

# HOPE AMIDST HORROR: THE RESILIENCE OF WOMEN SURVIVORS IN HOLOCAUST

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## Abstract:

The Holocaust is recognized as one of the most catastrophic genocides in human history, resulted in the systematic extermination of six million Jews. The origins of this atrocity can be traced back to pervasive anti-Semitism that predated World War I, rooted not only in religious prejudices but also in discriminatory perceptions of Jewish physiological and behavioral traits. With the rise of the Nazi regime, anti-Semitic policies formulated in the 1920s were institutionalized, leading to the establishment of ghettos—closed, open, and destructive—to isolate and oppress Jewish populations. This study focuses on the resilience of women who endured the horrors of Nazi concentration camps, exploring their capacity to withstand and adapt to extreme adversity under brutal conditions. The memoirs of Dr. Gisella Perl's *I Was a Doctor in Auschwitz* and Olga Lengyel's *Five Chimneys* serve as primary texts to investigate survival strategies and coping mechanisms. Utilizing Ann Masten's resilience theory as an analytical framework, this research examines the patterns of resilience exhibited by female Holocaust survivors.

**Keywords:** Holocaust, resilience, women survivors, Nazi concentration camps, anti-Semitism, Ann Masten, Dr. Gisella Perl, Olga Lengyel.

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## INTRODUCTION

The Holocaust, a meticulously orchestrated genocide that resulted in the systematic extermination of six million Jews, is widely regarded as a terrible chapter in human history. The term 'Holocaust' is derived from the Greek word 'holokauston', which refers to a burnt offering or sacrifice. Encyclopaedia Britannica defines the Holocaust as "Holocaust, the systematic state-sponsored killing of six million Jewish men, women, and children and millions of others by Nazi Germany and its collaborators during World War II" (Berenbaum). Holocaust traces its robust connections with Jews and nazis, which was unsung for a longer period. Nazi's cruelty and violence against Jews is considered as the most terrible phase in human history which needs to be explored and globalized. Nazi's believed that Jews are unworthy to live in this world, and considered them as "an existential threat" to German country, and they should be crucified from the world population which consistently led to war between Jews and Nazis. Few writers from this contemporary period have verbalized their experiences through their books which plays a significant role in understanding human history and English literature as well.

The root cause of this significant event, World War I, may be traced back to the long-standing issue of anti-Semitism, which existed in history before to the war. Antipathy towards Jews arose not solely due to their religious beliefs, but

also due to their physiological characteristics and conduct. The hatred towards Jews were sustained in the society in common which was later converted to societal stereotypes. The intention of hatred is been implanted in the youth which was passed on by their ancestors. In this perspective, society play a vial role in passing on both good and bad superstitious belief which ends in a stereotype which is unethical.

Societies produce stereotypes (which are the height of artifice), and then consume them as commonplace (which are the height of naturalness). That is how bad faith can pass for good conscience. That is how religious distinctions and cultural stereotypes can lead to murder...(Weber 12)

For example, a hooked nose and greed are frequently associated as archetypal traits of Jewish individuals. There was an unfounded belief that Jews utilised black magic and other forms of sorcery to achieve success, however there was no concrete proof to support this claim. Upon assuming power, the Nazis enacted the anti-Semitic agenda that had been formulated in 1920. In 1935, the Government officials sought a precise legal description of a Jew, leading to the introduction of The Nuremberg Law. This law includes law for the protection of German blood and German honor and the Reich citizenship law. This law, enacted in 1935, imposed restrictions on Jews, including the denial of voting rights, prohibition of any romantic or sexual involvement with Germans, and the definition of Jews as individuals with at least one Jewish parent or grandparent.

The Aryan race regarded the presence of Jews in public spaces as a contamination. For example, in public swimming pools, the mere presence of a Jewish individual causes the healthy Aryan person to feel a strong aversion. Starting in September 1939, every Jewish individual above the age of six was required to wear a Star of David with the letter J sewn onto it. Jews were obligated to display a badge on their clothing in order to publicly declare their identity. Identity cards were issued to individuals with German names, and to avoid confusion among German officials, the Jewish names Sarah or Israel were added. They were expelled from all social and cultural domains. Children were expelled from schools and Jews were terminated from their employment due to their Jewish identity. Subsequently, these unemployed and homeless individuals of Jewish descent were forcibly confined to ghettos. Ghettos were designated areas where Jews were confined and subjected to discrimination by the Germans. These ghettos were constructed beyond the borders of the nation. There exist three distinct types of ghettos. There were three types of ghettos: closed ghettos, which were enclosed by walls or barbed wire; restricted-entry open ghettos; and destructive ghettos, where captives lived briefly before being killed.

Holocaust was not the consequence of an irrational, ideological imperative, but rather of what appeared to the experts and was accepted by the regime as an entirely rational and urgent economic necessity, namely, changing the demographic structure of Eastern Europe and Western Russia so as to both modernize its economy and facilitate the resettlement there of ethnic Germans.

This type of cruelty and discrimination against human beings needs to be addressed to the present society so that the devouring doomed reality of the past can be understood. To highlight this type of discrimination, various researches were conducted to globalize this issue and so the present research is framed in this perspective.

The present study specifically examines the resilience of women who survived the Nazi concentration camps and their ability to persevere in the face of the Nazis' brutal treatment. The books chosen for the research were Dr. Gisella Perl's "I was a Doctor in Auschwitz" and Olga Lengyel's "Five Chimneys". Both individuals served as medical practitioners in Auschwitz and provided crucial assistance to several female captives, enabling them to endure and survive the camp.

Historians and researchers of Holocaust like Ringelhiem argue that throughout the history of holocaust, women were found absent. She calls for a women centered research on Holocaust to bring out the gender differences and other important experiences of women that are gender specific.

Jewish women carried the burden of sexual victimization, pregnancy, abortion, childbirth, killing of newborn babies in the camps to save mothers, care of children, and many decisions about separation from children. For Jewish women the Holocaust produced a set of experiences, responses, and memories that do not always parallel those of Jewish men. (Ringelheim 350)

The women prisoners despite all the sufferings, they were determined to survive Holocaust and hoped for a better life after their liberation. Ringelheim rightly notices that,

She argued that women survived in the concentration camps by forming mutually caring and supportive relationships with other prisoners, whereas men tended to survive alone: 'Women's culture (not their biology) provides women with specificand different conditions in which to make moral choices and act meaningfully (Waxman 2)

The present study concentrates on this resilient nature of women survivors of Holocaust and utilises Ann Masten's framework of resilience to examine the resilience patterns exhibited by these women which includes even the ordinary things and routine happenings of our daily lives like cleaning and grooming.

Resilience is a universal capacity which allows a person, group, or community to prevent, minimize, or overcome damaging effects of adversities. . . Resilience may transform or make stronger the lives of those who are resilient. (Grotberg, Edith)

As Edith states, resilience is a fundamental human capacity that enables individuals, groups, and communities to navigate challenges and emerge stronger. It is not merely about enduring hardships but about adapting, learning, and

growing from them. When people face adversities whether personal struggles, societal challenges, or traumatic events, their resilience determines their ability to minimize damage and recover effectively. This process involves emotional strength, problem-solving skills, social support, and a sense of purpose. By utilizing these resources, resilient individuals and communities can prevent setbacks from defining their lives, instead using difficulties as opportunities for personal and collective growth.

Moreover, resilience has the power to transform individuals by fostering strength, adaptability, and a renewed sense of purpose. When people overcome hardships, they often develop a deeper understanding of themselves and their capacities. This transformation can lead to greater self-confidence, emotional intelligence, and an enhanced ability to face future challenges. In a broader sense, resilient communities emerge from crises with improved systems, stronger social bonds, and innovative solutions for the future. However, the American Psychological Association defines resilience as “Resilience is the process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands.” (“Resilience”)

**Objective:**

The objective of the present research is to analyze and document the resilience strategies and psychological coping mechanisms exhibited by women survivors of the Holocaust, using memoirs as a lens to understand the survival of human kind under systematic oppression.

**Aim:**

The research aims to contribute to the discourse on Holocaust studies and resilience theory by exploring the lived experiences of women survivors, highlighting the intersection of trauma, gender, and resilience in the context of extreme human suffering.

**Research Question:**

How do the resilience patterns of women survivors, as portrayed in the memoirs of Dr. Gisella Perl and Olga Lengyel, illuminate their ability to endure and adapt to the extreme conditions of Nazi concentration camps?

## RESEARCH METHODOLOGY:

The research employs a qualitative methodology, using textual analysis of survivor memoirs to explore resilience patterns. This approach is rooted in a theoretical framework of resilience, specifically Ann Masten's conceptualization of resilience as "ordinary magic," which emphasizes adaptive systems in the face of adversity.

### Resilience in Three Phases

According to Ann Masten, resilience can be understood through three different dynamics. Masten observed that all three resilience phenomena were present among Holocaust survivors, although the degree of strength varied depending on the drivers of resilience. The initial two phenomena are examined within the camp, while the final phenomenon of trauma recovery is addressed subsequently.

“...resilience does not require extraordinary resources in most cases, but instead it is the result of what might be called ‘ordinary magic’” (Masten 30). Ordinary magic refers to the inherent bond within a family, the belief in something greater, the optimism for the future, the companionship of friends, and other shared elements such as the ability to control one's own behaviour. Prisoners in Nazi concentration camps were forced to endure with only the most essential resources for survival. The convicts utilised these minimal resources in remarkable ways to ensure their survival. An intriguing illustration of this phenomenon is the enchanting potency possessed by commonplace margarine.

“I declared, very authoritatively, that margarine was the best medicine against all kinds of skin diseases. We must save our margarine rations and use them on our bodies” (Perl 69). Being the camp doctor, Dr. Perl’s medicine was used by most of the prisoners in the camp for their skin diseases and they were healed. “By some miracle, psychological rather than physiological, the sores healed, no new eruptions occurred and the value of margarine soared to an unbelievable height” (Perl 70).

Dr. Perl also devised a game wherein participants must envision their previous existence and construct an ideal day. The prisoners envisioned engaging in activities such as shopping, frequenting saloons, and dining at restaurants. She remembers that the game functioned as a stimulant.

I told them about my old life in Maramaros Sziget, about my work, my husband, my son, the things we used to do, the books we used to read, the music we used to listen to . . . To my surprise they listened with rapt attention, which proved that their souls, their minds were just as hungry for conversation, for companionship, for self-expression as mine. (Perl 59)

Researchers of coping mechanisms have found that a memory which was positive, happy or a memory that was cherished also tends to boost the hope of the survivors. “Positive memory recall may aid emotion regulation processes by down regulating negative affect and upregulating positive affect among trauma-exposed individuals”(Contractor et al.3) Dr. Perl not only helped herself with the positive memory but also she helped others to have their own positive memories. “And my fellow prisoners hung on my every word, following me around that little town they had never seen, and when my happy, lovely day was over, they fell asleep with a smile on their faces” (Perl 60).

Baum (1999) also used a qualitative approach when studying life-long coping in Holocaust survivors asking them about their coping during significant stressful events in their lives, she found that support seeking and reflecting were the most prevalent among successful coping strategies. (Békés, et al 1075)

Ann Masten's concept of "Ordinary Magic" aligns with Baum's findings by emphasizing the power of everyday resources in fostering resilience. Masten argues that resilience is not an extraordinary trait but rather emerges from common, accessible factors such as supportive relationships, personal competence, and community ties. In this context, friendship serves as an "ordinary magic" that supports Holocaust survivors, providing emotional stability, mutual understanding, and a sense of belonging. The ability to form and maintain friendships helped many survivors regain trust, combat isolation, and sustain hope in the aftermath of immense trauma. By seeking support and relying on meaningful relationships, survivors demonstrated how ordinary aspects of life, like friendship, can serve as powerful tools for resilience in the face of profound suffering.

Masten refers to the happy recollections that helped the captives endure as the positive consequence in the face of danger. Despite facing the oppressive actions of the Nazis, these female survivors reflect on their past and draw upon their resilience to endure. These female prisoners made a concerted effort to remember the everyday life they used to have and hoped to live a normal life again after being freed.

Lengyel presents proof of religious individuals maintaining their commitment to their faith and humanity till their demise. She asserts that engaging in any form of religious observance within the camp resulted in the imposition of the death penalty, and that individuals who practiced their religion were subjected to more severe torture. Nuns were compelled to flee in a state of undress, while their religious garments were distributed to women working in brothels. The user describes a narrative about a nun who underwent x-ray experiments while at the camp. Despite experiencing excruciating agony, she maintained a calm and composed demeanour, devoting the entire day to prayer. Even on her deathbed, she was requesting others to pray. But the nun lay there with a peaceful expression on her countenance. "Do not be sorry for me," she said. "I am going to my Lord. But we must say good-bye to each other. Let us pray." Silently, the other women, whether Protestant, Catholic, or Jew, prayed with her. Even those who had lost their faith joined us to comfort her last hours. We were still praying when the Germans arrived with their death truck. (Lengyel 98)

The Nazis consistently displayed a higher level of hostility and humiliation towards religious individuals. However, Lengyel recounts an event in which a nun shown exceptional spiritual fortitude by persisting in her religious duties of prayer and boundless love. Masten refers to this as maintaining competence even under stressful settings. The nun's unwavering commitment to prayer and selfless service to others remained intact, even in the face of the horrific experiments and on her deathbed.

Similar to friendship and prayer, love is a positive emotion that motivates individuals to persevere in their life. In her memoir, Lengyel provides a detailed and vibrant portrayal of women and their romantic relationships. A significant number of individuals resorted to engaging in prostitution and subsequently suffered from venereal illnesses. Some individuals had a change in their sexual orientation and the narrator also describes the soirées organised by the Lageraelteste, a young German woman who arranged orgies for these lesbian couples. Despite the stark differences, Lengyel also encountered individuals who genuinely expressed love and affection. "However, all love here was not sordid. There were instances of sincere and touching affection and companionship. But even where tenderness was absent, a woman with a lover enjoyed real distinction, for there were very few men in the camp" (Lengyel 158).

While Lengyel provides an account of sexual abnormalities among the convicts, she also acknowledges that there were instances of genuine love. The women's sense of warmth and belongingness stemmed only from the affection bestowed upon them by their lovers. The love that developed within the camp is the favourable result that Masten asserts in her framework of resilience, as this love emerged throughout a dire scenario where they were reduced to mere skeletons.

The underlying motivations for these impulses were quite typical and mundane. By assigning significance to their existence, they transformed the act of enduring the horrors inflicted by the Nazis into their daily way of life. "Resilient people identified across diverse adversities, including disasters, often identify hope and meaning as protective influences in their lives" (Masten 135).

In their research findings, Masten and other academics have identified hope and the search for purpose in life as significant contributors to resilience.

Within the confines of the concentration camp, when the prisoners fostered a belief in their eventual freedom and the establishment of their own sovereign state, their likelihood of losing motivation to survive diminished. Each adversity was persevered through with the aspiration of residing in a liberated country in the forthcoming days. Their optimism for liberation grew with each offensive launched by the allies towards the conclusion of the war. Despite enduring the loss of their dignity and enduring frequent exposure to violence, many survivors made determined efforts to maintain the significance of their lives.

Dr. Perl wanted to survive because she found her meaning of life in helping the helpless women of Auschwitz. "I was responsible for those women ... I had to remain alive so as to save them from death ... I was their doctor..." (Perl 65). In another instance when she was elaborating on how the Nazis had successfully kindled the animal spirit among the

prisoners, she resolved to live with human dignity and also to make others more humane. “Yes, I was going to remain a human being to the last minute of my life—whenever that would come” (Perl 58-59)

Dr. Perl provided medical assistance to the inmates of the concentration camps. During a period of personal deprivation and destitution, Dr. Perl selflessly provided assistance to individuals afflicted by the devastating epidemic that ravaged the camps. Devoid of surgical instruments and medicinal supplies, she made every effort to alleviate their suffering and preserve their lives. Even in dire conditions, she applies her extensive medical expertise. Despite her own impoverished state and the inadequately equipped hospital, Dr. Perl persists in assisting others, so exemplifying both the resilience described by Masten.

Lengyel discovered the significance behind her ability to stay alive. She collaborated with the underground resistance and engaged in acts of sabotage targeting Germany's resources. Primarily, Lengyel's main objective was to serve as a testament to the heinous acts committed by the Nazis.

I had then two reasons to live: one, to work with the resistance movement and help as long as I could stand upon my feet; two, to dream and pray for the day to come when I could go free and tell the world, “This is what I saw with my own eyes. It must never be allowed to happen again! (Lengyel 69)

Like Masten says “Resilience arises from ordinary resources and process” (Masten et al. 3). To endure the difficulties of the camp and prevent themselves from becoming weak and helpless, female prisoners utilised every common object as a source of strength, and every regular task in their daily routine became a wellspring of resilience. For numerous incarcerated women, their bodies were the sole means by which they were expected to endure the poverty and hardship of their camp existence.

#### Objectification of Women

Women in the camp resorted to using their bodies as their sole means of acquiring necessities, even exchanging sex for something as basic as a raw potato. These small items obtained via such transactions allowed them prolong their survival in the camp. Dr. Perl, who initially opposed these sexual exchanges, gradually came to comprehend the difficult situation faced by these ladies. In addition, she recounts the story of a prisoner named Kati, who was involved in a romantic relationship with a German prisoner. She discovered a young girl at the edge of the road who had been fatally assaulted by an SS officer for stealing potato peels. Kati escorted her to her room and attended to her needs. “Kati was just about to break off this relationship when she came upon the little girl, but now she decided to continue selling her body to the man in exchange for food which she then took back to the cage and fed to the little girl” (Perl 90).

Within the confines of the concentration camps, Jews were completely at the mercy of the Nazis. They were deprived of their possessions, wealth, reputation, and even their basic human dignity. During a period when exchanging sex became a means of acquiring food, a small number of women yielded to the circumstances and exchanged sex for sustenance. In a society characterised by a demoralised environment, the exchange of sex for goods or services has become a commonplace practice. As Masten aptly points out, these women draw their strength and determination from engaging in this regular activity of trading sex. Nevertheless, this particular technique in this specific situation carries inherent risks, but it ultimately leads to the acquisition of food or other vital items through bartering, which is crucial for the survival of these women.

#### Sanitation and Hygiene

Hygiene within the camp was crucial for survival, although the Nazis systematically obstructed any opportunity for maintaining cleanliness within the camp. The inmates were densely crowded in the sleeping berths. The detainees' belongings consisted solely of a small number of photographs, a spoon, or a knife. Incarcerated individuals exerted great effort to maintain cleanliness and orderliness in their living quarters. The individuals faced difficulties in maintaining cleanliness and avoiding lice due to the unsanitary conditions, which serve as the primary catalyst for numerous diseases that could ultimately lead them to the gas chamber. Lengyel describes the bunks as, “To be more exact, here stood wooden cages which we called ‘koiias.’ In each cage, which measured twelve by five feet, seventeen to twenty persons huddled together. There was little comfort to be had in these ‘bunks’” (Lengyel 28). This incident proves that the nazi camps lacked hygiene and sanitation which appeared to be a threat to the survivors.

#### Resistance vs Resilience:

Resilience is commonly characterised as the capacity to recover quickly from challenging circumstances. If a Holocaust prisoner has remarkable resilience, it indicates that they possess an inherent capacity to combat adversity and endure. If we see the entirety of the Holocaust as a mechanism designed to exterminate Jews, and if we view the prisoners as individuals who are actively seeking ways to stay alive, then their actions might be understood as a form of resistance against the imposed mortality that they vehemently oppose. Resistance can be understood as a manifestation of resilience in a certain setting.

Including resistances in the conceptualization of resilience suggests the need for change in positioned perspectives, structured inequalities and the distribution of resources for strengthening resilience. The arguments made here problematize disordered social arrangements. (Bottrell 337)



The resilience of an individual or group is demonstrated by their resistance when they anticipate a change in an unjust situation. Within the concentration camp, numerous instances of active and passive resistance may be observed as the Holocaust prisoners strive to transition from a dehumanised condition to a one of dignity.

“Oppression as intense as that under which we lived automatically provoked resistance. Our entire existence in the camp was marked by it” (Lengyel 134). If this is true, then all the prisoners showed their own way of resistance against the Germans. The will to live is in itself a resistance against the Nazis. All the five prisoners had shown resistance but Lengyel was the only one who worked for the underground. Lengyel explains the meaning of resistance inside the concentration camps in the most beautiful way.

When labourers at the spinning mills dared to slacken their working pace, it was resistance... When, clandestinely, we passed letters from one camp to another, it was resistance. When we endeavoured, and sometimes with success, to reunite two members of the same family—for example, by substituting one internee for another in a gang of stretcher bearers—it was resistance. (Lengyel 134)

Sabotaging the German war industries and exploding crematoria with explosives were the main agenda of the underground. “Often I had to accept letters or packages brought to me by inmates who were doing labour at the camp” (Lengyel 137). The intermediate would vary on a daily basis and they also have a distinguishing symbol. For example, Lengyel describes a scenario where she would adorn her neck with a silk thread, and the other individual would do the same. She would locate the individual either in the latrine or on the road and then transfer the package. Lengyel also states that she frequently transported little packages of explosives, typically no larger than a cigarette case.

Lengyel courageously performed subterranean duties by transferring correspondence and parcels amongst individuals. The risk aspect in this situation is that operating underground would result in death if the individual were discovered by the Nazis. Her assistance in transporting the gunpowder packets contributed to the successful destruction of a gas chamber through bombing.

#### **Motherhood in the Camp:**

Dr. Perl, being a medical professional, demonstrated her resilience in the infirmary. Dr. Perl expedited the delivery process and assisted in the manual delivery of their newborns. This can be seen as a form of opposition to the German plan to intentionally cause the death of women who are pregnant.

On dark nights when everyone else was sleeping—in dark corners of the camp, in the toilet, on the floor, without a drop of water, I delivered their babies. First I took the nine month pregnancies, I accelerated the birth by the rupture of membranes, and usually within one or two days spontaneous birth took place without further intervention. Or I produced dilatation with my fingers, inverted the embryo and thus brought it to life. In the dark, always hurried, in the midst of filth and dirt. After the child had been delivered, I quickly bandaged the mother’s abdomen and sent her back to work... I delivered women pregnant in the eighth, seventh, sixth, fifth month, always in a hurry, always with my five fingers, in the dark, under terrible conditions. (Perl 81)

Dr. Perl started terminating the pregnancies as soon as she learnt that the pregnant women were to be gassed. “I loved those newborn babies not as a doctor but as a mother and it was again and again my own child whom I killed to save the life of a woman” (Perl 82).

The act of terminating the life of the children resulted in the woman's rescue, as it enabled her to participate in the labour process. Masten's first resilience phenomena is observed in situations when the risk variables include the child's life, the likelihood that the woman will die in these types of unsanitary conditions, and the punishment for her covert work saving the lives of pregnant women.

#### **Humanity vs Physician**

Dr. Perl recounts another occasion in which she courageously saved patients with typhoid by obtaining blood samples from healthy individuals with the assistance of medical workers. “Instead of taking blood tests from our typhoid cases, we took samples of each other’s blood and gave it to Dr. Mengele. The tests were negative, and the patients were saved” (Perl 94). The preservation of women's lives is the beneficial result, while the potential danger lies in the possibility of providing incorrect samples, which may lead to Dr. Perl's execution if Mengele were to be told. This incident proves that she is more human than being a loyal physician in saving lives of the survivors from the Nazi men. The memoirists not only utilised even the most insignificant and commonplace objects to aid in their own survival, but they also actively served as a means of survival for other prisoners. As previously mentioned, these authors of memoirs demonstrated self-transcendence, which is still apparent even after they were freed. Both selected memoirists altruistically assisted individuals until their demise. They skillfully constructed their own life and also assisted others in constructing their own.

#### **Transcending Trauma**

Upon discovering that her family did not escape the Holocaust, Dr. Perl made the decision to take her own life. Subsequently, with the assistance of Abbe Brand, a member of the Vatican mission, she was able to overcome her sorrow and was subsequently relocated to New York. She fundraised for the refugees by sharing firsthand accounts of her experiences within the camp. In addition, she willingly offered herself as a witness in the prosecution against Dr. Mengele. However, the court proceedings never took place since Dr. Mengele evaded capture and lived in

seclusion. She was invited to have lunch with the former First Lady Eleanor Roosevelt, who urged Dr. Perl to continue practicing medicine.

...after having endured the terrors of the Holocaust, most survivors rehabilitated their lives, established families, developed careers, and reached old age. Thus, the survivors have demonstrated survival skills and lasting achievements that may facilitate their coping with late-life challenges (Shmotkin, Dov, et al 8)

Dr. Perl was employed as a gynaecologist at Mt. Sinai Hospital in Manhattan. Dr. Carmel Cohen, one of the Physicians in the hospital remarks on the tattoo of her hand, "She wore it, in my view, as a badge of honour." (Gross) Shortly after, she established her own reproductive clinic on Park Avenue and provided assistance to other women with infertility, including many from her own community. Her daughter, who had been entrusted to a Protestant family, was located and they subsequently travelled to Israel. In Israel, her objective of facilitating childbirth continued unabated. She was employed at the Shaare Zedek Medical Centre in Jerusalem. She provided assistance to ladies throughout childbirth till her passing in 1988. Despite being compelled to kill numerous newborns in Auschwitz as a means of ensuring the survival of their mothers, she remained resolute in her duty to facilitate the birth of more lives upon her freedom. Masten refers to this as the third aspect of resilience, which involves the process of recovering from trauma. Not only did she make a full recovery, but she also began actively assisting the community, particularly ladies struggling with infertility.

After being liberated, Olga Lengyel travelled to New York through France and Russia. As a witness to the Nazis, she documented her experiences within the camp, which served as a source of motivation for her survival in Auschwitz. In addition, she entered into a second marriage and gave birth to a daughter while residing in Havana, from whence they were subsequently expelled by the communist regime. Upon returning to New York, Olga Lengyel discovered a Memorial Library and Art Collection dedicated to the Second World War, which is officially recognised by the University of New York. Additionally, she established the Olga Lengyel Institute, an educational institution that instructs numerous students about the Holocaust, other genocides, and human rights. Her decision to remarry serves as tangible proof of her successful recovery from trauma, aligning with Masten's third framework of resilience. Furthermore, her remarkable resilience is seen in her significant contributions to society.

Despite enduring unimaginable suffering in concentration camps, women prisoners demonstrated extraordinary willpower to survive. They faced brutal abuses, starvation, forced labor, and constant fear, yet many refused to give up hope. Their resilience was evident in their ability to make tough decisions, such as protecting weaker inmates, hiding food, or enduring medical experiments. Some risked their lives by joining underground resistance movements, while others found strength in faith, friendship, or the thought of reuniting with loved ones. Women also adapted to the horrific conditions by forming support networks that provided emotional and physical sustenance. Even in the face of dehumanization, they held onto their identities and dignity, resisting despair. Many dreamed of liberation, imagining a future beyond the camps where they could rebuild their lives. This hope for freedom and a new beginning gave them the courage to endure. Their survival was not just an act of endurance but a testament to the strength of the human spirit.

## CONCLUSION

The present research has examined the structure of resilience by using Masten's three phenomena of resilience as a framework. The initial occurrence of attaining a favourable result by taking a chance is primarily observed in all five autobiographies. The attainment of positive outcomes is facilitated by positive feelings such as friendship, love, spirituality, the celebration of festivals, positive memories, and artistic expressions like music, poetry, and drama. The second phenomena of sustaining competence is examined.

Resilience is examined through a range of common mechanisms and sources. Cleanliness is categorized as part of the second phenomenon, while activities such as organising food and other supplies, as well as engaging in sexual exchanges for vital items, fall under the first phenomenon of resilience. Resilience was another way of understanding and examining resistance, as explored by Masten in her analysis of the first occurrence. Ultimately, the third phenomena was examined in the posthumous accounts of all five autobiographies. All the memoirs selected for analysis demonstrate a process of healing from trauma, resulting in a state of tranquilly and social significance in their lives.

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