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Vergissmeinnicht: An Inderdisciplinary Study of Holocaust Trauma Literature, Medical Experimentation Discourse, and Narratives of Denial

Tiffany Sidders
University of Central Florida

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VERGISSMEINNICHT: AN INTERDISCIPLINARY STUDY OF HOLOCAUST
TRAUMA LITERATURE, MEDICAL EXPERIMENTATION DISCOURSE,
AND NARRATIVES OF DENIAL.

by

TIFFANY SIDDEERS

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ABSTRACT

The use of Holocaust literature within education starts with *Anne Frank* and ends with Elie Wiesel's *Night*; however, the need for a more comprehensive understanding of the Holocaust starts with utilizing the literature to discuss the horrific events. The theories of trauma and affect are relatively new to Holocaust literature studies, which brings a lack of sources to the overall subject. Although there is a lack of sources, understanding trauma, denial, and affect relies on analyzing the written language. This thesis's significance is to detail the importance of Holocaust literature within education and to comprehend the effects denial has on significant genocidal events portrayed in literature. My thesis, *Vergissmeinnicht*, will provide critical comparative analysis of reading of the novels, *This Way for the Gas, Ladies and Gentlemen* (1946) by Tadeusz Borowski and *Lilac Girls* (2016) by Martha Hall Kelly with memoirs, *Surviving the Angel of Death* (2009) by Eva Kor and *Auschwitz: A Doctor's Eyewitness Account* (1960) by Dr. Miklos Nyiszli. This paper aims to explore the use of denial, trauma, and affect within each genre. The literature analyzed will focus on medical experimentation discourse and the silenced voices of their victims. Through Holocaust literature, both fiction and non-fiction, comprehending the concepts of denial, trauma, and affect will allow for a deeper connection to the Holocaust and maintain that education will never allow it to repeat.

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INTRODUCTION

In Hans-Christian Trepte's article, "Between Documentary and Provocation," Trepte describes how the Holocaust is "seen as a transnational crime, and a collective trauma of universal extension" (171). He discusses how the Holocaust has become a shared traumatic experience, but not told in literature to its fullest potential. Trepte analyzes the Holocaust as one of the most widely researched events; however, the Holocaust medical experiments are barely touched on within literary research and education. The medical experiments – defined as medical discourse within literary review – have been deemed "unspeakable" meaning they are "indescribable;" however, "it really means nasty," according to Galia Glasner-Heled. She argues that certain writers "suggest that when Holocaust literature avoids direct representation of horror, it does so because of ethics or social taste, or for fear of repelling the reader" (111). Both of these theorists illustrate how Holocaust literature brings importance to the reader's viewpoint of the Holocaust. The decrease of Holocaust literature studied in education comes from a place of wanting to forget or losing the individuals who usually openly discuss the event. This reaction showcases how emotional response and trauma create denial, especially in genocidal events.

In "Intuitionists: History and the Affective Event," Lauren Berlant argues that modern day "is seen as a symptom, the detritus of the significant relation between lived and remembered pasts and occluded futures" (4). Berlant's argument relies heavily on trauma theory to express the emotional hold history has over human beings' reactionary systems. Affect, as defined in the dictionary, is producing an emotional response in someone. This thesis will explore how affect transfers into Holocaust novels' fictional characters and in autobiographical account. In combination with Berlant's theory on historical affect, this thesis will explore Sara Ahmed's

theory of "rewriting of the history" through affect to prove the importance of emotion/affect within Holocaust literature (117). Giovanni Miglianti's "Italian Holocaust Literature and the Paradox of Affect," also focuses on the emotional component of shame within Holocaust literature and how eyewitness accounts "require an affective compromise" (186). With Berlant and Ahmed, Miglianti's analysis is crucial in understanding the interworking of both Holocaust memoir and fiction.

Brian Wimborne claims in "The Role of the Novel in Holocaust Literature," that it is "essential that factual accounts of the Holocaust are read by future generations, [but] they may also have immeasurable cathartic and therapeutic value for contemporary society" (100). Wimborne, along with several other scholars such as Marianne Hirsch and Michael J. Salamon, argue the importance of utilizing Holocaust literature to understand the event itself and how the literature's trauma and affect impact societal views. Trauma is the physical, emotional, or psychological imprint due to a certain event. Marianne Hirsch discusses in her book, "The Generation of Postmemory" that literature does "still defy narrative reconstruction and exceed comprehension" while also bringing the traumatic past events effects "into the present" (107). Her theory of generational trauma provides an outlook on how denial and trauma can keep people from teaching or allowing for traumatic elements to be discussed out of fear, or even guilt. Dr. Salamon describes a similar theory, where avoiding the subject altogether allows the ability to forget the trauma, but he goes further to consider the repercussions of denial keeping victims in a less mature stage of development and staying stuck in their past. As shown within the four books chosen for analysis, both secondhand comprehension and firsthand knowledge sanction trauma, which concludes in a form of denial and affect that sticks with the characters or authors for years afterwards.

To understand the idea of denial written within Holocaust literature, one must analyze the psychological nature of trauma and affect and how that develops in the written word. Denial is the refusal to admit the truth or reality. Salamon argues in "Denial and Acceptance: Coping and Defense Mechanisms" that denial "helps reduce stress," which is why Holocaust victims tend to rely on it as a coping strategy (18). *This Way for the Gas, Ladies and Gentlemen*, *Lilac Girls*, *Surviving the Angel of Death*, and *Auschwitz: A Doctor's Eyewitness Account* all employ denial strategies to avoid certain pieces of the Holocaust or to forget their roles within the event itself. For example, in Tadeusz Borowski's novel, *This Way for the Gas, Ladies and Gentlemen*, he denies his actual involvement within the Holocaust as a survivor by writing in the fiction genre instead of non-fiction. His novel, however, showcases his own denial and trauma as the book utilizes first person point-of-view. Amy Hungerford states in "Memorizing Memory," there is a relationship "between language and experience" and trauma affects the body's reactionary system by fragmenting memory in order to deny the horror faced in "the threat of genocide" (69). The ideology surrounding trauma and denial within Holocaust literature is rarely explored by critics together as affect theory, too, is a relatively new field in general, but especially to the realm of literature on the Holocaust.

This thesis will also focus on the implementation of Holocaust literature within the classroom. Talia E. Crockett analyzes how "historical knowledge of the Holocaust appears on the decline," and she cites that "22% of American millennials have not or were not sure if they have heard of the Holocaust, and 66% cannot say what Auschwitz was" (3). The horrific nature of the Holocaust can be repeated if education of these events is not implemented, and it starts with Holocaust literature. Steven Cooke and Donna Lee-Frieze take teaching the Holocaust a step further by suggesting a pairing between texts and video testimonies to allow students to "reflect

on what it means for a survivor to want to feel like *them*." Cooke and Lee-Frieze's "Imagination, performance, and affect" allows for an understanding of the interconnection between affect, trauma, and denial in teaching the literature on the Holocaust to students of all ages. This thesis' importance is to showcase the interworking of each of these ideas in order to understand its omission from education. I argue the need to teach every aspect of the Holocaust, such as the medical experiments, to ensure history does not repeat itself.

As described by Glasner-Heled, certain distressing elements are omitted to speak in order to a greater audience, or authors—who are also victims—cannot write about the events themselves. There are very few novels that integrate Holocaust medical discourse into their plots. However, Tadeusz Borowski's *This Way for the Gas, Ladies and Gentlemen*, and Martha Hall Kelly's *Lilac Girls* provide an inside look into specific experiments performed in concentration camps, such as the Auschwitz's women reproductive experiments and Ravensbrück's surgical *Rabbits*. The inclusion of medical discourse in the novels allows readers unfamiliar with the medical experiments to gain a "deeper understanding of trauma" and "engage, imagine, and empathize," according to Ruth Franklin and Talia E. Crockett.

Critics of Holocaust literature tend to be few, but the ones that out there tend to utilize trauma theory as the basis of their arguments. In "Transmitted Holocaust Trauma," Phillip Codde argues that there are multiple versions of trauma, including "secondary traumatization or inherited, transmitted, intergenerational or transgenerational trauma" (62). Codde's thesis integrates several concepts, including Marianne Hirsch's 'postmemory,' to present a well-rounded argument that explains how later generations cope with the Holocaust and its stories. Martha Hall Kelly utilizes Codde's theory of trauma in *Lilac Girls* in a realistic yet imaginative way, creating a fictional novel that grants insight into the medical experimentation of the Holocaust.

Characters within her novel, Kasia in particular, showcase the mental and physical traumatization of the Holocaust as Kasia shies away from motherhood, becomes ashamed of her disfigured body, and blames herself for her mother's murder. Kelly, being a third-generation writer, applies themes she deemed important from her interviews with survivors to truly grasp the effects of survivor's trauma, and those that have become passed onto their children.

In comparison to Codde's use of transgenerational trauma, Silvia Pellicer-Ortin argues the same trauma can show within memoirs written by the children and grandchildren of Holocaust victims. She asserts that there is "generic hybridization" where memoirs blend in the narrative to develop a sense of distance to the actuality of genocide (Pellicer-Ortin 2). The children and grandchildren "struggle between leaving their families' past in order to continue with their present lives and their moral obligation to bear witness to the atrocities of the Holocaust" (4-5). Memoirs typically provide factual accounts of the events written by the victims, but what Pellicer-Ortin argues is that the second and third generations of survivors are starting to tell their traumas and accounts of the Holocaust to create a new version of memoir not fully explored by scholars. *Surviving the Angel of Death* is written by a Holocaust twin experiment survivor, Eva Kor, but her memoir does not just provide the facts, although they are the center of the book. Kor utilizes narrative elements, such as dialogue, to cut the monotone factual evidence known in memoirs. She blends narrative with memoir to become the observer, which is a symptom of trauma and denial, to accurately relive her tortuous childhood.

Memoirs find their significance in telling the story of medical discourse by creating its own denial surrounding trauma and affect. Authors of memoirs offer an opposing view to fiction as they are either survivors or family members who have lived through the Holocaust's implications in one way or another. Michael J. Salamon explains that many survivors "have

difficulty expressing emotions and externalizing anger," which leads to a coping mechanism defined as denial (20). In eyewitness accounts, like Dr. Miklos Nyiszli and Eva Kor, there is a shift in how trauma, denial, and affect are presented in their works. Instead of imaginary characters or storylines, memoirists stray away from intentional emotional components to further deny the gruesome nature of their own histories. Their depiction of trauma and affect become more factual and less emotive than their fictional counterparts. The combination of trauma, affect, and denial within memoir depicts how survivors themselves conceptualize the event and how memoir became a way to "offer an alleviating mechanism for the conversation of traumatic memories into narrative ones" (Pellicer-Ortin 2). Unlike fiction, memoirs can feel overwhelming for readers, causing them to defer from the works in fear or from the inability to comprehend the realistic nature of such atrocities.

However, the problem with utilizing fiction versus nonfiction to review the Holocaust, as Brian Wimborne argues "that the aim of fictional writing about the Holocaust should not be one of mere description," but also as a healing tool in understanding the cruelty behind humanity (102). While the fictionalization of the Holocaust could be healing for some, several critics argue that the creation of Holocaust fiction could render the genocide familiar. As Galia Glasner-Heled claims in her article "Reader, Writer, and Holocaust Literature: The Case of Ka-Tzetnik," "the representation of a horrible event could serve to domesticate it, rendering it familiar and in some sense even tolerable, and thereby shearing away part of the horror" (110). Glasner-Heled's argument is valid; however, she also argues the necessity of Holocaust fiction to better comprehend the gruesome nature of humanity within the Holocaust like Wimborne. Hans-Christian Trepte follows a similar argument, but he believes that writers must descend "into the abyss of despair, pain and horror" to truly grasp the concept of the Holocaust. Trepte's

perspective speaks to the affect utilized within both Holocaust fiction and memoir to provide readers with a sense of denial and trauma that the Holocaust victims are prone to. In Holocaust literature, both fiction and non-fiction, comprehending these concepts of denial, trauma, and affect will allow for a deeper connection to the Holocaust, and maintain that it will never be repeated. To truly understand these ideas within literature, the sections will be separated by titles to showcase each notion individually.

CHAPTER 1: UNDERSTANDING DENIAL, TRAUMA, AND AFFECT WITHIN HOLOCAUST FICTION

In works of fiction, authors try to blur the lines between fantasy and reality; however, when the narrative describes a massive genocidal event, such as the Holocaust, the line leans more towards fact. In the realm of Holocaust literature, the idea of denial, trauma, and affect intersect to create a moving piece of historical memory whether it is fiction or nonfiction. The fine line between what is respectable and what is inappropriate becomes one of the reasons for the limitation of Holocaust fiction (Glasner-Heled 110;120). Yet, another reason falls under the want to forget and/or deny certain aspects of the Holocaust that the human consciousness cannot accept due to its horrific nature (Wimborne 101).

The Holocaust medical experiments are not usually a theme developed in Holocaust literature as there is a lack of information about them and their nature can be too harsh for some readers to handle. However, there are a few fiction authors who take on the challenge of the medical experiments to speak to the denial and trauma survivors endured. Holocaust fiction, especially those that include the medical experiments, provides a way to understand the “mind of the perpetrator” and “the novelist might dissect [the perpetrator’s] motivations and explore the process by which he rationalizes and justifies inhumane behavior” (Wimborne 103). More than its non-fiction counterpart, fiction including experiment discourse about the Holocaust allows for the human consciousness to process the trauma and the guilt about an incident we cannot fathom occurring again.

In this chapter, I will analyze the interconnection between denial, trauma, and affect within two pieces of fiction work: Tadeusz Borowski’s *This Way for Gas, Ladies and Gentlemen* (1946) and Martha Hall Kelly’s *Lilac Girls* (2016). I will dissect each novel alone for the

elements of denial, trauma, and affect while comparing how Holocaust literature has changed through the decades. With seventy years apart, it is easy to see the two separate generational writings of a survivor and a preserver of the Holocaust.

Tadeusz Borowski's novel provides a needed firsthand account that elevates the Holocaust fiction genre. Borowski was a Holocaust survivor who was arrested with his fiancé and became imprisoned not only in one concentration camp, but two: Auschwitz and Dachau. The implementation of his real-world ordeals allow for his fiction to give an overwhelming feeling of denial, trauma, and survivor's guilt to display through the language, silence, and unreliable narrator. The novel follows an unnamed character who is a transport cleaner – someone that cleared out the railroad cars after the victims were unloaded – attached to the concentration camps. He ends up becoming an orderly in Auschwitz for the camp's hospital block, where he witnesses the detrimental women's experimental wing and the practices of the Nazi doctors. Although he discusses the medical experiments within his novel, it is what he does not say about them, that allows the reader to understand inhumanity surrounding the experimental discourse.

Borowski's denunciation follows Dr. Michael J. Salamon's definition of denial in Holocaust survivors. He examines how there is a "pattern of guilt described as survivor's syndrome" where they "have difficulty expressing emotions and externalizing anger" (Salamon 20). In *This Way for the Gas*, Borowski's writing provides an outlook of tragic events through his own personal trauma, denial, and survivor's guilt while still operating in the fiction genre. In comparison to Martha Hall Kelly's *Lilac Girls*, Borowski exploits his own background within his characters and plot to allow for a more realistic writing style that the progeny of survivors lack in their novels.

Written in 2016, Martha Hall Kelly's *Lilac Girls* represents the generational gap of Holocaust literature where the second and third generations have taken over the role of telling the stories of their parents and/or grandparents. Her novel follows a concept of what Marianne Hirsch called 'postmemory' which "transmogrifies the alleged psychopathological condition of transgenerational trauma into a creative interest in the traumatic histories of the previous generations" (Codde 63). Kelly studied her inspiration, Caroline Ferriday – a real woman depicted as a French aid worker in the novel – and the history of bringing Polish women over from their homeland to give them medical help in America. Kelly's novel brings to Holocaust literature three point of views from Kasia, Herta, and Caroline, who were affected by the Holocaust, produces a blends factual history with fictionalized characters.

Each point of view produces its own aspects of denial, trauma, and affect. In respect to the medical experiments, Kasia and Herta's points of view pose the most detail. Kasia's story tells of her life as a sixteen-year-old girl who succumbs to capture for being in the Underground Resistance. With Kasia, her sister and her mother are transported to Ravensbrück Concentration Camp for Women. It is there that the story of Herta and Kasia connect. Herta's story is of a real Nazi doctor who eventually worked at Ravensbrück and experimented on the women there. Each of these women lend their own unique tale of a victim/perpetrator binary that cater to several affects, including guilt and shame. With the affect existing in the character's language and silence, the reader also finds the trauma of the experimentation and the want to forget the events.

Kelly falls in the genre of Holocaust fiction that could be labeled as documentary fiction as it allows for "imaginative access to past events, with new and different ways of understanding" the massive genocidal event that had normally been restricted to forms of non-fiction work (Crockett 2). Literary fiction novels like Kelly's *Lilac Girls* and Borowski's *This*

Way for the Gas, Ladies and Gentlemen employ the escapism of the fiction genre and the realism of history while separating themselves from the true nature of the medical experiments and the Holocaust. However, through their tag of fiction, they fall in the type of writing that allows the reader to understand the trauma, the need for denial, and the feelings of the victims.

Part 1: Denial, Trauma, and Affect in *This Way for the Gas, Ladies and Gentlemen*

In the creation of Holocaust fiction, an author must deem what is appropriate and impactful. Tadeusz Borowski's retelling of the Holocaust grants his readers a version that "render[s] it familiar and in some sense even tolerable, and thereby shearing away part of the horror" (Glasner-Heled 110). As a survivor himself, there is no doubt that his ability to recall memories was painful and traumatic as his time in both concentration camps were a constant battle for existence; a battle he lost after liberation to his own hand.

In his novel, Borowski showcases several examples of denial through the silence of his characters and implied messages throughout the book. With his denial, he pours his trauma into the story of the unnamed narrator which brings an emotional catharsis to the forefront where readers of any age can grasp the overwhelming nature that is the Holocaust. By looking at several examples of both trauma and affect theory surrounding denial such as Dr. Michael Salamon's causes of denial and Brian Wimborne's analysis of trauma and affect theory within novels, I will be able to explore how Borowski wrote them as a way to distance himself from his personal accounts. Borowski left the world with a novel that can serve as a reminder of the atrocities that cumulated in the beginning of the twentieth century.

Denial

In a way, Borowski resorted to creative writing to bring the stories he went through, and others like him, to the general audience. He uses fiction as a way to distance himself from his

personal experiences like other survivors, such as Susan, a Hungarian Jew, who developed a pseudonym to speak about her time at Treblinka. This type of storytelling can be described as “narrative memory” according to Robert Kraft, as a way to limit survivor’s guilt and a version of denial (qtd. in Cooke and Frieze 165).

Borowski’s choice to use a first-person narrator in a fiction chronicle of certain events that occurred to him speaks volumes in his want to forget about the memories he accumulated. In the application of a first-person narrator, an author can distance themselves just enough from the story while still bringing in some of themselves through characterization. At certain points of the story, there are elements of confusion or fragmented memory. For example, he starts to discuss the sterilizations and abortions, which were part of the genetic medical experiments at Auschwitz, but then switches the subject quickly, moving over what would happen to the women who volunteered. Borowski writes, “They scrambled out of the bunks and, swept up into the Eye, walked to the gate – towards the little wood. /Just to pass the time of day—for there was little for us to do at the camp—” (93). His quick segue into a different subject which is less gruesome to think about and more pleasant to discuss shows his want to refrain from remembering what would occur to the women who went to the “little wood;” Borowski’s code word for the crematorium.

In his silence, the reader apprehends how the women were brutally killed, and their pregnancies terminated. However, the reader must infer what occurred to the women before the gas chambers. Later in the novel, Borowski gives little hints, but never fully reveals, out of his own denial, what occurs. His description of No.10, which was the women’s experimental block in Auschwitz, is chilling, but not from what he does say, from what he does not. He declares:

The women in No. 10 are being artificially inseminated, injected with typhoid and malaria germs, or operated on. I once caught a glimpse of the man who heads the project a man in a green hunting outfit and a gay little Tyrolian hat decorated with many brightly shining sports emblems, a man with the face of a kindly satyr. A university professor, I am told. (Borowski 108)

Borowski's descriptions of the experiments are confined to a one-line sentence while his description of the doctor's outfit and personality fills out the majority of the paragraph. His switch from experimental discourse to the picture of the doctor illustrates his willingness to refrain from the harsh reality women were being taken advantage of by a man described as a "kindly satyr" (108). Although he is not outright denying the occurrence of the medical experiments, Borowski speaks in "fragmentation" which allows him to "speak with the voice of silence and leave unsaid that which cannot be depicted and understood" (Crockett 4). The medical experiments defy most humans ability to comprehend consciously how a human could torture another, which is why Borowski abstains from describing in immense detail the women's experimentation as it was too much for him and he believes would be too much for his readers as well.

Borowski's use of silence, language, and characterization provides the reader with the feeling of denial. He abstains from the gory details of the Holocaust and the medical experiments in general. He focuses on details that would be deemed fluff instead of concrete in his fiction writing. Unlike Martha Hall Kelly's works, his denial lies in authorial denial instead of character denial. To understand his denial, we must look at the trauma embedded in his works.

Trauma

In the case of *This Way for the Gas, Ladies and Gentlemen*, trauma theory is not hard to find through the entirety of the novel. Due to Borowski's involvement in the Holocaust, his own trauma floods his short book with certain details. In regard to the medical experimentations, he

discusses in his novel, the trauma comes from how he discusses the women and medical practices.

In the novel, Borowski includes little footnotes explaining certain words that prisoners in the concentration camps would use to represent people, places, or things. Elie Wiesel has been quoted saying, “We speak in code, we survivors” which shows in the words Borowski chooses to describe certain tertiary characters (qtd. in Glasner-Heled 110).

Instead of going into detail about the breakdown of a person in the concentration camps, he says, “The Muslims scurry in fright to the safety of their bunks, a messenger runs in the Block Elder’s shack” (Borowski 32). Muslims is not the same term as it is today. When Borowski wrote the word, he defined it as “the camp name for a prisoner who had been destroyed physically and spiritually, and who had neither the strength nor the will to go on living – a man ripe for the gas chamber” (32). Trauma, as specified in the dictionary, follows a similar definition as Borowski’s footnote. Trauma is defined as “a body wound, or shock produced by sudden physical injury, as from violence or an accident; an experience that produces psychological injury or pain.” The use of a single word to explain the severity of the trauma a camp prisoner went through shows why Borowski would want to deny the event he went through, but also why he did not subject his audience to what caused the “Muslim” trauma.

Borowski uses the emotionless statements of the narrator to attempt to observe his trauma rather than recount it which is how denial sets in. Such statements include his description of what the cremated people were turned into: “Although in fact so much fat and bone is wasted in the burning, so much flesh, so much heat! But elsewhere, they make soap out of people, and lampshades out of human skin, and jewelry out of bones” (Borowski 131). The narrator criticizes the type of murder the Nazis are doing and in that lies the trauma Borowski faces. In one reading,

the audience can construe his reaction as horrific and disgusting as he is discussing human soap, but if you understand the innerworkings of trauma, one can see that it is a defense mechanism for the understanding that he could become the objects he discusses. Borowski's own personal trauma shows through in this statement of body usage as he was constantly trying to survive the concentration camps and the psychological impact of never knowing when or if he would die, day after day, creates trauma in and of itself. This statement was his way of showing the inside of a sufferer's mind to the audience and how one can start to chastise their captors about not using their kills in an efficient enough way. Humor, too, is a coping mechanism for trauma, but Borowski rarely enforces it to deny his trauma, more so to include it.

The final trauma I will discuss falls under the telling of the medical experiments. Camp orderlies were sometimes camp prisoners, which is what Borowski bases his narrator off of. In the will to survive, these prisoners must internalize their everyday trauma of seeing friends, family, and other prisoners subjected to torture. Borowski rarely speaks of the atrocities that happened within the hospital and in the following quote, he tones down the trauma his narrator would have experienced and the trauma he personally encountered from his knowledge of the experimentation. He notes:

As for the doctor, many of his camp activities are common knowledge. It seems that he learned surgery experimenting with the sick. Who knows how many patients he has slashed to bits in the name of scientific research, and how many through sheer ignorance. No doubt quite a few, for the hospital is always crowded and the mortuary always full. (Borowski 120)

This paragraph about the surgical experiments happening in Auschwitz paints the "externalizing anger" part of Dr. Salamon's description of violent trauma and utilizing denial as a coping mechanism for said trauma (20). His anger toward the sheer audacity of the doctor is coupled with fear of what could happen to him and/or others. With Borowski hinting that what the

doctors did was camp knowledge, feeds into the idea of living with fear day-by-day from the point of view of a survivor. The lingering threat only exacerbated the trauma they felt.

Trauma for Borowski was extensive. Instead of writing his stories in memoir, he decided to write historical fiction which became his own way of coping with the Holocaust. He tried to stray away from emotion in his novel, but instead the affect is littered throughout the speech of the narrator and specific word connotations.

Affect

Lauren Berlant describes affect in relation to historical events as “the body’s active presence to the intensities of the present, embeds the subject in a historical field [the Holocaust], and that its scholarly pursuit can communicate the conditions of an historical moment’s production of a visceral moment” (2). In her definition of affect according to history, it is easy to see the connection between Borowski’s affect and the Holocaust. In his writing of *This Way for the Gas*, he provided the reader with an experience of emotions that non-fiction cannot give due to its factual nature. Through fiction, readers can be taken into a world, not of their own, and live the story being told. In the case of *This Way for the Gas*, readers are given an emotional journey that falls on the side of “fatal melancholy and death expectation” (Trepte 172).

Of the many emotions buried within Borowski’s work, the main two I will be analyzing are guilt and shame. These two emotions force readers to be confronted by their own minds and compels them “to ask the question whether, under similar circumstances, [they] would have acted differently” (Wimborne 103). The question of morality also comes into play which blended with the question of action grants the reader the affect of shameful guilt. Shame and guilt also find themselves as the pinnacle of survivor’s remorse (guilt), a term Borowski was quite familiar with.

In the idea of shame, Borowski writes the narrator with a shameful undertone, especially once he becomes the orderly in the hospital wing of Auschwitz. The narrator speaks to his education as an orderly and he will be able to cure his fellow inmates once he knows the human body well enough. However, shame must be interpreted within the word choice as the narrator is a man who is highly factual as seen in the breakdown of trauma and denial. In explaining to the audience through his narrator, Borowski explains how “we simply used to douse our patients with mint tea, at the same time uttering certain very effective magic words, which, unfortunately, I cannot repeat” (Borowski 99). The shame can be seen in the words “douse,” and “unfortunately.” These two words employ anger and sarcasm to create the feeling of shame toward his action of *curing* others. He would lie to the patients of the camp, some of whom he knew, and provide false medicine. In the same paragraph, the narrator wants to truly help the people of the concentration community but realizes he is unable to heal anyone. His shame falls under his inability to actually help and in the Holocaust, help was rare. This idea plays into the guilt the narrator feels throughout the book as well.

In his writing of the No.10 women’s experimental block, he uses a word known in the medical experiments: rabbits. The word, “rabbit” refers to a woman who has become the object of the Nazi doctors’ pursuit of knowledge. In Martha Hall Kelly’s novel, she solely focuses on the experimentations where the connection between the Holocaust and “rabbits” came from; however, Borowski does his own comparison and identification of the female prisoners subjected to the doctors’ torture.

When someone feels guilty, they will, like the denial of trauma, avoid focusing on the subject they feel guilty about. In describing the women, Borowski manipulates the narrator’s memory to shy away from the grimy and nasty barrack he witnesses. The narrator says “In the

morning, we made another little sightseeing tour, took a look at the exterior of the women's block (they push out their heads between the bars, just like the rabbits my father used to keep; do you remember—grey ones with one floppy ear?)” (Borowski 111). Borowski does not describe the grossness of the block, or how the women physically appear, or even any solid detail as to where they truly are. All he does is block from the narrator's mind (and his own) the true nature of the camp. With engaging in something happy and from the outside world, Borowski shows the guilty conscience of the narrator as he becomes complicit in the experimental acts done to the people, male and female, that he has come to know. Guilt, such as the narrator's, becomes a symptom of trauma and a characteristic of denial and for the narrator, he not only feels guilty for his actions as an orderly and throughout his journey, but also for surviving when many others did not. In relation to the Holocaust, survivor's guilt becomes the main affect readers can feel and writers unintentionally compose it in both fiction and non-fiction as a natural response to such a tragic event.

In trying to understand *This Way for the Gas, Ladies and Gentlemen*, it is difficult to separate denial, trauma, and the affects of shame and guilt as they are blended all together to form a masterpiece of Holocaust literature. Tadeusz Borowski endowed a piece of Holocaust fiction that discerns his own denial, trauma, and affect into a fictitious character in order to find some separation from the torture he went through. His novel equips readers with the ability to feel the pain of bearing witness to surviving in the Holocaust and wanting to forget yet having no choice but to remember. Although he does not go into gruesome detail, his writing affects his audience just the same.

From Borowski's post-Holocaust work to Kelly's recent homage to the strong women of Ravensbrück concentration camp, we are able to see the two separate generational outlooks of

the Holocaust. The concepts of denial, trauma, and affect are still present, but there is a certain detachment from the true event. Kelly is a true researcher of the events whereas Borowski was a part of the history.

Part 2: Denial, Trauma, and Affect in *Lilac Girls*

Nearly seventy years later, Martha Hall Kelly's *Lilac Girls*, tells the stories of real women who became interconnected due to the Holocaust. Her novel employed experimental discourse throughout as a central theme in comparison to Borowski's who relegated the medical experiments to a subplot at most. Her story breaks into three points of view: Kasia, Caroline, and Herta, each with their own perspective about the Holocaust. Kasia, sixteen during the Holocaust, becomes part of the Ravensbrück surgical experiments, where doctors would insert different materials, such as metal and wood, into wounds to see if certain sulfonamide-based drugs would cure the gangrenous infection. Caroline provides an Americanized reaction to the Holocaust and the medical experimentations while Herta depicts the only female doctor at Ravensbrück who performed the surgical experiments on the chosen women, including Kasia.

Along with the years in the Holocaust, Kelly sections her novel into time blocks. Part one follows the years before and during the war, Part Two follows the aftermath, and Part Three is several years later. Her ability to use space and time in her favor allows for the reader to follow the trauma, affect, and ultimate denial of all the characters within her novel. Through theorists like Philippe Codde and Giovanni Miglianti, I will focus on Kasia's and Herta's points of view and how the ideas of denial, trauma, and affect appear in Kelly's writing.

Denial

Although not the grandchild of a survivor herself, her works fall under the same category as the third generation from the survivors of the Holocaust because she wants to "fill in the

blanks left by their absent history” (Codde 64). In a concept introduced earlier, post memory is the era that we are in now as survivors are perishing and records can only survive and speak so much (64). The idea of denial changed in novels like *Lilac Girls*. It becomes less about personal denial of the events and more about what events have been denied about the Holocaust that writer cannot know about without witness testimony. With this struggle, the more survivors that died, the less generations will come to read or understand certain atrocities—the medical experiments—as information is not readily available on the subject. Kelly’s novel fills in several key blanks about the medical experiments from her own personal research with survivors who are still living.

The denial aspect comes through the characters of Kasia and Herta, especially in the aftermath of the Holocaust. Kasia is reeling from her mother’s disappearance in the camp and not knowing how to cope with it. She never, until the end of the novel, admits that her mother was shot for her attempts to save both Kasia and her sister, Zuzanna from perishing due to malnutrition or disease. She denies the inevitable truth as it is easier than admitting the upsetting fact that her mother will never be part of her or her daughter’s life. In the very last chapter of the novel where Kasia goes to identify Herta, as she has been released from prison after only five years, she pretends to be a new patient in Herta’s family clinic. Once taken to Herta’s office, Kasia starts interrogating Herta until the doctor realizes this was a victim of hers. Kasia says after Herta tells her what happened to her mother, “At long last, the story I’d waited to hear. I sat down, hollowed like a blown-out egg but strangely alive. Hard as it was, suddenly I wanted every crumb of it, for each detail seemed to penetrate and bring me back to life” (Kelly 473). Kasia was finally free from denial in that moment and she ended the novel finally becoming present in her family instead of a recluse. However, Herta was still stuck in her morals that she

was in the right. She did not apologize to Kasia for the experimentations and still looked at her as less than, completely denying the fact that she killed Kasia's mother and countless others.

In the first part of the novel, denial can be seen in the action of the medical experiments Herta performs. To separate herself from wrongdoing, she just denies the fact that she is operating on human beings. The German Nazi Party and people connected to it had a stigma against other races that did not fit into an Aryan blood type ("Victims of the Nazi Era" n.p). Herta represented this ideology. Towards the introduction of the medical experiment discourse within the novel, Kasia describes her new tag name in the camps:

After that, the name Rabbits stuck, and everyone at the camp called us this. *Kroliki* in Polish. Medical guinea pigs. *Lapins* in French. Even Dr. Oberheuser [Herta] called us her *Versuchskaninchen*. Experimental rabbits. (Kelly 207)

Like Borowski's work, the term "rabbits" comes into play in Kelly's experimental discourse. The impact of seeing the word in three different languages, not only shows the want to deny the harsh reality that the experiments were on actual living people, but also the denial of identity. Herta refuses to learn the names of her victims and even when Kasia comes to identify her at the end of the novel, she does not know who she is. The word "Rabbit" becomes Herta's way of disassociation, which is denial in its own regard. She places the women into her mind as just cadavers, "experimental rabbits," needing to be experimented on to ensure pure German blood lives on (Kelly 207).

Denial, in both Kelly's and Borowski's writings, is prominent within their stories, whether through the characters or their word choice. Each story grants the audience with the idea that it is easy to deny the humanity and/or the severity of the Holocaust than to remember that humans tortured other humans. Even as readers, our brains process fiction better consciously than nonfiction as we can detach from the reality instead of seeing the real person attached to the

writing. In a sense, the reader's denial comes from the beautiful storytelling of both Kelly and Borowski, but both narratives also cause a secondhand trauma onto the reader by recounting the horrid ordeals, such as the sulfa operations.

Trauma

In fiction, like *Lilac Girls*, there is a possibility that “may allow for deeper understanding of trauma than what we consider ‘factual’ accounts, as it encourages us to engage, imagine, and empathize” (Crockett 2). The reader can allow themselves to believe that it is just a character in a fiction story instead of a memoir where the reader knows the facts without adornment. However, trauma still comes into fiction, both as a feature in the story and for the reader. Kelly, unlike Borowski, delves into detail surrounding the medical experiments. She does not refrain from the ‘nasty’ or the ‘unspeakable’ (Martinez-Alfaro 39; Glasner-Heled 111). She tells the horrors in order to share the trauma of the women themselves.

She exerts Herta's scientific personality to discuss the medical experiments in a factual way. She lists the objective of the surgical experiment without emotion, showing the cold nature of her character: “We had prepared objects to insert into the wounds to simulate battlefield injuries. Rusty nails, wood and glass splinters, gravel, and a mix of garden soil and a bacterial culture of *Clostridium tetani*” (Kelly 214). Her cold voice and factual list contradicts the feelings Kasia has after the experiment is done as the doctors abuse her ability to recover. Her trauma shows in the passage:

I was operated on three more times, and each time the suffering began anew. Each time the fevers were higher, and it was harder to recover, as if the doctor were seeing how far they could go before I'd die. By the last operation, I'd given up all hope of dancing again and just hoped for walking. I lay on my back all day all mixed up, sometimes conscious, sometimes not, dreaming of Matka and Pietrik and Nadia, thinking I was back home. (Kelly 231)

This passage summarizes the trauma Kasia is going through at the camp and how it will stick with her throughout the rest of the novel. She comes close to death multiple times and becomes stuck in a constant cycle of torture. She dreams of home, playing into how trauma will make someone deny present events in order to cope with what is occurring. Her aching and longing to just walk again causes empathy in the reader for Kasia. Within Kelly's writing, in this passage and throughout her novel, the readers empathize with Kasia's trauma, causing it to stick with them. Unlike other novels where one may forget the horror. The reader of Holocaust fiction inherits the trauma of both the imaginary characters and the idea that the medical experiments truly took place in reality.

Affect

When it comes to the conversation of affect within *Lilac Girls*, readers can truly see, and feel themselves, the emotions of shame and guilt. Ruth Leys, who studies the self-conscious emotions of shame and guilt, specifies a "history of conceptualizations of survivors guilt and its displacement by a new theory of shame" in regard to Holocaust literature (qtd in Miglianti 185). Leys explanation for this new connection between shame and guilt and the indistinguishable nature of the two affects feeds Holocaust fiction. Kelly provides this emotion in Kasia, mainly, but also in Caroline towards the end of the book.

Caroline provides an aspect of the novel that does not necessarily deal with the medical experiments, but the reaction of the aftermath of said experiments. As a liaison to the French consulate, Caroline along with her bosses, created a program to help select women who were apart of the surgical experiments at Ravensbrück. This project includes Kasia with her sister, Zuzanna and in the introduction of the case to a room of doctors, the affects of both shame and guilt are present.

During Kasia's display, she becomes self-conscious in her body language and speech. Kelly writes, "As the doctor continued, Kasia kept her chin high, but her mouth softened. Her eyes grew glassy," then later on Kasia tries to speak up, "'I am sorry, but...'. She stood, one hand over her eyes, the other holding the sheet to her chest" (407-08) The characterization of Kasia's actions coupled with her broken speech conceptualizes shame in herself and in her deformed leg. Throughout the novel, her shameful nature due to her leg and the experiments becomes written into the page. The reader can empathize with Kasia for this exact reason that her trauma has made her ashamed of who she is, even with the people who want to help her such as Petrik, her husband, and the rest of her family.

In the same moment through Caroline's point-of-view, the feeling of guilt sets in. However, this affect is not written into the page for Caroline or Kasia to feel, but for the readers to experience. Though Caroline does feel guilt for the display of Kasia and the rest of the Rabbits, our guilt comes from not being able to stop the violation occurring and guilt from reading about what happened and not stopping it there (Kelly 408). The novel may be fiction, but the idea of survivor and bystander guilt proceeds in the reader's mind as they read and feel the pain Kasia goes through as well as the constant torture.

The guilt affect is also conveyed through Petrik, Kasia's husband. His character depicts the helplessness of family members and true survivor's guilt felt by people not taken to the camps. In the years after the war, before Kasia and Petrik were married, he confesses to Kasia after she brings up the Underground and blames him, unintentionally, for her imprisonment:

Don't you think I live with that every day? Not only my sister, who was barely out of braces, but your mother, who was dear to me too, Kasia, dead. And what they did to *you*? And here I am, healthy and fine. What kind of man am I? Sometimes I think if I didn't have you... (Kelly 347)

Petrik's guilt fuels the page and the emotion the readers perceive from Petrik from that point forward. He never not feels guilty for what happened to Kasia. Even when they are married and have a daughter, he still feels like he should do more. The implied reaction of Kasia, who regrets suggesting that he caused her trauma, shows the shame she feels. Shame for her appearance, shame for the sadness she causes others, and shame for the pain. Her guilt lies in what she does after the war and that is becoming a nurse to help people. She feels guilty that she could not help her mother or any of the other Rabbits who were killed, so she helps in the hospital to feel a sense of relief, but it never comes.

Guilt and shame within Holocaust literature, equally in fiction and non-fiction, seem to be interchangeable. A binary of sorts. Everyone has felt guilt and shame at least once in their lifetimes, which allows readers to understand those emotions and identify with the characters on a realistic level. Kelly allows readers to entail "the Holocaust mean[ing] 'descending into the abyss of time, of despair, pain, and horror'" (qtd. in Trepte 174). Affect provides a deeper understanding of trauma in fiction allows for reader to stay far enough away to where the affect does not envelop them in PTSD.

Interconnection

Like Borowski's *This Way for the Gas, Ladies and Gentlemen*, it is difficult to separate the concepts of trauma, denial, and affect in *Lilac Girls*. Martha Hall Kelly created a beautiful tribute to the women of Ravensbrück and their incredible survival of the medical experiments. Her use of what may be deemed unspeakable content allows for the reader to grasp the seriousness of the Holocaust and that it was not just gas chambers, that there was an element of torture that surpasses what humanity even thought possible of society.

The trauma Kelly writes about brings the denial with it and with the denial, the guilt and shame felt by the characters and from the audience themselves. The emotional components of Kelly's novel breathes life into the Holocaust genre and gives an accurate depiction of what occurred from 1939 to 1945 and how that stuck with the survivors. Her choice to write a fiction novel instead of a research novel proved fruitful as she became a New York Times Bestseller, which means she reach millions with her portrayal of the experiments and the Holocaust.

Both Tadeusz Borowski and Martha Hall Kelly provide fiction novels set in the historical reality of the Holocaust. Borowski portrays his personal traumas, denials, and emotions into his work to grant himself peace of mind and tell the story of Auschwitz that people could read without fear of being overwhelmed. Kelly brought to the modern age a tale about strength and survival through traumatic torture and showcased denial and affect through the characters of Kasia, Herta, and Caroline. Each novel takes the history of the Holocaust medical experiments and displays the side of the Holocaust most do not know or understand. Their placement in Holocaust fiction literature delivers important discussions and history that needs to be taught instead of pushed aside.

Holocaust literature, especially fiction, allows for the ability to observe the true event of the Holocaust without the blunt connection between a survivor and the reader. Fiction creates a space where “uncertainty, paralysis, and ambivalence may provide a more adequate response to the Holocaust than works with a tangible voice committed to the traditional transmutation of suffering into beauty and chaos into tragic significance” (Wimborne 103). The idea to use fantasy, whether it's in a historical fiction novel or a revisioning of fairy tales, such as *Briar Rose* by Jane Yolen, the denial, trauma, and emotion attached to the Holocaust comes through no matter how fantastical it may seem. Holocaust fiction is the future of Holocaust literature as

survivors have become few, but for the ones we do have, we must study the firsthand accounts as well, to fully grasp the importance of not repeating this history.

CHAPTER 2: UNDERSTANDING DENIAL, TRAUMA, AND AFFECT WITHIN HOLOCAUST MEMOIR

Memoir is the self-writing or autobiographical account of a person's life told directly by them. In contrast to Holocaust fiction literature, Holocaust nonfiction or memoir develops a unique perspective on the conversation of denial, trauma, and affect. When emotions come from imaginary characters or plotlines, the unreality of text makes it easier to bear the real-life events as stated within the previous chapter. However, in a memoir, the same cannot be said as the authors writing the novel detail the exact accounts of what occurred to them, and in Holocaust literature, the nature can be quite gruesome. Holocaust memoir is written not for the benefit of others but more so for the author. As Suzette A. Henke describes in her discussion of autobiographies as healing tools, memoirs "can be seen as 'scriptotherapy,' which is defined as 'the processes of writing out and writing through traumatic experience in the mode of therapeutic re-enactment'" (Henke 1998; qtd. in Pellicer-Ortin 3).

To discuss the interconnection between trauma, denial, and affect in Holocaust literature, it is advantageous to focus on the similarities and differences between the fiction and nonfiction novels within the genre. Although memoirs are not wrought with the same criticism as its fictional counterpart, it does come with its own disadvantages. As with any trauma writing, telling certain parts of the story can be challenging for the authors to admit or discuss. It leads to "fragmented structures," "lack of clear chronology," and "use of various narrative devices that combine times, spaces, and voices from the past and the present" (Pellicer-Ortin 5). Fragmented memory is expected following extremely traumatic events, such as the Holocaust. As noted by Brian Wimborne, the brain cannot process that amount of trauma or affect without overloading itself, which is why denial is such a sizeable coping mechanism for Holocaust survivors (101).

In this chapter, I will dissect the narrative techniques of denial, trauma, and affect within two memoirs written by Holocaust survivors. I will also compare the memoirs' use of these techniques to those utilized in Holocaust fiction to create a case for why each should be taught together within English literary education. Each memoir brings a unique perspective to the Holocaust. Dr. Miklos Nyiszli's *Auschwitz: A Doctor's Eyewitness Account* (1960) writes his story of being a Jewish prisoner doctor who worked directly with Dr. Josef Mengele in the twin autopsies, and Eva Kor's *Surviving the Angel of Death* (2011) writes from a twin experiment survivor's perspective. The opposing novels give similar but contrasting viewpoints to the same medical experiment performed within the notorious concentration camp; these memoirs are excellent candidates in discussing denial, trauma, and affect.

Dr. Miklos Nyiszli's *Auschwitz: A Doctor's Eyewitness Account* (1960) follows Nyiszli from when he entered Auschwitz to the time he was liberated. Written 15 years after his liberation from the camp, his book sounds like a confessional more so than a memoir as he spares no gruesome detail about his time there as Dr. Josef Mengele's autopsy doctor. Told from his perspective, Dr. Nyiszli's accounts of Auschwitz drastically change how the medical experiments and Dr. Mengele are depicted in history. He focuses on his job in the crematorium as a medical examiner, where he writes critical reports for the Nazi physicians outside of the concentration camps. Through his accounts, the readers are welcomed into an unknown viewpoint of the Holocaust that allowed liberties for a skilled prisoner in specific roles, especially those attached to any medical experiments.

The stylistic choice of Dr. Nyiszli shows a blend of narrative into nonfiction, creating a creative nonfiction piece. In his choice of creativity, the audience witnesses denial, trauma, and affect in a parallel structure to those used in fiction. Although similar to fiction, Dr. Nyiszli's

account describes real events that “reveal the potential power of remembering and recording lives as a means of revising histories and engaging with the conflicts of the present” (Douglas 252). With his testimony, this chapter will address the importance of understanding a victim/perpetrator binary in which denial, trauma, and affect play a role in understanding the Holocaust from a literature standpoint.

Unlike its counterpart, Eva Kor’s *Surviving the Angel of Death* by Eva Kor follows strict memoir standards regarding authentic voice and bland writing style. Nevertheless, Kor’s writing provides an outlook on the Holocaust that generally stays hidden: medical experimentation survival. In a rare case of endurance, Eva Kor and her sister, Miriam, were one of the only pairs of twins to survive Josef Mengele and his twisted tactics, but not without consequences. Kor follows good moments in her life that were wrought with anti-Semitism, which led to her neighbors turning her family into the Nazis and ultimately, killing everyone except the two of them. With the inclusion of photographs from Kor’s collection, her memoir brings an extra connection to reality that may be hard for some individuals to process. Eva Kor’s memoir showcases “the importance of explicit, strident, painful, harsh writing . . . because when something happens, when something awful happens, it has to be told” (qtd. in Glasner-Heled 120). In agreement with Glasner-Heled, Kor spared no detail and goes in-depth into the harsh realities she faced as a twin experiment survivor.

Eva Kor became an advocate by recounting her time in Auschwitz as an experimental “Meerschweinchen,” or guinea pig, as the doctors called them. Although open to discussing her stories worldwide, she never put them into writing until 2011, when *Surviving the Angel of Death* debuted. She details her story as best as possible, but it is easy to see the fragmented pieces. The fragmentation shows her denial and trauma as a twin survivor. Some details, though

gruesome, are passed over quickly while others are expanded upon heavily. It is the omitted pieces, and the language used that shows Kor's affect to the Holocaust and her own story. Compared to Dr. Nyiszli's accounts and the fiction pieces discussed previously, *Surviving the Angel of Death* delivers accurate, realistic writing that gives the reader factual experimental discourse, a rare and almost non-existent feat. Her book grants an exclusive look into the link between denial, affect, and trauma concerning the Holocaust.

Part 1: Denial, Trauma, and Affect in *Auschwitz: A Doctor's Eyewitness Account*

In creating an autobiographical memoir, authors have to decide what to write and what to omit from their personal histories. Dr. Miklos Nyiszli's book, *Auschwitz: A Doctor's Eyewitness Account*, reads unfragmented and unscathed from omission as his blunt honesty allows for a comprehensive look into the job of a prisoner doctor. His anecdote falls in the category of "confessional memoir." Jo Gill defines it as "not a means of expressing the irrepressible truth of past lived experience, but a ritualized technique for producing the truth" where "the self begins to conceive of itself as individual, responsible, culpable, and thereby confessional" (4). Nyiszli was a survivor of the Holocaust and the Nazis, but in the book, through his denial, trauma, and affect, he blames himself for particular events within the concentration camps due to the position he chose to be in.

Throughout the book, Nyiszli talks to the audience as a confidant and relinquishes the secrets he kept from his time at Auschwitz. His denial of events comes from how he discusses himself within those moments, whether it was changing his ideology to think like a survivor or his opinions on the experimentation. As a barrack doctor and Mengele's medical examiner, the trauma he experiences imbues onto the pages of the memoir as he details the choices he had to make and how they would stay with him for his entire life. Coupled with both his denial and

trauma is Nyiszli's involuntary reaction of fear, shame, and disgust for himself and the events occurring all around him. His words are clear and concise in emoting his feelings. It proves the importance of understanding how trauma can affect one's soul into forgetting altogether the horrific choices one must make in surviving genocide.

Denial

In a memoir, denial is much easier to see than in fiction as the denial comes from real people, in this case, the authors, than fictional characters that are created. With Dr. Michael J. Salamon's analysis of "survivor's syndrome," Nyiszli shows an example of survivors that "seem to be locked in a perpetual mechanism of denial" instead of moving on with their lives (20). Unlike Eva Kor, he had not found solace but guilt for surviving and for making choices that destroyed others. He sticks with denial 15 years after his liberation in order to deal with his present reality.

At the beginning of the memoir, denial comes through the writing as Nyiszli discusses being taken into Auschwitz. The first choice Dr. Nyiszli had to make was whether or not he would become a doctor for the Third Reich. Before his colleagues, he chooses to present himself to Dr. Mengele and work for the Nazis to evade the gas chambers. He writes as if his persona given at the camp and his true self were separated with the tattoo given, showcasing his denial of the events he went through. He says after getting the tattoo, "So I, Dr. Miklos Nyiszli, had ceased to exist; henceforth I would be, merely, KZ prisoner Number A 8450" (Nyiszli 23). The point-of-view shows these two personas, but as the prominent voice follows KZ prisoner with interjections of Nyiszli in the present. His separation depicts how denial consumes the mind and is needed for the psyche to process personal trauma (Wimborne).

Nyiszli furthers his denial in a recurrent theme throughout the book: sleeping pills. After exposure to trauma, any type of self-medication attaches itself to the want to forget, the want to deny. An NIH study concluded that “in US trauma-exposed samples indicates that greater distress and impairment are related to increased likelihood of both treatment utilization and self-medication” (Sheeren et. al). Self-medication is further linked to wanting help and trying to deny what happened to the individuals. Nyiszli proves this theory with the recurring sleeping pills that pop up throughout the novel after terrible choices or eyewitness episodes. The first written account of sleeping pill use happened after finding out that hundreds of women were trucked in from the C section to be shot. He denies the firings by watching football (soccer), then "swallow[ing] two sleeping tablets of ten centigrams each and fell asleep. A badly needed sleep, for I felt my nerves stretched to the breaking point. In such cases, sleeping tablets were the best remedy” (Nyiszli 68). He describes his use of pills as "needed" and "the best remedy," which shows his need to deny what is happening outside of his line of view and how his trauma is affecting him at this point in the book.

He continues on this path of using the motif of sleeping pills as his way of describing how the immoral actions cause him to deny his role within the medical experiments and death camp. Nyiszli describes the ways death occurred in Auschwitz, and after discovering the fourth method of dying, he finds himself quite distraught. After coming “home” from a day examining Mengele’s victims, he “took a sedative and went to bed. Today’s dose was 30 centigrams, sufficient,” he “hoped to counteract the effects of funeral pyre sickness” (89). Denial, in Nyiszli's case, is not straightforward but hidden behind medication and sometimes, alcohol. On these two separate occasions, his denial falls behind the language; however, for those who understand

addiction and trauma, the sleeping pills are a clear clue into how Dr. Nyiszli denies the horrific situation he was subjected to.

The final piece of denial comes from his want to isolate himself from the atrocities around him. Sigmund Freud considered the theory of isolation as a psychological defense mechanism, which has been studied in survivors' cases. Isolation “involves creating a mental gap or barrier between some threatening cognition and other thoughts and feelings” (Baumelster et.al 1099). With Nyiszli’s isolation description in his memoir, the readers see his want to move away physically from killings to deny their happenings and not traumatize himself any more than what had already been done. Nyiszli writes about the daily gas chamber selection:

Not wanting to witness that daily scene, I generally withdrew to the most remote corner of the crematorium courtyard, where I sat down under an arbor of pines. The crackling of the revolvers and the screams were deadened by the time they reached me. (125)

He finds peace in the trees surrounding him and positive memories. With the isolation from the events occurring in the crematorium, Nyiszli displays mental separation that “minimizes [the events] impact” (Baumelster et al. 1100).

The denial voiced in *Auschwitz: A Doctor’s Eyewitness Account* takes an approach that is much more involuntary or harder to flush out unless characteristics of psychoanalysis and semiotics are utilized. In fiction, the denial is written into characters, unless, in Tadeusz Borowski’s cares in *This Way for the Gas, Ladies and Gentlemen*, the denial embeds itself into the narrative involuntarily as Nyiszli’s does since he, too, was a survivor. Fiction shows denial through silences or omitted events, while nonfiction shows denial through language and experience.

Trauma

In contrast to their fictional counterparts, trauma in a memoir comes from real heartache and suffering that cannot go undiscussed, which is why Brian Wimborne deems Holocaust nonfiction as “factual” and “cold” (99-100). The trauma presented in Dr. Miklos Nyiszli’s memoir shows a strange version of the victim/perpetrator binary. However, unlike fiction or other memoirs like Eva Kor’s, Nyiszli believes he is on both sides of the binary. On the one hand, he was a Holocaust survivor brought to the camps as part of the master plan. On the other hand, he performed autopsies, was allowed liberties (i.e., civilian clothes and a private room), and made difficult choices in the fight for survival. His perspective allows for a “multilayered view of both innocence and guilt” that breaks the mold of the ordinary “trauma culture” defined by survivors (Martinez-Alfaro 40).

As stated before, trauma and denial go hand and hand in the discussion of Holocaust literature, no matter the genre, but sometimes trauma stands alone. In *Auschwitz*, many of the trauma instances are long and detailed in the form of reflection, which breaks his narrative writing style, or in the form of questions. In these instances, “narrative fetishism” is put in play as “the creation of a discourse to deny the impact of traumatic events” (Codde 69). He asks questions and reveals his opinion to try to understand the trauma he went through. Although he went through the trauma of the concentration camp, it remains unrealistic in his brain to cope better. Narrative fetishism usually shows up in fiction but appears in Nyiszli’s memoir as well.

The first instance of reflection trauma is when Dr. Mengele takes Dr. Nyiszli to his living quarters and working space in one of the crematoriums. His trauma comes from the fear he describes witnessing his new reality. Nyiszli writes:

I took it all in, paralyzed with fright. As soon as I had come through the main gate, I had realized that I was on death's path. A slow death, opening its maddening depths before me. I felt I was lost. (40)

He reflects on how he knew that where he was working was going to be his inevitable doom, depending on his performance for Dr. Mengele. That trauma sticks in mind, even after the traumatic event is over. From this point on, he refers to himself as the “living dead” and returns to this traumatic theme of knowing his death (40). This trauma, diverging from the events laid out in the denial section, is bluntly stated as cold fact instead of silencing the trauma or denying it altogether.

The other reflection trauma accounts show how Nyiszli understood that his death was almost inevitable and others, too. From the initial brush with death and the crematoriums, Nyiszli fell into Cathy Carruth's theory of temporal belatedness, where traumatization is to “be possessed by an image or event” (Pellicer-Ortin 6). In simple terms, Nyiszli was always haunted by death, whether it was the screams of others, images of the gas chambers, or the victims he performed autopsies on. In the inevitability of death, Nyiszli made some tough calls regarding others in the barracks he was the doctor in. One call had to do with a female child who lived through being gassed. Nyiszli wanted to save her, but his supervisor would not allow her to live due to her age and opinion that she would tell everyone her story. The trauma comes from the way he does not describe the girl beside her age. Nyiszli's trauma shows in the final paragraph of the chapter, detailing her second death: “half an hour later the young girl was lead, or rather carried, into the furnace room hallway, and there Mussfeld sent another in his place to do the job. A bullet in the back of the neck” (120). The collective trauma of everyone working in the crematorium is shown here as the leading killer, Mussfeld steps away from killing the girl.

Nyiszli silences the details of the girl's suffering to lessen his own. A combination of trauma and denial consumed his life, as determined by even including the young girl's story in his memoir.

Moving away from the reflectional trauma and into the questioning of distress, Nyiszli, throughout the memoir, forms questions to process his suffering. Psychological trauma is "caused by an adverse experience, or series of experiences, that result in an injury that changes the way the brain functions, impairing neurophysiological, psychological, and cognitive functioning" (Penn Psychiatry). It makes sense why Nyiszli would, one, write the memoir, and two, always question his experiences within such a horrific event. The first round of questions comes after his separation from his family. He asks:

Where could they be, lost in this enormous mass, anonymous, like all those swallowed by this gigantic prison? Had my daughter been able to stay with her mother, or had they already been separated? What had happened to my aged parents, whose last years I had tried to make pleasant? (Nyiszli 42)

He asks questions about all of his family members, but the odd part about the questions is they fall into a type of past/present voice. He speaks as though he does not know the answer, which is untrue as he wrote this in the 1960s. His switch in tone provides the significant trauma that the separation caused him in the long term. Nyiszli and Borowski follow a similar depiction of trauma within their books as they both utilize tonal switches to unconsciously highlight their traumas.

A great example of the tonal switch emphasizing imprinted trauma happens in describing the living dead and death—a common theme in Nyiszli's description of trauma. Dr. Nyiszli is given autopsy assignments of the twin experiment victims; he discovers abnormal findings, leaving him to hesitate to place a cause of death on the research institute's report. After several autopsies and lies placed onto paper about their deaths, he comes to realize that he will never

leave Auschwitz alive. He changes from reflecting on his experience with Dr. Mengele to questioning it; “But now, in possession of all these fantastic secrets, I was certain I would never get out alive. Was it conceivable that Dr. Mengele, or the Berlin-Dahlem Institute, would ever allow me to leave this place alive?” (Nyiszli 65). In the span of two sentences, the trauma changes the tone and tense to allow the mind to realize that death was inevitable. A question he already knew the answer to due to his survival, but his survival still feels unrealistic to him.

With trauma, the importance of reading about it with perspectives, such as Dr. Nyiszli’s, is to understand how psychological trauma develops in different people and the identifiers of trauma conditions. In combination with fictional works, memoirs can be a powerful tool in teaching how trauma engraves its victims and builds inevitable emotional consequences. Trauma happens to everyone at one point or another and can be small or large. With *Auschwitz: A Doctor’s Eyewitness Account*, trauma renders the memoir an essential tool for education into how survivors unconsciously relive their trauma years later.

Affect

Sara Ahmed argues that emotions need to be seen “in concrete and particular ways, to mediate the relationship between the psychic and the social” (119). In a similar fashion to the discussion of trauma, the emotional component of trauma and denial comes from emotion. The human psyche is a complicated place and requires a certain emotional grounding to help live day by day. The Holocaust disrupted daily life’s emotional grounding, which leads to the psychological trauma and denial used to cope with the physical torture.

In literature, the affect shows in certain language types that provide emotional significance. The two primary affects in Dr. Nyiszli’s memoir are shame and guilt, but another I will analyze is the affect of fear. Fear comes from the trauma of a situation and is the defense

mechanism that causes the fight-or-flight response. Nyiszli experiences fear from his choice of becoming a close confidant to Dr. Mengele. Although the fear affect is not present throughout the novel as shame and guilt take over, there is one passage representing how fear is just as traumatizing as physical suffering.

Nyiszli employs exact phrases to create the fear affect in his readers, making affect such a useful literary tool to study. Like in fiction and eyewitness accounts, affect is the reason for secondary traumatization as the emotions are passed through anyone who reads or hears the literature. Nyiszli's writing is not gruesome, nor is it overly detailed, but it is the way the experience and the language mingle that create a cathartic affect that transfers into his audience.

After discovering a new form of murder within Auschwitz, the fear that enlists in Nyiszli becomes visible on the page and ingrained in the subtext. His writing follows fear signifiers. He reveals: "My discovery of the most monstrous secret of the Third Reich's medical science made my knees tremble. Not only did they kill with gas, but also with injections of chloroform into the heart. A cold sweat broke out on my forehead" (62). With phrases like "my knee tremble" and "a cold sweat," the readers can picture the fear Nyiszli was in, but also, they can feel the fear as well with his sentence in between (62). Readers will place themselves into his shoes and ask questions such as, what would I do? How would I handle the news of multiple types of murder in a death camp? Affect allows for personal connection, which elicits new emotions that readers may not have experienced to the same magnitude as Dr. Nyiszli, but enough to grasp why he was fearful and the hidden meanings behind the language of the knees trembling and the cold sweats.

Fear can be tracked throughout the book as the Holocaust induced fear understandably, but the two other affects that are particular to someone in Dr. Nyiszli's position are shame and guilt. Given the role of a medical examiner and barrack doctor, Nyiszli places a lot of guilt and

shame within the memoir to show his remorse for his actions. Ruth Leys, a Holocaust literary historian, discusses how “shame in particular plays a crucial role” in the field of Holocaust studies, which includes Holocaust literature (qtd. in Migilanti 185). In two separate instances, Nyiszli apologizes for his camp actions, and behind a guilty conscience, is shame in himself for his choices.

The first occasion follows Nyiszli's role as a doctor within the barracks. During his rounds, the camp laborers and medical test subjects beg him each day for a reprieve from the torture. However, his answer was: "I invariably refused. Today I am sorry I did. They are all dead" (Nyiszli 71). The shame affect is not one that can be easily seen within these sentences, but the silence about the details explains much more than the language ever could. His use of “suspended information, narrative fragmentation, and belated revelations creates a silence that ethically represents the experience of trauma – first-hand and inherited" (Crockett 14). Shame and guilt create trauma and denial, a triad of emotional, psychological, and physical tortures that fill a person who has gone through such an ordeal as the Holocaust.

In the second instance of the shame/guilt affect, Dr. Mengele, forces Nyiszli to blame the female doctors for his experimental screw-ups. Dr. Mengele threatens that “poor diagnoses” lead to “unnecessary deaths” and that anyone should be put to labor, not medical care. More so than the apology for his fellow prisoners, was the apology for the female doctors he was forced to blame for Dr. Mengele’s mistakes. He atoned as "I sincerely regretted having so wronged my innocent female colleagues, for their diagnosis was excellent...if Dr. Mengele carried out his threat, I would have been the cause of it” (97). The affect of guilt falls towards the end of the sentence with "I would have been the cause of it,” but this sentence also presents shame. He does not say *death*; instead, he says *it* as if not saying that he could have been the cause of their deaths

helps him deny his role in their punishment. Within the examples of the shame and guilt affects, Nyiszli involuntary allows his emotions to write the language of his experience. Lauren Berlant would discuss his memoir's affects as "an intuitive sense of the historical present in scenes of ongoing trauma or crisis ordinariness" (2). Nyiszli never forgave himself for the trauma he was put through, and he is in a constant state of denial to try to understand the guilt and shame of his actions. A battle is shown within the language and silence of the memoir.

Throughout *Auschwitz: A Doctor's Eyewitness Account*, the interconnection between denial, trauma, and affect is clear. There is almost no way to separate the three to analyze their effects in the memoir. To talk about one, the other two find their place right in the middle of the analysis as well. From the use of silence to explicit language, Dr. Miklos Nyiszli wrote a daring autobiographical account of his Holocaust experience that shows the importance of remembrance.

From one survivor to another, Eva Kor's *Surviving the Angel of Death* follows closely with the writing of an average autobiography than her counterparts. The trauma and denial are discussed in detail, but the placement of affect is rare in her factual memoir. For some survivors, cold facts are more manageable than narrative blends.

Part 2: Denial, Trauma, and Affect in *Surviving the Angel of Death*

Eva Kor's memoir was published sixty-six years after her liberation in 1945. Although there was no book, Kor curated a museum and was constantly discussing her Holocaust experience to anyone who would listen. However, in 2011, she finally put her story down on paper with Lisa Rojany Buccieri's assistance. The memoir focuses on three main sections in Kor's life: the before, during, and after. She speaks to the anti-Semitism before the Holocaust started as her family was the only Jewish family in her Polish town. Once captured, her father

was severely beaten and her mother deathly ill. At the concentration camps, her mother decided to give her and Miriam up to Dr. Josef Mengele. Kor details the experimentation years her sister and she went through while at Auschwitz until liberation in 1945. From there, Kor and her sister were raised in Romania by distant family and become entrapped in communism.

In *Surviving the Angel of Death*, Eva Kor presents a historical memoir that sometimes is hard to process due to her descriptions' horrific nature. Kor's reasoning behind creating her memoir was to "ensure that the enormity of the event is etched indelibly into the memory of the human species" (Wimborne 99). In her goal, the retelling of the twin experiments takes the mind quite a long time to process how a man can do such torture to children under sixteen. However cold her memoir may be, her story is the pinnacle of importance in explaining the medical experiments in the literary canon. It is understandable due to the gruesome nature of the events. Without educating the unique denial, trauma, and affect of medical experiment survivors, there will never be a full understanding of Holocaust atrocities in history or literature.

Denial

In the short memoir, Kor only showcases one instance of denial that is clear. Unlike denying the event itself, she denies her appearance. Kor is a survivor who does not need to deny that the events happened to her. When she finally wrote the memoir, she had talked about her story for many decades and found ways of coping through her trauma by not denying her experiences but by telling them. Her denial is much less than Dr. Miklos Nyiszli's or those created in the Holocaust fiction novels because she found a new way to cope. Kor was "able to move on to a level of acceptance" of what happened to her through verbal storytelling (Solomon 20). Although only one version of denial is clear cut with the language used. Kor also employs silence as Nyiszli did in his memoir. Her use of this denial shows that she can elaborate on

specific aspects of the medical experiments while others are still too much for her psyche to handle.

Body image is a large part of what builds self-esteem and self-confidence. It makes sense that in the memoir, Kor denies what she looks like during the experiments. Kor says:

One time we saw some boys at the shower. I remember looking at them and thinking, 'They're so skinny. I'm glad I don't look like that.' Actually, I probably did look like that. Miriam too. Her eyes were sunken, and I could count every bone in her body. But I did not feel skinny and pathetic. I needed to see myself as strong. (44)

Her defense mechanism was to downplay her looks to keep her mindset in a place of denial. She may have been malnourished and as skinny as those boys, but her mind would not accept that her body looked that way. When her writing jumps to her, saying, "Actually, I probably did look like that," the word 'probably' stood out as part of the mind, still denying the idea that she looked like those boys. She also strays away with a description of what she thought she looked like. Her refrain from explaining how she looked and felt "expressed an everlasting trauma" that she "never could get rid of" (Trepte 172). It makes sense that Kor denies the appearance of her body because she needed to be confident in herself to survive and confidence is tied to body image.

Silence is a literary tool that can say much more than words ever can. In *Surviving the Angel of Death*, she abstains from detailing the harsher experiments. The only time she discusses the surgical aspects of the twin experiments is through a list of factual accounts from other twins who had gone through them or witnessed others going through them. In her dissociation from reality, Kor jumped around from the experiment types to talking about not witnessing death to what they wore in the camps in one page. Kor's work follows how the "impact of trauma" can "be represented by mimicking its forms and symptoms [denial coping mechanisms], so that temporality and chronology collapse, and narratives are characterized by repetition and

indirection” (Whitehead 3; qtd in Pellicer-Ortin 3). She cannot handle the idea surrounding her fears about what could have happened to her. Her silence is just as loud as her concise language on her traumatizing denial.

Trauma

Trauma, whether physical or mental, leads to lifelong imprints. These imprints give power to the words in a memoir. Harrowing experiences are why intergenerational trauma exists and why the amounts that are taught within education are dwindling. Kor’s accounts of her trauma are separate from the ordinary Holocaust survivor as she experienced a different side that most do not. Her trauma comes from the idea of identity loss and experiencing death. Like Nyiszli, Kor was in a constant state of uncertainty about when her death order would come from Dr. Mengele. However, the difference between Nyiszli’s and Kor’s trauma is that Kor could not do anything to help her circumstances besides staying healthy. The medical experiment victims’ trauma ideology is shown in the *Lilac Girls* novel, where Kelly places Kasia into the Ravensbrück experiments and gives her the same trauma that Kor indeed suffered.

When discovering the trauma in her memoir, a pattern that stood out, the whole memoir depicted Kor’s traumatizing story, but it was the one-liners that showed the impact of the events on her psyche. Memoirs also allude to the trauma itself as the authors are writing in the first person and points out the most traumatizing parts for them. Kor did this throughout, creating the pattern of one-line sentences showcasing her trauma. The first came after a description of Dr. Mengele’s twin experiments’ goals and how they were always naked for experimentation. Kor confesses, “the nudity was one of the most dehumanizing things in the camp for me” (40). The idea of body image comes back here. She did not like being on display for everyone, which only added to the trauma. Her confession stops there, but for readers, the trauma needs no

explanation. The image of standing naked in front of strange adults, mostly male, is enough. Her confession shows her acceptance of the trauma, and it is essential to point to the strength it takes to write how it affected her.

After she confesses to how the nudity affected her, she proceeds to talk about how the experiments took away her identity, too. Leading up to the one-liner, Kor clarifies that staying alive was the biggest priority in the experiments. In a line of its own, she says, "Because we were Mengele's twins" (42). The trauma is shown in the word "we" as it shows her belief that she was no longer an individual but a collective. She was no longer Eva Kor but a twin in the experiment. The power in the memoir's word choice proved how intense trauma could attach itself to someone and their thoughts. In trauma theory, there is a discourse discussing the relationship "between language and experience" that both Kor and Nyiszli's memoirs utilize as well as the relationships "between memorization and memory" and "between what you know and who you are" (Hungerford 69). The idea that no matter what, a survivor's trauma will always connect to their identity even with acceptance, as Eva Kor shows.

From the loss of identity to fear of death uncertainty, Kor reveals a different type of trauma. Survivalist trauma. What I mean by survivalist trauma is the trauma that comes from fighting to survive instead of giving up. It may seem like a weird concept to think about, but in Kor's situation, her choice to survive after almost dying in the Auschwitz hospital put her through more trauma than comfort until her liberation. Kor alludes to survivalist trauma by saying, "At Auschwitz dying was so easy. Surviving was a full-time job" (75). Her decision to survive for her sister, who is also liberated, caused more pain for her in the long run, but it is the trauma that she accepts the most as she does not deny her decision; she boasts about it in a sense. The idea of uncertainty fuels her trauma. Even with her interjections, she still found it hard to

cope with the idea that she will never know what the torture was all for. That trauma sticks and imprints in her writing for the audience to feel and empathize with.

Affect

Surviving the Angel of Death focused on the affect of fear, but also an affect of hope. The hope affect is not typically seen in Holocaust memoir as shown in Dr. Nyiszli's work, but for Kor, hope was the one emotion she could live for. Kor lived for the future instead of the past or present, a clear ideology shown in the book. In trauma and affect theory, Lauren Berlant states how "the present is seen as a symptom, the detritus of the significant relation between lived and remembered pasts and occluded futures" (4). Kor's memoir uses affect to show that her situation as a medical subject was just a symptom and her hope for a better future was strong, but sometimes blocked by fear of death and surviving, at the same time. Unlike the other novels and memoir discussed, Kor strayed away from guilt and shame, at least not noting it in the memoir with her language or experience.

During the switch over from before the Holocaust to the Holocaust, Kor's language evokes fear in her audience with the words. She describes the emotions felt on the platform, which all amount to the affect of fear without ever saying any words relating to it. The words Kor uses have the idea of fear bound to them. Like Sara Ahmed states, "emotions involve subjects and objects" (119). Kor writes: "There were screams. Confusion. / Desperation. / Barking. / Orders." Each word or phrase involved a new word, all with an affect of fear. The reader identifies each word, both separately and together, to read a scary scenario. Kor intends to show her fear on the platform and relate her fear to others' fear when they think of each of those words. The signification of words causes relation to emotions the involves certain objects or subjects. For some, confusion could lead to fear due to an academic subject that they failed in or

orders led to a symbol of fear from a childhood event or military employment. Each reader will associate the phrases with a subject or object that creates the affect of fear. For Kor, these words together signified fear of what was to come and what had occurred.

With how short Kor's memoir is, affect is not as present as her experiences were as she writes from a straightforward factual perspective. The affect of fear turns into hope about three-quarters of the way through the memoir when she survives an injection that was supposed to kill her. Her fever broke, and she finally was released from the infirmary. The sequence brings triumph and hopefulness to the readers as Kor's survival is powerful to read. Her motherly instincts about taking care of her sister, who was tortured while she was in the infirmary, also brings hope into the story. The affect of hope is attached to the notion of sisterhood, twinhood, and family. Using anaphora to show the affect of hope, Kor writes: "Because we were twins, we clung to each other. Because we were sisters, we depended on each other. Because we were family, we did not let go" (75). Each word and sentence plays off the next to create an image of survival and elicits Kor and her sister's hope to live past the Holocaust. Although the readers know the outcome of the Holocaust with liberation, Eva and Miriam's story remains unknown until the end of the book, where Kor reveals they both lived. The language Eva uses are subjects of hope; clinging, depending, and "did not let go" all attach themselves to a positive mindset. The connection between these words and how they are taught in combination with reliance and building shows how an affect relating to hope can be identified. Eva Kor creates an emotional memoir that connects denial, trauma, and affect with strong language and experience discourse.

Interconnection

Every survivor's story is personal, and Eva Kor and Dr. Miklos Nyiszli's memoirs show just how unique each perspective is. Nyiszli provides an account of a prisoner placed in the role

of both victim and perpetrator, which looks into how guilt, fear, and shame creates everlasting trauma with denial as a long-term coping mechanism. Kor shows a sole victim viewpoint and the choice to accept personal trauma as harsh as experimentation while showing how interchangeable fear and hope are in events such as the Holocaust.

With the use of Holocaust fiction and memoir, the story of the Holocaust can be discussed in length without the fear of overloading the human psyche. In a combination of both types of genres, I argue that students will benefit from understanding how to cope with atrocities like the Holocaust by learning how survivors and fictional characters learned. Not only will they learn how to cope, but how to “gain a critical understanding of their emotional response and how their emotional response influences their historical understandings when they witness genocide...” (Cooke and Frieze 159). Memoirs based on the Holocaust are becoming rarer as survivors pass on, which is why Holocaust fiction has come into popularity in recent years. The struggle to comprehend and teach Holocaust literature and any literature based on horrific events comes from doubting humans' strength in processing chaos. I contend that not reading about the Holocaust in both nonfiction and fiction genres does a disservice to our duty to bear witness.

CHAPTER 3: HOLOCAUST EDUCATION: CHANGING THE CURRICULUM

This thesis discusses the impact of the Holocaust medical experiments on literature and society. In this chapter, I will analyze their impact on literature education and how denial and trauma hindered teaching them either at all or in depth. In the analysis of both Holocaust memoir and fiction that utilize the medical experiments as a central plot within their stories, the importance of the medical experiments is not lost, but avoided. It goes back to theorists, such as Brian Wimborne and Marianne Hirsch, whom argue that trauma can be passed from generation to generation and that fear stops people from wanting to learn about events as horrific as the Holocaust. I argue that teaching the Holocaust medical experiments with literature, like the novels and memoirs above, will lessen the traumatic fear surrounding the atrocities, but allow students to bear witness to every part of the genocide.

One issue with teaching Holocaust literature in general is the impending Holocaust denial that grows with the events growing distance from the present. Holocaust denial is defined in the dictionary as the belief or assertion that the Holocaust did not happen or was greatly exaggerated. Individuals and communities who perpetuate this ideology cause intense harm on the growing generations and anyone who lacks the rounded education on the Holocaust. Michael Whine, a Jewish consultant for the European Jewish Congress, explores the need for national persecution of Holocaust deniers and a pressing need for comprehensive Holocaust education within public schools. He concludes that defeating denial happens with “education-coupled with the widespread understanding that denial is a means to undermine or falsify...” reality (Whine 18). Going back to the discussion of denial within literature shown by the characters and authors, Holocaust deniers exhibit the same symptoms, where their brains cannot comprehend that their

ancestors or beliefs turned into a genocidal mass event. Although there is bounds of evidence and eyewitness testimony, the Holocaust still finds doubters of its existence.

Denial creeps into education about the Holocaust as well when teachers have denial ideologies. Raphael Cohen-Almagor provided several case studies in Canada where teachers were giving false revisionist teachings of the Holocaust for decades. Not only does this harm the developing choices children make about the historical past, but it creates an unsafe space for children whose family members were a part of the Holocaust's traumatizing reality. Holocaust education, in both literature and history teachings, are needed to teach about equality, tolerance, and most of all, remembrance.

As the years go by, the amount of education and knowledge surrounding the Holocaust decreases. In a Holocaust Knowledge and Awareness Study conducted by Claims Conference on American Millennials and Generation Z, 48% of respondents could not name a single concentration camp and 56% were unable to identify Auschwitz-Birkenau (the medical experiment camp) at all (Bronfman). Unfortunately, these statistics show a lack of education surrounding the main proponents of the Holocaust, such as the concentration camps and the amount of people who perished within them. In Florida, specifically, 79% of the survey takers believed that Holocaust Education should be "compulsory" in schools throughout the United States to ensure it does not ever happen again (Bronfman). Other states shows a similar want, but it brings up the question of why the Holocaust is not taught throughout one's educational career in multiple disciplines. Only 17 out of 51 states require some sort of Holocaust education within their secondary schools. A Florida Statue describes what requirements must be taught as Holocaust Education:

The history of the Holocaust (1933-1945), the systematic, planned annihilation of European Jews and other groups by Nazi Germany, a watershed event in the history of humanity, to be taught in a manner that leads to an investigation of human behavior, an understanding of the ramifications of prejudice, racism, and stereotyping, and an examination of what it means to be a responsible and respectful person, for the purposes of encouraging tolerance of diversity in a pluralistic society and for nurturing and protecting democratic values and institutions, including the policy, definition, and historical and current examples of anti-Semitism, as described in s. 1000.05(7), and the prevention of anti-Semitism. (Title XLVIII g 1.)

Using statues, such as Florida's, on the Federal level will not only increase knowledge surrounding the Holocaust, but also on tolerance and emotional situations.

With Holocaust education being taught with novels and memoirs, understanding the harms of racism and a warped morality can be easier. Holocaust literature provides readers the ability to analyze an individual's trauma and personalized denial according to their affective behavior. Instructing students on the history as well as the literature surrounding the Holocaust will allow for an emotional maturity and a well-rounded understanding of the events as the people experienced them. Geoffrey Short argues that the novels and autobiographies must be chosen carefully otherwise students are taught, unbeknownst to them, the bare minimum. Short describes the United States shortcomings where some teachers "neglect, or skate over, the long history of anti-Semitism" (181). I argue that as a nation, we also neglect to provide all the information surrounding the Holocaust, including the history of eugenics and medical experimentation, which caused the Holocaust. The use of well-chosen and vetted literature students on the Holocaust as a whole and the people, both victim and perpetrator, involved.

In attempt to provide an argument for teaching Holocaust literature and medical experiment discourse, there is also a space to teach the humanistic aspect found within books that are expelled from textbooks. When reading a novel or a memoir, there becomes a personal quality attached to it. A reader can connect with a character for the smallest characteristic like

hair color or personality trait. With Holocaust literature, the emotional connection provides an opening to teach the imprint of affect within their pages. Rachel Baum coins two phrases central to Holocaust literature education: pedagogical and obligatory emotions. Pedagogical emotions, she states, “circulate in the classroom” and forms the ability to “make judgements about ourselves, others, and the culture around us” (Baum 46). Obligatory emotions follow the sociological normativity of emotions that attaches to certain objects or imagery and have consequences for not reacting as society would. These emotional components together teach the empathy that comes from learning through Holocaust literature. Students learn how to understand their own emotions towards such a horrific event in a safe space while also learning the historical implications of morality. There are several other studies of how the analysis of affect and trauma helps to understand the Holocaust better as a whole while teaching positive coping mechanisms for handling trauma.

In one such study by Steven Cooke and Donna-Lee Frieze, United Kingdom (UK) students were presented with the opportunity to visit Auschwitz-Birkenau physically in person. The students who visited the camp utilized “the language of emotion” to describe what the camp provided to them on these field trips (Cooke and Frieze 161). Cooke and Frieze argue that survivor testimony, in video form, allows for the same engagement as the field trips. Complementary to their argument is teaching the texts and concepts behind the landscapes before witnessing survivor testimonies or visiting concentration camps to best prepare students for the harsh reality of the event. Through a pedagogical approach, like performativity, in combination with Holocaust literature, students will apply their knowledge learned from texts, whether fictional or realistic, to a real location or person in order to explore denial, trauma, and affect theory in real time.

From field trips to classroom documentaries, another case study of combining Holocaust literature with video survivor testimonies is shown in Shoshana Felman's *Testimony* (1992). In her college course entitled "Literature and Testimony," Felman applied "a juxtaposition of psychoanalysis and de Manian deconstruction...to analyze the relation between traumatic experience and literature" (Hungerford 72). From her study, she found that trauma can indeed be transmitted by Holocaust testimonies, but also allows the students to healthily cope with their own trauma, either from the experience or past life traumas (73). Amy Hungerford discusses Felman's study and relates it to the false memoir, *Fragments*, by Benjamin Wilkomirski. She describes how written trauma testimonies are "not only like a life, but it can become the actual experience of another life, an experience that then becomes ours" (73). Hungerford combined with the Felman study shows the importance of teaching Holocaust memory with testimonials, such as memoirs. Students grasp how to critically analyze a text, but also how to overcome the denial of a traumatic event and cope with emotions they may not have experienced themselves.

Both of these studies show an experimental classroom setting that is rare to see, but they both heed positive results in creating better students and people. When granted the choice to study the Holocaust, literature is the best place to expand the monotonous summary given each year in history classrooms. Some schools, and have for a long time, started to teach *Night* by Elie Wiesel, but not to understand Wiesel's experience in the Holocaust. They use his novel due to the well-written nature of it and the notable figures of speech he uses throughout. Education in secondary school is based around testing more so than retaining quality information. With Holocaust literature, the teaching should surround both the content and the language to understand the complexities of traumatic experiences. *Night* should be supplemented with video interviews with Wiesel and historical interconnections found within the book.

Along with memoirs, fictional novels should also be read and discussed a part of the curriculum. Depending on the length of the unit, these stories can be fairytale retellings or short stories, such as Borowski, that allow for comparative analysis between nonfiction and fiction in the realm of Holocaust literature. It may offer a reprieve from cold accounts of the Holocaust often found in memoirs, as shown in Eva Kor's *Surviving the Angel of Death*. Not only does fiction allow for a bit of disassociation with reality, but to bear witness to interpretations of the event from second or third generational lines. At some point in the near future, Holocaust memoirs will be a distant memory as survivors are "disappearing" from this lifetime. Although the main survivors and perpetrators are passing on, their children and grandchildren write their stories for educators and readers to comprehend the Holocaust from a differing perspective filled with imaginative components. Readers are more willing to identify with a character in a fiction novel than an author of a memoir as the trauma linked to fiction is not as direct. In combining memoirs with Holocaust fiction, education can learn how to teach two types of trauma: firsthand and postmemory.

Marianne Hirsch defined the idea of postmemory, which is the reasoning behind the rise in Holocaust fiction. Survivors are succumbing to old age and their children and grandchildren are the new preservers of the Holocaust memory, but it is not their memory, hence the fiction. However, postmemory also alludes to the generations learning about the Holocaust secondhand, through fiction or through memoir or even through personal accounts of family members. Hirsch insists that:

At stake is not only a personal/familial/generational sense of ownership and protectiveness but also an evolving theoretical discussion about the workings of trauma, memory, and intergenerational acts of transfer, a discussion actively taking place in numerous important contexts outside of Holocaust studies. (104)

She could not be closer to the truth. The importance in ensuring that there is a standard curriculum within history classrooms as well as English ones is to explain in different capacities the emotions and trauma that come from mass tragedy events. In literature, students will be able to comprehend the language and symbolism of a Holocaust novel while history allows them to digest the cold facts of the genocide. Together, these subjects can bridge the gap in education, especially public education, that provides information without understanding the importance behind them.

The reason behind presenting the four novels in the previous chapters was to show how analysis of novels and memoirs together can instruct how to cope with loss, the signs of denial, and the everlasting emotions that come from trauma-inducing events. Literature can provide better insight into how to deal with trauma in a way that history never could. Reading literature, especially those surrounding the Holocaust, delivers a new way to look at the “intricate (dis)connections between memory, life, and the textual artifact” (Pellicer-Ortin 17). Books also grant students a certain relationship and intimacy that historical lectures cannot seem to replicate, which is why teaching the concentration camp medical experiments as a part of literature would be ideal for handling such horrendous information.

The biggest question for historians is why the medical experiments are not taught within public school. Are they worried for the secondary trauma Phillip Codde refers to or are teachers unsure how to hand such a horrific topic? How are topics chosen to teach about the Holocaust while others, just as important, are omitted from education, sometimes even at the college level? These questions show how literature can help understand the medical experiments of the Holocaust in a humane and respectful way.

Teaching the Holocaust is a large job in and of itself but providing details and intricacies can make some teachers uncomfortable. Codde tracks several forms of trauma that occur from hearing about suffering, like from Holocaust testimonies, where one can “take over some of the traumatic burden” or in extreme cases believe “the trauma is really one’s own, due to total identification with the victim” (62-63). The anxiety that builds from both the student and teacher stems from not knowing what crosses the line and a lack of standardization of Holocaust curriculum across the country. I argue that with the growth of the student, there should be a growth of knowledge surrounding the Holocaust. Each year, children have to take the core subjects of history and English, so to blend the curriculum to benefit each other would not be too difficult.

At the high school level, there should be, to the least, a brief overview on the events occurring within the concentration camp, including the medical experiments. In order to accomplish this goal, a standardization of education would have to occur through the nation with both a historical and literary component. In the history classroom, both videos and lectures should be used for students to understand the background of the Holocaust’s affect on individuals throughout the world. While studying this subject in history, literature will be presented in English classrooms, such as *Lilac Girls*, to give a glimpse into the inner workings of the concentration camps. Elements would include medical discourse, trauma theory, affect theory, and the understanding of denial. As I did in the previous chapters, students would be able to analyze the books, for not just literary elements, like similes and metaphors, but for emotions. With these combinations of education, Holocaust memory will mean more than just a phrase student do not understand, but invoking “a commitment to memory as a dynamic, political process that continues to shape our contemporary world” (Baum 56). The students have to feel

connected to Holocaust and the implementation of literature will allow that connection to strengthen.

The medical experiments are an integral part of the Holocaust and should be taught in public education. Although they are explicit in nature, it should be a choice for student to be able to make for themselves based on previous years education to get them ready for understanding the harsh realities of the world. In the study based on what millennials were taught about the Holocaust, they were also asked if they believed it should be taught to ensure that history does not repeat itself. Each state had at least two-thirds or higher agreeing to a fully rounded Holocaust education after seeing how little they knew about the details of the Holocaust, like concentration camp name (Bronfman). With the blending of history and literature, the discussion of the medical experiments and the Holocaust as a whole will be told without detracting from the event.

CONCLUSION

Without the full knowledge of the Holocaust, there is no way to completely stop such a horrific genocidal event from reoccurring. Holocaust literature can help fill in the gaps that history cannot or that teachers are unsure of how to teach in a factual manner. Brian Wimborne contends that Holocaust literature, namely fiction, “may allow us a glimpse into a looking glass wherein we see reflected, not only the minds of the guilt but our own” (103). Literature creates a space for imagination and history to intermingle in a way that allows for a more nourished discussion. One that allocates for students to feel more comfortable speaking about traumatic events and their emotional components.

In comparing *This Way for the Gas, Ladies and Gentlemen* and *Lilac Girls*, the implementation of denial, trauma, and affect theory per generation displays. By looking at several examples of both trauma and affect surrounding denial, such as Michael J. Salamon's causes of denial and Brian Wimborne's analysis of trauma and affect within novels, the ability for education to explore how Borowski wrote them as a way to distance himself from his personal accounts will help students understand the consequences of the Holocaust on a physical and mental level. Utilizing theorists like Philippe Codde and Marianne Hirsch for Kelly's work, speak to her focus on using separate point-of-views, space, and time to allow for readers to follow the trauma, affect, and ultimate denial of all the characters. Literary fiction novels, such as Kelly's *Lilac Girls* and Borowski's *This Way for the Gas, Ladies and Gentlemen*, employ the fiction genre's escapism and the realism of history while separating themselves from the true nature of the medical experiments and the Holocaust. However, through their tag of fiction, they fall into the type of writing that permits readers to recognize the trauma, the need for denial, and the victims' feelings.

In conjunction with novels, memoirs, *Surviving the Angel of Death* and *Auschwitz: A Doctor's Eyewitness Account*, provide a unique perspective on how survivors see the Holocaust themselves. The books analyzed the difference of eyewitness accounts to fictionalized plots of Holocaust medical discourse in their inclusion of denial, trauma, and affect. Using the theoretical framework of Amy Hungerford and Silvia Pellicer-Ortin, the chapter examined how accounts differ between victims, like Eva Kor, and perpetrators, like Dr. Miklos Nyiszli. In comparison to the fiction section, memory and non-fiction provide a colder reading than novels that may seem harder to process. However, utilizing both memoir and novels may allow for just the right amount of reality and fantasy to process the whole Holocaust. As Brian Wimborne states, the subconscious cannot "grasp the extent of the calamity any more than it can appreciate concepts like time running backwards or curved space" (100). Through elements of fragmented memory, shame and guilt affects, and personalized trauma, Kor and Nyiszli's memoirs blend narrative techniques with true event facts to speak to the shocking nature of medical experiments.

I argue that Holocaust denial has minimized the study of Holocaust education, especially medical experimentation. Through a standardization of Holocaust education and the use of novels with memoirs in English classrooms, the ability to comprehend the event will grow. To change the narrative, where 60% of millennials have no idea about concentration camps or even the bare bones of the Holocaust, there needs to be a literature component introduced into public schools. Utilizing scholars such as Marianne Hirsch, Lauren Berlant, Brian Wimborne, and Rachel N. Baum in support of employing a well-rounded education both in history and English, the idea is attainable.

The idea is to understand the use of denial, trauma, and affect within each genre. The literature analyzed focused on medical experimentation and the silenced voices of the victims

who were a part of them. The theories of trauma and affect are relatively new to Holocaust literature studies, which brings a lack of sources to the overall subject. Although there is a lack of sources on medical discourse, both fictional and historical, the understanding of trauma, denial, and affect relies on analyzing the written language. This thesis's significance is to detail the importance of Holocaust literature within education and comprehend the effects denial has on large genocidal events portrayed in literature.

Overall, the theme of medical experimentation and education surrounding the Holocaust is present in the overarching argument. The idea in introducing novels like *Lilac Girls* with memoirs such as *Surviving the Angel of Death* is to tolerate an emotional analysis that consents for students and teachers to freely discuss the topic of death and the “emotional challenges of navigating the conversations about dying” or genocide (Strange et. al. 4). Without the education system backing teachers and creating open spaces to converse about traumatizing events, like the Holocaust is, the details needed to be taught—the medical experiments—get lost in history. Literature can assist in conversations that seem grave and difficult as they grant students the ability to process their denial, trauma, and affect in better ways than a historical lesson can. Although a blended education will help students understand all the elements, self-care mechanisms, and teaching the next generation the lessons they learned regarding the Holocaust.

WORKS CITED

- Baum, Rachel N. “‘What I Have Learned to Feel’: The Pedagogical Emotions of Holocaust Education.” *College Literature*, vol. 23, no. 3, 1996, pp. 44–57. JSTOR.
- Baumeister, Roy F., et al. “Freudian Defense Mechanisms and Empirical Findings in Modern Social Psychology: Reaction Formation, Projection, Displacement, Undoing, Isolation, Sublimation, and Denial.” *Journal of Personality*, vol. 66, no. 6, 1998, pp. 1081–1124.
- Berlant, Lauren. “Intuitionists: History and the Affective Event.” *American Literary History*, vol. 20, no. 4, 2008, pp. 845–860.
- Borowski, Tadeusz. *This Way for the Gas, Ladies and Gentlemen*. Translated by Barbara Vedder, Penguin Publishing Group, 1992.
- Bronfman, Matthew. “First-Ever 50-State Survey on Holocaust Knowledge of American Millennials and Gen Z Reveals Shocking Results.” Claims Conference, Schoen Cooperman Research, 14 Jan. 2021.
- Carless, David, and Kitrina Douglas. “Narrating Embodied Experience: Sharing Stories of Trauma and Recovery.” *Sport, Education and Society*, vol. 21, no. 1, 2015, pp. 47–61.
- Codde, Philippe. “Transmitted Holocaust Trauma: A Matter of Myth and Fairy Tales?” *European Judaism*, vol. 42, no. 1, 2009.
- Cohen-Almagor, Raphael. “Hate in the Classroom: Free Expression, Holocaust Denial, and Liberal Education.” *American Journal of Education*, vol. 114, no. 2, 2008, pp. 215–241.
- Cooke, Steven, and Donna-Lee Frieze. “Imagination, Performance and Affect: a Critical Pedagogy of the Holocaust?” *Holocaust Studies*, vol. 21, no. 3, 2015, pp. 157–171.
- Crockett, Talia E. “The Silence of Fragmentation.” *Barnboken*, vol. 43, 2020, pp. 1–18.
- Douglas, Kate. Review of *Haunted Narratives: Life Writing in an Age of Trauma*, by Gabriele

- Rippl et al. *University of Toronto Quarterly*, vol. 84 no. 3, 2015, p. 251-252.
- Glasner-Heled, Galia. "Reader, Writer, and Holocaust Literature: The Case of Ka-Tzetnik." *Israel Studies*, vol. 12, no. 3, 2007, pp. 109–133., doi:10.2979/isr.2007.12.3.109.
- Hungerford, Amy. "Memorizing Memory." *The Yale Journal of Criticism*, vol. 14, no. 1, 2001, pp. 67–92.
- Hwangbo, Kyeong, *Trauma Narrative and the Marginal Self*. Dissertation.
- Kelly, Martha Hall. *Lilac Girls: a Novel*. Ballantine, 2017.
- Kor, Eva Mozes., and Lisa Rojany-Buccieri. *Surviving the Angel of Death: the Story of a Mengele Twin in Auschwitz*. Tanglewood, 2009.
- Martínez-Alfaro, María Jesús. "The Estrangement Effect in Three Holocaust Narratives: Defamiliarising Victims, Perpetrators and the Fairy-Tale Genre." *Atlantis. Journal of the Spanish Association for Anglo-American Studies*, vol. 42, no. 1, 2020, pp. 37–56.
- Miglianti, Giovanni. "Italian Holocaust Literature and the Paradox of Affect." *Journal of War & Culture Studies*, vol. 13, no. 2, 2019, pp. 179–195.
- Nyiszli Miklós, et al. *Auschwitz: a Doctor's Eyewitness Account*. Arcade Publishing, 1960.
- Pellicer-Ortín, Silvia. "'The Ghost Language Which Passes between the Generations': Transgenerational Memories and Limit-Case Narratives in Lisa Appignanesi's *Losing the Dead and The Memory Man*." *Humanities*, vol. 9, no. 4, 2020, p. 132.
- Salamon, Michael J. "Denial and Acceptance." *Clinical Gerontologist*, vol. 14, no. 3, 1994, pp. 17–25.
- "The 2020 Florida Statutes." *Statutes & Constitution: Online Sunshine*, 19 Mar. 2021.
- Trepte, Hans-Christian. "Between Documentary and Provocation. New Tendencies (Not Only) in

Contemporary Polish Holocaust Literature.” *Slovo a Smysl* , vol. 15, no. 29, 2018, pp. 171–184.

Wimborne, Brian. “The Role of the Novel in Holocaust Literature.” *Quadrant*, Dec. 2019, pp. 99–103.

“WHAT IS PSYCHOLOGICAL TRAUMA?” What Is Psychological Trauma? | Penn Center for Youth and Family Trauma Response and Recovery | Perelman School of Medicine at the University of Pennsylvania, Penn Psychiatry, 2021.

“Where Holocaust Education Is Required in the US.” *United States Holocaust Memorial Museum*, United States Holocaust Memorial Museum.

Whine, Michael. “Expanding Holocaust Denial and Legislation Against It.” *Extreme Speech and Democracy*, 2009, pp. 538–556.