[82] Hargreaves was instrumental in advancing the

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sought to apply his wartime experience to the mental struggle of civilians, experimenting with new forms of therapy, with the Tavi soon becoming the clinic for psychoanalytically informed psychotherapy. C.G. Jung and Sigmund Freud gave lectures at the "Tavi" and enjoyed a fervent following among the psychiatrists working there. By the 1930s, the Tavi had become not only a well-respected place for training young psychiatrists, treating children and adults alike, but also produced continuously innovative research, conducting as the first institution in Great Britain research in psychosomatic medicine. During World War II, Tavistock became an important actor in the British military, forming an "invisible college" that worked on officer selection and conducted research on training, morale, civil resettlement, therapeutic communities, and group therapy: Tavistock psychiatrists had to play their part for Britain to win the war. Developing the look beyond the limits of the discipline of psychiatry, Tavistock psychiatrists went on to found the Tavistock Institute of Human Relations (TIHR) in 1946, an interdisciplinary group interested in the problems of organizational and societal change. Shephard, "A War of Nerves," 165–68.

79 Shapira, *The War Inside*, 16.

80 UNRRA, "Notes on Interallied Psychological Study Group," 1944, United Nations Archives.

81 Shephard, "A War of Nerves," 168.

82 Thomson, *Lost Freedom*, 74.

idea of a global mental hygiene movement that saw individual mental health at the root of healthy international relations, both in the IAPSG and at the WHO.[83]

In this tableau of accomplished psychiatrists, the figure of Henry Dicks has attracted the most attention in recent research.[84] During his tenure in MI5's Psychological Warfare Unit, Dicks analyzed one of the most prominent figures of the Nazi leadership elite, German Vice Chancellor Rudolph Heß, who, during a bout of psychosis, jumped over Scotland with a parachute and ended up in MI5's Psychological Unit and was interrogated by Dicks. Dicks deemed Heß "a greatly insecure man who had been somehow damaged in his earlier life."[85]

Dicks was convinced that the analysis of political phenomena could not be divorced from the individual psychological constitution of the totalitarian leaders and its population. He took the view that Nazism was to be understood as a generally problematic German psychic disposition, the "Nazi mind."[86] Here, another theme of the *Report* is foreshadowed: connecting a national ideology with the mental condition of its citizens.

The British psychiatrists were joined by Czech-born medical doctor Erwin Popper (1879–1955) and Dutch psychiatrist Dr. Joost Meerloo (1903–1976) of the Dutch Royal Army in Exile.[87] Popper had fled his home of the Czech Republic in 1939 and became a doctor at the Tavistock clinic, further proof of the influence of the Tavistock set at UNRRA. Popper during the war served as an advisor to the British army but was originally a trained pediatrician who discovered polio together with his colleague Karl Landsteiner in 1908.[88]

Joost Meerloo was the only member of the IAPSG, who himself had become a victim of Nazi terror, having briefly been imprisoned in a concentration camp. His experience shaped his research interests for all his life, popularizing the concept of "menticide": the techniques of brainwashing that are, according to Meerloo, inherent in political oppression.[89] Meerloo, in 1946, published his own composite findings on the psychological implications of the war and its aftermath, entitled "After-

83 British Medical Journal Publishing Group, "European Committee for Mental Hygiene," *Br Med J* 2, no. 4734 (September 29, 1951): 789–90, https://doi.org/10.1136/bmj.2.4734.789.

84 For a thorough look at the work of Henry Dicks, see Daniel Pick, *The Pursuit of the Nazi Mind: Hitler, Hess, and the Analysts*, first published in paperback (Oxford New York: Oxford University Press, 2014).

85 Ibid., 67.

86 Ibid., 44.

87 UNRRA, "Notes on Interallied Psychological Study Group," n.d., 1.

88 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 1.

89 Joost Meerloo, *Rape of the Mind: [The Psychology of Thought Control, Menticide, and Brainwashing* (United States: Pickle Partners Publishing, 2015).

math of Peace." In the study's preface he states his gratitude to Anna Freud with whom he conducted a weekly seminar during his exile in London during the war years, as well as to his "friends from the *Inter Allied Psychological Study Group*" who in Meerloo's account proved to be a support system, encouraging him to "see the puzzling daily difficulties in the high light of eternal science."[90] In "Aftermath of Peace" Meerloo dedicates a chapter to "Problems of Displaced Persons" in which he states, once again in line with UNRRA's strategy, the future of Europe will depend upon the "moral rehabilitation" of the DPs.[91] Here, as in several contemporaneous writings, "moral rehabilitation" is used synonymously with "mental rehabilitation.[92] Meerloo's findings prove to mirror those of his work with the IAPSG, stressing, again, the role of the family as the "crystallization point of every normal culture."[93]

American sociologist Edward Shils (1910–1995) was another member of the IAPSG. In addition to professional commonalities, he was a close friend of A.T.M. Wilson. Shils had ties to both the British and the American intelligence services during WWII. Like Rickman, Shils called for the DP camps to be seen as an experiment in group therapy[94] to enable rehabilitation.

Given the military psychiatry background of most of the members of the IAPSG, the intersection of psychiatry and politics starts to emerge. However, under the auspices of UNRRA, the psychiatrists of the IAPSG shifted gear: having gained extensive experience in working with (British) soldiers, they were tasked by the Allies to prepare for the psychological rehabilitation of uprooted civilians from several countries. The psychiatrists' military experience was presumably what Kunosi deemed "extensive experience," blurring the nuances that come with war considerably: the DPs, as was clear even in 1944, were a highly heterogenous group from several countries, of heterogenous socioeconomic backgrounds and with highly heterogenous experiences that were only united in their difference from the experience of a (shell-shocked) soldier: DPs were civilians. British soldiers were paid to fulfill their services while DPs were forcibly removed from their homes, had to renounce their cultural background, and oftentimes spent dreadful years in labor and concentration camps, losing family, friends, and oftentimes their will to live. It thus is no overstatement to conclude that the military psychiatrists working with UNRRA (potentially apart from Joost Meerloo) did not

90 Merloo, *Aftermath of Peace: Psychological Essays*, 8.
91 Ibid., 113.
92 Ibid.
93 Ibid., 115.
94 E. A. Shils, "Social and Psychological Aspects of Displacement and Repatriation," *Journal of Social Issues* 2, 3 (1946): 3–18, https://doi.org/10.1111/j.1540–4560.1946.tb02709.x.

have much, if any, experience in working with this specific group of multinational uprooted civilians. In fact, they needed a lot of professional empathy to make up for their lack of experience.

But it was not just the male networks that contributed to the IAPSG's composition. Another network proved to be defining: female Canadian and British social workers and psychologists.[95] Canada as one of the member governments of UNRRA was eager to contribute both substantial funds and personnel to UNRRA in order to establish itself on the postwar world stage.[96] Over the course of UNRRA's existence, many Canadians took central roles in the administration, like Mary McGeachy, bringing with them their networks from home. Canada's social care system provided UNRRA with highly trained and experienced social workers and nurses, as Armstrong and Reid have sketched extensively.[97] Marjorie Bradford brought her expertise in social work from Canada to UNRRA. Bradford and Gwendolen Chesters from Great Britain were the only females and the only social workers in the group, even though those who actually cared for DPs on the ground later were social workers and not psychiatrists. Here, the chasm between the male expert and the female practitioner becomes visible: it was the male medical experts who were dominant in compiling the reports, while the two women were allowed to provide their experience from the ground, almost as a token from the field.[98] Nevertheless, UNRRA recruited two experienced women at that. Gwendolen Chesters was a child psychologist who had worked as a social worker in Britain. She later produced a report for the British Home office on the state of Displaced Children.[99]

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95 For a look at a Canadian network within UNRRA, see Armstrong-Reid and Murray, *Armies of Peace*; Tarah Brookfield, *Cold War Comforts: Canadian Women, Child Safety, and Global Insecurity, 1945–1975*, Studies in Childhood and Family in Canada (Waterloo, Ontario: Wilfrid Laurier University Press, 2012).

96 For more on Canada's motives to support UNRRA, see Armstrong-Reid and Murray, *Armies of Peace*, 11–13. For Canada's role in UNRRA and Canadian women working for UNRRA, see Tarah Brookfield, *Cold War Comforts: Canadian Women, Child Safety, and Global Insecurity* (Waterloo, ON, Canada: Wilfrid Laurier University Press, 2012), 101–31, http://ebookcentral.proquest.com/lib/unigiessen/detail.action?docID=3284235.

97 *Armstrong-Reid and Murray, Armies of Peace.*, see here especially Chap. 4 "Personalities and Bureaucracies" and Part Three: Carrying Florence's Lamp: Canadian Nurses and UNRRA.

98 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 1.

99 Some Finding on the Needs of Displaced Children, report by Gwendolen E. Chesters, Children's Branch, Home Office London; Dorothy Macardle, *Children of Europe: A Study of the Children of Liberated Countries; Their War-Time Experiences, Their Reactions, Their Needs, with a Note on Germany*, 244.

Marjorie Bradford had been asked to join the IAPSG after she had previously conducted other preparatory reports for UNRRA.[100] Bradford was an experienced social worker and administrator who had her Canadian social work days as common background with Mary McGeachy. Armstrong and Murray describe Bradford as one of "Canada's most well-respected social workers" who had initially been employed to oversee the work of voluntary agencies working with UNRRA.[101] She later was responsible for the *Report on Special Needs of Women and Girls* (that is also going to be discussed in this study). Sources show that she criticized her male colleagues in the IAPSG for not including the experiences of women enough.[102]

After having looked more closely at the makeup of the IAPSG, it becomes apparent that the selection of personnel was less a matter of direct experience in dealing with uprooted populations and more of professional and personal networks. The European Regional Office of UNRRA was located close to the British War Office, with both staffs presumably socialized in the same political and military circles in the heart of London. Over the summer of 1944, victory over the Nazis seemed impending and presumably became a subject over lunches and get togethers in Britain's capital. This adds to the impression that in addition to the fact that Hargreaves, Dicks, Rickman, and Wilson were the most prominent British psychiatrists it was also a matter of networks and common touchpoints.

The tableau of prolific psychiatrists, psychologists, and social workers as well as their background and influence on British politics is sufficiently striking, upon further examination. It thus works to underscore UNRRA's decision to recruit these people as their advisors even more important and it shows the importance the psychological condition of DPs was given during the planning period of UNRRA. Their direct experience with uprooted people or even survivors of concentration camps, however, still is cloudy at best. As far as their biographies show, neither of the psychiatrists, maybe with the exception of Popper and Meerloo, seemed to have had any contact with uprooted people or concentration camp survivors prior to their engagement with UNRRA, but were all mostly concerned with the mental health of soldiers or, as was the case with Bradford and Chambers, with civilian children. The link between psychiatry and politics, however, is already inscribed in the selection of the members of the group and would become formative for the trajectory the Report's recommendations would take.

100 Welfare Division of the European Regional Office of UNRRA by an International Working Party of Social Workers, Psychiatric Social Workers, Doctors and Psychiatrist [sic], "Special Needs of Women and Girls."

101 Armstrong-Reid and Murray, *Armies of Peace*, 107.

102 Bradford, Marjorie, "Memo to Sir George Reid," October 25, 1944, United Nations Archives.

The Convergence of Psychiatry and Politics in Times of War

The majority of the members of the Inter Allied Psychological Study Group (IAPSG), who masterminded UNRRA's psychosocial strategy, belonged to a generation of psychiatrists that had been in training as doctors and psychoanalysts during WWI and in the 1920s, a time when the mental effects of WWI on soldiers evolved into new psychiatric paradigms. The war had raised new and important questions not only about the mental effects of war but also about the reflexivity of human nature, its perceived destructiveness, and the psychological conditions necessary for peace. Rickman, Dicks, Hargreaves, and Wilson had their professional coming-of-age period at a time when the effects of WWI, their treatment, as well as the prevention of another war stood at the center of the psychiatric discourse in Britain. These men belonged to the same scientific community of decorated military psychiatrists who conducted their formative training working with shell-shocked soldiers after WWI. They found important answers about human nature in psychoanalysis: both as an explanatory system and as a mode of treatment.[103] Some of them, especially John Rickman, operated at the junction of psychiatry and politics, advising the British government to maintain peace in the 1930s and prevent mass panic in the 1940s.[104]

The following pages are dedicated to dissecting the epistemes that shaped the direction the *Report on Psychological Problems of DPs* took. The coming pages will be centered around the questions: on what kind of body of knowledge does the *Report* rest? From which vantage point did the IAPSG look at DPs, and through which scientific and experiential lens?

Four of the five military psychiatrists of the IAPSG were British, and child psychologist Gwendolen Chesters hailed from Britain as well. This is the reason why the focus of the following pages lies on the British psychiatric community. Sketching the intellectual environment of interwar Britain will help to contextualize the trajectory UNRRA's psychosocial strategy took. The response of the IAPSG as manifested in the *Report* has been heavily influenced by their bodies of knowledge that were located at the intersection of psychiatry, politics, and domestic events.

103 For the discourse surrounding war neuroses immediately after WWI, see Shephard, "A War of Nerves," 143–205.

104 *King, No Ordinary Analyst.*

Shell Shock – Work with Traumatized Soldiers shifts Psychiatric Paradigms

Shortly after WWI, John Rickman took up a position as psychiatrist at Fulbourn Hospital near Cambridge to work with traumatized soldiers.[105] Rickman, who would decades later go on to become the head of the IAPSG and edit and collate the *Report*, had spent the war in Russia. He conscientiously objected to being recruited as a soldier and worked in Russia for the Quakers, treating peasants.[106] Rickman's stint at Fulbourn would prove to be formative not only for his career but also for the psychoanalytic community of Britain and for UNRRA's psychosocial strategy 25 years later: Rickman was confronted at Fulbourn with the mental effects WWI had on soldiers and was introduced to the modality that would accompany him for the rest of his relatively short life: psychoanalysis.[107] Faced with what was then called shell shock, Rickman sought counsel from legendary psychiatrist W.H. R. Rivers and became his student and friend.[108] Rivers was the leading shell shock psychiatrist of his time who resorted to his own version of psychoanalysis and was interested in Freud, no small feat at that time. Rivers famously employed "the talking cure," talk therapy, with shell-shocked soldiers, which made him very much ahead of his time.[109]

In the wake of WWI, the treatment of returning soldiers had become an all-consuming task for British military psychiatrists. It became clear that a new form of psychiatric suffering had emerged alongside the war: these soldiers exhibited a range of similar symptoms such as blindness, deafness, numbness, paralysis, apathy, and amnesia. This reaction was usually attributed to the explosion of a "shell" in the immediate vicinity of a soldier.[110] Cambridge psychologist C. S. Myers (1873–1946), a student of W.H.R. Rivers, had coined the term shell shock that had already been colloquial in army circles in 1915.[111] Myers related the mental and physical symptoms to the convulsion caused by the explosion of a shell.[112] These conceptualizations of the effects of the war on the mind of the soldier represents the starting point in the study of the psychological effects of war.

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105 Forrester and Cameron, *Freud in Cambridge*, 2.

106 Ibid., 366.

107 Ibid.

108 Ibid.

109 Shapira, *The War Inside*, 29.

110 Shephard, "A War of Nerves," 1.

111 Charles S. Myers, "A Contribution to the Study of Shell Shock: Being an Account of Three Cases of Loss of Memory, Vision, Smell, and Taste, Admitted into the Duchess of Westminster's War Hospital, Le Touquet," *The Lancet* 185, no. 4772 (February 13, 1915): 316–20, https://doi.org/10.1016/S0140–6736(00)52916-X.

112 Shephard, "A War of Nerves," 1.

Consequently, the shock of WWI and its hitherto unknown monstrosity, alongside its effect on both the soldiers and, later, society at large, presented the British psychiatric community with new and urgent questions about human nature, its resiliency, the nexus between external and internal experience as well as the root cause of why human beings would resort to industrialized means of killing each other.[113] The 1920s and 1930s were thus a time of psychiatric scientific innovation and saw an increase in importance psychiatry as bestowed upon as a discipline that could explain human behavior and war. [114] The British psychiatrists of the IAPSG conducted their formative training years during this time when the discourse surrounding shell shock, subsequent insights about the reflexivity of human nature (meaning the ways in which the psyche reacted to experience, or not), and the immersion of psychiatry into a broader societal discourse took place.

While psychiatrists such as C.S. Myers dealt with the psychiatric pathologies to the best of their ability in battlefield hospitals, a systematic psychotherapeutic shell shock therapy was certainly not the norm. The psychological repercussions of war became visible and started to enter the disciplinary discourse but a psychotherapeutic approach to healing was still in its infancy. So-called "war neuroses" remained a topic of much disciplinary contestation, mystique, and curious horror at the human cost of the war:[115] Two years after the armistice, 65,000 British soldiers "were drawing disability pensions for neurasthenia," with 9,000 of them still in hospital care.[116] The human cost of the war could not be ignored.

In the years following the cataclysm of the war, the visibility of its mental repercussions on (male) soldiers caused an, albeit slow, evolution of the perception of human nature in general and the normativity of masculinity specifically.[117] Debates on whether the affliction of shell shock was of a mental or somatic origin echoed the paradigmatic understanding of mental health at the time, deeming mental illnesses as caused by somatic or organic problems.[118] W.H.R. Rivers, himself at least a sympathizer with Freudian ideas, was adamant in his evaluation that

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113 Thomson, "The Psychological Sciences and the 'Scientization' and 'Engineering' of Society in Twentieth- Century Britain," 147–48.

114 Michael Roper, "Between Manliness and Masculinity: The 'War Generation' and the Psychology of Fear in Britain, 1914–1950," *Journal of British Studies* 44, no. 2 (April 2005): 343–62, https://doi.org/10.1086/427130; Bogacz, "War Neurosis and Cultural Change in England, 1914–22."

115 Shephard, "A War of Nerves," 5–21.

116 Bogacz, "War Neurosis and Cultural Change in England, 1914–22," 227.

117 For a look at male normativity in the wake of WWI, see also Joanna Bourke, *Dismembering the Male: Men's Bodies, Britain and the Great War* (Chicago: University of Chicago Press, 1996); Joanna Bourke, "Effeminacy, Ethnicity and the End of Trauma: The Sufferings of 'Shell-Shocked' Men in Great Britain and Ireland, 1914–39," *Journal of Contemporary History* 35, no. 1 (2000): 57–69.

118 Bogacz, "War Neurosis and Cultural Change in England, 1914–22," 240.

shell shock was of a "mental" origin, while many of his colleagues resorted to more seasoned estimations of mental afflictions as a lack of morality and will-power.[119] According to Bogacz, the repercussions of shell shock "threw into question some of the most fundamental inherited conceptions of how a man ought to act"[120] by contending that there were indeed limits to will-power if fear became too intense. Fear had entered the discourse and became a force that could no longer be disregarded. The normative notion of stoic manhood, of men who were always in control of their will-power, had been challenged by an uncontrollable feeling of fear that had afflicted the soldiers when faced with shells. The notion of fear and its, in some cases, insuperability revealed the reflexivity of human nature and its exposure to inner-psychic forces that were far greater than the conscious mind could control.[121]

A new conceptualization of the human psyche slowly was on the rise: it was not, once developed into adulthood, considered static and rigid, but highly malleable and reactive to outer experience, even during adulthood. This observation, which today seems self-evident, had a seismic effect on the discourse within psychiatry, and this debate continued well into the 1970s.[122] The knowledge about the "deep instability of subjectivity," as Roper put it succinctly, as disclosed by WWI, led to the emergence of a new understandings of the (male) self, and the instability and uncontrollability of the psyche and its processes shook not only the discipline of psychiatry but also British society to the core. [123] What Paul Lerner has shown in his seminal study on war neurosis of German soldiers is equally apt for the British case when he observed that the most salient aspect of war neuroses of men was its "ever-present political [...] dimensions."[124] What is important to note, however, is that these new and important insights on the self were derived not only from male subjects but from male soldiers. The reflexivity of females or children was not integrated into this discourse just yet. As the chapter on the psychiatric response to WWII will illuminate later, the psychiatric gaze on the effects of war would later be expanded onto civilians and, especially, children.

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119 Bogacz contends: "Victorian is almost synonymous with 'will power' (230). In the 19th century, decency, strength, virility and morality were closely related to morality, and mental afflictions were associated with a lack of willpower. Ibid.

120 Ibid., 246.

121 Shapira, *The War Inside*, 32.

122 For a thorough discussion about reparations for Nazi victims based on mental illness in the 1960s and 70s and the subsequent discourse in German psychiatry about a "link between symptoms and experience" see Herzog, *Cold War Freud*, 89–123.

123 Roper, "Between Manliness and Masculinity," 350.

124 Lerner, *Hysterical Men*, 2.

The first World War turned out to be a laboratory for British psychiatrists, presenting them with a new body of knowledge that not only advanced the state of their art but also bestowed their work with new legitimacy and (political) importance. It provided psychiatrists with "an exhilarating sense of hope and a promise of an expanded social role," as Nathan Hale put it.[125]

The experience of WWI left a lasting mark on British society, with the experiences of soldiers and their psychological pathologies slowly impressing themselves onto the societal outlook on the psyche and its reflexivity. Ironically, the plight of the impaired soldiers aided in loosening the stigma around mental health, and treatment in psychological clinics became more popular.[126] Until the outbreak of WWI, mental health issues had been stigmatized in Britain as failures of character and as sheer weakness.[127] With the mental effects of returning soldiers becoming more and more visible in Britain's postwar society, this paradigm started to shift. After the Great War, British psychiatrists were successful in convincing military authorities to view the mental effects of WWI not as disciplinary (read weakness and laziness) but medical and psychiatric problems. Herewith, the psychiatrists helped strengthen not only the discourse surrounding shell shock and also aided in the dispersal of the stigma surrounding psychological distress within society as a whole.[128] This goes to show that the British psychiatrists of the IAPSG came up professionally at a time when the understanding of the impact war had on the psyche took center stage within the British psychiatric community. Even though the shell shock discourse revolved around male soldiers, the conceptualization that war had an adverse effect on humans would shape the work done by the IAPSG for UNRRA.

All the while, psychoanalysis left the medical and social margins, becoming an important epistemology to conceptualize the workings of the self. Sigmund Freud's writings had first been translated to English in 1911[129] but only over the course of the war did they slowly gain traction in the psychiatric community, even if Freudian theories were still received ambiguously. Psychiatrists like Rivers and Rickman chose to seek answers to the many questions about human nature as posed by war in Freud's psychoanalysis. Later, John Rickman became one of the, if not the most, adamant proponents of Freudian theories from the early 1920s until his death in 1951.

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125 Hale, *The Rise and Crisis of Psychoanalysis in the United States*, 22.
126 Shapira, *The War Inside*, 29.
127 Shephard, "A War of Nerves," 49.
128 Shapira, *The War Inside*, 29.
129 Roper, "Between Manliness and Masculinity," 348.

Sigmund Freud's Psychoanalysis and the War

In 1920, W.H.R. Rivers is reported to have advised his mentee John Rickman: "If you are going to do anything in the field of psychiatry or psychology you must get analyzed."[130] As WWI dragged on and British military hospitals were flooded with shell shocked soldiers, some avantgarde psychiatrists had started to become interested in Sigmund Freud's continental new take on the human psyche, with Rivers and subsequently Rickman being two of them. These psychiatrists were interested in more than the phenomenological symptoms of shell shock and grappled with the question of what happened to the human subconscious during war and, on a meta level, why humans would go to war against each other in the first place. Psychoanalysis held a grand promise: it could deliver a system of explanation for human's propensity for war and introduce a new modality of clinical therapy. Sigmund Freud's (1856–1939) thoughts on the subconscious and his more controversial thoughts on children and women proved to be highly provocative, but also had the explosive power of a revolution along the lines of Newton and Darwin, as Forrester and Cameron put it succinctly.[131]

John Rickman followed Rivers' advice and started analysis with Sigmund Freud himself in Vienna around Easter of 1920.[132] Freud and Rickman established a relationship that lasted over the 1920s, with Rickman being one of the first English-speaking analysands on whom Freud allegedly "financially depended in the early 1920s."[133] For Rickman, this experience stuck: he became the central figure of British psychoanalysis and one of its "key organizers,"[134] leading him to influence the direction of the *Report* psychoanalytically.

Indeed, all of the psychosocial personalities discussed in my study, both those working with UNRRA and those working for JDC, were heavily influenced by Freud's understanding of human nature. Thus, it is imperative to take a look at the main trajectories of Freud's theories, as it pertains to a conceptualization of both war itself and the impact it was considered to have on the human psyche.

Having started to develop his theories in turn of the century Vienna, Freud had challenged positivist psychology with its focus on the conscious mind by introducing the studies of the unconscious into psychology. He initially focused on childhood sexuality, sexual drives, and its impact on the subconscious.[135] The events and repercussions of WWI challenged and ultimately advanced Freudian

130 John Rickman, "An Editor Retires," *British Journal of Medical Psychology* 22, no. 1 (1949): 1.
131 Forrester and Cameron, *Freud in Cambridge*, 2.
132 Ibid., 192.
133 Ibid.
134 Ibid., 125.
135 Shapira, *The War Inside*, 29.

psychoanalytic thinking towards aggression and violence. Freud regarded humans as subjects that more or less successfully managed their own inner-psychic forces of instincts and an ongoing inner conflict between life and death drives.[136] He conceded that humans were governed by conflicted unconscious life and death instincts, wishes, and anxieties that needed to be mediated by active repression, which could only be managed by a culture and civilization in peace.[137] In fact, for Freud, the repression of drives and instincts was the prerequisite for "cultures" and societies in peace, which he understood to be the product of repression.[138]

Faced with the news of the war, Freud's view took an even more distrustful turn.[139] A year into the war, in 1915, Freud published his collection of essays *Thoughts for the Times on War and Death* in which he reflected on war as outer manifestation of inner forces.[140] He refined his thinking in his 1920 work *Beyond the Pleasure Principle* where he challenged his own focus on childhood sexuality by emphasizing the importance of the death drive.[141] Freud conceded that war removed the effects of repression, which is necessary to manage the inner-psychic conflict between life and death drives. The undermining of repression, in Freud's interpretation, makes way for primordial destructive forces, as executed in war.[142] Freud understood the human psyche in its unmanaged form to be both irrational and potentially destructive, especially in times of war. War, in this reading, was regarded as outer manifestation of an inner-psychic war, the "war inside" as fellow Austrian and colleague Melanie Klein later put it.[143] His daughter Anna and John Rickman later adopted Freud's take on the destructive inner forces that could lead to war.

There is certainly no "one" exegesis of Freud, not least because he himself evolved in his theories self-revisingly throughout his lifetime and did not shy away from contradicting himself. What can be said, though, is that Freud regarded humans as deeply unstable beings, always straddling dangerous inner-psychic forces that could be unleashed in times of distress. War, thus, posed not only danger to the physical and mental well-being; it also, ultimately, challenged culture.

136 Ibid.

137 Ibid., 29–31.

138 For more on Freud's take on culture, see Sudhir Kakar, *Culture and Psyche: Selected Essays* (Oxford University Press, 2008), https://doi.org/10.1093/acprof:oso/9780195696684.001.0001.

139 Shapira, *The War Inside*, 30.

140 *Freud and Einstein, Zeitgemäßes über Krieg und Tod.*

141 *Freud, Beyond the Pleasure Principle.*

142 Ibid.

143 For more on Melanie Klein and her theory of the inner and outer war, see Shapira, *The War Inside*, 87–112.

For Freud, psychoanalysis was more than a therapeutic modality and a theory of human nature; he conceptualized psychoanalysis also as "a toolbox for cultural criticism," as Dagmar Herzog put it succinctly.[144] The psychoanalytic approach offered more than a salve for the soul under distress; it presented cultural observers with an attempt of explaining human's propensity for violence and war in the "age of extremes"[145] by linking inner struggles with outer struggles.[146]

However, psychoanalysis increasingly entered medicine as a therapeutic modality as well. Freud's analysis of the psychological causes and consequences of war shaped the body of knowledge of a generation of psychiatrists and social workers who were in training in the interwar period on both sides of the Atlantic.[147] Psychoanalytically informed talk psychotherapy became increasingly relied upon in the wake of WWI, with Rivers and Rickman being the pioneers in Britain.[148] Across the pond, psychoanalysis also gained traction, as Nathan Hale has illuminated.[149]At the American Smith College, psychiatric nurses were trained in psychoanalysis as early as 1919 in order to treat returning veterans. Freud himself held nurses and social workers in high regard, deeming them the "Salvation Army of psychoanalysis."[150]

To sum up, it can be said about the early 1920s that psychoanalytically informed psychiatry became an increasingly important system of reference not only to conceptualize the workings of the (distraught) psyche but also to understand and tackle the irrational forces that had led to the war. John Rickman acted as the central organizer of psychoanalysis' ascent as psychiatric modality in Britain, and Ben Shephard called Rickman "probably the most psychoanalytically literate man in England."[151] The choice of John Rickman as the head of the IAPSG shaped the direction the psychosocial rehabilitation strategy of UNRRA took and illustrates the degree to which psychoanalysis had become acceptable even in military psychiatry circles in Britain by the 1940s. As we will encounter later, when looking more closely on the conceptualization of the DPs' mental

144 Herzog, *Cold War Freud*, 2.

145 Eric J. Hobsbawm, *The Age of Extremes: The Short Twentieth Century, 1914–1991*, repr. (London: Abacus, 2011).

146 Shapira, *The War Inside*, 53.

147 *Forrester and Cameron, Freud in Cambridge, 100–203; Hale, The Rise and Crisis of Psychoanalysis in the United States.*

148 For more on Rivers' integration of psychoanalysis in his therapies, see W.H.R. Rivers, "The English Freud," in *Freud in Cambridge*, ed. Forrester and Cameron, 57–100.

149 *Hale, The Rise and Crisis of Psychoanalysis in the United States.*

150 Ibid., 23.

151 Shephard, "A War of Nerves," 258.

state we will see just how impactful of a moment psychoanalysis had in the mid-1940s in the wake of WWII.

War Inside Meets War Outside: Response of the British Psychiatric Community to WWII

When another war loomed over Europe, the psychiatrists of the IAPSG started to become interested in the effects of war on civilians. The experiential body of knowledge that had been accumulated in the work with male soldiers during and after WWI would now become applied and expanded onto civilians of all ages. The military psychiatrists of the IAPSG were again deeply involved with the treatment of soldiers who fought during WWII, but this work will not be repeated here as their later work for UNRRA focused on civilians.[152]

Over the course of the following pages, the conceptualization of the effects of WWII on civilians by the British psychiatric community will be outlined: John Rickman was at the forefront of communicating the mental effects the Blitzkrieg had on civilians; others, like Donald Winnicott, conceptualized the consequences of the war onto society as a family crisis; and Anna Freud derived path-paving insights on the effect of evacuation on children that would prove to be defining in the handling of children during and after wars for years to come.

As the clouds gathered once again over the continent and another war loomed on the horizon in the late 1930s, the psychological ramifications of a possible second war of the century and its social ramifications occupied the center of the British medical community's attention: John Rickman was the most prominent psychiatrist who educated the British government and the public about the psychological effects of a possible aerial war in 1938.[153] Rickman explained what happened within the human psyche in the event of a war, and he advised the British government in preventing mass panic.[154]

Rickman, like Sigmund Freud, linked the war inside – the conflicting drives and impulses – with a looming war outside. Rickman also advised the British government in the prevention of panic in the event of an aerial war: in an 1938 article in *The Lancet* Rickman outlined his (Freudian inspired) take on fear, anxiety, and panic and its dangers for society as a whole.[155] He argued that all civilians were

152 Rickman's work with soldiers during WWII has been sufficiently researched, see Ibid.

153 Shapira, *The War Inside*, 33–34.

154 Ibid., 53–54.

155 John Rickman, "Panic and Air-Raid Precautions: Notes for Discussion," *The Lancet*, originally published as Volume 1, Issue 5988, 231, no. 5988 (June 4, 1938): 1291–95, https://doi.org/10.1016/S0140–6736(00)89857–8.; Shapira, *The War Inside*, 54.

suspect to an inner war in their childhoods with unconscious infantile impulses and anxieties, or "internal wars," and were already at war, regardless of their outer circumstances: with themselves.[156] War, or aerial attacks, in his view were thus simply an outer manifestation of an inner war, and therefore a familiar predicament. To tackle these challenges on a societal scale and to avoid a feared generalized panic, Rickman recommended occupational therapy (providing patients with constructive activities) and a reliable supply of food, two measures he also wished to see implemented with Displaced Persons later.[157]

In the 1940s, like in the 1920s, again the mental effects of the war, this time on civilians, contributed to a shift in normativity and a further de-stigmatization of mental afflictions.[158] Facing patients gripped with fear and anxiety during his work in London Hospital, medical doctor Henry Wilson acknowledged that the new "normal" were those who admitted to being afraid of the air raids. He went so far as to conceptualize as "abnormal" those who pretended not to be afraid.[159] Fear and anxiety had become accepted as universal reactions to war. And modernity – with modern warfare being one of its new and scary manifestations – became accepted to produce anxiety.[160]

When suspicions of an air war became reality – the so-called Blitzkrieg – the mental effects of war on civilians were thrust onto the scene. The phenomenon of fear that had been so central with shell shock diagnoses had now reached civilians and the general public: what was once the shell-shocked soldiers in the trenches were now civilians who dreaded the enemy aerial attack.[161] Rickman conceded that fear and anxiety resulted in a dangerous irrationality that could negatively influence group dynamics. Anxiety, and subsequently a population in panic, came to be regarded a danger for the state and national cohesion: The state had to deal with the (perceived) loss of emotional control of its population to keep peace and order. A psychological affliction, anxiety, became a matter of state security, and psychoanalysts were instrumental in explaining the link between the presumably private sphere of the psyche and the state.[162] Rickman's enlistment as psychiatric advisor to the British government can be seen as a further indication of the ways in which psychiatry and politics converged in times of war: Rickman

156 Shapira, *The War Inside*, 54.
157 Rickman, "Panic and Air-Raid Precautions."
158 Shapira, *The War Inside*, 41–42.
159 Ibid., 42.
160 Ibid., 24–48.
161 Ibid., 27.
162 Ibid.

was essentially hired by the government to help control the population by avoiding mass panic.

The War as a Crisis of Family: British Psychiatrists and the "Evacuee Child"

After Britain had entered the war, British society was soon faced with the repercussions of families being scattered all over the country and the world as a result of the war: parents being drafted as soldiers and/or nurses, and children that were evacuated from the cities to avoid aerial bombings. Consequently, a host of leading psychiatrists and psychoanalysts, among them members of the IAPSG, conceded that the war effectuated a "crisis of family."[163] Evacuation of children in bomb-stricken cities, like shell shock in the wake of WWI, was a catalyst for innovation in research and treatment of the mental effects of the war, especially on children, and it served the popularization of psychoanalysis with its emphasis on unconscious processes.

In recent research the notion of WWII as a crisis of family and the stylization of the family as a bulwark against totalitarian tendencies has been prevalent.[164] This notion has regrettably been at times postulated without looking at the theoretical, psychoanalytically informed foundation of this narrative.[165] It is by delineating the psychoanalytic explanation of the "crisis of family" notion that the unlikely marriage between psychiatry/psychoanalysis and politics in 1940s Britain becomes palpable. The following pages therefore represent an attempt at tracing the psychoanalytic conceptualization of the effects specifically of WWII, especially on children, because there is a direct link between this conceptualization and the conceptualization of the plight of DPs.

When hostilities commenced on the European continent in September 1939, the British government initiated an elaborate scheme of evacuation to protect its citizens from impending air-raids.[166] Infirm citizens and children, sometimes

163 Cf. Shapira, *The War Inside*, 58.

164 Richard Bessel and Dirk Schumann, "Violence, Normality, and the Construction of Postwar Europe," in *Life after Death: Approaches to a Cultural and Social History of Europe During the 1940s and 1950s*, ed. Richard Bessel and Dirk Schumann, Publications of the German Historical Institute (Cambridge: Cambridge University Press, 2003), 1–14, https://doi.org/10.1017/CBO9781139052344.001; Pat Thane, "Family Life and 'Normality' in Postwar British Culture," in *Life after Death: Approaches to a Cultural and Social History of Europe During the 1940s and 1950s*, ed. Richard Bessel and Dirk Schumann, Publications of the German Historical Institute (Cambridge: Cambridge University Press, 2003), 193–210, https://doi.org/10.1017/CBO9781139052344.009.

165 Zahra, "Lost Children," 46–57.

166 For more on the evacuation scheme within British cities, see Geoffrey Field, "Perspectives on the Working-Class Family in Wartime Britain, 1939–1945," *International Labor and Working-Class*

with their mothers if they were not needed for work, were sent to the suburbs of cities or the countryside to evade the German bombs. Especially for working class families, who had to remain in the city to work and earn money, this meant the breaking up of families and the separation of mothers and children. Early on, psychiatrists were deeply worried about the psychic effects this might have and voiced their concern publicly: in 1939, prominent child psychiatrists Donald Winnicott, John Bowlby, and Emanuel Miller published a letter indicating the psychological effects of evacuation of children under five without their mothers, warning that a "severe disturbance of the development of the personality which may persist throughout life" could follow evacuation and that these early separations from the mother could more often than not lead to "delinquency" if unmediated by professionals.[167] Here emerges a recurring theme of legitimatization of early childhood interventions that was prevalent in the first half of the twentieth century: any intervention in early childhood, as was promoted by mental hygienists and the child guidance movement, argued that, if left to their own devices, children might turn out to be delinquent later in life.[168] Yes, children were perceived as in need of protection but they were also potentially dangerous if uncontrolled, a conceptualization of children we will encounter again when looking at the work with DPs later.

Children came to be seen as in need of protection and nurturance, especially in the first five years. The nurturance depended on the family, and specifically the mother. As Michal Shapira outlined convincingly, a number of prominent British psychiatrists contributed to a conceptualization of the family as the "basic unit of society" that would ensure a democratic community.[169] Endangering the family, by separating it, meant also endangering society. It is this exact understanding that shaped the strategy of UNRRA with DPs and the reunification of families as well. By separating children from their families during evacuation, the children's development and their future were perceived to be challenged, making them potentially dangerous for the future of societies.

History 38 (1990): 3–28, https://doi.org/10.1017/S0147547900010176; Sonya O. Rose, *Which People's War?: National Identity and Citizenship in Britain 1939–1945* (2006), http://www.dawsonera.com/depp/reader/protected/external/AbstractView/S9780191001901; Carlton Jackson, *Who Will Take Our Children?: The Story of the Evacuation in Britain 1939–1945*, First edition (London: Routledge, 2021), https://doi.org/10.4324/9781003212829.

167 John Bowlby, Emanuel Miller, and D. W. Winnicott, "Evacuation of Small Children," *British Medical Journal* 2, no. 4119 (December 16, 1939): 1202–3.

168 For more on the fear of juvenile delinquency, the mental hygiene movement, and the child guidance movement, see Nadesan, *Governing Childhood into the 21st Century*, 9–10.

169 Shapira, *The War Inside*, 54.

John Rickman, too, was deeply concerned, writing in 1939: "Even a situation of emergency should not be allowed to divert our attention from the basic needs of the mental and social development of our future citizens."[170] If the emotional stability of children was challenged, so was the coherence of society. The attentive parent-child relationship and the constant presence of the mother were, contrary to behaviorist writings of the 1920s and 1930s, stylized to be the harbingers of a democratic future.[171] A stable, warm family-environment was seen as vital for democracy, while strict child-rearing practices shaped by rigidity were associated with "Prussianism" and, ultimately, totalitarianism.[172] The German family represented everything the modern British family had to avoid: steep hierarchies with the father at the top and an environment of rigidity and frigidity. As Cathy Urwin and Elaine Sharland put it: "Democracy as an ideal was linked to a family shaped around a view of what the German family was not."[173] The social unit of the family was constructed as a safeguard for a peaceful society and any danger to it was to be taken seriously, whether by evacuation or neglect through parents.

Psychoanalysis, with its explanatory models derived from the subconscious, contributed immensely in popularizing the importance of the family. It became so popular that Donald Winnicott (1898–1971) had his own show on the BBC where he essentially gave parenting advice.[174] Winnicott lectured on the BBC between 1943 and 1966, shaping Britain's discourse on child-rearing.[175] His shows not only served the popularization of psychoanalysis as the go to explanatory model of the mysteries of childhood development, but also promoted gendered concepts of family relations: Winnicott stressed the importance of the mothers, with the fathers being of secondary importance. He usually addressed mothers directly with shows titled i. e. "Why Does Your Baby Cry?" and famously coined the term "deprived mothers" for mothers who had to leave their children for evacuation purposes:[176] it was not only the child that was deprived of the mother, it was the mother that was deprived of the child, stripped of her perceived natural affinity to their children. Consequently, Winnicott, too, was highly critical of the evacuation scheme, dedicating a whole show to "Problems of the evacuated child" in

170 Rickman, "Evacuation and the Child's Mind."
171 Shapira, *The War Inside*, 134–37.
172 Cathy Urwin and Elaine Sharland, "From Bodies to Minds in Childcare Literature: Advice to Parents in Inter-War Britian," in *In the Name of the Child: Health and Welfare, 1880–1940* (New York: Routledge, 1992), 192.
173 Ibid.
174 Shapira, *The War Inside*, 119–37.
175 Ibid., 112–38.
176 Ibid., 119–37.

February 1945.[177] While Winnicott became the face of family-oriented child-rearing practices he acted on his own ideas when he set up wartime hostels with his wife, social worker Clara Britton, for "difficult" evacuated children. They organized the hostels like substitute families, upholding the normative family setup.[178]

Psychiatrists like Rickman and Winnicott promoted the importance of the family for the development of children by legitimizing it through the theoretical framework of psychoanalysis, which saw the family as the workshop of any healthy development. Here, again, psychoanalysis served as an explanatory and legitimizing model for the psychiatrists' perspective, much more than as an actual therapeutic modality. Insights derived from psychoanalysis served as the theoretical underbelly to a stylization of the family as the most important social unit, which had an effect on the dealings with children and UNRRA's policies later.

"War in the Nursery" – Anna Freud at the Hampstead War Nurseries

Anna Freud (1895–1982) conducted the first academic study between 1940 and 1943 on the effects of war on children at the Hampstead War Nurseries. Her work was widely received, certainly by the IAPSG and Dr. Paul Friedman, psychiatrist for the Jewish Joint Distribution Committee (JDC), who will be discussed in part two of this study. Friedman spent several weeks with Freud to discuss her observations.[179]

Anna Freud's project was unique to the extent that she combined psychoanalytic observation with practical caring for war-torn children.[180] She submitted monthly reports to her donors, the American Foster Parents Plan,[181] compiling a set of sources that have barely been studied in historical research[182] but that are the foundation of this chapter.[183] Her conceptualization of the effects of the war on the children's psyche proved to be defining for the way children in war were treated for decades to come. Even though Anna Freud is usually mentioned in historical research when it comes to children and war, very rarely, however, is

177 Ibid., 128–30.

178 Ibid., 63–64.

179 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 2.

180 For more on Freud's observational innovations, see Nick Midgley, "Anna Freud: The Hampstead War Nurseries and the Role of the Direct Observation of Children for Psychoanalysis," *The International Journal of Psychoanalysis* 88, no. 4 (August 2007): 939–59, https://doi.org/10.1516/V28R-J334–6182–524H.

181 Freud and Burlingham, *Infants without Families*, xvii.

182 With Michal Shapira's work being the exception Shapira, *The War Inside*, 66–77.

183 *Freud and Burlingham, Infants without Families.*

her work given much analytical attention in order to make sense of her theoretical observations.

In October 1940, Anna Freud and her partner (Tiffany) Dorothy Burlingham acquired two houses in Hampstead to set up a nursery for the care of children "whose family has been broken up,"[184] as they put it. The project was financed by the American Foster Parents Plan for War Children in NYC. Their goal, in Burlingham's and Freud's own words, was to "re-establish for the children what they have lost: the security of a stable home with its opportunities for individual development."[185] Freud's charges were children with complex war experiences: almost all of them had experienced air-raids and had been separated from their families.[186] Very few children had living mothers. Those who had were allowed to be visited by them as often as possible.

In service of a concise overview of Freud's insights derived from her observations that shaped UNRRA's work with DPs later, a description of the daily work at the nursery will be circumvented in favor of a summary of her insights that shaped UNRRA's work with DP children. Central to Anna Freud's insights from the nurseries was the emphasis on aggression within the child's psyche. In a sense, she thereby counteracted the current view of children as innocent beings[187] that were in need of protection due to their perceived innate proclivity for peace and guilelessness.[188] But Freud's observations were in line with John Rickman and her father, Sigmund, who saw humans suspected of a constant inner war of drives. Only Anna Freud postulated that these drives were there from the early beginnings in a human's life. She recounted that regardless of an actual outer war, there was a war waging "in the nursery"[189]: between and within the children. In the report of her work, Freud describes how the children in her care were biting and pulling at each other in the playpen "without regard for the other child's unhappiness."[190] Between the ages of one and five these inner aggressive forces were unmediated and later repression would, ideally, moderate them. Freud was concerned that the actual war "outside" would mirror the inner war of the

184 Ibid., xxv.
185 Ibid., xxv.
186 Ibid., 5–7.
187 For a sound analysis of the stylization of children as innocent "angels" not on the British case but in Christianity in general, see John Wall, "Fallen Angels: A Contemporary Christian Ethical Ontology of Childhood," *International Journal of Practical Theology* 8, no. 2 (January 25, 2004), https://doi.org/10.1515/ijpt.2004.8.2.160.
188 Freud and Burlingham, *Infants without Families*, 160.
189 Ibid., 162.
190 Ibid., 161.

children, signaling to them that aggressiveness was in fact "normal" and need not be repressed. She argued: "The real danger is not that the child, caught up all innocently in the whirlpool of the war, will be shocked into illness. The danger lies in the fact that the destruction raging in the outer world may meet the very real aggressiveness which rages in the inside of the child."[191]

It was essential for children to learn to repress their drives and wishes but this could become impossible if the outside world mirrored these drives, according to Freud: "It must be very difficult for them to accomplish this task of fighting their own death wishes when, at the same time, people are killed and hurt around them."[192]

Freud concluded that children needed to be protected from war not because of their innate innocence but because of their own inner aggression: "Children have to be safeguarded against the primitive horrors of the war not because horrors and atrocities are so strange to them, but because we want them at this decisive stage of their development to overcome and estrange themselves from the primitive atrocious wishes of their own infantile nature."[193]

Here the perception of children who, if unattended, could become potentially dangerous, is echoed: the careful rearing of children was once again tied to a peaceful future. Freud outlined the "psychoanalytic" goal of their work at the nurseries: "Our aim is to educate the children toward a mastery of their drives, not based on repression [...] but based on a very gradual transformation and redirection of instinctual forces." [194] The mastery of the drives was seen as the prerequisite for the ultimate objective: "social adaptation"[195] in a world without war, in a peaceful democratic society whose prerequisite it was for individuals to manage their inner aggression. The exact same sentiment was later applied to DP children as well in the *Report*.

Anna Freud continued to contradict widespread assumptions. Generally, children were believed to be traumatized by the bombings just like soldiers were during WWI. Upon observation of children that had survived multiple bombings, she concluded that the children in her care were not traumatized by the bombs specifically. Freud conceded that war became normal to the kids. What was, however, traumatizing to the kids, according to Freud, was the reaction of the parents to the bombings. If parents showed anxiety or terror in the face of the bombings, children would become deeply rattled. That would turn out even worse if children

191 Ibid., 163.
192 Ibid.
193 Freud and Burlingham, *Infants without Families*, 163.
194 Ibid., 479.
195 Ibid.

were separated from their parents and their family life broken up. She conceded that placing children out of physical harm's way would nevertheless mean even greater emotional harm. In Freud's view, the bombings were much less harmful to a child's psyche than evacuation, which usually meant separation from the family.[196]

Freud thought separation from the mother to be especially detrimental. She deemed fathers not as present anyways, thus highlighting the importance of the close bond between mother and child.[197] To satisfy the "need for individual attachment" as she put it, the Hampstead War Nurseries were organized into "six small family groups of about four children each" with one "substitute mother" each.[198] Interestingly, there is no mention of a substitute father. Modelling a family setup in nurseries and orphanages was not seldom during the 1940s, only that usually the heteronormative setup with a mother and a father was usually favored, like in Donald Winnicott's wartime hostels. In DP camps later, as the example of Kloster Indersdorf will show, the modelling of family setup was also relied upon.

As this study will illuminate later, the IAPSG subscribed to this understanding of displacement as well: the central hurt of displacement, or evacuation, was not the dangers of war itself, but rather the loss of attachment to the family and, in the DPs' case, their places of origin.

Anna Freud and her team aimed to raise anxious children into peaceful adults who abstain from aggression and war. Her theoretical observations prove highly influential onto those who worked with DPs in DP camps. The IAPSG was aware of Freud's work, with at least Rickman and Freud knowing each other from psychoanalytic circles in London. The conceptualization of the mental strain posed by displacement through war as outlined in the IAPSG's *Report* is congruent with Anna Freud's insights, as this study will show later. Greta Fischer, the director of Kloster Indersdorf, was in touch with Anna Freud as well, as was Dr. Paul Friedman, the JDC psychiatrists that will be discussed in part two of this study.

After the Hampstead War Nurseries were closed in 1945, Freud opened up the Bulldog Banks Project where she cared for six child survivors of the concentration camp Terezin. Since Freud's work at Bulldog Banks was done after the *Report* of the IAPSG was compiled, this work will not be illuminated here in more detail.[199]

196 Ibid., 173.
197 Ibid., 175–93.
198 Ibid., 220.
199 For more on the Bulldog Banks Project, see Shapira, *The War Inside*, 77–86.

Conclusion on the Convergence of Psychiatry and Politics in Times of War

The aim of this subchapter was to investigate from which body of experience and knowledge the members of the IAPSG looked onto the DP experience, and why they conceptualized the plight of DPs the way they did. Upon closer look there emerged five major insights:

1. The experience of "shell shock" introduced the mental effects of war into the psychiatric discourse and shaped a generation of psychiatrists who were later recruited by UNRRA.
2. UNRRA chose John Rickman, Britain's leading psychoanalyst, as the head of the IAPSG, who operated at the intersection of psychiatry and politics in the 1930s and 40s.
3. Freudian inspired psychoanalysis and its explanatory framework sought to explain human's propensity for war through the subconscious. The IAPSG subscribed to this reading of the psyche, understanding the outer war as a manifestation of an unmitigated inner war, linking the management of inner destructive forces with peace.
4. Within the British psychiatric community, the understanding of war as a family crisis that could only be remedied by reuniting families or modelling substitute families was prevalent, foreshadowing UNRRA's take on families.
5. Anna Freud's pioneering work with children would prove to be defining for the psychosocial rehabilitation of DPs. Anna Freud, too, emphasized the importance of attachment to primary care persons, only that she, contrary to her male colleagues, emphasized the mother as the most important bond in the life of a child. Generally, she too promoted the importance of biological bonds and thus the family, playing into the importance of the family in Western liberalism during the 1940s.

After having outlined the epistemology of the IAPSG as an expert community it becomes clear that UNRRA recruited individuals who operated at the cutting-edge of their discipline, focusing a lot of their efforts on thinking about the individual psyche with a view towards domestic and international politics. The recent pages also have shown how psychoanalysis became an important explanatory model for psychiatrists conceptualizing the effects of war on the psyche, who would later be enlisted by UNRRA.

In fact, according to Mathew Thomson, the mid-century presented a window of time in which psychosocial expertise experienced a "heyday"[200] within interna-

200 Thomson, *Psychological Subjects*, 202.

tional organizations.[201] British psychiatrists, among them Rickman, Dicks, Hargreaves, and Wilson, were at the forefront of taking the nexus of mental health and politics towards the international stage, contributing to the World Health Organization (1948)[202] and the World Federation of Mental Health[203] (1948) later.[204] Their contribution to the psychosocial strategy of UNRRA, which preceded their later engagement, however, has up until this study been neglected in research.

After the experiential body of knowledge of the members of the IAPSG has been explored, a close look will now be cast at the actual conceptualizations the IAPSG drew up in anticipation of work in the DP camps.

3.3 Theorizing the Road to "Normality"

In June 1945, UNRRA's European Regional Office was presented with two reports that outlined UNRRA's psychological approach to DPs: The *Report on Psychological Problems of Displaced Persons* (*Report*), compiled by the IAPSG and Special Needs of Women and Girls (SNWG), drawn up by an International Working Party (IWP). The IWP was a group that consisted mostly of British Social Workers, psychiatric social workers, doctors employed by UNRRA's health division, and one psychiatrist, as well as several delegates from France and Poland.[205] Both reports were to serve as guidelines for UNRRA's welfare workers. The following chapter is dedicated to a close reading and analysis of the two sources, with the focus resting on the decidedly more in-depth *Report:* the 44-typewritten page long *Report* provides an in-depth insight into the theoretical, epistemic, and psychoanalytic framework UNRRA's psychosocial strategy rested upon, while the 15-page long *SNWG* provides a specialized look on gendered modes of rehabilitation of "women and girls."

After having outlined the epistemic background of the members of the IAPSG in the previous chapter, this part of the study is structured along four major over-

201 Thomson, "The Psychological Sciences and the 'Scientization' and 'Engineering' of Society in Twentieth- Century Britain," 148.

202 Wu, "World Citizenship and the Emergence of the Social Psychiatry Project of the World Health Organization, 1948–c.1965."

203 Eugene B. Brody, "The World Federation for Mental Health: Its Origins and Contemporary Relevance to WHO and WPA Policies," *World Psychiatry: Official Journal of the World Psychiatric Association (WPA)* 3, no. 1 (February 2004): 54–55.

204 Thomson, "The Psychological Sciences and the 'Scientization' and 'Engineering' of Society in Twentieth- Century Britain," 148.

205 Welfare Division of the European Regional Office of UNRRA by an International Working Party of Social Workers, Psychiatric Social Workers, Doctors and Psychiatrist [sic], "Special Needs of Women and Girls," 1.

arching questions: how did the authors of the sources conceptualize what happened to the DPs psychologically and how did they relate the anticipated mental effects of displacement to their existing body of knowledge on the effects of war? What was the goal of the rehabilitation work? How was this goal to be achieved, and through which practices?

The *Report on Psychological Problems of Displaced* Persons is the first comprehensive guideline on the psychological ramifications of the war on its victims, commissioned by the major humanitarian agent in postwar Europe, UNRRA. It provides a valuable insight not only into the reading of the mental constitution of DPs of the time but it is also the first testimonial of the discourse on the mental effects of the war in a humanitarian organization.

Drawing from their professional experience and the body of knowledge members of the IAPSG accumulated in the interwar years, the authors outlined the psychological repercussions of the war they expected and the way they conceptualized the mental effects of (the) war. In the second part of the *Report*, the authors suggest specific practices that are to be implemented in the work with Displaced Persons.

Considering the value of this source it is important to keep in mind its scope and limits: the *Report* represents a testimony of the ways in which psychosocial experts anticipated and conceptualized the mental effects of the war on DPs in theory; it is thus a speculative text that does not allow any insight into the practicality of its suggestions. The *Report* was drawn up in the fall of 1944, before war's end. The impact of the *Report* on the ground and on welfare workers active with DPs in the camps cannot be measured and could not have been integrated into the *Report*. In fact, no sources by welfare workers give any hint into whether they have studied the material before their tenure in the camps. Administrative sources, however, show that the guideline became sought-after in the immediate postwar months: in August 1945 (a month after the guideline was printed) 600 copies had been distributed, with more copies being requested.[206]

The following part of this study approaches the understanding of this source by firstly tracing the theoretical groundwork the conceptualization of the DPs mental suffering rested upon, and investigating how the IAPSG looked at the heterogeneity of the DP group as well as how they conceptualized the situation of displaced children. It will then go on dissecting the specific idea the *Report* suggests of psychological rehabilitation and how the rehabilitative goal was framed. After having established the theoretical basis of the *Report*, the reader will be presented with a summary of the practical suggestions for work in the DP camps, preparing the DPs

206 UNRRA, "Notes on Interallied Psychological Study Group" (n.d.), 45.

to "come home,"[207] as the *Report* frames it. Last, but certainly not least, the end of this part of the study will attempt to widen the lens from the psychoanalytical "nitty gritty" to the IAPSG's aspirations of connecting the psychological groundwork with international mental hygiene: considering psychosocial work with individuals as the groundwork for world peace and international cooperation.

"Planning not for Bodies but for Human Beings"[208]

As has been established previously, when the quarrels surrounding UNRRA's precise remit were introduced the fact that psychosocial experts were enlisted signals the extension of UNRRA's humanitarian intervention towards the psychological aspects of war and displacement. This extension is made explicit several times in the *Report.* In fact, the integration of what is here called "psychological understanding" in the planning is tied directly to the success of the humanitarian project in general. The *Report* states:

> Administrators are sometimes accused of forgetting that they are planning not for bodies but for human beings. They must not let the pressures of relieving material needs obscure the fact that psychological understanding is not only a humanitarian theory but also a practical necessity. Unless social planning is based on some understanding of the specifically human problems of the people concerned, good results are likely to be rare, and disturbingly temporary.[209]

The quote shows how the IAPSG was convinced that there could be no "successful" humanitarian project without the integration of psychological considerations. We are left in the dark about what they considered to be a "successful" endeavor with "good results" but we can glean that this argument was also a strategy of legitimizing their points of view. What is more, it points us towards the motivations behind compiling the report (apart from the fact that is was commissioned).

It turns out the way the motivation for the detailed report is framed is twofold: 1) optimizing the help DPs would be provided with on the ground; and 2) the faspiration claim of influencing and improving human coexistence across borders. Looking closer at the way the motivation for the report is framed provides the reader with a hint of the trajectory of the IAPSG's strategy in general. The *Report*

207 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 34.
208 Ibid.
209 Ibid.

states, "Assisted by our knowledge of what has been inflicted upon these people we must try to see them as human beings, as personalities, who react to the events of life in varied ways. Knowing some of these reactions beforehand, it will be much easier to judge their needs and to help them."[210]

This quote clearly states the importance the IAPSG wished to see applied to treating the DPs as individuals with individual reactions to their experience, an aspiration that certainly did not have an entire consensus with UNRRA's administrative ranks, as the previous chapters have outlined. What has been purported repeatedly in secondary literature on the psychosocial rehabilitation strategy of UNRRA is echoed here: the emphasis on individuality, as Tara Zahra argued.[211] The above quote shows that the IAPSG advocated for seeing humans with their individual coping strategies and not relying on simple solutions. This excerpt from the source furthermore shows how the authors of the *Report* were adamant that thorough preparation of the welfare workers regarding what happened to DPs psychologically and what could be expected of them was crucial for the most optimized assistance provided by UNRRA, keeping in mind that only a small minority of the welfare workers were previously trained in psychology or social work.

The following quote from the *Report* reveals a rather idealistic slant of the source in general. It broadens the perspective towards the more meta level approach of the IAPSG: the far-reaching aspiration not only of the report but of the authors regarding the contribution of their discipline for future peace and harmonious coexistence. The *Report* states,

> In the application of human affairs of [...] modern psychology and sociology there lies the possibility of improving the quality of human relationships, between individuals and between groups. Perhaps we may thus find some hope of minimizing these human discontents which lead to the massive tragedy of modern war.[212]

This quote reveals one of the major through lines of the *Report:* the broad aspiration of the psychosocial work with Displaced Persons as framed by the IAPSG: the prevention of future wars by tending to the distraught psyches of (war-stricken) individuals. This quote is crucial because it suggests that working to improve the mental state of DPs for the IAPSG always had aspirational and political connotations beyond the improvement of individual lives, not just subtly, but clearly stated

210 Ibid., 18.

211 For instance Zahra, "The Psychological Marshall Plan," 48.

212 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 34.

and in line with the psycho-political approaches of the institutions and thought systems of the authors of the Report. The aspiration of the international mental hygiene movement as outlined earlier is clearly alluded to here: one of its core tenants was the assumption about the conditionality of mental illness and peace, and the prevention of mental disease and societal conflict like war. The quote echoes again, as outlined in the chapter on the epistemology of the authors of the *Report*, the political importance psychology was bestowed with in the mid-century. The individual mental state was conceptualized as decidedly political, so working on or improving this mental state was also political as will be discussed later in this chapter.

Meditating briefly on self-legitimization strategy of the *IAPSG* and its objectives, as framed within the source, has been a useful prelude to a deep dive into the *Report*, as it has already revealed the two main trajectories the *Report* worked towards: optimizing the DPs' treatment for a more successful humanitarian endeavor and preventing future wars.

How the authors of the *Report* made sense of the psychic suffering of the DPs and how they explained the psychological repercussions of displacement on a theoretical level will be explored next.

Hurt Children: Theoretical Foundation of the Report

Now that we have established the legitimization strategy of the IAPSG and its objectives we will now consider the theoretical foundation of the *Report* and the ways in which the IAPSG conceptualized the DPs' mental suffering. In the early parts of the *Report* the authors devote a considerable number of pages towards conceptualizing the psychic hurt that resulted from displacement by employing psychoanalytic theory.[213]

The core psychic hurt inflicted upon displaced individuals was considered as being "cast out" from the community, being stripped of its love and attention, letting the uprooted, no matter their age, fall back ("regress"[214]) onto a childlike developmental stage that was considered as threatening future peaceful coexistence of people and between nations. Thus, the *Report* suggests conceptualizing all DPs, no matter their age and their experience during the war, as "hurt children."[215]

213 Ibid., 1–5.
214 Ibid., 3–4.
215 Ibid., 13.

According to the authors, all humans were united by a deep need for belonging – the need towards affiliation with family and a community. In the words of the *Report:* "The need to be loved and valued – to have a place in a family and a community – and to possess affectionate relationships with friends, is perhaps the deepest of all human needs."[216]

Consequently, the defining emotional constituent of displacement was considered the feeling of being "cast out" from family and community.[217] The displaced individual, according to the *Report*, loses their all-important attachment that helps them make sense of life, leaving them alone, unprotected, and deprived of the necessary affection by the community. This deprivation of love and belonging, according to the *Report*, throws an individual back onto "primitive," "childlike"[218] behavior, a dynamic called regression. This dynamic was considered as opening the door for all kinds of detrimental consequences both for the individual psyche of the displaced and of communities at large.

It is here that the distinctly (Sigmund) Freudian conceptualization of the psychological effects of war, with his theories of regression and repression come to the forefront. On the initial pages of the *Report* the authors embark on a robust summary of psychoanalytically informed developmental psychology, as informed by both Sigmund and Anna Freud. The *Report* states: "The effective defences [sic] which civilization has erected within man against his crude instinctual drives rest almost entirely upon the feeling of being loved and valued by his fellows."[219]

The deprivation of love and of being valued was considered to be leading to the removal of the most important mechanism that enables maturity as well as coexistence in a peaceful community ("civilization" in the rhetoric of Freud): repression of the mentioned "crude instinctual drives." Appearing to be striving towards simplifying the complex psychoanalytic theory,[220] the authors describe this as the "drive towards self-preservation, power or mastery over the environment, need for love, including need to give and receive love, drive towards reproduction."[221]

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216 Ibid., 2.

217 Ibid., 3.

218 Ibid., 4.

219 Ibid., 5.

220 Drive theory is a complex aspect of psychoanalysis. Sigmund Freud was the first, but not the only, psychoanalyst who advocated for an analysis of human drives. Even though he revised his Triebtheorie repeatedly, he organized his thoughts around the dichotomy of Eros and Thanatos (Life/Death drives) but also sexuality and aggression. Freud, *Studienausgabe: Triebe und Triebschicksale. (1915).* For more on Freud's theories, see Chapter "Drives and their Vicissitudes," in Peter Gay, *Freud for Historians* (New York: Oxford University Press, 1985), 88–99.

221 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 1–2.

The IAPSG appears to have drawn closely from Freud's seminal 1929 study on the interrelation of civilization and the repression of drives, "Civilization and its Discontents."[222] Even though there is no direct quote of Freud's study, the theory seems to prove the impression that the IAPSG's views were shaped by the book. On page four of the *Report* the authors elaborate on their understanding of drives as the most powerful motor that has "built our civilization, our culture, and our art, [...] they are the result of our instinctual forces seeking expressions through new paths [...],"[223] replicating the Freudian explanation of culture as created by the successful containment or canalization of drives, as Freud elaborated in "Civilization and its Discontents." There, Freud outlined his view that "civilization"[224] is based on the repression of drives. In order to have a peaceful society, instincts had to be curbed. As Stephen Frosh put it succinctly, in reference to Freud: "civilization, often considered the highest expression of human existence, is built on the denial of everything that we really want."[225]

WWI had shown that war removes repression of drives, so the IAPSG assumed. The *Report* expected DPs, due to their wartime experience, to have been thrown back onto childhood attitudes ("regression") because repression had been removed, making adult DPs act like "hurt children." The *Report* states: "[Their behavior] may surprise us unless we realize that we are dealing with 'hurt children' whose world has let them down, adults whose sense of security and confidence has been shattered."[226]

Besides the deprivation of a feeling of being loved and valued, the *Report* points towards another important constituent that contributes to the mental decline of the uprooted: the dependence on malevolent authority figures, which was considered as contributing to throwing adult DPs back onto the level of children. According to the IAPSG the process of growing up, hence the process of successfully learning to repress drives, depends in large part on the presence of benevolent authority figures, ideally parents, who provide the container in which a child can develop, repress, and become independent. As the *Report* elaborates:

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222 *Freud, Civilization, society and religion.*

223 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons."

224 Civilization, in Freud's own words, can be summarized as: "The whole sum of the achievements and the regulations which distinguish our lives from those of our animal ancestors and which serve two purposes – namely to protect men against nature and to adjust their mutual relations." Freud, *Civilization, society and religion*, 278.

225 Frosh, *The Politics of Psychoanalysis*, 41.

226 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 13.

> When authority – first the parent, then the 'state' or 'world order' – is regarded by the individual with respect, then the equilibrium between instinctual pressure and control is fairly easily maintained. When this authority fails in benevolence or becomes actively hostile, then the mainstay of self-control breaks down, that is [...] respect and affection for authority and for others ceases to be effective. This is, no doubt, the reason for the deterioration of all forms of civilized restraints during the war and on any occasion of great danger, for at such times the edifice built on the assumption of the benevolence or, at the worst, the neutrality of the world, is undermined. In these circumstances primitive behaviour [sic!] emerges.[227]

This behavior – adults behaving like "hurt children" – is called regression and goes along with what is considered "primitive" habits and no willingness to take responsibility for oneself and others, a process that subconsciously aims at compensating for the loss of love and safety.[228] The IAPSG clearly makes use of Freud's theories here. Examples of this kind of "primitive behaviour" were considered to be "stealing," "looting," "greediness," "black-marketing," and "aggressiveness."[229] Other manifestations of psychic suffering are listed as "bitterness and touchiness,"[230] constant suspicion as the world had been learned to be understood as "tainted with ill-will,"[231] "generalised [sic!] and embittered withdrawal from social relationships which is known as depression,"[232] suicide, and "forced pleasure seeking in the form of unaffectionate sexual promiscuity or of alcoholism."[233]

The IAPSG considered any behavioral challenges as "primitive behavior," insinuating even adult DPs as child-like in their manners, without considering the experiential context of the behavior. This suggests the notion of infantilization: what we would today call trauma resulted in a behavior usually attributed to children, in the eyes of the IAPSG. The group enlisted Freudian theory to proliferate an infantilizing view on the DPs. The infantilization of the recipients of humanitarian aid is a recurring trope in humanitarian narratives, as both Malkki and Salvatici have pointed out.[234] The IAPSG related to Freud in order to conceptualize their infantilization.

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227 Ibid., 4.
228 Ibid., 5.
229 Ibid., 4.
230 Ibid.
231 Ibid.
232 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 5.
233 Ibid.
234 Salvatici, "Help the People to Help Themselves," 444; Liisa Malkki, "Children, Humanity, and the Infantilization of Peace."

Another aspect of the IAPSG's conceptualization can be understood as the deliberate approach of counteracting Nazi policies: The IAPSG's psychoanalytic theories emphasized the universal building blocks of the human psyche and the drives that unite all people, counteracting Nazi ideology that claimed immutable biological differences distinguished population groups and nations. There were, conceded the IAPSG, some differences in the emphasis different national groups put on strivings or drives, but the general attributes of the human psyche were considered to be universal. The *Report* states:

> National groups differ in the stress they lay on various strivings or failings [...], creating different mental climates and cultural patterns. [...] Nevertheless, the main attributes of human personality – conscience and guilt, love and hate, rivalry and friendship, self-esteem and inferiority – are found to be surprisingly constant.[235]

UNRRA's psychosocial strategy was supposed to counteract Nazi policies and its innate racism. Thus, conceptualizing human beings as equal in their drives, desires, and wishes became a central pillar of UNRRA's policy – an understanding of human beings diametrically different from the ideology that had nearly bankrupted the continent.

Another important aspect the *Report* describes is the mental conceptualization of deprivation of food, which was considered central for the experience of the DPs and as yielding especially detrimental psychological effects. Here, the authors relate to the body of knowledge that has been outlined previously in this study: the study of evacuated children in England during the war. The IAPSG contends that the ample provision of "food, warmth, and safety from physical danger" is indeed considered subconsciously as proof that the world is benevolent and "approves of us."[236] The deprivation of these factors then is considered to be a sign that the world is a "permanently hostile place."[237] The *Report* states:

> It is a basic fact in working with refugees and expatriates that many of their attitudes and much of their behavior can only be understood if we assume that they feel themselves to have been exposed to the harshness and insecurity of life because they have somehow proved unworthy of the affection and tolerance of friends.[238]

235 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 2.
236 Ibid., 3.
237 Ibid.
238 Ibid.

The deprivation of food, according to the IAPSG, signaled to those starving that they were "unworthy of affection." This interpretation was not an innovation of the IAPSG. Without specifically alluding to Anna Freud's work in the Hampstead War Nurseries the *Report* relates to Freud's and Burlingham's findings, circling back to Freud's and Burlingham's observation of how well-meaning parents had given their children into the Nurseries' care to protect them from air-raids, producing in the children a feeling of being "unworthy and unwanted" in the family.[239] Like the deprivation of food, being sent away from the parents was conceptualized as being understood by the subconscious of both child and adult DPs as being "cast out" because the community "did not approve" of them. Here, too, the central theme of the interpretation of the DPs' hurt shines through: displacement as triggering the feeling of being cast out due to own innate unworthiness of affection. This interpretation might generally seem convincing, however, it strips the specific displacement of postwar DPs of its historical and political context: the DPs' displacement was a deliberately orchestrated attempt by the German government and its allies to bring new order to Europe, by moving populations and attempting to extinguish certain groups. This aspect of the DPs displacement remains rarely discussed in the *Report.*

It has become clear that for the authors of the *Report* the core violation of displacement was in the loss of belonging, in the loss of attachment to the family and a community, and the loss of benevolent authority figures. Regarding the focal point of the family, it is clear from the *Report* that the authors considered the family and a community to be the best place for healthy development, certainly for children but also for adults.

Since UNRRA was the administrative agency that aimed at bringing "order" to chaotic postwar Europe, one aspect seems curiously omitted in the *Report:* the question of belonging to a nation, to a nationality. The questions are: is there any national connotation to the group's understanding of community? Do they equate community with nation? What constitutes the community aspect? If the authors do equate community with nation, do they consider the allegiance to a community/nation a fluid construct that can evolve and change over the course of a human's lifetime or are they referring to the community of origin within the original national boundaries that should be reconstructed, as was UNRRA policy in 1944 and 45? Reading the *Report* through the administrative lens of UNRRA's goal in 1944 and 1945 – immediate repatriation of all DPs to their prewar countries of origin – one could certainly read community as synonymous with nation. Looking at the sources through a psychoanalytically informed lens, however, compli-

239 Ibid.

cates this view and questions the congruence of UNRRA's official administrative strategy with the strategy as laid out it the *Report*. The notion of community, its understanding of either a static (national) construct that needed to be reconstructed if possible or a fluid entity that could change over the course of a human's life (including changing nationalities), stands at the heart of the contestations around psychosocial rehabilitation in the postwar era, as this study will continue to uncover. If the need of human beings to belong to a community is understood as a starting point, the question remains whether this community (and belonging to a nation) always has to be the same or whether people can also move between communities to their own benefit.

Regarding the IAPSG's positioning towards repatriation and the reintegration into prewar countries of origin the remainder of this chapter will further help evolve the readers' understanding of this nuanced debate.

The odds of being able to return or being willing to return to one's prewar country of origin for an individual depended heavily on the DPs' experience during the war. To what extent the IAPSG was conscious of the heterogeneity of the DP group will be explored next.

Categories of Displaced Persons

In order to evaluate the work of the IAPSG as manifested in the *Report* it is important to ponder whether the members of the group were conscious of the heterogeneity of the groups of uprooted people that were subsumed under the administrative moniker of "DPs" and whether the authors were aware of the specific plight of Jewish DPs. Questioning this awareness will give valuable insights into the knowledge of the situation in Europe the IAPSG had, bearing in mind that the report was compiled in 1944, in anticipation of the end of the war. Now that the previous chapters have delineated the bodies of knowledge with which the members of the IAPSG looked onto the psychic suffering specific to WWII with its immense civilian suffering, it is now apt to ask what they knew and mentioned about the concrete situation relating to WWII. What did the authors of the report know about the specific situation of those people who after the war were called DPs?

In the *Report*, four pages are dedicated to differentiating between the different sorts of groups of people and their experience who were called DPs by UNRRA in anticipation of the end of the war. Interestingly, this part of the source is written by Dutch military psychiatrist Joost Meerloo who himself had spent a short time in a concentration camp. It can be assumed that Meerloo was given the task of categorizing the DPs due to his immediate experience with internment and displacement. In the following, the different groups of DPs mentioned will not be discussed

in depth but rather will be listed in order to gain insight into the IAPSG's ability to differentiate between the groups.

Meerloo divides this chapter along the lines of the category of age into two parts: adults and children. Who he classified as a child in terms of age Meerloo did not specify. Presumably, he considered those under the age of 18 as "children" in line with UNRRA's policy.[240]

For the adults, Meerloo lists three groups of people, with several subgroups to each group.[241] To get a better grasp of Meerloo's categorization it is imperative to keep in mind that the term "Displaced Person" was an administrative umbrella term that subsumed a whole host of groups of people, highly heterogenous in terms of nationality, religion, age, education, gender, and class. Meerloo listed the DPs in three different categories:

1. "those still within their own countries": "people in occupied countries i. e. collaborators"; "sympathizers"; "majority that tries to maintain 'business as usual'"; "underground fighters,"
2. "those within their own countries but still physically displaced": "refugees, homeless people"; "prisoners"; "inmates of concentration and labor camps,"
3. "groups outside their own countries": "prisoners of war," "deportees placed in concentration and labour camps."[242]

The listing of the various groups of people in the source strikes the reader as surprisingly expansive and detailed; Meerloo lists people of all sides of the "front," mentioning groups of people, too, who were not regarded as Displaced Persons after the war due to their affiliation to the enemy camp either by nationality or by collaboration. As has been established in this study previously the administrative term Displaced Persons subsumed those who were beyond the borders of their countries of origin as a result of the war, who were unable to return on their own, and who were not nationals of ex-enemy states (strictly speaking, collaborators could be considered DPs as well, which led to intense conflicts within DP camps later).[243]

Besides age, gender was also a category of distinction of groups. The reason lay in the assumption of rape as an act that, according to the authors, women were

240 Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," 54.

241 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 5 – 9.

242 The enumeration of the different groups has been condensed by the author.

243 SHAEF. "Administrative Memorandum 39: Displaced Persons and Refugees in Germany," November 1944., WO 204/2869 , The National Archives Kew.

victims of: Meerloo concluded that women suffer generally a "similar fate to men,"[244] only that they additionally were victims to sex crimes and separation from their children. But, as Meerloo said, "women suffer more than men from lack of privacy and [...] hygiene" and of "slavery and hard work," insinuating a weaker female physical constitution.[245]

Three pages of the report are dedicated to dissecting the strategy of systemic gender violence the Nazis perpetrated. Meerlo not only noted the systematic nature of the sexual violence perpetrated by Nazis but also acknowledged the adverse psychological effect sexual violence would have on the victims. [246] Forced sex work in particular would result, according to the *Report*, in damage to "self-respect" and multiple psychological issues.[247]

The term "morale," which is often used in the context of women and the effects of sexual violence, delivers insights into the degree to which the IAPSG was in the know about Nazi practices. Morale is defined in the report as "the possession of a sense of 'belonging', of an agreed sense of purpose and of satisfaction over achieving one's purpose."[248] Being forced to work, forced to have sex, and being entirely removed from family and community was supposed to have an immense weakening effect on morale, resulting in alcoholism, delinquency, and promiscuity, as these are considered to be attempts at "mitigating" the effect of demoralization.[249] Forced workers in general but women specifically were suspected to suffer from the ill effects of demoralization, even though no convincing reason has been given for this, except that more women than men were raped. The *Report* urges the welfare worker to be aware of feelings of guilt women who have been forced to have sex may harbor, suggesting that women should be supported in the process of "forgiving themselves."[250]

It is here that the Report tangentially introduces the issue of organized religion. It states "church hold became weaker, cynicism and disbelief increased, moral standards and personal conscience deteriorated,"[251] all signs of demoralization. Two things are striking when it comes to the mentioning of "church": first the

244 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 8.
245 Ibid.
246 Ibid., 15.
247 Ibid.
248 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 15.
249 Ibid.
250 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 16.
251 Ibid., 13.

term "church" is not differentiated by any means, implying that all DPs were of Christian faith, ignoring non-Christian religions and specifically the Jewish faith. Secondly, the authors of the *Report* suggest that even though "demoralization" may be of interest to the church, it should not be alerted to cases of "demoralization" as the church's treatment of the issues may not help psychologically but only increase the feeling of guilt in raped women due to the "harsh ethical views in relation to sexual affairs."[252] The *Report* even goes so far as to warn that contact of raped women with church may increase "a wave of depression, delinquency and even suicide."[253]

This statement seems remarkable for a document of its time: the overt skepticism of the IAPSG of the beneficial psychological effects of contact with church after trauma, specifically gender violence and rape. It counters to a degree the dominant reading of UNRRA's policies as distinctly "Western and Christian" as it has been purported multiple times,[254] opposing the distinct Zionist practices of organization like the JDC.

After having taken a look at the categories of DPs it becomes clear that the IAPSG was well aware of the heterogeneity of non-Jewish DPs. One important question, however, suggests itself: where are the Jews? Their curious marginality will be discussed next.

Jewish DPs

Striking in the categorization of the varying DP groups is the "almost absence" of a group of people who, in the postwar years, became the center of attention of international organizations working with DPs, and who in the collective memory of WWII occupy the center of attention: the Jewish victims of the Nazis.

The murderous Nazi practices are obviously known and mentioned in the *Report*, but nevertheless Jewish people were not singled out as a specific group by Meerloo. In fact, in the 44-page long *Report* the word "concentration camp" is used four times, but the number of Jewish inmates or the extent of their suffering is not mentioned. The particular Jewish situation is usually limited to phrases like "In all this social mess the position of the Jews is of course particularly disastrous, but I shall not dwell on that here."[255]

252 Ibid., 17.

253 Ibid.

254 Zahra, "Lost Children"; Cohen, "Between Relief and Politics."

255 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 7.

Nevertheless, Meerloo proved acutely aware of what he deems Hitler's "biological war": "He [Hitler] wanted to influence the population trends of Europe in such a way that Germany would always be supreme. [...] He wanted to affect the hereditary quality of the population and to that end he attempted actual extermination – one need only think of the Jews and the Poles."[256]

The level of extermination Jewish people suffered seems to be known but mentioned only in passing, in phrases like "Again I will only mention the Jews, kept in separate camps, and surviving while still of any use for the hardest, or the most dangerous, or most disgusting labour, merely a last stage before being sent to the real death camps."[257] The heterogeneity of the Jewish experience, which was not limited to concentration camps, is omitted entirely.

This odd gap raises questions: why was the Jewish experience treated so marginally in the *Report?* It is even more striking knowing that Joost Meerloo himself was Jewish, his birth name being Abraham, which he changed to the more Dutch sounding Joost, to escape persecution by the Nazis. He was the only one of his family to survive the Holocaust.[258]

Curious enough, the question of the planning for Jewish survivors within UNRRA has very rarely been covered in research.[259] Nonetheless, the explanation of the gap in UNRRA's plans may lie in UNRRA's policies towards Jewish individuals at the time of the writing of the report, 1944, before the end of the war. In 1944 and early 1945, the official policy of UNRRA sought not to single out Jewish survivors, presumably for several reasons: firstly, they did not expect that many Jewish people were to live to see the end of the war,[260] and secondly, the Allies and UNRRA did not wish to treat Jewish survivors as a distinct group because this would open up the question of a separate Jewish state.[261]

It is also important to note that Britain was a major stakeholder within UNRRA at the time with its own agency surrounding the question of Palestine and Israel: Palestine had been British Mandate since 1918 and London was keen on keeping it

256 Ibid., 13.

257 Ibid., 8.

258 George Goodman Jr, "Dr. Joost Meerloo Is Dead at 73; Was Authority on Brainwashing," *The New York Times*, November 26, 1976, sec. Archives, accessed October 6, 2024, https://www.nytimes.com/1976/11/26/archives/dr-joost-meerloo-is-dead-at-73-was-authority-on-brainwashing.html.

259 Apart from Grossmann, *Jews, Germans, and Allies*, 133.

260 Ibid.

261 Rürup, Miriam, "Von Der Offenheit Der Geschichte: Der Umgang Mit Staatenlosigkeit Und Die Weltbürgerliche Idee," in *Bessere Welten: Kosmopolitismus in Den Geschichtswissenschaften*, ed. Bernhard Gissibl et al. (Workshop "Kosmopolitismus–Zum heuristischen Mehrwert eines wissenschaftlichen Modekonzepts," Frankfurt; New York: Campus Verlag, 2017), 95.

that way.[262] Had UNRRA discussed Jewish DPs separately in 1944, chances would have been high it would have signaled to view the Jews as a separate entity transcending their prewar citizenships. If Jews would have been considered their own entity there surely would have been calls for a separate state, which was to be avoided at that time.[263]

There is, however, another important aspect to the discussion of the little attention given to the Jewish experience during the war: UNRRA's overall conceptualization of what was happening. The administration was designed at a time, 1943 – 1945, when the planners were not entirely aware of the full extent of the extermination that was taking place.[264] During UNNRA's planning stage the main issue at hand was considered to be the fact that millions had been displaced as slave laborers for the German economy.[265] Thus, the main issue at hand was thought of as the giant displacement of populations, and not the aspects of the war that were by 1946 subsumed under the term genocide (most prominently the deliberate extermination of groups of populations).[266] The regulatory aspect of uprooted populations that needed to be administered stood at the heart of UNRRA's planning, thus all of Hitler's victims, Jews and non-Jews alike, were subsumed under the term Displaced Persons. To put it simply, UNRRA in 1944 expected to be dealing with a refugee crisis after the war, and the regulatory practice it wished to rely on, at least initially, was repatriation to create order in chaotic postwar Europe. The particular exigencies of certain groups of DPs, most notably Jewish DPs, were not factored in considerably during UNRRA's planning stage.

To bring these different strands together, it is useful to refer back to Meerloo's contribution in the *Report.* To all the displaced persons Meerloo attributes what he calls "mental displacement"[267] due to the need to adapt to new – restricting – circumstances that oftentimes called for necessary adaptations in personal morale,

262 On the history of the British Mandate in Palestine see part II of this study and Miller, *Britain, Palestine and Empire*; Ofer, "From Illegal Immigrant to New Immigrants."

263 Nevertheless, during UNRRA's planning stage, Jewish representatives attempted to draw UNRRA's attention to the need for special strategies for Jewish survivors that would have to be worked out. Serach Wahrhaftig, representative of the Zionist aid organization Mizrachi, warned as early as 1944 that an "overwhelming majority" would be Jewish survivors "(who) had been deported or expelled abroad and also many of those expelled in their own country could not or would not be repatriated." Obviously, his calls were not heard. Zorach Wahrhaftig, *Relief and Rehabilitation: Implications of the UNRRA Program for Jewish Needs*, 162.

264 Grossmann, *Jews, Germans, and Allies*, 133.

265 Shephard, *The Long Road Home*, 4.

266 Cf. Ibid.

267 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 19.

the restriction of personal freedom, and danger. According to Meerloo's apt description of the mental dynamics, "Hardly anyone continues to live his former psychological life, almost all of them are emotionally and morally displaced [...]. They no longer feel free to think, to speak, to act. They have to bow to new gods and to accept ideas as foreign as possible to what they were taught or believed before."[268]

In this quote Meerloo raises an important point that is also decisive in differentiating the experience of WWII to WWI, the original reference point of the IAPSG: the degree to which the war and its repercussions permeated all parts of society, not just predominantly military personnel as in WWI.[269] Due to occupation of countries and the large-scale persecution of several population groups nobody was exempt of experiencing the effects of the war oneself. That is why Meerloo argues that literally everybody was at least "mentally displaced." It is this conflict situation that has to be regarded as more or less entirely unchartered territory, even for the members of the IAPSG who were considered to be "experts in repatriation": the degree to which civilians in Europe (and the parts of Asia where hostilities were expanded towards) were affected by the war on the one hand, the sheer numeric volume of people who were displaced by the war on the other hand, and lastly the unimaginability of the horror of the experience many people witnessed. The postwar period was to present everybody involved with the task of rehabilitation with totally unchartered territory to which preparation was only possible to a very limited extent.

To conclude, the IAPSG had a robust overview of the heterogeneity of the non-Jewish groups of people that were subsumed under the term Displaced Persons. However, reading the *Report* it seems like the IAPSG expected DPs to be mostly gentile people uprooted from their homes and former Prisoners of War (POWs). The whole genocide of the Jewish people of WWII was omitted from the considerations of the *Report*.

One major group of DPs has yet to be looked at more closely, as their care would become one of the central pillars of UNRRA's work in Europe's postwar DP camps: Displaced Children.

Displaced Children or the Family as Bulwark of Normality

Inquiring about the proposed treatment of displaced children invariably leads to thinking about the conceptualization of the family within the *Report*. Consequent-

268 Ibid., 6.

269 Even though the point is valid to argue that during WWI civilians were affected by the war as well, as family members where conscripted or died. People on the continent naturally witnessed the hostilities more closely.

ly, the following pages will investigate the ways in which the IAPSG made sense of the specific plight of displaced children and how they located the best place for them to rehabilitate within the structure of the family.

Five pages of the report are dedicated to displaced children.[270] Since a major focus of the postwar humanitarian work with DPs was focused on children, with UNRRA establishing dedicated children's centers for so called "unaccompanied children," it is worthwhile to take a closer look at how the *Report* conceptualized the specific situation of those under 18 years of age.

It is clear from the *Report* that its authors' greatest concern in terms of the future is devoted to the displaced children. Echoing the humanitarian narrative regarding children from the interwar the *Report* states: "The young people who have grown up in this war, will be one of the most difficult problems of the future."[271] The IAPSG predicts the forced caesura in displaced children's lives by displacement to be highly disruptive. The *Report* states: "The formative processes which youth ordinarily experiences in an orderly family and community – training the experience of conscience, of interest in work and achievement, of preparation for sexual experience in maturity – all of these have been broken off before their culmination."[272]

With this quote it is tangible that the "ordinary" place of a child is in the family and the community and thus the disruption is considered outside of the norm, yielding adverse psychic effects. The effects of this disorder, according to the source, will require "both mass and individual psychotherapeutic or social treatment to put right."[273]

So, what effectuated this major disruption and how could this be remedied according to the *Report?* Since all DPs, no matter their biological age, were considered to be on the developmental level of a "hurt child," there was no major difference in the diagnosis of the origin of the psychic suffering between adult DPs and child DPs: the major hurt was located in the detachment from the family and the community. But for children, especially, the lack of a steady background was considered to be especially jarring, with almost all children expected to be reacting to this instability at least with major anxiety or other psychic disturbances, such as apathy, "troublesomeness," "defiance," and "delinquency."[274]

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270 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 9–13.
271 Ibid., 20.
272 Ibid.
273 Ibid.
274 Ibid., 10.

Here, the central theme of the rehabilitation strategy emerges: the family as the crystallization point of rehabilitation and reconstruction. The authors of the *Report* understood the destruction of the "traditional" family to be both the basis and the core psychological violation of totalitarian systems. Not only was it the system, the destruction of which wrought the most consequences, it was also the unit, the reconstruction of which was hoped to yield the most beneficial effects: family was regarded the ideal environment for the healthy development of the psyche of children, as well as for the consolidation of democratic states.[275] The separation of a child from its family thus meant the removal from the container in which a healthy development could be performed, a development that would later ensure the participation in a peaceful democratic society. The *Report* is unambiguous in the importance it puts on the family: "The family is the main source and prototype of all affection, the focal point of every culture; furthermore, it provides a series of basic routines which organize and help to give meaning to the life of the individual."[276]

The family was considered the bulwark for what was perceived as "normality," a normality that was destroyed by the war and which, in the postwar, was to be reinstated. What is more, the axiom of the centrality of the family was considered universal, "every culture" was perceived to be structured around the family. And the family was understood to create meaning in "the life of an individual." There was no way round the family; in the eyes of the IAPSG there could be no beneficial alternative to the structure of the family, with it considered the "natural norm."

The interpretation of a stable family unit as bulwark against totalitarian tendencies was a dominant interpretation not just in the *Report* but in liberal intellectual circles of the late 1930s and early 1940s in general, and has since been thoroughly investigated in secondary literature.[277] The focus on the family as the nucleus of social order has at times been described by Tara Zahra and Gisela

275 The conceptualization of family as the most important social unit remained formative; the 1948 Universal Declaration of Human Rights declared in Article 16/3: "The family is the natural and fundamental group unit of society and is entitled to protection by society and the State." United Nations, "Universal Declaration of Human Rights," United Nations (United Nations), accessed October 5, 2021, https://www.un.org/en/about-us/universal-declaration-of-human-rights.

276 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 14.

277 Zahra, "Lost Children"; Thane, "Family Life and 'Normality' in Postwar British Culture"; Bessel and Schumann, "Violence, Normality, and the Construction of Postwar Europe"; Bessel et al., *Life after Death*; Gisela Notz, *Kritik des Familismus: Theorie und soziale Realität eines Ideologischen Gemäldes*, 1. Auflage, Reihe Theorie.Org (Stuttgart: Schmetterling Verlag, 2015).

Notz as "familialism."[278] Therefore, in order to be able to understand the emphasis on the family, it is helpful to take another short excursion on the liberal intellectual (Western) environment the members of the IAPSG were a part of, and their conceptualization of National Socialism. The members of the IAPSG, especially the British psychiatrists, subscribed to the understanding of WWII as a crisis of family, as this study elaborated earlier. For many proponents of the family as the center of society, more collectivist pedagogical concepts with a higher importance of institutionalized care settings (popular in interwar Eastern Europe) were regarded as cradles of totalitarianism.[279] For the IAPSG and UNRRA, the salvation from dictatorship fell upon the family. Only in this structure were children perceived as being able to thrive towards becoming responsible adults.

The family, in the IAPSG's reading, was conceptualized not only as a guarantor for a healthy development but also a safeguard for individuality. Individuality was deemed the prerequisite for democratic citizenship, as opposed to collectivist citizenship in a totalitarian state, which was perceived as being formed in collectivist child rearing practices.[280] Nazi strategy was identified as forcing the demise of families through the destruction of the private sphere and the individual:[281] the destruction of families was understood as producing a void in relationships that enabled a dangerous libidinal attachment to an authoritative figure, like the "Führer": just like British psychoanalyst Edward Glover had warned when a new world war became more and more tangible in 1938 – the (unconscious) identification with an authoritative leader mirrored an attachment to a father – Hitler and Mussolini as "family imagoes"[282] – mirroring authoritative fathers. The German family was perceived to be characterized by steep hierarchies – with a cold, absent, and authoritative father on the top, the mother hierarchically-speaking underneath the father, caring for her children (as many as possible) with not much in the way of

278 *Zahra, "Lost Children," 57; Notz, Kritik des Familismus.*

279 Zahra, "Lost Children," 55.

280 Ibid., 56.

281 However, the concept of family did hold significance in Nazi ideology, but only if it was "racially pure." The classification of Nazi rule as a collectivist form of government that was hostile to the individual also needs further analysis. The decisive factor here is the category of citizens' agency and the implications of interpreting Nazism as anti-individual. Doesn't this interpretation also relieve individual responsibility? See Moritz Föllmer, "The Subjective Dimension of Nazism," *The Historical Journal* 56, no. 4 (December 2013): 1107–32, https://doi.org/10.1017/S0018246X13000393; Moritz Föllmer, "Was Nazism Collectivistic? Redefining the Individual in Berlin, 1930–1945," *The Journal of Modern History* 82, no. 1 (March 2010): 61–100, https://doi.org/10.1086/650507.

282 E. Glover, "Notes on the Psychological Effects of War Conditions on the Civilian Population," *Int. J. Psycho-Anal* 23 (1942): 140.

warmth and love.[283] Erika Mann observed in 1938: "If the world is to go to the Nazis, the German people must first belong to them. And for that to be true, they cannot belong to anyone else – neither God, nor their families, nor themselves."[284] Strengthening individuality thus was perceived as counteracting any totalitarian tendencies. Individuality was perceived as being fostered within families shaped by loving relationships with flat hierarchies.

Circling back to the specific situation of DPs it is clear that, by definition, DPs were not German nationals, so the interpretation of the German family did not apply to them, but the German family stood at the heart of the explanatory models used to explain how Nazism had been so "successful" in Germany.

UNRRA's psychosocial strategy was supposed to be as much a departure from Nazi social policies, as possible. For the *IAPSG*, a family devoid of steep hierarchies but shaped by love and understanding was vital to reconstruct in the wake of WWII as an antidote to the German family and to the effects of family separation and persecution, as has also been shown previously in the chapter "War as Family Crisis."

The rehabilitation strategy of the *IAPSG* thus sought to deliver the antidote to the social systems that, in their view, enabled totalitarian regimes. As Tara Zahra carved out poignantly, the UNRRA strategy promoted a worldview and assessment of families that was derived from a Western (anglophone) liberalism of the 1930s and 1940s: at the heart of a democratic society stood a rational and active citizen, deeply rooted in its nuclear family.[285] For UNRRA's psychological experts, reconstruction of families and recovery of the private sphere therefore was synonymous with denazification and democratization. The family was seen as the nucleus, the primary cell of a democratic state, with the male as the breadwinner and the family's authority.[286] The individual, the family, and the state were conflated and stylized as the ultimate salvation from totalitarianism on the road to "normality."[287] The reestablishment of a sense of normalcy held at its core, in the IAPSG's view, the unification of families, if possible.

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283 On the German family, see i. e. Miriam Gebhardt, ""Lehret sie, dass sie nicht um ihrer selbst willen sind" Frühkindliche Sozialisation im Nationalsozialismus," in *Familie und öffentliche Erziehung*, ed. Jutta Ecarius, Carola Groppe, and Hans Malmede (Wiesbaden: VS Verlag für Sozialwissenschaften, 2009), 221–44, https://doi.org/10.1007/978-3-531-91814-3_12.

284 Mann, Erika, *School for Barbarians. Education under the Nazis* (New York: Modern Age Books, 1938), 29.

285 Zahra, "Lost Children," 56.

286 Ibid.

287 On the notion of "normality" and its recovery see Bessel et al., *Life after Death*, 1–15.

Consequently, Displaced Children, in the eyes of the IAPSG, were majorly impeded by their separation from the family, especially from the patriarchally-structured dynamic of their parents, the "nucleus of the family": the father was considered to be "the protector of the family," giving a child "confidence," and the importance of closeness to the mother was communicated as uncontested; siblings were considered to be vitally important as well.[288] If there was a surviving mother, the IAPSG advised that the mother stay close to the child at all times. If, however, the mother showed signs of mental strain herself, the child was to be removed from the mother, as the mother's anxiety could easily project onto the child, as Anna Freud had observed at the Hampstead War Nurseries.[289]

Nevertheless, there was no way around the family. In order to help a displaced child to rehabilitate, some semblance of a family life needed to be instated as soon as possible, according to the *Report.* If unification of families was not possible, as it was not in most cases, children were supposed to be grouped in small units that resembled families – "small family groups"[290] – like the surrogate families that were formed in the British wartime hostels for evacuated children.[291] Notably, the *Report* does not call for distinct child-only DP camps, like it was actually performed in the postwar with dedicated children's centers. The idea of a DP camp that was exclusively designed for children was not mentioned in the *Report.*

If there were no biological parents available the children were to be given into "the care of confident, friendly grown-ups."[292] Once the "steady background"[293] for a child was secured, the IAPSG advocated for promoting self-effectiveness of a child. They wrote "one of the great sources of help for them lies in what they can do for themselves."[294] The *Report* stresses the innate propensity for individual recovery of children, emphasizing children's abilities "to relieve stress and tension within himself largely through his own activities."[295] The important trait of independence and self-efficacy was to be promoted through incentives to play. Playing, especially with natural resources like water, mud, clay, and sand, would help a child "maintain and restore its balance."[296] Space to roam outside in nature was

288 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 9.
289 Ibid., 10.
290 Ibid.
291 Shapira, *The War Inside*, 63–64.
292 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 10.
293 Ibid., 11.
294 Ibid.
295 Ibid.
296 Ibid.

considered equally as important.[297] Older kids were advised to be incentivized to constructive work, to build things.[298]

To sum up, it is fair to say that the IAPSG viewed the condition of DP children as especially concerning. For them, the dangers, and in many cases destruction, DP families were suspected to during the war was the core hurt for all DPs, but especially child DPs. The family was considered the locus of all healthy development, a workshop for the individualization of a human and for a democratic state. Rehabilitation had to thus be focused on remodelling some kind of family environment.

As the previous pages have shown, the theoretical underbelly of the *Report* has been heavily influenced by the body of knowledge members of the IAPSG accumulated before the war, specifically by the theories of Sigmund Freud on the effects of war on "civilization" and Anna Freud's observations on the effects of war on uprooted children. The IAPSG applied their bodies of knowledge that were accumulated in a very distinct social setting onto the DPs: insights derived from work before WWII with Sigmund Freud's Austrian and German analysands and insights pertaining to work with British military personnel and British children (in the case of Anna Freud) were related onto the immensely heterogenous group of DPs. DPs were heterogenous in terms of nationality, in terms of religion, age, education, gender, and class. An Eastern European orthodox Jew from a small village near Vilna probably had little in the way of commonalities with a British soldier or a Viennese upper-class patient of Freud. But since the IAPSG considered their insight to be more or less universal, they saw themselves fit to estimate the DPs mental state as well.[299]

Having taken a closer look at the theoretical foundation of the *Report* has been nevertheless illuminating in that it showed how the IAPSG made sense of the DP experience from a psycho-theoretical standpoint.

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297 Ibid.

298 Ibid.

299 This illustrates the major dilemma of modern psychology: insights derived from a very distinct social group of people are stylized to be universal truths about human nature. The Western Psychology discourse (WASP – Western Academic Scientific Psychology) is hegemonic, Western norms are naturalized and considered universal, even though these insights are derived from studies and observations of mostly American and European subjects. For more on the highly important problematization of WASP, see Pat Dudgeon and Abigail Bray, "Editorial – Indigenous Psychology: A Brief Introduction," *The Journal of Critical Psychology, Counselling and Psychotherapy* 16, no. 3 (September 2016): 153–62; John W. Berry, "Global Psychology: Implications for Cross-Cultural Research and Management," *Cross Cultural Management* 22, no. 3 (January 1, 2015): 342–55, https://doi.org/10.1108/CCM-03–2015–0031.

This becomes especially problematic in the realm of humanitarian psychology as Jan de Vos has outlined; De Vos, "The Psychologization of Humanitarian Aid."

"Going Home"[300]

As we have established over the course of the previous pages, the core hurt of displacement, according to the IAPSG, was understood as being "cut off" from family and community, leaving DPs feeling "unloved and isolated in strange communities."[301] Therefore, it is now apt to ask how the *Report* mapped out the rehabilitation process and which actual practical steps could be taken towards achieving the goal of "coming home," helping the DPs in the words of the *Report* to know "the surrounding community to be a source of strength and safety, rather than of rivalry and hostility."[302] This discourse will also bear the question of where the "home" was to be located.

Since the *Report* identified the loss of belonging to a family and a community as the core psychological hurt, it comes as no surprise that both the remedy and the goal of UNRRA's rehabilitative work was to support the DPs in becoming members of a community again. Thus, the rehabilitative goal was formulated as helping the DPs to "return to a responsible place both in the family and in the community."[303] Again, the *Report* gives no hint as to whether this was the community of origin from prewar times or whether it was simply to be a community. From a psychological standpoint it makes sense to assume that strictly apolitically speaking, the authors saw their goal as "adaptation,"[304] being psychologically able to adjust and assimilate into any community. It can be assumed that UNRRA's administrative ranks used this psychological theory to their advantage, replacing "a community" with the prewar community/nation.

According to the *Report*, rehabilitation was to be understood as a three-step process. First, DPs should be supported in "recovering from losses of health, skills, of valued personal relationships and of social connections."[305] Then, an atmosphere should be offered "where the careful and graduated use of incentives leads to graded satisfactions over efforts,"[306] that way slowly supporting the DPs in taking responsibility for themselves and a community. Ultimately, after having assumed responsibility over their own lives, the DP should be able "to step forward

300 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 28.
301 Ibid., 34.
302 Ibid.
303 Ibid., 21.
304 Ibid., 22.
305 Ibid.
306 Ibid.

on his own foot to a new social and psychological adaptation."[307] The primary social function of this process was suggested to be providing "a sense of value and of purpose, restoration of self-respect and social status."[308]

Arguing, again, from an abstract psychoanalytically informed perspective, the IAPSG framed the rehabilitative process as an "elongated form of waking up from the regression of sleep."[309] All DPs, no matter their age, were considered to be thrown back onto the developmental stage of "hurt children." The *Report* states:

> Rehabilitation, which is intrinsically psychological and sociological, mirrors in a condensed way the stages of a child's development from passivity to activity. The DP that is supposed to rehabilitate thus is regarded as a passive child, "asleep", that needs to be assisted in order to (re-) claim its place in society as a fully functioning, awake, adult that is able to adapt in the world.[310]

Rehabilitation was considered mirroring the maturation period of a human being. Naturally, the representation of the DP as a passive, asleep, infantilized individual strikes the reader as odd, and it serves to underscore the infantilization that is so often inherent in humanitarian narratives.[311] Viewed through the psychoanalytic lens of the IAPSG with its Freudian inspired understanding of war as removing repression, thus instigating regression (child-like behavior), this conceptualization however becomes slightly more traceable.

The *Report*'s chapter concerned with the application of concrete strategies in the camps is tellingly called "The Way Home," signaling both the literal and the figurative meaning of "home" for DPs. Figuratively, "going home"[312] in a developmental psychological sense meant getting (re-) integrated into a network that resembled a family structure, thus (re-) claiming the quintessential feeling of what the planners described as being "loved and valued,"[313] which was seen as the prerequisite to being able to repress feelings and growing into the mature and responsible adult (no matter the DP's age), as we have established earlier.

Thus, the two most important aspects of the rehabilitation strategy remain family and community. In a curious interpretative leap, the *Report* even goes so far as to compare a DP's arrival in a DP camp with actually coming home to his

307 Ibid.
308 Ibid., 26.
309 Ibid., 22.
310 Ibid.
311 See Salvatici, "Help the People to Help Themselves," 444.
312 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 28.
313 Ibid., 3.

or her family. It says: "Most expatriates, when they are contacted by the welfare organizations will unwittingly feel themselves to be very much in the position of the child who returns to its family, or at least to a family after enforced separation."[314]

This assumption strikes the reader as somewhat surprising and is not explained in more detail. This idea probably recurs to the notion of a benevolent "container" and authority figures that can help the DP to develop the necessary positive emotions to rehabilitate themselves. Within the container of a family or family-like environment the DP can experience important emotional dynamics that help him on the path to maturity and adulthood. Because UNRRA staff, according to the *Report*, were to strive towards acting as a beneficial authority (important to enable the process of regression, as we have established earlier) and ideally model some sense of a family like environment, a DP could be compelled to feel, at least subconsciously, to be returning to the family upon arrival in a DP camp. Admittedly, this claim remains curious, especially when viewed against the backdrop of the chaotic postwar days that would unfold mere months after the finalization of the *Report.*

Nevertheless, the above quote also insinuates a central theme of UNRRA's psychosocial strategy: the idea of UNRRA staff acting as surrogate family.[315] The notion of the formation of surrogate families in case of absence of the biological family was widespread at the time. As has been established earlier, the British Wartime Hostels and Anna Freud's Nurseries all relied upon the idea of surrogate family to enable the necessary inner-psychic developmental processes.[316] The *Report* is not very explicit about its ideas of UNRRA as surrogate family. It does, however, point this strategy out explicitly when it comes to DP children, as has been discussed in the chapter on DP children. Children were, preferably, to remain with their mothers (with no mention of fathers), however, if the mothers were mentally incapacitated (which is not further specified but probably points towards high anxiety of the mother or worse psychological afflictions), children should be removed from them and be put into a family-like environment.[317] For unaccompa-

314 Ibid., 22.

315 Ibid., 10.

316 The idea of surrogate families was to stick. Katharina Stornig and Katharina Wolf, "Parenthood as Aid: 'Fathers', 'Mothers' and International Child Welfare from the Late 1940s to the 1970s," in *Gendering Global Humanitarianism in the Twentieth Century*, ed. Esther Möller, Johannes Paulmann, and Katharina Stornig (Cham: Springer International Publishing, 2020), 221–54, https://doi.org/10.1007/978-3-030-44630-7_9.

317 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 10.

nied or orphaned children, without any other family member present, the same applied. The *Report* states: "some form of secure family life must be constituted as soon as possible even in places where children are expected to remain only for short periods."[318] Two things are noteworthy here. Firstly, the *Report* seems to recur to Anna Freud's findings explicitly by replicating her understanding that a mentally unwell mother could prove to be more damaging to a child than being separated from her (as discussed in chapter on Anna Freud). Secondly, it has become apparent that there was no primate of the biological family. For a child to stay with the mother was framed as desirable but not without alternative, and could rather prove to be detrimental. The structure of the family, the container, as such was the linchpin of UNRRA's strategy, but it did not necessarily have to be the biological family.

Within the framework of family-like environments, the experts hoped to stimulate self-reliance, agency, and trust to motivate the DPs to become independent and to land "on (their) own foot to a new social and psychological adaption [sic]."[319] By creating a family-like atmosphere, the experts hoped to create a feeling of security that should allow the DPs, over time, to become self-reliant and independent. This independence would ultimately make the DPs able to live independently after leaving the DP camps. How this kind of family-like atmosphere was to be achieved, however, remains rather nebulous in the *Report.* It is clear that the authors of the *Report* are viewing the dealings with DPs through their disciplinary and rather theoretical lens and take little to no position on purely practical issues and questions of implementability of their strategy.

They do, however, outline the process of rehabilitation that was to be conducted in the DP camps. First, they suggest to give some kind of diagnosis of the degree of mental suffering of a DP, framing it as "estimate[ing] degree of regression."[320] How this was supposed to be conducted remains entirely undiscussed, especially in light of the fact that little to no UNRRA welfare workers were actually trained in psychoanalysis, which would have been useful to be able to "estimate regression." The second step of the proposed process of rehabilitation was to entail the creation of an atmosphere "suited to the degree of repression."[321] This, too, is not specified further but probably points towards the degree to which a DP was to be bestowed with responsibility within a camp's administration. The third step of the rehabilitation process was framed as "recovery by resocialization," pointing towards actively encouraging DPs to become a part of a camp com-

318 Ibid.
319 Ibid., 22.
320 Ibid.
321 Ibid.

munity, perform responsibility, and prepare for departure from the camp.[322] The goal of the rehabilitation process was unambiguously clear: developmentally, DPs were to be assisted on their path to "independence" in order to be able to assimilate into the old or new home, to be able to "resocialize," as the *Report* puts it.[323]

If the whole process of rehabilitation was geared towards preparing the DPs to be able to resocialize in a community, the central question remains: how was the concept of home understood in the report? And where was it located? The notion of "home" is a dominant theme in the *Report* and it seems to be constituted by the categories of family and community and not necessarily by the geographic localization of it. In fact, the terms home and community appear to be used almost synonymously, strengthening the impression that, in fact, the notion of community was the decisive aspect, not the geographic location of it. It is thus too easy to assume that the IAPSG alluded to the prewar home (country) of a DP – which would make sense if one would look at it only through the lens of UNRRA's initial repatriation goal: in this vein, the *Report*'s emphasis on home and family could be read as the psychoanalytic equivalent of UNRRA's administrative repatriation primacy (hence return to the biological family and the prewar community/nation). But it is more complicated than that. For the group, the nature and localization of the community/home is not set in stone: does the constant recurrence to the notion of community implicate the return to the "original" community as it was before displacement? Or does it imply a or any community, looking at it from a psychoanalytic meta level as a sort of (malleable) container in which development happens, no matter the geographic localization? The answer remains ambiguous. What is clear is that the *Report* suggests the DPs to be constantly ("compulsive[ly]"[324]) preoccupied with the search for (a) home. The IAPSG refers to Anna Freud's findings from her work with British Evacuee Children explicitly, relaying her account of the children's preoccupation with going home.[325] The *Report* goes on,

> [...] it requires no deep insight into human nature to realise that during the whole of their stay in the assembly centre the feelings, thoughts and actions of displaced people are likely to revolve very steadily around the central theme of when and how they will find their way back to their old or new community, and of what it will be like when they get there.[326]

322 Ibid.
323 Ibid.
324 Ibid., 28.
325 Ibid.
326 Ibid.

DPs, housed in temporary DP camps, are seeking a new place to live – there is not much to argue here. Striking and central for our exploration, however, is the last aspect of the quote: "to their old or new community." Unambiguously, the IAPSG clearly puts forward the possibility of a new community here, even though, at the time of the write up of the *Report* (late 1944), the goal of UNRRA's work was clearly repatriation – the return to the old home/community. It becomes clear that the *Report*'s framing of the DP's desire to go home is clearly psychoanalytically motivated and does not refer to a specific return to a geographic location, as the following quote illustrates. It reads: "Their desire is not so much for geographical replacement as for a return to an emotional security which they may or may not as a matter of actual fact, have known."[327] The experts do not take a position on the geographical localization of "home"; they look at it through a psychological lens, focusing on the emotional aspect of the feeling of belonging to a home. This is an important insight about the nature of the *Report* and the degree to which it might have lent itself to the official repatriation strategy of UNRRA: the *Report* was not in line with UNRRA strategy regarding the understanding of "home." Within the UNRRA strategy home was a static thing, oriented on prewar belonging; for the *Report* home was a predominantly emotional concept that was malleable and suspect to change. This does not mean, however, that the option of repatriation was not considered. The IAPSG dedicated several paragraphs towards the preparation of the DPs for their return home to their prewar places of origin. They were adamant in preparing the DP for a potential disappointment upon return, due to changed circumstances there. The way in which the preparation was to take place was to instate group discussion about returning, as will be discussed later.[328]

Practical Steps

The *Report* provides a few clues by which practical steps DPs should be supported in their rehabilitation. In the following, the central themes of the proposed measures will be discussed.

Most importantly, "emotional security" was supposed to be fostered through structured daily camp routine. The *Report* stresses, however, that the matter of efficiency was not to be taken too overtly seriously, as everything in the camp's administration should be a departure from Nazi reign with its relentless focus on cold efficiency. "Soulless efficacy"[329] was to be avoided at all costs, and rather some more free flowing circumstances were to be fostered to signal the dawn of

327 Ibid., 29.
328 Ibid., 30.
329 Ibid., 22.

a new era for the DPs. Generally, the atmosphere in the camps was supposed to be characterized by respect and participation of the DPs rather than draconian law and order. The *Report* states: "A community cannot be created by law, it can only grow in conditions which allow free interplay of individual emotions and opinions and the development of personal relationships."[330] Top-down hierarchies and lack of mutual respect, as had been cultivated under Nazi reign, were to be avoided at all costs.

In fact, the IAPSG advocated for an entirely different approach: They called on UNRRA welfare workers to challenge their assumptions of certain groups of people, and to abstain from unfair generalizations and stereotypes. They asked the welfare staff to avoid thinking in terms of "typical nationals" because, according to the *Report,* "[t]he fact that people belong to a particular national group does not necessarily mean that they will correspond in any way to what one inevitably has in mind as a typical member of that group."[331]

It is remarkable how the authors of the *Report* ask the welfare staff to perform what today would be called empathy, transcending any group markers. The justification of this outlook echoes the IAPSG's propensity for psychoanalytic universalism the *Report* had exhibited when the concept of (universal) strivings that unite all people was laid out earlier in the *Report.* It reads, "The similarity between displaced person and social workers lies in their human needs and interests despite the great difference in recent experience and hence in outlook."[332] Despite diverging cultural backgrounds, the IAPSG expected the same "needs and interest" across all groups of DPs, showcasing a rather universalist conceptualization of human nature. The *Report* aptly predicted conflicts between welfare workers and DPs and called on their instinct to help, as well as bestowing the endeavor with the aspirational importance of helping heal all human beings. The guideline asked the staff, "to bear in mind that our task is to help 'that great orphan – humanity', this may help us to bring to the task the requisite understanding and patience."[333] This quote shows that the work with DPs, especially the psychosocial aspect of it, was not short of importance. It is impressive how this quote, too, echoes the familialism flourishing in UNRRA strategy and rhetoric. Here, all of humanity are stylized as orphans, in desperate need of parental, protective hands, executed by UNRRA's well-meaning welfare workers.

Besides these more aloof aspirations of psychosocial work with DPs were more fundamental aspects, too: the provision of material needs and especially

330 Ibid., 39.
331 Ibid., 21.
332 Ibid.
333 Ibid., 5.

the secured supply of food were considered the highest priorities for both physical and psychological health, especially in the early stages of the rehabilitation process. Food security was understood as far more than just caloric intake and rather a central indicator of feeling "wanted in the world." The IAPSG reasoned: "Food, warmth, and security from physical danger are not merely essential to satisfy bodily needs. Their presence is for most of us a reassuring significance as indication that the world is not entirely against us, and indeed approves of us."[334]

Here it becomes clear, again, that the matters of the provision of material needs and psychological were not divorced but had to go hand in hand. Yes, "men do not live by bread alone"[335] but bread is indeed understood as the prerequisite for all else in the mental rehabilitation process.

Some of the proposed rehabilitative measures were geared towards fostering responsibility in the DPs to prepare them for resocialization. The DPs were to be encouraged to assume responsibility as soon as possible: household tasks and repair work were to be given to the DPs. Participating in the management of a DP camp was to foster "the capacity for forming effective working relationships with others, of regaining the practice of shouldering and sharing social responsibility, and of acquiring a sense of social purpose and worth."[336] It is noteworthy how the rhetoric of the *Report* takes on a decidedly democratic slant when discussing the setup of the everyday life in the DP camps and it becomes clear that the DPs were to be assisted in becoming hard-working, productive, and responsible participants in democratic communities: becoming able to "shouldering and sharing responsibility" was the ultimate goal, as it was understood to be the ultimate prerequisite for living in a peaceful community.

Even if it not articulated explicitly, the *Report* suggests a democratic society to be the ideal container for a beneficial development of human beings, and the psychological rehabilitation process should entail both markers of a democratic society and the goal of being able to assimilate in a democratic society later on. The *Report* articulates why central pillars of a democratic society were to be instated within a camp community as soon as possible: central rights were tight to "human dignity." It reads, "Rights like freedom of worship, speech, assembly, choice of work, are now urgent to the restoration of human dignity."[337] What can be considered core democratic values in the IAPSG's reading is tied to the rather aloof concept of "human dignity." Without the freedom to choose the likes of religious affiliations and workplaces, a human being was considered to be stripped of dignity

334 Ibid., 27.
335 Ibid., 1.
336 Ibid., 37.
337 Ibid., 40.

and was thus impeded in his or her psychological rehabilitation. The freedom to choose was linked to dignity, and thus psychic sanity, with everything else considered to be detrimental to the latter. It is phrases like these in the *Report* which impressively illustrate how psychological rehabilitation was linked to certain values – like the freedom to choose, access to independent media, choice of work, etc. – that hint at a certain vision of a society the DPs were to integrate in that evoked the basic tenets of democracy, even though the term was not used, as will be discussed later. Democratic core values were stylized to be harbingers of a beneficial psychic development, and DPs were supposed to be formed to become participants in democratic societies.

A dominant theme in the section of practical steps mirrored the background of several members of the IAPSG: the emphasis on group therapy. John Rickman was deemed the father of group therapy with traumatized soldiers in Britain, and Edward Shils had worked on group therapy as well. The *Report* proposes meetings of eight to 30 DP participants for 90 minutes twice a week to discuss their feelings and experience.[338] Within these group meetings the IAPSG is adamant at avoiding steep hierarchies, with DPs being in turn responsible for moderating these groups. These groups were to have a twofold function: the first function was that they were to serve as a form of therapy setting (even though the term therapy was not used, this is important to mention) to discuss the emotional aspects of displacement; the second function went back to the participatory aspiration that was prevalent in outlining the everyday life in the camp: DPs were to be incentivized to participate in the camps' management and were asked to contribute their suggestions to improve community life.[339]

Besides the opportunity to work or get professional training, the experts stressed the importance of entertainment for the purposes of mental stability. They particularly recommended entertainment films and explained the effectiveness of films as stimulating a sense of orientation. Films were considered "another indication that the world, as well as containing dark elements of hatred and selfishness, is capable of providing interest, recreation and amusement for mankind."[340] The consumption of magazines and radio, as well as their production, would also have enormous value in the DPs' attempt to find their place in the world. The IAPSG recommended the provision of printing presses to produce DP newspapers. Furthermore, they recommended other creative and craftwork such

338 Ibid., 37.
339 Ibid.
340 Ibid., 34.

as game evenings, concerts, dance parties, or band formations.[341] The organization of these activities was recommended to be placed in the hands of the DPs as soon as possible, as the feeling of external regulation would too quickly trigger the feeling of being controlled by allegedly malicious authorities. In the words of the *Report:* "power of authority to help is limited – in the long run we are responsible only to ourselves and to each other."[342]

The strategy was designed to prepare the DPs to (re-) integrate into new (democratic) communities. Certain attributes were considered to be hallmarks of democratic societies, like shouldering responsibility, being productive, and being well informed. These attributes were to be fostered through specific measures in the DP camps. In that, the IAPSG was conscious that the DP camps should be organized in a way that would signal the departure from Nazi reign. "Going Home" meant in the *Report* returning to a democratic society in which citizens would shoulder responsibility and would be productive, working together for the highest good of all. As it has turned out in this chapter, "home" did not necessarily mean the return to prewar homes. Rather, home was considered an emotional concept that could be suspect to change. In that, the IAPSG departed from UNRRA's official agenda which was repatriation by the time of the write-up of the *Report.* This is an important insight as it tells us that the various actors that made up UNRRA's planning body did not all act or think in unison: the administrative-minded upper echelons of UNRRA sought to execute the repatriation paradigm but the IAPSG considered the concept of "home" and the return to a "community" more nuanced and indeed subject to change. Unfortunately, there are no sources that tell us about how this interpretation of the IAPSG was received on UNRRA's executive level.

What has already been mentioned here will be specified in more detail next: the ways in which the IAPSG envisioned the "return" to not just any society but to societies with specific values as it pertained to democracies. The political dimension and aspiration of the IAPSG's conceptualization will thus be now investigated more closely.

DPs as Harbingers of War or Peace

In the reading of the IAPSG, the DP population, ideally future citizens of democratic countries, was not just a group that needed to be administered; DPs were considered a political force to be reckoned with, and thus the "healing" of their psy-

341 Ibid., 36.
342 Ibid., 37.

chic "wounds"[343] was considered of international political importance. In its closing the *Report on Psychological Problems of DPs* drove this point home:

> The displaced people are a force of opinion and emotion of great importance and the state of mental health they can achieve will influence political, industrial, economic and social health in several nations. [...] Their psychological as well as their physical return to society is more than an individual matter; it is an attempt to heal a large wound in world society.[344]

This quote insinuates that the DPs were considered not just charges that needed to be shepherded "home," with their psychic constitution considered decisive for the future: their "successful" rehabilitation was considered as yielding a peaceful future, its failure could cause more chaos and social "ill health" which, in the reading of the IAPSG, could lead to more war. In the DPs' psyches' lay the potential for both peace and war. Consequently, it is now apt to revisit a recurring theme that has been alluded to multiple times over the previous pages, one that is relevant to the overarching interest of this study: the grander framework in which the authors of the *Report* positioned their work with the DPs – the mental health of the DPs vis-à-vis domestic and international politics which ultimately pertains to the nexus of psychology and politics. The authors of the *Report* bestowed their work with DPs with an almost aspirational seeming importance by linking individual psychological rehabilitation with rehabilitating whole societies, thereby healing "a large wound in world society"[345] as the *Report* put it. In the historical background part of this chapter it was discussed how the international mental hygiene movement gained ground in international organizations during the 1920s. Linking individual health with the biopolitical goal of taking care of the "health" of nations and international relations, as the rhetoric in the closing paragraphs of the *Report* suggests, was very much in line with the principles of the mental hygiene movement: transcending the psychiatric clinic towards public health.

The authors of the *Report* make their outlook explicit by closing their *Report* with their conviction, "we know that the health of international relationships grows out of the mental health of nations. The mental health of any large section of humanity is therefore consequence of the remainder."[346]

What is more, the linkage of individual psyches and (inter-) national understanding not only reflected the contemporary tradition of involving the psy-scien-

343 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 41.
344 Ibid.
345 Ibid.
346 Ibid.

ces in international organizations but also can be read as a skillful strategy of legitimization used by the authors of the *Report* to confront UNRRA's administratively minded personnel with considerations about the DPs' psyches.

In any case, when studying the *Report* closely it becomes clear that the overarching goal of UNNRA's psychosocial work was to assist DPs in becoming able to socialize in peaceful societies, becoming citizens of peaceful states, and, most importantly, avoiding another war. In the final paragraphs of the *Report* the authors hark back to the developments after WWI, when the international community had failed, according to the *Report*, to deal with the effects of the "emotional regression"[347] societies had encountered as a result of the war. According to the *Report* "brittle international relations," pacifism, pleasure-seeking," and ultimately "fascism" had grown out of the failure of dealing with the emotional repercussions of the first war.[348] But, as the report stated, "Today we are better armed."[349] The aftermath of WWI helped shape the outlook of the authors of the *Report* in the conviction that the psychic consequences of a war had to be addressed in order to shape a peaceful future, both nationally and internationally. In the words of the *Report:*

> There is much to be said for the view that human cooperation and productivity, and social harmony is the product of the mental hygiene of communities and nations. Even intra-national and international tolerance and harmony appears to depend on the moods and attitudes of the peoples of the earth, insofar as these allow or debar integration in world society.[350]

This quote is particularly insightful to the reader: it not only displays the assumption inherent in the *Report* that the psyche of the individual with its "moods and attitudes" influences "world society" but also reveals, in passing, one of the goals of the rehabilitation work: "human cooperation and productivity." Cooperation was conceptualized as vital to the burgeoning idea of the international community (here called, rather aloof, "world society"), with organizations like the League of Nations and later the United Nations at the forefront, as this institutionalization of international cooperation was hoped to prevent yet another war (an aspiration that undisputedly had failed leading up to WWII).[351] Peaceful coexistence within a

347 Ibid., 40.
348 Ibid.
349 Ibid., 41.
350 Ibid., 40.
351 Miguel Bandeira Jerónimo and José Pedro Monteiro, eds., *Internationalism, Imperialism and the Formation of the Contemporary World: The Pasts of the Present*, First ed. 2018, Palgrave Macmillan Transnational History Series (Cham: Springer International Publishing : Imprint: Palgrave Macmillan, 2018), https://doi.org/10.1007/978-3-319-60693-4; Reinisch, "Introduction."

nation and between nations was understood to be dependent on the psychic constitutions of individuals. Thus, in order to mold the future in as peaceful a way as possible, the psyche of the individual had to be monitored and, if necessary, influenced, even controlled. A certain vision of the future required a certain kind of psychic constitution of citizens. These citizens not only had to be as emotionally stable as possible, hence being as successful in their repression as possible; they were also to be "productive" citizens since the state was also considered to be a collective of workers. The previous chapter on the implementation of practical steps highlighted how DPs were supposed to be prepared in the DP camp to participate responsibly in the camp community, i. e. by way of fulfilling labor tasks.

In another attempt of expanding their realm towards politics, the IAPSG demanded the adherence to what they call "human rights."[352] Without specifying what they actually meant by it, they claimed that the "Fundamental humiliation of displacement [is] that there are no rights at all and that human destiny is no longer within control of individual effort but has become a chancy matter influenced largely by the whim of irresponsible authority."[353]

The installation of "human rights" was to mitigate that sense of lawlessness and loss of control, as it was considered to be "the basic evidence of being valued and wanted by society."[354] The DPs were supposed to be integrated in a "hopeful and integrated society"[355] and human rights were stylized as the groundwork for citizenship in this form of society. Interestingly however, the IAPSG did not position itself explicitly regarding what kind of form of government they envision the DPs to assimilate themselves in. The term "democracy" can be found only once in the *Report*, in the table of contents where they note "democracy may have to be relearned"[356] before they go into the different aspects of modes of behaviors for peaceful community living.

Nevertheless, the final paragraphs of the *Report* indicate what kind of society was envisioned, and into what kind of societies the DPs were hoped to be able to assimilate: a "peaceful society" in which well-adjusted individuals had the necessary emotional security to become responsible and participating citizens who are

352 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 40.
353 Ibid.
354 Ibid.
355 Ibid., 41.
356 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," iv

"productive"[357] and who form a peaceful community and nation that is able to live in peace with other nations.[358]

These last paragraphs have shown how the psychic constitution of DPs was bestowed with the utmost importance regarding the future and the prevention of wars: did DPs succeed in repressing their destructive drives in order to integrate into society, the prevention of war was considered palpable, did that fail, another war loomed. In that, the IAPSG argued in the vein of the international mental hygiene movement, which conceptualized the individual psyche as the nucleus for peaceful future and the prevention of wars.

Now that we have investigated at length the conceptualization of the mental condition of DPs through the eyes of the IAPSG, we will now turn our attention towards gendered modes of rehabilitation as laid out in another preparatory report commissioned by UNRRA's Welfare Division: *Special Needs of Women and Girls.*

Gendered Rehabilitation

As part of UNRRA's planning phase before war's end, the Welfare Division thought it imperative to carve out a special plan for the "special needs of women and girls."[359] To that end, Mary McGeachy commissioned an International Working Party to compile another preparatory report, this time on the special requirements of women and girls who had survived the war. The Working Party started its work on September 1, 1944 and completed a host of reports that was compiled into the paper *Special Needs of Women and Girls* before the end of the war.[360]

Like the IAPSG, the Working Party boasted prominent figures who were at the top of their profession at the time, showing once again how UNRRA enlisted the most prominent and often the most innovative personalities of the psychosocial field to advise the European reconstruction endeavor. The International Working Party consisted of 28 members; social workers, psychiatric social workers, doctors, and psychiatrists, as well as several other delegates from France Poland, and Britain.[361] UNRRA commissioned medical and social work staff that were members of

357 Ibid., 26.
358 Ibid., 40–41.
359 Welfare Division of the European Regional Office of UNRRA by an International Working Party of Social Workers, Psychiatric Social Workers, Doctors and Psychiatrist [sic], "Special Needs of Women and Girls."
360 Ibid., 1.
361 Ibid.

UNRRA's Health Division, such as pediatrician Dr. Audrey Ellis Ross and Dr. R.L. Coigny (UNRRA's Chief Medical Liaison Officer in the European Theatre), but also prominent outside advisors who were at the top of their professions at the time, such as Robina S. Addis,[362] Emanuel Miller,[363] Marjorie Bradford (also a member of the IAPSG), Dr. Martha Branscombe,[364] and Elanor Plumer, the Principal of St. Anne's College in Oxford, UK.

These appointments emphasize again the prominent lineup UNRRA, and especially Mary McGeachy, were able to draw for UNRRA's preparatory work, in both the IAPSG and the Working Party, a lineup that seems innovative, with its members operating at the cutting-edge of their professions at a time when psychology had not yet entered the societal and even scientific mainstream. Mary McGeachy's biographer, Mary Kinnear, called UNRRA's subsequent social policies "enlightened," suggesting that they were shaped by "progressive opinions" that were in line with McGeachy's "own opinions."[365] Looking closer at the Working Party's take on women puts her first statement into question.

The goal of *Special Needs of Women and Girls (SNWG)* was to provide UNRRA welfare workers with a manual that was to educate them on what to expect when being faced with surviving women and girls and the – gendered – specificities of the female plight during persecution, forced labor, and incarceration.

The close reading of this source implies that the Working Party considered what they declared the "breakdown of social standards" to be at the center of the hurt of female DPs.[366] The paper traced the varying experiences of women and girls during the war, but considered the erosion of normative behavior as well as the challenge to gender relations to be one of the core violations. The report

362 Robina S. Addis (1900–1986) was one of the pioneering psychiatric social workers in Britain. Addis joined the working party in her capacity as a delegate of the British National Council for Mental Health, of which she later became the deputy director. Addis became an avid avant-garde advocate for mental health in later life. "Robina Addis (1900–1986): Archives," Wellcome Collection, accessed October 5, 2021, https://wellcomecollection.org/works/yef8epmt.

363 Jewish psychiatrist Emanuel Miller is regarded, along with Donald Winnicott, the father of British child psychiatry: Miller appeared briefly earlier in this study, when the effects of bombings on English children was discussed.

364 Dr. Martha Branscombe was a prominent American social worker, who worked with the U.S. Children's Bureau prior to joining UNRRA, where she eventually rose to director of the Child Welfare Division. Branscombe worked closely with another prominent social worker we have already encountered previously due to her work in the *Study Group:* Marjorie Bradford. The Canadian social worker also contributed material to *Special Needs.*

365 Kinnear, *Woman of the World*, 165.

366 Welfare Division of the European Regional Office of UNRRA by an International Working Party of Social Workers, Psychiatric Social Workers, Doctors and Psychiatrist [sic], "Special Needs of Women and Girls," 2.

states: "The economic and other inequalities [...] the demoralising conditions under which they were forced to live, their isolation from families and home influences, and the severe deprivations suffered by many, were all aimed at breaking down social standards among both men and women."[367]

Integral to the "breakdown of social standards" for the *Working Party* was the loss of dignity. The living conditions in forced labor camps and concentration camps had led to the total loss of "personal dignity" according to the Working Party. The report states "their [women and girls'] personal dignity, ideals, social standards and traditions were violated and insulted."[368] This raises the question of whether personal dignity was tied to specific concepts of gender, specifically here of femininity: what constitutes a dignified life? Is a dignified life of a male different from that of a female? Was a dignified life considered to be tied to living a kind of "normative femininity"? According to the paper, yes: personal dignity was considered to be gender specific, and the fact that women and men were treated equally in the camps, "without mitigation"[369] as the paper put it, was considered especially detrimental.

Young women and girls were stripped of any form of (male) protection. The paper states: "Young girls were left without any proper protection. Women and girls of all ages were subjected to personal indignities and some were forced into a life of degradation."[370] The experts deemed the mixed housing arrangements, and the lack of differentiation of treatment between men and women in labor and extermination camps, as extremely detrimental for the women and an assault on their dignity.

The issue of sexual violence towards women and girls, endemic under Nazi rule, is discussed only tangentially and with a curious framing: contrary to the *Report on Psychological Problems of DPs* the term "rape" is not once mentioned in the whole paper. Instead, sexual violence and forced sex work are labelled under the heading "Women forced into life of degradation,"[371] invoking yet again the theme of dignity as the main topos of the paper. Women were paraded in the nude in the camps, according to the paper. There is also mention of brothels in male camps, where women were "supplied."[372] The rhetoric here is strikingly odd: instead of calling it out for what it was – forced sex work and rape – the paragraph on brothels and other forms of prostitution consists of a technical, almost harmless lan-

367 Ibid.
368 Ibid.
369 Ibid.
370 Ibid.
371 Ibid., 3.
372 Ibid.

guage that fails to reveal the severity of the crime perpetrated there. Women and girls who were forced to work in German factories were "compelled" to work in German brothels in the night, or German soldiers "were given free access to the women's sleeping quarters in the labor camps."[373] This language seems trivializing, even though the whole report was dedicated to highlighting the specific suffering of female DPs.

Contrary to the *Report*, the paper that focuses exclusively on the fate of women and girls curiously lacks an in-depth discussion of the rampant problem of rape, prostitution, and its repercussions, even though other sources show that Marjorie Bradford especially later became keenly aware of the issue of sexual violence and prostitution, as Armstrong-Reid and Murray have outlined convincingly.[374] The reason for this gap in *Special Needs* might again point to the challenge of anticipating the situation on the ground prior to war's end, as both *Special Needs* and the *Report* did: the extent to which sexual violence and exploitation were rampant under the Nazis might only have become understood in its severity once UNRRA welfare teams actually hit the ground running in spring of 1945. *Special Needs* does, however, recognize the need for special treatment of those women and girls that fell victim to sexual violence, recommending the "most skilled help" needed to be made available in the form of "doctors, social workers, and psychiatrists."[375] What kind of therapy these specialists were supposed to apply remained not discussed.

Without calling it that, the paper traces the Nazi strategy of psychological warfare and torture, whose effects would become visible in the DP facilities later. The paper says: "In the attacks made upon the personal dignity of both men and women, every human weakness was exploited and every effort [was] made to demoralize and degrade both the individual and the relations with one another of men and women and young persons."[376]

The annihilation of gender and age differences was considered by the Working Group to be a key instrument of Nazi torture and indignity: a dignified life, for both men and women, required gender and age specific treatment, according to the paper. The annihilation of these social – gender and age – norms was considered to be part of the social hurt perpetrated by the Nazis.

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373 Ibid.

374 Armstrong-Reid and Murray, *Armies of Peace*, 202.

375 Welfare Division of the European Regional Office of UNRRA by an International Working Party of Social Workers, Psychiatric Social Workers, Doctors and Psychiatrist [sic], "Special Needs of Women and Girls," 3.

376 Ibid.

Echoing the *Report on Psychological Problems of DPs*, the International Working Party further deemed the erosion of family structures as extremely detrimental. The Working Party traced varying experiences of women and girls during the war, and those who had the fortune of keeping "the normal family unit intact"[377] would have an advantage over those who did not. The authors of the paper did not deem it necessary to outline what a "normal" family looked like, suggesting once again the (patriarchal) heteronormativity that shaped the image of the family the paper rested upon. Had the family been able to stay together during the war, it was assumed that the war's effects would have been mitigated. This assumption neglected the aspect that Anna Freud, and the IAPSG for that matter, discussed, which was the detrimental effects of psychic suffering (like i. e. anxiety) of a parent on a child. So, the family union was not always the guarantor for resilience. Contrasting *Special Needs* with the *Report* it is apparent how the former employs a more static ideal of the pre-existing family as the guarantor of peace and beneficial development of humans, while the *Report* painted a more nuanced picture, based on Anna Freud's findings.

The advice given in *Special Needs* on the structure of everyday life in the DP camps bears no major difference to that in the *Report on Psychological Problems of DPs: Special Needs* suggests as warm a welcome as possible, the minimization of bureaucracy, as well as the incentive to self-government that was supposed to foster independence in the female DPs. For the reader of the present day this raises the question of whether independence for female DPs also meant challenging the heteronormative concept of marriage, supporting women to live more freely and emancipated in the postwar. The close reading of the source raises doubts to this assumption; in fact, there is no hint regarding a loosening of the concept of marriage and its traditional roles, and rather quite the opposite.

The welfare workers were encouraged to treat their charges on an individual level as friendly as possible, "[the welfare worker] must treat all persons as individuals with courtesy, understanding and respect, and learn to listen and observe."[378]

However, there were also decidedly gendered modes of rehabilitation. The report reflected the conviction that the war had led to defeminization: rehabilitation in the DP camps was to remedy this within the facilities' limited possibilities. Rehabilitation was supposed to cater to a woman's "natural home-making instinct":[379] "In arrangements for housing, the preparation and serving of food

377 Ibid., 2.
378 Ibid., 6.
379 Ibid.

and occupational activities it may be possible to find many useful outlets for women's domestic interests which will have an important rehabilitative effect."[380]

In the vein of the *Report of Psychological Problems of DPs* the report suggests occupational therapy. To that end the report advised specific "female" pursuits that would alleviate suffering and foster the spirits, such as handicraft, using whatever materials available in the scarcity of the DP camps. [381]

The amelioration of the physical appearance indeed plays a major role in the gendered modes of rehabilitation, ascribing women a naturalistic, gendered, impetus of wanting to look pretty. The report reads: "The possession of some decent and pleasant clothes, after this long period of deprivation, will make a considerable difference to individual happiness and behaviour in the center. The women should be encouraged in their natural desire to clothe themselves as decently and attractively as possible."[382]

Alluding to this perceived "natural desire" the report furthermore suggests the setup of beauty parlors to enable women and girls to work on their "presentable appearance" that would foster "assurance and self-respect."[383] The gendered mode of rehabilitation for women suggested by the Working Party employed decidedly heteronormative conceptualizations of woman- and girlhood: femininity became essentialized and naturalized, invoking a woman's "natural instincts" that point her towards care work, handiwork, and the beauty parlor. In a sense, *Special Needs* strikes the reader as curiously more traditional than the *Report,* which emphasizes inner emotional aspects over sheer external markers. One caveat to this critical reading of the paper's impetus to support women in terms of physical appearance needs to be brought up, though: it is imaginable that after years of deprivation the sheer possibility of looking after one's physical appearance, maybe even taking the luxury to visit a beauty parlor, could have a healing and caring effect for both men and women by providing a sense of agency over their own lives. Caring for one's physical appearance could also have held the potential of signaling that other things than mere survival could be entertained. The same goes for the provision of handicraft material: a mother, who is finally able to take care of their children's wretched clothes, may feel a sense of manageability and agency of her own life. The problem, however, lies in the unambiguous generalization and naturalization of certain traits: not all women sought out these activities.[384]

380 Ibid.

381 Ibid., 7.

382 Ibid., 8.

383 Ibid.

384 Sadly, there is a dearth of studies focusing on female DPs. Atina Grossmann comes the closest by investigating what she calls the 'DP baby boom' and pregnancy in the DP camps. See chapter

It is noteworthy that UNRRA deemed it necessary to compile a report on the specific plight of women during displacement, but not on the plight of men. Was masculinity considered to have suffered less of a blow during the war? Was displacement considered less detrimental to the psyche of someone who identified as male? Those men that ended up in a DP camp usually were not conscripted soldiers, but nevertheless the absence of special reports on the situation of men raises the question of whether war in itself was considered a male pursuit, and thus the rehabilitation of this gender was not as emphasized as that of women and girls. While this consideration remains in the realm of speculation it can be taken for granted that females certainly were considered more in need of protection than men, even though heavily traumatized male DPs were not unusual and certainly in need of support. Nevertheless, since the reestablishment of normative gender roles stood at the center of the rehabilitation efforts, the absence of plans for men remains curious. Men's lives were uprooted as well and they, too, were persecuted and suffered losses during the war, even though persons of the same sex – the Nazi elite – had instated the war. Did UNRRA consider the normative roles of men to be remaining intact during the war, since war was considered male? The question remains unanswered.

To sum up it is vital to note that the discussion of "special needs" of women and girls rests on the category of "home." Home, for the authors of the paper, was the container in which the normative social order would ideally take place. Working towards reinstating prewar gender relations became conceptualized as an attempt at reconstructing intimate home relations. The "home" with its "normal" setup and innate structure had been challenged and, more often than not, been destroyed, and UNRRA rehabilitation worked toward restoring the home, "l'intime," as Cabanes and Piketty described it for the time after WWI.[385] At the heart of the "retour à l'intime," according to Cabanes and Piketty, stood the drive towards "normalization."[386] UNRRA's gendered rehabilitation strategy, too, acted upon the premise that there were normative social gendered roles whose de-

"Mir Zaynen Do: Sex, Work, and the DP Baby Boom, in Grossmann, *Jews, Germans, and Allies*, 184–237. Studies on DP women who strayed from the heteronormative vision for women, like what would today be called LGBTQI+ persons are virtually non-existent and are not even mentioned in existing more general studies on DPs.

385 Bruno Cabanes, Guillaume Piketty, and Centre d'histoire de Sciences po (France), eds., *Retour à l'intime: Au Sortir de La Guerre* (Paris: Tallandier, 2009); Bruno Cabanes, "Negotiating Intimacy in the Shadow of War (France, 1914–1920s): New Perspectives in the Cultural History of World War I," *French Politics, Culture & Society* 31, no. 1 (January 1, 2013): 1–23, https://doi.org/10.3167/fpcs.2013.310101.

386 Ibid.

mise threatened social order and that had to be restored to ensure peace – normalization had to take place.

3.4 Conclusion

Before we go on casting a look at one case study of psychosocial work on the ground, it is now apt to briefly recapitulate the findings of the close reading of the *Report on Psychological Problems of DPs* and *Special Needs of Women and Girls*. The aim of the examination of the two reports was not to compare them, but rather to read them in a complementary way.

The main focus in the examination of the two texts was on pointing out on what kinds of assumptions and modes of thought the practices of UNRRA and thus the first psychosocial strategy in a humanitarian context rested. Central to the investigation was to understand how the authors of the papers conceptualized what happened to the DPs psychologically, what they deemed to be the goal of the rehabilitative work, and how they sought to work towards these goals in practical steps. Overarching the probe was the question of the nexus of psychology and politics and the extent to which the preparatory reports gave any insight into the political dimension of psychosocial work with DPs: was the psychological rehabilitation work with DPs designed to serve a certain vision of the reconstruction of Europe and the whereabouts of its dispersed people, or was it dedicated purely to the amelioration of psychological suffering, no matter the political implications of the individual decisions of the DPs?

The IAPSG employed their psychoanalytic, Freudian informed, framework to conceptualize the psychic effects of displacement: they deemed a sense of belonging to a family and a community as the most central need of a human being, thus considering a feeling of being "cast out" to be the central hurt of involuntary displacement, which produces all sorts of negative effects, subsumed under the psychoanalytical term regression. In the *Report*, a considerable number of pages is dedicated to enlighten the reader on the basic tenets of the Freudian psychoanalytical conceptualization of war, why it happens, and what kind of behaviors it produces. The other, considerably shorter, paper that has been discussed in this chapter – *Special Needs* – does not entail such a theoretical part; in fact it neither sheds light on the body of knowledge the authors applied to the female DPs nor does it give hints on the framework the authors employ to understand the psychic situation of DPs.

It has become clear from the analysis of both sources that the goal of the rehabilitative work was to support the DPs in becoming able to assimilate into a community to become responsible members of a peaceful community, where they

would abstain from violence and help through their "moods and attitudes" to prevent another war, and where they would integrate into normative social systems, within patriarchally structured families.

In order to understand to what extent especially the IAPSG delivered the psychological groundwork for UNRRA'S administrative goal – repatriation of all DPs – or not, it was vital to truly understand the notion of community, family, and home the IAPSG subscribed to. Were the family and the community, these important markers of the IAPSG's strategy, static concepts, meaning the biological family of origin and the community (nation) of origin?

As matters stood in 1944, it would have been in line with UNRRA's strategy to insist on the reunion of families of origin and to equate community with nation, implying the return to the prewar nation of origin. But the *Report* not only abstained from a clear position on UNRRA's repatriation primate by focusing on the emotional aspects of displacement and rehabilitation, it also complicated the notions of family, community, and home. Firstly, the reunion of biological families was not the ultimate primate for the IAPSG. Yes, the strategy proposed by the *Report* was shaped by an unshakeable belief in the container of family, meaning constant male and female authority figures like parents, but they did not view the biological family as the absolute as it was stylized within UNRRA's official strategy and has been purported elsewhere in secondary literature.[387] Yes, the ideal would be for displaced children to remain with their biological parents (if they survived and were traceable). But if one of them proved to be psychologically challenged (as most of them were after years of persecution), the child was to be separated from the parents and be put into surrogate families. The structure of the family, the container, as such was the linchpin of UNRRA's strategy, but it did not necessarily have to be the biological family.

Things stand similar when it comes to the notion of the community. The goal of the rehabilitation work was to support the DPs in becoming able to become active and responsible members of a community. But was the community synonymous with nation? And did it have to be the prewar community, meaning should DPs return to their communities of origin? The answer is not necessarily. The IAPSG clearly put forward the possibility of a new community, even though at the time of the write up of the *Report* (late 1944) the goal of UNRRA's work was clearly repatriation – the return to the old home/community. Home is a vital concept in the *Report*, one to be attained by the DPs down the line; whether this was an old or new home, however, is not strictly defined. The psychiatrists consider it important that humans have the feeling of emotional security, feeling safe, loved,

387 Zahra, "Lost Children", 113.

and valued. But they do not talk about the allegiance to a place, to the geographic localization of the place where emotional security happens. The term displacement insinuates an actual physical place that has been lost and that should be (or wants to be) regained, but for the IAPSG the notion of home holds a more figurative meaning. In the initial strategy of UNRRA, however, home is indeed understood as geographic. Thus, the *Report* was not in line with UNRRA strategy regarding the understanding of "home." Within UNRRA strategy, home was a static thing, oriented on prewar belonging; for the *Report* home was a predominantly emotional concept that was malleable, suspect to change, and not necessarily tied to a geographic place.

It is tempting to read the *Report* as a source that underpins UNRRA's administrative strategy of repatriation, reading it as the psychological groundwork program of how to prepare the DPs for repatriation. Upon closer inspection, however, there emerge more nuances, bordering on fractures or contradictions regarding the repatriation strategy. The community and family aspect is very strong in the *Report*'s narrative, however, the emphasis on the biological family and the emphasis on the return to a prewar community/nation is absent in the *Report.* There is definitely an adherence and reliance on the container of the family and a community, but not the biological family or prewar nation. This is striking and suggests the relatively strong adherence of the authors of the *Report* to the ethos of their profession, not being willing to subsume their findings or recommendations entirely to UNRRA's administrative (political) goal. This insight points to the fact that UNRRA's strategy was not aligned on all levels: what UNRRA's executives wished to see implemented was not necessarily mirrored in the psychosocial strategy the IAPSG proposed.

Even if the paper *Special Needs* was not supposed to be read as point of comparison to the *Report*, but rather as a complementary text, *Special Needs* strikes the reader as more heteronormative and adherent to UNRRA's overall strategy than the *Report. Special Needs of Women and Girls* reflected the ideology and goals of UNRRA's social policy to a larger extent, with its emphasis on the family and country of origin: the restoration of traditional social systems, with a traditional family at its heart, in which men and women act on their traditional roles. A dignified life for both men and women, as it is laid out in the paper, required gender and age specific treatment. The elusive term dignity is often referred to and is tied to conceptualizations of age and gender: age and gender appropriate treatment is understood as a bulwark for upholding the individual's dignity. The *Report* did not present such normative assumptions but focused more on the deeper inner emotional aspects of such structures, emphasizing that the external structures were malleable.

It has become clear from both sources that their authors did not look simply at the amelioration of the individual mental states, but they both recommended their strategies with an eye toward the societal, national, and international implications of certain behaviors. Thus, I argue, both bodies – the IAPSG and the Working Party – had a political dimension to their work in mind, explicitly and implicitly. The IAPSG, especially, was very clear in the nexus of their work as psychosocial experts working on the "moods and attitudes" of individuals with the larger coherence of communities, nations, and international relations. One influences the other. The individual mental state was conceptualized as decidedly political, so working on or improving this mental state was also political. This axiom is vital to the psychosocial strategy of UNRRA, as this chapter has shown. Informed by Freud's thinking about the origin and effect of war on an individual's psyche, the group held a certain vision of the future in mind that required a certain kind of psychic constitution of citizens. The authors of *Special Needs of Women and Girls* were less overt regarding the political dimension of their work, however their appeal to strengthen normative gender behavior and relations in effect served to uphold a certain vision of cohabitation, as it pertained to Western liberal democracies.

In a Foucauldian sense, the psychosocial experts of UNRRA, the IAPSG, and the International Working Party exercised a form of international biopolitics: ameliorating the mental health of DPs as groundwork for the international health of populations.

Having delved extensively into the theoretical aspects, the focus now shifts to the practical realm. The subsequent pages will scrutinize the transition from planning, as conceptualized by psychosocial experts, to its implementation on the ground. Central to our exploration will be an examination of how these plans either successfully materialized or encountered challenges in their execution.

4 Negotiating National Belonging

In June of 1945, UNRRA's first DP facility dedicated to the care and administration of unaccompanied children started operations: the International Children's Center in Kloster Indersdorf near Munich in the American zone of Germany. Under the direction of welfare director Greta Fischer, UNRRA Team 182 took on the demanding task of bringing food and solace to survivors while straddling UNRRA's administrative goals. The tension between UNRRA's administrative agenda – repatriation – and meeting the psychosocial needs of child survivors is the focus of the first case study from on the ground.

UNRRA's first "International D.P. Children Center" in Kloster Indersdorf will serve as a case study in order to investigate to what extent UNRRA's plans regarding the psychological rehabilitation of DPs were implemented, and to sift out possible discrepancies between the initial, theoretical plans of the IAPSG and its implementation in practice.

The International DP Children Center was set up in June 1945 on the grounds of a former catholic convent, just 15 kilometers north of the infamous concentration camp Dachau. The Children's center operated from June 1945 to July 1946 and served as a pilot project of UNRRA's work with unaccompanied children.[1]

Before we dive into a close analysis of the psychosocial work being done in the Children Center in Kloster Indersdorf, it is paramount to set the scene of the first months after the Nazi's defeat. By way of a concise historical contextualization, the focus will lie on UNRRA's work in the American zone, as Kloster Indersdorf was situated there. The International D.P. Children Center in Kloster Indersdorf will serve as an apt example not only of the implementation of the psychosocial principles the *Study Group* proposed (or the negation thereof), but also of the complicated reality of working with uprooted people; a reality that was shaped by the psychic repercussions of the war as well as by the ever-present negotiations of national belonging that were the norm in the postwar DP camps. The work with the so-called "unaccompanied children" in Indersdorf will illustrate how questions of (national) belonging and citizenship were entangled with the psychological rehabilitation of the displaced children.

1 Greta Fischer, "D.P. Children's Center Kloster Indersdorf Kreis Dachau," Greta Fischer Papers, January 1946, Box 2, Folder 8 – 9, United States Holocaust Memorial Museum Archives, Washington, DC; Paul Friedman.

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4.1 The DP Operations Begin: The Year 1945 in DP Camps

Throughout the initial postwar months, the political landscape for Displaced Persons was notably dynamic, leaving their paths into the future uncertain.[2] Given that the psychological rehabilitation of DP children in Indersdorf was intricately linked to their national identity, we will now briefly examine the fluid dynamics of the political situation in 1945.

In the early days after war's end, the hastily set up DP camps housed an extremely heterogeneous group of DPs, a challenge that quickly led to tensions within the community of uprooted people. Polish DPs had to share a dorm with Ukrainian DPs and, even more charged, Jewish DPs were flanked by Ukrainian partisans,[3] suspected of collaboration with the Nazis, or antisemitic Poles.

After the disintegration of the Habsburg Empire in the wake of WWI, Eastern and Central European countries and their heterogeneous populations were subjected to many ethnic quarrels, conflicts that were only exacerbated by the Nazis' population policy. These subliminal conflicts now erupted in the DP camps. Through this, a major challenge of UNRRA's work in Europe as well as evidence of the failure of UNRRA's plans emerged quickly and mercilessly: the handling of the national belonging of DPs and the territorial and ethnical chasms in Eastern Europe that had only deepened during the war.[4] UNRRA's initial strategy rested on the assumption that the prewar national borders matched ethnic fault lines. But the postwar reality showed that this was not realistic for Western European DPs (like the Flemish minority in Belgium and the Catalans in Spain), and certainly not for Eastern European DPs.[5] The DP camps became crystallization points of these ethnic quarrels and conflicts erupted.

These conflicts revealed the shortcomings of UNRRA's plans. UNRRA's repatriation paradigm assumed that the DPs wished to go home to their prewar countries of origin, and that the challenge would be to manage the exodus rather than, as it turned out for several DP groups, to persuade them to go home.[6] The repatriation

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2 Angelika Königseder and Juliane Wetzel, *Lebensmut Im Wartesaal: Die Jüdischen DPs (Displaced Persons) Im Nachkriegsdeutschland*, 18–35.

3 For an excellent study on the fate of Ukrainian DPs and their negotiations as Ukrainians who were to be repatriated to the Soviet Union, see *Antons, Ukrainische displaced persons in der britischen Zone.*

4 For a study on population movements specifically of the year 1944–1949, see Jessica Reinisch, *The Disentanglement of Populations Migration, Expulsion and Displacement in Post-War Europe, 1944–9* (Basingstoke: Palgrave Macmillan, 2011).

5 Specifically on the fate of Polish Jews, who survived in the Soviet Union and entered Germany in 1946, see *Nesselrodt, Dem Holocaust Entkommen.*

6 Taylor, *In the Children's Best Interests* (2017), 281.

strategy assumed a "homing instinct" inherent to the DPs' plight, an understanding of the situation of refugees that became somewhat of a topos in dealing with the perceived desire of refugees to return home in later conflicts, as Peter Gatrell has shown.[7] The postwar reality and its questions of belonging, however, turned out to be infinitely more complex and became deeply entangled with questions of the psychological rehabilitation of DPs.

Mostly Soviet DPs, Polish-Jewish DPs, German Jews, Soviet Jews, and Polish-German DPs challenged UNRRA's monolithic repatriation approach.[8] But it was the groups of Jewish DPs and their particular plight that challenged UNRRA's population management the most and the quickest. The Children's Center housed both Jewish and non-Jewish children. However, the negotiations surrounding the special treatment of Jewish DPs will be briefly delineated because it is of concern for all of the following case studies.

Pressured by news about Jewish survivors having to endure the DP camps in the US zone next to unfriendly comrades, US President Truman tasked the Philadelphian academic Earl G. Harrison with conducting a survey on the situation of Jewish DPs.[9] Harrison came to the conclusion that the situation of the Jews was untenable, remarking famously:

> As matters now stand, we appear to be treating the Jews as the Nazis treated them except that we do not exterminate them. They are in concentration camps in large numbers under military guard, instead of the S.S. troops. One is led to wonder whether the German people, seeing this, are not supposing that we are following or at least condoning Nazi policy.[10]

Harrison judged the situation in the DP camps as abysmal: he did not even bother to call the assembly centers by their technical name, cutting straight to the heart of the matter, as he saw it: The assembly centers, or DP camps, presented a continuation of the concentration camp system. This, according to Harrison, needed to

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7 Gatrell, *The Making of the Modern Refugee*, 95.

8 Soviet DPs were mandated, according to the Halle agreement (a little known addendum to the Yalta conference agreements), to go back to the Soviet Union, whether they wanted or not; Polish-Jewish DPs feared the anti-Semitism of their non-Jewish compatriots back home; German Jews were, as "ex-enemy nationals," technically not under supervision of UNRRA; and the belonging of Polish-German DPs became challenged in light of the territorial shifts along the Oder-Neiße line. Holian, *Between National Socialism and Soviet Communism*, 29–56.

9 Angelika Königseder and Juliane Wetzel, *Lebensmut Im Wartesaal: Die Jüdischen DPs (Displaced Persons) Im Nachkriegsdeutschland*, 35–47.

10 Earl G. Harrison, "Report of Earl G. Harrison, 24 August 1945," August 24, 1945, United States Holocaust Memorial Museum, accessed May 8, 2020, https://encyclopedia.ushmm.org/content/en/article/the-harrison-report.

change immediately. The Harrison report provoked a swift policy shift regarding the situation of Jewish DPs in the US-occupied zone of Germany: Jewish DPs in the US occupied zone were moved to exclusively Jewish DP camps and, more importantly, for the first time Jews were considered a special group beyond their prewar nationality. In effect, Jewish became a nationality in the US occupied zones.[11] Jewish, at last, became a nationality without a nation in the US Zone, much to the dismay of the British who were keen to keep their Mandate Palestine and kept on administering their British Zone of Germany as such.[12] Jewish DPs were now subsumed under the term "stateless" – a watershed moment in the history of the Jewish people because the term itself intrinsically posed an important question: could a state for those without one be created? This played into the Zionist call for a separate state of Israel: the Jewish people became recognized (at least by the American officials) as a group that needed a state.[13] The US occupied area consequently became a haven for Jewish DPs because they hoped to be supported in their desire to emigrate to Palestine.[14] It is this backdrop against which the work at Kloster Indersdorf negotiated the everyday life with the children.

Unaccompanied Children

Besides Jewish DPs, the countless children that were roaming the streets of Europe without parents were the group of DPs that challenged UNRRA the most and required specific administrative processes to tackle. To address one of the most complex issues of the postwar months, UNRRA coined the term "unaccompanied children" for those under 18 years of age who were either orphaned, separated from their parents, and/or without legal guardians as effects of the war.[15] An effective strategy was soon needed to determine whether there were any surviving relatives or where the children should remain. In the US and British zone, UNRRA was di-

11 Angelika Königseder and Juliane Wetzel, *Lebensmut Im Wartesaal: Die Jüdischen DPs (Displaced Persons) Im Nachkriegsdeutschland*, 35–47; Ouzan, "Rebuilding Jewish Identities in Displaced Persons Camps in Germany." For more in specifically Jewish DPs see Grossmann et al., *Jews, Germans, and Allies*, 131–84.

12 For a study on Jewish life in the British zone of Germany, see *Lavsky, New Beginnings.*

13 Miriam Rürup, "Von Der Offenheit Der Geschichte: Der Umgang Mit Staatenlosigkeit Und Die Weltbürgerliche Idee," 95.

14 Angelika Königseder and Juliane Wetzel, *Lebensmut Im Wartesaal: Die Jüdischen DPs (Displaced Persons) Im Nachkriegsdeutschland*, 35–47.

15 Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," 54.

rectly involved in child search and tracing[16] (in the French zone the French military government took care of the children.)[17]

Only slowly did UNRRA devise a coordinated attempt at reuniting children with their families by instating the *Child Tracing Section* of UNRRA, as UNRRA was not prepared for the number of unaccompanied children by war's end: the Child Tracing Section was founded in January of 1946 within UNRRA.[18] Staffers of the Child Search Teams, whose work preceded the founding of the Child Tracing Section, scoured postwar Germany in search of victims of the Nazis' attempts at "Germanization" and unaccompanied children on the road by themselves, looking for relatives and trying to reunite families. UNRRA worked closely here with other relief organizations such as the Red Cross and Jewish organizations.[19] The search teams also worked in the DP camps and meticulously registered all information about the children. The Child Tracing Division, based in Bad Arolsen, analyzed the information recorded by the Child Search Branch in order to reunite families.[20] Once located, these children were transferred to one of the 19 UN Children's Centers located in the U.S. zone, where they were temporarily housed, usually with the goal of repatriation. In the American zone, the focus of this study, UNRRA instated at least 14 centers for Jewish children and young people, and about another six[21] for gentile minors of all nationalities that were subsumed under the term "United Nations Displaced Child." The International DP Children Center was the first of its kind upon its inception in June 1945. It was open to unaccompanied children of all nationalities.

Children's centers usually started operations under the umbrella of UNRRA, but from 1946 on the administration of some of these children's homes was transferred into Zionist hands, and *kibbutzim* were established to prepare the Jewish

16 According to Verena Buser, "'Search' in general was defined as the localization of displaced children on a mass basis with the aim to reunite them with family members or relatives. 'Tracing' activities comprised both the identification of individuals for which UNRRA had received tracing requests or tracing of individuals by the so-called Child Search and Registration Teams." Ibid., 51.
17 Christian Höschler, "The IRO Children's Village Bad Aibling," 19.
18 Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," 61.
19 Ibid., 54.
20 To this day Arolsen houses 30 million documents from Nazi persecution and it supports families in finding relatives. "Internationales Zentrum über NS-Opfer," Arolsen Archives, accessed October 5, 2021, https://arolsen-archives.org/.
21 Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," 68.

children for emigration to Palestine.[22] These administrative processes are important to understand, for two reasons: firstly, UNRRA's focus on searching and tracing children precipitated the administrative move to open DP camps designed specifically for minors, even though the preparatory reports discussed in the first part of this chapter (the *Report* and *Special Needs*) did not propose separate child housing. It is vital to understand that UNRRA instated children's centers in order to better administer the reunification of families (if possible) or to otherwise prepare the children for repatriation. Secondly, the woes of unaccompanied children and UNRRA's subsequent focus on them is important to keep in mind while investigating the psychosocial work performed in such children's homes: these children's homes were in a sense waiting rooms toward the future for these children, never designed to be anything other than temporary. This aspect is important to remember when diving into the possibilities and limits of psychosocial work in DP children's homes.

Over the course of UNRRA's first operative year in postwar Europe, the challenge of aligning administrative plans with the reality of a fragmented continent and its population on the move had emerged, with ample effects on the psychological rehabilitation of the uprooted. It was up to UNRRA's welfare workers on the ground to reconcile the administrative tasks with the human side (and cost) of the situation. It was this challenge that Greta Fischer and her colleagues at Indersdorf faced in their work with the children. Next, the work of Greta Fischer and her colleagues at Indersdorf will be highlighted to get a better sense as to how UNRRA workers grappled with the exigencies of negotiating UNRRA's administrative woes with the psychic constitution of their wards.

4.2 The International Children's Center Kloster Indersdorf

In June 1945, Greta Fischer, welfare director of UNRRA Team 182, was tasked by UNRRA and SHAEF (Supreme Headquarters, Allied Expeditionary Force), the Allied commander headquarters in Europe, with scouting a property where she would set up UNRRA's first center for unaccompanied children.[23] Over the course of the following pages, the psychosocial work performed at Indersdorf will be delineated in order to understand the degree to which Fischer and her colleagues aligned their practice with the strategy as proposed by the preparatory reports,

22 For the history of the International D.P. Children Center in Kloster Indersdorf, see *Andlauer, Zurück ins Leben.*

23 Greta Fischer, "Fischer, Report Indersdorf 1946," 1–4.

and the degree to which they worked towards UNRRA's repatriation paradigm, as well as how it related to aspects of psychological rehabilitation. The body of sources underlying this case study is dominated by source material of Greta Fischer, administrative reports[24] she wrote for UNRRA, private writings[25] of Fischer recounting her work at Indersdorf, as well as an oral history interview[26] conducted in 1982 by the American Holocaust Museum in Washington, DC.[27] The versatility of the sources material allows a more nuanced view onto Fischer's conceptualization of her work in Indersdorf: while the administrative sources had to prove she was aligning her practices with UNRRA's executive orders, her private writings show the ways in which she, personally, made sense of her work with DP children in Indersdorf.

Fischer settled upon a twelfth-century convent in the town of Markt Indersdorf, 15 km north of Dachau, locale of the longest running Nazi concentration camp until its liberation on April 29, 1945.[28] When Team 182 arrived, the convent was used as a Nazi children's home.[29] Its grounds were enclosed by 70 hectares of land that provided ample space to grow vegetables, no small feat in a time of scarcity and hunger in the immediate postwar era.[30] Fischer subsequently succeeded in growing food and keeping horses, pigs, and chicken, producing a deceivingly idyllic backdrop to life at Indersdorf.

The UN International Children's Center in Kloster Indersdorf operated from June 1945 to July 1946, before moving to much larger premises in Prien am Chiemsee.[31]

Until 1937, the convent had been a children's home, administered by the Catholic Sisters of St. Vincent de Paul.[32] In 1938, the Hitler Youth moved in before it became a children's home again in 1939. The Protestant Sisterhood "Vorstand der Inneren Mission" ran an orphanage there, about which Greta Fischer noted: "When the UNRRA team visited, the institution gave the appearance of being a typical Ger-

24 Greta Fischer, "Fischer, Report Indersdorf 1946"; Fischer, "Indersdorf (Brief Analysis)."
25 Greta Fischer, "Greta Fischer Written CV" (n.d.), Anna Andlauer Private Archive; Greta Fischer, "Personal History" (n.d.), Anna Andlauer Private Archive; Greta Fischer, "From Awareness – to Action" (Ottawa, 1985), Greta Fischer Papers, United States Holocaust Memorial Museum Archives, Washington, DC.
26 "Oral History Interview with Greta Fischer."
27 Andlauer, *Zurück ins Leben*, 21.
28 U.S. Seventh Army, *Dachau Liberated: The Official U. S. Army Report* (Inkling Books, 2002), 1.
29 Andlauer, *Zurück ins Leben*, 20.
30 Ibid., 2.
31 Ibid., 179.
32 Ibid., 20.

man orphanage, quite clean on the surface, the children well disciplined, perhaps too well."[33]

In June 1945, Team 182 had formed and began to manage the Indersdorf Children's Center, initially with 11 and later with seven employees.[34] The first director of Team 182 was the experienced social worker Lillian D. Robbins who was replaced in early 1946 by the Canadian Jean Margaret Henshaw,[35] who later also managed the Children's Center in Prien am Chiemsee. Robbins was assisted by André Marx, a Jewish survivor from Luxembourg, and Greta Fischer as Welfare Officers. They took care of the everyday life in the center as well as designing the curricula for the in-house school, administering the search for the children's families and being responsible for the psychological rehabilitation of the children. They were assisted by Helen Steiger, a Swiss teacher. French nurse Yvonne Menny and Belgian doctor Gaston Gérard were responsible for medical care. Other UNRRA employees were hired to secure supplies and as cooks.[36]

The task of Team 182 proved to be herculean. In order to cope with the overwhelming workload in the children's center, Team 182 had to rely on external help. Fischer and her colleagues therefore resorted to unconventional methods, including hiring staff that was not met with support by UNRRA headquarters. The decision to bring the nuns of the convent that had worked in the Indersdorf monastery before 1938 back to the monastery to give Team 182 a hand was not without controversy.[37] Nevertheless, cooperation with the sisters went smoothly, while cooperation with other external personnel sometimes caused difficulties. Although Germans from East Prussia and Silesia were not officially DPs, since they were considered "ex-enemy nationals," they were hired for room and board to work as kitchen help or in the laundry room.[38] However, these workers were not supposed to interact directly with DP children so as not to reawaken traumatic memories of Germans. The indirect support of those who were later called expellees (so-called "Heimatvertriebene") was not met with goodwill everywhere in UNRRA.[39] The enlistment of expellees and adult DPs for caretaking illustrates how the paths of the heterogenous groups of uprooted people entangled in the postwar months.

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33 Greta Fischer, "Fischer, Report Indersdorf 1946," 4.

34 Andlauer, *Zurück ins Leben*, 22.

35 For a detailed take on Henshaw's work with UNRRA, see Armstrong-Reid and Murray, *Armies of Peace*, 202–13.

36 Andlauer, *Zurück ins Leben*, 22.

37 Ibid., 25–26.

38 Ibid., 27.

39 Ibid., 24–30.

Adult DPs were also employed, as the *Study Group* had proposed. These DPs were tasked with speaking with the children in their native languages and preparing them for repatriation to their countries of origin. What in theory corresponded to the planning ideas regarding the assimilation of the DPs into their countries of origin turned out to be problematic, as many DPs seemed unable to take care of the children. Many were so consumed by the difficulties of their own situation, and sometimes so severely traumatized, that they did not prove to be suitable pedagogical personnel.[40]

Over the first year of UNRRA's operations in Europe, Greta Fischer and her colleagues grappled with the challenges of setting up a children's home that was both to meet UNRRA's administrative tasks of sorting out the kids' national belonging and provide them with an atmosphere in which they could start to recover psychically from their experience. The fact that this happened in the country that had instated the horrors of the war, just a few kilometers away from a big concentration camp, adds extra layers of challenges that need to be kept in mind while thinking about the possibilities of psychological rehabilitation there.

The following pages are going to reflect on the work done in Indersdorf, focusing particularly on the extent to which Fischer and her colleagues applied the strategy proposed in the preparatory reports. A lot of insight will be gathered from Greta Fischer's own administrative report for UNRRA[41] as well as an oral history interview conducted retrospectively in 1982.[42]

The Children

The UN International Children's Center in Kloster Indersdorf housed in sum 613 Jewish and gentile unaccompanied children from 22 countries in total.[43] On average Indersdorf housed 200 children at a time.[44] Approximately a third of the children were Jewish. Jewish unaccompanied DPs were mostly survivors of concentration camps or had survived the war in hiding with Christian families, in monasteries, or in the Soviet Union.[45] Gentile children were mostly children of

40 Ibid., 28–30.

41 Greta Fischer, "Fischer, Report Indersdorf 1946."

42 "Oral History Interview with Greta Fischer."

43 Due to constant fluctuation, there is no total list of the 613 registered Displaced Children. Principal Welfare Officer Greta Fischer left three lists with a total of 264 names, including one list with 52 Jewish children. Cf. Anna Andlauer,"Andlauer, Die Kinder von Indersdorf," 105.

44 Greta Fischer, "Fischer, Report Indersdorf 1946," 8.

45 Anna Andlauer, "Andlauer, Die Kinder von Indersdorf," 109–11.

forced laborers, or had been forced to work themselves, having been abducted for labor in the "Reich." Another group of kids were victims of Nazi Germanization projects: they had been kidnapped to be put in Nazi Germanization homes, such as the infamous "Lebensbornheime."[46]

In January of 1946, 50 of the kids housed in Indersdorf were younger than three years of age, eight children were between four and 12, and the majority of the (especially Jewish[47]) children were older than 14.[48] Fischer recounts in her January 1946 report that those under three years of age and those over 12 needed the most care, as those were the majority of the child survivors.[49] Those under three were usually gentile infants who were victims of the "Germanization" efforts of the Nazis. Upon arrival in the death camps most young children were immediately selected for death, thus the majority of surviving Jewish children were older than 14.

Fischer and her team also had several babies in their care, mostly the offspring of women forced laborers. Babies of forced laborers were usually forcefully adopted or put in Nazi children's homes. Adjacent to the Indersdorf convent was a "Kinderbaracke" run by protestant nuns in which babies were housed. Upon her arrival Fischer rescued 62 babies, with 32 of them dying of starvation soon thereafter.[50] Identifying the babies proved to be especially challenging: the Nazis had done a thorough job in destroying any identification of children in their hands, meaning it was often impossible to determine the babies' nationality.[51] Their identification was the subject of constant negotiation.

Determining the children's age was challenging in general. Many of the young children were too young to know where and when they had been born. Others, often mature beyond their years, had learned to adjust their age to their circumstances, "to meet the exigencies of a particular situation," as Greta Fischer put it:[52] children who survived concentration camps oftentimes pretended to be older than 14 because they had internalized that being younger than this age almost certainly

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46 For a detailed account on children abducted for Germanization purposes, see Ines Hopfer, *Geraubte Identität: Die gewaltsame "Eindeutschung" von polnischen Kindern in der NS-Zeit* (Wien: Böhlau, 2010).

47 For more on childhood under National socialism, see *Stargardt, Witnesses of War. Dwork, Children with a Star.*

48 Greta Fischer, "Fischer, Report Indersdorf 1946," 12.

49 Ibid., 8.

50 Andlauer, *Zurück ins Leben*, 53.

51 Eileen Blackey, "UNRRA Closure Report on United Nations Unaccompanied Children in Germany," June 1947, 4, Archives Nationales.

52 Greta Fischer, "Fischer, Report Indersdorf 1946," 121.

meant death in the gas chambers.[53] The children's center was asked to provide shelter and assistance to "any United Nations unaccompanied child" as Greta Fischer put it, but the majority of children were of Polish or Yugoslavian origin.[54]

Greta Fischer painted the official objective of the Children's center as to provide the children with the necessary material means, screen them regarding their nationality, and to "re-nationalize," as she put it, them as soon as possible.[55] It can be presumed that Fischer used the term "re-nationalize" here synonymously with "repatriate," meaning to return the kids to their countries of origin (if those were known).

The question of language was at the top of the welfare workers' minds. Greta Fischer recounts in her report that, for better or for worse, since most children spoke at least some German, the German language "served as a kind of bond" and was spoken most frequently.[56] But, since the children were supposed to be prepared for their repatriation, the UNRRA staff was eager to teach the children their "native tongue,"[57] meaning their prewar language. Language was regarded as an important marker for nationality and citizenship and thus became an integral part of the preparation of the attempted "re-nationalization" performed at Indersdorf.

It did, however, soon dawn on Fischer and her colleagues that repatriation, this brainchild of UNRRA's planners, seemed mostly inadequate when faced with the condition of the children and the fluidity of the situation as a whole.

Greta Fischer

Decades after her work in Europe's DP camps, Greta Fischer reminisced about her decision to work for UNRRA: "The war, the London Blitz, the separation from my own family and the stories which came out of Germany motivated me strongly to answer the call for volunteers to go overseas to help in the rehabilitation of the destruction that had taken place."[58]

Not only did Greta Fischer's personal as well as professional background make her attuned to the plight of uprooted children and their mental state; this chapter

53 Ibid., 9.
54 Ibid., 10.
55 Ibid., 11.
56 Ibid.
57 Ibid.
58 Greta Fischer, "From Awareness – to Action," 3.

will also elucidate how Fischer's involvement with UNRRA sheds light on gendered power imbalances that shaped humanitarian efforts after World War II.

Greta Fischerova was born to a Jewish veterinarian and his wife in 1910 in the Czech province of Moravia, in the town of Budišov (Bautch).[59] The young Fischer spent her first adult years travelling around as a horse-riding instructor and a nanny in several European countries before she was forced to escape continental Europe to London in 1939.[60] Both of her parents perished in the concentration camp of Theresienstadt in 1943. Hence, Greta Fischer belonged to a group historian Boaz Cohen dubbed "survivor caregivers." [61] Those were mostly female Jewish survivors who dedicated their postwar time to helping children rehabilitate from their experiences. Many of these caretakers had lost families, communities, and networks to the Nazi persecution and had to rebuild a life for themselves, as well as helping the children attempt the same.[62] Fischer heard about her parents' death only after the end of the war, probably during her time working in Indersdorf.[63]

Fischer spent the war working in British nurseries, gaining experience in social work. It was during her time at the Foundling Site and the Hocratio Day Nursery that she got in touch with Anna Freud, the pioneering psychoanalyst working with war afflicted children in British nurseries. Fischer noted later: "My contact with Anna Freud [...] made a deep impression on me and helped me to understand better the manifest of behaviour of young children which previously only intrigued and puzzled me."[64]

Anna Freud's insights helped Fischer to understand uprooted children and their behavior and set her up on a lifelong path as a social worker for refugees. Indersdorf can indeed be seen as a testament to the lasting impression the exchange with Anna Freud had on Fischer, as is materialized in both women's faith in the family as the redemptive social structure. Fischer noted later, "It [her exchange with Anna Freud] also helped me tremendously in my work with

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59 Greta Fischer,"Greta Fischer Written CV," 1.

60 Andlauer, *Zurück ins Leben*, 214.

61 In recent years, so-called "survivor caregivers" were given more attention in research. For more on survivor caregivers see i. e. Boaz Cohen, "Survivor Caregivers and Child Survivors: Rebuilding Lives and the Home in the Postwar Period," *Holocaust and Genocide Studies* 32, no. 1 (April 1, 2018): 49 – 65, https://doi.org/10.1093/hgs/dcy006.

62 Ibid., 49.

63 Andlauer, *Zurück ins Leben*, 213 – 19.

64 Greta, Fischer, "Greta Fischer Written CV," 1. The author would like to thank Anna Andlauer for her gracious sharing of documents by the deceased Greta Fischer, which have been given to her by Fischer's nephew Micha Plaschkes.

the refugee children at the International Children's Center in Germany […]."[65] Freud and Fischer agreed that the separation of children from their parents was the most traumatizing aspect of the war on the children's psyche. Fischer also employed Freud's strategy of forming family-like structures in the camp, with mealtime being organized around family-like table constellations.[66]

Fischer was fluent in German, French, Polish, English, and Hebrew,[67] a rare trait that helped tremendously in her work with DP children and singled her out from most of her colleagues who were oftentimes unable to talk to the children, resorting to the odious language of the enemy – German.

Greta Fischer's role as Welfare Director of the Children's Center Kloster Indersdorf is representative of the gendered power distribution within UNRRA: apart from the director of UNRRA's welfare division, Mary McGeachy, UNRRA's leadership consisted exclusively of men, even though 42 % of UNRRA's employees were female.[68] Men were the ones compiling the guidelines and directives, and women like Greta Fischer executed them in the field, especially in the Welfare Division.[69] Expanding on Christine Hallet's[70] focus on WWI nurses, a continuity could be established between these nurses and UNRRA's female welfare personnel who, albeit in peace times, represented the perceived intrinsic female care impetus. The volunteer nurse of WWI had become the iconic heroine figure of the humanitarian moment of WWI, and the female UNRRA welfare workers became glorified substitute mothers.[71] The World War I nurses, Hallet explored, oftentimes had no formal training to show but compensated for this lack with their perceived innate female proclivity towards care and compassion. Compassion became stylized as the "humanitarian feeling par excellence" and women were traditionally understood as the more compassionate of the sexes.[72] In a sense, female humanitarian workers

65 Ibid.

66 Andlauer, *Zurück ins Leben*, 27.

67 Fischer, Greta, "Personal History," 1.

68 Greaves, "'Concerned Not Only with Relief': UNRRA's Work Rehabilitating the Displaced Persons in the American Zone of Occupation in Germany, 1945 – 1947," 93.

69 Ibid.

70 For a case study of this dynamic for World War I, see, Christine E. Hallett, "The Personal Writings of First World War Nurses: A Study of the Interplay of Authorial Intention and Scholarly Interpretation," *Nursing Inquiry* 14, no. 4 (2007): 320 – 29, https://doi.org/10.1111/j.1440 – 1800.2007.00378.x; Christine E. Hallett, *Nurse Writers of the Great War*, Nursing History and Humanities (Manchester [UK]: Manchester University Press, 2016).

71 See i. e. the telling title of a contemporary piece: Jean Margaret Henshaw, "UNRRA in the Role as Foster Parent," *The Zontian*, October 1946.

72 Martín-Moruno, Edgar, and Leyder, "Feminist Perspectives on the History of Humanitarian Relief (1870 – 1945)," 6.

embodied[73] the perceived essence of humanitarianism – compassion – making them the original humanitarian.

Delineating UNRRA's humanitarian strategy and institutional setup reveals that different forms of knowledge were at play in the Welfare Division, consolidating once again historical gendered power imbalances: medical knowledge embodied by male doctors and emotional knowledge represented by female welfare workers.[74] The overwhelming majority of the welfare staff was female, with both trained and untrained staff. Even though trained social workers were desired, in reality many of those working for UNRRA came from all walks of life and were often untrained: welfare staff like Susan Thames Pettiss and Aleta Brownlee had been social workers trained in New Deal America, while others like Kathryn Hulme[75] and Greta Fischer rose to be the director of DP camp Wildflecken, and director of DP Children's center Kloster Indersdorf respectively. Hulme and Fischer had no formal training in social work to show for, and no prior experience in Hulme's case, but experience as a nanny, as well as contact with Anna Freud in Fischer's case (Fischer went on to study social work at McGill University in Montreal from 1953–1955).[76]

Usually, it was the male domain to draw up the plans and guidelines and it fell upon women to be the agents of the "discrete sphere of action."[77] The untrained female welfare workers were expected to draw from their perceived innate maternal instincts, as well as from practical knowledge, produced in the field. Women were thought to be harnessing their maternal instincts onto the (infantilized) DPs, and the protection of the vulnerable, and for that no formal training was required. Female welfare workers were expected to establish empirical knowledge

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73 For compassion as quintessential "female feeling" see Ute Frevert, *Emotions in History: Lost and Found*, The Natalie Zemon Davis Annual Lecture Series at Central European University, Budapest (Budapest; New York: Central European University Press, 2011); Ute Frevert, *Vergängliche Gefühle*, Historische Geisteswissenschaften: Frankfurter Vorträge, Band 4 (Göttingen: Wallstein Verlag, 2013).

74 Cf. Hallett, "The Personal Writings of First World War Nurses"; Hallett, *Nurse Writers of the Great War*; Martín-Moruno, Edgar, and Leyder, "Feminist Perspectives on the History of Humanitarian Relief (1870–1945)," 5.

75 Prior to her stint as deputy director of DP camp Wildflecken, Kathryn Hulme had been a writer, a wartime welder in California, and a devotee to Armenian guru Gurdjeff in the 1930. While at Wildflecken Hulme met Belgian nurse and former nun Marie-Louise Habets who became her lifelong partner. Based on Habet's life Hulme penned the bestseller *A Nun's story* which was made into a film that earned Audrey Hepburn an Oscar. Hulme also wrote a memoir on her time in Wildflecken in which she paints the DPs in a rather patronizing way: Kathryn *Hulme, The Wild Place.*

76 Greta Fischer, "Personal History," 1.

77 Martín-Moruno, Edgar, and Leyder, "Feminist Perspectives on the History of Humanitarian Relief (1870–1945)," 4.

with which to care for the war's victims. This approach drew heavily on an essentialist vision of womanhood, naturalizing female character traits.

Male authority set the agenda but it fell upon the women to fulfill the actual healing work on the ground. Women thus became instrumental in acting out UNRRA's welfare strategy, exploring their own realms that opened up spaces of power. As UNRRA social worker Susan Thames Pettiss remembered, the female welfare realm provided women with a new sense of influence. Pettiss recalled: "As a woman in a man's world, I was sensing a power hitherto unknown to me."[78] Pettiss alludes to a constellation Annemieke van Drenth and Francisca de Haan decoded as "caring power."[79] Their concept draws from Foucault's notion of "pastoral power," a form of power exercised in institutions aiming at supporting individuals, playing a redemptive role in their lives.[80] Delineating the work of abolitionists Elizabeth Frye and Josephine Butler, de Haan and van Drenth showed how the mobilization of female "qualities" – obviously a naturalizing understanding of certain characteristics – allowed women to exert a newfound power beyond the realms of their family onto people that were perceived as vulnerable.[81] A new brand of "soft power"[82] shaped by the gender (and class and race) of the helper. As Rebecca Gill has shown,[83] humanitarian aid and the professionalization to nurse emerged in close connection, and both professions thus also came with new forms of power.[84] Nurses, according to Dixon Vuic, who were tasked with "healing" became "agents of power."[85] Analogous, UNRRA welfare workers, became powerful forces bridging military, administrative, and healing motives. It was the welfare workers who decided which DPs had to be separated or could remain in groups, it was the welfare staff who negotiated with the national liaison officers, and it was the welfare staff who supplied the food, to mention only a few of the powerful decisions they made.

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78 Pettiss and Taylor, *After the Shooting Stopped*, 62.

79 *Drenth and Haan, The Rise of Caring Power.*

80 Cf. Ben Golder, "Foucault and the Genealogy of Pastoral Power," SSRN Scholarly Paper (Rochester, NY: Social Science Research Network, February 24, 2009), 165, https://papers.ssrn.com/abstract=1348831.

81 Möller, Paulmann, and Stornig, "Gendering Twentieth-Century Humanitarianism: An Introduction," 12.

82 Martín-Moruno, Edgar, and Leyder, "Feminist Perspectives on the History of Humanitarian Relief (1870–1945)," 6.

83 Rebecca Gill, *Calculating Compassion: Humanity and Relief in War, Britain 1870–1914*, Humanitarianism (Manchester: Manchester Univ. Press, 2013), 12.

84 Kara Dixon Vuic, "Wartime Nursing and Power," in *Routledge Handbook on the Global History of Nursing* (London and New York, 2015), 22–34.

85 Ibid., 29.

Greta Fischer dedicated her whole life to being a social worker. In 1947, she accompanied a group of Ukrainian children on their emigration to Canada, where she kept working with orphaned kids.[86] In her old age she emigrated to Israel, where she helped establish the Social Work Department of the Hadassah Hospital in Jerusalem.[87] To this day, she is considered the "mother of social work" in Israel, according to a German newspaper.[88] Fischer succumbed to a heart attack aged 78 while waiting for a bus in Jerusalem's central bus station. Fischer is buried in Kibbuz Magen near the Gaza strip.[89]

Greta Fischer's time working in Europe's DP camps left a lifelong effect on her, and she remained devoted to "her" Indersdorf children, keeping in touch with many of them for the rest of her life. In an oral history interview shortly before her death she recalled the impressive resilience the kids she had worked with had shown – praising their undefeatable "rage to live."[90]

Creating a Therapeutic Environment

According to Greta Fischer's official report on her work in Indersdorf, she and her colleagues aimed to create a nurturing environment in the International D.P. Children's Center, regardless of UNRRA's dry-eyed administrative strategy.[91] Anna Andlauer, author of a monography on Greta Fischer, calls the kind of environment Fischer envisioned a "therapeutic"[92] environment, even though this was not a term Fischer and her contemporaries at UNRRA employed. In Fischer's own words: "The UNRRA team has aimed to give each child who is admitted to the center a sense of security, a feeling that he is wanted, that he is loved."[93]

Upon arrival of a child, meeting its physical needs, oftentimes after years of starvation and neglect, was pivotal. The provision of food seemed at times the most important aspect of rehabilitative work in the children's centers, as the *Report on Psychological Problems of DPs* rightfully anticipated.[94] Testimonies of wel-

86 Anna Andlauer, *Zurück ins Leben*, 4–5.
87 Ibid., 2.
88 Ibid.
89 Ibid., 175.
90 Ibid., 1.
91 Greta Fischer, "Fischer, Report Indersdorf 1946," 16.
92 Andlauer, *Zurück ins Leben*, 55–101.
93 Greta Fischer, "Fischer, Report Indersdorf 1946," 16.
94 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 35.

fare workers, like the one of Greta Fischer, echo the intense focus of the surviving DPs on food and calorie intake.[95] It was more than physical necessity, it meant security, as well as reliability, and it was an indicator of benevolent authorities. Children would fight about food, accusing other children of taking more than allowed and hiding food in their rooms – "almost an unconscious act," a boy is quoted as saying in Fischer's report.[96] There could never be enough to satisfy the needs that had accumulated over the years. The possibility of food security, that there would soon dependably be another meal, seemed out of the children's grasp. As the most severe signs of starvation were starting to diminish, the children kept on eating, and Fischer readily accommodated the kids' urge, implementing regular snacking hours and letting them eat as much they wished.[97] Fischer understood the importance of food for the psychological rehabilitation, echoing the assumptions of the Inter Allied Psychological Study Group when observing: "Until other psychological satisfactions can be achieved for these children [...], they should be served more than the normal ration."[98]

Mealtime, thus, became a central part of the everyday life in the children's home. As recommended by the IAPSG, Fischer designed the social system of the children's home modeling family setups: during meals two adult welfare workers (standing in for parents) usually sat with 8–10 children at a table, modeling the normative family experience. "Family style" is what Fischer called it (admittedly, a rather large family).[99] Fischer encouraged her colleagues to act as substitute family to the unaccompanied, and oftentimes orphaned, children.

Fischer stressed in her report how the remit of the welfare worker expanded far beyond the provision of material needs, integrating the provision of warmth, and even love. She deemed this the only feasible way to counteracting the children's horrid experience and (re-) establishing a sense of security: human contact and warmth were the way to go, "in an attempt to compensate for motherly love," as Fischer put it.[100] Not only was the model of parents to be recreated, Fischer points specifically towards maternal love that should be recreated by UNRRA staff. Here, Fischer's take again echoes Anna Freud's emphasis on the mother. For Anna Freud, the maternal bond was more impactful than the paternal bond, and she was adamant in modelling maternal bonds for those children who lost their mothers.

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95 Greta Fischer, "Fischer, Report Indersdorf 1946," 19.
96 Ibid.
97 Ibid.
98 Ibid.
99 Ibid., 20.
100 Greta Fischer, "Fischer, Report Indersdorf 1946," App. Starvation.

Fischer was not the sole UNRRA staffer whose self-image pertained to that of a sort of stand-in parent for the unaccompanied children. The director of Team 182, Jean Margaret Henshaw, in October 1946 penned an article with the telling title "UNRRA in the role of foster parent." Sadly for the historian, she does not go into more conceptual detail regarding the idea of UNRRA as a surrogate parent but rather traces the fates of several children she encountered during her time at UNRRA.[101] Those UNRRA staffers, however, who understood their work to be more than just the administering of population groups, but considered the psychosocial rehabilitation aspect of the work important as well, usually subscribed to the idea of surrogate parents within children center.

Clothing became another practical but crucial step in the everyday life of the center and thus for the psychological rehabilitation of the children. In the ever-present scarcity and chaos of the first postwar months, Fischer and her colleagues went to great lengths to acquire the means to dress the children properly. Lacking the necessary fabric to sew clothes, she travelled to the remains of the nearby deserted Dachau concentration camp where she produced flags that had not long ago waved over the camp. Fischer proceeded to repurpose these remnants of the horrible recent past by cutting the cloth into tiny red hearts which she then sewed onto the kids sweaters.[102] She reasoned it was important that the children wore personalized clothes that were as stark a departure as possible from the institutional clothes many of the children had to wear in Nazi children's homes or concentration camps.[103] Fischer observed: "One seems to see the entire personality of a child change when he discards his old, dirty, misshapen garments for clean, neat fitting, non-institutional ones."[104]

Fischer was convinced that the provision of (personalized) clean and comfortable clothes was key for the amelioration of the children's mental states. She noted: "The provision of clothing has been fully as important for the purpose of reestablishing a sense of personal dignity as for decency and warmth."[105]

The absurdity of her rummaging through Dachau for leftover fabric was not lost on Fischer, who had (at that point unbeknownst to her) lost her parents in Theresienstadt. In an oral history interview conducted in 1982 she reminisced: "There was Dachau which stood for the death of so many people. And there I

101 Jean Margaret Henshaw, "UNRRA in the Role as Foster Parent."
102 Andlauer, *Zurück ins Leben*, 69.
103 "Oral History Interview with Greta Fischer."
104 Greta Fischer, "Fischer, Report Indersdorf 1946," 20.
105 Ibid., 19.

was looking for material to clothe children who would be growing up for what? I didn't know at the time."[106]

Considering the kind of milieu Fischer sought to create in Indersdorf highlighted the implicit ways in which Fischer worked to foster the psychological rehabilitation of the children in her care. In spite of the atmosphere of constant lack of necessities Fischer was adamant that food security, hygiene, and a family-like environment would yield a therapeutic effect. In Indersdorf, psychological rehabilitation meant the provision of a beneficial environment as a departure from the children's experiences during the war. In that, Fischer acted along the lines of the IAPSG's recommendations.[107]

Recount or Forget? Storytelling as a Therapeutic Practice

Besides physical needs that needed to be met, welfare workers in Indersdorf spent a sizeable amount of their time tending to the children's need for affection and understanding and lending a compassionate ear to their stories.[108] Within the plurality of people tending to DPs in the postwar DP camps, there developed a chasm in dealing with the question, whether it was advisable to incentivize the DPs to talk about their experiences or to better let the past rest in order not to awake the "demons" of traumatic memories that could never be contained. Many people in charge of caring for the DPs thought it best to support "repression" in order to serve, in their views, the speedy psychological rehabilitation.[109] Some believed that getting the survivors to talk could serve therapeutic purposes[110] while others feared that wounds would be ripped open that could never be closed again.[111] After the first DPs flocked into the DP camps and children's homes, the Jewish Historical Commission began an orchestrated effort of collecting testimonies of survivors in order to collect[112] their experience for posterity and to retrospectively wit-

106 "Oral History Interview with Greta Fischer."

107 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 9.

108 Andlauer, *Zurück ins Leben*, 83.

109 Feinstein, *Holocaust Survivors in Postwar Germany,1945–1957*, 185.

110 Chasia Bornstein-Bielicka, Ahat mi-me'atim: Darkah shel lohemet u-mehanekhet, 1939–1947 (One of the Few: The Path of a Fighter and an Educator) (Tel Aviv: Moreshet, 2003), 324. Translated in: Cohen, "The Children's Voice," 86.

111 Feinstein, *Holocaust Survivors in Postwar Germany, 1945–1957*, 185.

112 On the Jewish efforts of "collecting" and "recording" the experience of Jewish survivors, as well as Jewish folklore, customs and traditions (Fun letsten khurbn), see Laura Jockusch, *Collect and Record! Jewish Holocaust Documentation in Early Postwar Europe* (Oxford: Oxford Univ. Press, 2012).

ness the horrors. Boaz Cohen outlined the discourse surrounding the possible therapeutic purpose of this practice, not just in Indersdorf.[113] He quotes Israel Kaplan, a former teacher from Kovno and head of the Jewish Historical Commission, summing up the hopes he associated with the testimony project, hoping they would help "alleviate the emotional pressure on the children."[114]

Chasia Bornstein (née Bielicka) founded a children's home in Lodz, Poland and later compiled a booklet comprised of testimonies of her charges. In her memoir she described the incertitude of the people in charge of the DP kids as to what strategy would serve their psychological amelioration best. She conceded: "psychologically it [collecting testimony] seemed the right thing to do. I had no other tools and was not trained to deal with their psychological needs."[115] She hoped that for the children to recount their stories would act "like opening a wound and extracting the puss. It was as if the children were throwing up whole chunks of painful matters and easing their pain accordingly."[116]

Greta Fischer, too, was of the school that the children's "instinctive need,"[117] as historian Margaret Myers Feinstein put it, to tell their stories needed to be tended to. Forty years later, Fischer still remembered vividly: "We listened to their stories day and night. It had to come out. And sometimes it would take us hours to sit with them. You could not interrupt."[118] In her writing and her oral history interview the human toll of listening to these stories of oftentimes unimaginable horrors shines through repeatedly. She remarked how the children recounted stories of danger and death, scarcely displaying any emotion: "Horror stories were intermingled with ordinary events with little demonstration of emotion."[119] The caretakers themselves, however, were faced with their own reaction to what they just heard, oftentimes struggling to contain their composure. But, as Fischer put it, "you do not help children when you cry with them. We had to be brave ourselves."[120]

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113 Cohen, "The Children's Voice."

114 Israel Kaplan: "Day to Day work in the historical Commission," lecture meeting Historical commissions, Munich, May 12 1947, quoted in Ibid., 85.

115 Chasia Bornstein-Bielicka, Ahat mi-me'atim: Darkah shel lohemet u-mehanekhet, 1939–1947 (One of the Few: The Path of a Fighter and an Educator) (Tel Aviv: Moreshet, 2003), 324. Translated in: Ibid., 86.

116 Chasia Bornstein-Bielicka, Ahat mi-me'atim: Darkah shel lohemet u-mehanekhet, 1939–1947 (One of the Few: The Path of a Fighter and an Educator) (Tel Aviv: Moreshet, 2003), 324. Translated in: Ibid.

117 Feinstein, *Holocaust Survivors in Postwar Germany,1945–1957*, 185.

118 "Oral History Interview with Greta Fischer."

119 Greta Fischer, "Fischer, Report Indersdorf 1946." III (2).

120 "Oral History Interview with Greta Fischer."

Erwin Farkas, one of "Fischer's" children, grew up to become a psychologist himself. He later reflected on his need to recount his story again and again in order to, as he later understood, gain distance between him and "the story." He remembered: "Then it became a story, a story you could take or push aside – and somehow deal with it."[121]

Fischer and her colleagues actively encouraged the children to talk about their (prewar) families and homes in order to mobilize resources[122] that would strengthen their sense of self after years of its denial. Fischer, like the Freuds, was convinced that the first three years of a child's life were the most formative, thus she hoped to strengthen the children's mental health by alluding to happier, prewar experiences of security and love within their homes and families.[123]

Team 182 went to great lengths to ensure that life in the children's home presented more to the children than material aid. The welfare staff encouraged the children to stage plays –writing, directing, and acting in them.[124] The kids would often enact customs and traditions from their home country, a practice encouraged by their caretakers in order to strengthen the national identity of the "lost children." But the dramatic plays also served as a space in which the children processed what they had experienced during the war, leaving those caring for them taken aback: the children reenacted scenes from the concentration camp much to the shock of those caring for them. Fischer describes how, on another occasion, the children reenacted a Nazi roll call, where one child that did not stand up straight enough was "shot," much to the enjoyment of the kids. Fischer recounts how these plays oftentimes were "punctuated with wry bits of humor that did not seem funny to the UNRRA workers."[125] But, it turned out, the children possessed an active desire to tell their stories and not to suppress them. As time

121 Anna Andlauer, *The Rage to Live: The International D.P. Children's Center Kloster Indersdorf 1945 – 46*, 68.

122 Fischer unknowingly applied methods of resource focused therapy. Ten years later, Aaron Antonovsky studied the mental health of Holocaust survivors in Israel in the 1950s with the goal of finding out why some individuals were of better mental and physical health than others after what they had experienced. He concluded that positive resources can modify stress levels. He came to the conclusion that those who have more emotional resources at their disposal processed trauma better than those who don't. Antonovsky subsequently coined the term Salutogenesis as a model that understands health as a dynamic equilibrium and focuses on resources that support health instead of factors that cause disease; see Aaron Antonovsky, *Health, Stress, and Coping*, first ed., The Jossey-Bass Social and Behavioral Science Series (San Francisco: Jossey-Bass Publishers, 1980).

123 Greta Fischer, "Greta Fischer Written CV," 1.

124 Greta Fischer, "Fischer, Report Indersdorf 1946." III (2).

125 Ibid. III (2).

passed in the children's home, the plays' content shifted towards the reenactment of national holidays like *Chanukah*, Christmas, or folklore parades.[126]

Fischer's remarks on the advantages of the plays echoes the IAPSG's emphasis on the merits of group therapy. Decades after working in Indersdorf, during the oral history interview in 1986, Fischer, too, framed her approach in Indersdorf as a kind of group therapy: "It was a kind of group therapy. A lot of things came out in that. It was important. We tried everything to unburden them."[127] Whether Fischer consciously chose to engage in "group therapy" with the DP children in 1945 already or whether she identified her strategy as group therapy only in hindsight remains unclear. What is clear, however, is that Rickman and his colleagues had advised to regard the DP camps as an experiment in group therapy, and Fischer seemed to subscribe to that strategy.

Fischer consciously sought to promote a group consciousness among the children. She encouraged them to choose their own groups. Many of the kids had survived in groups in hiding or had banded together after war's end in order to make their way to DP Children's homes. The children who had survived together usually wanted to stay together, even after they would leave the children's home: groups of Czech and Polish kids wanted to stick together, thus challenging UNRRA's repatriation goal.[128]

The team at Indersdorf also encouraged the formation of national youth movements, as they united two beneficial factors, in Fischers's eyes: the stabilizing effect of being member of a group and the adherence to a nationality.[129] The latter became a much-debated point of contention in the life at Indersdorf, as the following subchapter will uncover.

Negotiating National Belonging in the Children's Center

In the first months after liberation, UNRRA still operated under the primacy of repatriation. Even though the mandate eased in the case of Jewish DPs after the *Harrison Report*, for a majority of the children in Greta Fischer's care the goal was to bring them back to their prewar countries of origin. That, at least, was the theory. The reality in the International Children's Center in Indersdorf more often than not presented a departure from that strategy.

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126 Ibid.

127 "Oral History Interview with Greta Fischer."

128 Andlauer, *Zurück ins Leben*, 72–73.

129 Greta Fischer, "Fischer, Report Indersdorf 1946." II (1).

Questions of national belonging were deeply entangled with the psychological rehabilitation of the displaced children. In an ironic display of the Nazis' defeat, postwar Germany had not only become more ethnically homogenous than at any time in European history. In many cases the dislocations of the war had also provoked a "deep ethnic self-awareness" among the displaced, as Lynne Taylor has observed.[130] For others, especially some Polish children, it was simply unclear where they "belonged" as a result of shifting borders in the postwar. The fate of these uprooted children soon became the center of postwar political attention: as Tara Zahra and Lynne Taylor have shown, displaced, "lost" children became the bargaining chips of postwar nations that bartered over the belonging of the children.[131]

Meanwhile on the ground, Greta Fischer was deeply worried about the psychological consequences of the children's national confusion and ambiguity. She deplored: "This kind of situation is one of the most difficult in attempting to give the children a sense of security. They must know not only that they are wanted for the moment but also that someone is really planning for their future."[132] Fischer was convinced that a clear national identification, and belonging, was paramount to psychological amelioration and stability and thus overall health.[133] How she came to that conclusion will now be dissected.

The International Children's Center in Indersdorf, unwittingly, became a crystallization point of religious, political, and cultural changes and conflicts in postwar Europe, exposing the gaps in UNRRA's administrative strategy. Fischer and her Indersdorf colleagues generally concurred with the assumption of the IAPSG that identification with a nationality would have a positive stabilizing effect on the psychological constitution of DPs. The team in Indersdorf thus worked to spark and/or strengthen any (emotional) affiliation with the children's prewar nationality by teaching their native languages like German, Polish, Russian, Serbian, Hungarian, French, and Hebrew, as well as encouraging them in reviving national

130 Taylor, Lynne. In the children's best interests: Unaccompanied Children in American-occupied Germany, 1945–1952. Toronto: University of Toronto Press, 2017, 6.

131 Taylor, *In the Children's Best Interests (2017);* Zahra, *"Lost Children"; Zahra, The Lost Children Reconstructing Europe's Families After World War II.*

132 Greta Fischer, "Fischer, Report Indersdorf 1946," 17.

133 For a study on the negotiations of national allegiance of children in Central Europe in the nineteenth and twentieth century see Tara Zahra, *Kidnapped Souls: National Indifference and the Battle for Children in the Bohemian Lands, 1900–1948*, Cornell Paperbacks (Ithaca, NY: Cornell Univ. Press, 2011).

customs and traditions to strengthen the children's sense of belonging to their pre-war countries.[134]

Nevertheless, Fischer's approach displayed a more individualized turn. Being careful to strengthen the children in their individuality, after years of having it getting denied completely, she encouraged the children to have as much agency over their environment as possible: the kids were allowed to choose their own roommates and to decorate their rooms. [135] As mentioned above, children who survived in groups usually wished to stay together. However, those who arrived at the children's homes individually usually chose their compatriots as roommates and decorated their walls with their national flags: Polish children hung their red and white Polish flag while Polish-Jewish children oftentimes chose to embellish the austere convent rooms with flags of Zionist organizations.[136]

Fischer repeatedly mentions the stabilizing, even disciplining effect the establishment of a national affiliation had on the overall constitution of the children. When UNRRA permitted the establishment of various national groups in the Children's Center, Fischer observed the positive effect of the groups on its members. In fact, she dedicated a whole chapter of her report on "The Importance of National Youth Movements,"[137] as she framed it. The Polish groups for instance had, according to Fischer, a distinct militaristic slant in their setup, promoting "physical prowess to be used to throw the Russians out of our country";[138] the Zionist organizations were concerned with promoting "good living habits and ethics"[139] and education was stressed. Whichever group the kids aligned themselves with, an affiliation with a national movement proved to be beneficial, at least in Fischer's view. She observed a "marked contrast" between kids in a national youth movement and those without such (organized) affiliation.[140] She deemed the former to be "purposeful" and the latter "aimless" and lauded the positive effect the affiliation with a national youth movement had on the overall work in the children's home.[141]

However, the children's tendency to orient along national lines naturally also provoked difficulty. Fischer described the growing animosities between the various groups, especially the hostility between Polish Catholic and Jewish children

134 Greta Fischer, "Fischer, Report Indersdorf 1946," 11.
135 Greta Fischer, "Fischer, Report Indersdorf 1946," III (2).
136 Ibid., III (2).
137 Greta Fischer, "The Importance of National Youth Movements," Ibid., II (1).
138 Ibid.
139 Ibid.
140 Ibid.
141 Ibid.

and children who had been heavily "Germanized." She noted, "Many of the Poles were admittedly anti-Semitic [sic]."[142]

Since the children were allowed to choose their roommates themselves, the dormitories were mainly divided according to nationalities. If a Jewish child was integrated into a Polish dormitory because of a lack of space, unrest ensued. Fischer recalled the reservations of the Polish children vis-à-vis Jewish children like this:

> [The children were convinced] that all Jews were terrible people. They were satans, they had horns, and they were afraid they would kill them all [...]. It took us months, every day to go over the same story, that there were Jewish people, there were Catholic people, there were all kinds of people, and there were good and bad people. [...] The reeducation was a very, very difficult part.[143]

What Fischer here calls "reeducation" pertained to supporting the children in moving away from the racist and Antisemitic ideologies that were instilled in them during the Nazi reign. When some of the employees of Team 182 – among them Greta Fischer herself – revealed themselves to be Jewish, the children were inconsolable; they considered it impossible that friendly relations could develop between Jews and non-Jews.[144]

These stories are especially insightful, for multiple reasons. Firstly, it impressively shows how the effects of years of Nazi reign, shaped by hatred and division, impressed upon the Nazis' youngest victims. Nazi policies (and even prewar Polish antisemitism) had trickled down onto the children. Consequently, the DP Children's center in Indersdorf became a crystallization point of these (ethnic) quarrels. Another nuance to this anecdote lies in the fact that it challenges the narrative of innocent displaced children in the hands of humanitarian organizations, stripped of parental protection, listlessly awaiting help and shelter, without any own agency. Memoirs by UNRRA welfare workers from several DP camps, however, repeatedly recount the disturbing behavior adult and child DPs displayed.[145] The children

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142 Greta Fischer, "Fischer, Report Indersdorf 1946," 11.

143 "Oral History Interview with Greta Fischer."

144 Ibid.

145 Susan Thames Pettiss recounts rather drastically the challenges working with DPs sometimes held in store. She writes in her memoir: "They [Jewish DPs] have been terribly difficult to help. They have been demanding, arrogant, have played upon their concentration camp experience to obtain ends. I saw rooms in our camp after they left – filthy dirty, furniture broken, such a mess as no other group ever left. They are divided into factions among themselves. One of our camps has to have six synagogues to keep the peace. They refuse to do any work, have had to be forced by gun to go out and cut wood to heat their own camps." Pettiss, however, also affirmed:

who adamantly wished to be part of a certain group displayed a sense of agency, sometimes intensely expressed, that seemed to have struck many welfare workers as surprising. But how could they not? To put it bluntly: trauma looks ugly. Years of persecution and incarceration provoked in even the youngest children a cunningness that was shocking to those who cared for them after the war. Displaced children knew how to survive, to use every situation to their best advantage, and they, of course, were very conscious about group dynamics, which group you should stick to and which it was better not to. They had internalized the divisions the Nazis had sown.

Nevertheless, Greta Fischer relied on what she called "re-education" to heal some of the social damage done by the Nazis, "teaching tolerance and respect for each other," as she put it.[146] In the midst of the postwar turmoil, Fischer and her colleagues sought to set an example for pluralistic coexistence in democratic societies, echoing the aspirations of the IAPSG. To do so, UNRRA staff had to counteract the hatred sown (or brought to the surface) by the National Socialists. Fischer noted rather idealistically, "living at Indersdorf might be the only experience these children would have of knowing representatives of other nationalities and learning to appreciate their differences and to live in peace with them."[147]

Fischer's idealism was not exceptional for UNRRA staffers, as has been previously discussed. Many of those working with DPs hoped to see a better world established and they conceptualized themselves to be the groundworkers of that idea.

For those children, for which it was unclear where they came from or where they wanted to go, it was up to Team 182 to decide about their future. How the team navigated what they deemed to be the "best interest" of a child will be explored next.

Best Practice Versus Best Interest

The lack of a national identification or confusion and ambiguity about any affiliation could have a severe and detrimental effect on the children's psyche, according to Greta Fischer. Even though UNRRA had established speedy repatriation as its "best practice," Fischer subscribed to a more unconventional approach by putting the children's "best interest" at the top of her agenda. She remembered in 1985:

"I am still sympathetic, believe that only with great tolerance and patience can the problem even come near a solution," Pettiss and Taylor, *After the Shooting Stopped*, 126.

146 Greta Fischer, "Fischer, Report Indersdorf 1946," 11.

147 Ibid.

"The UNRRA team often found itself in conflict over rules and directives that had to be observed (…). It must be admitted that the human element usually won out."[148]

At least in hindsight, Fischer admitted that she did not execute UNRRA's administrative paradigms at any cost but took the liberty of deciding on the children's future whereabouts on an individual basis.

As has been discussed previously, Indersdorf housed a heterogenous group of children. Some groups of children, for instance older Polish (gentile) youth or Western European children, wished to repatriate and were sent home. Other groups, like Jewish or "Germanized" children deeply challenged UNRRA's repatriation paradigm and the uncertainty about their whereabouts added more psychological strain onto the kids. The UNRRA staff found themselves torn between UNRRA's best practice of repatriation and the more individualist approach of deciding on an individual basis what seemed best for the child, acting on the basis of the "best interest" of a child, as Lynne Taylor calls it.[149] In the following, this predicament is going to be illustrated with several examples.

Before we are casting a look at the exemplary biographies of children in the center, it is useful to employ a short meditation on the concept of "best interest." In fact, the term is used frequently when it comes to the fate of DP children after WWII: Lynne Taylor arranges her whole study on DP children around the concept of "best interest" and the negotiations of UNRRA welfare staff regarding the children's national identity; Tara Zahra and Daniella Doron, too, refer to it repeatedly.[150] What none of them does, though, is reflect on the history of the concept of "a child's best interest" and whether it was part of the social work rhetoric of the postwar at all. It goes beyond the scope of this study to investigate the genesis of the concept at length, but it is imperative to point out that the precise term "best interest" is not found in the sources used for this chapter. Yes, people like Greta Fischer and Jean Margaret Henshaw clearly emphasize that they wish to act according to a child's wishes and to their advantage, thus, evoking the concept of best interest. But they do not call it that, nor do they refer to any set of principles that could be considered similar to it. A brief look at the history of the precise term sheds light on why that was.

The mentioning of the term was manifested legally for the first time only in 1989,[151] in Article 3 of the Convention on the Rights of the Child where it states

148 Greta Fischer, "From Awareness – to Action."

149 Taylor, *In the Children's Best Interests* (2017).

150 Ibid.; Daniella Doron, "In the Best Interest of the Child: Family, Youth, and Identity among Postwar French Jews, 1944–1954" (New York, NY, New York University, 2009); Zahra, *The Lost Children Reconstructing Europe's Families After World War II*, 96–97.

151 https://www.humanium.org/en/the-childs-best-interest/ (accessed September 17, 2021).

"In all action concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interest of the child shall be a primary consideration."[152]

This is not to say that the spirit of the concept was not acted upon earlier, however, the frequency with which the term is used in historical research calls for a clearer examination of the term. The aforementioned studies by Taylor, Zahra, and Doron neglect to do so. How exactly the idea of best interest was constituted, whether it was a fixed set of principles that made up the idea, or whether it was an aloof and subjective principle acted out by individual social workers or institutions remains unclear at this point. For the case of Indersdorf it could be argued, the latter was the case. For the purposes of the examination of the policies implemented at Indersdorf the term best interest will nevertheless be used, as it helpfully captures the emphasis on the individual wishes of a child, even though the author is aware that she may be using a non-historical concept.

Moving on, some examples from the practice in Indersdorf will be provided to illuminate the strategy of best interest. Jewish children, especially from Poland, were unable to go "home" as many families had perished entirely in the Holocaust, their shtetls had been destroyed, and antisemitism would have threatened the children in their old homes. Jewish children usually remained the longest in the children's home (some were sent to England in October 1945) as the staff figured out where to send them.[153] Those children, for whom it was unclear where they could be sent to, posed a challenge for Team 182.

Children, who had spent the war in "Germanization" projects presented a significant challenge.[154] These children had spent the majority of their formative years outside their countries of origin and were, forcefully, subjected to cultural norms and traditions outside their own, living in German families and children's homes. As an example, Polish children in Germanization projects were more fluent in German than in Polish and were more familiar with German customs and tradition than with Polish ones. Many had been influenced by German authority figures, thus oftentimes identifying themselves with Germany rather than their country of origin. Fischer observed these kids were "torn in deciding for themselves with which group they wish to be identified."[155] According to UNRRA's mandate, however, these children were to be repatriated into a country that had grown foreign to them. Fischer worried that this would be another form of harmful forced displacement that would surely result in a re-traumatization of the children. Here

152 Ibid.

153 For more on Jewish children, see chapter "The Stimulus of Hope."

154 Greta Fischer, "Fischer, Report Indersdorf 1946," 120.

155 Ibid., 16.

Fischer confirmed the expectation of the UNRRA psychiatrists who had boldly challenged UNRRA's generalized repatriation primacy by anticipating: "For many children the very fact of change in return home from the alien background to which they have become accustomed may be an added difficulty."[156]

Children from Germanization projects felt alienated when socializing with former compatriots, Fischer observed: "They feel ill-at-ease among members of their own national group who are more proficient in the language and customs."[157] Marion Hutton, Fischer's deputy, unceremoniously concluded: "The notion that Indersdorf should be a repatriation center as such is unrealistic. Unlike adults, children cannot be collected at a given point for shipment."[158]

The rejection of the generalized repatriation primacy did not mean, however, that Team 182 knew where to send the children instead. Fischer later remembered their constant preoccupation with the desperate question – where could they go? – and constant negotiations with the liaison officers of the respective countries who wished to repatriate "their" children, no matter what.

Fischer worried for the children because she was convinced that as long as there was ambiguity about their nationality they could not heal psychologically, as illustrated in the case of "Anna"[159] from Upper Silesia.[160] Many children from Silesia had been subjected to the Nazis' "Germanization" efforts, resulting in their ambiguous postwar national identification, because Silesia had become Polish in 1945.[161] Most of the Silesian children considered themselves German, thus technically being outside UNRRA's remit as ex-enemy nationals. In order to be repatriated to their places of origin, they needed to be registered as Polish, which many children rejected as a result of years of German indoctrination.[162] Prior to the war, Anna had gone to a German school, and her parents had then perished during the war. She suffered intense physical and psychological impediments, was always sickly, suffered from skin diseases, and lost consciousness often.[163]

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156 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 10.

157 Greta Fischer, "Fischer, Report Indersdorf 1946," 25.

158 Hutton, Marion, "Indersdorf (Brief Analysis)," Greta Fischer Papers, February 2, 1946, Box 2, Folder 10, United States Holocaust Memorial Museum Archives, Washington, DC.

159 Greta Fischer, "Fischer, Report Indersdorf 1946," 17.

160 Silesia is exemplary for the shifting national affiliations in the postwar. As a result of Silesia's 1922 partition it was partitioned in a German and a Polish administration. Between 1945 and 1947 Germans were expelled from the region.

161 For an overview over the changeable history of Silesia see Arno Herzig, *Geschichte Schlesiens: Vom Mittelalter bis zur Gegenwart*, C. H. Beck Wissen 2843 (München: C. H. Beck, 2015).

162 Greta Fischer, "Fischer, Report Indersdorf 1946," 17.

163 Ibid.

Fischer was troubled by the girls' development, assuming the confusion of national identification to be a major contributing factor in her unease. Fischer deemed psychological rehabilitation almost impossible, as long as Anna's national affiliation remained unclear. Fischer noted: "She is obviously a confused, disturbed child who will probably [can] become adjusted only when she is sure of the nation to which she belongs. […] She will probably always be somewhat unstable because of these conflicts of nationality."[164]

National affiliation, in Fischer's book, was a prerequisite for psychological rehabilitation of the uprooted. Fischer challenged UNRRA's best practice of repatriation: she agreed that national affiliation was central to psychological wellbeing; whether the affiliation had to be with the children's prewar country or with another nationality, Fischer put up to debate. She and her colleagues usually sought individual solutions, working to support the children's wishes and oftentimes deciding on the basis of a child's language skills where they should be relocated to. The children, oftentimes cunning beyond their age, quickly understood how to work the system to their favor, deciphering which age and nationality served them best, adjusting them accordingly, and claiming a nationality with the biggest advantage.[165]

Fischer and her colleagues dealt with the contentious question of a child's individual best interest on a daily basis: what, in fact, was in a child's best interest? Was it naturally within the realms of the biological family or was it a fluid ambiguous thing that needed to be determined individually and was in fact subject to change? And, lacking legal guardians, who was to decide the best interest of a child? Fischer and her colleagues straddled these complicated questions with the more subtle aspects of life in the camp, such as the psychological rehabilitation of the children.

However, determining the whereabouts of the children was not the sole responsibility of the UNRRA staffers; it also had serious legal implications that have to be kept in mind when thinking about the rehabilitation efforts performed at Indersdorf, as the next chapter will show.

An aspect of the importance of national affiliation for displaced children has often been neglected in recent studies but is central to UNRRA's insistence on national identification.[166] The affiliation with a nation granted protection from the

164 Ibid.

165 Ibid., 16–18.

166 Tara Zahra neglects to shed light on this point which adds to the impression of a lack of nuance in her, in other parts, impressive study, especially in Chapter 4 of Zahra, "Lost Children," 118–46.

respective state, no small feat in the chaotic postwar days.[167] Confusion and ambiguity surrounding nationality and identity of DPs meant not only psychological strain but also legal jeopardy: a child needed a nationality in order to be legally protected by a state.[168] Welfare workers had to debate a child's fate with the respective countries' liaison officers who had to approve a DP's claim to nationality. A lack of national affiliation proved to be highly problematic, leaving a child legally unprotected: as long as a child was not affiliated with a nationality, it was technically outside any form of stately protection on top of the fact that it lacked a legal guardian. Lynne Taylor outlined extensively how legal questions have been neglected in prior studies on UNRRA's work with children in postwar Europe.[169]

A child's legal status was determined by its nationality: a DP's access to support was determined by its nationality and in order to protect a child's legal rights its nationality needed to be determined. Without the categorization of a nationality, and thus citizenship status, a person had no rights, no legal status, no government to represent or protect. As Lynne Taylor put it: "One was left literally in legal limbo."[170] In the initial phase of DP operations in postwar Europe, and especially for gentile DPs, decisions were mostly made on the basis of nationality rather than ethnicity.

Another neglected, but not least important, point Taylor makes in her thorough study is the conflation of ethnicity and citizenship.[171] Taylor points out that at the heart of the debate of belonging and nationality stood differing conceptualizations of nationality: one understanding being judged solely on the basis of citizenship and the other, more complicated but prevalent within the varying DPs communities, based on ethnic identity, cumulated by a set of markers such as traditions and self-identification.[172] The conflicts in the DP camps, and in Indersdorf, were fought along these discursive lines. If a child DP did not wish to go back to his or her homeland, what was their legal status? Who then spoke for the child, who acted as a guardian, because, as a minor, it was not legally permitted to speak for itself? Thus was the importance of a legal identity in the twentieth century. These were the conflicts Fischer and her colleagues faced, and they were in

167 Taylor, *In the Children's Best Interests* (2017), 179.

168 Ibid.

169 Taylor, *In the Children's Best Interests* (2017).

170 "Taylor on Zahra, 'The Lost Children: Reconstructing Europe's Families after World War II'. Habsburg, H-Net," accessed October 5, 2021, https://networks.h-net.org/node/19384/reviews/19945/taylor-zahra-lost-children-reconstructing-europes-families-after-world.

171 Taylor, *In the Children's Best Interests* (2017), 280–85.

172 Ibid., 6. See also Liah Greenfeld, *Nationalism: Five Roads to Modernity*, 5. printing (Cambridge, Mass.: Harvard University Press, 1995).

stark contrast to the emotional needs of many DP kids, to the extent that they even sometimes sabotaged psychological rehabilitation.

Fischer was furious about the delay the discussions with liaison officers and their respective countries meant for the children. She wrote: "While nations barter over the conference table for new boundaries, for repatriations, for economic advantages, the unaccompanied displaced United Nations child in Germany is losing weeks and months – perhaps even years – that can never be regained."[173]

Fischer did not approve of using children as bargaining chips in geopolitics, thus she resorted to trying to decide about children's lives on the basis of individual best interest.

Incorporating the legal aspects of the negotiation of the children's whereabouts has been vital to explore the possibilities but also the limits of psychological rehabilitation in the transitory spaces that were the DP camps. Taking care of the emotional needs of the children could not be divorced from practical, even legal questions: Fischer and her colleagues tried to focus on the best interest of a child when it came to deciding about their future whereabouts but they always had to consider the legal aspects of that decision. These negotiations put the whole endeavor of psychological rehabilitation in a transitory space such as a DP camp into perspective.

The Promised Land: Working Towards a Future for Jewish Children

Jewish DPs especially forced UNRRA team 182 to seek creative solutions, based on the children's individual wishes, if possible. Facing the aftermath of the war that saw Eastern European Shtetls destroyed and a subliminal anti-Semitism (re-) emerge, for many Jewish DPs repatriation would have meant an immediate danger to their lives.[174] Fischer was not prepared to send the children back and showed much sympathy for their wish to emigrate to Palestine.

Abram Leder was a child in Fischer's care before he left Indersdorf for Palestine in 1946. He remembered the choice Team 182 gave the children: "They asked each of us where we wanted to go, whether to our country of origin or to America; but all the Jews (of our group) wanted to go to Eretz Israel, which at the time was called Palestine."[175]

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173 Greta Fischer, "Fischer, Report Indersdorf 1946," 33.

174 Grossmann, *Jews, Germans, and Allies*, 1–2.

175 Abram Leder, Memories from my Home in Poland and from the Holocaust, quoted in Anna Andlauer, *The Rage to Live: The International D.P. Children's Center Kloster Indersdorf 1945–46*, 143.

Fischer understood the importance of hope. In that, she concurred with the IAPSG that had conceded, "Without the stimulus of hope, however distant, the mind of men cannot live."[176] Fischer assumed that what the kids needed was a prospect of the future, they needed to know where they could live in peace. This, according to Fischer, was more important than nations bartering over the kids' fate. At a time when the emigration to Palestine remained politically contentious, Fischer supported the nationalist Zionist cause by giving Zionist groups a platform in Indersdorf[177] because, as Fischer framed it, it gave the children hope. She conceded, "that gave them hope and courage and made them responsive to the immediate program at Indersdorf."[178] Here, again, Fischer alludes to the disciplinary effect she felt she observed when children aligned themselves with one specific (national) group.

In February 1946, the Zionist youth organization Dror[179] began gaining ground in the children's center, forming the kibbutz community *Mahapecha* that took charge of the whole children's home in July 1946. The group in the beginning consisted of 40 Hungarian members of the *Youth Aliyah*[180] who, supported by Dror, wished to emigrate to Palestine. They arranged with the UNRRA team provision of primary care and organized their life autonomously. In order to prepare life in Eretz Israel, the children were trained in agricultural work in order to prepare cultivating land in Palestine. The kids were guided by Zionist teachers, *madrichim*,[181] who taught them in Hebrew and acquainted them with Jewish customs and traditions that were foreign to many children who had either come from secularized Jews or had been "Germanized" during the war. Greta Fischer and her team surrendered the responsibility for the children's center at Indersdorf in the summer of 1946, moving on to Prien am Chiemsee, leaving the premises to the *Kibbutz Mahapecha.* By the time the new children's center was established

176 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 13.

177 Fischer here followed UNRRA's policy in the US zone of Germany that was more sympathetic to the Jewish DPs' call for emigration to Palestine (and an independent state of modern Israel) after the Harrison Report in fall of 1945, making the US zone a transit zone for Jewish DPs who wished to emigrate to Palestine, as has been discussed earlier.

178 Greta Fischer, "Fischer, Report Indersdorf 1946," 16.

179 Dror is a Zionist socialist youth organization founded in 1915 in Poland.

180 Aliyah is the Hebrew term for emigration to Palestine/modern state Israel. Youth Aliyah is a Zionist organization who organized the immigration of children to Palestine/modern state Israel.

181 Madrichim are Zionist youth leaders, usually affiliated with Zionist youth movements, such as Dror.

at Chiemsee, most Western European children had been repatriated.[182] Several groups of children were difficult to repatriate, especially Jewish kids, those from the Soviet Union and from Yugoslavia.[183] These children either remained with *Kibbutz Mahapecha* or moved along to Prien am Chiemsee.[184]

To conclude, as the recent pages have established, Team 182 at Indersdorf found themselves torn between the aspiration of supporting the children emotionally and meeting the particular exigencies not only of the postwar upheaval in general but also UNRRA's tight administrative repatriation strategy in particular. As the previous pages further have shown, in fact, these two aspects – the tending to the psychological rehabilitation of the kids and the negotiations around their belonging – were intimately linked and were, more often than not, at odds. As is usually the case in refugee scenarios, the psychological rehabilitation cannot be understood as divorced from the political context, as a refugee's psychic improvement is usually linked to the future whereabouts of a person. The future whereabouts, however, especially in (post-)conflict scenarios of a refugee, was always incumbent on political decisions.

4.3 Conclusion

Rehabilitation meant different things to different people, depending on which camp – those concerned with administrative questions, and those actually caring for DPs on the ground or thinking about their emotional condition – they belonged to.

As has been outlined extensively, UNRRA's official – administrative – strategy until fall of 1945 was to repatriate all DPs as soon as possible. Consequently, all actions in the DP camps were supposed to be designed with that goal in mind: to supply DPs with the necessary material provisions and to prepare them to rejoin their old communities, to become "assimilable" in their prewar countries of origin. Such was the official administrative understanding of UNRRA's remit.

Considering the psychosocial rehabilitation efforts of UNRRA, the interesting question was: did those people who were tasked by UNRRA to either draw up guidelines on how to deal with the emotional aspects of displacement or those who were confronted with the emotional toll caused by years of displacement on the ground actually adapt and align their strategies to the repatriation para-

182 In July of 1946 the last transport with 23 children to France was completed, cf. Andlauer, *Zurück ins Leben*, 172.
183 Ibid., 173–77.
184 Ibid.

digm, or did they challenge it? As it turned out, UNRRA was a kaleidoscope of those who worked for it. UNRRA, at least in the early stages, was neither a supply organization nor a solely welfare-focused organization, and the repatriation paradigm was not the sole objective of many people working for it. This part has shown that there were indeed distinct differences in understanding rehabilitation between the following three levels:

1. The official repatriation strategy of UNRRA's executive level.
2. The IAPSG's psychoanalytically informed proposed rehabilitation strategy during UNRRA's planning stage.
3. Greta Fischer's pragmatic take from on the ground.

There was no one UNRRA strategy; it depended on who was conceptualizing and implementing it. UNRRA's official repatriation strategy worked towards the paradigm of "normalization." UNRRA officials wished to see a return to a prewar-"normalcy" in the postwar. Rehabilitation, thus, was conceptualized as a normalizing process, the norm relating to prewar criteria. The process of "normalization" was to be facilitated by reestablishing prewar social norms. At the heart of this "normalization" stood the idea of the intact prewar family that needed to be reunited after the war. The family was stylized as the smallest and most powerful social unit that was hoped to both facilitate psychological healing and national coherence. UNRRA's repatriation strategy rested on an equivalence between the family and the nation: intact families would harness intact – democratic – states. In a time of disorder and chaos, the repatriation strategy of UNRRA relied on the hallmarks of a traditional family system. "Normality," in UNRRA's administrative terms, was located within patriarchally-structured families which were conceptualized as heralding the potential of serving as a bulwark to totalitarian tendencies. The righteous place of a citizen was considered to be within the confines of his or her original nation and – ideally – his or her (biological) family. Thus, within the repatriation strategy, the DPs' allegiance was positioned within their antebellum countries of origin, with no regard to the tectonic shifts of belonging that had happened over the course of WW II. Because the DPs found themselves outside their national borders the victorious powers – represented here by UNRRA – deemed them also outside of a social, political, and territorial norm that could secure peace. The term "displacement" insinuates an individual staying at the wrong place. The Latin prefix "dis" meaning literally apart from something, someone is 'staying at the wrong place'. For UNRRA's executive branch, the right place of a person was clearly within prewar boundaries. As anthropologist Liisa Malkki put it

concisely: "The ideal-typical refugee is a native gone amok."[185] The mere fact of uprootedness became pathologized in UNRRA's initial repatriation strategy and the immediate remedy, "therapy," was space: repatriation.[186] This strategy ignored the multiplicity of attachments humans form throughout a lifetime and applied an essentialist and thus static idea of (national) belonging onto the refugee. Displaced Persons were not regarded as individuals with individual and highly subjective coping strategies and desires for the future, but rather as members of a group. And they were supposed to be treated and rehabilitated as fractions of this group.

The Inter Allied Psychological Study Group developed a slightly deviating approach, based on their bodies of knowledge. A reflection on the setup of the IAPSG revealed that UNRRA employed a range of highly reputable psychiatrists, psychoanalysts, and social workers to draw up their psychological guideline for welfare workers, the *Report.* A delineation of the experience of the members of the IAPSG with displacement resulted in the sobering insight that the recruitment of these individuals was less a matter of direct experience in dealing with uprooted populations and more of professional and personal networks, mostly in Britain and Canada. The dominance of psychoanalytically trained psychiatrists was striking. UNRRA recruited John Rickman as the head of the IAPSG, a psychiatrist who was the most prominent psychoanalyst of his time in Britain. Rickman and several colleagues of his in the IAPSG referred to Sigmund Freud inspired psychoanalysis as their frame of reference and their way of making sense of war and displacement. But a closer look revealed that it was not just Sigmund Freud who influenced them; it was also, in a major way, his daughter, reputable child analyst Anna Freud. These insights proved to be highly influential for psychosocial actors working with children and war for years to come, with notable impact on the IAPSG, on Greta Fischer, and on Dr. Paul Friedman, who will be discussed in part II of this study.

It would have been tempting to read the *Report* as a sort of psychological basis manual that was written to underpin UNRRA's executive repatriation strategy, expecting the preparatory reports to explain, from a psychosocial perspective, how to support the DPs in becoming assimilable in their prewar families and countries. However, a close reading of the source proved things to be more complex. The advice given by the *IAPSG* did not entirely align with UNRRA's repatriation paradigm.

The goal of psychosocial rehabilitation work is outlined clearly in both the *Report* and in *Special Needs.* Psychosocial rehabilitative work was to support the DPs

185 Andlauer, 173–77. Malkki, Liisa, "National Geographic: The Rooting of Peoples and the Territorialization of National Identity among Scholars and Refugees," 34.

186 For a thorough analysis of repatriation, see Barbara E. Harrell-Bond, "Repatriation: Under What Conditions Is It the Most Desirable Solution for Refugees? An Agenda for Research," *African Studies Review* 32, no. 1 (April 1989): 41, https://doi.org/10.2307/524493.

in becoming responsible members of a peaceful community where they would abstain from violence and help through their "moods and attitudes"[187] to prevent another war. The nature of the community, however, is the decisive factor: after closely investigating the *Report* it has become clear that the category of community and family remains strong in the *Report*'s narrative, however, the emphasis on the biological family and the emphasis on the return to a prewar community/nation is absent in the *Report.* There is definitely an adherence and reliance on the container of the family and a community, but not the biological family or prewar nation. The *Report* can thus be seen as signifying a departure from UNRRA's repatriation paradigm that relied on the hallmark of the prewar nation and the biological family.

Home is a vital concept in the *Report*, one that is to be attained by the DPs down the line. Home holds a more figurative meaning than in the conceptualization of UNRRA's executive repatriation paradigm. Regarding the repatriation paradigm, home was looked at as a static container, oriented on prewar belonging; for the *Report,* home was a malleable emotional concept, not necessarily tied to a geographic place.

The second of the preparatory reports that was analyzed for this chapter, *Special Needs of Women and Girls*, strikes the reader as more adherent to UNRRA's repatriation strategy than the *Report.* It reflected the ideology and goals of UNRRA's social policy to a larger extent, with its emphasis on the family and country of origin: the concept of "dignity" is central to the narrative of *Special Needs.* The restoration of dignity is tied to conceptualizations of age and gender. Prewar norms were supposed to be recovered through age- and gender-appropriate treatment in the DP camp. This advisement seems strikingly more normative than the *Report.* It begs the question, why? There is nothing left to do here but speculate. Two things are conceivable: first, the two reports were penned by two different committees. The *International Working Party* consisted of a heterogenous group of 28 members, with mostly continental European members, with the exception of several Britons and Canadians. There were more practitioners and social workers represented in the *Working* Party than in the *IAPSG.*[188] The advice compiled by the *IAPSG* was characterized by a more conceptual, abstract psychoanalytical character, while *Special Needs* was more practical and less conceptual. The second possible reason for the more normative character of *Special Needs* pertains to the fact that it deals exclusively with females, a group that traditionally invites the more

187 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 40.

188 Welfare Division of the European Regional Office of UNRRA by an International Working Party of Social Workers, Psychiatric Social Workers, Doctors and Psychiatrist [sic], "Special Needs of Women and Girls," 1.

normative perceptions of a heightened vulnerability and the "special need" for protection and assistance in regaining "dignity." All these meditations, however, remain in the realm of speculation.

Another important point unites both reports. Both sources do have a political dimension to them, the *Report* more overtly than *Special Needs.* The IAPSG, especially, was very clear in the nexus of their work as psychosocial experts working on the "moods and attitudes"[189] of individuals with a view towards the larger coherence of communities, nations, and international relations and, ultimately, peace. According to the *Report*, the one influences the other. The individual mental state was conceptualized as decidedly political, so working on or improving this mental state was also political. The work with DPs, a "force of opinion,"[190] was conceptualized as necessary groundwork for the (re-) construction of peaceful (democratic) societies. The study groups established a causal line between the mental health of individuals, communities, and nations.

This axiom is vital to the psychosocial strategy of UNRRA, as this part has shown. *Special Needs* does not display its political connotation as overtly; the advice given regarding the treatment of women and girls, however, definitely aims at reinstating a heteronormative vision of a society in which the traditional gender role distribution is restored: women and girls are perceived to be in need of greater protection than men and boys, and their task is caring for the family.

In a Foucauldian sense, the psychosocial experts of UNRRA, the IAPSG, and the International Working Party exercised a form of international biopolitics: ameliorating the mental health of DPs as groundwork for the international "health" of populations. Members of the IAPSG considered themselves not just as working on the amelioration of an individual's psychic constitution; they saw themselves bestowed with the global role of preventing future wars. In that, they operated along the lines of the international mental hygiene movement.

It was up to welfare workers like Greta Fischer, in the sphere of action, to implement the theoretical strategies that had been formulated in faraway psychiatrist's offices. The psychosocial "experts" were producing the norm, and the welfare workers tested these norms on the ground. It was here, in the chaotic makeshift environment of hastily erected DP camps, where the psychosocial strategies were litmus tested and put to rights. The welfare workers were faced with the

189 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 40.
190 Ibid., 41.

"emotional legacies"[191] of unprecedented violence while at the same time juggling the DPs' desire for normalcy and overcoming the darkness of the past, and having to keep their eyes firmly on the goal of reconstructing Europe. These forces were more often than not diverging. The (oftentimes untrained) welfare workers had to perform the herculean task of bridging military, administrative, as well as practical and healing motives.

UNRRA instated children's centers such as Kloster Indersdorf to better administrate the reunification of families (if possible) or to otherwise prepare the children for repatriation. It has become clear that the work of Greta Fischer and colleagues far exceeded the purely administrative realm. In fact, Team 182 quickly grasped that the exigencies of dealing with uprooted children were way too complex to align choices about their whereabouts with UNRRA's repatriation paradigm. Fischer and her colleagues consciously sought to promote a group consciousness within the children to provide them with feelings of warmth and love, and to view them as individuals rather than a homogenous group that was to be administered.[192] In that, Fischer and her colleagues did not align with UNRRA's repatriation strategy, but with the strategy proposed by the IAPSG.

The question of belonging was especially contentious in the children's center, as it was deeply entangled with psychological rehabilitation. Fischer was convinced that a clear national identification, and belonging, was paramount to psychological amelioration and stability, and thus overall health. It did not have to be the prewar national identification, though. The team at Indersdorf generally sought to decide on the basis of the "best interests" of a child, a practice that sought to work towards the fulfillment of individual wishes and desires rather than of UNRRA's "best practice" repatriation. The caveat that emerged again and again was this: UNRRA's repatriation strategy saw DPs as a faceless, homogenous group; staff concerned with psychosocial rehabilitation sought to view their charges as individuals.

Kloster Indersdorf served as a case study for UNRRA's initial psychosocial strategy. Nevertheless, psychosocial rehabilitation was very much contingent upon the individual welfare worker providing the assistance. Fischer and her team's work is not to be taken as a pars pro toto case. To what extent UNRRA welfare workers in other DP camps prioritized the individual needs and wishes of their charges depended on their outlook, background, training, and resources.[193] Due to the heterogeneity of UNRRA staff and the welfare workers' extremely di-

191 Cf. Biess, Frank, "Feelings in the Aftermath: Toward a History of Postwar Emotions," in *Histories of the Aftermath: The Legacies of the Second World War in Europe* (Berghahn Books, 2010), 30–48.

192 Greta Fischer, "Fischer, Report Indersdorf 1946," 20.

193 See i. e. *Tobias and Schlichting, Heimat auf Zeit.*

verse backgrounds, it is difficult to evaluate the importance they on average attached to psychosocial principles on the ground. Some welfare workers had a background in psychoanalytically influenced social work, while others viewed their task as purely administrative and had "never heard of Freud."[194]

UNRRA's initial official psychosocial strategy in part failed to meet the exigencies and complexities of the DP situation in the postwar. It fell upon the welfare workers on the ground to compensate for these failures of planning and foresight, with varying degrees of success depending on the individual welfare worker's propensity for empathy and flexibility. The lack of planning for Jewish DPs especially proved to become the major challenge in the immediate postwar years. As this chapter has shown, the aspect of what later would be subsumed under the term "genocide" of the Jewish people under Nazi rule and its emotional toll did not figure into UNRRA's initial planning.[195] In UNRRA's initial official strategy DPs were not seen as a traumatized mass, but people who were uprooted and needed to be rehabilitated, whose homelessness needed to be remedied by repatriation. The guiding mental construct of both UNRRA's executive level and the IAPSG, displacement, was the guiding mental construct, not genocide with its organized form attempting at erasing an entire group of people. For Jewish survivors especially, this turned out to be falling short of their actual experience. In fact, the obliviousness of UNRRA's initial repatriation strategy produced a vacuum of belonging for Jewish survivors of the Shoah, with massive impact on their psychosocial rehabilitation.

The Jewish plight, as this study will establish in the coming chapters, was to forcefully shift the notion and possibilities of rehabilitation as a whole. The Jewish survivors sought transformation, redemption, and new belonging. Because, for the majority of Jews, there was no "normal" to return to.

194 Laure Humbert, "War and Displacement in the Twentieth Century."

195 See as well Ibrahim, "Uprooting, Trauma, and Confinement: Psychiatry in Refugee Camps, 1945–1993," 39.

JDC – Paving the Path Toward a New Homeland

On December 12, 1945, JDC welfare worker Miriam Warburg noted in a report to her superiors, "The number of people with nervous breakdowns and mental disorders is increasing at an alarming rate."[1] A year after UNRRA's Inter Allied Psychological Study Group crafted its theoretical *Report*, while Greta Fischer and her team grappled with surviving children in the UNRRA run children's home of Kloster Indersdorf, Miriam Warburg was confronted with the toll the war had had on the offspring of the group that suffered the greatest casualties in terms of numbers: Jewish displaced children.[2] Miriam Warburg was on a hiatus from her day job at a Zionist youth organization to work for the major Jewish humanitarian organization active in postwar Europe: The American Jewish Joint Distribution Committee (JDC), dubbed colloquially the "Joint." After a challenging start, the Joint took on the task of caring for the self-described *Sherith Hapletah*,[3] the surviving remnant of European Jewry. Because JDC welfare workers like Miriam Warburg were starting to become overwhelmed with the emotional toll of the war years on children, the JDC enlisted an experienced Jewish psychiatrist to tackle the psychological repercussions of the war on Jewish children. The work of Polish-American psychiatrist and psychoanalyst Dr. Paul Friedman for the JDC stands at the heart of this part of the study.

Besides UNRRA and later IRO, the JDC was the largest and most influential humanitarian organization active in postwar Europe, taking care of Jewish Displaced Persons.[4] Hence, after having delineated UNRRA's psychosocial strategy at length in the first part of this study, the following part will be concerned with the JDC's approach of psychosocial rehabilitation geared towards Jewish DPs. The order of investigation presented in this study – UNRRA first, then JDC – is indicative of both the chronology of presence and dominance in the DP camps but also of the hierarchies between the two organizations: the JDC was formally subordinate to UNRRA and the military (SHAEF) and was allowed into the DP camps only starting August 1945.[5] Besides this order of events, there are no known preparatory plans compiled by the JDC prior to war's end, as there were with UNRRA.[6]

1 Miriam Warburg, "Third Report on Her Work in a Displaced Persons Camp October 1945 – January 1946," October 1945, 6, Central Zionist Archives, Jerusalem.

2 Wyman, *DPs*, 86–105.

3 Jewish survivors referred to themselves in the postwar as Sherith Hapletah, the surviving remnant of Jewry as a reference to the long history of persecution of the Jews. The biblical concept of the surviving remnant is found in the Book of Genesis: when Jacob set out to meet his brother Esau, he feared Esau might attack and kill his followers. He divided his group in two and prophesied, "If Esau meets one group and slays them, the other group that remains will escape." Cf. Mankowitz, *Life between Memory and Hope*, 2.

4 Patt and Crago Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957," 361.

5 Ibid., 364.

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A considerable portion of the UNRRA chapter was dedicated to investigating the organization's planning for the mental rehabilitation of DPs, based off of theoretically anticipated aspects of psychological rehabilitation in the *Report.* For this chapter, we encounter the activities of the JDC in 1946, after the hostilities had ceased, when the DP camps were set up and the postwar mayhem was in full swing. Thus, the focus of this chapter will be on the actual happenings on the ground, providing a more practical view on the mental rehabilitation work with Jewish DPs, as conceptualized by Dr. Paul Friedman. While the focus of this part will still lie on the (theoretical) observations and conceptualization of Friedman (he spent several months in DP camps but did not work with the DPs on an everyday basis over a longer period of time), the practical work with DPs will be the main issue at hand, because the DP camps were set up and running.

To gain insight on the psychiatric conceptualization of a JDC employed psychiatrist, the work of Polish American psychiatrist Dr. Paul Friedman will be at the center of this chapter. Friedman was tasked by the JDC Health Department in 1946 to travel European DP children's homes to conduct a survey on their psychological condition, and to formulate recommendations for the mental rehabilitation of Jewish child DPs: the *Survey of Mental Conditions of the Surviving Jewish People* was the first attempt at investigating the mental condition of Jewish DP children by a humanitarian organization.[7] A year later, in 1947, Friedman was again tasked by the JDC to conduct another survey, this time with a decidedly more political ring to it: he was sent to the British internment camps in Cyprus where the British interned those DPs who attempted to emigrate to Palestine. There, Friedman was to compile a survey about the psychological constitution of the Cyprus DPs and to develop a psychiatric manual for local personnel, as well as to compile recommendations for a mental hygiene project in Palestine.[8]

Friedman's 1946 *Survey* on mainland Europe will provide us with insight into his conceptualization of the mental constitution of Jewish child DPs, as well as about his recommendations for the amelioration of childcare in JDC children's homes. The second document, the 1947 Cyprus Report, is an especially fascinating source, as it sheds light not only onto the ways in which the originally politically more or less neutral American organization JDC was pulled into the political mael-

6 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons"; Welfare Division of the European Regional Office of UNRRA by an International Working Party of Social Workers, Psychiatric Social Workers, Doctors and Psychiatrist [sic], "Special Needs of Women and Girls."

7 Paul Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," January 1, 1947, G 45-54/4/8/36/GER.569, JDC Archives;

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

strom of the immediate postwar era. Looking at Friedman's work in Cyprus will, among other things, also instruct us even deeper about the nexus of psychiatry and politics so prevalent in the work with DPs in the postwar: it will be discussed to what extent Friedman's work was to, consciously or unconsciously, serve the "measurement" of the human capital that sought to emigrate to Palestine – who was fit to emigrate and to build a modern Jewish state and who was not, based on their psychological constitution? Paul Friedman was a proponent of the mental hygiene paradigm. Thus, analyzing his work for the JDC will help deepen the understanding about the application of mental hygiene as a strategy to influence the future of several states.

This part of the study draws from a versatile body of sources: the majority of the insights are gleaned from administrative sources, written as reports for the JDC, which give insight into the administrative processes and positioning of establishing mental hygiene projects.[9] Other sources compiled by Friedman are either of a journalistic nature or publications in disciplinary journals.[10] Sources by Friedman, which are not of an administrative nature, allow a more nuanced look into his way of conceptualizing the mental condition of DPs, as he was free to challenge notions of the JDC. Therefore, the combination of these kinds of sources proved fruitful in painting a more rounded picture of Friedman's overall conceptualizations.

But before we dive deeper into the close reading of the main sources of this chapter it is paramount to situate the JDC in its endeavor to help the Jews of Europe. Just like in part I, some pages will then be dedicated to trace the administrative setup of the JDC, with a health department that sought psychiatric counsel to better take care of Jewish children.

9 See i. e. "Memorandum of Informal Meeting Attended by: Dr. Bettina Warburg, Dr. Paul Friedman, Mr. Robert Pilpel May 9, 1946," May 9, 1946, JDC Archives; William M. Schmidt, "Notes on Proposed Mental Hygiene Project," April 29, 1946, JDC Archives; "Outline of Organization and Operation of Proposed Mental Hygiene Center," July 12, 1948.

10 For instance Paul Friedman, "The Road Back for the DP's: Healing the Psychological Scars of Nazism," *Commentary Magazine*, December 1948, https://www.commentary.org/articles/paul-friedman/the-road-back-for-the-dpshealing-the-psychological-scars-of-nazism/; Friedman, "Some Aspects of Concentration Camp Psychology."

5 The Evolution of the American Jewish Joint Distribution Committee in Postwar Europe

After it was granted access to Europe's DP camps in August 1945, the Joint assumed responsibility for Jewish Displaced Persons in the DP camps.[1] With that, an American-Jewish organization took responsibility for their European brethren, shaping not only the lives of Jewish survivors in the immediate aftermath of the Holocaust but also their paths into the future.[2] In the fall of 1945, the JDC overtook the running of Jewish DP camps, where it took care of both material aid and immaterial rehabilitation and worked towards emigration.[3] It was the JDC who initiated several "mental hygienic surveys" targeted specifically at Jewish DPs which stand at the heart of this chapter.[4] Besides administering DP camps, the JDC also financed local Jewish communities in their reconstruction efforts[5] and children's homes in France, where displaced children were sent.[6]

It is therefore apt to now cast a brief look at the JDC's history to gain a better understanding of the organization's positioning, as well as to outline its objectives in postwar Europe and in its work with Jewish survivors of the Shoah. Even though the JDC was the major umbrella organization for all other Jewish organizations active in the DP camps, the body of literature on the genesis of the organization as well as a more analytical view on its political positioning and its social practices remains surprisingly slim. Yehuda Bauer's research on the history of the JDC, even though dated, remains the most seminal body of literature on this topic to this day.[7] Usually (apart from Bauer's work) a set of little information on the administration's history and its financial structure is provided before the authors dive deeper into JDC's concrete operations on the ground, mostly with a specific

1 Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 58–66.

2 Hobson Faure, "Shaping Children's Lives: American Jewish Aid in Post-World War II France (1944–1948)."

3 Patt and Crago-Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957," 362.

4 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe"; Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman."

5 For more on JDC's engagement beyond the DP camps see Mandel, "Philanthropy or Cultural Imperialism?"; Hobson Faure, "Shaping Children's Lives: American Jewish Aid in Post-World War II France (1944–1948)."

6 For recent research on American engagement for French Jews, see Hobson Faure, *A "Jewish Marshall Plan."*

7 See i. e. *Bauer, Out of the Ashes.*

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geographic focus.[8] A more critical focus on the organization's genesis and objectives or even its practices is usually circumvented, except for the case of France. Maud Mandel and Laura Hobson Faure both frame the JDC as an organization that "exported" a set of American welfare practices, raising the question whether the JDC conducted "philanthropy or cultural imperialism," as Mandel framed it in her eponymous essay.[9] Recently, there has been an anthology on the history of JDC, in cooperation with the organization itself.[10]

This chapter is taking these clues regarding the gaps in research, sketching a critical look at the JDC's genesis, its ideological positioning, and the networks that shaped the trajectory of the Joint's specific humanitarianism. Like in the previous chapter on the work of UNRRA, one of the main questions guiding this historical background is out of which milieu and rationale the JDC decided to incorporate mental hygiene aspects into their work. Another aim of this historical context part is to illuminate the rather murky question of JDC's political positioning with special regards to Zionism that became so contested within the communities of Jewish DPs in the DP camps. As the events of the year 1945 have been outlined previously (see Chapter 3.1 "The operations begin"), a few further facts about the situation in Jewish DP camps will be given before we dive deeper into the JDC's psychosocial work.

5.1 The JDC: American Jewish Support for Their European Brethren

The Joint was the product of the combined relief efforts of several strands of American Jewry under the helm of wealthy American Jews.[11] Traditionally, American Jewry had banded together for centuries to collect funds for their less fortunate European kin, especially after the influx of Eastern European Jews to the US in the nineteenth century.[12] In fact, *tzdakah,* often erroneously translated with char-

8 Hobson Faure, "Shaping Children's Lives: American Jewish Aid in Post-World War II France (1944–1948)"; Doron, *Jewish Youth and Identity in Postwar France*; Zhava Litvac Glaser, "Refugees And Relief: The American Jewish Joint Distribution Committee And European Jews In Cuba And Shanghai 1938–1943" (City University of New York Graduate Center, 2015).

9 Mandel, "Philanthropy or Cultural Imperialism?"; Vanden Daelen and Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust."

10 *Patt et al., The JDC at 100.*

11 Vanden Daelen and Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust," 281.

12 Ibid.

ity,[13] runs deep in the Jewish tradition as an obligation demanded in sacred texts. *Tzdakah* or *tsedokah* is a form of obligatory giving, a departure from the idea of voluntary philanthropy, which the term charity insinuates.[14] As Dana Mihalescu outlines convincingly, *tzdakah* can be translated from Hebrew as "social justice, a form of beneficent giving not regarded as charity but as social fairness."[15] *Tzdakah* was a duty of wealthy individuals that established a "system of interdependence" that was particularly prevalent in communities of the Eastern European shtetls that had migrated to the US in the nineteenth century.[16]

The particular Jewish philanthropic endeavor that stands at the heart of this chapter, the Joint, was dominated mostly by wealthy German-American Jews who had emigrated to the United States in the nineteenth century. In 1914, out of a "joint" endeavor of the Orthodox Central Relief Committee and the People's Relief Committee, the Jewish Joint Distribution Committee was born under the helm of Felix Warburg.[17] Conceived initially to provide assistance to European Jews who suffered during WWI overseas, the JDC was thought of as a temporary organization that would cease its activities once the war was over. Challenges for European Jewry, however, would not cease and the JDC has continued its work until this day.[18]

The JDC's particular brand of philanthropy was a departure from previous Jewish charitable endeavors, as it was originally decidedly more secular and, most importantly, nonpolitical: it did not identify with the goals of Zionism or other political tendencies. In fact, the JDC gained support from Zionist and non-Zionists alike.[19] Stein describes the JDC's version of philanthropy as "governed entirely by humanitarian principles."[20] It remains unclear what Stein considers to be the hallmark of these humanitarian principles, but his observation may point towards the JDC's self-perceived apolitical agenda in the initial years of its existence. As Yehuda Bauer frames it in his seminal work on the history of JDC, German Jews were "most dominant" in the organization, men who were "predominantly non-Orthodox, Americanized, and liberal-minded" who had become rich and wanted to

13 As did Stein, "Jewish Social Work in the United States, 1654–1954," 5.

14 Dana Mihailescu, "East-European Traditions in Early 20th Century Jewish-American Fiction: The Case of Tsdokeh in Anzia Yezierska," *Hérmeneutique et Bricolage: Territoires et Frontières de la Tradition de la Judaisme* (n.d.), 243.

15 Ibid.

16 Ibid.

17 Stein, "Jewish Social Work in the United States, 1654–1954," 12.

18 For the JDC's history prior to WWII, see *Bauer, My Brother's Keeper; a History of the American Jewish Joint Distribution Committee, 1929–1939.*

19 Stein, "Jewish Social Work in the United States, 1654–1954," 12.

20 Ibid., 50.

help their "less fortunate brethren" overseas.[21] According to Bauer, "They did so willingly but condescendingly."[22]

Considering the milieu in which the JDC was conceived and later executed is significant, as it helps us understand the trajectory the assistance provided by the organization took. It helps to gain a clearer understanding of two questions that are central for the setup of this chapter: firstly, how did the JDC position itself in terms of Zionism, as it increasingly supported the reemergence of the state of Israel after WWII; and secondly, what constituted the body of knowledge of those on the executive level of the JDC who decided to employ a psychoanalyst to support the JDC's endeavors in Europe, and who supported the establishment of mental hygienic projects?

Especially in the first decades of the Joint's existence, the organization was shaped by one wealthy German-American Jewish dynasty hailing originally from Hamburg, Germany, the Warburgs. Banker Felix Warburg (1871–1937) emigrated to the US from Hamburg in 1900 and shaped the trajectory of the JDC until his death in 1937 when he was succeeded by his son Edward "Eddie" Warburg (1908–1992). The Warburg family was one of the most influential wealthy German-American dynasties.[23] The Warburgs were no political Zionists: according to Warburg biographer Ron Chernow, Felix Warburg regarded "Palestine as a spiritual home for Judaism rather than a future nation-state."[24] The Warburgs enjoyed formidable connections to the glamorous, wealthy, and powerful, as well as to the State Department during WWII, which primed the JDC later to become a trusted ally in the reconstruction work in Europe.[25] The generation of the younger Warburgs, the children of the generation of Joint founders, was part of New York's high society and mingled with artists and en vogue people who made up the societal avantgarde of their time. This is also how the Warburgs came in touch with psychoanalysis that was all the rage in New Yorks's progressive upper-class circles of the 1930s and 1940s.[26] These social acquaintances shaped the trajectory the Joint's mental hygiene strategy took in the postwar. As we will establish later, Felix Warburg's niece, the psychoanalyst Bettina Warburg, was not only integral

21 Bauer, *My Brother's Keeper; a History of the American Jewish Joint Distribution Committee, 1929–1939*, 5.
22 Ibid.
23 Ron Chernow, *The Warburgs: The Twentieth-Century Odyssey of a Remarkable Jewish Family*, Second Vintage Books edition (New York: Vintage Books, a division of Random House LLC, 2016).
24 Ibid., 223.
25 Ibid., 352–80.
26 Ibid., 714.

in saving European Jewish psychoanalysts by bringing them to the US[27] but would also turn out to be the person who advocated for the employment of a psychoanalyst to the JDC Health Department.[28]

While the upper echelons of the JDC were directed by a network of influential German-American Jews, the lower professional ranks that were in charge of day to day activities were increasingly occupied by staff with a background in social work: Bernard Kahn, JDC Europe director in the 1930s, was a Swedish economist and social worker, and by 1938 Joseph J. Schwartz, social worker from Brooklyn, became assistant secretary and later JDC Europe director.[29] With the beginning of the Second World War, the JDC's ideological scope widened, representing increasingly professionally qualified workers who, as Bauer put it, "were inclined to be more liberal, less convention-bound, and more pro-Zionist."[30]

From 1939 on, the JDC received 57% of funds from the United Jewish Appeal, an alliance that supported "Palestine-oriented" but non-Zionist fundraising groups.[31] Thus, emigration to Palestine for a long time was regarded as a safe haven for Jews, but without the Zionist call for an independent nation state of Israel.[32] The JDC's handling of Zionism and many Jewish DPs' urge to emigrate to Palestine/Israel shifted over the course of the postwar years and was the cause for constant negotiations and discord. Its initial nonpolitical stance gradually changed towards a more pragmatic one, as the second part of this chapter will illuminate when it comes to Dr. Paul Friedman's work in Cyprus. The relationship between Zionists and the JDC was never easy, and it took the JDC leadership based in Manhattan much "soul-searching," as Bauer aptly put it, to support "illegal immigration" to Palestine, meaning immigration to Palestine under British protectorate prior to the establishment of the modern state of Israel in May 1948.[33]

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27 Nellie L. Thompson, "The Transformation of Psychoanalysis in America: Emigré Analysts and the New York Psychoanalytic Society and Institute, 1935–1961," *Journal of the American Psychoanalytic Association* 60, no. 1 (February 2012): 9–44, https://doi.org/10.1177/0003065112436716.

28 "Memorandum of Informal Meeting Attended by: Dr. Bettina Warburg, Dr. Paul Friedman, Mr. Robert Pilpel May 9, 1946."

29 Bauer, *American Jewry and the Holocaust*, 13.

30 Bauer, *Out of the Ashes*, xv

31 Hobson Faure, "Shaping Children's Lives: American Jewish Aid in Post-World War II France (1944–1948)," 177.

32 For a composite history of Zionism, see *Laqueur, A History of Zionism.*

33 Bauer, *Out of the Ashes*, xxii.

5.2 Saving the Sherith Hapletah: The JDC in Jewish DP Camps

Over the course of 1945, the JDC assumed responsibility for the care of Jewish DPs, becoming an actor in permanently shaping Jewish postwar lives and their paths towards the future after WWII. In the following, the JDC's remit in the DP camps will be discussed along with the shifting demographies and challenges within the DP population. Since Dr. Paul Friedman's psychiatric work was mostly concerned with Jewish DP children, a special focus will rest on the demography and care of Jewish children within the JDC.

Questions about JDC activities during WWII, whether the organization did enough to save the European Jews, were and are highly contested: Many have argued that the administration did "too little too late,"[34] while others stress the fact that JDC leadership in Manhattan and Lisbon (where JDC's European office was based during the war) did not grasp the full extent of the annihilation of European Jewry until it was too late, but did a good job in the postwar.[35] Bauer argues that there were in fact "three JDCs" during the war: the New York office was responsible for raising funds and stayed in close contact with the US State Department; in Lisbon, the aforementioned Joseph Schwartz constituted the second JDC faced with the actual happenings on the continent; a third fraction of the JDC emerged among those JDC employees actually in the trenches, such as Emmanuel Ringelblum, who organized social welfare in the Warsaw ghetto during the Nazi occupation.[36] However one chooses to look at it, the JDC was not able to counter the horrors the Nazi reign on European Jewry had inflicted during the war.

After the war had finally come to an end, the Joint was nervous to enter ravished Europe immediately to help the *Sherith Hapletah*, the surviving remnant of European Jewry.[37] After what felt to many as unsatisfactory work during the war years, the Joint was adamant in doing better in the postwar. The JDC had been eager to start its services in the DP camps from May 1945 on, but due to administrative quarrels with SHAEF and UNRRA it started its work only in August of the same year.[38] While it became increasingly clear in the run up to the publication of the Harrison Report in September 1945 that the situation of Jewish DPs called for specific strategies, the military's awareness for special treatment of Jewish DPs rose as well. By August of 1945, JDC workers were finally allowed to enter DP

34 Cf. Ibid., 41.

35 *Bauer, American Jewry and the Holocaust.*

36 *Bauer, Out of the Ashes.* xvi.

37 Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 58.

38 Patt and Crago-Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957," 366.

camps.[39] In the initial postwar months, the hierarchy within the DP camps was steep, if contested: the allied military represented by SHAEF stood at the helm, with UNRRA being its direct executive on the ground. The Joint was subordinate to UNRRA and wore military uniforms, just like their UNRRA colleagues.[40] After the publication of the Harrison Report, which deemed the treatment of Jewish DPs as unacceptable and reminiscent of the Nazis' treatment, the situation for Jewish survivors eased somewhat: barbed wire surrounding the DP camps was removed, rations were increased to 2500 calories per day, and freedom of movement was instated.[41] The main effect of Harrison's diplomatic intervention was, however, that the Joint largely replaced UNRRA in Jewish assembly centers in the US Zone.[42] The Joint had presented the most obvious choice for the American army as the most trusted ally. The JDC directorate had formidable connections to the State Department and was deemed a respectable Jewish welfare agency that, in Bauer's words, "could serve as an interpreter between the Jewish DPs and the military."[43]

The Joint set up exclusively Jewish DP camps where it first and foremost provided the most important material aid, as well as support for eventual emigration to the desired destination, i. e. the United States, Canada, Britain, and of course, Palestine.[44] But the Joint made merit not only through the provision of material aid, it also fostered a robust educational, cultural, and religious life that had affirmed or, in some cases introduced, a sense of Jewish communal life lost for some, and entirely new for others.[45]

The JDC's attempts at concrete psychosocial rehabilitation through the work of a psychiatrist stand at the heart of this chapter. However, other kinds of immaterial support, what Judith Tydor Baumel called "spiritual rehabilitation,"[46] were also remarkably part of the JDC's particular brand of rehabilitation for DPs. It encouraged self-organization with various DP committees[47] and inspired the establishment of spiritual practices, guided in the beginning by army chaplains and later put into DP hands. Tydor Baumel illustrated the practice of spiritual rehabilitation through

39 Ibid.

40 Mankowitz, *Life between Memory and Hope*, 12.

41 Bauer, *Out of the Ashes*, 51.

42 Holian, *Between National Socialism and Soviet Communism*, 66.

43 Bauer, *Out of the Ashes*, 51.

44 Patt and Crago-Schneider, "Years of Survival: JDC in Postwar Germany, 1945 – 1957," 380.

45 Judith Baumel Tydor, "The Politics of Spiritual Rehabilitation in the DP Camps," *Simon Wiesenthal Center Annual* 6 (1989): 58 – 79.

46 Ibid.

47 On committees formed by DPs in the camps see i. e. Mankowitz, *Life between Memory and Hope*, 101 – 31.

the discussion of the provision of ritual objects.[48] Besides these immaterial practices the JDC also supported vocational training courses in collaboration with ORT, the "Organization for Rehabilitation through Training."[49]

It is difficult to formulate general statements on the personnel employed by the JDC, as little research has been done on this question. In Germany, where the JDC worked mostly in DP camps, mostly American and some British social workers were active on the ground.[50] In 1945, workers from several countries had been hired by JDC. But after criticism that they were not up for the task, the JDC sent American trained social workers to Europe[51] which provoked the well-founded assumption that, in fact, the JDC performed a sort of "cultural imperialism" by working to implement US-style social work in Europe.[52] According to Königseder and Wetzel, JDC's personnel policy gave a lot of responsibility to individuals on the ground, contributing to the impression that the quality of care very much depended on the individuals that were running the single places.[53]

In concluding the delineation of the JDC's early days, it is worth taking a step back and putting the JDC's work with DPs in Europe into the larger historical context. In hindsight, it becomes clear that the strategy of taking care of the surviving Jews after WWII in Europe cast a long shadow going forward: the fact that the Jews were singled out and accepted as a separate group entity, and the fostering of a Jewish identity within the Jewish DP camps, ultimately served to strengthen the call for an independent modern Jewish state.

What seemed a predominantly practical solution to the postwar chaos – setting up exclusively Jewish camps – turned out to be a watershed moment in Jewish history on the path to the recognition of a Jewish citizenship and, thus, a Jewish state.[54] By accepting that Jewish DPs needed special treatment and their own premises, the US for the first time acknowledged Jewish people as a separate group, subsumed under the term "stateless." What is more, the term "stateless"

48 Judith Baumel Tydor, "The Politics of Spiritual Rehabilitation in the DP Camps," 58.

49 ORT – Общество Ремесленного Труда, Organization for Rehabilitation through Training is an organization founded in Poland in 1793 that had worked in conjunction with Joint since its inception in 1914 to bring vocational training and jobs to underserved Jewish communities. See i. e. Grossmann, *Jews, Germans, and Allies*, 232.

50 Vanden Daelen and Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust," 288.

51 Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 64.

52 Mandel, "Philanthropy or Cultural Imperialism?"

53 Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 64.

54 See also *Patt, Finding Home and Homeland.*

also insinuated the call for these people to have a state of their own state. Dan Diner has worked extensively and convincingly on the effects of the establishment of singularly Jewish DP camps on Jewish history.[55] He came to the conclusion there is a "causal nexus"[56] between the Harrison Report in 1945 and the establishment of the modern state of Israel on May 14, 1948. He observed: "Without the self-organization in their own camps, resulting from a physical concentration of Jews in one place, the DPs could never have become such a lever of the Zionist Palestine policy."[57] As we will explore later, the question of (national) belonging of Jewish DPs became inextricably linked to their psychological rehabilitation, and their experience in the DP camps became a lever for the establishment of the state of Israel, both psychologically and politically.

Since the demography in the Jewish DP camps changed dramatically over the course of the first postwar years, it is worth considering the shifting numbers of the different age groups of the DPs in the JDC's care.[58] Since the focus of Dr. Paul Friedman's psychological surveys is on children, it is especially worth taking a look at the demography of children.

By September 1945, 6 million DPs had been repatriated by a rate of 60–80,000 a day, while by mid-1946 all West Europeans had been repatriated and 500,000 remained in the camps in the American zone. These 500,000 were made up of 50% Poles and Ukrainians, Yugoslavs, Balts, and 70,000 Jews and other smaller groups.[59] The majority of these Jews had not been there when the Joint set up camp in late summer of 1945. These Jews were called "infiltrees" and emerged in full force in the winter of 1946: majorly supported by the clandestine organization of *Brichah*[60] (Hebrew for "flight and rescue"), Eastern European Jews who were still in Eastern Europe for various reasons[61] would go to the American zone of Germany hoping to emigrate to Palestine from there. The Allied powers called them "infiltrees" in a

55 Diner, "Elemente der Subjektwerdung: Jüdische DPs in historischem Kontext."

56 Ibid., 230.

57 Translated by author. Original quote: "Ohne die Selbstorganisation in eigenen Lagern, hervorgegangen aus einer physischen Konzentration von Juden an einem Ort, hätten die DPs niemals zu einem derartigen Hebel der zionistischen Palästinapolitik werden können." Ibid., 241.

58 Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 47–58.

59 Wyman, *DPs*, 61–85.

60 *Bauer and Mazal Holocaust Collection, Flight and Rescue.*

61 Many of the infiltrees had survived the war in the Soviet Union before they made their way westward in search of a new home, while others had attempted to return to their homes at the end of the war but were unable to take up their old lives due to antisemitism there. For more, see *Nesselrodt, Dem Holocaust entkommen.*

rather derogatory fashion.[62] In the first half of 1946, roughly 6,550 Jewish survivors entered the American zone, while in July 1946, following antisemitic pogroms in Poland, the monthly average increased to 17,000 per month, quickly overwhelming the camp authorities.[63]

By the end of 1946, authorities assumed that the Jewish population in DP camps in the American zone had skyrocketed by 300 %, 146,000 compared to the beginning of the year.[64] The demography of children evolved dramatically within the first two years of the war: by the end of 1945, the majority of Jewish surviving children were in their teens, as younger children had been killed in the concentration camps due to their perceived incapability to work. In 1946, 20.3 % of the Jewish DPs were under the age of 17, while 79.7 % were adults.[65]

With the emergence of the "infiltrees" from the East, these numbers changed considerably. Over the course of 1946 groups of unaccompanied children that had banded together to make it to the American zone of Germany entered the area and were placed in Jewish DP camps. By December 1946, the number of the six–17-year-olds had multiplied up to 24,131.[66] Between June and November of 1946, around 76,924 "infiltrees" entered the American zone, among them 13,878 children, of which 2,458 came unaccompanied.[67]

Besides the surge of "infiltree" children that contributed to the rise in numbers of children present in the DP camps, the number of infants had skyrocketed due to what Atina Grossmann calls the "DP baby boom."[68] According to a JDC survey, 750 babies were born every month in 1946 in the American zone DP camps.[69] Grossmann conceptualized this rise in births convincingly as a form of vengeance and a "conscious affirmation of Jewish life."[70] However, the children born in the DP camps usually had their parents to care for them, contrary to unaccompanied children. As Crago Schneider and Patt outlined aptly, many of the unaccompanied children gravitated towards Palestine, while young families sought the practical support in DP camps with hopes of resettlement in the US.[71] Most of the unaccompanied Jewish children and youth left the tight-knit structure of the assembly cen-

62 Grossmann, *Jews, Germans, and Allies*, 1–2.
63 Mankowitz, *Life between Memory and Hope*, 17.
64 Patt and Crago-Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957," 373.
65 Ibid., 374.
66 Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," 57.
67 Ibid., 58.
68 Grossmann, *Jews, Germans, and Allies*, 188–96.
69 Ibid., 188.
70 Ibid., 189.
71 Patt and Crago-Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957," 374.

ters and gravitated towards Zionist organized alternative structures, oftentimes incorporated into the DP camps, as was the case at Kloster Indersdorf as discussed previously.[72] These structures were generally called *kibbutzim*, collective settlements, or *hakhsharot*, agricultural training farms. The purpose of both of these structures was to train children and youth for their emigration to Palestine or "Eretz Israel"[73] (homeland Israel).[74] These Zionist communal living arrangements were run by *madrichim*, Zionist youth leaders, usually not much older than their wards.

The JDC's involvement with Jewish survivors differed greatly according to the country: in postwar Germany and Austria, the JDC was mostly present in DP camps, in France and Belgium the JDC focused on financing local community projects with local staff.[75] A comparative look on JDC's actual practices on the ground is still lacking, presumably due to the fact that a comparison would be asymmetrical because of the differing structures supported by the JDC. Some research has been done on the question of whether the JDC exported a kind of American welfare system to local European communities, posing the question of cultural imperialism through philanthropy.[76] However, upon closer look it emerges that these kinds of blanket statements are hard to pertain due to the heterogeneity of JDC's work in Europe. Laura Hobson Faure observed convincingly, after having looked at the case studies of France and Belgium, that a presumed "Americanization of postwar Jewish life in Europe" was a matter of a "negotiated process" in which local players were active as well.[77]

My study, rather than postulating statements on the "nature" of the JDC's social work with DPs, will focus on Dr. Paul Friedman's outsider look onto the work that was done with the DPs in the DP camps regarding their psychological rehabilitation.

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72 For a study on Zionist structures for children within the DP camps, see *Patt, Finding Home and Homeland.*

73 Eretz Israel, or Eretz Yisrael, is the expression used to describe the Land of Israel, as it was promised by God to the Jewish people. In the following, I will use the expression until the founding of the Israeli state in May 1948 to signal the Zionist aspiration connected to the expression and the hope of survivors to immigrate. It is important to note, however, that after 1948 the expression was used by some radical Zionist nationalist fractions to describe their demand of a "Greater Israel" stretching from the Jordan River to the Mediterranean. *Laqueur, A History of Zionism.*

74 Patt, *Finding Home and Homeland*, 2.

75 Vanden Daelen and Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust," 280.

76 Mandel, "Philanthropy or Cultural Imperialism?"

77 Vanden Daelen and Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust," 281.

A closer look at the emergence and genesis of the Joint has illustrated how the organization that was conceived as a temporary body to support European Jews during WWI was able to adapt to shifting challenges and thereby becoming the major Jewish player in Europe's postwar humanitarian setup.[78] During the postwar years, the Joint became the umbrella organization for all smaller Jewish organizations active with DPs. In fact, the JDC proved to be relatively nimble in its principles, having begun as a non-political organization that shied away from aligning with the Zionist call for a nation state of Israel[79] and evolving towards a pragmatic stance towards emigration to Palestine, and thus Zionism, as this study will illustrate.

The Joint was a large-scale philanthropic project instated by American Jews. Whether that meant that the Joint exported American welfare practices abroad as stated by Hobson Faure[80] will remain up to debate at this point. For now, suffice to say that the nature of the work done by JDC in Europe was too heterogenous in order to make blanket statements about what kind of welfare practices were "exported." The DP camps were initially staffed by American workers and gradually DP personnel staffed them, but in other JDC financed communal projects, such as children's homes in France and Belgium, that Joint simply sent funds and local staff was employed.[81] The welfare practices supported by the JDC are therefore hard to classify.

Delineating the history of the JDC and its work immediately after WWII has been important to establish the backdrop against which the decision of the JDC to employ a psychiatrist was taken. Over the course of the first postwar months, the JDC grappled with both murky responsibilities and an extremely dynamic situation within the DP camps, with the influx of DPs from Eastern Europe increasing by the day. This was the situation in which, in early 1946, the JDC Health Department decided that there was a need to tackle the mental health aspect of displacement.

Next, we will explore the genesis of the decision to employ a psychiatrist to improve the JDC's response to a growing number of children in their care.

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78 Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 58.

79 Ibid., 77.

80 Vanden Daelen and Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust."

81 Ibid.

6 Surveying Jewish Displaced Children

In the summer of 1946, Polish-American psychiatrist and psychoanalyst Dr. Paul Friedman was tasked by the JDC's Health Department with compiling an exploratory *Survey* geared towards understanding the mental condition of Jewish DP children in JDC's care and to gauge the need to improve their care.[1] The close reading of this source constitutes the third case study of this thesis. The ways in which Friedman made sense of the children's condition he encountered stand at the heart of this chapter. But before the source will be dissected, the administrative process behind hiring Friedman will be traced. Just like in part I of this study, the administrative setup of the JDC will be presented in order to gauge the importance that was bestowed on the psychological aspects of care and rehabilitation. After that, several pages will be dedicated to outline Paul Friedman's biography because it provides insight into the reasons why he was considered the suitable candidate for the task. Then, a close reading of the *Survey* will follow.

6.1 JDC Health Departments

In early 1946, with the situation in Europe's DP camps still unfolding at a rapid pace, the staff at JDC headquarters in NYC became increasingly concerned with the social aspects of displacement. As has been outlined in the previous subchapter, the number of Jewish unaccompanied children in JDC's care in Europe rose by the day in Winter and spring of 1946.[2] Consequently, word was reaching New York about children with behavioral problems that saw the mostly unqualified JDC workers overwhelmed with the task at hand.

On March 17, 1946, a meeting of the JDC's Health Department was convened at JDC Headquarters in New York City to discuss the health situation of the DPs.[3] Among the eleven attendees, the only woman present, Bettina Warburg, raised the issue that, as a psychiatrist and psychoanalyst, was at the forefront of her mind: the mental health of displaced children. She insisted that the "seriously troubled children" that increasingly came into the care of the JDC were a "problem that

1 Paul Friedman,"Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," January 1, 1947, 1, G 45–54/4/8/36/GER.569, JDC Archives.

2 Patt and Crago Schneider, "Years of Survival: JDC in Postwar Germany, 1945–1957," 374.

3 Robert Pilpel, "Proposed Agenda for Health Committee Meeting" (New York City: JDC Health Department, March 17, 1946), JDC Archives.

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must be dealt with."[4] Warburg came to the conclusion that "psychiatric personnel was needed" for this "serious problem."[5]

Bettina Warburg's observation set in motion a process that culminated in the appointment of an experienced psychiatrist who was supposed to counsel the Joint with regards to the mental health of children: Dr. Paul Friedman consequently authored two major psychiatric surveys for the JDC. The *Survey*[6] written in 1946 and the *Cyprus Report*[7] penned in 1947 are extremely insightful sources, which we will discuss over the course of this part of this study. During the March 17 meeting where the mental health of children in JDC's care was first discussed on the executive level of the Health Department, Bettina Warburg succeeded in two ways that are paramount for this study. First, she convinced her peers that considering mental health was necessary going forward.[8] Secondly, Warburg quickly steered the discussion towards the employment of a psychiatrist with a psychoanalytic background. It becomes clear from the transcript of the meeting that Warburg knew her stuff: she was well versed in the nascent discourse around the effect of war on the mental health of children: not only was she aware of the work Anna Freud was doing in England with unaccompanied children (see chapter 2.2),[9] she was also sensitive to the emerging problem of untrained workers dealing with the troubled children.[10] Rather condescendingly she is reported to have said: "trained workers are virtually unavailable in Europe,"[11] calling for training courses for select care workers.

So, who was Bettina Warburg and what might have contributed to her campaigning for employing a psychoanalyst for the JDC? To get a better sense of who shaped the JDC's course in terms of mental hygiene and employing a psychoanalytically trained psychiatrist and why, a short excursion into the life of Bettina Warburg will be performed with a view towards Warburg's personal and professional background and network.

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4 Ibid., 3.

5 Ibid.

6 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe."

7 Paul Friedman, Mildred Buchwalder, and Sadie Oppenheim,"Cyprus: Psychiatric Report Dr. Paul Friedman," Psychiatric Team Cyprus, September 27, 1947, JDC Archives.

8 Pilpel, "Proposed Agenda for Health Committee Meeting," 3.

9 Ibid.

10 Ibid., 4.

11 Ibid., 3.

Psychoanalyst Bettina Warburg Catalyzing Jewish Mental Health Support

Bettina Warburg (1900–1990) was born in Hamburg to Paul Moritz Warburg, brother of JDC founder Felix Warburg and his wife, banking heiress Nina Loeb. The family emigrated to the US in 1906, where her father Paul would become one of the "fathers" of the Federal Reserve Bank, having had criticized the lack of centralization of the US-American banking system upon his arrival in the country in 1906.[12] While his brother Felix founded a philanthropic organization that would become the major Jewish humanitarian organization of the twentieth century, Paul, as a German émigré, helped revolutionize the American banking system: it is fair to say Bettina Warburg was born into a rich, powerful, and well-connected family.

The Warburgs of her generation, like her and her cousin Edward Warburg (JDC's temporary director until 1941), however, were more unconventional than their elders. Bettina Warburg stood at the heart of what Warburg biographer Ron Chernow described, rather condescendingly, as "the craze for psychoanalysis that infected the American Warburgs."[13] Bettina had startled her parents with her decision to go to medical school to become a psychiatrist, rejecting the path that was envisioned for well-off Jewish women of her time. Bettina Warburg soon became a Freudian and took up a four-year training analysis with infamous and controversial psychoanalyst Gregory Zilboorg, the "fashionable Park Avenue analyst," as one contemporary article put it.[14] Zilboorg was a colorful fixture in New York's psychoanalytic circles of the 1930s. He was a Russian refugee who had served in the Kerensky cabinet of the provisional government during the Russian revolution and came to the US in 1919. Zilboorg was described as being equally ingenious and criminal, keeping his patients in a state of dependence that enabled him to exploit them financially.[15] Zilboorg was known, at least to Bettina, as a skillful and brilliant fraudster. Nevertheless, he had the younger generation of the Warburgs in his grip for decades, analyzing several family members. Bettina Warburg later talked several of her relatives into analysis with him.[16] Bettina's cousin Edward

12 Chernow, *The Warburgs*, 307.

13 Ibid., 738.

14 "For the Psyche," *TIME*, September 2, 1946, 1.

15 Chernow, *The Warburgs*, 739.

16 Bettina's brother Jimmy took up analysis with his neighbor Zilboorg, as did his wife, the artist Kay Swift, who was in a romantic relationship with composer George Gershwin, himself also in analysis with Zilboorg. Cf. Ibid. For a biography about Zilboorg, albeit written by his scholar daughter, see Caroline Zilboorg, *The Life of Gregory Zilboorg. 1890–1959 1890–1959*, 2021.

"Eddie" Warburg (1908–1992),[17] who took over from his father Felix as chairman of the Joint from 1937 until America's entry into the war 1941 when he was drafted, started seeing Zilboorg for analysis in the 1930s and consulted him daily for 20 years.[18]

The character of Gregory Zilboorg, besides his colorful life, while a cameo in this story is nevertheless a decisive one: not only did he yield enormous influence over the younger Warburgs who were influential during and after WWII, it was probably Zilboorg, who introduced Bettina Warburg to Dr. Paul Friedman, who would become the go to psychiatrist for JDC's psychiatric endeavors.[19] As will be explored later, Friedman worked closely with Zilboorg upon his arrival in the US in 1938.[20]

Bettina Warburg was well connected in New York's psychoanalytic circles, becoming a member of the New York Psychoanalytic Society and Institute (NYPSA). Campaigning for a mental health professional to care for DPs in 1946 was not her first encounter with those persecuted by the Nazis. When Hitler took over in her home of Germany, and war was looming over the continent, Bettina Warburg took to action: in March of 1938, together with NYPSA president Lawrence Kubie, Warburg founded the Emergency Committee on Relief and Immigration (ECRI) of the American Psychoanalytic Association (APSA) and the New York Committee of the National Committee for the Resettlement of Foreign Physicians.[21] There, they helped facilitate the emigration of 154 European Jewish analysts to the US. Warburg presumably used most of her own money for the endeavor.[22] According to sources, Paul Friedman was not one of the analysts who were sponsored by the NYPSA.[23]

Thus, judging from her biography, when Bettina Warburg joined the health department of the Joint it only made sense that she would advocate for a psychoanalyst to be joining the rehabilitation effort in Germany: she was well-connected both within the JDC's directorate due to her familial ties and within New York psychiatric community. Incidentally, in 1940, Bettina Warburg became analyst to William

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17 Eddie Warburg was a patron of the arts (he co-founded the American Ballet Company, taught modern art at Bryn Mawr College, and mingled with artists like George Gershwin) and directed the Joint on the side.

18 Chernow, *The Warburgs*, 739.

19 Mortimer Ostow, "Obituary Dr. Paul Friedman," January 1973, 2.

20 Paul Friedman, "Mind, Medicine, and Man. By Gregory Zilboorg, M.D. New York: Harcourt, Brace & Co., 1943," The Psychoanalytic Quarterly 12, no. 4 (October 1, 1943): 566–87, https://doi.org/10.1080/21674086.1943.11925552; Zilboorg, The Life of Gregory Zilboorg. 1890–1959 1890–1959.

21 Thompson, "The Transformation of Psychoanalysis in America."

22 Ibid.

23 Ibid., 37–39.

Niederland, a German psychoanalyst who was one of the first to treat holocaust survivors in his practice starting in the 1950s. In 1961 he coined the term "survivor syndrome" which is understood to be the first time a psychiatric condition associated with the Holocaust was recognized. [24]

Bettina Warburg's intervention during the March 1946 JDC Health Department Meeting caused JDC Europe's medical director William Schmidt to initiate a "mental hygienic project" that aimed at improving mental hygiene for DPs, as will be discussed soon. Dr. Paul Friedman was to deliver the necessary exploratory groundwork. But before we dive deeper into Schmidt's conceptualization of the need to implement such a program, we will come back to the specificities of the mental hygiene paradigm as it pertains to the United States during WWII and the immediate postwar years.

6.2 Mental Hygiene and the Joint

When the Joint encountered European-trained social workers in the postwar DP camps and children's homes, major differences in outlook and training emerged and became cause for discord: as has been mentioned above, Bettina Warburg was dismayed with the dearth of, what she thought, were qualified workers.[25] Generally, over the course of the first year of JDC's operations in Europe, its workforce shifted constantly, with US-social workers replacing European staff because their work was considered unsuitable to the US-financed endeavor.[26] JDC Health director William Schmidt, too, came to the conclusion that European social workers working with DPs were missing the point by excluding psychiatric principles in their work.[27] The JDC's executive level's gaze on the work done on the ground with DPs was far from appreciative. A chasm had become obvious between different traditions of social work that crystallized in the DP camps: European social

24 William Niederland, "The Problem of the Survivor: Part I, Some Remarks on the Psychiatric Evaluation of Emotional Disorders in Survivors of Nazi Persecution"; William G. Niederland, *Folgen Der Verfolgung: Das Überlebenden-Syndrom: Seelenmord*, Erstausg, Edition Suhrkamp, 1015, Bd.15 (Frankfurt am Main: Suhrkamp, 1980); Moisel, "William G. Niederland (1904–1993) und Die Ursprünge des 'Überlebenden-Syndroms.'"

25 Pilpel, "Proposed Agenda for Health Committee Meeting," 4.

26 Angelika Königseder and Juliane Wetzel, *Lebensmut im Wartesaal: Die Jüdischen DPs (Displaced Persons) im Nachkriegsdeutschland*, 65.

27 Schmidt, William M. "Notes on Proposed Mental Hygiene Project," April, ID 670837, JDC Archives.

work was considered as focusing solely on the material aspects of rehabilitation[28] while US-trained social workers were influenced heavily by the mental hygiene paradigm, including psychiatric principles in their work, often infused with knowledge derived from psychoanalysis.[29] To better understand Warburg's and Schmidt's criticism of the work done with DPs, a brief overview will be given over the diverging approaches of facilitating aid to the DPs and the US-style social work that ultimately won out. Understanding the basis of the conflict between different approaches of social work is vital in order to understand why psychiatrist Friedman was sent to Europe to survey the mental health of child DPs.

In September of 1946, American TIME Magazine published an article titled "For the Psyche."[30] The objective of the article was clear: it was to educate the reader about the fact that humans were more than just their physicality, that there was a rather aloof part of them that also sometimes needed specific care – the mysterious thing called the psyche. Articles like "For the Psyche" were part of a wave of awareness raising publicity that swept the US media landscape in the 1940s.[31] Over the course of the 1940s, Americans were increasingly diagnosed with mental health issues, but they lacked properly trained personnel to treat them: what was needed, according to TIME, was "an attack on mental illness."[32] The 1946 article in TIME Magazine clearly sought to relieve mental health from its air of mystique, explaining what psychiatrists and psychoanalysts were actually doing. It read: "Psychiatry is a general medical term embracing all types of treatment of mental disease; psychoanalysis, one of the methods, depends on deep probing of a patient's subconscious and past emotional experiences."[33] The American public became educated about the world of mental health. Delivering brief and funny explanations of the different mental health fields, "neurotic Manhattan" was stipulated to be the American center of psychoanalysis.[34] The workings of the psyche and the fact that humans were more than just their bodies was entering the societal mainstream, even if psychoanalysis was reserved for the upper-class urbanites at this time. This development was directly reflected in JDC's healthcare policy which

28 Mandel, "Philanthropy or Cultural Imperialism?," 64–69; Vanden Daelen and Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust."

29 Ehrenreich, *The Altruistic Imagination*, 55–75.

30 "For the Psyche."

31 Theresa R. Richardson, *The Century of the Child: The Mental Hygiene Movement and Social Policy in the United States and Canada* (Albany, N.Y: State University of New York Press, 1989), 422.

32 "For the Psyche," TIME, September 2, 1946, 1.

33 Ibid.

34 Ibid., 2.

was directed out of said "neurotic Manhattan"[35] by calling for a psychoanalytically trained psychiatrist to support the JDC's work in Europe in 1946.

The fact that the United States became more and more sensitized to mental health can be attributed to the influence of the mental hygiene movement, which was developed in the United States (as discussed previously).[36] Operating at the intersection of psychiatry, psychology, social work, and politics, it sought to promote, among other things, an awareness for mental health in the wider population to ultimately improve the "health" of a population and secure societal coherence.[37]

The figure of the social worker, trained in psychiatric knowledge, increasingly moved to the center of mental hygienist's efforts to reach the wider population. The concept of prevention and training of expert staff with psychiatric principles – which was part of the mental hygiene paradigm – influenced the training of American social workers.[38] The profession of the psychiatric social worker was born that would figure prominently in the work of UNRRA and JDC later.[39] Over the course of the first decades of the twentieth century, when faced with a host of social challenges such as economic crisis and immigration, social work had become increasingly professionalized in the US.[40] While older generation social workers of the progressive era[41] subscribed to the idea of the social worker as the volunteer "friendly visitor"[42] whose job it was to supply the poor with material help and moral advice, social workers trained in the 1920s and 1930s turned towards new theories of psychology[43] and, most importantly, Freudian psychoanalysis to explain their charges' trials and tribulations.[44]

The turn towards psychiatry infused with the knowledge and methods of psychoanalysis had a more practical reason, too. During the 1920s, previously volun-

35 Ibid., 73.

36 Cohen, *Case Closed*, 134.

37 Ehrenreich, *The Altruistic Imagination*, 76.

38 Ibid., 66.

39 Ibid., 60.

40 Ibid.

41 The progressive era dates roughly between 1896 until 1916 in the US and was shaped by social activism and social reform. The progressive movement worked towards addressing problems resulting from industrialization and urbanization, while women suffrage and a rise in philanthropy were products of the progressive era.

42 Ehrenreich, *The Altruistic Imagination*, 55.

43 For the integration of psychology and psychiatry into social work, see Virginia P. Robinson, *A Changing Psychology in Social Case Work* (University of North Carolina Press, 1939).

44 Cohen, *Case Closed*, 134.

tary social workers more and more felt the need to "legitimate themselves"[45] opposite clients and to gain more state and philanthropic financial support. The lever for that was, according to Ehrenreich, an "identifiable body of knowledge" that conceptualized the social workers' activities in a way that would appease those who would give the money.[46] Maybe surprisingly, the "solution was psychoanalytic theory."[47] The inclusion of psychoanalytic principles was hoped to raise the efficacy of social work by looking at the root of a problem (even it was located in the nebulous unconscious) rather than treating its symptoms.[48] Freudian theory offered a framework and an explanatory model that served to integrate the emotional aspects of a client's situation as well as providing incentives for treatment.[49] And, according to Ehrenreich, "it worked" – social workers armed with psychoanalytic theories could "more effectively intervene" in the client's life.[50] This generation of social workers, who had their professional coming of age in the wake of WWI, according to Beth Cohen, "enthusiastically embraced" mental hygiene that was deeply rooted in psychiatric principles, with its method of (among other things) psychoanalysis.[51]

However, the US-American understanding of social work, welfare, and rehabilitation differed dramatically from the European staff the JDC hired immediately after the war.[52] Obviously, the nascent European social work scene during and after WWII is too heterogenous to allow blanket statements. However, for the case of France it can be said that social work was focused more on material rehabilitation, like "health, medical problems, and administrative questions."[53] Most importantly, knowledge derived from psychiatry, psychology, and psychoanalysis did not figure prominently in the French-style social work epistemologies.[54]

Sara Fieldston has outlined convincingly how in fact, consequently, many American-educated social workers and psychiatrists looked with dismay towards their European colleagues.[55] Americans oftentimes decried their European colleagues' work as too focused on the material provision of aid, with too little attention

45 Ehrenreich, *The Altruistic Imagination*, 60.
46 Ibid.
47 Ibid.
48 Ibid.
49 Cf. Cohen, *Case Closed*, 134.
50 Ehrenreich, *The Altruistic Imagination*, 71.
51 Cohen, *Case Closed*, 134.
52 Mandel, "Philanthropy or Cultural Imperialism?," 66.
53 Ibid., 69.
54 Ibid.
55 Fieldston, *Raising the World*, 33–42.

on the emotional aspects of rehabilitation.[56] What the American JDC executives, such as Schmidt and Warburg, sought to remedy was that this was a project that acted according to mental hygiene principles: monitor the population, especially children, to prevent mental illness and train suitable staff to provide mental health assistance.[57] This kind of approach, according to Schmidt and his colleagues, and seconded by Fieldston, was strange to European staff dealing with rehabilitation.[58] The project the JDC envisioned, and for which Friedman was to deliver the necessary exploratory groundwork, was to address this perceived unmet need.[59]

As this short exploration has illustrated, Mental Hygiene was the foremost paradigm in American style social work and psychiatry when the JDC considered mental rehabilitation of Europe's DPs. The professionalization of social work after WWI in the US was closely linked to the inclusion of psychiatric principles, infused (among other things) with the method of psychoanalysis into the training and work of social workers. The JDC sought to export this kind of psychosocial assistance to Europe to help rehabilitate the Nazis victims. As we will see later, Paul Friedman himself considered himself to be a proponent of the mental hygiene paradigm.[60] Mental hygiene with its emphasis on training suitable staff and preventing mental disease, often with the tools of psychoanalysis, always had an eye towards societal developments and, ultimately, politics. This excursion has shown that the mental hygiene paradigm was influential in guiding the JDC's decision to enlist a psychiatrist for their services.

Proposing a Mental Hygienic Project: Outlining the Problem at Hand

After we have established the milieu out of which the decision to hire a psychoanalytically trained psychiatrist was taken, we can turn our attention back to the ad-

56 Ibid., 36–40.

57 Schmidt, "Notes on Proposed Mental Hygiene Project," 1–2.

58 The landscape of social work in Europe is obviously a heterogenous one that has been traced here with very broad strokes to illustrate the difference between American social work and the way in which the JDC encountered European staff. A deeper dive into European social work transcends the limits of this study. For a thorough overview over the broad landscape of social work in Europe, see Sabine Hering and Beatrice Waaldijk, *History of Social Work in Europe (1900–1960) Female Pioneers and their Influence on the Development of International Social Organizations* (Wiesbaden: VS Verlag für Sozialwissenschaften, 2003), http://nbn-resolving.de/urn:nbn:de:1111–2011122532.

59 For a thorough discussion of the JDC's attitude towards French social workers and a comparison with the French reality, see Mandel, "Philanthropy or Cultural Imperialism?"

60 Friedman, "The Road Back for the DP's," 4.

ministrative process behind it. By April 1946, JDC Europe medical director William "Bill" Schmidt took matters into his own hands: He drafted a memorandum that was designated singularly on what he deemed the "proposed mental hygiene project."[61] The memorandum and several other sources[62] help us trace the ways in which the JDC health department saw the problem of mentally troubled children in the spring of 1946.

Over the course of several meetings in the spring of 1946, it became clear that the department saw three major impediments in their work with displaced children and their mental constitution:[63]

1. The number of children that were separated from their parents and as a result suffered psychologically;
2. The issue of unqualified, unsuitable, and overwhelmed personnel that was incapable of coping with the children's behavior;
3. The lack of planning from a psychiatric perspective and now the perceived need for a "psychiatric survey"[64] to measure the problem at hand and devise next steps.

Schmidt summarized the general condition of children in the Joint's care as follows:[65]

> Practically all of the children who receive any kind of service [...] have had a history of separation from, and loss of one or both parents, concealment, falsification, fear, and anxiety, all of which are factors strongly predisposing to more or less emotional difficulties in childhood, adolescence, and adult life.[66]

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61 Schmidt, "Notes on Proposed Mental Hygiene Project", Aoril 29, 1946, ID 670837, JDC Archives.
62 "Memorandum of Informal Meeting Attended by: Dr. Bettina Warburg, Dr. Paul Friedman, Mr. Robert Pilpel May 9, 1946"; Schmidt, "Notes on Proposed Mental Hygiene Project"; "Letter William Schmidt to Paul Friedman," June 8, 1946, JDC Archives; "Memorandum of Informal Meeting Attended by: Dr. Bettina Warburg, Dr. Paul Friedman, Mr. Robert Pilpel May 9, 1946"; Pilpel, "Proposed Agenda for Health Committee Meeting."
63 Friedman, "The Road back for DPs", 2.
64 "Memorandum of Informal Meeting Attended by: Dr. Bettina Warburg, Dr. Paul Friedman, Mr. Robert Pilpel May 9, 1946."
65 For more on the JDC's work in France that in some respects was different from work done in Germany, see *Mandel, "Philanthropy or Cultural Imperialism?"; Vanden Daelen and Hobson Faure, "Imported from the United States? The Centralization of Private Jewish Welfare after the Holocaust"; Hobson Faure, "Shaping Children's Lives: American Jewish Aid in Post-World War II France (1944–1948)"; Doron, Jewish Youth and Identity in Postwar France.*
66 Schmidt, "Notes on Proposed Mental Hygiene Project," 1.

We see here, again, the major worries many of those working with unaccompanied children harbored, both at UNRRA and the JDC: the adverse effects of parental separation and the perceived subsequent surge of fear and anxiety. Schmidt, too, here alludes to the negative impact untreated mental strife in childhood would have on adults: parental separation would predispose children for mental struggle or illness in later life. Thus, mental hygiene services for unaccompanied children now would mean prevention of psychological illness in the future. Besides the lamentable condition many of the children in JDC's care displayed, Schmidt focused his memorandum on unsuitable local staff that "did not understand"[67] the children, in his eyes. He demanded rapid improvement of this care, calling for "special treatment" for the "behavioral problems of the children."[68]

It is fair to say that Schmidt was dismayed with what he found, attributing the lack of care to the untrained and unsuitable local staff. He did have, however, faith in American style social work and psychiatry. In the memorandum Schmidt mentions that the kind of mental hygiene service he envisions should be similar to those administrated by the US Department of Health, without further specifying which services exactly he alluded to.[69] Schmidt was not alone in his displeasure with European social work practices, as has been discussed above.

What was needed now, according to Schmidt, was, "[…] the introduction of certain principles of childcare based on psychiatric knowledge and understanding which would tend to prevent the development of further progress of emotional disturbances in children."[70]

This statement clearly echoes the paradigm of mental hygiene prevalent in the US at the time: the training of childcare personnel in psychiatric principles in order to improve childcare and prevent future mental health issues.

For this, Schmidt envisioned a center in which future care workers would be trained in psychiatry-informed childcare and develop case studies, and where psychosocial personnel would actually diagnose and treat mental illnesses of children.[71] For this task Schmidt suggests employing an American psychiatrist fluent in French and Yiddish, to "initiate the project."[72] Upon Bettina Warburg's recommendation, Paul Friedman was ultimately chosen for the job. Friedman was to perform the exploratory groundwork onto which further steps could be taken. In that, Friedman's enlistment pertained to the mental hygiene approach of "monitoring" a

67 Ibid.
68 Ibid.
69 Ibid.
70 Ibid.
71 Ibid.
72 Ibid., 2.

population. Sources show that Friedman was considered by Schmidt and the health department to be a proponent of mental hygiene.[73] After his first conversation with Friedman, Schmidt's secretary Robert Pilpel noted on March 28 that Schmidt deemed Friedman "very well qualified for the position of psychiatric consultant."[74] Bettina Warburg was elated, and is noted to have said about his qualification: "His thorough acquaintance with the European scene and with French, Swiss and Belgian psychiatrists in particular, together with his understanding of the American point of view, make him unusually well-suited for the undertaking."[75]

Besides the support of Bettina Warburg for the choice of Paul Friedman, another powerful advocate emerged on the scene. In June 1946, Schmidt travelled to London to consult with Anna Freud about the choice of psychiatrist to carry out the plans for a mental hygiene project for Europe's DPs. [76] Schmidt had been impressed with Freud's work in the Hampstead Nurseries and wanted to hear about it and see it firsthand. He was delighted to hear that Anna Freud seconded Bettina Warburg's observation that suitable personnel was rare and needed to be trained. Freud, like her American colleague Warburg (it is unknown whether the two women knew each other personally), was wary of the dearth of trained workers working with the children and is quoted to have said, dryly, "we cannot expect to accomplish a great deal, but that we certainly cannot fail to try to do what we can."[77] Nevertheless, Freud is said to have been optimistic, stating that "a great deal can be done with workers who are intelligent, who want to learn, and who do not have emotional problems of their own to take care of."[78] Even if Anna Freud was not affiliated officially with any of the humanitarian organizations active in continental postwar Europe, she nevertheless not only shaped the conversation about children and war, but also the selection of suitable personnel to deal with it.

On June 28, 1946, after months of negotiations, Dr. Paul Friedman finally made his way to Europe to conduct his survey. Friedman and Schmidt initially agreed he would spend three months in DP camps[79] while Friedman ended up spending six months in Europe, with a break during which he consulted Anna Freud in England,

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73 "Letter William Schmidt to Paul Friedman."

74 "Letter from Robert Pilpel to Dr. Paul Friedman," March 28, 1946, JDC Archives.

75 "Memorandum of Informal Meeting Attended by: Dr. Bettina Warburg, Dr. Paul Friedman, Mr. Robert Pilpel May 9, 1946."

76 "Letter William Schmidt to Paul Friedman," June, ID, 968678, JDC Acrhives.

77 Ibid.

78 Ibid.

79 "Maxwell Luchs to AJDC Paris," June 7, 1946, JDC Archives.

as we will explore later. Bettina Warburg was delighted. She noted, "he is genuinely concerned and desirous of being helpful."[80]

The objective of this short chapter on the administrative process of choosing a psychiatrist for JDC's work in Europe was to trace the genesis of the JDC's groundbreaking decision to employ a psychiatrist. All in all, four major reasons for Friedman's employment could be discerned:

1. The influence of psychoanalyst Bettina Warburg in the JDC health department, as well as the Warburg's penchant for psychoanalysis;
2. The societal climate in the US, especially in New York, where questions of mental hygiene were entering the mainstream;
3. The perceived need of dealing with behavioral problems of children as well as the fact that many children were separated from their parents, which was perceived as highly disadvantageous for their development;
4. The perceived ineptitude of many (European) care workers that did not operate to a standard the American run JDC wished to see.

Having established the genesis of the decision to hire Paul Friedman, we will briefly trace Friedman's own biography which, as it will turn out, predestined him for his work with Europe's DPs.

Dr. Paul Friedman

Who was the man on whose shoulders rested the initiation of JDC's mental hygienic project, and who became the "go-to psychiatrist" for the JDC for years to come? Even though Paul Friedman penned the first comprehensive survey on the psychological constitution of Holocaust survivors, it is very difficult to find reliable information on his life. In the following, the results of years of piecing together sketches of his life through extensive archival research in Israel and the US will be compiled, trying to capture the life and character of the psychiatrist.

Paul Friedman was born in Lublin on June 23, 1899 to Jewish parents.[81] Lublin at the time was part of Congress Poland, or Russian Poland. Under Russian rule, Lublin boasted a big and lively multilingual Jewish community in which Friedman grew up. He graduated from high school in 1919,[82] by which time Russian rule had

80 "Memorandum of Informal Meeting Attended by: Dr. Bettina Warburg, Dr. Paul Friedman, Mr. Robert Pilpel May 9, 1946."

81 Paul Friedman, "Application for Membership for New York Psychoanalytic Society," June 14, 1944.

82 Ibid.

ended (in 1915) and Lublin belonged to Poland.[83] The geopolitical situation of his birthplace certainly shaped Friedman's outlook and practically predestined him to sympathize with the DPs he would later come to analyze: he was fluent in Polish, Russian, Yiddish, and Hebrew since childhood and would extend his linguistic abilities going forward.

The young Friedman concerned himself early with the *conditio humana.* He earned a PhD in philosophy and psychology from the University of Jena in 1924 but was keen on advancing his academic studies, moving to Switzerland to study medicine in Geneva.[84] There, he earned a PhD in medicine in 1929 from University of Berne.[85] He performed several assistantships in psychiatric clinics in Lausanne (1930–1931), Malevoz (1931–33), and the prestigious Burghölzli clinic (1929–1930).[86] Many reputable psychiatrists like Carl Gustav Jung spent time at Burghölzli in Zurich, among them colleagues of Friedman who would later be concerned with the mental rehabilitation of DPs, such as Eugène Minkowski and Hermann Rorschach (the inventor of the eponymous Rorschach test used by Friedman in Cyprus).[87]

In 1933, Friedman moved to Paris where he would start extensive teaching analysis with Dr. Hugo Staub,[88] Dr. Charles Odier,[89] and Dr. Rudolph Loewenstein.[90] On November 3, 1938, Paul Friedman emigrated to New York City.[91] Not much is known about the events surrounding his emigration but it presumably happened because of the rise of Nazism in Europe and the persecution of Jews. In New York

83 Joshua D. Zimmerman, *Poles, Jews, and the Politics of Nationality: The Bund and the Polish Socialist Party in Late Tsarist Russia, 1892–1914* (Madison, Wis.: Univ. of Wisconsin Press, 2004), 16.

84 Friedman, "Application for Membership for New York Psychoanalytic Society."

85 Ibid.

86 All biographical data is derived from Friedman's application to the NYPSA. I would like to extend my gratitude to Nellie Thompson, archivist of the NYPSA, for providing me with biographical material on and by Paul Friedman.

87 For a history on the Burghölzli clinic, see Roy Abraham Kallivayalil, "The Burgholzli Hospital: Its History and Legacy," *Indian Journal of Psychiatry* 58, no. 2 (2016): 226–28, https://doi.org/10.4103/0019–5545.183772.

88 Dr. Hugo Staub (1886–1942) was a lawyer and psychoanalyst from Upper Silesia who became influential in the psychoanalytic scene in the 1920s.

89 Dr. Charles Odier (1886–1954) was a Suisse psychoanalyst, practicing in Paris.

90 Dr. Rudolph Loewenstein (1898–1976) was an American psychoanalyst who practiced in Germany, France, and the United States and helped develop ego psychology.

91 Friedman's *The New York Times* obituary states that Friedman arrived in NYC in 1935, however, his application to the New York Psychoanalytic Society reads 1938. According to Nellie Thompson, archivist at the NYPS, the latter date is the believable one. This impression coincides with my research.

City, Friedman continued psychoanalysis with Dr. Hermann Nunberg, a fellow Pole and pupil of Sigmund Freud.[92]

Like many of his Jewish analyst colleagues, at the age of 39, Friedman was forced to reinvent himself entirely in the "new world."[93] For Friedman, the move to the United States turned out to be a success professionally. Upon his arrival in New York, Friedman ultimately managed to establish networks within New York's prominent psychoanalytic circles, despite initially struggling to pass the New York State Medical Boards.[94] He went on to work at prestigious hospitals of Mount Sinai and Beth Israel in New York City.[95]

In Friedman's early days in the US, we once again encounter the character of Gregory Zilboorg, the dubious psychoanalyst to the Warburgs.[96] Zilboorg and Friedman worked together at the committee for the Study of Suicide, financed by the Marshall Field Foundation. Friedman and Zilboorg got along well,[97] Friedman held Zilboorg in high regards, and went on to work with the committee after his colleague's death.[98]

In his obituary, written by his student Dr. Mortimer Ostow, Friedman was described as an "ebullient personality, [of] contagious enthusiasm, impressive learning, and constant humor" who became the Park Avenue analyst to many rabbis, actors, writers, playwrights, and novelists.[99] Upon closer look it becomes clear that Friedman managed to preserve his lively personality in the face of darkness, which he continuously helped his patients to wrangle: suicide, especially its prevention, became Friedman's professional life theme.[100] Helping patients to find

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92 Dr. Hermann Nunberg (1884–1970) was a Polish psychiatrist, psychoanalyst and student of Sigmund Freud, who worked in Vienna from 1914 and emigrated to the United States in 1933. Like Friedman, he worked for a time at Burghölzli clinic where he assisted C.G. Jung. In 1950, he became president of the New York Psychoanalytic Society.

93 The timing of Friedman's immigration raises the question whether he, too, was supported by Bettina Warburg's fund for the emigration of Jewish analysts. Sources show however that Friedman was listed in the final report of Warburg's ERCI as "financial assistance unnecessary." I would like to thank Nellie Thompson for this information (email December 17, 2021).

94 I would like to thank Nellie Thompson for this information.

95 "Dr. Paul Friedman, 73, Is Dead; Psychiatrist and Suicide Expert – The New York Times," accessed October 14, 2021, https://www.nytimes.com/1972/10/13/archives/dr-paul-friedman-73-is-dead-psychiatrist-and-suicide-expert.html.

96 Chernow, *The Warburgs*, 739.

97 Friedman reviewed one of Zilboorg's publications favorably: Friedman, "Mind, Medicine, and Man. By Gregory Zilboorg, M.D. New York: Harcourt, Brace & Co., 1943. 344 Pp."

98 Friedman, "Application for Membership for New York Psychoanalytic Society."

99 Mortimer Ostow, "Obiturary Dr. Paul Friedman," *The New York Times*, January 1973, 1.

100 In 1967, he edited and translated an anthology on suicide, with pieces by, among others, Sigmund Freud, Alfred Adler, and Karl Molitor: Wiener Psychoanalytische Vereinigung, *On Suicide:*

the will to live, to support them in their search for meaning in life, became Friedman's mission. As Maurice Ostow put it: "Paul's treatment was to persuade [a patient] that it matters whether he lives or dies, and that someone cares."[101] Friedman never lost a patient to suicide. It is perhaps not too far a stretch to assume that it was Friedman's penchant for questions of meaning, besides his own biography, that drew him to investigate the psyche of the people who had survived the catastrophe of the Holocaust, the DPs.

Here, a fascinating parallel emerges with another prominent psychiatrist who concerned himself with the Holocaust, not least because he survived Auschwitz: Viktor Frankl. Frankl (1905–1997) spent three years in four different concentration camps where he lost all his family. Immediately after the liberation, he penned what would become one of the best sold books in the twentieth century in the United States, *Man's Search for Meaning*,[102] in which he details his experience in surviving the camps and supporting other camp inmates psychologically. The premise of his book was that to survive humans needed a reason to live, a reason outside of them that gave their life meaning. According to Frankl, meaning could be found in all of life, even in suffering.[103]

For all of his professional life in the US, Paul Friedman remained devoted to matters of suicide, becoming deeply concerned with the wellbeing of his patients. In the words of the author of his obituary, Maurice Ostrow: "it is the loss of the hope of love that contributes to the suicidal impulse, and in his therapy, [Friedman] attempted to compensate for this loss by taking an active and genuine interest in his patients."[104]

All his life, Paul Friedman[105] remained a practicing Jew. Besides teaching at the New York Psychoanalytic Institute from 1947, he later began teaching rabbinical students in pastoral psychiatry and psychoanalysis at the Jewish Theological

With Particular Reference to Suicide Among Young Students Discussions of the Vienna Psychoanalytic Society-1910, ed. Paul Friedman (International Universities Press, 1967).

101 Ostow, "Obituary Dr. Paul Friedman," 3.

102 Viktor Frankl, Man's Search for Meaning, (London: Rider Books 2008).

103 Viktor E. Frankl, *Trotzdem ja zum Leben sagen: Ein Psychologe erlebt das Konzentrationslager*, 29. Aufl., ungekürzte Ausg, dtv 30142 (München: Dt. Taschenbuch-Verl, 2008).

104 Ostow, "Obituary Dr. Paul Friedman," 2.

105 His publications include: Friedman, "Some Aspects of Concentration Camp Psychology"; Wiener Psychoanalytische Vereinigung, *On Suicide: With Particular Reference to Suicide Among Young Students Discussions of the Vienna Psychoanalytic Society-1910*; 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,"; Paul Friedman, "The Effects of Imprisonment," *Acta Medica Orientalia* 7 (1949): 163–67.

Seminary from 1953 until his death.[106] Deeply entrenched in Jewish mysticism, Friedman was well versed in Jewish literature and religion and spoke Hebrew with his friends: "He could chant traditional texts and prayers accurately – and in moments of nostalgia – he did,"[107] according to Ostrow.

Besides the two surveys Friedman conducted for the JDC in 1946 and 1947, in 1949 he went to Israel for the US Public Health Service to conduct another survey of psychiatric needs of the country with a focus on needs of Holocaust survivors.[108] According to his obituary, Friedman was deeply impressed by his work with DPs. He knew despair and wrestled with feelings of guilt (by his own account), having escaped Europe just in time to avoid persecution by the Nazis. But, "he overcame the pain of pessimism by his unfailing humor," according to his obituary.[109]

Conceptually, Friedman subscribed to the Freudian pessimistic gaze on the destructive tendencies of humans as victims of their more or less suppressed instincts. In his paper on Bridge Symbolism, Friedman wrote: "Modern man nurtures illusions of freedom while he hobbles along in the chains of instinctual taboos [...] He spans rivers that would have defied the imagination, let alone the efforts, of earlier men. [...] but the more elaborate his technical feats, the more tortured his psyche."[110]

Read against this pessimistic conceptual framework Friedman subscribed to, reports on his "ebullient personality" seem remarkable. But, as his obituary stated, "His vitality was his response to the threat of despair."[111] Dr. Paul Friedman died at the age of 73 of a heart attack.[112]

Friedman's interest in questions of meaning, his linguistic capabilities, his own biographical background, his identification with his Jewishness, and his affiliation with the mental hygiene paradigm[113] made him a suitable candidate for the job of charting strategies for mental health support for Holocaust survivors. What is more, he shared mutual acquaintances with Bettina Warburg and moved in the same circles in New York. Again, just like with the members of the IAPSG in UNRRA's case, the enlistment of the psychiatrist was a matter of both disciplinary experience and personal networks.

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106 Friedman, "Application for Membership for New York Psychoanalytic Society."
107 Ostow, "Obituary Dr. Paul Friedman," 4.
108 Ibid.
109 Ibid., 5.
110 Paul Friedman, "The Bridge: A Study in Symbolism," *The Psychoanalytic Quarterly* 21, no. 1 (January 1, 1952): 68, https://doi.org/10.1080/21674086.1952.11925866.
111 Ostow, "Obituary Dr. Paul Friedman," 4–5.
112 "Dr. Paul Friedman, 73, Is Dead; Psychiatrist and Suicide Expert – The New York Times."
113 Paul Friedman, "Curriculum Vitae," May 2, 1949, 1.

6.3 Dr. Paul Friedman's 1946 Survey in Europe

Reflecting on his feelings when the JDC first approached him to conduct a psychological survey with Europe's DPs, Paul Friedman confessed: "I was filled with dread at what I might discover in Europe."[114] Whether Friedman's experience on the ground affirmed his apprehension shall be unpacked over the course of the following pages, which are dedicated to an analysis of the *Report on Survey of Mental Conditions of the Surviving Jewish People*[115] (in the following abbreviated with *Survey*), the product of Friedman's time spent in Europe's DP camps and DP children's homes in 1946.

This document is of paramount importance to the delineation of the psychiatric response to the Holocaust in the immediate postwar years because it is the first of its kind: Paul Friedman conducted the first comprehensive survey on the mental constitution of Jewish displaced children after WWII. Traditionally, in both historic as well as psychiatric literature the advent of the psychiatric discourse surrounding the mental effects of Nazi persecution is dated at least ten years later.[116] Thus, Paul Friedman's work with Europe's DPs can be considered pioneering. Consequently, it is striking that his work has received very little attention in historic research so far. In fact, in German-speaking DP historiography Friedman has been virtually unmentioned. Only very recently has his work been covered in some anglophone research. Friedman and his work with DPs is usually mentioned very briefly, almost tangentially.[117] Recently, Sharon Kangisser Cohen has devoted a paper on his work in Europe 1946.[118] My study, however, is the first research to dive as deep into his work in Europe. Reading the document closely provides a valuable insight into the ways in which Friedman, a representative of the American

114 Friedman, "The Road Back for the DP's," 4.

115 The wording of the title is confusing regarding the target group of Friedman's observations: despite stating that the survey was concerned with "Jewish people" he reports only on Jewish children, which he understands as ranging from 3 to 21 years old, as will be discussed in this chapter.

116 William *Niederland, "The Problem of the Survivor : Part I, Some Remarks on the Psychiatric Evaluation of Emotional Disorders in Survivors of Nazi Persecution"; Mark Dvorjetski, "Adjustment of Detainees to Camp and Ghetto Life and Their Sub- Sequent Readjustment to Normal Society"; Henry Krystal, Massive Psychic Trauma.*

117 A selection of research that briefly mentioned Friedman: Mankowitz, *Life between Memory and Hope*, 152; Susan Slyomovics, *How to Accept German Reparations*, Pennsylvania Studies in Human Rights (Philadelphia, Pa: Univ. of Pennsylvania Press, 2014), 84–86; Avinoam J. Patt and Michael Berkowitz, eds., *"We Are Here": New Approaches to Jewish Displaced Persons in Postwar Germany* (Detroit: Wayne State University Press, 2010), 221; Wyman, *DPs*, 96; Cohen, *Case Closed*, 142.

118 Kangisser Cohen, "'Report on a Survey of the Psychological Conditions of the Surviving Children in Europe,' Dr. Paul Friedman."

psychiatric and psychoanalytic community, related to children who experienced severe trauma and suffering, against the backdrop of his European-trained background.

Thus, the following pages will delineate how Paul Friedman perceived the mental constitution of the Jewish survivors he encountered. Besides attempting to derive insights into his conceptualization of the situation of Jewish children by tracing the practicalities of his survey – where did he go, for how long, and why, as well as regarding the disclosure of his methodology – this chapter describes and analyzes Friedman's gaze onto the displaced children: how did Friedman capture the children's situation? How did he conceptualize the children's mental state? Does he give insights into his own ideas of normative behavior in the wake of trauma? Does he reflect on his own positioning as a well-educated, Polish-American Jew who escaped Europe just in time? How does he position himself regarding the future whereabouts of Jews and immigration to Palestine and the Zionist movement? What, in fact, both practically and ideologically, does he recommend for the mental hygiene of children?

What is more, after the first case study of this study had been dedicated to the psychiatric preparation of the psychological impact of war and persecution on its victims by the Inter Allied Psychological Study Group, it is plausible to inquire whether Friedman actually was aware by the cursory work done by his European colleagues and fellow Freudians.

In his 56-pages typewritten report, Friedman recounts his observations from six months spent in DP camps and DP children's homes in France, Germany, Switzerland, and Poland before going on to offer recommendations for future mental care of Jewish children.[119] Friedman looked at the external as well as internal conditions of the children: he observed their physical condition, their housing, and education, as well as their psychological and emotional state. Friedman further focused on the personnel working with the kids, their everyday dealings with their wards, as well as their training.

It is important to note that, according to the *Survey*, at no point was Friedman involved in the daily care of the survivors. Throughout his stay at the various DP facilities, he occupied the role of the expert observer who, colloquially spoken, did not get his hands dirty with the actual trials and tribulations of working one on one with the displaced children. This, once again, affirms the dynamic that has been displayed before when this study discussed the psychiatrists of UNRRA's IAPSG: the psychiatric expert somewhat detached from the challenges of the

119 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 1.

everyday psychosocial work "in the trenches" but ultimately formulating guidelines for those working on the ground. Nevertheless, the *Survey* is a rich document that provides us with important insight into the conceptualization of the mental state of Jewish child survivors, shortly after the war. It also provides telling information into the administrative landscape of the postwar DP facilities and the ways in which the JDC cooperated with ample local Jewish organizations on the ground. While this will not be the focus of this study, a consideration of the *Survey* should render itself useful for those researchers who are concerned with the JDC's administrative history, its work in France, as well as the multitude of smaller organizations all over Europe that were dedicated to supporting children in their postwar rehabilitation.

The *Survey* is an administrative document drawn up for internal use by the JDC. In it, Friedman dissects in depth his itinerary as well as his findings and recommendations. Two years later, after Friedman had resumed his work for JDC in Cyprus, Friedman reflected on his work with DPs in an article for *Commentary* which has been mentioned above. In the article entitled *"The Road back for DPs"* Friedman reports on his work for the JDC with the gift of hindsight that renders the article reflective, insightful, and refreshingly personal.[120] *The Road* and the *Survey* are the primary source basis of the following pages.

The Logistics

We will now cast a brief look at the logistics of Paul Friedman's 1946 journey before we go on dissecting his psychological findings. Despite being scheduled to stay in Europe for the duration of three months, Friedman ended up staying for six months due to several interruptions.[121] Friedman travelled four European countries to collect the data for his investigation.[122] The focus of my study will be to discuss his psychological findings, independent from the different countries.

Friedman spent most of his time, four months, in France, as JDC Health Director William Schmidt had discussed with JDC Paris director Laura Margolis the need for a rapid setup of a mental hygienic project[123] in collaboration with OSE, the Oeu-

120 Friedman, "The Road Back for the DP's."
121 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 2–3.
122 Ibid., 1.
123 Ibid. To Friedman's disappointment, at the end of his stay in December of 1946 the mental hygienic project in France was "tabled." Ibid, 3.

vre de Secours aux Enfants.[124] Friedman started his investigation into the DPs' psychic constitution in France, where he spent July and August of 1946, and where he returned to repeatedly over the course of his time in Europe. There, he visited multiple different DP facilities: he went to children's homes, oftentimes run by local organization as well as the OSE, monitor schools,[125] vocational guidance facilities, *Hachsharoths*,[126] and medical centers. He further visited with non-Jewish children's homes by way of comparison.[127] In Germany[128] he travelled the American and British zones where he visited DP camps, children's homes, trade schools, hospitals, kibbutzim, hachsharoths and educational structures, cultural and religious institutions, and Volks Universities (informal adult education institutions).[129] While in Germany, Friedman conducted several training activities: he gave a lecture to Jewish DP doctors on "psychosomatic medicine."[130] In addition, he conducted several educational conferences "with professional field workers"[131] from the varying Jewish organizations active in the German DP facilities as well as with DPs themselves, Central Committee[132] members, police, and teachers.[133]

124 The OSE was a children relief agency that was founded in St. Petersburg in 1912 as *Obshchetsvo Zdravookhraneniya Yevreyiev* ("Organization for the health protection of Jews"; OZE) to take care of Jewish people. It relocated to France in the 1930s where it became OSE. During and after WWII, OSE ran several Jewish children's homes in France. For more on OSE, see Doron, *Jewish Youth and Identity in Postwar France*; Hobson Faure, "Shaping Children's Lives: American Jewish Aid in Post-World War II France (1944–1948)"; Katy Hazan and Serge Klarsfeld, *Le sauvetage des enfants juifs pendant l'Occupation, dans les maisons de l'OSE, 1938–1945* (Paris: Œuvre de secours aux enfants: Somogy, 2008).

125 Monitor schools are training schools for social workers and counsellors.

126 Hachsharoths are Zionist training farms that prepare young people for life in Eretz Israel.

127 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 2.

128 In the *Survey* he also mentions planning to give lectures to UNRRA staff on principles of psychiatry. Unfortunately, though, after extensive research in the archives, no sources could be found to learn more about these lectures. Whether these lectures actually happened remains nebulous as he mentions that his plans in Germany were "curtailed." Ibid., 34.

129 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 34.

130 Ibid.

131 Ibid.

132 The Central Committee of the Liberated Jews was a survivor organization founded in June 1945 in the US Zone of Germany. It became the major representative of Jewish DPs in postwar Germany, 1945–1950.

133 Evidently, it would have been highly fertile to have been able to learn more about Friedman's training activities in Germany. Unfortunately, though, as with the UNRRA lectures, no extensive archival research was able to deliver any more information and sources on the matter. Suffice

In Switzerland, Friedman consulted with various individuals concerned with mental hygiene, as well as a mental hygiene program in Monthey, and children's home Pregny in Geneva, which housed survivors from the concentration camp of Buchenwald, and another *cours de moniteurs*.[134] In Poland he visited four children's homes in the Łódź and Warsaw areas.[135]

Friedman did interrupt his journey through the DP camps in September. It is here that we encounter, once again, the person that, if only tangentially for this study, proved to be highly impactful in the emerging discourse surrounding children and war: Friedman spent a week with Anna Freud to "discuss with her the problems raised in connection with the Mental Hygiene Project," as he put it.[136] While Friedman did not specify the nature of these problems, their encounter nevertheless once again proves the impact Anna Freud had not only on the work of UNRRA's IAPSG but also on Friedman's work for the Joint. Friedman travelled to Surrey where he visited a model home, directed by Freud's colleague Alice Goldberger.[137] He consequently invited Goldberger to set up a similar home in the Paris area but these plans never came to fruition. While Friedman's and Freud's encounter was not mandated, at least recommended by JDC Medical director William Schmidt, the two were in agreement about the general direction the rehabilitation of child survivors was to take. Friedman and Freud both reasoned that the deprivation of family attachment and the traumatizing experience of war and persecution could have lasting adverse psychological impact if unattended, and could have grave societal consequences in the future.

It is worth pointing out that at no point did Friedman provide the reader with insight into the methodology with which he conducted his *Survey*. It is to be assumed that he conducted interviews with care workers as well as children and

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it say that the findings he gathered during his interactions with the people he trained were incorporated into the *Survey*.

134 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 29.

135 Ibid., 53.

136 Ibid., 2.

137 Alice Goldberger was a Jewish refugee from Berlin who was interned as an "enemy alien" by the British on the Isle of Man after having escaped to London in 1939. Anna Freud aided her release from the internment camp and employed her as a superintendent at the Hampstead War Nurseries. In Berlin, Goldberger had directed a large children's home for underprivileged children. In 1945, Goldberger became the director of a model children's home at an estate in the area of Surrey, Weir Courtney, where she, together with psychoanalyst Oscar Friedman, took care of survivor children. It is there that Friedman visited her. Cf. Kangisser Cohen, "'Report on a Survey of the Psychological Conditions of the Surviving Children in Europe,' Dr. Paul Friedman," 102; Shapira, *The War Inside*, 78.

that he spent time observing the everyday lives in the different facilities. This information would have been useful to further understand the ways in which Friedman generated his knowledge.

The title of the *Survey* is misleading: *Survey of Mental Conditions of the Surviving Jewish People.* Despite it implying that he would concern himself with Jewish DPs of all age, Friedman informs the reader in the first paragraph that he would focus on the condition of children.[138] Thus, the question is, who Friedman considered to be children. It turns out his understanding of children exceeded that of many organizations:[139] according to the *Survey,* Friedman considered three- to 21-year-olds as children.[140] In general, however, the category of age recedes into the background in his analysis. He, like most of welfare workers, mentions the difficulty of age determination, as many children were either mature beyond their age due to the skills they had to acquire in order to survive or looked younger due to emaciation and prolonged periods of malnourishment and hunger. Language comprehension problems added to the difficulty of age termination, too.

Friedman does, however, mourn the lack of "age differentiation" in many of the facilities he visited. There, he differentiates between "mental" and "chronological" age groups[141] and insinuates that a clearer differentiation would have been desirable.[142] In fact, he worries that the fact that "children of varied ages were thrown together" might have an adverse effect "on their future development."[143] Here, he concedes that the grouping of the children according to age would have been desirable in his eyes. In fact, the amalgamation of different age groups might have a negative effect on the children's development. He does not give any more information on that matter.

Apart from that, the category of age remains only tangentially discussed in his investigation. In the psychological analysis of his *Survey* Friedman does not integrate considerations of age or his ideas of age-appropriate behavior. This is some-

138 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 1.

139 UNRRA considered children to be individuals below the age of 18. Cf. Buser, "'One of the Greatest Tragedies of the War': The Search for Displaced Children in the Aftermath of World War II," 54.

140 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 6.

141 Ibid., 8.

142 The use of the notion of "mental age" presumably harks back to intelligence testing, introduced by Alfred Binet (father of the Binet intelligence test) in 1905. Mental age in relation to intelligence testing was used to determine a person's intelligence quotient. Cf. "Mental Age | Psychology | Britannica," accessed December 21, 2021, https://www.britannica.com/science/mental-age.

143 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 6.

what striking, as generally in the postwar years welfare workers were keen on restoring the children to their ideas of "childhood," an understanding of childhood that was entangled with constructions of age-appropriate behavior. Whether Friedman abstained from these kinds of meditations due to his understanding of age as a social construct, because he did not have enough data or because he simply did not deem it important, must remain in the realm of speculation. Kangisser Cohen criticizes that he did not always differentiate between the different age groups, as she assumed that more information on the children's age "may have shed light on how reactions were affected by the child's age at the time of the persecution."[144] This thought, however, implies that Kangisser Cohen, too, relies on an unambiguous understanding of age as a static characteristic of a person.

I argue though, that the disruption of the war years was simply too intense and formative for the "children" to look at their behavior through the normative lens of age. If one understands age as both a biological and a socially constructed category, one must conclude for the immediate postwar period that both aspects had simply been too distorted in the children's development by the war years. The children's physicality had been oftentimes deeply strained by malnourishment, and their psychological adaptation to adverse circumstance had made them mature beyond their years. Survival, in fact, oftentimes depended on age-adaptation strategies, as Antoine Burgard, too, has convincingly shown in his work on age assessment of child survivors in the postwar years.[145] Ernst Papanek, the Austrian psychoanalyst and educator who worked with OSE in France and directed one of the children's homes Friedman visited, Montmorency, is quoted to have observed, drily: "I never know, how old a person is [...]. They "adjust" age to purpose."[146] Friedman must have been aware of this strategy. Potentially, this was one of the reasons Friedman did not dwell on the matter of age in the *Survey.* Thus, it is impossible to learn more about the question of whether he suggested specific rehabilitation measures for different age groups, apart from the fact that he proposes that older children should be encouraged to take care of the younger children.[147]

The children Friedman encountered in the various DP facilities were a heterogenous group: it consisted of full or half orphans of deported and/or deceased parents, children who survived concentration camps, who were placed in gentile

144 Kangisser Cohen, "'Report on a Survey of the Psychological Conditions of the Surviving Children in Europe,' Dr. Paul Friedman," 94.

145 Burgard, "Contested Childhood."

146 Quoted in: Zahra, *The Lost Children Reconstructing Europe's Families After World War II*, 8.

147 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 8.

"Germanizing" institutions, from gentile foster parents or other hiding places.[148] Especially in France, he also encountered children who were placed in homes by parents for economic reasons or misconduct by the mother.[149]

After we have established the logistical framework of the *Survey* we will examine Friedman's psychological findings and reflections on his positioning in depth.

"All of us Were Filled with a Sharp (…) Sense of Guilt"[150] – Reflections on Ignorance

Despite the extensive guideline discussed in part one of this study – the *Report* that had been compiled by UNRRA's *IAPSG* – Paul Friedman entered the DP camps wholly unprepared. In fact, he was aghast with what he perceived as lack of psychiatric planning. He took a hard line on recent welfare practices, beginning his reflections in "The Road back for DPs" with the following damning statement:

> It seems altogether incredible today that when the first plans for the rehabilitation of Europe's surviving Jews were outlined, the psychiatric aspect of the problem was overlooked entirely. Everyone engaged in directing the relief work thought solely in terms of material assistance to the DP's. It took months of first-hand practical experience before anyone would acknowledge a similar, equally pressing need for psychological assistance.[151]

Friedman clearly had not been informed about UNRRA's attempts at doing just what he mourned a lack of (UNRRA was the JDC's umbrella organization and had to report to it): preparing for the psychiatric aspect of displacement by compiling the *Report on Psychological Problems of DPs*. Just like the *Report*, Friedman was keenly aware that rehabilitation had to be much more than just material aid. Nevertheless, when he encountered the first DPs in summer of 1946, he did so on the basis of a conceptual tabula rasa.

How Friedman explained this lack of planning shows that he is deep critical of his profession and perhaps, ultimately, deeply self-critical. Freudian psychoanalyst that he was, he justified the perceived ignorance of his profession with an active

148 Ibid., 5–57.

149 See Mandel for a closer examination of the children's homes in France: Mandel, "Philanthropy or Cultural Imperialism?"

150 Friedman, "The Road Back for the DP's," 2.

151 Friedman, "The Road Back for the DP's," 1.

defense mechanism.[152] The ignorance, according to Friedman's interpretation, was to cover feelings of guilt:

> It [not being concerned with the psychiatric suffering of survivors] was not due—let me hasten to explain—to any lack of devotion or interest. It was rather that all of us—I do not by any means exclude myself—were filled with a sharp and pervasive feeling of guilt towards those very victims we were trying to help.[153]

Seemingly harking back to the fact that, like him, many Jewish European psychiatrists and psychoanalysts had successfully emigrated to the US, he goes on chastising his colleagues, and himself, for their ignorance, writing: "We were safe in America while our brothers in Europe were undergoing the cruelest of martyrdoms."[154] Friedman's own position, the vantage point with which he entered the Jewish DP facilities, becomes very clear here: he did not just investigate the Jewish DP children's conditions as a psychoanalytically trained psychiatrist, he looked at them as a fellow European Jew who, unlike the children and their parents, had been able to escape the horrors unfolding in wartime Europe. To him, Jewish DPs were martyrs and he was a "guilty" escapee.

In adding to the explanation for the perceived ignorance of the psychiatric community, Friedman employed a common way of making sense of it: a Darwinist idea of survival of the fittest. He criticized: "We accepted the theory that the very fact of survival was evidence of physical and psychological superiority—without looking too closely at the implications of this statement, which dishonored millions of martyred dead."[155]

In fact, Friedman was not alone in the idea that only the physically fittest had survived. Those who endured the horrors were the strong and resilient ones, while those who were not had perished: this was the conviction of many immediately after war's end.[156] Friedman recognized that this was not only too short-sighted but also unfair to those who did not survive. It was a trivializing and rationalizing way of explaining one's own lack of reaction and, ultimately, a veneer veiling deeper feelings of guilt.

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152 Both Sigmund and Anna Freud worked extensively on the concept of defense mechanisms (*Abwehrmechanismen*): defense mechanisms are unconscious processes that protect the ego from anxiety-producing thoughts by concealing them with alternate emotions and/or rationalizations. Cf. "Defense Mechanism | Definition, Examples, & Facts | Britannica," accessed December 21, 2021, https://www.britannica.com/topic/defense-mechanism.

153 Friedman, "The Road Back for the DP's," 2.

154 Ibid., 3.

155 Ibid., 2.

156 Cohen, *Case Closed*, 138.

Friedman's reflections on the ignorance of the psychiatric community seem apt because he skillfully lays bare the mental shortcuts that were employed to rationalize one's indifference. He concluded: "None of us knew then what we might expect to find in the ruins of Europe, and it was all too easy, especially for the psychiatrist, to think of Europe as a huge, unattended hospital for neurotics, psychotics, and the hopelessly insane."[157]

Thus, Friedman dreaded what he would find in Europe. The sight he encountered once he had made his way to Europe, however, painted a more nuanced picture, as we will explore next.

"No Monsters, No Savages, No Psychotics"[158] – Friedman's Findings

Upon his return from his two journeys to Europe in 1946 and 1947, Friedman concluded that his dark forebodings about the condition of the DPs had been counteracted by empiricism. He reported: "They all gave evidence of an incredible physical and psychological resilience [...]. I found a situation that was well-nigh miraculous in view of the children's past experiences. Here were no monsters, no savages, no psychotics."[159]

That did not mean, though, that Friedman considered the mental constitution of displaced children as free from challenges. Despite his overall positive impression of the children's resilience,[160] the children he had surveyed were in need of emotional care and had "serious emotional problems." And, Friedman went on, "they would have been distinctly abnormal not to have had them."[161]

We can glean a lot from these two quotes. Firstly, despite his triumphalist Darwinist view on those who survived and his dark forebodings of their state, Friedman was surprised about the overall stable constitution of the DPs he encountered, he considered it even "miraculous." Secondly, Friedman conceded that despite the little psychiatric, pathological cases he encountered, there were "emotional problems" rampant. But that, according to Friedman, was "normal." In this, what I call reverse normativity (calling "normal" what is usually attributed to "health"), Friedman echoed a stance many psychiatrists took. In the words of fellow Jewish psy-

157 Friedman, "The Road Back for the DP's," 2.
158 Ibid., 4.
159 Ibid.
160 For a historical contextualization of resilience, see Introduction of Leo van Bergen and Eric Vermetten, eds., *The First World War and Health: Rethinking Resilience*, History of Warfare, vol. 130 (Leiden; Boston: Brill, 2020).
161 Friedman, "The Road Back for the DP's," 4.

chiatrist and Auschwitz survivor, Viktor Frankl: "An abnormal reaction to an abnormal situation, is a normal reaction."[162] Showing signs of emotional and physical distress after an exceptionally dangerous situation was in fact a sign of psychic health. Not showing signs of emotional distress, or any emotion at all, was considered abnormal and thus pathological, as we will discuss later.

So, what were, according to Friedman, these "emotional problems"? The following pages will highlight and contextualize his major findings.

Affective Anesthesia

After coming down hard on himself and his colleagues for their lack of interest, Friedman goes on to present the reader of *Survey* and *The Road* with his psychological analysis of the children's behavior in a nuanced and empathic fashion.

Friedman precedes the account of his observation with a plea to break with normative psychiatric categories when dealing with the survivors. He writes: "The familiar categories in psychopathology would be fallacious."[163] The necessity for transcendence of regular pathological norms in the judgment of the children's behavior is convincingly displayed in the major phenomenon he encounters again and again: "Affective anesthesia" or "emotional rigidity."[164] The children could be eager in their learning, and vivacious in their playing, but when it came to emotions, there was … nothing. Friedman writes: "Each one of them told me the most tragic and bloody stories in a tone of the utmost detachment, even nonchalance, as though they were telling me about some very unimportant event, something that had happened long ago and to someone they hardly knew."[165]

Conventional diagnostics would have classified the children's behavior as pertaining to psychosis, precisely schizophrenia. But Friedman did not concur. He was able to jettison conventional diagnoses and adapt his assessment to the situation. For Friedman, emotional numbness was the result of a "sharp and overpowering trauma."[166] Again, Friedman employs the psychoanalytic concept of defense. For him, the emotional numbness the children displayed was a psychological survival mechanism because the children "had been forced to repress their emotions so that a state of non-feeling ensued as a defense against the repeated traumatic ex-

162 Frankl, Lasch, and Kushner, *Man's Search for Meaning*, 28.
163 Friedman, "The Road Back for the DP's," 7.
164 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 11.
165 Friedman, "The Road Back for the DP's," 5.
166 Ibid.

periences."[167] Or, as a welfare worker he interviewed put it, "they carry deep inside them a cold panic."[168] A panic so great that it became unbearable in the everyday, so that it had to be covered by seeming emotional indifference. But, according to Friedman, that was a "pseudo-indifference."[169] It was "emotional anesthesia."

The term "emotional anesthesia," or "affective anesthesia," was not original to Friedman. It was coined by French psychiatrist Dr. Eugène Minkowsky (1885–1972) who drew from his own experience in WWI and his work with surviving Jewish children in 1946. Friedman and Minkowsky were acquaintances and shared a similar background: they were both Polish Jews who had lived in France but had survived the war. Both of them had trained at the Swiss Burghölzli clinic under C.G. Jung in the 1920s. After the war, Minkowsky worked with OSE in France, where the two met.[170]

In actual fact, the issue of emotional numbness displayed by DPs but also other refugees that had experienced "trauma" became somewhat of a trope in the years after WWII, as Baher Ibrahim has outlined convincingly.[171] Some called it "emotional anesthesia," others simply called it "apathy." I argue the mere observation of an emotional reaction subsumed under the term "emotional anesthesia" evolved over the years to the negatively connoted term of "DP apathy"[172] the longer DPs remained in camp facilities. For Friedman and Minkowsky, the term "affective anesthesia" was devoid of the negative connotation the term apathy was attached with later.

Ibrahim argues that in later years that the term "DP apathy"[173] was less a clinical observation and more "driven by concerns of the relief agencies."[174] The term apathy implied features that were detrimental to the management of a DP camp

167 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 17.

168 Friedman, "The Road Back for the DP's," 6.

169 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 11.

170 Eugène Minkowski, "L'anésthesie Affective," *Annales Médico-Psychologiques*, no. 104 (1946): 80–88; Eugène Minkowski, "The Psychology of the Deportees," *American OSE Review* 4 (Summer-Fall 1947): 17–23.

171 Ibrahim, "Uprooting, Trauma, and Confinement: Psychiatry in Refugee Camps, 1945–1993," 107–11.

172 Ibid., 107.

173 Eduard Bakis, "The So-Called DP-Apathy in Germany's DP Camps," *Transactions of the Kansas Academy of Science* 55, no. 1 (1952); HBM Murphy, ed., "The Camps," in *Flight and Resettlement* (UNESCO, 1955), 58–65.

174 Ibrahim, "Uprooting, Trauma, and Confinement: Psychiatry in Refugee Camps, 1945–1993," 109.

and the quick rehabilitation and resocialization of the DPs as citizens in democratic societies: these features were loss of self-control and a lack of agency.[175] Following the lead of Mathew Thomson and Peter Gatrell it is worth pondering for a moment what "apathy" could mean with regards to the welfare agencies objective to support the DPs in becoming active citizens in democratic countries: not much good.[176] As we have established earlier, the goal of most of the psychiatrists and welfare agencies working with DPs was to prepare them to reintegrate into peaceful societies, to become active citizens. Listlessness and passivity – apathy – seemed counter to that goal.

Harking back to Friedman's and Minkowsky's understanding of affective anesthesia it is likely that they, contrary to later interpretations in the 1950s, did not consider the phenomenon to be dangerous to the cohesion of societies, but rather used it solely to describe the DPs' emotional reaction (or lack thereof) to what Friedman described aptly as "years of benumbing terror."[177] Nevertheless, it has been useful to briefly outline the evolution the perception of that phenomenon took along with its increasing political dimension.

Friedman's gaze onto the children's emotional state can be described as relatively empathic. His perception of their emotional state as a result of trauma rather than laziness or defiance raises an important question: how did Friedman conceptualize what had happened to the children? Did he know of the extent of what we today call genocide? Did he know not just about labor camps but also extermination camps and deportation? The answer is he knew, surprisingly, a lot. He wrote: "The survivors of the concentration camps, and especially the Jews, had been subjected to a psychological terror unprecedented in world history."[178] We can glean from this quote that Friedman was aware of the unparalleled nature of the torture perpetrated by the Nazis. Whether he knew all the specificities of the horror is unclear. Lurking in the background of my study remain the questions of how much was known about the extent of the genocide, when and by whom. The question cannot be answered conclusively in this study and is also not the central question. However, Friedman's statements on the nature of what had happened to the children show us a different perspective than that of UNRRA's *IAPSG*. The authors of the *Report on psychological problems of DPs* saw the major issue of DPs as displace-

175 Gatrell, "Population Displacement and Mental Health after the Second World War [Short Unpublished Version)," 10.

176 Thomson, *Psychological Subjects*; Gatrell, "Population Displacement and Mental Health after the Second World War [Short Unpublished Version)." I would like to thank Peter Gatrell for his generous provision of the unpublished material.

177 Friedman, "The Road Back for the DP's," 5.

178 Ibid., 7.

ment, of being uprooted. Friedman, writing two and a half years after the *Report* – after the war had ended and welfare workers had listened to the witness stories of the DPs – had a decidedly different view on what had happened. To him, the major hurt was psychological terror and abandonment. Friedman writes: "One can epitomize the Jews' experience in the concentration camps by a single statement: they were abandoned by the others, and then they abandoned themselves."[179]

Friedman refers to a book that had enlightened him on the Jewish experience in the camps, *Le Jour de Notre Mort* by David Rousset.[180] Friedman reports: "Beneath everyone—the political prisoners, the misfits, the criminals, the degenerates—stood the Jews. They were the plebeians of the entire structure, despised and mistreated not only by the Nazis but by all the other prisoners."[181]

According to Friedman, survival in the concentration camps was only possible if one was able to make drastic internal adjustments, i. e. leaving any sort of morale by the wayside and regressing onto primitive social behavior. Freudian that he was, he referred to Freud's explanation of the drives and their regression that was necessary for culture and the peacetime.[182] We will dive deeper into Friedman's psychoanalytical explanation of what happened in the DP camps in the chapter on his report on Cyprus (see Chapter 6.3). For now, suffice to say Friedman was aware of the hitherto unknown dimensions of suffering that had been perpetrated by the Nazis and he did apply his own Freudian framework to comprehend the incomprehensible. To Friedman, the major hurt was a deep sense of abandonment that was instilled in those who had survived the concentration camps.

However, not all of the children were concentration camp survivors. As we have established earlier, the majority of the children that had been deported to the extermination camps had tragically died because they were considered too young to be of any use to the Nazis. Thus, Friedman was also confronted with a lot of children who had suffered differently.

Just like his psychiatrist colleagues of the *IAPSG* and Anna Freud, he saw another major violation in the separation of families and the issue of unaccompanied children. Most of those children he encountered were orphans. However, those who had at least one parent left, were, in Friedman's eyes, far better off. Friedman writes: "One cannot overemphasise (sic) the importance of this factor [of having at least one surviving parent] and the difference it makes in the development of the

179 Ibid.

180 David Rousset (1912–1997) was a French left-leaning writer and political activist. He survived the concentrations camps of Neuengamme and Buchenwald. After the war he published extensively on his experience there.

181 Friedman, "The Road Back for the DP's," 7.

182 Ibid.

emotional life of the children no matter how sordid the circumstances under which the families lived."[183]

Sadly for the researcher, he does not spell out specifically which emotional components he attributes to having at least one parent left. However, he reports that while kids with one parent show a lot of independence because they often had been the caretaker of the family when the parent had been incapacitated, they nevertheless appeared not as damaged as kids, who had to struggle entirely on their own.

Generally, Friedman perceived the children witnessing their parents violated in any form as highly damaged. He states: "It goes without saying that the restricted atmosphere of the camp life where grownups are reduced to a state of complete infantile dependency, offers a very unfavorable milieu for the emotional development of the children."[184]

Friedman, too, perceived parents to be the stalwarts of a sense of security, which was perceived to be critically important for healthy development. In that, Friedman echoed Anna Freud and the authors of the *IAPSG* with their emphasis on the primate of the nuclear family as the decisive container in which healthy development could take place.

The emotional phenomena described above can be generalized for all four countries he visited. Friedman did highlight, however, that the situation in Germany was generally worse than in the other countries.[185] There he visited mostly DP camps, which were in bad condition: He mourned the lack of sanitary cleanliness, heat, plumbing, and electricity, as well as the fact that many of the camps were utterly overcrowded due to a steady stream of "infiltrees" arriving. In these circumstances, he concedes, there was very little to no room for psychological work. He recounts a conversation with a camp worker who conceded that he had "no time or energy left to think of psychological screening or testing."[186] The linguistic differences within the heterogenous DP camps did the rest, according to Friedman.

The general overstretching of welfare workers in the camps created a vacuum that could be filled by Zionist *madrichim*, especially in Germany. For those, Friedman finds critical words, describing them as "possessive."[187] He further mourns their lack of training. He reports, "They were young, devoted, self-sacrificing,

183 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 44.
184 Ibid., 45.
185 Ibid., 34–55.
186 Ibid., 41.
187 Ibid., 42.

but for the most part untrained and inexperienced."[188] The *madrichim* did not condone any influence other than theirs over the children, which caused tensions with JDC staff. Without explicitly calling it that, Friedman is critical of the influence the *madrichim* yielded over the kids, worrying that they would try to estrange children from possible surviving parents.[189] Here, again, Friedman's support of familial ties over ideological ties becomes visible. We will discuss his take on ideology in rehabilitation later.

The Difficulty of "Unlearning" Behavior

After we have discussed the major emotional phenomenon Friedman witnessed – affective anesthesia – we will now turn our attention towards the ways in which Friedman witnessed and described the behavior of the children he encountered.

Generally speaking, Friedman was of the opinion that all of the children had acquired capabilities which at the time served them to survive but that now posed a problem in peacetime for social interactions.[190] Present day psychological linguistics would call what Friedman advocated for "unlearning." According to Friedman, the instinct of self-preservation "has become so dominant"[191] that it posed difficulties within social interactions now. The tools the children had to acquire in order to survive were now detrimental and should be unlearned to foster societal cohesion: the kids now had to learn to live together again.[192]

This was especially obvious in the behavior of children that had survived concentration camps. He described a group of boys who had survived Buchenwald[193] as "distrustful, defiant, cynical, and refus[ing] to submit to authority."[194] Those boys' behavior posed extreme challenges for the oftentimes untrained personnel of the children's homes. The boys were indomitable and influenced the cohesion in the children's home to a detrimental effect. Even though groups of children from concentration camps had survived together they seemed "homogenous only to the outside world."[195] In fact, according to Friedman, their relationships were fraught. There was "hardly a trace of cohesion, comradeship or friendship

188 Ibid.
189 Ibid.
190 Ibid., 17.
191 Ibid.
192 Ibid., 19.
193 For a closer look on the Buchenwald Boys see Chapter 4, "Homes of Hope," in Doron, *Jewish Youth and Identity in Postwar France*, 162–98.
194 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 11.
195 Ibid., 12.

to be found among them."[196] The only thing that seemed to unite them was a shared sense of "resentment and hostility to the outside world."[197] They had carried what they had learned in the concentration camps with them into the postwar time. Friedman observed: "[…] either consciously or unconsciously, they copied the system under which they had suffered."[198]

The learned behavior also extended to the children's fear of never having enough, whether it was possessions or, most importantly, food. Friedman shares an anecdote that is deeply telling about the emotional state these boys were in and the behavior the welfare staff was faced with:

> One day after a meal a boy went into the kitchen, asking for another helping. When it was refused, he hit the person in charge with a heavy object, so that she had to be taken to the hospital in desperate condition. On another day when they had received the same dish for dinner as they had had the day before, they decided to throw the food at the wall, claiming that they had been mishandled enough by the Nazis and would not stand for such treatment from people who had jobs just because of them and who ought to comply with their demands.[199]

The kinds of behavior some of the children in the JDC's care displayed called for well-trained, empathic, patient, and skilled welfare workers. But of those, as we have established earlier, was a heavy dearth. Friedman recommended the concentration camp "gangs"[200] to be split up as soon as possible to avoid them perpetuating their shared behavior any longer. He also thought the breakup of these groups to be imperative to secure a positive "future rehabilitation," as he put it.[201]

The question of what to do with children who had survived in gangs, the so-called "wolf-children,"[202] was a contentious one in the postwar years. In order to better understand the discourse on the children's whereabouts we will briefly widen our perspective to approaches other than those of Friedman.

Tara Zahra has illustrated how opinions differed on the question of whether children who ganged together should stay together or whether they should be separated to be reunited with their families or be put in foster homes. As we have discussed before, the prime paradigm heralded by UNRRA and the likes of Anna

196 Ibid.
197 Ibid.
198 Ibid.
199 Ibid.
200 Ibid.
201 Ibid.
202 According to Tara Zahra, American freemason Alice Bailey coined the term "wolf children" for children who were roaming Europe unaccompanied; see Zahra, "Lost Children," 46.

Freud was familialism – the reunification of families. But there were other voices, too, that challenged the paradigm of the nuclear family, whether there were surviving parents or not. Austrian educator Ernst Papanek[203] for instance argued at the other end of the spectrum. He, too, worked in French postwar children's homes, where he presumably encountered Paul Friedman. For Papanek, children who had survived together should rehabilitate together in peacetime and form a "therapeutic community." According to Papanek, the solution of family reunification was not realistic for Jewish survivors. He emphasized the special needs of Jewish children whose traumatic experiences had often been due to the incapacity of their families to protect them. Papanek argued:

> The children described by Anna Freud had [...] never experienced situations in which they could not rely on their parents and find help and shelter with them. Child refugees from Nazi persecution presented quite a different picture. [...] The refugee children in France [...] had left behind them families that in hours of danger had been unable to offer them any protection or security. These children felt rather than they had now come to an environment less terrifying, more capable of managing its problems – and consequently more protecting.[204]

As a consequence of this observation, Papanek called for the installation of a long-term therapeutic community in which Jewish children could recover together from the experienced "mass neurosis,"[205] as he called the persecution under the Nazis. Papanek opined: "Group treatment is always indicated where mass neurosis has been created by a trauma suffered by many in common with many."[206] In effect, Papanek called for the establishment of long-term collective living facilities in which children, who had suffered together, could rehabilitate together. Of course, it could be argued that these kinds of collective living arrangements for Jewish children was reminiscent of Zionist, socialist living structures that were instated in

203 Ernst Papanek (1900–1973) was an Austrian educator and psychoanalyst whose work as teacher and humanitarian, not least with French DP children, has become somewhat legendary. After Austria's 1938 *Anschluss* Papanek fled to France with his wife Helene, where they directed several children's homes for OSE. He made it to the US in 1940 where he dedicated the rest of his life to training social workers and caring for refugee children. His papers, housed among others at the New York Public Library, have been studied for this thesis. Frank Jacob, *Ernst Papanek and Jewish Refugee Children: Genocide and Displacement* (De Gruyter, 2021), https://doi.org/10.1515/9783110679410.

204 Ernst Papanek, "The Child as Refugee: My Experiences with Fugitive Children in Europe," in *The Nervous Child*, vol. 2/4 (1943), 302.

205 Ibid.

206 Ernst Papanek, "The Montmorency Period of the Child-Care Program of the OSE," in *Fight for the Health of the Jewish People (50 Years of OSE)* (New York, 1968), 119.

many of the DP camps, as we have established earlier. These collective Jewish living situations boasted the potentiality of inculcating the children with a certain ideology, be it Zionist or other ideologies. This, however, seems not to have been Papanek's prior objective in suggesting the envisioned living arrangements.

The short excursion on the position of Ernst Papanek was to show the extent to which the fate of unaccompanied survivor children was contentious in the postwar years and that there simply were no simple solutions. Friedman, however, remained with his conviction that kids from concentration camps should be separated. While he does not address this specifically, it can be assumed that he saw the close knit "gangs" of children as dangerous for the coherence of communities and societies later, because they would not conform to societal norms due to their learned survival strategies which they would carry, as a group, into peacetime. This could endanger peaceful coexistence in communities. In that, Friedman's adherence to the mental hygiene paradigm with its view towards ensuring the "health" of communities once again becomes visible. Friedman does not draw a position regarding the reunification of the family. While the family was the central social structure in UNRRA's psychosocial strategy, Friedman does not display a position on the contentious question of the reunification of families. This is presumably caused by the fact that most of the children he encountered were orphans or were given into children's homes because the parents were deemed incapable of caring for their children.[207] Nevertheless it can be said that the social structure of the family played a much smaller role than in UNRRA. Friedman certainly did not view the biological family as the norm that needed to be reinstated for the children he surveyed; for him, the reintegration into a community was more prominent. Whether that was contingent on the children's particular situation, however, remains unclear at this point.

Friedman goes on listing other behavioral anomalies that will be discussed here only shortly, as they were not necessarily the norm according to him. In his account of those behavioral anomalies Friedman proved to be repeatedly taken aback by the ways in which the welfare workers in the homes and camps treated the children. Especially among younger children (no ages given) he lists bedwetting, soiling, feeblemindedness,[208] and retardation as relatively common.[209]

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207 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 5–57.

208 Feeblemindedness is a historic term that is no longer used. It was often used in relation to eugenics. It described deficiency in intelligence. Today, this phenomenon would be subsumed under intellectual disability. "Feeblemindedness | Britannica," accessed December 22, 2021, https://www.britannica.com/science/feeblemindedness.

Soiling and bedwetting especially were sanctioned with extremely strict and apathetic measures by the staff: children were woken at all hours of the night to go to the toilet or were punished by being excluded from much-anticipated leisure activities.[210] Friedman recounts the story of a small three-year-old boy whose mother had returned from a concentration camp and was sent to a tuberculosis sanitarium.[211] The boy consequently was inconsolable, cried all day long, and proceeded to repeatedly soil himself. Friedman reports: "Each time he soiled himself, he was punished by being sent to bed for the rest of the day."[212] Stories like these are recounted repeatedly in his *Survey*, illustrating the malpractice done by many welfare workers, even by the standards in 1946. But it also displays the empathic stance Friedman took in light of the children's fates.

In terms of actual psychological pathologies, Friedman remains reserved. In fact, he mentions very few cases of actual psychosis, and only three cases with a manifest pathology.[213] Cases of psychosomatic conditions such as headaches, heart palpitations, and dysmenorrhea (period cramps) were visible, especially with girls who survived the camps.[214] One of the reasons why psychoses remained undetected in Germany might have been because one sought to avoid transferring Jewish patients to German psychiatric wards.[215] While Friedman's investigation was focused on children, he mentions the cases of several Jewish adults in Germany to highlight their difficult situation. Some of them were suspected by a German psychiatrist, a former member of the NSDAP. Friedman concurred with the UNRRA staff that this situation was untenable and called for specific wards for Jewish patients with Jewish doctors. Friedman recounts the incidence of a Jewish patient in a German mental hospital that was victim to continuous antisemitic attacks[216] by

209 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 14–15.
210 Ibid.
211 Ibid., 15.
212 Ibid.
213 Ibid., 16.
214 Ibid., 13.
215 Ibid., 48.
216 For a case study on a German psychiatric hospital that also treated a few Jewish DPs, see Franz Eduard Peschke, *Ausländische Patienten in Wiesloch: Schicksal und Geschichte der Zwangsarbeiter, Ostarbeiter, "Displaced Persons" und "Heimatlosen Ausländer" in der Heil- Und Pflegeanstalt, dem Mental Hospital, dem Psychiatrischen Landeskrankenhaus Wiesloch und dem Psychiatrischen Zentrum Nordbaden*, Abhandlungen Zur Geschichte der Medizin und der Naturwissenschaften, Heft 103 (Husum: Matthiesen, 2005).

both doctors and fellow patients and advocated for the patient to be removed instantly.[217]

Furthermore, Friedman recounts that the diagnosis of feeblemindedness was widely disseminated; some directors of children's homes had reported up to 20 % of the children being feebleminded.[218] Friedman, however, doubted their diagnosis, conceding: "There was a tendency to label children with destructive tendencies and other behavior difficulties, as well as those with speech defects, feebleminded […]."[219] Several of the children Friedman encountered had stopped speaking ("hysterical mutism" was used to describe the inability or unwillingness to speak[220]) after they had lost their parents. The cure for this phenomenon, according to Friedman, lay in continued loving attention. Friedman recounts the story of an orphaned girl, aged four, who was given to a pianist foster mother who gave the child piano and singing lessons. Friedman writes: "The child's speech and hearing were soon restored."[221] With this example we see not only how the power of music in healing but also the power of continued loving attention and understanding that was lacking in so many children's homes, according to Friedman, which was the cure of most of the phenomena displayed in the children's behavior. As Friedman put it later, when he was interviewed upon his return from Europe: "Their need for love and warmth, for sympathy and human understanding is tremendous."[222]

Friedman put a lot of emphasis on the skill of the care workers dealing with the children. As mentioned repeatedly before, Friedman was not happy with what he found. For the most part, he encountered untrained staff that was wholly unqualified and simply overwhelmed with the task at hand. In line with the envisioned idea of the mental hygienic project that was to train suitable staff, he called for the professionalization of childcare and the thorough training of those working with the kids. As we have discussed earlier, the dearth of trained childcare workers in postwar Europe was considered a big problem for the rehabilitation of the children. Added to that were the conceptual differences of the people and their respective national backgrounds: American social workers had different ideas than Brit-

217 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 48.

218 Ibid., 15.

219 Ibid.

220 Kangisser Cohen, "'Report on a Survey of the Psychological Conditions of the Surviving Children in Europe,' Dr. Paul Friedman," 112.

221 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 16.

222 Raphael Levy, "Europe's Jewish Children Yearn, for Love Show Amazing Vitality to Build New Life, Psychiatrist Reports After Survey for J. D. C." (New York, February 7, 1947), 1, JDC Archives.

ish ones or French ones, and German workers were considered to be wholly unqualified due to their Germanness.[223]

Friedman was continually aghast at the perceived ineptitude of the staff calling their "naivete [...] striking."[224] He recounts a story of a boy who in Friedman's view was a "compulsive masturbator."[225] To relieve the perceived issue a caretaker is reported to have sent the boy to a brothel.[226] What Friedman considered to be compulsive masturbation is sadly not explained here. Read against the comparison of the Cyprus report it seems like Friedman considered masturbation in general as detrimental and a sign of psychological unwellness.[227]

It can be concluded that Friedman generally was surprised at the few psychiatric cases he encountered and the children's resilience. He did observe what he called "emotional difficulties" but did not deem them out of the ordinary. He stipulated that many children displayed behavior that had helped them to survive during the war, behavior that they now needed to be supported in unlearning. Contrary to some of his contemporaries (like Ernst Papanek) Friedman advocated for breaking up "gangs" of children (like the "Buchenwald boys") who were unruly together to help them integrate in other groups. Clearly, preparing children to integrate into peaceful communities was at the top of his mind through all of his investigation. Like his UNRRA counterparts, Friedman's most important objective was societal coherence. It has become clear that he did not deem psychiatric disease as a hindrance for integration but behavior that children had learned during the war, pertaining to the ways in which they socialized. "They have to be able to live together"[228] was Friedman's recurring maxim.

Moving on, we will zoom in on Friedman's conceptualization of the children's identity as "Jewish" and the ways he valued it in terms of psychological rehabilitation.

Jewish Identity and Psychological Rehabilitation

Paul Friedman, a practicing Jew[229] enlisted by a Jewish organization, did consider the fact that the children he surveyed were Jewish. In the following, the ways in

223 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 48.
224 Ibid., 9.
225 Ibid., 10.
226 Ibid.
227 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 56.
228 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 19.
229 Ostow, "Obituary Dr. Paul Friedman," 2.

which he considered the importance of strengthening a "Jewish identity" will be discussed.

Friedman repeatedly observed antisemitic feelings among Jewish children. Especially those children who are today called "hidden children," i. e. children who survived in gentile foster families or catholic institutions, struggled deeply with their Jewishness.[230] Many of them had internalized that being Jewish was detrimental to survival, so they abandoned their Jewishness.[231] Friedman further rationalized the phenomenon of antisemitism within the children by explaining that the children who survived under the care of gentiles had identified "with the people who had helped save their lives."[232] A girl Friedman encountered had survived a concentration camp. While there, she had witnessed what Friedman called the "lack of dignity" which contributed in her becoming antisemitic.[233] Friedman quotes the girl in saying: "You cannot help becoming antisemitic when you see the lowness of the Jews and the lack of dignity which they showed in the concentration camps."[234] The outer defamation had resulted in deep inner self-hatred and self-denial: outer abandonment had resulted in inner abandonment. Other children had feelings of deep guilt because they had abandoned their religion as well as their parents in order to survive. Friedman wrote: "They actually felt guilty for having been spared the atrocities and death which their parents had suffered."[235] These sharp feelings of guilt created deep inner tensions and conflicts that resulted in behavioral difficulties. That, of course, was the interpretation of a skilled psychiatrist who also had the merit of the distant expert observer who did not have to wrestle the consequences of difficult behavior in the everyday. This is what the often-untrained welfare workers had to perform.

Many of the children had learned to lie about their Jewish background and kept that up into the postwar. Friedman maintained that the salve for this phenomenon was "that in such cases it is better for the future development of the children that they be brought back into the Jewish community."[236] Curiously, Friedman does not explain why he thought that these children should return to the Jewish community. All he says to explain his claim is that "it is obvious."[237] It is remark-

230 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 13.
231 Ibid.
232 Ibid.
233 Ibid.
234 Ibid.
235 Ibid., 20.
236 Ibid., 21.
237 Ibid.

able that Friedman saw the identification with being Jewish as important to the children – if a Jewish child had lost its identification with its Jewishness, it should be supported in regaining it. It would have been valuable to the researcher to learn about Friedman's rationale behind this assertion, but in lieu of an explanation by him all that can be done is to speculate. As has been outlined in Friedman's biography earlier, he was a practicing Jew who identified closely with the Jewish faith.[238] This, as well as the fact that he was working for a Jewish organization, might be the reason for this assertion. What can be gleaned from his discussions on the crises of identity he encountered is that he deemed the adherence to the Jewish identity as beneficial to psychological rehabilitation.

Thus, the question that was so prevalent during the postwar years in the DP camps arises: to what extent did Friedman deem the ideology of Zionism as beneficial for the children's rehabilitation? If Friedman deemed the recovery of a Jewish identity important, did he also support Zionism in DP camps as a means of supporting the DPs in their psychological rehabilitation? His take might seem surprising.

In fact, Friedman called for an individualistic approach shaped by empathy and understanding and devoid of any reminiscence of strictness or authoritarianism. For him, mental hygiene could not go hand in hand in with any sort of ideology.[239]

However, the question of ideology in the rehabilitation of children remained contentious. Friedman was against the integration of ideology into the rehabilitation process. With the Jewish children the road of Zionism was constantly a possible one, as many DP facilities housed kibbutzim on their grounds. But Friedman was against that. "They have had enough of that,"[240] he opined regarding any form of ideology. For him, the ability to coexist peacefully needed to be reinstated first before any form of ideology was implemented. The ability to love, in fact, was a prediscursor for that. Friedman maintained:

> Giving the children an opportunity to identify with an ideal, such as, for example, Zionism or Communism, which so many homes offer, is a theoretically sound idea, but the participants in striving for the ideal, have to be ready for the realization of their striving. They must be able to live with each other. They must be ready to live in an atmosphere of comradeship, to love each other enough to live in any sort of community organization.[241]

238 Ostow, "Obituary Dr. Paul Friedman," 3.

239 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 12.

240 Ibid.

241 Ibid., 19.

Friedman generally supported the idea of communal living, especially in a *kibbutz* environment, but he believed that the psychological groundwork had to be laid beforehand. He also associated the dissemination of ideology with "coercion"[242] and argued towards a less collective approach towards rehabilitation. For him, the children were simply not ready to embark on another collectivistic, ideological form of living together. He opined: "Many of the children are still so absorbed in their self-defense that they have lost even the capacity to sympathize with others."[243]

Rather than employing Zionism as a rehabilitative measure, Friedman, not surprisingly, advocated for the use of psychotherapy.[244] Through psychotherapy, the children were supposed to regain trust in other people and the world and open up emotionally. Life in the *Kibbutz*, as he had observed, oftentimes remained too strict and authoritatively guided. Friedman favored individual attention: "My personal experience [...] led me to believe that the use of psychological methods, as, for instance individual psychotherapy or group psychotherapy would have been more likely to succeed than coercion in order to create an atmosphere of cohesion and friendship."[245]

Like his colleagues from the *IAPSG*, and generally very *du jour* in the mid-1940s, Friedman proposed using group therapy as a therapy modality. He envisioned: "Their common experiences, their resentful attitude toward the world, their grudge for having suffered, and finally their common expectancy of reward could have been excellent subjects for discussion."[246]

It can be said that Friedman, despite being keen to support the children in strengthening their "Jewish identity," opposed many of his Jewish contemporaries by arguing against collective accommodation and rehabilitation infused with Zionist ideology. Indeed, the close reading of Friedman's *Survey* has delivered the important insight that employing Zionism in the rehabilitation of the children had not been unequivocally supported by all involved. Nevertheless, Zionist *kibbutzim* on the grounds of DP camps remained a practice supported by the Joint.[247] This, again, points to the fact that Friedman as the psychiatrist, just like the *IAPSG* and Greta Fischer, did not concur with all the practices of the organization he was employed by. Friedman, thus, was not an unambiguous representative of the JDC but had his own take on the conditions of the children.

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242 Ibid., 20.
243 Ibid., 17.
244 Ibid., 20.
245 Ibid.
246 Ibid.
247 *Patt, Finding Home and Homeland.*

To conclude on Friedman's findings, it is worth noting that the last pages have provided the reader of the *Survey* with insight not only into Friedman's view of humans and the world they live in but also the world or the communities Friedman wished to see established after the horrors of the recent years. Friedman's proposed rehabilitation strategy was one shaped by individualism and community, but also of empathy, understanding, and love, all that needed to be reinstated in order to prepare the children to become citizens. In Friedman's words: "The significance and implications of these tendencies of the children may vitally affect their future and the future of the society of which they will eventually become citizens."[248]

With that, Friedman's conceptualization of what should lie ahead of the children is reminiscent of that of the *IAPSG.* For him, too, working on the improvement of the mental state of the children was also working toward a peaceful future. Friedman, too, sought to heal a "wound"[249] that had been perpetrated within humanity.

How did Friedman seek to heal that proverbial wound? In the *Survey* few concrete steps are provided. Friedman supported the installation of the mental hygienic project to both train suitable staff and treat children professionally: "By mental hygiene, I mean a program of activities whose fundamental principle is to prevent mental disturbances through adequate methods of education and psychological reorientation."[250]

For Friedman, like many other mental hygienists, the major task of mental hygiene lay in prevention. A mental hygiene program was to prevent mental issues that were potentially dangerous for societal cohesion down the line. But mental hygiene included even more than prevention because, realistically, the damage had been done during the war. Friedman called for mental hygiene projects that would prevent but also treat patients, train personnel, and work towards integrating the children into society. A "a sound program of mental hygiene – a term which includes everything from intensive psychiatric treatment of selected individuals down to the relatively simple matter of [integration]"[251] was what Friedman envisioned. However, Friedman leaves in the dark how that should look concretely.

248 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 17.

249 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 41.

250 Levy, "Europe's Jewish Children Yearn, for Love Show Amazing Vitality to Build New Life, Psychiatrist Reports After Survey for J. D. C.," 2.

251 Friedman, "The Road Back for the DP's," 4.

Friedman also proposed model homes where the latest methods in childcare and guidance were performed under the tutelage of psychologically trained personnel, "to serve as a center for instruction for childcare workers from various children's homes under the aegis of the JDC."[252]

Friedman was tasked by the JDC to draw up the exploratory *Survey* in order to prepare the establishment of mental hygiene projects on the ground. The lack of practical recommendations he provides might seem surprising but it points toward the assumption that he understood his task first and foremost as surveying the field rather than providing concrete practical steps.

6.4 Conclusion

In early 1947, shortly after his return to the US, Dr. Paul Friedman was interviewed by the JDC's publicity director Raphael Levy about his time among Europe's DPs. In it he declared conclusively: "The boys and girls who lived through Nazism are not mentally sick. Many of them present emotional difficulties and behavior problems. Their chief need is for psychological guidance and direction in order to help them become useful members of society."[253]

While this statement appears somewhat whitewashed, maybe to raise sympathy for the children and open donor's pockets, it nevertheless captures the heart of the ways in which Friedman looked upon the DP children's mental conditions. Paul Friedman seemed to have been genuinely struck by the degree of resilience he encountered within the children and the relative rarity of psychiatric conditions among them.

Friedman clearly differentiated between two kinds of conditions: psychiatric diagnoses and emotional issues. Without disclosing his prior expectations, it seems like Friedman had expected the number of psychiatric cases to be much higher than they turned out to be. He stresses that emotional issues, like emotional anesthesia, aggression, and hatred among the children, were by far more common than manifest psychiatric illness.[254] Here it is important to note that usually after a particular stressful situation that can be understood as "trauma" psychiatric conditions emerge oftentimes with a significant time delay, oftentimes decades later.

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252 Levy, "Europe's Jewish Children Yearn, for Love Show Amazing Vitality to Build New Life, Psychiatrist Reports After Survey for J. D. C.," 3.

253 Ibid., 1.

254 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 111.

This is called a "latency period."[255] Krell and others have shown that psychiatric conditions in people who survived the Holocaust as children oftentimes became mentally ill at an advanced age.[256] What is more, as Hans Keilson, author of one of the first seminal psychiatric studies on the psychological effect of the Holocaust, has pointed out, the "trauma" of the war did not end with the hostilities in spring 1945; Keilson has shown convincingly how for many the trauma continued well into the postwar, with prolonged uncertainty about the future and the reckoning with loss of loved ones.[257] With this in mind it is important to consider that what Friedman describes was just a momentary snapshot, and not indicative of the extent of trauma the children experienced. More time should have passed to assess the number of psychiatric cases conclusively. But from what Friedman found in the second half of 1946, he was delighted.

In the above quote Friedman also highlights the ultimate salve he wishes to see implemented in the work with the kids: "psychological guidance and direction."[258] In another quote from the PR interview, he goes so far as to say what was needed was "love and affection."[259] Of those – guidance and affection – he mourned a heavy dearth, however. Untrained and unsuitable staff, in particular, was a massive thorn in his side. Agreeing with Bettina Warburg's and Anna Freud's impression that trained staff was needed, Friedman was adamant that staff needed to be trained immediately and should be selected more rigorously prior to employment.[260]

The disciplinary chasm between "European" and particularly French childcare and social work and the American approach certainly contributed to the unfavorable gaze Friedman had on the situation in the DP camps and children's homes. However, to claim that Friedman's observations were a case of "cultural imperialism" or an attempt at exporting American ideals of social work to continental Europe, I argue, seems too simple: Friedman himself was a European trained psychoanalyst who had both his personal as well as his professional coming of age in Germany, Switzerland, and France – the countries he visited for the *Survey*. If any-

255 Robert Krell, "Child Survivors of the Holocaust – Strategies of Adaptation," *The Canadian Journal of Psychiatry* 38, no. 6 (August 1, 1993): 388, https://doi.org/10.1177/070674379303800603.

256 Ibid.

257 Cf. Hans Keilson, *Sequentielle Traumatisierung bei Kindern: deskriptiv-klinische und quantifizierend-statistische follow-up Untersuchung zum Schicksal der jüdischen Kriegswaisen in den Niederlanden*, Forum der Psychiatrie, N.F., 5 (Stuttgart: Enke, 1979).

258 Levy, "Europe's Jewish Children Yearn, for Love Show Amazing Vitality to Build New Life, Psychiatrist Reports After Survey for J. D. C.," 3.

259 Ibid.

260 Ibid., 2.

thing, he could not have been as steeped in Americanized social work and psychiatry like an American psychiatrist.

The choice of a psychiatrist with this background must be credited to the Joint – had the Health Department wished to see purely American style social work and mental hygiene implemented they probably would have chosen another individual with American training for the job. But, on the contrary, they chose Friedman on the grounds of his particular sensibilities for the role of a JDC mental hygiene representative. Certainly, Friedman's background as a Polish Jew who had left Europe just in time must be taken into consideration when meditating on the JDC's choice of hiring him and his gaze on the situation in Germany. Incidentally, Friedman explicitly expressed his background in *The Road back for DPs*, disclosing his own sense of guilt (which he felt he shared with other European psychoanalyst colleagues) towards the survivors because he had been able to escape.[261]

Contrary to the authors of the *Report on psychological problems of DPs* Friedman largely abstains from giving concrete recommendations about the future whereabouts of the children. In fact, Friedman's reading of the DPs situation is a departure from the anticipatory thoughts of the *IAPSG:* while it can be said that UNRRA'S psychosocial strategy rested on the reinstation of norms of gender, age, nationality, and family Friedman transcended that. He mentioned nothing along the lines of gender norms and was not interested in the category of age because he knew that the war had offset any age categorization. He did not position himself in terms of national belonging and did not overtly argue for the reunification of family. What he was keen for, however, was that children be reintroduced to their "Jewish identity" – if children had abandoned their "Jewishness" as a mechanism of coping and protection he recommended they be reacquainted with it.[262] Thus, I argue, while UNRRA sought to rehabilitate citizens of Western, Christian countries, rooted in the nuclear family, Friedman delivered the "Jewish" equivalent to rehabilitation, strengthening the children's (lost) "Jewish identity" in order to improve their psychological rehabilitation.

However, Friedman did concur with the UNRRA strategy that the children needed to be able to live together, to integrate into a peaceful society. What stood at the heart of rehabilitation for him was that the children had to (re-) learn to live together. Ever the mental hygienist, Friedman had his eyes on the societal effects the maladaptation, aggression, and hatred some of the children displayed could have in the future if unmediated. He needed the children to relearn

261 Friedman, "The Road Back for the DP's," 2.

262 Friedman, "Report on a Survey of the Psychological Conditions of the Surviving Children in Europe," 21.

to "sympathize" with each other as this was the basis of democratic coexistence, in his view.[263] Because he feared that this aspect could not be strengthened within a collectivist environment shaped by Zionist ideology, Friedman favored psychotherapy over any form of ideology. His criticism of Zionism and/or collective living, if elegant, might have ruffled some feathers among his fellow Jewish humanitarians, because the JDC started to allow *Kibbutz* structures within their DP camps in 1946.[264] As discussed previously, the JDC was certainly no Zionist organization but over the course of the postwar years found a pragmatic support of the Zionist call for an Israeli state and supported Zionist groups within and outside the DP camps.

Regarding the politically contentious question of Israel and Palestine, Friedman remains mute. He also does not take a stand on the question of repatriation, certainly also because this question was not as virulent for Jewish children anyways (most could not return, as discussed previously). What Friedman cared about was the metaphorical "road back for DPs," as he put it in eponymous article for *Commentary.*[265] He was convinced that the DPs had to be supported emotionally to be able to return to the bosom of *a* community/society/nation. As he put it, "they have to be able to live together," but he did not specify where and maybe even did not deem this as important as UNRRA did.

To sum it up, it can be gleaned that Friedman called for a mental hygiene project to both train staff and treat emotional, behavioral, and psychiatric issues of the children and to ultimately make the children fit for integration into peaceful societies, to become citizens. Paul Friedman took an empathic stance on the situation of the children in 1946 and called for better treatment of the surviving children to prevent another war and enable the kids to become citizen of peaceful countries.

In closing, I would like to take the argument about Friedman's 1946 survey to a more abstract level: mental hygiene for Friedman and thus the JDC revolved around the notion of prevention. For Friedman, the goal of mental hygiene with displaced children was preventing two dangers: on the societal level, another war; on the individual level, psychological disease. What is more, these two aspects were intricately linked for Friedman. Like his colleagues of the IAPSG Friedman shared the belief that societal cohesion, the macro, was born from healthy relations in the micro, within primary collective structures like families or communities and ultimately from individual psychic sanity.

263 Ibid., 17.

264 *Patt, Finding Home and Homeland.*

265 Friedman, "The Road Back for the DP's."

A closer look at Friedman's initial conceptualization of the children's mental state has been insightful, consolidating again the tendencies of the psychiatrists working with DPs to aim towards the aloof goal of healing societies by healing the children's minds. For mental hygienists like Friedman there was a direct connection between psychic health of an individual and "healthy," meaning peaceful and democratic, societies.

How, and if, Friedman's view of the DPs' mental condition evolved or changed over the course of the postwar years will be discussed next, as we will turn towards Friedman's second stint with the JDC: his work in Cyprus in 1947.

Realization of Mental Hygiene Plans

Whatever happened to Friedman's call for a mental hygiene center, particularly in France? As mentioned above, the project had been temporarily "tabled" in December 1946.[266] Curiously, piecing together the shards of information as to whether there actually was a running JDC mental hygiene center remained nebulous, even after long considerations on my part. OSE created a mental hygiene center in Rue St. Jacques in Paris under the guidance of Friedman's colleague Eugène Minkowsky.[267] Over the course of several years, there was mounting discussion about an inter-agency mental hygiene center in Rue Augustin, 13, in Paris that was supposed to serve the Jewish population of Paris. In the archives, a paper trail on the discussions surrounding the inception of such a center can be found. From what can be gathered, the center was to mirror Paul Friedman's suggestions. A booklet on the prospected center describes its purpose as follows: "The immediate and primary purpose of the mental hygiene center is to diagnose and treat personality difficulties in children and adolescents, which hinder their social adjustment, with the view of preventing the development of more serious disorders."[268] The purpose of the center was further to "disseminate within the Jewish community the expanding knowledge and advances in the field of human behavior."[269]

Sources suggest that there was a lot of back and forth and ultimately discord surrounding the JDC's funding towards Minkowsky's center. In a 1949 letter from Minkowsky to JDC France director Laura Margolies, Minkowsky bitterly reports

266 Friedman "Report on Survey of the Psychological Conditions of the Surviving Children in Europe", ID 1255765, JDC Archives.
267 "Outline of Organization and Operation of Proposed Mental Hygiene Center," 1.
268 Ibid.
269 Ibid.

the lack of support and his frustration about it. According to the letter, the JDC withdrew its support from any mental hygiene activities in France ("Le JOINT avait décidé de se désinteresser en attendant des questions d'Hygiene Mentale."[270]).

Another letter from late 1949 indicates that there was too much discord about the setup of the center. Consequently, the JDC withdrew its support, prompting Minkowsky to mourn that the JDC was "not interested in the question of l'hygiene mentale."[271]

Another aspect of Friedman's suggestions – training the care workers – was taken more seriously by the JDC. In 1949, the JDC founded the Paul Baerwald school for social workers in Versailles near Paris. Named after former JDC chairman Paul Baerwald, the school was hailed the "first American-type social work school in Europe."[272] At the school, the main objective was to train Jewish staff to become social workers, drawing from a curriculum that was shaped by an Americanized version of social work, focusing on case work, individualism, and psychoanalytic theory.[273] Six American social workers instructed the largely female student body in principles of child psychology and human development to serve in Jewish communities in Europe, North Africa, and Israel. The school was founded to counter the "European style of social work" which was perceived to be too authoritarian, not informed by psychoanalysis, and not promoting enough self-reliability and self-respect.[274] With the school's curriculum, the Joint hoped to "transform notions of welfare" for the Jewish communities of Europe, as Beth Mandel aptly put it.[275] People were supposed to be helped to "stand on their own feet" and foster feelings of self-respect – clearly the hallmark of the American style of social work, as this study discussed previously. The school eventually was moved to Israel in August of 1953.[276] The setup of the school clearly indicates what Beth Mandel called "cultural imperialism": the Joint made no secret of the fact that it wanted to import American style social work and its practices to Europe through the school, because it deemed "European" style social work (if there ever was such a generalized thing) unable to deal with the specific demands of Jewish communities.[277]

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270 Eugène Minkowsky, "Letter to L. Margolies," May 9, 1949, 1, JDC Archives.
271 Eugène Minkowsky, "Letter to L. Margolies," November 10, 1949, JDC Archives.
272 Fieldston, *Raising the World*, 37.
273 Ibid.
274 Mandel, "Philanthropy or Cultural Imperialism?," 73.
275 Ibid.
276 For more on the Paul Baerwald school, see ibid., 73–74; Fieldston, *Raising the World*, 37–38.
277 Mandel, "Philanthropy or Cultural Imperialism?," 74.

The case of the Paul Baerwald school shows that Friedman's call for better training of care workers was answered, even if three years later, when many DP children already had found new homes.

Whether Friedman's suggestions were incorporated in the other countries could not be verified. The Joint did not, however, turn its back entirely on questions of mental hygiene, as we will explore next.

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[1] – they were interned by the British in what shockingly resembled concentration camps.[2]

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.[3] These visas were issued at a harassing rate of 750 a month.[4] 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*,[5] the Jewish minority in Palestine, who approached JDC headquarters in New York City in April 1947 asking to fund another enlistment of Friedman.[6] After having been introduced to Friedman and his work with DPs a year earlier in Europe, *Yishuv* psychiatrist Theodor Grush-

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.

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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.[7] While there they conducted an investigation which Friedman laid out in an extensive report for the JDC.[8]

Friedman's main impressions from Cyprus, which he conveyed in an administrative report for the JDC[9] as well as in multiple publications[10] 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.[11] 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.[12]

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"[13] 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"[14] 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[15] and fellow psychiatrists Arnold Merzbach[16] and Lipman Halpern[17] from the newly founded Society for Mental Hygiene

14 Ibid.

15 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[18] 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."[19]

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."[20]

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.[21] 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.[22]

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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.[23] 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.[24] 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.[25] However, following the advent of Nazi rule in Germany, Palestine became a sanctuary for the lucky European Jews who made it out in time.[26] 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.[27] 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.[28]

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-

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).[29] 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.[30]

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.[31] 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,[32] 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.[33] The Jewish Agency accepted the plan, the Arab fraction rejected it, the Independence War broke out, and the plan was not implemented.

29 Ofer, "Holocaust Survivors as Immigrants," 2.

30 Ibid.

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

32 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.

33 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*.[34]

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.[35] Grushka, Merzbach, and Halpern already had a potential person in mind due to that person's previous experience with DPs: Dr. Paul Friedman.[36]

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.[37] Grushka came away from their encounter impressed by Friedman's linguistic capabilities as well as his rapport with the DPs.[38] The authors of the letter lauded Friedman for "his warm human approach and keen desire to bring help to the object of his studies."[39]

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

34 Ofer, *Escaping the Holocaust*, 3.

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

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

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

38 Ibid.

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

health of the immigrants in Cyprus and Palestine.[40] 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."[41]

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.[42] 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.[43] 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,[44] which was directed by Chaim Yassky.[45] Yassky, too, had far-reaching aspirations for the data Friedman gathered, hoping it would serve "as a paradigm" for the psychiatric work at *Hadassah.*[46]

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":[47] 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.[48] Nevertheless, the immigration authorities of the *Yishuv* had a preference for able-bodied immigrants who were physically and mentally able to build a country.[49] 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

40 Ibid.

41 Ibid., 9.

42 "Memorandum on Conference, Appendix: Background Material on Psychiatric Team," in *Cyprus: Psychiatric Report Dr. Paul Friedman.*, 1947.

43 Ibid.

44 US financed hospital in Israel.

45 "Letter Dr. Golub to J. Schwartz, Appendix: Background Material on Psychiatric Team," in *Cyprus: Psychiatric Report Dr. Paul Friedman.*, 1947, 11.

46 "Letter I.S. Wechsler to H. Yassky Appendix: Background Material on Psychiatric Team," 9.

47 Ofer, "Holocaust Survivors as Immigrants," 2.

48 Ibid.

49 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.[50]

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."[51] 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.[52] 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[53] 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.[54] The American Mental Hygiene paradigm slowly replaced the German influence in psychiatry in Palestine, as Zalashik has shown.[55] Until the mid-1940s, German influenced psychiatry was the paradigm in the *Yishuv*'s psychiatric departments,

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.[56] 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.[57]

As has been discussed in the considerations surrounding Friedman's 1946 survey, the Americanization,[58] 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.[59] 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.[60]

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

56 See ibid., 98–100.

57 Ibid., 101–81.

58 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.

59 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).

60 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.[61]

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.

61 "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."[62] 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.[63] 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[64] and the American Psychiatric Association in May 1948. The administrative report for the JDC[65] and the articles[66] he produced on his experience in Cyprus are the basis of my investigation, along with publications by his colleagues Sadie Oppenheim and Mildred Buchwalder.[67]

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;[68] Eliana Hadjisavvas[69] and Anat Kutner[70] have investigated the camps through the perspective of the JDC, and Dalia Ofer provided valuable insight into the demographic of the Cyprus detainees.[71] 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.[72] 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.[73] 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;[74] Mildred Buchwalder was a psychiatric social worker on leave from the New York Committee on Mental Hygiene.[75] 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.[76]

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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.[77] 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 Hanoar*.[78] 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.[79] The desk was a "rough plank table," the chairs two benches that frequently collapsed.[80] 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"[81]

"Cyprus has all the characteristics of a concentration camp," Paul Friedman noted in his JDC report on his trip to Cyprus.[82] 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."[83] And indeed, drawing from the historic accounts describing the Cyprus camps, conditions

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 déja-vu: one journalist described the treatment of the Cyprus internees as a treatment that was fit for "terrorists rather than simple illegal immigrants."[84]

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.[85] 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 t a time during the peak.[86]

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.[87] 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.[88] 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.[89] The JDC tried to take off the edge of the worst conditions, but they were able to alleviate only a little of the conundrum

84 Cyprus Gazette, no. 2357, in Teutsch, *The Cyprus Detention Camps*, 63.

85 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.

86 Teutsch, *The Cyprus Detention Camps*, 1.

87 Ofer, "Holocaust Survivors as Immigrants," 3.

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

89 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.[90] 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."[91] 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.[92] Psychiatric cases were sent to the government hospital in Nicosia, where the language was Greek.[93]

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.[94] 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.[95]

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.[96] 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

90 Hadjisavvas, "From Dachau to Cyprus," 148.
91 For more on the JDC between the fronts in Cyprus see ibid., 149.
92 Kutner, "Reconstructing Lives, Creating Citizens. The Role of JDC in the Rehabilitation of Cyprus Detainees, 1946–1949," 3.
93 Ibid.
94 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 10.
95 Ibid.
96 Ibid., 12.

> with grime and perspiration- caked dust wander about aimlessly adding to the impression of squalor.[97]

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.[98]

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.[99] 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.[100] 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.[101] 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."[102] 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.[103]

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."[104] 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

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 DPs: 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.[105] The product of their investigation was an administrative report to JDC HQ.[106] 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[107] was responsible for psychometric testing and social worker Mildred Buchwalder was to assist Friedman and instruct local staff.[108]

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105 Ibid., 1.

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

107 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.

108 "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;[109] the team saw 172 of them, among them 84 children of 18 years of age and under.[110] 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,"[111] as it was put in the *Report.*

The team screened three different groups within the overall group of 172 internees.[112] 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"[113] problems. The second group were 36 children randomly selected from three different kibbutzim active in Kfar Hanoar.[114] The third group consisted of internees across all nine camps in Cyprus.[115] 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),[116] Betar (an extremist Revisionist youth group with a military slant),[117] and Noar Zioni (a more liberal Zionist youth

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 Haghetaot 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 (todays 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),[118] 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.[119] 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.[120] It was also known to interrupt catatonic stupors[121] of schizophrenic patients, for which Friedman used it.[122] The degree to which the team employed psychotherapeutic talk therapy is unknown and, due to the length of their stay, relatively improbable.[123]

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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*).[124] 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 heterogenous 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 node being 17.[125] 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 node of 13 years.[126]

The following tests were used:[127]

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.[128]
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. [129]
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.[130]
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.

124 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 24.

125 Ibid., 25.

126 Ibid.

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

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

129 Ibid., 43.

130 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.[131]

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.[132] *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.[133]

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.[134] 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."[135]

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.[136] Beginning around the 1940s, psychometric tests were increasingly used in a clinical setting to survey "normal development."[137] 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-

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.[138] 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,"[139] as Rose put it aptly. In that way, the fact that the psychiatric team employed testing schemes[140] hints at the Foucauldian type of "governance via norms" that was taking place in Cyprus.[141]

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,[142] 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.[143]

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

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 Zalashik 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."[144] 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.[145]

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.[146]

	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. [147]

144 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 26.
145 See also Burgard, "Contested Childhood."
146 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 29.
147 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."[148] 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.[149] 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

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"[150] (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.[151]

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,"[152] while the *Coordinatia* children sought "love" and the *Noar Zioni* focused their energies towards "selfless service [...] in the *kibbutz.*"[153]

Diagnoses

Of the 84 children the team saw in the Children's Camp they only made 31 diagnoses.[154] 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-

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.[155] It is almost surprising how little psychiatric diagnoses were made, considering the enormous trauma the children had encountered.[156]

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."[157] 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.[158]

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 postwar period: fatigue, accompanied by shallowness of emotion or "affective anesthesia," as Eugène Minkowsky called it.[159] 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."[160] 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."[161]

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."[162] 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'anésthesie 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.[163] The ways in which Friedman conceptualizes the symptoms he encountered deliver important insights into is 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."[164] 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."[165] 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."[166] 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.[167]

Upon closer examination of the girl's biography,[168] 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

163 Friedman, "Some Aspects of Concentration Camp Psychology," 603.
164 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 37.
165 Ibid.
166 Ibid.
167 Ibid.
168 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."[169] 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.[170]

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.[171] 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."[172] 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.[173] 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-

169 Ibid.

170 Ibid.

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

172 Ibid.

173 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.[174]

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."[175] 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 had 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,"[176] cloaking their antisemitic resentment in a veil of psychoanalytic rhetoric of "secondary illness gain" (*sekundärer Krankheitsgewinn).*

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[177] and links it intricately with the discourse surrounding the trauma of the Holocaust, as it was negotiated by psychiatrists such as Kurt Eissler,[178] William Niederland,[179] Robert Jay Lifton,[180] Henry Krystal,[181] Nancy Andraesen,[182] 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.[183]

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-

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 'Überlebenden-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. Andreasen, "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 print, 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 "*non*comparability"[184] 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.[185] 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."[186]

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

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."[187] 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."[188] He employs the Freudian concept of regression to explain this phenomenon, stipulating that concentration camp in-

187 Friedman, "The Effects of Imprisonment," 166.

188 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.[189] For children who entered the concentration camps during their "latency period"[190] between five and 15 years of age, puberty was delayed and girls started their period late, around the age of 17 or 18.[191]

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."[192] These castration fears,[193] according to Friedman, might have produced the conviction that abstaining from sexual activity would "avoid the punishment of the gas chamber and the crematorium."[194] Of course, this statement underlies a conviction that sex was inherently "indulgent"[195] 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.[196]

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.[197] 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

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. 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."[198] 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."[199] 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.[200] 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.[201]

Friedman also notes how the educators of the children in Cyprus were concerned that the children were "curiously uninterested in sex."[202] 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.[203]

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, recoursing 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.*[204]

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.[205]

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."[206]

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

204 See i. e. Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 19.
205 Ibid., 20.
206 Ibid., 36.

enough" of (forced) group living, advocating for individual care and attention for children.[207]

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."[208]

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."[209] 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.[210] 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.[211]

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

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."[212] 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.[213] 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"[214] who would be of no use to the budding Israeli state.

The American team was to investigate that prejudice.[215] Not surprisingly, Friedman concurred with the *Yishuv* and Buchwalder, considering idleness as "one of the most serious problems of the camps."[216] 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."[217]

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.[218]

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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 [...].[219]

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."[220]

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."[221] 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.

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

220 Ibid., 50.

221 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*,[222] 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.[223] As discussed in part I of this study, according

222 *Freud, Civilization, Society and Religion.*
223 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.[224] 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."[225]

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.[226] 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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224 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.

225 Friedman, "The Road Back for the DP's," 7.

226 Cohen, *Case Closed*, 139–40.

that "the civilizing forces in man "needed to win victory."[227] 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 DPs' 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 DPs,[228] 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."[229]

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."[230]

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"[231] 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.[232] The goal was a big one, finding, as he put it "a moral equiv-

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 Comittee 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,"[233] 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.[234] 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-

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.

233 Friedman, "The Road Back for the DP's," 16.

234 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.[235]

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.[236]

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." [237] 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.[238] He therefore kept working towards the implementation of a mental hygiene project in Palestine in 1949.[239]

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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237 Friedman, "The Effects of Imprisonment," 167.

238 Friedman, Buchwalder, and Oppenheim, "Cyprus: Psychiatric Report Dr. Paul Friedman," 49.

239 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.

8 Healing the Wounds of DPs, Healing the World?

At the outset of this study, we encountered the words of 15-year-old survivor Michal Kraus who asked, "Who can feel with us?"[1] In his postwar diary, Kraus wrestled with the feeling that what he had experienced was larger than words could describe. If he could not convey the extent of the horrors he lived through, how could anybody else hope to empathize with him, let alone assist him?

This study investigated the degree to which psychological staff managed to empathize with the DPs and help alleviate their suffering. It demonstrated that the psychosocial actors of the case studies operated on a spectrum of trying to "feel with the DPs" while keeping the larger perspective of their work in mind, intending to "heal a large wound in world society"[2] and working towards specific political projects.

Furthermore, this book explored the foundational bodies of knowledge that informed the psychosocial strategies employed by UNRRA and the JDC; how these were applied to make sense of the DPs' psychological constitution, and what the regulatory and, thus, political dimension of this work was.

The protagonists of this study, the psychosocial personnel, acted at the intersection of mental health, psychological rehabilitation, citizenship, and peaceful international relations: peaceful coexistence within a nation and between nations depended on individuals' psychic constitutions. Thus, the DP's mental state was considered decisive to a future of peace and democracy. The psychological rehabilitation of DPs was less a matter of who tried to "feel with the DPs" and more a matter of the aspirational trajectory that had been formulated in the *Report on Psychological Problems of DPs:* supporting the DPs in their Psychological Rehabilitation meant the attempt to heal "a large wound in world society."[3]

The case studies have shown that each of its actors did not focus singularly on ameliorating the psychic condition of DPs. Still, they had the larger implications of their psychosocial work – regulatory and political – in mind. The actors of the first case study sought to pave the road for "normality" by explaining how the DPs were enabled to assimilate in (prewar) countries and communities. Greta Fischer of the second case study decided, based on the "best interest" principle, what she thought

1 Kraus, "Introduction to Michael J. Kraus 'Diary,'" 1.

2 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 41.

3 Inter Allied Psychological Study Group, "Report on Psychological Problems of Displaced Persons," 41.

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was the best for a child, independent of UNRRA's repatriation paradigm. Paul Friedman remained reserved about the overtly political dimension of this work. Still, he criticized "European" modes of caretaking and advocated for the skillful rehabilitation of children to prevent future war and unrest. A year later, in case study four,, Friedman was harnessed for the Zionist goal of "producing" adaptable and productive citizens for the budding state of Israel. To achieve these goals, the psychosocial staff depended on their existing epistemologies.

The bodies of knowledge of psychiatry, psychology, and social work were instrumentalized to achieve a larger goal: the goal of measuring the prospective "human resources" of a budding nation (JDC) or restoring a political, national, and social order that had been destroyed by the war (UNRRA). I have argued that the psychosocial actors in my study mostly applied their prewar bodies of knowledge to underpin the strategies of UNRRA and JDC. An exception is Greta Fischer, who was taught through witnessing the stories of the DP children that theoretically drawn-up plans were often unrealistic in the face of the children's experiences. Elsewhere, Paul Friedman, who spent prolonged amounts of time with DPs in 1946 and 1947, did not allow himself "to be educated" by the DPs' experience but applied, rather orthodoxically, his prewar body of knowledge.

For the humanitarian projects of UNRRA and JDC specifically, psychoanalysis was the most critical psychosocial mode of thought. I have argued that this was rooted in a perceived allegiance between the ideology of internationalism, the League of Nations and later UNRRA, and the psychoanalytic framework that promised to shed light onto the intricacies of the human psyche and their behavior. Trying to "understand" human beings and their behavior on a deep, subconscious level promised the hope of improving human resources management that had become central since the 1920s, as I have outlined in the chapter on the League of Nations social policies. Measuring the "human condition" the way psychoanalysis did furthermore seemed to promise, so I argue, a novel and more intricate lever to manipulate and govern human beings and populations. Psychoanalysis thus became a promising and impactful tool for the biopolitical aspirations of governments and transnational organizations, such as UNRRA and JDC.

All actors in this study were heavily influenced by Anna and Sigmund Freud's psychoanalytic ideas and the elder Freud's intrinsic conviction about the destructiveness of the human condition. According to Sigmund Freud, within every human being rested a belligerent version of themselves that was ready to emerge at any moment if the dynamic of repression was somehow impeded, i. e., by conflict or war. In Freud's theories, civilization was considered nothing more than a

thin veneer, ready to crack by the merest of provocation.[4] Even if all of the actors (except maybe Greta Fischer) could not grasp the full extent of the Nazis' technocratic murder and repeatedly resorted to reductionist conceptualizations, they were nevertheless faced with the horror of what people were able to do to each other. Thus, they saw Freud's pessimistic take confirmed in the ruins of postwar Europe: WWII seemed to have affirmed the perceived innate human destructiveness.

Consequently, by loyally applying both Freuds' views on human nature and the psyche, the actors of the case studies resorted to a thought system that provided explanations and modes of thought that had been developed before it was known what humans were capable of – before what later would be called the "Holocaust." Sigmund Freud's theories were developed in a world before the Nazi concentration camps. In that, the actors' application of their prewar bodies of knowledge coupled with the administrative focus on "displacement," as the core hurt of the DPs, undeniably turned out to be in part reductionist.

This thesis has proven that the IAPSG, IWP, and Paul Friedman all derived their conceptualization from their prewar bodies of knowledge which ultimately became reductionist. Greta Fischer's direct contact with DP children worked to consider the nuances of her conceptualization of the DPs' condition and did not allow for reductionism to such a degree. However, in line with the thinking of their respective organizations, all actors focused on the displacement of the DPs, healing the DPs by helping them find (new) homes and support for emotional assimilation. Displacement remained the most formative category with which the psychosocial personnel encountered the DPs and made sense of their mental constitution. However, none of the actors in the study understood wartime trauma, particularly that of Jewish survivors, and what would later be called "Genocide" to be the decisive and most detrimental factor in understanding the mental health of (Jewish) DPs. As I have shown, understanding the particular Jewish plight evolved between 1944 and 1947. Nevertheless, even Paul Friedman resorted to reductionist conceptualizations that did not adequately take into account the specific Jewish suffering insofar as he explained the psychotic behavior of children in Cyprus through incidences in their early childhood, thereby diminishing the impact of the Holocaust experience. In that, the fact that Friedman strictly applied Freudian thought with its focus on the first three formative years of a human's life worked to let Friedman's conceptualization appear in a reductionist light.

Rather than being educated by what they empirically witnessed in the DPs, the majority of the actors in the case study relied on their prewar bodies of knowledge

4 Cf. Rutger Bregman, *Humankind: A Hopeful History* (Bloomsbury Publishing, 2021), 4.

to make sense of the DPs' psychic constitution. This worked to let their conceptualization often fall short of the complexities and nuances of the DPs' mental states. However, it has taught us how psychoanalytical thought was instrumentalized in international organizations in the midcentury.

I have argued that UNNRA and JDC sought to execute their power by applying psychosocial expertise to improve the "management" of their charges, the DPs, and to reach their political goals. Foucault's concept of biopolitics, meaning the administration and regulation of life processes (here the psyche of the DPs), is a helpful concept to grasp the nexus of psychology and politics with regards to DPs. [5] The very fact that UNRRA and JDC enlisted psychosocial "experts" to improve the management of their charges has to be considered "biopolitical." I argue that psychosocial knowledge has been mobilized in the context of the DPs to better "manage" them and to regulate them both on an individual level and in terms of the whole heterogeneous population of DPs. Foucault's concept of governmentality, too, has helped specify the biopolitical exertion of power in the context of psychological rehabilitation of DPs: governmentality, according to James Vernon, pertains to the techniques that are employed for political ends.[6] I argue that UNRRA and JDC employed psychosocial personnel to intervene in the minds of the DPs to "produce subjects with the appropriate mentality to govern themselves"[7] to ultimately achieve the political goals of UNRRA (the reinstation of the prewar order by way of repatriation) and JDC (ultimately the support of the Zionist call for an independent state of Israel with productive and adaptable citizens).

To conclude, the (biopolitical) function of psychosocial expertise was to support the DPs in becoming adaptable and productive in the respective political projects envisioned by the UNRRA and JDC. The four case studies selected for this thesis have impressively corroborated the claim that UNRRA and JDC employed psychosocial "experts" to wield their form of governmentality, exerting power over the DPs by using experts who helped foster the appropriate mentality that was needed for their respective political projects. Thus, the protagonists of this study were not solely active in the realm of psychosocial rehabilitation. Still, they were political actors in the postwar DP camps' voltage field.

So, where do we go from here? Analyzing the psychosocial rehabilitation strategies with DPs in the years 1944 until 1948 has, for the most part, been unchartered territory. This study has counteracted the wide-held assumption[8] that there were

5 Lemke, *Biopolitics*, 4.

6 Vernon, "The Ethics of Hunger and the Assembly of Society," 696.

7 Ibid.

8 On this assumption, see i. e. Leys, *Trauma*, 15; Shephard, "Die frühen Befunde der Psychiatrie zum Holocaust (1945 – 1950)," 73 – 74.

no psychological considerations about the mental health of survivors of the Holocaust directly after the fact. Instead, psychiatrists were thinking about the DP psyche even before the war ended. Future research endeavors may use this insight as a starting point for writing the history of the psychiatric discourse surrounding Holocaust survivors within the realm of the history of psychiatry, investigating if and how the knowledge and experience generated by the actors in this study were perpetuated, developed, contradicted, or affirmed.

The line of argument in this study may also be continued within the history of humanitarian psychiatry, in which Baher Ibrahim has recently delivered a highly valuable beginning.[9] Ibrahim convincingly outlined in his work on refugee psychiatry between 1945 and 1993 that there needed to be continuity of the knowledge generated in the work with DPs for the humanitarian context. He contended that the DP camps were "not a crucible of a new humanitarianism."[10] I argue that after the psychosocial personnel left the DP camps, a standardized mental health response in the humanitarian context was absent for another 40 years – no professionalization of humanitarian psychiatry followed directly after the DP camps. Why that was is for others to decipher. The actors in my study worked with refugees "to heal the wounds of world society." They did not, however, pursue this endeavor with an eye toward the establishment of psychosocial work as an important or even essential dimension of institutionalized humanitarianism, or even world psychiatry.[11] That way, the actors in this study were "avant la lettre," as humanitarian psychiatry (re-) entered the scene only in 1988, as Fassin and Rechtman have outlined.[12]

The contention surrounding the bodies of knowledge that were applied to the DP psyche, precisely that of Freudian psychoanalysis, could present a valuable addition to investigating the evolution of the perception of "orthodox" Freudian psychoanalytic principles, such as the reliance on inner-psychic dynamics and the first three years in a human's life and the neglect of extra-psychic factors in explaining a patient's suffering and pathologies. Could this reliance on inner-psychic dynamics and the neglect of extra-psychic factors still be upheld in the face of the Holocaust? Charting the evolution of this perception and the constant reinvestigation of Freudian thought with regard to Holocaust survivors or the history of trauma

9 Ibrahim, "Uprooting, Trauma, and Confinement: Psychiatry in Refugee Camps, 1945–1993."
10 Ibid., 114.
11 Brody, "The World Federation for Mental Health"; Wu, "World Citizenship and the Emergence of the Social Psychiatry Project of the World Health Organization, 1948–c.1965."
12 Fassin and Rechtman, *The Empire of Trauma*, 163–71.

would be a worthwhile pursuit to which this study, as well as Dagmar Herzog's work,[13] provided the groundwork.

Another significant opportunity in thinking about psychosocial rehabilitation of DPs would be to actually "give voice" to the DP perspective and engage DP testimony regarding their self-perception of their psychological rehabilitation. Especially when thinking about the exertion of power in psychological rehabilitation, it would be highly valuable to investigate the DPs' individual take on the matter. There are still some of those alive who survived as children. They could be interviewed, for that matter. A transdisciplinary approach to the realm of psychology would be highly beneficial in that

In closing the considerations of this study, I want to revisit once again Michal Kraus' haunting question, "Who can feel with us?" As it turned out in the analysis of the four case studies, the psychosocial strategies discussed were not primarily concerned with showing empathy with the DPs, to be "feeling with them." None of the actors in this study were concerned with providing individual counseling or even psychotherapy to the DPs. The actors' work needs to be understood in the context of the international organizations they were employed by and their respective agendas. What is more, a DP camp was not a place in which individual psychological rehabilitation through sustainable therapeutic interventions could have been performed. It was instead a highly transitory space where the future whereabouts of the DPs were a highly politicized matter. All actors involved revolved around the question, "Where could they go?" as Greta Fischer put it.[14] And in the transientness of the postwar years, that question was a political one, especially for Jewish survivors who, until May of 1948, did not have their own state and often could not return to their prewar countries of origin. Displacement, both psychologically and politically, remained the operative term throughout all four case studies. All actors wrestled with the fact that the DPs desired and needed a new place to live. Here, the individual desires of the DPs and the political dimension of their situation aligned – a new home was needed. However, such was not the time and place for individual psychotherapy, for taking the time and patience to be "feeling with" a DP on an individual level. Psychosocial work with DPs was intrinsically political because it constantly had to have an eye on the political situation the DPs were in and the political projects that UNRRA and JDC supported.

Thinking about rehabilitation after a crisis – a cataclysmic event, be it a war or other events of significant reverberance – raises the larger point of how to move on in its wake. The examples of UNRRA and the JDC are representative of the spec-

13 Herzog, *Cold War Freud*, 87–158.

14 Greta Fischer, "Fischer, Report Indersdorf 1946," 32.

trum on which approaches often rest: either the attempt at reinstating an idea of "normal," usually referring to the pre-crisis era, or new paths to be taken, in the hopes of moving towards a better future. UNRRA sought to apply prewar norms to the postwar world which turned out to be ignoring the tectonic shifts that had taken place during the war. The JDC, forced by the reality of the lives of many surviving Jews, had come to terms with that situation earlier and thus adapted its strategy by facilitating new routes and roads for the DPs. The Jewish survivors sought transformation, redemption, and new belonging. Because, for the majority of Jews, there was no "normal" to return to.

The gap between the political agenda of the Allied powers and the reality of the DPs' lives not only mirrors the difficulty of struggling for a (political) solution in postwar times; it also shows the central predicament of psychological rehabilitation in the wake of war: individual needs of victims of war and political agendas rarely are congruent. Indeed, the desire to return to some idea of "normal" (usually perceived as "the before") in the wake of whatever kind of crisis usually turns out to be a futile and unrealistic attempt.

Epilogue

This book developed over the course of a decade, from 2015 to 2025. As is rarely the case with a history book, the story of this one – a story of migration, psychological rehabilitation in the wake of war, the evolution of the postwar global order, the politics of psychology, and the political instrumentalization of (historical) trauma, and human resilience – matters more than ever.

In 2015, when the idea for this book was conceived, Europe, and especially Germany, witnessed the highest rates of refugees since 1945.[1] This watershed moment was surpassed in 2022, the year when the PhD thesis that is the basis of this book was finalized: According to the United Nations High Commissioner of Refugees, the Russian invasion of Ukraine caused the "fastest and one of the largest forced displacement crises since World War II."[2] A war on European soil incited a discourse surrounding the nature and extent of Ukraine's support against Russian aggression that continues to challenge the very basis of the postwar global order with its multilateral institutions, agreements, and understandings of global power dynamics.

In 2025, this book sees the light of day. Eighty years after World War II ended, the Middle East is entrenched in the most violent iteration of war to date. In response to a brutal attack by Hamas in Southern Israel on October 7, 2023 in which more than 1,000 were killed, raped, and abused, and 251 were taken hostage[3], Israel, heavily supported by the US and Germany, has been waging a merciless war against Palestinians in Gaza and the West Bank. By the time of writing, 45,000 Palestinians[4] were killed, the vast majority of them being children and women.

This war reverberates globally. The world is divided into those who defend Israel's actions, guided by the maxim "never again is now,"[5] those who call the pro-

1 "20 June 2016 'Unprecedented' 65 million people displaced by war and persecution in 2015," https://refugeesmigrants.un.org/%E2%80%98unprecedented%E2%80%99–65-million-people-displaced-war-and-persecution-2015-%E2%80%93-un, accessed 22 February 2025.

2 United Nations High Commissioner for Refugees, "UNHCR: Global Displacement Hits Another Record, Capping Decade-Long Rising Trend," https://www.unhcr.org/news/press/2022/6/62a9d2b04/unhcr-global-displacement-hits-record-capping-decade-long-rising-trend.html, accessed 15 July 2022.

3 "How Many Hostages are Left in Gaza?", *Associated Press News*, 24 February 2025, https://apnews.com/article/israel-hostages-hamas-ceasefire-gaza-bc81ab899aed78a90a5ff42088b0f79d, accessed 9 March 2025.

4 "Nothing More than 45,000 Palestinians Have Been Killed in Gaza, Assistant Secretary-General Tells Security Council 'Ceasefire Is Long Overdue,'" https://press.un.org/en/2024/sc15944.doc.htm, accessed 22 February 2025.

5 "Never again" is now!", https://www.bmi.bund.de/SharedDocs/kurzmeldungen/EN/2023/11/9nov23.html, accessed 22 February 2025.

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portionality of Israel's response into question, and those who denounce Israel's right to exist in the first place. In the global theater of discourse, Israel's war on Gaza has become yet another crucible of already existing fault lines, albeit with the potential of inciting division on a global scale, as the US war on Vietnam did. The war on Gaza is being discussed through the lens of global allegiances, the failure of multilateral systems, the toothlessness of its jurisdiction, the ancient pressure cooker of Middle East geopolitics, and as yet another fault line of the Global North and the Global South.

In this newest iteration of the war between Palestine and Israel, history is routinely invoked. In the face of a pervasive national feeling of existential threat, brought on by the traumatic events of October 7, the Israeli right-wing government and parts of the population conflate the attack of October 7, 2023 with the Holocaust,[6] with Premier Benyamin Netanyahu calling Hamas "the new Nazis."[7] The fate of the very people this book is about – the survivors of the Holocaust – is used to warrant a merciless war on the Palestinian people. In a stroke of historical distortion, Israel's (former) defense minister used language reminiscent of the Nazis when he called Palestinians "human animals."[8] His army went on to act accordingly.

The instrumentalization of the past as a means to legitimize a war in the present also extends to those who ally with Israel. In Germany especially, the past is often evoked to defend Israel's actions in the present: Since Jews were victims of a Genocide perpetrated by the Germans, their actions must be supported, no matter their extent and gravity. While atonement of perpetratorship is paramount in going forward, this case shows how it can lead to complicity.

On the other side, a generation of Palestinians have lost everything, and the trauma of what they experienced will reverberate through generations to come, leaving the region ripe with trauma and destruction, with little prospect of peaceful cohabitation.

Alas, the very piece that is central in this book and in the rehabilitation of survivors of trauma is missing on all sides: Empathy. Or, as 15-year-old survivor Michal

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6 "Poll: Over Half of Israeli Jews See Comparison between Holocaust and October 7," *The Times of Israel*, 6 May 2024, https://www.timesofisrael.com/poll-over-half-of-israeli-jews-see-comparison-between-holocaust-and-october-7/, accessed March 9, 2025.

7 "Netanyahu: ICJ's handling of false genocide claims against Israel shows Holocaust lessons not learned," *The Times of Israel*, 27 January 2024, https://www.timesofisrael.com/liveblog_entry/netanyahu-icjs-handling-of-false-genocide-claims-against-israel-shows-holocaust-lessons-not-learned/, accessed 9 March, 2025.

8 https://www.youtube.com/watch?v=ZbPdR3E4hCk, accessed 22 February 2025.

Kraus asked the question that has the potential to stop all the division in its tracks: "Who can feel with us?"[9]

Global discourse shows the hypocrisy of a tilted approach of empathy, where one group of victims are displayed as more worthy than the other. The global court of opinion seems unable to both feel with families who lost loved ones on October 7, who are still waiting for friends and family taken hostage to be returned, and acknowledge the inhumane and unspeakable horrors the Palestinians endure every day. As is the case in most conflicts, history is being used to underline the inevitability of the respective strategies.

In the current climate we are forced to take sides, and so we feel forced to choose which side to be empathetic with – deciding "who to feel with."

As respected scholar Marianne Hirsch put it aptly, "We must be aware of how the inherited trauma we have ourselves studied and theorized can make it difficult to perceive and acknowledge larger contexts and the suffering of those deemed "other.""[10] The focus on the victimization of one side can lead to violence on the other. The antidote for this may lie in what Michal Kraus has understood empirically: Empathy as the remedy for division. Always looking for common ground, never forgetting our shared humanity. The legacy of the Holocaust, of any violent event, must be not one of weaponization for more war and division but one of responsibility to prevent more violence.

And so, the story of this book remains as current as ever: In a world implying that we are forced to choose sides – deciding "who to feel with" – we must confront the fact that in this, Sigmund Freud was right: Trauma is history that isn't over. The only way to counter division, hatred, and war is by reframing our narratives, ensuring that empathy is extended not selectively but is employed as a universal guiding light. Only then can we work towards transforming the pain of history into a shared responsibility for the future.

9 Michal J. Kraus, "Introduction to Michael J. Kraus 'Diary,'" Michael J. Kraus Papers (United States Holocaust Memorial Museum Archive, 1945), 1.

10 Marianne Hirsch, "Rethinking Holocaust Memory after October 7," https://www.publicbooks.org/rethinking-holocaust-memory-after-october-7/, accessed 22 February 2025.

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1 Robert A. Winkler, *Generation Reagan Youth: Representing and Resisting White Neoliberal Forms of Life in the U.S. Hardcore Punk Scene (1979–1999)*, CAT – Cultures in America in Transition 11 (Trier: WVT Wissenschaftlicher Verlag Trier, 2021), 1.

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Abbreviations

DPs	Displaced Persons
IAPSG	Inter-Allied Psychological Study Group
IMHM	International Mental Hygiene Movement
JDC/Joint	Jewish Joint Distribution Committee
LoN	League of Nations
NYPSI	New York Psychoanalytic Society and Institute
SHAEF	Supreme Headquarters of the Allied Expeditionary Force
UNRRA	United Nations Relief and Rehabilitation Administration

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Glossary

Aliyah	Jewish immigration to Palestine
Brichah	Clandestine immigration to Palestine before foundation of Israeli state May 1948
Eretz Israel	Eretz Israel, or Eretz Yisrael is the expression used to describe the Land of Israel, as it was promised by God to the Jewish people
Hakhsharot	Zionist training farms
Kibbutz(im)	Zionist communal settlement/farm
Ma'apilim	Jews who immigrated illegally to Palestine during British control in the 1930s and 1940s
Madrichim	Zionist youth leader
Yishuv	Jewish population in Palestine under British control
UNRRA	United Nations Relief Rehabilitation Administration
DPs	Displaced Persons
UNHCR	United Nations High Commissioner for Refugees

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