

Navigating Life Review Interviews with Survivors of Trauma

by Mark Klempner

I'm sitting with a Holocaust survivor listening to her recount the murder of her entire family. To hear about such devastation is difficult. I go blank and numb, not knowing how to respond to suffering of such magnitude. I feel cheap somehow, that I am hearing these things so casually, that is, upon having just met her. In these few seconds, as the depth of her loss continues to sink in, I say, "These must be very painful memories for you." Her response sounds dissonant and almost bizarre: "It's not very pleasant," followed by a cheerful laugh. I feel a sinking sensation as she explains to me that it came at a "perfect" time since she was already seventeen and would have soon left home anyway.

Conducting a life review interview with a person who has experienced severe trauma presents many dilemmas.¹ What if hearing the narrative is overwhelming to the interviewer? What if telling the narrative puts the interviewee at risk emotionally? Are there special responsibilities interviewers must assume when they are taken into the confidence of someone who recounts traumatic memories? How must an interview involving such memories be conducted differently from an ordinary interview?

Mark Klempner has recently completed the graduate program in folklore at the University of North Carolina at Chapel Hill. He is currently writing a book about Dutch people who rescued Jews during WW II. He would like to thank Michael Frisch, James McConkey, Alicia Rouverol, and Kathy Walpert. And special thanks to Dori Laub for reading and commenting on the manuscript.

¹ Psychologist Charles R. Figley, summarizing the diagnostic criteria of the American Psychiatric Association, explains that "a traumatic event occurs when a person experiences an event outside the range of usual human experience that would be markedly distressing to almost anyone: a serious threat to one's life or physical integrity; serious threat or harm to one's children, spouse, or other close relatives or friends; sudden destruction of one's home or community; or seeing another person seriously injured or killed in an accident or by physical violence." *Burnout in Families: The Systemic Costs of Caring* (New York: CRC Press, 1998), 7.

John Robinson, writing on narrative in the *Journal of American Folklore*, notes that many narratives of trauma are never told because “such experiences produce shame, anger, often guilt in the victim, and are regarded as secrets rather than as stories to tell.” He adds, “Such narratives may be qualitatively different in structure and function from more conventional and public narratives.”²

The growing body of research that specifically addresses the issues of trauma narrative tends to confirm Robinson’s conjectures. Within psychology, the rapidly developing field of traumatology, the study of traumatic stress, displays a marked concern with narrative as a resource in diagnosis and an arena for therapeutic intervention.³ Much qualitative research has been undertaken with those who were traumatized as soldiers, such as Vietnam veterans.⁴ Other work has been done with women who have been abused through rape and battering. By drawing extensively on their narratives, researchers have attempted to unravel the skein of shame and stigma that often characterizes such trauma.⁵

At the same time, there are over thirty ongoing oral history projects being carried out by Holocaust organizations throughout the world to record the narratives of survivors and witnesses.⁶ In the early 1970s, Professor Yaffa Eliach began to record survivor testimony for the purpose of filling gaps in the historical record. Her *Center for Holocaust Studies* in New York now contains a growing collection of over 2,000 audio interviews. The *Fortunoff*

² John A. Robinson, “Personal Narratives Reconsidered,” *Journal of American Folklore* 94, no. 371 (1981), 63.

³ See Rolf J. Kleber, ed., *Beyond Trauma: Cultural and Societal Dynamics* (New York: Plenum Press, 1995); Mary Beth Williams and John F. Sommers, *Handbook of Post-Traumatic Therapy* (Westport: Greenwood Press, 1994); Gerald D. French and Chrys J. Harris, *Traumatic Incident Reduction (TIR)* (New York: CRC Press, 1999).

⁴ See H. W. Chalsma, *The Chambers of Memory: PTSD in the Life Stories of U.S. Vietnam Veterans* (London: Jason Aronson, Inc., 1998); Jonathan Shay, *Achilles in Vietnam: Combat Trauma and the Undoing of Character* (New York: Atheneum, 1994); L. Lewis, *The Tainted War: Culture and Identity in Vietnam War Narratives* (Westport: Greenwood, 1985); Robert Jay Lifton, *Home from the War: Vietnam Veterans: Neither Victims nor Executioners* (New York: Simon & Schuster, 1973).

⁵ Highly recommended are Inger Agger, *The Blue Room: Trauma and Testimony among Refugee Women, A Psycho-Social Exploration* (London: Zed Books, 1994); Judith Herman, *Trauma and Recovery: The Aftermath of Violence, from Domestic Abuse to Political Terror* (New York: Basic Books, 1992).

⁶ William Shulman, ed., *2000 Directory: Association of Holocaust Organizations* (New York: Holocaust Resource Center and Archives, 2000).

Video Archive currently houses a collection exceeding 3,800 videotaped interviews.⁷ Originally known as the *Holocaust Survivor's Film Project*, it was founded in 1979 by Dori Laub, Associate Clinical Professor of Psychiatry at Yale University, and Laurel Vlock, a television specialist.

In 1994, Stephen Spielberg, using revenues generated by *Schindler's List*, launched the massive *Shoah Visual History Foundation*.⁸ The mission of this conspicuous project seems to be to preserve the testimony of all living Holocaust survivors. To date, the Foundation has collected over 50,000 testimonies in 57 countries, with interviews conducted in 32 languages. It plans eventually to make its digitized collection available to various history museums and archives.

Concurrently, the curricula for middle school and high school in the United States includes the Holocaust, and some teachers are engaging their students in oral history projects involving survivors, or are inviting survivors into the classroom to share their testimony.⁹ At colleges and universities, scholars within the newly established discipline of Holocaust studies are rapidly producing a literature based on recorded survivor testimony, which offers new perspectives on trauma narrative.¹⁰

My own involvement with trauma narrative came as a result of my interviews with thirty Holocaust survivors as part of a research project conducted under the auspices of the Institute for European Studies at Cornell University in cooperation with Y'ad Vashem in Israel. In this article I will explore what took place at certain critical moments in the interview process when the intensely emotional nature of the encounter came to the fore and I found myself and my interview subjects responding in unanticipated and sometimes disturbing ways. To assist me in an analysis of the underlying issues involved in such occurrences, I will utilize

⁷ <http://www.library.yale.edu/testimonies>

⁸ <http://www.vhf.org/>

⁹ Facing History and Ourselves Foundation (16 Hurd Road, Brookline, MA 02146) teaches secondary school teachers how to teach the Holocaust. They have produced *Elements of Times*, a very readable overview of different perspectives on Holocaust testimony. (<http://www.facing.org>)

¹⁰ See James Young, *Writing and Rewriting the Holocaust* (Bloomington: Indiana University Press, 1988); Lawrence Langer, *Holocaust Testimony: The Ruins of Memory* (New Haven: Yale University Press, 1993); Efraim Sicher, ed., *Breaking Crystal: Writing and Memory After Auschwitz* (Champaign: University of Illinois Press, 1998).

a theoretical model framed by Dori Laub. Dr. Laub, an authority on traumatology as well as an applied oral historian, has achieved a perspective that spans both disciplines. As a Holocaust survivor who devotes his private practice to treating other survivors, he has become adept at spanning emotional worlds as well. In my fitful struggles to work through the emotional issues which arose in the course of my fieldwork, his writings spoke eloquently to my need for a practical yet profound approach. All the passages I will be using from Dr. Laub are excerpted from the book *Testimony: Crises of Witnessing in Literature, Psychoanalysis, and History*, which he co-authored with Shoshana Felman.¹¹

The recounting of a trauma narrative can be a psychically-charged event entailing great vulnerability. Unlike ordinary narratives, trauma narratives almost always engage the narrator in an attempt to find closure. Closure is signaled by a sense of completion, the feeling that one does not *have* to dwell on the distressing event from the past. It is experienced as a resolution which allows the event to become integrated into the psyche. However, it may come in increments, and the concept is best conceived of in a flexible way, allowing for the many different ways and degrees it can manifest.

Those who conduct life review interviews sometimes sense their interviewees attempting to come to terms with experiences from their past.¹² However, survivors of trauma encounter a special challenge. In the view of Dori Laub, people who undergo severe trauma are unable to register such experiences for they exceed “the human cognitive capacity to perceive and to assimilate the totality of what was really happening at the time.”¹³ As he explains:

The victim's narrative—the very process of bearing witness to massive trauma—does indeed begin with someone who testifies to an absence, to an event that has not yet come into existence . . .

¹¹ New York: Routledge, 1992. Other authoritative voices within the field of traumatology include Charles R. Figley, ed., *Trauma and Its Wake*, Volume I and II (New York: Bruner/Mazel, 1985 and 1986); Inger Agger, *The Blue Room*; Cathy Caruth, *Unclaimed Experience: Trauma, Narrative, and History* (Baltimore: Johns Hopkins University Press, 1996); *Trauma: Explorations in Memory* (Baltimore: Johns Hopkins University Press, 1995).

¹² Robert N. Butler, “The Life Review: An Interpretation of Reminiscence in the Aged,” *Psychiatry*, 26 (1963), 65–76.

¹³ Laub and Felman, 84–85.

the trauma—as a known event and not simply as an overwhelming shock—has not been truly witnessed yet, not been taken cognizance of. The emergence of the narrative which is being listened to—and heard—is, therefore, the process and the place wherein the cognizance, the “knowing” of the event is given birth to.¹⁴

Laub’s conceptions give tremendous importance to the listener, and he goes so far as to say that the listener becomes a “participant,” even a “co-owner” of the traumatic event. In Laub’s therapeutic framework, healing of the trauma lies in the victim’s act of narrating the event. In the excerpt that follows, he capsulizes the dilemma the survivors face, and outlines, as he sees it, the process through which healing can occur:

Trauma survivors live not with memories of the past, but with an event that could not and did not proceed through to its completion, has no ending, attained no closure, and therefore, as far as its survivors are concerned, continues into the present and is current in every respect. The survivor, indeed, is not truly in touch either with the core of his traumatic reality or with the fatedness of its reenactments, and thereby remains entrapped in both.¹⁵

To undo this entrapment in a fate that cannot be known, cannot be told, but can only be repeated, a therapeutic process—a process of constructing a narrative, of reconstructing a history and essentially of *re-externalizing the event*—has to be set in motion.¹⁶ This re-externalization of the event can occur and take effect only when one can articulate and *transmit* the story, literally transfer it to another outside oneself and then take it back again, inside. Telling thus entails a reassertion of the hegemony of reality, and a re-externalization of the evil that affected and contaminated the trauma victim.¹⁷

As oral historians we are not psychotherapists, yet we hear narratives as miasmatic as any that might surface in a therapist’s office. Our interview subjects may never visit a psychiatrist, yet they *will* talk to us, and, in some cases, disclose things they have never shared with another human being. Any attempt at carrying out a life review interview with a survivor of trauma puts the interviewer in a position where he or she may precipitate the re-

¹⁴ Laub and Felman, 57.

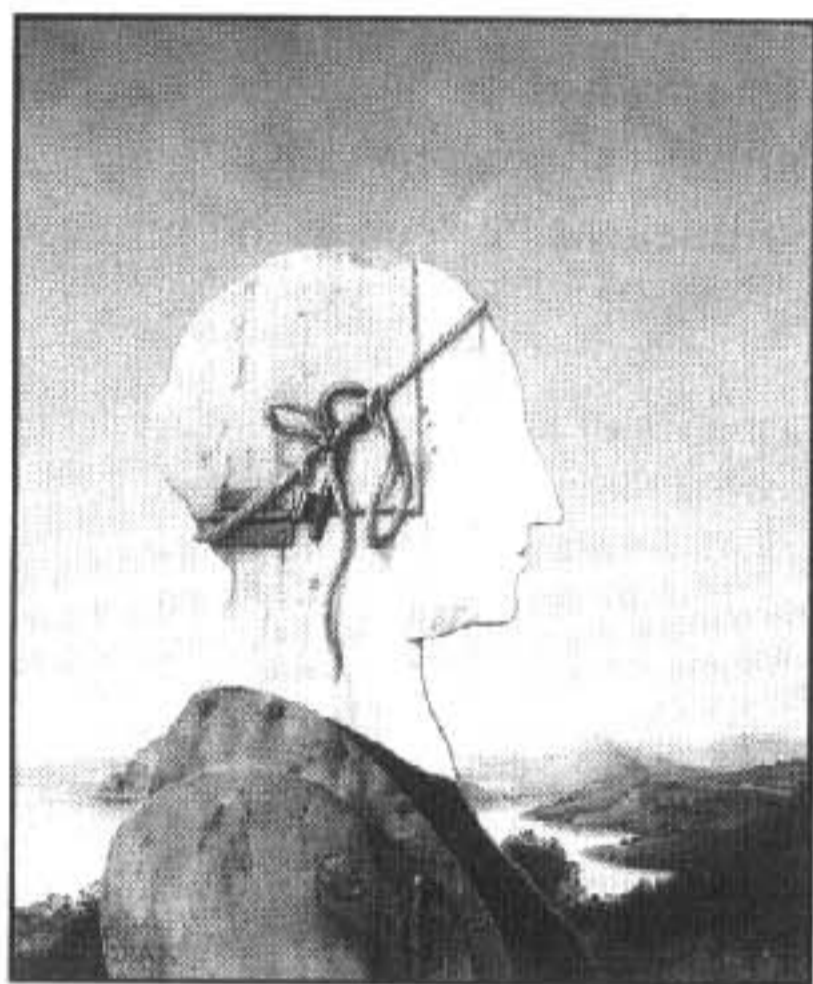
¹⁵ Laub and Felman, 69.

¹⁶ See Linda Williams and Victoria Banyard, eds., *Trauma and Memory* (Thousand Oaks: Sage Publications, 1999).

¹⁷ Laub and Felman, 69.

externalization of the event. As the survivor thus processes a piece of the trauma, the atmosphere of the interview becomes charged, and may trigger unexpected emotional reactions, both in the narrator and in the interviewer.

The term “re-externalization” may require some explanation, as Laub seems to be using it in an idiosyncratic way. The event



Descendents II. Oil painting by Samuel Bak. Courtesy of Pucker Gallery, Boston, Massachusetts.

was originally external, but the trauma victim “took it in,” that is, internalized the traumatic event. Through the therapeutic process of constructing a narrative and telling it to a listener, the event may be externalized once again, that is, re-externalized. In the process, its meaning changes, due in part to the empathy of the listener and the safety of the setting in which the narrative is shared. This allows for a re-evaluation of the event by the narrator. The listener contributes to this process, even if no words are spoken. As Laub explains, the victim may have felt

personally responsible for the traumatic event, or guilt over it having happened. Re-externalization means that one “puts it back into the outside world where there is a perpetrator who one has not provoked, and who has carried out the atrocity, and should be held responsible and guilty for it. And it is no longer in one’s personal domain. There can be anger directed at the perpetrator, and no sense of guilt or responsibility for having taken part in it. It is making it into an objective outside event at a certain time in history.”¹⁸ What is implied here is that by telling the narrative, the traumatic event becomes drained of some of its toxicity. The teller may then “take it back again, inside” in a new version with a new frame. Of course, the memory can never become completely “objective,”

¹⁸ Personal communication with the author, 9/2/99.

yet some of the distortions that tend to characterize traumatic memory can be undone.¹⁹

Both of the interview subjects I quote below, Gertrude P. and Martine N., are Holocaust survivors who immigrated to the United States after the war. Both are articulate and well educated. Martine was a social worker and child psychologist, while Gertrude had a prestigious career in the arts. They have been interviewed previously by staff from the United States Holocaust Memorial Museum and have clearly done a lot of thinking, feeling, talking, and processing regarding the traumatic experiences they went through during World War II. Still, there was a lot of emotional intensity to the interviews which I conducted with them; neither one found them “easy.”²⁰

Both interviewees made reference to the effects of the trauma. Martine N. spoke several times about having “holes in her memory.” I asked her what she meant:

MN: What I mean is that there are some things I have no memory of.

MK: Do you think you’ve forgotten them, or have you blocked them out?

MN: No, I think there are some things I have blocked out because they were very painful. This happened to all of us—

MK: Do you have any idea why that is?

MN: We have a comfort zone with the kind of memories we live with. You know, people were dying around me. When I distributed food in this cabin, we had bread and we divided it in eight parts and put it on the table. People were so starved they would rush and try and grab the biggest piece. We put numbers on these eight parts; it was like a lottery so that people wouldn’t fight over it. A piece of bread! I handed a piece of bread one day to a man, and he fell back in the bed and he was dead. That I remember, other things I don’t. It’s very painful memories of this experience.

Gertrude P. did not make mention of having blocked things out, but she exhibited another common characteristic of the

¹⁹ Thank you to Lisa Bennett for her help with this interpretation. Laub’s conception of re-externalization parallels what Elisabeth Kübler-Ross refers to, more simply, as “externalization.” See Kübler-Ross, *Working it Through* (New York: Macmillan, 1982).

²⁰ Pseudonyms were used to safeguard the privacy of the interviewees. The original interview cassettes recorded in December 1997 remain in my possession as each of the women requested they not be archived or used for purposes other than my research.

trauma survivor, which comes through in the following excerpt. This is the point in the interview that I described at the opening of this article. She had been recounting her early childhood in Germany: what it was like to be a Jewish girl growing up there during the 1920s. I had been asking her about her relationship with her family, which included her father and mother, maternal grandmother, and sister. She went on to say that when anti-Semitism reached a certain level, her father moved the family out of Germany and into the Netherlands. Seven years later, during World War II, the Germans occupied the Netherlands.

GP: Well, you know, we were there and I came in '33, and it took seven years 'till the Germans walked in, so we had seven years. My father sort of "saved" seven, eight years of life. And then of course when the Germans came into Holland they did get taken away and they died in Auschwitz. My parents and my sister. And my grandmother died in Bergen-Belsen—.

MK: I'm sorry.

GP: And I managed to escape. By that time I was seventeen. This was two years—. When the Germans walked in I was fifteen and when all this disaster happened I was seventeen. And so—.

MK: These must be very painful memories for you.

GP: It's not very pleasant. [Laughs] But it has, you know, I was very lucky because seventeen was perfect. Eighteen would have been better, but, you know, seventeen already I was a person; I probably would have left home at eighteen, you know? I had many friends my age, a little bit older, like up to three years older, and I often think, if I had been younger it would have been much harder. I would have been handed from one person to the other.

A key to understanding both my behavior and her behavior can be found in Terrence Des Pres' essay, "Holocaust Laughter?":

The testimony of survivors often requires a detachment that keeps them at a distance from self-pity, whereas for us the pathos of their stories, and sometimes the mere telling of such stories, is nearly overwhelming.²¹

Des Pres articulates one of the primary disparities that arises during interviews with people who have experienced severe

²¹ Terrence Des Pres, "Holocaust Laughter?," in *Writing and the Holocaust*, ed. Berel Lang (New York: Holmes and Meier, 1986), 229–230.

trauma. The survivor has somehow managed to cope with what has happened, and recounts it in a way that utilizes these coping mechanisms. The interviewer gets to hear the recounting of experiences involving a tremendous amount of suffering, often told in a way that is either without any emotion, or with seemingly inappropriate affect. At the same time, the interviewer experiences his or her own emotional reactions to the events recounted.

There are several points to be made here. One is that our interviewees will have defense mechanisms in place that might make their responses sound strange or “off.” We have to be prepared for that, even expect it. The second point is that the interviewer, not having been through the trauma, does not have such defense mechanisms in place. Hearing the traumatic material could invoke acute emotional reactions. Because the interviewer does not have the defensive structures, and the interviewee does, a situation might arise where the interviewer begins to feel acute distress while the interviewee maintains apparent composure.

In other cases, the coping mechanisms of the narrator are not so strong, and his or her emotions and vulnerability are more on the surface. I felt this to be the case with Martine N., who talked to me about her experiences as a young Jewish woman in Nazi-occupied France. At a certain point during the war, after having secured excellent false identification papers which represented her as being of Aryan descent, she became involved in taking care of Jewish children whose parents had been deported to concentration camps. She worked with many children during the war, mothering them, educating them, organizing activities for them, and trying to help them cope during this difficult period. When liberation came and the war ended, she was given support to open a children’s home. In the excerpt that follows, she tells me about the great opportunity that the home presented:

We got *carte blanche* to establish this magnificent home for pre-school age children. And, um, at the same time, the girls, the staff, looked after the kids, we trained them as early childhood educators so that they would be able to go and work with the children. We little by little—. But we didn’t know just what happened to the parents. And it’s not until [begins to cry]—. This is always the hardest part. [Pauses.] It’s not until the allies actually got to the concentration camp that we could find out what happened to the parents. We had had rumors, but it was so horrible that nobody could really—. And it’s only then that we really found out what happened. And we

had to help the children get over this. I remember in Paris having these young children, and having a Montessori atmosphere for them and training these teenage girls, and having a birthday party for this little boy and giving him some presents. And he got so angry, he says, "I don't want any of your presents. I want my mommy and my daddy."

The way an interviewer responds—verbally and nonverbally—during moments like these is critical. The less guarded the narrator, the more careful the interviewer has to be. Empathy, "the capacity to put oneself into the psychological frame of reference of another and thereby understand his or her thinking, feeling, and behavior," is essential.²² Martine N. had this to say about her early experiences of trying to talk to others about what she had gone through during the war:

I really felt that people didn't understand it. I felt like people in the United States could not empathize, could not understand. Their questions put me on edge. It was very difficult.

I would like to explore further the vulnerability of the interviewer. Hearing a person talk about trauma can stir up nearly every fear to which human beings are subject. In her book *Living Beyond Fear*, psychologist Jeanne Segal discusses fear and summarizes the basic fears human beings experience:

Fear is a bottom line emotion . . . and the source of compulsive and numbing behaviors. It's the good reason behind our reflexive and protective patterns. What do we protect ourselves from? What do we fear? We fear the loss of love, the loss of purpose and meaning in our lives, we fear physical degeneration, disease, loss of energy. We fear pain. We fear the loss of our loved one, loss of status, loss of job, loss of material possessions, especially if we believe that our identity is attached to these things. We fear being wrong, looking foolish, being stupid. We fear the loss of control, the possibility of insanity. We fear death. We fear the unknown, the uncertain, and the untried. We fear life—its unpredictability, and its responsibility.²³

All trauma victims have experienced some or all of these things, and when we talk to them we sense in a very direct way that these things could happen to us as well. Perhaps one definition of

²² Harold Kaplan and Benjamin Sadock, *Synopsis of Psychiatry*, 7th ed. (Baltimore: William and Wilkins, 1994).

²³ Jeanne Segal, *Living Beyond Fear* (New York: Ballantine, 1989).

trauma could be the realization of one's worst fears, the experiences that every human being would never want to have.

Dori Laub approaches this same issue of the vulnerability of the listener in a more philosophical way:

There are hazards to the listening to trauma. . . . As one comes to know the survivor, one really comes to know oneself; and this is not a simple task. The survival experience . . . is a very condensed version of most of what life is all about. . . . The listener can no longer ignore the question of facing death; of facing time and its passage; of the meaning and purpose of living; of the limits of one's omnipotence; of losing the ones that are close to us; the great question of our ultimate aloneness; our otherness from any other; our responsibility to and for our destiny; the question of loving and its limits; of parents and children; and so on.²⁴

I find it interesting that some of the items on Laub's list are also found on Segal's. It appears that we fear the existential questions, and the existential questions are bound up with some of our deepest fears.²⁵

In his essay, Laub implies that it is a valuable process to face these questions, and Segal, in her book, affirms that fear can be harnessed and used as a positive force. In an interview situation, the presence of strong emotions such as fear might help the interviewer to empathize with and understand the speaker. Problems arise, however, when the interviewer has defensive reactions in an effort to protect himself or herself from the "onslaught of the images of trauma," and the intensity of emotion those images generate. Laub lists six defensive positions to which the listener might succumb.²⁶ Two of them are obviously fear-driven:

- A sense of total paralysis, brought about by the threat of flooding—by the fear of merger with the atrocities being recounted.
- A flood of awe and fear; we endow the survivor with a kind of sanctity, both to pay our tribute to him and to keep him at a distance, to avoid the intimacy entailed in knowing.

²⁴ Laub and Felman, 72.

²⁵ Roger Perilstein, M.D. informs me that a more accurate word than "fear," according to psychiatric terminology, would be "anxiety."

²⁶ Laub and Felman, 72–73.

If we are to concur with Jeanne Segal that fear is at the root of compulsive and numbing behaviors, then two more of Laub's defensive positions could be considered fear-driven:

- A sense of total withdrawal and numbness.
- Foreclosure through facts; through an obsession with fact-finding; an absorbing interest in the factual details of the account which serve to circumvent the human experience. Another version of this foreclosure, of this obsession with fact-finding, is a listener who already "knows it all," ahead of time, leaving little space for the survivor's story.

Laub lists projected anger as another defensive position:

- A sense of outrage and of anger, unwittingly directed at the victim—the narrator. When we meet a friend who has a malignant disease, we often feel angry at that person. We are torn apart by the inadequacy of our ability to respond properly, and inadvertently wish for the illness to be the patient's responsibility and wrongdoing.

This kind of projection often operates with much greater subtlety than Laub describes, although it can be at least as pernicious. Catharine MacKinnon gives an example in her analysis of the Clarence Thomas–Anita Hill hearings:

What happens when you put the real language of sexual abuse in a Senate confirmation hearing? It is a lot like putting a videotape of your rape in your rape trial. It, and you, are treated as if you do not belong, as if you pulled down your pants and defecated in public. You are lowered by proving your injury. He is not. He allegedly said these things. If they were said, they were *his* words. She said them in quotation marks. But it is the woman to whom they are attributed when she speaks them. When she says them, it is believed they are true *of her* somehow, but not believed of him. Senator Grassley called it "an offensive story." Elise Norville, a radio commentator, "left feeling dirty somehow." President Bush "felt unclean watching it." The offensiveness, the dirt, the uncleanness stick to the woman, the woman of color in particular.²⁷

²⁷ Catharine MacKinnon, *Only Words* (Cambridge: Harvard University Press, 1993), 65–66. See also Judith Herman, *Trauma and Recovery*, 2, who writes "To speak publically about one's knowledge of atrocities is to invite the stigma that attaches to victims." I have not been able to find any writings that address gender issues in interviewing. Regarding

MacKinnon's point has to do with feminism and sexual politics, but the excerpt expresses how negative feelings such as shame can—in the mind of the listener—attach themselves to the person recounting a traumatic event. The speaker—whether in a courtroom setting or during a life review interview—can become the repository of the negative emotions that the narrative evokes in the listener. Though counselors are sensitized to the phenomenon of blaming the victim, oral historians need to be as well.²⁸

Another listener reaction MacKinnon discusses in reference to the Anita Hill hearings is denial. Denial can be a protective mechanism against fear, anger, outrage, and possibly other emotions:

We heard the spoken voice of a woman uttering the sounds of abuse, the moment in which silence breaks on the unspeakability of the experience, the echo of what had been unheard. Much of the response was disbelief, the reaffirmation of the silence of “nothing happened,” the attempt to push the uncomfortable reality back underground through pathologizing dismissal.²⁹

Oral historians are not politicians or lawyers. Yet, this same mechanism of denial can take place in interviews conducted by oral historians. Lawrence Langer gives an example from a videotaped interview with a Holocaust victim who had survived two deportations to Auschwitz. The interview was conducted for the Fortunoff Video Archive by trained interviewers from Yale University. The following is Langer's own transcription of one segment of a videotaped interview:

Interviewer: You survived because you were so plucky. When you stepped back . . .

Hanna F: No, dear, no dear, no . . . no, I had no . . . [*meanwhile, the two interviewers are whispering with each other audibly off-screen about this exchange, ignoring the survivor, who wants to reply*]—how shall I explain to you? I know that I had to survive; I had to survive, even running away, even being with the people

the many issues involved in interviewing those of other ethnicities and cultures see C.E. Vontress, “Racial and Ethnic Barriers in Counselling,” in P.B. Pederson, J.G. Draguns, W.J. Lonner and J.E. Trimble, eds., *Counselling Across Cultures*, revised and expanded edition (Honolulu: University Press of Hawaii), 87–107; Derald and David Sue, *Counseling the Culturally Different* (New York: J. Wiley & Sons, 1999).

²⁸ For this I would suggest turning to the extensive literature on counseling victims of sexual abuse, i.e. Ann Burgess, ed., *Rape and Sexual Assault: A Research Handbook* (New York: Garland Press, 1985).

²⁹ Catharine MacKinnon, *Only Words*, 65.

constantly, especially the second part, the second time, being back in Auschwitz. This time I had determined already to survive—and you know what? It wasn't luck, it was stupidity. *[At this moment, the two interviewers laugh deprecatingly, disbelievingly, overriding her voice with their own "explanation," as one calls out, "You had a lot of guts!"]*

Hanna F.: *[simultaneously]*: No, no, no, no, there were not guts, there was just sheer stupidity. No . . . *[More laughter from the interviewers, one of whom now stands up between camera and survivor, blocking our vision, silencing her voice, terminating the interview. Why?]*³⁰

In this case, the interviewer refuses to “admit” what the interviewee is saying. It is too threatening, too disruptive, too fear-producing, or anger-provoking for the interviewers to really *listen* to and accept what Hanna F. is saying. As a result, their frame overpowers her frame and, since the interviewers are in control, they cut the interview short.

I have never felt the need to resist my interviewees so vigorously, but I have enough investment in my expectations to understand how this kind of thing could take place. In my interview with Gertrude P., I wanted her to give me a profound and meaningful answer to the question “What did you learn from the war?” Instead I got a long and somewhat eerie peal of laughter, followed by the sobering comment, “You don't learn from a war.” I tried again, asking the question in another way, but eventually dropped the line of inquiry, accepting that, at least for this individual, the war provided no lessons, possessed not a shred of redeeming value.

Dori Laub's final category in his list of defensive positions is an interesting one:

- Hyperemotionality which superficially looks like compassion and caring. The testifier is simply flooded, drowned and lost in the listener's defensive affectivity.

I suppose that he means that the interviewer becomes so emotionally expressive—crying perhaps—that the interview is derailed. No doubt the interview subject reacts to the interviewer's emotional expression, probably in kind. The implication is that by a display of emotion, the one who asks the questions is able to

³⁰ Lawrence Langer, *Holocaust Testimonies: The Ruins of Memory* (New Haven: Yale University Press, 1991), 63–64. The original video is #HVT-18 in the Fortunoff Video Archive for Holocaust Testimonies, Yale University.

escape the uncomfortable experience of having to listen to the answers. I have witnessed this in romantic relationships, so I surmise it is possible in an interview setting as well. I would add that there are other ways for interviewers to get away from material that makes them uncomfortable. A not-so-subtle example took place during my interview with Gertrude P.

At one point she was telling me about what happened in her Jewish neighborhood when the Germans marched into the Netherlands. To give some context as to what this information meant to me, I was well aware of criticism—both within and outside Jewish circles—that many Jews went to their death “like lambs.” My grandfather had ten brothers, all of them rabbinical students, who perished in Hungary during the Nazi occupation. I always pictured these kin as being too wrapped up in reading the Torah and performing *mitzvahs* to have mounted a militant offensive. I had heard stories of Jews about to be shot who meekly recited the *shema* as they stood in front of the trenches that would become their graves, trenches that they themselves had been forced to dig. But I had never heard of mass suicide within the Jewish community in response to the arrival of the German army. This disturbing narrative took me by surprise and I suddenly wanted to change the subject. Gertrude P. would not let me. My emotional reaction and my defensive need to change the subject all occurred in less than half a minute.

GP: When the Germans walked in I was fifteen, and I remember standing at the window, we had a third floor apartment with double deckers, and we looked down and they were marching in singing. . . . And my father said to me, “Take care of your mother. They’re gonna get me tomorrow.” Because he was German, and he figured they’re coming but it took a year and a half or so, or more. OK, so I was fifteen and people were jumping off the balconies in the back, killing themselves right and left, and gassing themselves, and using gas, you know we had gas—

MK: These are Jewish people.

GP: And I remember standing in the back while they were bombing Rotterdam. You could hear the sound of the bombing of Rotterdam. Holland is so flat the sound carries.

MK: All the way in Amsterdam?

GP: Oh yeah.

MK: Really.

- GP: And, and, maybe a few bombs were dropped also close, but that's how I remember it; it might not be the truth. But—
- MK: Wh—I'm sorry to interrupt. When you left, you came to the United States? When you left the Netherlands you came straight here?
- GP: Yeah, I'll tell you how that happened. Anyway, we stood in the back there and we wanted to talk to our neighbors. And there were people screaming and crying and jumping off the balconies from the third floor and then there were people being revived who'd put their head in the oven, uh, or whatever, over the gas flame, and I kept saying to my father, "Why would he do that? Why would he do that?" My father, "Well, [unintelligible] terrible things *might* happen."

Clearly, an interview with a trauma survivor makes special demands on both interviewer and interviewee. The interviewer must be prepared—if necessary—to serve as a midwife in the narrator's ongoing attempt to attain closure in regards to the traumatic material. The interviewer must also be prepared for unusual defensive behavior in the narrator, as well as the possibility of extreme vulnerability and pathos. In addition, the interviewer must be aware of his or her *own* emotional reactions to the narrator and to the material. This leads to the question posed by Inger Agger: "How do we, supposedly the victims' helpers, contain their stories and simultaneously manage our own pain?"³¹ Interviewing a trauma survivor requires a greater degree of both sensitivity and sturdiness than is normally brought to a life review.³² The interviewer becomes a part of the trauma survivor's process by hearing the stories and being a witness to them. The narrator's emotional, mental, and spiritual well being must be put first, for it is never advisable to push for material that might lead to an internal re-enactment of the trauma rather than its re-externalization.³³

³¹ Inger Agger, *The Blue Room*, 5

³² Information available to therapists to assist them in these difficult processes may be well utilized by oral historians. Try Charles R. Figley, *Compassion Fatigue: Coping With Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized* (New York: Bruner/Mazel, 1995); Stuart D. Perlman, *The Therapist's Emotional Survival: Dealing with the Pain of Exploring Trauma* (London: Jason Aronson, Inc., 1999).

³³ Flashbacks and other such manifestations of dissociation are not unusual among people who have experienced severe trauma. At such times, "the person feels as if he or she is actually reliving the event and loses contact with their current environment, usually for a few seconds or minutes." Alan Stoudemire, *Clinical Psychiatry for Medical Students*, third edition (Philadelphia: Lippincott-Raven, 1998), 328.

The principle of reciprocity, of giving back to the interviewee, must be honored. In this case, if the interview is conducted with sufficient skill and sensitivity, it might be possible to give the narrator back a piece of his or her soul. Allowing the expression of the traumatic material in an atmosphere of empathy, free from distorted reactions, maximizes the possibility that some degree of closure will emerge out of the fragmentation and dissociation that trauma inflicts upon the human psyche.