

## COMMENTARY

# How Holocaust survivors cope with life: a cross-sectional study of financial exploitation in Israel

Commentary on “Financial Exploitation and Mental Health Amongst Holocaust Survivors: The moderating Role of Post-traumatic Symptoms”  
by Weissberger *et al.*

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The Holocaust was a human tragedy that caused the most miserable suffering in Israel's history. Many people were affected by this horrific massacre. Regardless of their ages, Holocaust survivors (HS) all had to deal with humiliation, denied fundamental rights, fatal occurrences, post-trauma shock caused by bereavement, and entailed adaptation to challenging new circumstances. It is necessary to reflect on the Holocaust, just as it is necessary to care for HS. What is the current state of those survivors' health, how about their mental state, and are they receiving proper care? In order to answer the questions, the team led by Weissberger, Gali organized an investigation, and this commentary aims at introducing the population characteristics, the core topics, the instructional implications, and the sociological contributions of their study.

This is a concise and focused study with a cross-sectional online survey involving 137 participants in Israel. It emphasizes the correlation between mental disorders and self-reported history of financial exploitation (FE) among HS. The authors aimed to examine the mental health correlated to FE in HS. In comprehensive consideration of their Holocaust experience, self-reported FE, and trauma-related symptoms, this study elucidates how HS with post-traumatic stress disorder feel about FE and explores if past trauma may worsen the psychological distress incurred by FE.

First, post-traumatic stress disorder (PTSD) and other psychological disorders caused by traumas vary in different studies; population heterogeneity may be one of the reasons for the selection of the studied population in this paper. In the general population, the WHO World Mental Health (WMH) surveys

could be reliable resources for estimating the prevalence of mental health problems. According to a 2017 secondary study based on WHO WMH data, 70.4% of participants reported trauma, largely from life experiences (Mureşanu *et al.*, 2022). However, due to the rarity of major catastrophic events and the challenge of gathering sufficient data, there is very little research on survivors of Holocaust. Therefore, the research focuses on this minority and offers good sociological insights into the post-traumatic symptom displayed by this particular group.

Second, the study elicits an important topic: social predictor of PTSD. It can be roughly divided into two categories based on its incidence prior or subsequent to the onset of trauma: pre-trauma predictors including gender, education, age, and so on; peri- and post-trauma predictors including trauma types and acute stress responses (Qi *et al.*, 2018). This study identifies and investigates specifically two of these predictors in the cohort: old age (pre-) and Holocaust trauma (peri-). Given that the elderly with lived experience of holocaust are a minority in desperate need for mental healthcare, this study sheds light on the establishment of effective and considerate psychological services, improvement of healthcare systems, and refinement of associated policymaking (Su *et al.*, 2023). These two predictors will be discussed in detail as follows.

Aging causes incremental change of mental states. As indicated by the study, people change systematically as a result of the interaction of many different variables over time. As we might imagine, the survivors of this unusual and serious ordeal could end up with long-lasting effects, exerting

influence to their social function from time to time. Meanwhile, social factors and problems also have major impacts on the mental health and well-being of these old persons (Compton, 2023). In the end, the elderly may experience difficulties because of both their old age and the mental health problems resulting from particular experience in their early life, which is similar to the idea of Peisah *et al.* (2023). When the survivors get old, they may become lonely and sensitive; they need psychological assistance to heal the wounds left by their enduringly painful recollections. As a result, the state of the elderly is alarming.

The study focuses on the Holocaust's impact, which is an intricate topic (Anderlini, 2020). For one thing, the memory of the Holocaust is shattered but profound. One medicine research states that the HS reported had trouble telling accurate stories about their prior experiences (Aarons and Berger, 2017); their recollections were fragmented, reluctant, and clouded by time and grief, indicating prolonged PTSD symptoms – the trauma of the Holocaust haunts physically, even mentally and socially. For another thing, the long-term impact of the Holocaust on the victims demonstrates heterogeneity: persistent cortisol excretion was detected in some HS, who still exhibited severe PTSD symptoms despite having lived in peace for a long time (Greenblatt-Kimron, *et al.*, 2021; Rubin, 2020), while some others who arrived at old age showed remarkable resiliency and a strong sense of self (Greenblatt-Kimron, *et al.*, 2021; Rubin, 2020). There may be important factors distinguish these survivors who exhibit such heterogeneity and thus relate to differences in psychological development. In this regard, the paper offers a viewpoint on the HS through its analysis and made the argument that unresolved traumatic memories may have increased their vulnerability.

The study mainly focuses on the vulnerability by examining an underexplored condition, FE. It underlies FE's current effect, with a focus on HS's emotional reaction thereto. Here, the definition of FE is a "social transaction" or improper use of funds, most of which usually takes place among relatives and acquaintances, in the forms of Fraud, false pretense, embezzlement, conspiracy, forgery, falsifying records, and coerced property transfers (Carstensen *et al.*, 1999; Peterson *et al.*, 2014; Spreng *et al.*, 2017).

Specifically, the first aim of the paper is to examine the relationship between FE and depressive and anxious symptomatology among survivors and non-survivors. It is found that this relationship will be stronger among HS in comparison to those who were not directly exposed to the Holocaust. Second,

this study tends to examine if the stronger relationship between FE and depressive/anxious symptomatology is driven by symptoms of PTSD. It concludes that the relationship between FE and depressive/anxious symptomatology will be strongest among HS with high-level PTSD symptoms. In other words, apart from the Holocaust and old age, the FE may be another important social predictor of PTSD. Overall, these predictors exert complex influence over the survivors and may increase difficulties of social health promotion work.

Generally, the paper provides valuable insights into the impact of FE on older adults and unpicks its potential mechanisms that affect their mental health. As indicated by the paper, individuals develop systematically across time as a result of the interaction of complex factors (Weissberger *et al.*, 2023). It underscores the impact of FE on older adults as HS particularly and provides and discusses the potential cumulative advantage/disadvantage theory that may explain the increased vulnerability of these individuals to FE. The authors argue that the negative mental health effects of FE may be particularly impactful for these individuals, as the experience of FE may be reminiscent of conditions that existed during the Holocaust. The authors' predictions and the findings contribute to the understanding of the negative consequences of FE for older adults and highlight the importance of further research in this area.

However, perhaps because of the inadequate population size and the limited accessibility of online data, the two FE questions were designed straightforward in order to include as many interviewees as feasible – (1) "After the age of 50, there was a situation in which you felt you were taken advantage of financially?" and (2) "After the age of 50, did someone you know feel that you were taken advantage of financially?" Hence, one suggestion for the researchers may be the requirement for more precise FE situations in subsequent studies, for the accountability of information.

Taken together the discussions above, this paper states that HS' unique experiences during and following the Holocaust may make them more susceptible to FE as they age, and their vulnerability to FE may be related to some social factors. Though this conclusion was based on a cross-sectional design and the number of interviewees were limited, the paper clarifies that relationships between FE and symptoms of depression and anxiety are significant, and that a history of trauma may exacerbate the psychological distress associated with FE. In addition, one similar study provides more information on FE, which may be helpful in comprehending the findings: individuals bothered by FE may have some

socialization characteristics – failing to engage in routine activities and getting along with friends, family, and neighbors (Holtfreter *et al.*, 2014). Accordingly, the Holocaust may affect some of the survivors' social behaviors, making them more vulnerable to FE.

At last, why are forementioned perspectives important? They involve individual's history, personality, and interpersonal relationships that may influence their health: their ideas of health and disease, as well as their responses to outer changes and inner disorders, could be influenced by their long-term social condition. Indeed, people may not be always resistant to most social impacts from the social environment throughout their life (Lebowitz, 1975). Though previous research on these topics is limited, they provide important inspirations on social services at all stages of life. In this paper, examining social effects within HS population reveals that certain social occurrences have unique effects on different groups. As indicated by its findings, past traumatic experiences may make psychological distress worse among the elderly survivors. These people might have trouble comprehending and coping with their social connections and integrate unsettling prior experiences with certain life occurrences. This study is innovative because it probes into the relationships between socioeconomic events and psychiatric problems. In so doing, it is conducive to the public health, and the whole society in terms of social cohesion particularly—it is helpful for social service providers and related professionals who assist the vulnerable elderly in learning how to identify and avoid exploitative behaviors (Stiegel, 2012). Similar cross-disciplinary studies are in need for boosting social collaboration in advancing public health.

In conclusion, we think the most important outcome of this paper is the indication of social characteristics and needs of HS, which provides far-reaching implications for public health services.

### Conflict of interest

The authors had no conflicts of interest to declare in regard to the conduct of this commentary or the preparation of the manuscript.

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### References

- Aarons, V. and Berger, A. L.** (2017). *The Intergenerational transmission of memory and trauma from survivor writing to post-holocaust representation*, in *Third-Generation Holocaust Representation* (pp 41–66). Northwestern University Press.
- Anderlini, D.** (2020). Cultivating awareness of the Holocaust in medicine. *The Lancet (London, England)*, 395, 334–335.
- Carstensen, L. L., Isaacowitz, D. M. and Charles, S. T.** (1999). Taking time seriously. A theory of socioemotional selectivity. *The American Psychologist*, 54, 165–181.
- Compton, M. T.** (2023). Improving the well-being of older adults requires programs that enhance resilience as well as policies, across sectors, that promote health. *International Psychogeriatrics*, 35, 215–217.
- Greenblatt-Kimron, L. et al.** (2021). Event centrality and secondary traumatization among Holocaust survivors' offspring and grandchildren: a three-generation study. *Journal of Anxiety Disorders*, 81, 102401.
- Holtfreter, K. et al.** (2014). *Financial Exploitation of the Elderly in a Consumer Context*, in *Report*. Washington, DC: NCJ 245388 United States Department of Justice, Office of Justice Programs, National Institute of Justice.
- Lebowitz, D.** (1975). Social environment and health. *Public Health Reviews*, 4, 327–351.
- Mureşanu, I. A. et al.** (2022). Evaluation of post-traumatic stress disorder (PTSD) and related comorbidities in clinical studies. *Journal of Medicine and Life*, 15, 436–442.
- Peisah, C. et al.** (2023). An international consensus statement on the benefits of reframing aging and mental health conditions in a culturally inclusive and respectful manner. *International Psychogeriatrics*, 35, 13–16.
- Peterson, J. C. et al.** (2014). Financial exploitation of older adults: a population-based prevalence study. *Journal of General Internal Medicine*, 29, 1615–1623.
- Qi, W. et al.** (2018). Application of data pooling to longitudinal studies of early post-traumatic stress disorder (PTSD): the International Consortium to Predict PTSD (ICPP) project. *European Journal of Psychotraumatology*, 9, 1476442.
- Rubin, E.** (2020). Surviving the Holocaust: trauma and resiliency in later life. *Journal of Gerontological Social Work*, 63, 139–142.
- Spreng, R. N. et al.** (2017). Financial exploitation is associated with structural and functional brain differences in healthy older adults. *The Journals of Gerontology. Series A, Biological Sciences and Medical Sciences*, 72, 1365–1368.
- Stiegel, L. A.** (2012). *An overview of elder financial exploitation generations*. *Journal of the American Society on Aging*, 36, 73–80.
- Su, Y. et al.** (2023). Prevalence of loneliness and social isolation among older adults during the COVID-19 pandemic: a systematic review and meta-analysis. *International Psychogeriatrics*, 35, 229–241.
- Weissberger, G. H., Bensimon, M. and Shrira, A.** (2023). Financial exploitation and mental health among Holocaust survivors: the moderating role of posttraumatic symptoms. *International Psychogeriatrics*, 25, 1–13.