



Interpersonal vulnerability among offspring of Holocaust survivors gay men and its association with depressive symptoms and life satisfaction



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ABSTRACT

The aim of the current study was to examine whether offspring of Holocaust survivors (OHS) gay men report higher interpersonal vulnerability in comparison to non-OHS gay men, and to further assess whether that vulnerability mediates the association between having a Holocaust background and mental health outcomes (depressive symptoms and life satisfaction). For this purpose, a community-dwelling sample of 79 middle-aged and older OHS and 129 non-OHS gay men completed measures of hostile-world scenario (HWS) in the interpersonal domain, satisfaction from current steady relationship, depressive symptoms and life satisfaction. Results indicated that OHS reported higher HWS interpersonal vulnerability and lower satisfaction from current relationship in comparison to non-OHS gay men. Also, having a Holocaust background had an indirect effect on depressive symptoms and life satisfaction through HWS interpersonal vulnerability as well as through satisfaction from current relationship. These findings are the first to suggest interpersonal vulnerability of older OHS, in comparison to non-OHS, gay men, and an association between this vulnerability and adverse psychological outcomes. This interpersonal vulnerability, possibly representing HWS threats of both early family-based trauma and current sexual minority stress, along with its implications, should be addressed by practitioners who work with older gay men having a Holocaust background.

1. Introduction

Intergenerational transmission of trauma denotes traumatic effects that linger from the first generation and manifest themselves in the physical and psychosocial conditions of the next generations (Danieli, 1998; Dekel and Goldblatt, 2008). This transmission of trauma was extensively studied in families of Holocaust survivors, and particularly among offspring of Holocaust survivors (OHS). While earlier studies showed that OHS suffered from various disturbances, such as depression, anxiety and personality disorders (e.g., Kellermann, 2009; Shmotkin et al., 2011), a comprehensive meta-analysis (Van IJzendoorn et al., 2003) suggested that such vulnerabilities were constrained to clinical samples of OHS, and that community-sampled OHS did not vary from their non-OHS peers on various psychosocial variables. It seems that OHS show general resilience, yet are also characterized by lower stress tolerance in various adverse situations. However, it is still uncertain how exactly the generally well-functioning OHS may become vulnerable in times of stress.

While resilience and vulnerability of OHS were explored on heterosexual samples, no study, to our knowledge, has thus far assessed the

population of OHS gay men. The aim of the current study was to examine whether OHS gay men report higher interpersonal vulnerability in comparison to non-OHS gay men, and to assess whether that vulnerability mediates the association between having a Holocaust background and mental health outcomes. This exploration is especially important as this population is exposed to a constant stress, usually referred to as minority stress (Meyer, 2003). The accumulated psychological stress gay men and lesbians might endure, due to their stigmatized status, could result in adverse mental health outcomes such as higher rates of depression and anxiety disorders in comparison to heterosexual individuals (King et al., 2008).

Similarly to the mixed findings on resilience and vulnerability of OHS, studies on middle-aged and older gay men also showed that beside minority-related vulnerability, older gay individuals also manifested resilience by adjusting to aging not less successfully than their heterosexual counterparts (Shenkman et al., 2017). This adjustment among gay individuals was possibly due to "crisis competency," referring to the buffering effect that hardships related to the "coming out" process had yielded against later crises (Kimmel, 1978). It was also suggested that older gay individuals became adept at dealing with

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stigma and prejudice throughout their lifetime, resulting in higher resilience and lower self-criticism in advanced ages (Humphreys and Quam, 1998). It was further proposed that the two conflicting forces of minority stress and "crisis competence" might balance each other (McCann et al., 2013), resulting in general similarities on psychological functioning and mental health among older gay men in comparison to heterosexual men (Shenkman et al., 2017). However, the double jeopardy of having a Holocaust background in the family and being gay makes this unique and understudied population of OHS gay men especially vulnerable to a possible impairment in psychological functioning.

A key concept in our work is the hostile-world scenario (HWS; Shmotkin, 2005; Shmotkin and Shrira, 2012). The HWS is defined as an image of actual or potential self-perceived threats to one's life, or more broadly, to one's physical or mental integrity. The HWS was previously explored among OHS, and in a recent paper (Shrira, 2015) it was shown to mediate the association between having a Holocaust background and the salience of more specific threats such as the Iranian nuclear threat. The HWS was also examined among young gay men and lesbians showing specific HWS concerns being more characteristic to gay men and lesbians in comparison to heterosexual individuals, such as fear of victimization (by crime and discrimination), lack of social and family support, poor health conditions, disrupted relationships and aging (Shenkman and Shmotkin, 2013). In another study, HWS factors of disastrous thoughts and social concerns found among gay men and lesbians were correlated with lower subjective well-being, higher depressive symptoms, higher neuroticism, lower conscientiousness, lower agreeableness, and lower self-acceptance of one's sexual orientation (Shenkman and Shmotkin, 2016).

The HWS concept and its possible role was not yet explored among OHS gay men. Addressing this issue, our first hypothesis was that the HWS threat of interpersonal vulnerability, which constitutes one of the major themes within the HWS, would be stronger among OHS in comparison to non-OHS gay men. This hypothesis was in line with research suggesting that while psychological functioning usually did not differ between OHS and non-OHS, OHS may still manifest certain vulnerabilities when exposed to additional stress (Van IJzendoorn et al., 2003; Baider et al., 2006). HWS interpersonal vulnerability appears particularly pertinent to complications in the separation-individuation process among OHS (Brom et al., 2001; Juni, 2016), more over-protection and fusion between survivors and their children relative to comparisons (Kellermann, 2001; Wiseman and Barber, 2008; Letzter-Pouw et al., 2014), and lower levels of differentiation of self and poorer family communication relative to comparisons (Giladi and Bell, 2013; Palgi et al., 2015). Furthermore, it is reasonable that the minority stress, that basically exposes gay men to various forms of social rejection, aggravates the interpersonal vulnerability of OHS gay men even more than that of non-OHS gay men. Also, it was recently found that while the salience of most HWS themes among older gay men was lower in comparison to that of young gay men, interpersonal vulnerability remained a characteristic HWS vulnerability among older gay men (Shenkman and Shmotkin, 2017). As being in a close romantic relationship is an interpersonal feature of great pertinence to both well-being and vulnerability in gay life (Shenkman and Shmotkin, 2013, 2014), we extended our inquiry on interpersonal vulnerability by a second hypothesis that OHS gay men would show less satisfaction from a current steady relationship in comparison to non-OHS gay men.

The meta-analyses that indicated no significant differences in mental health when OHS, as well as grandchildren of Holocaust survivors, were assessed relative to comparison groups (Van IJzendoorn et al., 2003; Sagi-Schwartz et al., 2008) have raised the need to explore resilience and vulnerability among OHS by considering more interactive factors that produce moderating or mediating effects (Danieli et al., 2017). This approach has indeed confirmed various paths of vulnerability among OHS (Shrira, 2016; Shrira et al., 2017). In the current study, while addressing mental health through the two

indicators of depressive symptoms and life satisfaction, our third hypothesis was that belonging to OHS gay men would have an indirect effect on mental health through HWS interpersonal vulnerability, so that having a Holocaust background would be positively associated with HWS interpersonal vulnerability, which in turn would be associated with higher depressive symptoms and lower life satisfaction. Likewise, our fourth hypothesis was that belonging to OHS gay men would have an indirect effect on depressive symptoms and life satisfaction through satisfaction from a current steady relationship.

To conclude, the aim of the current study was to examine whether OHS report higher interpersonal vulnerability in comparison to non-OHS gay men, and to assess whether that vulnerability indirectly connects a Holocaust background with mental health outcomes. We hypothesized that (1) HWS interpersonal vulnerability would be higher among OHS, in comparison to non-OHS, gay men; (2) OHS gay men would show lower satisfaction from a current steady relationship in comparison to non-OHS gay men; (3) belonging to OHS gay men would have an indirect effect on depressive symptoms and life satisfaction through HWS interpersonal vulnerability; and (4) belonging to OHS gay men would have an indirect effect on depressive symptoms and life satisfaction through satisfaction from a current steady relationship.

2. Method

2.1. Participants

Participants were drawn from a larger sample of 692 gay men aged 16–84, $M = 42.20$, $SD = 14.23$, who were called to participate in a study on well-being and sexual orientation via websites, e-mail, social media, gay venues and gay social groups in the years 2010–2016. In order to focus on middle-aged and older gay men, participants aged 50 or more were selected from the above sample, resulting in 208 gay men. Seventy nine respondents were OHS, with at least one Holocaust survivor parent, and 129 were comparisons whose parents were not directly exposed to the Holocaust. To determine Holocaust background, respondents were queried whether one or two of their parents were in European areas governed by Nazi or pro-Nazi regime during World War II.

Table 1 shows sociodemographic characteristics of the study groups. Most of the participants in each group were born in Israel, had academic education, and reported having an average or higher economic status as well as good or very good health. Also, most of the participants were secular and lived in a city. As can be seen on Table 1, a comparison between OHS and non-OHS gay men did not yield significant differences on any of the sociodemographic variables, excluding age, which showed a significant difference (with OHS being slightly younger than non-OHS).

2.2. Procedure

The participants of the study groups were sampled in one of three points of time. First, participants were recruited in a targeted sampling from various social gay groups across Israel in 2010. A second and third targeted sampling was applied in 2013 and 2015–2016 in order to recruit additional participants while focusing on gay men in later life. We consulted with 11 Israeli knowledgeable informants who were gay activists or researchers with a main interest in the characteristics of gay life. These informants provided a social mapping with specific contact persons, websites and social groups. Based on this information, recruitment of participants was then conducted through gay venues, internet forums and websites dealing with older age in general or gay life in particular, as well as through social media outlets (Facebook pages focusing on gay men) and contact information of potentially interested older gays that actual participants provided.

Participants were informed that the questionnaires were anonymous and that participation was voluntary. This study was approved for

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