JEWISH SOCIAL WORK
IN THE
UNITED STATES, 1654—1954

BY HERMAN D. STEIN
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INTRODUCTION

It is the purpose of this essay to trace the main course of development of Jewish social work in the United States throughout the entire period of Jewish communal life in this country from Colonial days to the present. Such a review cannot be exhaustive. It represents a choice of what seems significant to the author, a choice that would vary with every authority in Jewish social work—and there are many, many authorities. The effort here has been to trace, to interpret, and to show where further detail may be obtained, rather than to present an array of names, agencies, dates and figures.

The term “social work” is commonly used in the United States today to describe the social services, but it should be noted that the very expression was coined in the twentieth century. Though modern social work is traced back to 1860, its historical origins lie in ancient Judeo-Christian precepts and practices, and in slow evolution of governmental legislation and responsibility for the poor and the sick. The social services in whatever form that existed three hundred years ago in the American colonies may thus be seen as forming part of the development of American social work.

As a social institution, social work is affected by (and itself affects) the same social influences that mold all of American society. In every country where social work has developed, it has assumed a character—in scope, objectives, methods of practice—that is indigenous to its nationality. The values, conflicts, cultural patterns; the geography, economy, and history of the country, mold this institution as they mold all others. In the United States, the rapid economic development, the ease and encouragement of voluntary association, the dominant if sometimes conflicting ideologies of both individualism and humanitarianism, the “future-oriented” attitude expressing itself in an experimental spirit—all have been among the principal influences shaping America’s unique development of social work.

Jewish social work in the United States is conditioned by the influences bearing on all of social work and has played a significant role in the development of general social work; at the same time it
must be seen in the perspective of Jewish life. What Jewish social work has meant in the lives of American Jews, and how it has been affected by the changing religious, demographic, and economic conditions of Jewish life, are also essential elements in the over-all picture.

In approach, as well as in resources, social work in America has moved a long way from the days when it was confined only to the poor and the orphaned, the aged and the sick; when to be poor was a disgrace, and the poorhouse or workhouse was the grim solution; when dependent children were farmed out for labor or sent to dismal institutions; when the very idea of social work as a profession was unheard of.

Today social security and public welfare provisions are designed to meet basic economic wants as a matter of right. Both public and voluntary agencies by the thousands tender services for a wide range of human needs and to people in all walks of life. Social work has become a profession requiring graduate training of its most skilled practitioners; this training includes the background in the social and psychological sciences that is required to plan and administer services to meet human needs, as well as to understand and help people as individuals and in groups.

Jewish communities and the men and women who have organized, financed, and staffed Jewish social agencies have been an integral part of this development. In the course of time they have changed their ways of serving, benefiting from new ideas and cooperating with all other groups to enrich the whole of American social work. The strands of Jewish social work in the United States are inextricably woven into the larger fabric.

**Definition**

While the concept of social work refers generally to the social services, the term is actually difficult to define precisely. In fact, social work authorities agree that it is neither possible to agree on a clear and universally acceptable definition nor to decide whether social work should be regarded primarily as a field of service, a process of helping, or a profession. Nevertheless, it is possible to perceive a common ground in these various definitions, to distinguish social work from other fields of activity, other ways of helping, and from other professions.

If social work itself is difficult to define, the term Jewish social work adds a new dimension of perplexity, raising issues that have been debated in the Jewish community for half a century.

This essay does not propose to attempt to resolve the problem of
definition—indeed, there may be more than one resolution still evolving. We hope to shed some light on the historical continuities of social work, regardless of the definition assigned it. For purposes of this discussion the term Jewish social work will refer to social work activities carried out under Jewish auspices. The scope of such social work includes those fields of activity where, by common agreement, social workers have traditionally had a primary function. These fields include: financial assistance to needy families and individuals; family and individual counselling; the care of dependent children; the care of emotionally disturbed children; the care of delinquent children; assistance to new immigrants; medical social service; overseas aid (to be treated in brief outline in the present article); care of the aged; recreational services to youth and their families in the form of community centers, settlement houses, and summer camps; financing, coordinating, and other administrative services related to these activities; training and other educational services related to these activities. Community relations, and other areas of social action where social work skills are employed but which are not social services, are excluded.

Social work has come rather easily to the Jews of the United States. Diverse as they have been and remain in opinion and belief, and in their positions on the issues of the day, American Jews have shared with all Americans a deep stake in human welfare. They share it as part of an age-old inheritance, for traditionally tzedakah, charity, has also meant justice, and to help those in need has been a sacred obligation.

The patterns of helping among Jews in America have changed as all social work in America has changed. The very concept of what is “need” and what is “helpful” has changed. Motivations for giving and attitudes about receiving have undergone change. But the underlying moral injunction has remained the same through the ages, and is still vital in the Jewish social work of today.

**Jewish Traditions of Charity**

While all religions regard benevolence as a virtue, Jewish law makes charity an obligation based on justice. This Biblical concept, together with its application in specific human affairs, was elaborated by the Talmud and a host of commentators until it was codified in the sixteenth century in the Shulhan Arukh. These scriptures remained vital through the centuries, for the Orthodox lived by the Bible and its interpretations.

Of the works of the great medieval Jewish scholar, Moses Maimonides, the one that achieved almost universal authority in Jewish life
was his *Yad Hazakah*, which included a section on "Portions of the Poor." This section contains the famous "Eight Degrees of Charity" which perhaps most succinctly summarizes the spirit of traditional Jewish philanthropy, from its most ancient origins to its most recent past.²

The following excerpt from the Shulhan Arukh illuminates the kind of specific rules covering charity operating in Jewish life:

How much is to be given to a poor man? Sufficient for his need in that which he wanteth. Thus, if he is hungry, he should be fed; if he needs clothing, he should be clothed; if he lacks household utensils, they should be purchased for him; and even if he had been accustomed before he was impoverished to ride on horseback with a slave running before him, he should be furnished with a horse and a slave. And so each and every one should be supplied with what he needs. If it is fit to give him (merely) a slice of bread, give him a slice; if it is proper to give him dough, give him dough; if he ought to be provided with lodging, too, provide a bed for him. If it is fit to give him a warm meal, give him warm food; if cold lunch, then cold lunch. If he has to be fed (like an infant) then he must be fed. If he is unmarried and he comes to take a wife, the community should find him a mate; but first they should rent him a home, prepare him a bed and furnish him with necessary household utensils, and then marry him off.

(Article 250, section 1, p. 8-9, Feinberg translation; see Bibliography, note 1.)

Throughout the Middle Ages every event in the home was marked by almsgiving. Every ghetto had its two basic resources for the poor. One was the general fund, or Kuppah. The other was the soup kitchen, or Tamhui. Gradually, specialized functions appeared, organized around the synagogue. During the Middle Ages seven major branches of charity were administered by the synagogue: feeding the hungry; clothing the naked; visiting the sick; burying the dead and comforting the mourners; ransoming the captives; providing dowries for poor maidens, and offering free loans; educating the orphans and sheltering the homeless.

Great prestige attached to the function of being overseer of the poor (*parnass*). Only the most respected person was chosen for this office. His son had an honor to which none but the descendants of the priesthood could aspire, namely to be able to marry into a priestly family without a close inspection of his lineage.

Zborowski and Herzog vividly describe the pattern and character of charity in the small Jewish village in Eastern Europe. The same characterization applies to the mores of the large numbers of immigrants who came to the United States from Eastern Europe in the
1880's. The traditionalism reflected also characterizes the setting from which the first Jewish settlers in America came more than two centuries earlier.

Life in the shtetl begins and ends with tsdokeh. When a child is born the father pledges a certain amount of money for distribution to the poor; at a funeral the mourners distribute coins to the beggars who swarm the cemetery chanting, "Tsdokeh will save from death."

At every turn the reminder to give was present. Every celebration was marked by giving. In every house there would be at least one tin alms box, and in many homes there were several for the different kinds of charity. Children were trained to the habit of giving. A father would let his son give alms to the beggar, for example, instead of handing them over directly. The rewards of charity were great. The prestige value (yikhus) of giving was second only to that of learning, and giving contributed to the chances of a better lot in the after life. Even the poor had to give, including the recipient of charity, as directed in the Shulhan Arukh.

Every shtetl had a number of institutions devoted to community services centered around the synagogue. Their activities corresponded largely to the classic division of charitable functions referred to above.

The Malbish Arumin furnished clothing for the needy. The Hachnossas Kaleh provided brides with dowries. The Beys Yessoymin maintained an orphanage. The Bikkur Choylim met the medical expenses of the indigent sick, visited the ailing, and rendered material help. The Hachnossas Orkhim offered board and shelter to strangers. The Moyshev Zkeynim cared for the aged who could not or did not wish to be cared for by their children. The Chevra Kadisha was a burial society, serving rich and poor alike. The Gmilus Chesed made loans without interest, mainly for emergency needs, and often with no expectation of repayment—loans in name only, to protect the pride of the recipient. The Mo'os Chittin provided matzot for Passover.

These various societies were subsidized by donations, individual pledges, and fund raising. Pledges were made mainly in the synagogue, donations dropped into the tin boxes in homes. Fund raising was represented by two respected officers of each society who made house-to-house collections, as specified in the Shulhan Arukh. Such were the hallowed concepts and practices of self-help which Jews brought with them from the Old Country to the United States.

THE COLONIAL ERA TO 1880

The Jews who came to the United States during the Colonial Era were mainly merchants and artisans. Settling in New York, Newport,
Charleston, Savannah, and Philadelphia, they brought with them a concept of a closely knit community where the synagogue was clearly the center.

Characteristically, their first communal activities centered around the dead, not the living. When the Jewish community of New Amsterdam was granted a lot on July 14, 1656, this represented the first visible sign of a Jewish communal tie to the New World. The first land purchased was not for the synagogue, but for the burial ground. From the chevra kadisha (burial society) devoted to care for the dead, the congregation subsequently developed, with the synagogue as its center. Gradually the congregation assumed other charitable functions for the care of the needy and the helpless. From the very beginning, the giving of charity was considered a sacred duty and the responsibility for its administration was entrusted only to leaders of the congregation who possessed high moral and intellectual status.

As synagogues developed, the Jewish burial society served as the parent body and prototype for a number of other mutual aid societies that sprung up after the Revolutionary War. These societies aided the widows and orphans of deceased members with sick benefits as well as funeral arrangements. The mutual aid society idea quickly took hold among the Jewish settlers, not only because it was in conformity with Jewish tradition, but also because many kinds of mutual aid societies were in existence in the American colonies by the end of the eighteenth century. In New York, for example, the General Society of Mechanics and Tradesmen provided sick benefits to members in distress, assistance to widows and orphans, and other benefits. Its membership included many Jews, such as Naphtali Judah, Benjamin Seixas, and Major Mordecai Manual Noah, all of whom had joined by 1821.

In 1826 a burial society was founded by Congregation B'nai Jeshurun in New York. Known as the Hebrew Mutual Benefit Society, this society became the forerunner of a number of mutual benefit societies which started under synagogue auspices, and by the mid-nineteenth century had usually become independent.

The mutual aid society was itself the precursor of the Jewish lodges and fraternal orders. The first of these was the Independent Order B'nai B'rith, founded in 1843. While this "order" was at first limited to German Jews, within a few years other Jews were admitted. Other fraternal orders soon arose, which, like the mutual aid societies, confined their charitable activities to their own members.

It was this feature that made them fundamental necessities for the immigrant Jew, a stranger in a new land, struggling to make ends meet. Pride would not permit him to accept charity; he could,
however, meet his problems while retaining his self-respect with the help of his lodge brethren or of aid obtained from the society's treasury.  

In addition to mutual aid societies and fraternal orders, synagogues such as Shearith Israel and Anshe Chesed in New York City and Rodeph Shalom in Philadelphia disbursed charity directly to those who were in need. It was customary for the president of the synagogue to be empowered to give deserving persons specified limited sums from synagogue funds. For substantial sums the president had to consult with the board of trustees. In the spirit of Maimonides, the anonymity of applicants for charity was protected (cf. “confidentiality” in modern casework).

Before 1850 there were comparatively few benevolent societies unassociated with congregations. The first such general society started in 1785 in Charleston, S.C.; it was also in Charleston that the Hebrew Orphans Home was founded in 1807. This was the first recognition by a Jewish community in the United States of the care of orphan children as a communal duty distinct from general relief.

From the earliest days the alms distributed by the synagogue authorities were undoubtedly supplemented by private sources. The major recipients of help were, first the local poor, second the immigrant who was often penniless on his arrival and third, the transient. The immigrant was not, however, a problem before the 1820's, since newcomers were so few and so infrequent that they were quickly absorbed by the community without seriously burdening the charity funds. The Jewish community in New York City in 1820 is estimated at 500.  

It was only after the 1820's, and in New York City, that the immigrant became a distinct group.

The care of the local poor was the chief problem. The oldest congregation in New York, Shearith Israel, following the example of one of the London synagogues, published a system of pensions for veteran members of the congregation. This system of life pensions was recorded as early as the 1760's, and was well established by the nineteenth century. There were no separate funds. All disbursements to the seriously ill, the aged, the poverty-stricken or widows of former members, came from the general synagogue treasury. “The theory behind the pension system seems to have been that a member who had supported the congregation over a long period of time was entitled to receive systematic aid in return if, late in life, he was no longer able to provide for himself.”

In those synagogues which provided alms out of the synagogue budgets, funds were raised in several ways: by means of charity box collections, at funerals and weddings, and through general member-
ship dues. With the increase of Jewish immigration after the 1820's, however, it became more difficult to raise and distribute sufficient funds for charity. New societies and organizations sprang up, affiliated to a greater or lesser extent with the synagogues. The earliest mention of a separate charity organization in New York City was in Shearith Israel itself in 1798. This was during the yellow fever epidemic. The rabbi, Gershom M. Seixas, saw that the regular funds of the synagogue were not sufficient to meet the emergency. He therefore urged the creation of a separate charity society, which, again, in accordance with Jewish law, insured anonymity to the recipients. For a while contributions themselves were kept secret, but gradually these were made public. The society formed by Shearith Israel grew considerably, but was finally dissolved about 1816.

Synagogue philanthropy was not limited to the distribution of money. Poor people received free seats to the synagogue, matzot for the Passover holidays, wood during the winter, free burial, and to some extent free medical aid and interest-free loans, along the lines of traditional Jewish charity in the Old Country. During emergencies such as epidemics the synagogue usually placed its entire resources at the disposal of its members.

Early in the nineteenth century, synagogues which had previously distributed charity simply on the basis of manifest need began to require, first applications in writing, and then gradually, investigations by special committees. Eligibility for assistance thus began to take on more formal characteristics. During this period, too, synagogues began to multiply along the line of the nationality origins of its members. The Sephardic Jews originating in the Mediterranean countries and Ashkenazic elements from East and Central Europe had kept apart from the very beginning of settlement; now divisions in the Ashkenazic group constituted a new development. Free burials for the poor, for example, gradually became the function not of one synagogue for an entire community, but rather of distinct nationality groups: the Polish Jewish poor would be buried by the Polish synagogues, the German Jewish poor by the German synagogues, and so forth. This was one of the signs of the gradual weakening of the synagogue as the central institution of the community.

Jews and Public Relief

The first Jews to settle in New Amsterdam were permitted to do so on condition that their poor would not become a burden to the Dutch West India company. It was hardly necessary for this condition to have been imposed. For Jewish settlers from the beginning were extremely mindful of the desirability of not becoming public
charges. Not only was this a matter of pride and of deep confidence in one another, but also of self protection. To seek alms from non-Jews was to risk incurring hostility. But, most important, mutual aid was a basic religious obligation, and for the Jew to become a burden to non-Jewish society was inconceivable. Baron aptly characterizes the stipulation of the Dutch West India company as "carrying owls to Athens."

The exception gives dramatic evidence of the rule. Grinstein notes,

In spite of the care taken by the leaders of the Jewish community [in New York City] an occasional Jew did find his way to the poorhouse; in New York the records speak of five such cases. One of these was a widow who died in the poorhouse in 1821, another was a recent immigrant in 1837 . . . another immigrant died in the poorhouse in 1839; the Jews took care of his burial. The fourth case . . . died in the poorhouse in 1847 . . . The fifth . . . was a non-observing Jew . . . who slept in the public markets and wandered about town. The Jews felt responsible for him and so in 1809 they placed him in the poorhouse and paid $2.00 a week for his maintenance.

There were certain types of philanthropic activity in which the Jewish community could not take part because of lack of resources. The mentally ill, for example, could not be cared for and were housed in private homes or city institutions. Before there were Jewish hospitals, city hospitals and non-Jewish institutions were used. However, the Jewish community continued to take full responsibility for all the poor who were members of congregations. The isolated cases that came to the attention of city institutions generally were of persons who were not synagogue members.

The German Jewish Immigration

In 1790 there were probably no more than 2,500 Jews in the United States; by 1825, there were about 6,000, of whom 500 lived in New York. By 1848 the Jewish population had grown to about 50,000, due to the German immigration, with 12,000 or 13,000 living in New York City, which had a total population of 500,000. Following the revolutions of 1848 and 1849 in Europe, Jews and non-Jews flocked to the United States. During the period from 1850 to 1860 slightly less than 2,000,000 immigrants came from England, Ireland, Germany, and other countries of Central Europe, and the number of Jews in the United States almost tripled.

In 1880, the 60,000 Jews in New York City continued to represent 25 per cent of the Jewish national total. Jews were located in every state of the union, and actually formed a higher percentage of the
population in the West than in the Northeast. This was due to the readiness of the German Jews to move westward in order to take advantage of economic opportunities and the expanding frontier.

The German Jewish immigrants who arrived in the United States between 1820 and 1880 brought with them a strong tradition of Jewish philanthropy. However, their patterns of communal organization differed from those of the first Jewish settlers, since the new immigrants came from communities where emancipation was already under way and enforced self-sufficiency was no longer characteristic. In addition to introducing Reform Judaism to America, the newcomers accelerated a change that was already taking place: the encapsulated community governed by the synagogue was being decentralized and many community functions, including those associated with philanthropy, were being secularized. Increased social and business contacts with non-Jews; the development of different forms of worship; and the prevailing tendency to organize places of worship according to the nationality origin of the worshipers, led to the gradual withdrawal of the synagogue from the firm center of Jewish affairs.

The German Jewish immigration practically ended in the decade of the Civil War, when Jews in Germany achieved emancipation. Those who had arrived, however, had made much progress. Many who had moved westward as peddlers and traders were able to set up permanent business establishments. Excellent organizers, German Jews were quick to participate in or initiate Jewish communal institutions. In Chicago a Jewish Burial Ground Society had been organized by 1845; by 1847, the congregation of Kehilat Anshe Maarab ("Congregation of Westerners"); and in 1859, the Hebrew Relief Society.

It was during this post-Civil War period, when immigration was at a relative standstill, that the Jews of the United States laid the foundations for communal institutions that still endure. While many institutions were officially founded before the Civil War, their footing generally became solid during the 1870's.

Comparatively few benevolent societies, separate or apart from congregations, were organized before 1850. In addition to the two established in Charleston, S.C., by 1807, other typical early beginnings were: (1819) The Female Hebrew Benevolent Society of Philadelphia; (1826) The Hebrew Benevolent and Orphan Asylum in New York City; (1827) The Hebrew Relief Society in New York City; (1834) a Jewish Benevolent Society in Quincy, Ill., the first such development in the Middle West; (1842) The Hebrew Cemetery Society in Richmond, Va.; (1845) a hospital organized by the Jews of Cincinnati; (1847) a Ladies Hebrew Benevolent Society in New Orleans; (1850) two charitable organizations in San Francisco (in the wake of the gold rush).11
Between 1850 and 1855 Jewish benevolent societies arose in Savannah, Chicago, Baltimore, St. Louis, Wilmington, Del., New Orleans, and Memphis. During the same years congregations sprang up in every section of the United States. Between 1733 and 1825 there are records of eight synagogues; but between 1825 and 1855 sixty-four synagogues were organized. The benevolent organizations during this period continued largely to supplement the work of the synagogue and often gave special forms of relief only. In both the benevolent societies and the congregations it was the rabbi who developed the philanthropic impulse and organized activities for the poor.

By the 1850's, however, the trend had already set in for the charitable work of the congregation to be separated from religious activities. Benevolent organizations began to come into their own. In Rochester in the 1850's:

Reformed Judaism brought not only ritual but communal reform. The Jewish community was no longer cohesive, with the synagogue as a center. It was the congregation that probably organized the Hebrew Benevolent Society as its welfare arm. After 1856 the Annual Ball of the Hebrew Benevolent Society was a social event of importance. By the Civil War the congregation was still responsible as a congregation for both the synagogue and charity activities. These were coextensive.12

By the end of the Civil War, the synagogue had ceased to be the central power in communal life. The charitable organization became increasingly important, particularly as a vehicle for social prestige. As Baron notes: "The shift of the center of gravity of Jewish community life from the synagogue and school to the charitable organization is one of the most intriguing facets of American Jewish history." 13

The charitable societies of the 1860's and 1870's established mainly by German Jews had an almost leisurely quality about them by modern standards. Applicants would usually be personally known to the society's directors. Decisions were made around a table, informally. Confidentiality was preserved as far as possible to protect the individual needing help, but this varied according to the sensitivity of the society's directors. No investigations and few records, other than financial statements, were kept; for the most part, investigations were unnecessary, since at least one or two of the society's directors knew the applicant personally, and it was not rare for directors to dip into their own pockets in making relief grants.

Sectarianism

Religious in spirit, traditional in form, organized charity had come naturally to the early settlers. Now, with the weakening of the syna-
gogue's centrality, the patterns of organization for communal service were also to change. The new, predominantly German, immigration of the 1830's and 1840's had brought to the Jewish community skill in organization and greater flexibility. Nineteenth-century American society encouraged the growth of voluntary organizations, and it found American Jews prepared by ancient tradition and new skills both to join existing organizations and to build institutions and charitable societies of their own.

Sectarian auspices for charitable organizations was part of the American cultural landscape throughout the nineteenth century. Aside from the meager provisions of the English Poor Law, there were few forms of philanthropy that were not organized by religious or nationality groups. "Sectarianism" in what we now call social work was not an issue; it was the framework within which social services operated for most of the nineteenth century.

The Irish immigration of over 1,250,000 between 1845 and 1855, and the German immigration of over 2,500,000 between 1850 and 1860, led to the development of charities for these national groups that were unified through the Roman Catholic Church and the religious orders. Protestant churches were active in many social work areas. The various denominations carried on separate activities, the independence of the distinct Protestant denominations eventually also stimulating the development of secular social work.  

The laws of several states, such as those of New York, had a marked effect on sectarian development. In 1875 the New York State Legislature "decided to discontinue committing children who had become state wards to state-controlled orphanages, and instead to assign the children to sectarian homes and institutions, and to assume a financial responsibility for them." With the state providing a legal basis for sectarian social work in child care, the major faiths were encouraged to maintain facilities for children and took the initiative for programs in this field.

The growth of the nonsectarian charity organization was a post-Civil War phenomenon. It stemmed, as noted, from a development among Protestant groups which encouraged individual voluntary participation in activities and agencies conducted under secular auspices. Both denominational social service that was sectarian, and social service that was completely secular, were encouraged by the Protestant churches. The broad pattern of nineteenth century voluntary philanthropy, nevertheless, was clearly under sectarian auspices or under nationality auspices with a sectarian tinge.
The YMHA Movement

The increasing relegation of the synagogue to strictly religious functions created a need for identification with the larger Jewish cultural traditions, expressed through specifically educational, recreational, and cultural societies. This need first became marked during the Civil War and Reconstruction era, and continued as a long-range trend.

As early as 1840, the desire to establish closer ties with the Jewish tradition was expressed in the organization of secular social and literary clubs for Jewish young men. Young Men's Hebrew Literary Associations were formed in the 1850's, in Philadelphia, New York, Baltimore, New Orleans, Richmond, and other cities. The first Young Men's Hebrew Association (YMHA), without the "Literary," was founded in Baltimore in 1854; it is from this date that the YMHA movement, as such, traces its history.\(^{17}\)

By 1874, when the New York City YMHA was established, there were more than twenty YMHA's in the United States. This development was greatly influenced by the success and popularity of the Young Men's Christian Associations (YMCA's), which grew in number from 60 to 950 in the decade following the Civil War. However, while the YMCA was a religious organization, the YMHA was not. Indeed, the exact purposes of the latter beyond cultural and intellectual activities were somewhat vague.

When the New York City YMHA was organized, for example, "Not one of the ten men who met on March 22, 1874, for the specific purpose of founding the YMHA had any idea of what the Association should stand for. The thought seemed to be that, as the YMCA was a flourishing institution, there ought to be a YMHA, to maintain the racial identity of our people in an American environment." The writer goes on to affirm that it was not in fact a Young Men's Hebrew Association, but a Hebrew Young Men's Association. "The name was undoubtedly selected because it was euphonious, and we find that on June 25, 1874, a motion to change the name to the Young Men's Progressive Club of New York was defeated."\(^{18}\)

Later, religious activities were to become essential to the YMHA; however it was originally not important to its work. In 1875 YMHA's began to foster interest in Jewish education for children; thus began the long association of the YMHA's with formal Jewish education, leading to the housing or operation of religious schools in the YMHA's and the indirect organization of other schools.

The establishment of YMHA's in New York and Philadelphia in 1874 and 1875 was followed by a spurt of similar organizations elsewhere. In 1876 and 1877, eighteen new YMHA's, and between 1878
and 1890, some ninety new or reorganized YMHA's, came into being. By 1880, the New York City YMHA had almost 1,500 members and several branches in the city.¹⁹

The YMHA's were stable and well-financed; many had employment bureaus and dispensed charity, in addition to their major activities of lectures, physical training, social clubs, discussion groups, and language teaching. There were recurrent efforts at federating YMHA's, but these did not materialize till a later date. Meanwhile, they prospered and served a major function as a social, intellectual, and recreational resource for American young men conscious of their Jewishness. In a sense, the YMHA movement was one of the first developments in Jewish social work aiming to serve the entire community, rather than the underprivileged alone.

**Medical Services**

During the period immediately preceding and following the Civil War some of the larger Jewish communities began to set up their own medical facilities. The first Jewish hospital was erected in Cincinnati about 1850. In Philadelphia a Jewish Hospital Association was incorporated in 1865. In New York City the first Jewish hospital, later to become Mt. Sinai Hospital, was opened to the public in 1855.²⁰

One reason for this development was the low state of existing medical services and the virtual absence of public health provisions. Another was the unwillingness of many Jews to go to a public hospital for fear of violating the dietary laws of kashruth and of becoming subjected to conversion attempts by the religious personnel of sectarian hospitals. There was another need, which became more powerful in the course of time. Jewish medical students required facilities in which to complete their training. Fortunately, during this period the Jewish communities in larger cities had progressed economically to the point where they could conceive of establishing and maintaining their own medical resources.

The situation in New York City was typical in the quality of its medical care, but perhaps more dramatic than the situation in most of the other cities because of the dimensions of the medical problem. In New York City in the 1850's congestion and disease were rampant. Investigating committees found bodies of men and dogs lying about untended in overcrowded tenements. In the congested areas there was generally no running water or toilet facilities. As many as one-third of the city mortalities consisted of foreigners and recent immigrants living in these areas. Outhouses were common. The public sanitation services were primitive and underdeveloped. There were virtually no public health services. Proponents of public health programs and pre-
ventive measures had much resistance to overcome. This was one of the reasons why public health and social reform went hand in hand for many decades to come.

In the summer of 1842 there was a severe epidemic of typhus in what later became the lower East Side of New York City. The spring of 1849 saw an outbreak of Asiatic cholera in New York, Chicago, St. Louis, Cincinnati and other cities. By June 30, 1849, there were 88 cases daily in New York City and 26 deaths. St. Louis and Cincinnati were even more heavily hit. By the end of July there were 40 deaths per day, and during one week 200 to 300 daily deaths. Public schools were turned into hospitals. By August 5,000 persons had died from the epidemic.

When epidemics such as that of 1849 spread beyond the slums of the poor, an aroused public opinion finally led to the establishment of boards of health, sewage disposal, and sanitary commissions.

But the level of American medicine in the mid-nineteenth century was low. Medical students went to Europe to study. Native medical education was only beginning to get on its feet. The medical schools that had sprung up by the 1850's included some that were simply diploma mills. It was possible for an individual with little or no academic training to attend lectures for one semester and to graduate as a full-fledged physician. There was great public distrust of doctors, although some doctors were very well trained for the period. There was little research and no antisepsis, despite efforts of medical leaders like Oliver Wendell Holmes.

During this period land was set aside for a "Jews Hospital" in New York City. The Jewish population of the largest Jewish community in the country had risen from 10,000 to 12,000; there were over thirty-five permanently organized charitable societies. Through the Hebrew Benevolent Society, precursor of United Hebrew Charities, a hospital for the Jewish community was finally opened in 1855.

In its first years the hospital was sectarian, but it served wounded soldiers of all faiths during the Civil War and became a sanctuary for the sick and wounded during the Bloody Draft Riots of 1864 (when the police estimated that 1,200 men, women, and children were killed). Accident patients of all races and nationalities were admitted. By 1864 the decision to eliminate all sectarianism was made. But the public was not convinced that Jews Hospital was nonsectarian. Consequently in 1866 its name was changed to Mt. Sinai Hospital.

The first staff of Mt. Sinai was among the most qualified, public-spirited and far-sighted group of doctors in the area. Many, like Dr. Abraham Jacobi, were responsible for noteworthy advances in medicine. Dr. Jacobi himself was a pioneer in clinical and scientific pediatrics. Willard Parker was consultant surgeon to the hospital and
chairman in 1873, when he led a distinguished medical staff. Mt. Sinai was one of the first hospitals to accept a woman doctor, and helped pioneer woman's place in medicine.

Thus Mt. Sinai, as one of the oldest of Jewish hospitals, reflects traits that are characteristic of Jewish hospitals to the present day: the assumption of responsibility by the Jewish community for participation in medical care, concern for high standards, nonsectarianism in admission policy, and readiness to break new ground in practice.

1880–1920

Main Trends

The period between the onset of large-scale immigration in the 1880's and the virtual cessation of such immigration after World War I saw the most basic and far-reaching developments in the field of Jewish social work. It was during these years that philanthropies that had previously been small and stable became huge, sprawling, and multi-functional resources; that paid professionals appeared, assuming responsibility for carrying on the work of philanthropic agencies; that training for social work took on an increasingly formal and permanent pattern, and became the dominant influence in professionalizing the field; that conflicts arose between traditional attitudes toward charity and newer concepts; that new educational and cultural centers were established to help immigrants in their adjustment in the United States, to the accompaniment of conflicts between some of these services and the immigrant population they served; that pressure for coordination and centralization in fund raising resulted in the establishment of federations in all of the larger Jewish communities; that community leaders with East European Jewish background began to replace the solid front of the older settlers most of whom came from Central Europe; that overseas aid became a principal responsibility of the Jewish community, calling forth a united effort; that national coordinating organizations arose, and national professional associations were developed; that Zionism became attractive to large segments of American Jewry, and unprecedented philanthropic efforts were exerted on behalf of Palestine's Jews.

Meanwhile, by the 1880's the basis was being laid for three principal features of modern American social work, individualized services, interagency planning, and social reform. The first two developed
from the charity organization movement, the third was most vividly reflected in the settlement house movement. Both these movements permanently affected the patterns of Jewish social services.

The charity organization movement was accepted even more eagerly in the United States in the latter part of the nineteenth century than it had been in England, where it originated. Its aim was to put order into humanitarian private relief-giving, through a careful study of individual need, and coordination of charitable agencies. From this emphasis that the charity organization societies placed on orderly and rational processes of giving assistance stemmed the growth of social case work, on the one hand, and the development of "community organization," on the other. In the 1870's and 1880's some societies were already beginning to exercise their greater discretion in giving relief, by employing paid staff for administrative functions, organizing registration bureaus, and holding case conferences.

While investigation of individual need had a positive aspect in its genuine concern for the quality of help given, it was also characterized by a negative "weeding out" aspect. For in a sense, the charity organization movement sprang from the individualistic tradition strong in American life. This tradition viewed personal success or failure as directly related to individual worth; the state had minimal responsibility for the economic or physical welfare of its citizens. Such responsibility should properly be left to private initiative. Hence, well into the 1900's, private benevolent agencies were at times opposed to social welfare legislation. Leaders of agencies held with some economists that individualism was the source of invention, progress, and wealth. Sociologists and political scientists like William Graham Sumner and John William Burgess; historians like Frederick Jackson Turner (whose paper "The Frontier in American History" interpreted American history in terms of individualism), helped make individualism the potent influence in American thought which it has remained to this day.

By contrast, there were those who criticized the overemphasis on the individual, stressed society as "the associative principle in human life," and attributed to unhampered individualism poverty, ugliness, and waste. Looking to social action by citizens groups and government, they tended to believe in social meliorism, and received support for their position in the writings of such sociologists and economists as Leslie Ward and Thorstein Veblen. Reforms in the penal system, in the care of the mentally ill, in public health, during the nineteenth century were encouraged by this social humanitarian impulse, which coexisted with individualistic humanitarianism. Both of these powerful tendencies were reflected consistently in the development of Jewish social services.
In an important sense, the settlement house of the 1880's had its source in the tradition of social meliorism, which became increasingly active in the development of the field of social work. The settlement houses were interested in having people get things done in neighborhoods, in social legislation, in joining together people of common needs and interests; they were less interested in coordination, or clarity of function, or method.

By the 1880's, the solid underpinnings had been established for charitable work among Jews. Though they proved inadequate to cope with the mass needs of a later period, the services that existed in the 1880's nevertheless formed the essential nucleus around which could cluster a huge network of new resources; the old services gave the new both ballast and direction.

Sectarian Jewish social work was further strengthened by certain factors of a self-protective nature. One factor was the heightened feeling among the settled German Jews that they must take care of “their own,” lest all be subject to special disapproval. Anti-minority sentiment, directed particularly against Catholics and Jews, was very much in the air. From the point of view of the new East European Jewish immigrants, the feared experience of being declared unwanted, of being pointed to as unworthy, was too fresh in their memories lightly to be forgotten. To approach non-Jewish sources for help was from this standpoint unthinkable, as well as contrary to tradition. There was also a fear of attempts by non-Jewish social service institutions to convert Jewish applicants.

The mass immigration from East Europe that began in the 1880's brought with it a reawakened interest in the synagogue's traditional functions. However, the synagogue never regained its function, lost after the Colonial Era, of being the responsible agent for providing aid to the orphaned, the sick, the needy, and the aged.

The Jews from East Europe retained in considerable measure, nevertheless, the image and attitudes of the self-sufficient, synagogue-centered, Jewish communities of their countries of origin. There were recurrent attempts to reestablish this kind of “congregation” pattern, or a close approximation of it, in the United States; but all the attempts were doomed. The proliferation of centers of worship not only along lines of Orthodox, Conservative, and Reform, but also along very specific regional lines, made it impossible to centralize community life around the house of worship. Divisions as to Zionism, political orientation, the conflict between adherents of “Jewish group identity” and “assimilation,” all made true communal centralization impossible. Only poverty, sickness, and other disasters among co-religionists in the United States and abroad could unite all Jews in
charitable work, which gradually became the focus of communal endeavor.

The outstanding attempt to establish in America a version of the traditional autonomous Jewish community was the Kehilla, established in New York City and lasting from 1909 to 1918. Similar efforts were made in other cities, but they were weaker and did not last as long. An anti-Semitic pronouncement by a public official was the spark which led to the Kehilla's actual organization.21

The leader of the Kehilla movement was Judah L. Magnes, distinguished in many areas of Jewish life, devoted to the cause of Israel, and during his later years the president of the Hebrew University in Jerusalem. The indifference of most of the Jewish population to the Kehilla, the active opposition of many, and the avowed pacifism of Magnes himself during World War I led to the demise of the Kehilla in New York, and cut off similar incipient developments in other cities. During its lifetime, however, the Kehilla helped establish a school for communal work, took over the Bureau of Philanthropic Research (later merged with the Council of Jewish Federations and Welfare Funds), helped organize a Bureau of Jewish Education, stimulated the organization of the Federation of Jewish Philanthropies in New York, and published an exhaustive Jewish Communal Register, whose second edition in 1917-18 numbered 1,597 pages, and covered in detail every phase of organized Jewish life in New York, as well as of major national activities.

National Jewish philanthropic leadership during this period was dominated by Jacob H. Schiff, who, along with such men as Cyrus L. Sulzberger, Felix Warburg, and Louis Marshall, represented the elite of Jewish life. Schiff had enormous prestige in the general as well as Jewish community as a respected financier; he helped set the pattern for other philanthropists, of utilizing philanthropy as the principal vehicle for the attainment of social status. Schiff had a wide range of cultural and welfare interests, and was a spokesman for American Jews in their concern for the protection of Jews overseas. He was the guiding spirit of the first general relief fund for overseas purposes collected in the United States. Schiff also stimulated the development of the Federation of Jewish Philanthropies in New York and of many settlement houses. He was a leader in protecting Jewish civil rights, and an acknowledged spokesman of American Jewry. As Morris D. Waldman 22 recalls it, the unity of the Schiff era was not democratic, it came from above; but it was effective and generally welcomed.

The social movements that began during this era, even those that failed, cast their implications generations ahead. In the teeming alleys and throbbing life of New York's lower East Side, in the "East Sides" of scores of other cities, the shape of present-day Jewish social work
began to form. The ways of the shtetl were intermingled with the ways of second- and third-generation American Reform Jews; the resulting Jewish patterns were influenced by the patterns developing in the general social work scene, and by the social and economic forces affecting the development of all of American society.

Early Reception of Newcomers

While Jews had arrived in the United States from Russia and Poland in small numbers throughout the eighteenth and nineteenth centuries, the mass immigration did not begin until after the anti-Jewish pogroms which began in Kiev in the year 1881. For the most part they came here without means, after harrowing experiences in the process of migrating and en route.

Funds to assist the new immigrant were raised everywhere among the settled Jewish population of the United States, for the immigration laws of the 1890's and early 1900's limited immigration to those persons not likely to become "public charges." Funds were raised first of all to insure payment for the immigrant's passage. There was also the need to protect the immigrant at the port of entry, since he was liable to be rejected not only for minor health reasons, but even due to some misunderstanding that could be easily cleared up. Many Jewish charities helped in receiving the immigrant; the National Council of Jewish Women was particularly active in protecting Jewish girls from prostitution or other exploitation. In 1884, the Hebrew Immigrant and Aid Society was set up by the East European Jews themselves to provide immigrant services.

The settled Jewish communities possessed a core of stable charitable organizations which made it possible to extend direct help in some rational form; but they were apprehensive and unprepared for the vast new needs with which they were confronted. To many of the directors of existing societies, the newcomers were culturally foreign. Dress, food, ritual, language, all seemed outlandish. Early in 1881, more than one Jewish benevolent society was alarmed at the thought of East European Jews inundating its secure world. Part of this anxiety was ascribable to trepidation lest the newcomers intensify anti-Semitic feeling. Some spokesmen urged more careful selection of immigrants, and even went so far as to approve the protective immigration acts of 1882. But when the realization came to the older Jewish settlers of what was actually befalling their co-religionists in Russia and Poland, and when it became clear that the new immigration was irreversible, American Jewry offered help that was unstinting, energetic, spontaneous. That the immigrants were fellow-Jews and, if penniless, must not be permitted to fall into the hands of the care-
takers of the poor or be consigned to the miserable almshouses of the day, was beyond question. This obligation was assumed as naturally by the thoroughly Americanized German Jews of the 1880's as it had been by their ancestors in every country for centuries. Yet the strangeness of the newcomers was a problem to the older group, and at the beginning at least, they were held at arm's length: treated sympathetically and generously, but often with condescension. Writing of the efforts of the German-Jewish settlers in Chicago to help the panic-stricken and impoverished immigrants of 1881-82, Louis Wirth describes their energy, sacrifices, and resourcefulness on behalf of the newcomers, but adds:

And yet they did not wish to have these Jews too close to them. These Russians were all right . . . but . . . they had to keep their place. All sorts of philanthropic enterprises were undertaken in their behalf, but in the management of these enterprises the beneficiaries were given no voice. . . .

Without the help of the American Jews already established, the plight of the immigrant of this period would have been unimaginable. But the gap between the two groups was great; the Russian, Polish, or Rumanian Jew preferred, if he had to have help, to seek it from his own synagogue, his own special charity, his own landsmannschaft, and at a later date from his own union. A rapprochement gradually took place, with first-generation Jews increasingly achieving the right to participate in the direction of older organizations; but it did not take place quickly, easily, or without the rise of many competing agencies.

The older settlers were not all of one mind, and differed among themselves as to the extent of their identification with the new elements. A sense of deep responsibility was common, however; for many of the older settlers the years brought greater and warmer identification with the East European Jews, although it took two generations for the social distance to narrow decisively. Acting in almost instinctive traditional behavior, completely "integrated" American Jews, some with leanings towards complete assimilation, found themselves responding to the needs of culturally alien fellow-Jews. They became more and more involved, to the point where Jewish communal activities became, for many, paramount among their life concerns. The choices had become polarized. Not to help meant virtual rejection of one's Jewishness. To help meant a closer group commitment than one would ordinarily have sought, but to which one eventually became dedicated.
Efforts to Decentralize Immigrant Population

Before World War I, one of the main concerns of Jewish leaders in the United States was a "healthier circulation" of Jewish immigrants throughout the country. It was for this reason that the Industrial Removal Office, financed by the Baron de Hirsch Fund and by the Jewish Colonization Association of Paris, was established. The Galveston Movement (financed exclusively by Schiff) was a similar movement, as was the Jewish Agricultural Society, also financed by the Baron de Hirsch Fund. There were two motivations behind the establishment of these organizations. One was to decrease the congestion of New York City; the other, to encourage Jewish immigrants to return to the soil and so to "normalize" what was regarded as an "abnormal" Jewish occupational structure.

The Industrial Removal Office tried desperately, but with only limited success, to promote decentralization. It was not concerned with settlement on land, but with finding opportunities for industrial work in the smaller towns as far removed as possible from New York City. In 1903, about 12 per cent of new immigrants could be diverted to interior states. While there was much voluntary cooperation by communities in the United States immediately after the bloody Kishinev pogrom of 1903, communities typically wanted only immigrants from Kishinev. By the time the immigrants had arrived in large numbers the communities' ardor had cooled.

The Galveston Movement was short-lived. The origin of the enterprise, according to Morris Waldman, was a conversation between Jacob Schiff and Israel Zangwill. As a territorialist, Zangwill wanted Jews to settle in other parts of the world than Palestine; Schiff suggested that the immigrants settle in the western part of the United States. Galveston, Tex., was suggested by Waldman as a port of entry since it would offer the immigrants no inducement to permanent settlement. Waldman was made manager of the Jewish Immigrants' Information Bureau, under a committee consisting of Schiff as chairman, Cyrus L. Sulzberger as treasurer, Morris Loeb, Nathan Bijur, Max J. Kohler, and David Bressler as secretary. Schiff set aside half a million dollars as a working fund. Immigration authorities cooperated and there was enthusiastic cooperation from the noted Rabbi Henry Cohen in Galveston. After a few years, however, the movement subsided, since its effect was more to promote immigration than to deflect immigrants to Galveston.

The Jewish Agricultural Society was founded in 1900 as the Jewish Agricultural and Industrial Aid Society. Its first attempt to attract Jews out of large cities by moving industrial establishments to smaller towns and there subsidizing home building for factory work-
ers failed. The "Industrial" part of the society's function was dropped, being taken over completely by the Industrial Removal Office (with which the society had been cooperating). In addition to helping Jewish families settle on farms, the Jewish Agricultural Society (JAS) provided a multitude of services, educating farmers, publishing manuals, and initiating advances in agriculture. By 1909, the JAS had a list of 3,040 Jewish farm families, comprising 15,000 individuals, with farms located mainly in New England, New York, and New Jersey, but gradually spreading westward. (Eventually, a number of the farms in the Eastern area became resort hotels.) As the JAS continued its activity and growth, it developed placement services, published a journal, *The Jewish Farmer*, offered scholarships, provided technical training, and published many texts on farming. While the Industrial Removal Office managed to settle some thousands of families annually in smaller cities and towns in the United States, primarily where they had friends and relatives, the Jewish Agricultural Society settled some hundreds annually on farms.

The reaction of the small towns to the efforts of the Industrial Removal Office was mixed. As early as the first national Jewish conference on problems of charity in 1885, before the organization of the Industrial Removal Office, the small towns voiced the fear that they would be inundated by immigrants who "would be diverted from the wealthy eastern ports and promptly consume the resources of the smaller towns." This prediction did not come true, partly because the diversion was not extensive, and partly as a result of the work of the Industrial Removal Office, which, with the help of cooperating agencies, helped people to move to places where they had relatives or others to assist and befriend them.

By 1918, the Bureau of Jewish Statistics and Research calculated, there were 3,300,000 Jews in the United States. One-half of American Jewry resided in New York City. Three-fourths resided in the ten leading cities in the United States; about 5,000 Jewish families were in farming. American Jewry remained an essentially urban population. But the experience of resettlement during this period, and its successes and failures, was rich in resourcefulness and imagination. Its lessons were to become vital in the tragic period of Nazism and World War II, when the American Jewish community faced a new immigration of Jews.

**Poverty and Charity**

Though many of the East European immigrants were poverty-stricken when they arrived, they struggled to be self-sufficient. Out of 1,000 who applied for help in 1894 from the United Hebrew Charities in New York City, only 67 required help in 1899, and only 23 in
Lee K. Frankel in 1905 attributed this condition to two major cultural influences among the immigrants: the sanctity of family, and the “almost worshipful adoration” of education.

A noted non-Jewish social worker of the day, Kate Holladay Claghorn, pointed out that the Jewish immigration, while small as compared to the Slavic immigration, had special problems. The size of the Slavic immigration varied with the industrial demands and opportunity in the United States. Hence, each of the 450,000 Italian and Slavic immigrants entering in 1903 would be able to earn his daily bread.

The Jewish immigrant on the other hand does not come so much at the call of industrial opportunity here as under the pressure of the closing of all opportunities in his old home, and he comes, not only regardless of conditions in the labor market, but also of the special lines of demand in the industrial system.34

There was therefore congestion among the Jewish immigrants in certain occupations (particularly in the needle trades), congestion in cities, much economic maladjustment, much poverty and, for the first period after arrival at least, much recourse to charitable aid. Over 2,500 families, representing 7 per cent of the Jewish immigrants to the United States during 1903, applied to the United Hebrew Charities in New York for aid within one year after arrival. However, practically none of the burden of caring for the immigrants was allowed to fall on the city or state.

The care of this helpless and bewildered throng of refugees has been assumed with such cheerful readiness and so completely by their more prosperous co-religionists, that almost none of the Jewish immigrants have been allowed to become public charges.35

How to administer charity to those who were in need remained, nevertheless, an acute problem for the Jewish philanthropies. On what basis should this one be given financial help and that one not be given financial help? How much was to be deemed adequate? How much was it possible to give? How should the giving be done? Who should do it? These questions, settled so naturally and relatively easily in the days before 1880, had become critical by the turn of the century. There was no such person as the trained relief investigator in Jewish or non-Jewish agencies, let alone the modern caseworker. The giving of relief was largely in the hands of volunteers, often the donors themselves, and they were bewildered.

The fear of pauperization through excessive relief giving was a paramount source of concern. It was not long before this fear came to be recognized by responsible leaders as being without foundation. In 1902
Lee Frankel hit hard at this mistaken cause for apprehension at the National Conference of Jewish Charities. Two years later Solomon C. Lowenstein (executive director of the Hebrew Orphan Asylum of New York, and later of the New York Federation) also criticized the over-concern with “spoiling” the applicant for relief. He underlined the need to prevent careless application of relief, but also the need for adequacy and for promptness. Lowenstein cited the wide divergences between several cities in per capita relief in Jewish charities, and emphasized the savings in funds as well as in human values that would accrue to the communities through adequate and quick treatment of certain basic causes of dependency.

Such concern with the causes of continued dependency rather than with emergency relief characterized the period following 1905, after the first flood of immigration receded. It was clear from any objective investigation that the Jewish immigrant families were not going to become relief applicants if they could avoid it, and that there was no great merit in the fear of demoralization through relief giving, despite the widespread apprehension among relief investigators. In the general social work atmosphere of the time, moreover, stress was laid on the basic causes of dependency.

Solomon Lowenstein stressed the following as basic causes of dependency among the Jews: 1. tuberculosis; 2. no male support; 3. deserted women; 4. insufficient earnings.

As to the first of these, there was little question that tuberculosis during the early 1900's was the disease most responsible for dependency in the Jewish population, as it was with all groups living in heavily congested areas under unsanitary conditions. Every charitable agency was involved in some way in assisting families whose breadwinners were tubercular, or in trying to find some medical resources. The rapid spread of tuberculosis among Jews first came to the attention of the Jewish public in dramatic fashion in 1899 when a large number of Jewish patients went to Denver, where the climate was supposed to be beneficial. Two health organizations sprang up in Denver, one the National Jewish Hospital for Consumptives, established by German Jews in 1889, and the other The Jewish Consumptive Relief Society, founded in 1904 by Orthodox East European Jews.

Jewish facilities for tuberculosis were quite limited and public tuberculosis centers were used increasingly as their standards gradually improved. Aftercare of tuberculosis became an outstanding need. By 1902 the United Jewish Charities of Cincinnati had recognized the importance of this need as well as certain basic elements in rehabilitation. When patients were ready to be discharged from a hospital in Denver, the family of the patients was sent to Denver to join them, in order to help the former patients to be restored to a normal
occupation and readjusted to a stable home life. The patients, however, according to this plan, were not to leave Colorado. The Cincinnati Method, as it was known, was practised for several years, but then had to be given up. For while patients did have better recovery and did stay well longer, the Cincinnati Method was very expensive, involving as it did a continuing obligation by the United Jewish Charities of Cincinnati to support those families that could not maintain themselves.

A survey by the Council of Jewish Women stressed the high rate of tuberculosis relapse after discharge due to neglect of aftercare. As a result of this study the Joint Tuberculosis Committee was organized in New York, on which the Free Synagogue, Montefiore Hospital, and United Hebrew Charities were represented. After-care service on a demonstration basis reduced the rate of relapse, and it became apparent that there was less need for specifically Jewish sanatoria than for intensive after-care programs.

Of the absence of male support as a cause of dependency, Lowenstein stated: "Suffice it to say that practically all are agreed that a good mother and father are far superior to the best institutions, and it would appear the height of wisdom to grant sufficient subsidy in such cases to enable the family life to be considered." This is the same principle on which the public Aid to Dependent Children program is now based. At the time it was still another blow against the specter that adequate assistance would demoralize its recipients. The position that Lowenstein took, however, was related to subsidy by the voluntary charity agency, rather than government. The United Hebrew Charities, upholding this principle, joined with the Charity Organization Society in the early 1900’s to protest against legislation for widows’ pensions in New York State. The basis for the objection was the fear of state encroachment on the social services—a fear characteristic of the time.

In the first decade of the twentieth century the deserting husband was considered a prime source of dependency and the focus of much attention. Morris Waldman conducted a study of desertion which he reported on at the National Conference of Jewish Charities in St. Louis in 1910. He stressed that desertion was not a specifically Jewish problem, desertion rates being actually higher for non-Jews. Still desertion was a problem: in 1909, 7 per cent of the applicants in St. Louis were deserted women, in Baltimore 16 per cent, in Chicago 11 per cent, and in New York City 10 per cent. The number of children under care in New York City was 600, and the cost totaled $70,000 annually. Waldman stressed the importance of laws and prosecution of deserting spouses. As a result of the Waldman study, legislation was enacted making child abandonment a felony in New York State.
The Charity Organization Society and the Association for Improvement of the Condition of the Poor cooperated in this activity. In order to locate missing husbands a picture Gallery of Missing Husbands was published in the Sunday edition of the *Jewish Forward* starting in 1908; it became a very popular feature.

In addition to legislation, Waldman's paper led directly to the founding in 1912 of the National Desertion Bureau, which not only published weekly pictures and description of deserters but aided in their prosecution, where necessary. When such missing husbands were recognized, information was to be sent to the nearest charity office. "In the majority of cases reconciliation was effected." In other cases support was arranged; in some, prosecution was entailed. Formation of this agency was considered at the time an important, forward-looking development by the entire social service field.

Ten years later, in 1922, Charles Zunser, director of the National Desertion Bureau, found that family desertion cases had come to constitute 10 per cent to 15 per cent of all the persons under the care of Jewish charities, whereas desertion accounted for 15 per cent to 20 per cent of the non-Jewish social service cases. By 1925, only 192 deserted families were on the books of the United Hebrew Charities, compared to 487 families in 1910; the same year approximately 12,500 cases were dealt with by the National Desertion Bureau.

It was during the 1920's that realization came that not all deserting husbands were malefactors, and that perhaps the causes of desertion immediately following the mass immigration period had not been clearly understood. Arranged marriages which may have worked out satisfactorily in the Old Country sometimes could not take the strains imposed by transplanted life in the United States. Long periods of absence before the breadwinner could bring his family to the United States also contributed to the estrangement of some. Punitive measures could not solve the entire problem of desertion.

The problem of inadequate earnings, fourth on Lowenstein's list of causes of dependency in the Jewish population, could be met as a problem by the private agencies of the time only by supplementation of meager incomes. There was virtually no public assistance to people in their own homes. Occasionally, during periods of depression the private agencies would mete out public funds; but this practice was never satisfactory.

Supplementation of income raised the question of a standard of maintenance towards which the private agency would contribute. Gradually the idea of a minimum allowance of relief developed, Formerly the prime criterion in determining relief standards had been the interests of the giver. Now, for the first time, the needs of the recipient received serious consideration.
The numbers of relief applicants continued to decrease, but the problems of those who remained on the rolls seemed more difficult of resolution. Chronic disease and continuous dependency had become characteristic of most of the agency relief loads by the second decade of the twentieth century. It was essential to develop new standards. Studies of actual expenses for food and maintenance were made, allowances for clothing were examined, schedules adopted, United States Department of Agriculture guides followed for data on food intake.

Accompanying this preoccupation with schedules and standards (itself alien to immigrants accustomed to a culture where help was given and received unquestioningly), was a strong interest by relief agencies in the other resources a family might have. Relief investigators became eagle-eyed in their efforts to hunt out "the truth," with the burden of proving need falling on the applicant. The relief investigator rapidly became an object of distrust, and the effectiveness of the relief itself was often vitiated by the way in which it was given. It was this situation that was responsible in large measure "for the unkindly attitude of the community to the relief agencies which are as a rule condemned for their inquisitorial policies, prompted by necessity." Such practices were in marked contrast to the policy statements of agency executives like Lowenstein and Frankel.

While grateful for the help they received from the settled Jewish community, the immigrant Jews congregating in New York's East Side and Chicago's ghetto, and in the dingy quarters of other cities, reacted violently to the detective approach of many volunteers and relief officials who meted out financial aid. They quickly became resentful of the fact that they had no voice in the organizations designed to meet their needs. As rapidly as possible, they set up their own social service organizations along shtetl lines, in addition to their own synagogues. Many voices were raised in their behalf in the older Jewish community. An article in 1903 called "Break Down the Barriers," called for Jewish philanthropic leadership to invite representation from the East Side, to treat the whole Jewish community as one, and to recruit members for boards from all groups. David Blaustein, speaking at the State Conference of Charities in 1903, eloquently described the disillusionment of the immigrant, and outlined steps to help correct the situation. Before long, in December 1904, two district offices of the United Hebrew Charities in New York City were opened on the East Side. With board membership coming from the area to be served, these offices were the beginning of a gradual trend toward greater involvement of the new immigrants in the agencies serving them.

That the approach of the relief agent still left something to be
desired in many agencies even after World War I can be illustrated by a quotation from a report by Maurice B. Hexter after his survey of the Indianapolis Agency in 1919:

The agent should be given the opportunity of receiving the applicant cordially and sympathetically; he should not be required to act as a mere guardian of funds that the applicants are attacking, but as an agent of the generous public who wishes to help the needy. He should be appreciated by the amount of good done for the applicants rather than by the instances where he discovered fraud and imposition. In the latter instance, he plays the role of a detective; in the former, he is the tool of efficient constructive charity. There is a way to make the interview in a charity office so unpleasant that the deserving poor would rather starve than apply for help. Not every applicant is a fraud and consequently the wholesale treatment of them as imposters is neither just nor wise. In many instances the applicants to a charity organization need advice and guidance, even more than individual relief. This must be offered in a kindly spirit, in a refined form, with a friendly attitude and with a deep sincere interest that the poor easily discern and appreciate. Truthfulness and frank statements on the part of a relief agency will win the confidence of the community at large and cases of fraud and imposition will be easily detected without special effort.42

Through the years, wise and devoted leaders, some of them far ahead of their time in social work terms, tried to steer a rational and humane path. Nathan Bijur, for example, as chairman of the Commission on Care and Relief of Needy Families in Their Homes, cautioned in 1903 against the practice of underemphasizing material relief and overemphasizing such “substitutes” as advice. This practice was apparently coming into vogue among the “friendly visitors” of the time. A year later, in 1904, Bijur advised that the giving of relief be guided by the essential consideration: “What can a sensible person do, within human reason and common probabilities, to restore this applicant to independence while always maintaining his self respect?” He urged relief agents-in-training—the forerunners of the modern social workers—not to be troubled with the inadequate resources for relief in their agencies, but rather to maintain the needs of the applicant as their first concern.

Jewish social work, like all voluntary social work in the United States, was preoccupied with duplication of activity among agencies; the fact of duplication was unquestioned, but the relief agents’ fear that other agencies were in a position to help sometimes left the needy person in the middle between agencies which passed him on from one to another.
By World War I, the large benevolent charities, despite the number of special services which other agencies had assumed, were still performing multiple functions, in addition to relief. These included: vocational guidance, home economics, home nursing and dietetics, and self-support for small business, including loans and grants. Some of these functions gradually were taken over by the specialized agencies. In the larger cities the general charities during the 1920's became family agencies, one among several kinds of agencies in the philanthropic network of the urban Jewish community in the United States. It was no longer the charity, assuming or initiating all functions. Nevertheless, the family agency has retained to the present day the role of pioneering new developments, even those outside its own purview.

**Health**

From the 1880's through the period of World War I, Jewish communities were very active in setting up new health facilities, and expanding the old ones. Slum conditions created constant pressure for medical attention; tuberculosis was the greatest scourge, but there were also trachoma, widespread among children, severe undernourishment and malnutrition, heart disease, and a variety of diseases for which hospital care was virtually unknown. The recent immigrants built their own hospitals, partly to insure kosher meals for patients, as fast as their resources permitted—sometimes faster—and the older settlers continued to build and expand the existing hospitals.

Jewish patients refused to go to public hospitals (such as the one on Blackwell's Island in New York City) even when they were suffering from acute diseases. They did not wish to be with abusive alcoholics—alcoholism had unpleasant associations with the aggressive anti-Semitism they had fled in the Old Country. They wanted to be understood when they spoke in Yiddish. They feared attempts at conversion to Christianity, and if they were going to die in the hospital—as many feared—they wished to be surrounded by Jews during their last moments. Even at the risk of still graver illness, many simply refused to go to non-Jewish hospitals. Generally, except for Montefiore Hospital and Lebanon Hospital in New York City, Jews at the turn of the century did not have hospital facilities for certain ailments, e.g., acute miliary tuberculosis, myelitis and other nervous diseases, Bright's disease, chronic heart disease, and chronic rheumatism. The relief rolls of the Jewish family agencies were heavily represented by individuals needing relief in order to nurse their sick relatives suffering from such ailments. There was pressure for more facilities for Jewish patients.
The first Jewish convalescent home was opened in 1906 (Loeb Memorial); Montefiore Hospital in New York City (established in 1884) and the Touro Infirmary in New Orleans became outstanding for convalescent care. Dispensaries and clinics were opened; many, such as those associated with the Michael Reese Hospital in Chicago, which included a dental department, maternity and infant welfare services, were remarkable in the scope of their medical service. In 1915, more than 64,000 patients were seen at the Michael Reese dispensaries.

Milk stations; educational campaigns among Yiddish-speaking mothers; the availability of clinics; penny luncheons in schools introduced by the National Council of Jewish Women; systematic medical examinations; summer camps for undernourished and physically handicapped children, through settlement houses and Jewish family and other agencies; all these—together with the eagerness of the parents to make use of the facilities—contributed to the lowering of infant mortality among the Jewish population, and to the prevention of disease in later childhood years.

The development of visiting nurse services in American cities may be traced to the efforts of one woman, Lillian Wald, director of the Henry Street Settlement and herself a graduate nurse. A great figure in the history of American social work by virtue of her leadership in the settlement house movement and her complete involvement in the problems of the poor around her, not the least of Lillian Wald's accomplishments was the beginning of the practice of sending nurses out on call to homes. The nonsectarian Henry Street Settlement House became known as the "Nurses' Settlement." This achievement was all the more remarkable as trained nurses were themselves a recent phenomenon. The first training school for nurses in the United States was at Bellevue in 1873; Mt. Sinai could start a nursing school only in 1881 (with nurses having only limited access to male patients until 1897), and it required great courage and conviction for a girl to enter nursing. But Lillian Wald attracted nurses, and the East Side of New York City clamored for their help. The services of hard-pressed doctors were often saved, families that would otherwise have been deprived of all medical care could be seen, and families were dissuaded from rushing patients needlessly to hospitals. Anticipating the future direction of medical care, "Miss Lillian Wald thinks that in many instances the home treatment produces better results than the hospital, and refuses a strict rule as to the disposition of the sick."

During the early 1900's, there began the establishment of social service departments that were attached to hospitals. Jewish hospitals were among the first to maintain such departments, staffed by med-
ical social workers who assisted the poor in getting treatment. When the New York City hospital at Bellevue came to lack adequate social service facilities, the Free Synagogue began a social service department of its own, the first of many social service activities by this religious center. By 1918, medical social service was sufficiently well established for a national professional group to be formed, the American Association of Medical Social Workers.

Between 1905 and the outbreak of World War I special associations for the physically handicapped, particularly for the deaf and the blind, sprang up in a number of cities. Many specialized institutions opened for the care of handicapped children. New national hospitals were organized, such as the National Hospital for Rheumatism and Blood Diseases, in Hot Springs, Ark. (established by B’nai B’rith and known as the Leo N. Levi Memorial Hospital). During this period, too, the Committee for the Care of Jewish Tuberculous began its pioneer activity which led to the development of sheltered workshops.

Insanity continued to be the one illness in which Jewish communities used state and municipal institutions for purposes of custodial care. But by World War I communities were starting services for prevention, aftercare work, and individualized attention for the mentally ill. The Personal Service Bureau of Chicago, the Special Service of the Baltimore Federation, the Mental Hygiene Department of the Free Synagogue in New York, were leaders in this area among the Jewish groups.

“Americanization” and the “Jewish Settlement”

Despite all their manifest good will, it was not surprising that there were strong tendencies among the existing Jewish leadership to attempt to “Americanize” the newcomers as rapidly as possible. Americanization had two purposes: to remove the odium of strangeness from the immigrants, and to help them adjust more readily to their new home.

During this period, the YMHA movement, responding to new needs, began to change in character from a source of stimulation for educational and social activities to a center serving the new immigrants, particularly by attempting to educate them to American ways. (During the 1880’s, the first YWHA’s appeared; many later joined with the YMHA’s to become YM-YWHA’s.) During the same period the “Jewish settlement” emerged, along with the clearly nonsectarian social settlement.

The social settlement, or “settlement house” idea, had come to the United States from England, the specific model being Toynbee
Hall, which had been established in London's East End in 1884 by Canon Samuel Barnett and his wife, after the pioneer work of Edward Denison. The settlement house was developed by democratic and idealistic-minded men and women concerned with relieving the distress of the urban poor by living and working directly with them. It represented a stirring of social conscience among members of the more privileged groups in response to the ideas of Ruskin, Kingsley, and Dickens in England, Tolstoy in Russia, and Mazzini in Italy. The Industrial Revolution, in the United States, as in England, had brought in its wake slums, impoverishment, health hazards, the spiritual anonymity and impersonality of city life; legal safeguards against exploitation and economic measures to prevent dependency had not yet been adopted.

The first settlement house in the United States was the Neighborhood Guild, established in 1886 under the direction of Stanley A. Coit. It was later called the University Settlement, and located in New York's lower East Side. Hull House was opened in Chicago by Jane Addams and Ellen Gates Starr. Other settlements quickly followed, among the most famous being Andover House (later South End House) in Boston, the Henry Street Settlement in New York City's lower East Side under the leadership of Lillian Wald, and the Chicago Commons, established by Graham Taylor and Lea Taylor.

These settlement houses were not interested in precise administrative structure, carefully defined functions, or professional roles. Manned largely by volunteers, they entered into the lives of the communities where they were, engaging with their constituents in a variety of simultaneous projects. They tackled problems of housing, fought with politicians over corruption, urged reforms in public health, provided all kinds of vocational training, and educated immigrant groups.

Leaders in the Jewish communities of the larger cities responded to the settlement house idea, and were eager for such facilities to be established in sections of the city where immigrant Jews were concentrated. However, they did not wish the center to be sectarian in character, preferring to preserve the nonsectarian spirit of the general settlement house. This view was partly ideological, partly due to fear lest the non-Jewish community react negatively, and partly to safeguard the settlement against losing financial support.

One of the first such institutions, established with the specific aim of preparing Jewish immigrants for life in America, was the Hebrew Institute of New York, organized in 1889 as an outgrowth of the YMHA. The Institute also conducted activities for the Baron de Hirsch Fund. It dropped its sectarian name in 1893 to become the
Educational Alliance, and soon became popular as "The Palace of Immigrants."

The charter of the Educational Alliance declares its scope to "be of an Americanizing, educational, social and humanizing character—for the moral and intellectual improvement of the inhabitants of the East Side." Its nonsectarian purpose was stressed from the beginning. Isidor Straus, for example, in the 1897 annual report of the Alliance, emphasized that while the Alliance might appear to be serving only Jews, this was due simply to the fact that the neighborhood happened to be Jewish.

In its early years, the Alliance stressed "Americanization"—with all the invidious implications scored by later generations of settlement house workers, and social workers in general. Its program emphasized the speaking of English only, and the observance of all national holidays and patriotic celebrations; Yiddish was excluded, and the customs and values of the immigrants themselves barely recognized. Soon, there was a sharp change in approach. Resistance to steamroller methods of Americanization was felt, and Yiddish became the vehicle of Americanization, Yiddish newspapers and books were introduced, lectures were held in Yiddish, and most important, the Ghetto itself was involved in planning its own education.

Similar resentment and periodic strife among their constituents marked the formative years of other "Jewish settlements" organized during this period. Among the factors contributing to this development was the condescension communicated by some of the leaders of these centers, their distrust and lack of identification with the community to be served, their zeal to blot out as quickly as possible the foreignness of the Jews arriving by the thousands. Other contributing factors were the divisions among the immigrants themselves, in political orientation, in national origin, in religious affiliation. Throughout the history of these settlement houses ran the conflict of how Jewish they had to be.

Many leaders declared that a "Jewish settlement" was a misnomer, indicating a confusion of purpose; on the other hand, in 1914, the National Conference of Jewish Charities was still stressing the essential Jewish content and function of this institution. Bogen states that though theoretically the professional Jewish social workers of the 1910's agreed on the necessity of recognizing Jewish tendencies in the settlements, in practice they emphasized nonsectarian features, preferring to stand for something "broader than Judaism." There were early indications of the difference that has persisted among Jewish group work professionals to this day.

The Council Educational Alliance of Cleveland, popular during its first years in 1900-04, was boycotted by immigrant workers because
of the attitude of the center’s administration toward the garment strike of 1906. It was many years before the Alliance regained popular support.

The Hebrew Institute of Chicago, organized in 1903, tried to avoid the pitfalls that had been the downfall of its predecessors. There was to be no patronizing attitude, everyone was to pay, all ages were to be served, immigrants and native-born alike. Yet in 1915 the Hebrew Institute faced a crisis of internal dissidence, was boycotted by radicals, and 500 students left permanently. It was many years before it regained universal support as the Jewish People’s Institute of Chicago.

Despite these ups and downs, there is no doubt of the immense contribution made by these “Jewish settlements.” Like the numerous nonsectarian settlement houses, they too offered a wide variety of needed services: legal aid, English classes, libraries, lectures, physical training, infant care, playgrounds. They nurtured many of the leaders of the coming generation. They spearheaded reforms in public health, housing, and politics. The one area where they seem to have sometimes failed, due to inconsistency or neglect, was that of helping the children of the immigrants to see the positive elements in the culture and traditions of their parents. The prevailing insistence of the settlements on changing over the children of the immigrants, to make them behave more like other Americans, only intensified the conflict between these children and their immigrant elders. Not only did the schools, newspapers, and magazines emphasize different values from those held by their parents; not only were other attitudes to be learned from non-Jewish peers; not only was the ignorance of the immigrant parents of things American clearly evident to their children—but Jewish institutions themselves looked down on the beards, the earlocks, the Yiddish, the phylacteries, the herring and potatoes of the parents. Those thousands of Jewish youth who were ready to rebel against their parents’ Old World constraints and ritualism were encouraged by the implicitly critical attitude of the centers towards the elder generation.

It was only in retrospect that the full danger of the concerted efforts to promote “Americanization” was realized. In 1923 Albert Shiels wrote:

Those who would hasten destruction of the native culture forget that life in a new country will do it perhaps too quickly. The immigrant himself changes rapidly. As a rule he is an unskilled worker and leisure has been denied him. The simple pleasures created by generations of peasants are forgotten in the drab life of the immigrant settlement and the movies displace them soon enough. His children might under happier circumstances reveal the desirable national qualities, but the children themselves for the most part
lose any consciousness of the old relation and not infrequently are ashamed of their ancestry. Some super-Americans rejoice at this. Americanism to them means absolute conformity—not conformity in American essentials—loyalty to America in regard for its political institutions, respect for its laws, but conformity in outward and unessential things. Is it not possible that a boy be a good staunch American yet have a certain pride that his family is representative of the civilization and culture which can give America something—thoroughness, filial affection, religious spirit, pride in embroidery, folk song, and so on through the list? Surely all this is compatible with uncompromising loyalty.

Often the well-meant efforts to hurry the Americanization process merely create a rift in the family relation. A girl becomes ashamed of the mother's cooking; the boy of his father's accent. Certainly one American principle is to recognize the sacred place of the home as an educational agency. Indifference to it may destroy one effective form of social control before another can replace it. It is a truism that the curve of crime mounts upward with the second generation. The old sanctions of obedience are lost and the American child of foreign-born parents suffers with the community.

The “melting pot” theory had proven impracticable. After World War I much greater attention was paid to recognizing the values of the older generation of immigrants, and to helping them find their way more gradually into American life, with less strain and conflict between parents and youth.

**Dependent Children**

The protection of homeless and orphaned children, one of the traditional concerns of the Jewish community since Biblical times, was consistent with the prevailing pattern in nineteenth-century America. Hence, it was inevitable that institutions for dependent children were among the first congregate endeavors in social welfare undertaken by Jewish communities in the United States. By 1807, Charleston, S.C., had a Jewish Children's Home; in 1832 the Hebrew Benevolent and Orphan Asylum was established in New York City, and in 1855 New Orleans established a Jewish Orphans Home. The number of such institutions increased steadily. The large-scale East European immigration resulted in a new spurt in organizing institutional care for children. By 1916 the Jewish institutions in different parts of the country had facilities for 6,000 children.

Since the 1850's there had been a steady growth of public county homes in the United States for dependent neglected children. Placement of children was, however, frequently coupled with a punitive attitude towards parents accused of neglect. There was no doubt that
the state had the right to remove children from homes considered undesirable. As early as 1853, the Children's Aid Society of New York, founded by Charles Loring Brace, initiated an effort to place children with private families, particularly families living in the West. Early attempts at individual child placements frequently caused distress, however, because the families with whom children were placed were unsupervised. For decades the relative merits of institutions versus this type of foster home care were the subject of debate. Throughout the nineteenth century, nevertheless, the major program in care for dependent children remained institutional.

To East European Jewish families it seemed only natural to place orphaned children in an institution. The shtetl placed great emphasis on the right of its members to receive help without having to assume individual obligations. The institution represented a communal responsibility in which all participated. For a widow or widower to send his or her child to an individual family to be cared for denoted a personal obligation on the part of the parent; it also had the connotation of dividing the loyalty and love of the child who was a half orphan between his surviving natural parent and his foster parents. The institution provided no such threat. For the care of the full orphan there was no problem or consideration of alternatives. He would be maintained as a community obligation, in keeping with the long tradition, and the orphanage represented the principal form of congregational responsibility.

By the 1880's spokesmen of existing charities at the National Conferences of Charities and Corrections were clearly asserting a preference for family placement over institutional placement. If an institution was unavoidable, they advocated smaller rather than larger congregate dwelling units; the trend was toward the cottage system. In cases where foster home placement was possible, the Children's Aid Societies of New York and Pennsylvania led the agencies in stressing the need for careful investigation of foster homes and greater understanding of the child who was placed. By 1898 social welfare leaders had clearly established the principle that no child should be removed from his home because of poverty alone.

The efforts of Jewish communities to care for needy children were bound to be affected by these developments. The early 1900's saw Jewish social work leaders forthrightly asserting the desirability of "placing out" in foster homes, of adoption, and of cottage plan care where institutions were needed. Lee Frankel, Solomon Lowenstein, and Ludwig Bernstein were among the most prominent advocates of these principles, to some extent based on their own studies as well as the experience of others.

The Hebrew Sheltering and Guardian Society of New York, founded
originally in 1879, gradually obtained the reputation of practicing the most advanced methods of child care among Jewish communities. The Society's director in the early 1900's, Dr. Ludwig Bernstein, was among the most enthusiastic supporters of the placing out system as against congregate care. The Society was among the first to adopt the cottage plan. By 1916, 600 children were being cared for by the Hebrew Sheltering and Guardian Society, of whom 300 were being "boarded out" in private homes. In addition, the organization had a program of aftercare supervision of children who had left the cottages to live independent lives. Placing out and adoption programs were also favored in Chicago, where these programs received the enthusiastic support of Julius Rosenwald. At the first White House conference held in 1909, the experience of Jewish agencies with cottage plans was referred to as a successful demonstration of the advantages of this plan, under which children could receive more individual attention, and home and group living could be more closely approximated.

Lee Frankel stressed repeatedly the danger to the personality and to the well-being of children growing up in institutions that served children en masse. Frankel recognized that many institutions had come into being as a protest against the care of children in private homes where they were improperly supervised and often exploited; but he stressed that agencies in 1905 were prepared to take the responsibility for supervising foster homes. Frankel strongly advocated a family as against an institutional atmosphere, wherever possible. Thus, he pointed out in June 1904 that: "The Cleveland Orphan Asylum has 500 children and it is questionable whether any educator would attempt to bring out the complete individuality of each child where 500 of them are assembled under one roof." Solomon Lowenstein's study in 1906 of 3,182 children in institutions, which reported that only 37 per cent were full orphans, had a marked effect along the same lines. Both Frankel and Lowenstein encouraged individual placement of children as opposed to institutional care. In particular they urged that poverty must not be permitted to lead to the breaking up of homes, and that widows should be supported by pensions rather than be separated from their children.

The effort to find private homes for Jewish children was given considerable impetus in New York City in June 1903 when a joint committee was formed by the United Hebrew Charities and the New York City Department of Charities to undertake a home finding program. The Department of Charities agreed to pay for agents and for the boarding care of children for whom free homes could not be found.

It was not to be expected that the efforts for foster home care and cottage plans would meet with universal approval from authorities in
the field. The issues were in fact hotly debated and progress was relatively slow. Among the opponents of placing out were the directors of orphan asylums, such as Dr. Wolfenstein of Cleveland, who produced statistics to show the success of the graduates from his national institution. Certain Orthodox leaders also maintained that the orphan asylum was necessary, as a way of preserving Jewish culture and dietary provisions and maintaining the religious beliefs of orphaned Jewish children. A letter that appeared in the January 1905 issue of *Jewish Charity* argued against pensioning mothers and boarding children out, on the ground that dependent children could receive better care and more love in a cottage plan situation than in any other.

In the main, however, the trend of the care for dependent children among Jewish communities closely paralleled the trend in the non-Jewish field, and there was a free sharing of ideas and information. The separation of children from their widowed mothers gradually became recognized as an anomaly; private agencies supported the widowed mothers until state pensions to widows were introduced; at that point many of the private agencies, particularly those that were Jewish, supplemented the state pensions. Large mass institutions very slowly gave way to organizations where children were housed in smaller living units under the supervision of a cottage mother and father. The child-caring agencies placed major emphasis on individualizing the care of the child, so that wherever possible the child who needed a private foster home received such care. Only where special reasons made such a plan unfeasible would the child be placed in a congregate living atmosphere. While the process of decentralizing, eliminating, or reducing the size of mass care orphanages took many decades in the Jewish child care agencies, the die was cast in favor of a new direction by leaders of Jewish communal institutions early in the 1900's.

Thus, a working set of rules for child care suggested by Ludwig Bernstein of the Hebrew Sheltering and Guardian Society in 1902 may serve as a summary of the more advanced thinking of the times:

1. If the home of the child be a good one, and can be kept together adequately, it should not be broken up on the death of the breadwinner.
2. The home, on the other hand, if lacking in good influences, should not be kept together on a mere pittance, merely for the sake of so doing.
3. A child should always be taken out of a consumptive's home.
4. As infant mortality in the very best institutions is high, under no circumstances should infants be placed in an institution.
5. A total orphan should be kept out of institutions whenever possible and placed in a carefully chosen home.
6. To avoid human tragedies a child, though legally adopted, should be kept in touch with till its majority.
7. Children of ten or twelve years and over are usually physically better off in institutions.
8. The child-placing man who boasts only of the success of his cases is a man well worth avoiding. It is impossible to detect his failures, which must exist.
9. If it be impossible to place children under seven or eight years in cottage homes, it is better to place them with private families properly supervised, than in congregate institutions where discipline is too rigid for a young child.
10. A child of ten or eleven years who has outgrown the moral and mental influence of its boarding mother should be allowed to leave. Unmanageable children are often merely evincing a healthy desire of entering into healthy competition in work and play with others of their age.

It may be mentioned that point 4 ("As infant mortality in the very best institutions is high, under no circumstances should infants be placed in an institution") is still an issue. In 1955 infants in New York City are still being placed in institutions, and social workers are still urging that such practice be discontinued. While Bernstein put the matter on a simple biological basis, more is now known of why infants fail to thrive under such conditions. Studies have demonstrated that it is not so much the absence of physical care as the absence of individualized, loving attention that threatens the survival of infants and that may mar them for life, psychologically and physically.

The insights of Freudian and related psychologists, and systematic research into the factors affecting the emotional lives of children, were not yet available at the turn of the century. But the basic conception implicit in Bernstein's ten points was consistent with the later conception arising from the findings of the behavioral sciences as to the overriding importance of the emotional atmosphere in which the young child is reared.

Conversely, the emphasis placed on physical, moral, and educational training in the 1900's may be illustrated by Bernstein's suggested guide to the training of children in institutions that appeared in the same issue of Jewish Charity as the working rules cited above:

1. Dependent children, whether in an institution or private home, should have frequent physical examinations and the results carefully recorded and compared with previous records.
2. The eyes and teeth of the children should be examined and attended to periodically.
3. The education of a child should not cease at fourteen, but should
be continued long enough to allow the child to develop its latent abilities to the fullest degree.

4. The education which the child receives in public school is insufficient and should be supplemented by higher educational work. An institutional school could be easily devised combining both elementary and high school work in from eight to nine years as is done in Europe.

5. Industrial and vocational training is industrial preparation for life and should not be construed to mean menial labor.

6. The child should be given a substantial religious training, which, to be of lasting value, should not be overemphasized.

7. Children should be kept in contact with men and women of education, culture, and character.

8. The child in the institution should be allowed freedom and self-government. Too rigid discipline crushes individuality and kills self-reliance and initiative.

9. The child should have plenty of recreation and spontaneous play in the company of children of his own age.

10. The efficiency of a child institution varies directly as the per capita cost.

11. The child should be kept in touch with by a capable, tactful and devoted worker even after employment has been found for it.

Delinquent Children

The early 1900's also saw considerable interest in the problem of juvenile delinquency among Jewish children, although there was general recognition that Jews had a lower proportion of delinquency than the rest of the population. The major issue was whether or not there ought to be separate institutional facilities for Jewish delinquent children. In 1907 there was only one such institution. Before then all Jewish delinquents had been in non-Jewish institutions. At the end of 1904, for example, there were 549 Jewish delinquents in New York City, all located in four public or nonsectarian institutions.

Some leaders in Jewish philanthropy insisted that there was a need for a cottage plan institution for juvenile delinquents. Others, like Judge Julian W. Mack, felt that institutional care for delinquents should be a state responsibility. This point of view prevailed. However, Jewish agencies did enter the field of juvenile court work, the National Council of Jewish Women being among the first to look into the needs of the delinquents. On the preventive side, Jewish settlement houses were active in attempting to redirect potential delinquents, and to strike at the local political corruption which helped produce delinquency.53

The most comprehensive program was that of the Personal Service Bureau of Chicago, which in 1915 established a program of volun-
teers for supervision of wayward girls. This bureau later established a department for the adult criminal, with aftercare supervision being provided by B'nai B'rith.

The best known of all such programs was that of the Jewish Board of Guardians of New York City, which gradually changed and enlarged its function to become an internationally known child guidance center. It began in 1893, when the Jewish Prisoners Aid Society was established to provide chaplain service in state penal institutions, an activity which is still being carried on. In 1902 a Jewish Protective and Aid Society to serve Jewish delinquent boys was formed, and in 1906-07 the Hawthorne School for Boys, one of the country's first correctional schools built on the cottage plan. This plan made it possible to place boys in small, carefully classified groups, as contrasted with the customary grouping which disregarded age or personality. Seven years later, in 1913, the Cedar-Knolls School, a similar school for girls, was established to care for Jewish girls committed from the children's courts. The Jewish Board of Guardians developed a Jewish Big Brother and Big Sister Association so that volunteers could help Jewish boys and girls who were brought to the attention of children's courts or paroled from the Hawthorne or Cedar-Knolls Schools.

There were many suggestions during the early 1900's for the kind of treatment Jewish delinquents ought to have; some felt there was something special about the Jewish delinquent which required that he be placed in a Jewish institution. Bogen, for example, wrote in 1905: "We can see that military drill and discipline of these boys in a reformatory school, in a chapel which is not Jewish, the learning of a trade which will throw the child back among the citizens of a large city . . . will hardly have a beneficial effect. . . ." On the other hand, he felt that "the Jewish boy criminal" was highly suited for farming.

Unquestionably, dissatisfaction with the existing facilities of reform schools and the desire to preserve the Jewish background of children in conflict with the law were factors that influenced the promotion of separate facilities. Actually, the trend that developed was not for the establishment of special Jewish institutions for delinquents; rather the trend was for visitors, both paid and volunteer, connected with the existing philanthropies, to safeguard the welfare of children who were brought to court, to keep in touch with them while they were under state institutional care, and to provide aftercare and rehabilitation services.

The Growth of Federations

We have noted how the rapid expansion of the older charitable societies and the mushrooming of new ones around the turn of the
century created confusion in services. This extraordinary growth also created severe problems in fund raising—particularly for the larger organizations.

Jews had employed a variety of techniques to finance philanthropy in the United States. In the East Side ghettos, there was the schnorrer, himself soliciting for his own needs. An accepted figure, possessing status in the shtetl community as “an instrument of grace,” the schnorrer flourished in the early years of the East European immigration, and could be seen well into the 1920’s, but in the early 1900’s his days were already numbered. Formal organization of charity took away from this entrepreneur the “dignity” of his occupation. The pushke, or charity-box, remained a potent symbol for many years of the traditional patterns of giving through the synagogue. Income thus obtained was supplemented by collectors who visited homes and places of business. But before long voices were heard demanding a reckoning of the cost of collection, an accounting of the funds, some proof of good management. The pushke, separated from centralized communal control by the synagogue, could hardly lend itself to such a reckoning. Consequently, its importance waned as a source of funds, though it retained a sentimental appeal.

Endowments, particularly for the older societies, represented an increasingly important means of financing. Some endowments, such as the Baron de Hirsch Fund, were huge, but most of them were small. Many institutions received large proportions of their funds from minor endowments, in return for which names indicated by the donors would be inscribed on memorial tablets, or the Kaddish (mourner’s prayer) recited for the dead memorialized by the mourners. Endowments tended to be specific, and their terms could not change with the change of the agency’s needs.

Charity socials and fairs were favorite fund-raising methods employed by the larger and more stable agencies during this period. In 1900, for example, $250,000 was raised at a fair held to liquidate a mortgage on the Educational Alliance and the Hebrew Technical Institute. There was, however, widespread criticism of such “affairs”: the costs involved in “running” them was considered exorbitant; the income derived from them was too irregular and did not lend itself to proper budgeting for agencies; and many leaders felt that they were undignified.

Finally, there were the direct individual contributions, or “memberships,” usually published. But the same donors were asked to contribute to many charities, and the appeals were numerous and incessant. In 1905 fewer than 5,000 of New York City’s Jewish population of 750,000 contributed more than $10 each to support the most important of the city’s Jewish institutions.
All of these conditions led to the growth of a movement for the federation of local agencies. Its original purpose was more efficient financing, but gradually the federation came to acquire coordinating and planning functions. The federation idea was first applied to Jewish communities in Liverpool, England. In the United States the first Jewish community in which it was attempted was Boston in 1895; but the effort was partial and the federation short-lived. In 1896 Cincinnati established a more inclusive federation, and most authorities credit Cincinnati with having created the first bona fide Jewish federation in the United States. As Max Senior, its guiding spirit, has attested, even the Cincinnati federation was not "ideal," because the Jewish Hospital and the Jewish Home for Aged and Infirm preferred to stay out of it. It was, moreover, at first only a loose union of eight agencies. Nevertheless, the Cincinnati federation soon became solidly established, doubled the amount collected for its constituent agencies, and eliminated entertainments for charitable purposes—a particular bête noire for Senior, as it was for other Jewish leaders who considered such fund-raising expedients undignified.

The experience of Cincinnati, the mounting pressure from conservative leaders, particularly among the German element, and the historic paper on the subject delivered by Professor Morris Loeb at the 1900 National Conference of Jewish Charities, impelled several other large communities to establish federations. By 1905 Detroit, Kansas City, St. Louis, Cleveland, Chicago, Boston, and Philadelphia had federations, which were successful from the very beginning. Though its leaders had helped inspire the growth of federations in other cities, New York City, itself, was without a federation until 1917. It was not until after World War I that it became possible to gain sufficient agreement among the large agencies to establish a federation in New York. In 1905 the entire February issue of Jewish Charity was devoted to the need for a New York federation. Glowing reports of the success in other cities were recorded in this issue. Lee K. Frankel in an editorial estimated that the Jewish agencies were losing one-quarter of a million dollars annually by not federating. He answered the critics who held that individual agencies would atrophy under federation by carefully pointing to facts which did not bear out this objection. Morris Loeb documented the argument further, explaining that in communities where federation existed the expenses of collection ranged from 1 per cent to 3.25 per cent, while in New York City they ranged from 4 per cent to 10 per cent. He stressed the loss of uncollected pledges, the danger of frequent appeals, the advantages of a joint subscription list. Jewish Charity printed letters of endorsement for federation from Adolph Lewisohn and Daniel Guggenheim, among others.
Though this issue of *Jewish Charity* was widely reprinted in other communities and stimulated the establishment of federations in various parts of the country, the city with the greatest Jewish population in the United States could not organize one for itself. In 1910, a fund of one million dollars was willed by Louis A. Heinsheimer (one of the senior members of Kuhn, Loeb and Co.) for a prospective federation in New York City, on the condition that three of five named institutions agree. The United Hebrew Charities and the Educational Alliance consented. But Mt. Sinai Hospital, the Home for Aged and Infirm Hebrews of New York, and the Hebrew Orphan Asylum refused. Consequently, the legatee, Alfred Heinsheimer, used the money to establish the nucleus of a foundation which later became the New York Foundation.

As a result, however, and under the stimulation of the Kehillah movement, the opposition of the opponents of federation was weakened. They consented to the establishment of a loose alliance for central purchasing, known as the Council of Communal Institutions. The council had a study made of the fiscal experience of other federations; but the study proved inconclusive. Later, Morris D. Waldman was engaged by the New York Foundation to make a study of the effects of federation on standards of social service. The report was highly favorable, and apparently was efficacious in overcoming opposition to federation. By the time New York City had a federation in 1917, there were forty-five cities with Jewish federations.

World War I deterred the development of federations. The patriotic zeal for contributing to war chests spurred the growth of community chests. Sectarian fund-raising organizations took a decided second place, particularly where there was any suspicion that they were guilty of hyphenated Americanism. Community chests continued after the war, and became established organizations for central fund raising.

Some historians of social work, such as Watson, some authorities, such as Raymond Clapp, and many Jewish social workers trace the origin of the chests to the Jewish federations. A contrary point of view holds that the motivation for the federations was entirely different from that responsible for the community chests. The formation of federations was spurred by the presence of interlocking directorates among Jewish agencies, the same persons raising funds for many organizations. The community chests, on the other hand, had no need to solve an existing problem of interlocking directorates, and were primarily a result of World War I patriotism. There seems nevertheless to be evidence that the federation movement paved the way for community chests, at least to the extent of showing that combined fund raising was possible.
Federation among Jewish philanthropies preceded similar development in the Roman Catholic and Protestant groups. The need for unification in planning and fund raising led to the formation of the Roman Catholic Charities of the Archdiocese of New York in 1919, in which charitable and religious activities were closely integrated, and the parishes of the diocese supplied the bases of financial support. The Protestant denominations accepted the need for coordination, and were influenced by developments in the Jewish and Roman Catholic groups; however, because of the diversity of Protestant sects that sponsored them, it took longer for federations of Protestant welfare agencies to develop.

In Jewish communities the advantages of federations seemed greatly to outweigh the disadvantages. More money was collected, the costs of collections were far lower, indiscriminate and unauthorized solicitations were virtually eliminated, more dignity entered the process of collecting and distributing funds, and individual institutions were not quite so much "the special prerogatives of a small number of families."

Federations have been subject to criticism, particularly for their failure to promote new facilities, their inequitable apportioning of funds, and their domination by an oligarchy. Often those who managed federations kept Orthodox Jews out. In some cities, the East Side, or the Orthodox element, preferred to set up their own federations. This was the case in Rochester, N.Y.

In 1908 the local leaders of the immigrant community decided that they would have a unit in a single federation and incorporated as the Association of Hebrew Charities. They did not want to rely on the United Jewish Charities of the German community. The participating organizations were the Talmud Torah, the Hachnossos Orchim, and the Hebrew Ladies Relief Society. In addition to personal solicitation of the contributions, they held an annual affair as a major source of income. The Associated Hebrew Charities not only increased rapidly in budget and services, but exercised a powerful unifying appeal, bringing together all elements in the immigrant community.

It was after considerable difficulty that the United Jewish Charities and the Associated Hebrew Charities in Rochester finally merged, after a warning from the Community Chest in 1924 that it could no longer recognize and subsidize the two separate budgets. At that time the Jewish Welfare Council was organized. But the two groups, though supposedly merged, still retained their separate boards and separate activities.

In Baltimore as well, there were two federations, the earlier fed-
eration for the "uptown institutions," the later one organized by the new immigrants; but apparently they cooperated well.

The Synagogue and Organized Philanthropy

In general, the Orthodox synagogues looked askance at "scientific charity"; often the large secular charities were accused of being cold-blooded, of having lost the traditional ideals of Tsedakah. Gradually, some of the synagogues made their peace with the agencies of federation, establishing joint sisterhoods with them. But most Orthodox synagogues continued to raise funds for their own charitable activities, which were associated with traditional religious life.

The Reform synagogues and temples, however, tried as a rule to involve their parishioners in activity for the organized charities, whose leadership consisted for the most part of the same German Jewish element that was highly represented in the Reform congregations. Rabbi Stephen Wise was one of the prime movers in this direction, establishing social services within his Free Synagogue.

The attitude of Reform leaders toward changing developments in social work may be illustrated by the following quotation: 65

Unfortunately it has become a dogma of Judaism that Jews always support their own poor. In point of fact, they do not and cannot support them completely. Various community societies receive subsidies from public funds, and many Jews are inmates of municipal institutions. Above all, the extent of Jewish destitution is such, that no private societies could adequately cover the entire field. This potent fact would be more generally recognized and the cruel kindness of giving inadequate relief would be discontinued were it not for the fear of arousing anti-Jewish prejudice. We must learn to take the world into our confidence; that is the braver and wise course.

Overseas Relief

The modern equivalent of the traditional injunction to "ransom the captives" has been activities for the rescue, relief, and rehabilitation of Jews in other lands; most recently, these activities have closely resembled actual ransoming. The Shulhan Arukh states:

Ransoming captives comes before feeding or clothing the poor. There is no act of charity more meritorious than ransoming captives; therefore, money collected for any worthy purpose whatsoever may be used as ransom, even if originally collected for the erection of a synagogue. 66

... Every moment that one delays unnecessarily the ransoming of a captive, it is as if he were to shed blood. 67
Since the 1850’s, when unified efforts were made by the Board of Delegates of American Israelites to raise funds for North African Jewry, the duty of aid to brethren overseas in time of peril has indeed been given priority by American Jews.

After a number of efforts had been made to raise funds for various kinds of overseas aid, the American Jewish Relief Committee, which had been formed through the initiative of Schiff and others, the Central Relief Committee (set up by Orthodox Jews), and the People’s Relief Committee (designed to reach labor groups), formed a Joint Distribution Committee in 1914. The pressing demands of war refugees and impoverished Jewish communities in Poland and Russia had evoked strong sympathy; but it was clear that random donations could not begin to meet the enormous needs, and more planful organization was needed. The Joint Distribution Committee answered this need. The American Jewish Joint Distribution Committee, to give it its full title (commonly referred to in the United States as the JDC, and abroad as Joint), has remained the most important overseas Jewish agency in the field of relief, rehabilitation, and reconstruction.

From the first, the JDC was nonpolitical, governed entirely by humanitarian principles. This nonpartisan character enabled the JDC to receive support from all segments of Jewish life, all religious denominations, from Zionist and non-Zionist alike. During World War I, it distributed emergency relief to refugees. After World War I, the JDC engaged in the repatriation, emigration, and economic rehabilitation of East European Jews.

In 1924, a representative of ORT (the Organization for Rehabilitation Through Training) wrote: “A large proportion of this (ORT) money was contributed by the JDC. This committee, as is generally known, is now in the final stages of liquidation.” But JDC, happily for the Jews of Europe and North Africa during the 1940’s and 1950’s, continued.

ORT began to receive support from American Jewry only after it ceased to be able to sustain itself in Europe. It began in Petrograd in 1880, with a program of trade schools for Jews, and managed to raise $100,000, a remarkable feat in the light of the general poverty of Russian Jewry. Although the Czarist regime made it difficult for ORT to function, a system of mutual credit societies and artisan cooperatives was established. Despite the uprooting and stark persecution of Russian Jewry, ORT continued its activities until 1917; but the coming into power of the Communist regime made it impossible for Russian Jews to maintain ORT. After 1918, ORT was financed primarily by the JDC, with some help from the Jewish Colonization Association (ICA). ORT has since become an interna-
tional organization, establishing trade schools, developing farmers, establishing cooperatives for artisans. ORT's budget now comes largely from the JDC, but since the 1920's it has continued to maintain a substantial membership among, and to receive technical help and voluntary support from, American Jews.

Many Zionist organizations were active in sending help to Palestine. Prominent among these since 1912 has been Hadassah, the Women's Zionist Organization of America, which was founded under the inspiring leadership of Henrietta Szold. Miss Szold, and the work of Hadassah in general, have had a profound influence on the development of social work in Israel. Hadassah concentrated on medical help for Palestine, the training of doctors and nurses, maternity, and child-care services. Hadassah's volunteer groups throughout the United States have raised funds for supplies, technical services, and institutions in its field of interest, to the present day. We cannot attempt in the context of this article even to summarize the manifold activities of American Jewish organizations in overseas relief, with all their political as well as economic ramifications.

THE GROWTH OF PROFESSIONALISM

"Scientific Charity"

The leadership of men like Lee K. Frankel gave steady impetus to the promotion of social work as a respected occupation marked by disciplined training. Frankel, himself originally a chemistry instructor and in later years a life insurance company executive (responsible for the outstanding public health program of the Metropolitan Life Insurance Company), was a man of creative gifts, with a persistent scientific interest in determining the causes of human distress. As director of the United Hebrew Charities, Frankel was steadfast in his promotion of both objective and humanitarian criteria in the giving of help; he eloquently pioneered the recognition that being truly helpful involved employing subtle human insights, not simply handing out money or food. In his pioneer role, Frankel withstood attacks from some religious quarters against organized charities; he was not popular with many Jews on New York's lower East Side who were critical of Scientific Charity—so bloodless in comparison with the easy warmth and informality of help in the shtetl. Nor was Frankel popular with many "uptown Jews," since he made demands and set standards for help which meant larger expenditures.

It should be noted that Frankel, and other similar high-minded executives, often found themselves in the position of speaking only
for themselves, and not necessarily for the organizations they headed. In Frankel's own case, the actual methods of relief-giving by volunteers and a paid staff that was largely untrained and ill-equipped were in marked contrast to his repeatedly stated positions. A professional point of view and professional discipline did not really permeate the organizations until after World War I. Nevertheless, Frankel represented the direction in which the profession of social work was to go. He stood for systematic inquiry into elimination of causes of dependency, for a sympathetic but objective use of the social work function (much in common with the later concept of "the professional use of self"), for orderly procedures within the social service organization, and for a sensitive respect for the client's individual rights. As Waldman put it, "The advent of Frankel marked the beginning of a new era in social service. It was the beginning of a scientific approach."  

Training

By the turn of the century, voices were beginning to be heard urging special training for social work. In 1897, at a conference on education for social work, Mary Richmond—the guiding spirit in the development of social casework—urged that such preparation become an educational function, and proposed a training school of applied philanthropy. During the 1890's and early 1900's, the nearest thing to formal training came from individual instructors of sociology at such universities as Columbia, Yale, Michigan, and Smith College.

Following Mary Richmond's paper, the New York Charity Organization Society opened first a summer session and then a winter session to invited practitioners. By the fall of 1903 the sessions had merged to form an academic year, and by the fall of 1910 there was a two-year curriculum, as there is now, for accredited graduate schools of social work. The school, first known as the New York School of Philanthropy, later became the New York School of Social Work of Columbia University.

Jewish leaders in social work were deeply involved in establishing such training. *Jewish Charity*, the journal of United Hebrew Charities in New York City, urged its readers, paid and voluntary workers, to take training in the Charity Organization Society's Winter School of Philanthropy.

As early as 1890, scholarships were offered to college graduates who wished to receive training in Jewish social service. There were attempts to organize courses in Baltimore and Chicago. In New York City the Jewish Chautauqua Society, organized for general educational purposes, devoted many sessions to discussions of philanthropy.
In 1903, papers were presented at these sessions by such social welfare authorities as Frederick Wines, Robert W. DeForest, and Edward T. Devine.

There were recurring attempts at special schooling for Jewish social workers, but they were short-lived. In 1913 Cincinnati established a school of social service under the auspices of a Jewish settlement house. In 1915 the Jewish Chautauqua Society, in cooperation with the National Association of Jewish Social Workers, opened a summer school in New York City. In 1916, a Jewish School for Communal Work was organized as an outgrowth of the Kehilla of New York, under the direction of Samson Benderly and Julius Drachsler. The increasing availability of social work training under nonsectarian auspices, "the lack of a compelling social philosophy in Jewish communal work," and most important, the lack of sustained interest in training because of the low status of paid social workers until the mid-1920's, conspired to curb the effectiveness of these early efforts. But the demand for specific training for Jewish social work continued, attempts in this direction continuing up to the present.

Social Case Work

The growth of professionalism in social work was greatly stimulated by the development of social case work as a recognized process in rendering aid to individuals. Defined by Karl de Schweinitz as "the art of helping," social case work came to be recognized as the core of professional social work with the publication in 1917 of Mary Richmond's Social Diagnosis. The book had a profound effect, so pervasive that Mary Richmond herself felt it was being overemphasized.

The contribution of caseworkers to the work of psychiatrists treating the emotional disabilities of World War I veterans stimulates the development of social case work. Case records came into teaching along with the promotion of systematic supervision of caseworkers. Familiarity with the application of "dynamic psychology" became essential for anyone going into professional social work after World War I. Case conferences at which laymen were present in the reviewing of individual family situations were rapidly dropped as a social work method. Theoretical conceptions, basic information, systematic training—the distinguishing marks of a profession—were coming into prominence, along with a primary concentration on the process of social case work. Casework as the pivot around which professional social work training revolved retained its early advantage for another generation. Its development contributed to the removal of the word "charity" or "philanthropy" from the names of Jewish
family agencies early in the 1920's, and the substitution of "social service."

**Paid Social Workers**

The development of formal training for social workers was an early recognition that a distinct profession was in the making. The training was accompanied by an increase in paid social workers, who were beginning to find a common base in knowledge, practice, and problems. At the turn of the century, however, both training and payment were minutely spread among those engaged in private philanthropy.

Paid social workers were not wanted at first. They represented an uncomfortable necessity, when there were not enough volunteers to do the job. "Even as late as 1909, the president of the Jewish Welfare Society of Philadelphia . . . had publicly to defend his revolutionary act of engaging for the first time a full-time paid worker." 74 Needy persons would sometimes be hired as social workers, as a way of helping them out during the early 1900's. Penurious relatives could be taken care of in this way. The applications of those who could not succeed in any other work were seriously considered. It was no wonder that the actual ministration of assistance was often slipshod, sometimes punitive.

It was only when the number of the poor reached such proportions that volunteers could not have the time to serve them that paid workers were engaged to make home visits. Still, sisterhoods attached to congregations did as much of the work as possible, when the trustees themselves could no longer visit poor families. 75

In settlement houses, the "superintendent" was hired not as a leader, but as a servant. The social worker was in constant fear of losing his position, and was subject to pressure and intimidation from board members, who tended to demand "business-like" results in terms of economy. 76

Most family relief, in Jewish and general social work, was, before World War I, largely in the hands of "Lady Visitors" or "Friendly Visitors." 77 The former were volunteers who gradually incurred the profound distrust of the poor whom they were presumably helping, despite the undoubted sincerity of many. Neglect of some families, undue consideration to others, indiscriminate relief giving, an attitude of condescension, often wreaked havoc with families. In 1900 Minnie Low of Chicago tried to give these volunteers a new function, and called them "Friendly Visitors." They were now to be concerned with the welfare of particular families, primarily with health and infant care, and to serve as friends. In Chicago this effort resulted in
the establishment of a Personal Service Bureau; but the effort to
clarify the function and discipline the activities of these volunteers
was generally neither widespread nor successful. Many social workers
today feel that the well-intentioned ministrations of these volunteer
Ladies Bountiful is responsible for part of the distrust of social work-
ers that still persists in many segments of the general public.

An editorial in the *Jewish Charity* of December 1904, in the light
of this general situation, reads like a hopeful, wistful whistle in the
dark:

Philanthropy has reached that stage today where it may be classed
as one of the professions, and we must view the paid worker in this
field in precisely the same fashion as we regard those in other pro-
fessional walks of life.

**Professional Associations**

Professionalism was also reflected in the gradual emergence of pro-
fessional associations. In 1879 (after earlier and preliminary forms of
organization that began in 1874) the National Conference of Chari-
ties and Corrections (NCCC) was established. Jewish social work
leaders participated in this national organization fully; but they felt
their peculiar and common needs sufficiently to form the National
Conference of Jewish Charities in 1900, followed by a large variety
of more specialized national associations. The NCJC, today the Na-
tional Conference of Jewish Communal Service, has remained a vital
medium through which the trends and issues, as well as technical
advances in Jewish social work, can be discussed and clarified, and
can influence the professional field.78

The first president of the NCJC, Max Senior of Cincinnati, gave
recognition both to the National Conference of Charities and to the
New York Charity Organization Society:

Through the length and breadth of the land the conviction has
spread that better methods of administering charity must prevail;
that above all else the manhood of the poor must be recognized,
and every effort made not to break down character.79

Minnie Low stressed that “Friendly Visitors” had to be trained and
supervised if they were not to do harm, and three other papers
warned against the censuring, condescending attitudes of the “Friendly
Visitors.”

Dr. E. G. Hirsch declared that the day of the “amateur” in social
work had passed. There were admittedly evils in specialization, but
they were necessary evils, far better than
The well known charity fiend, a very pest and plague always, is of this order, the most striking specimen. Her busy determination to help the poor is to her a source almost of carnal pleasure. She must have her poor to satisfy her own appetite for self-adulation.

The death knell was being tolled for the old ways. New voices were being heard heralding professionalization and bureaucratization, the gradual disappearance of the untrained and unsupervised volunteer. The advocates of specialization refused to accept the premise that the professionalization of social workers would mean less sincere and effective help. Disdained by many at the time as cold, lacking in "spirit and emotion," the point of view so cogently expressed at this first National Conference of Jewish Charities adumbrated the direction which American social work was eventually to take.

1920–1955

**General Trends**

The years between 1920 and 1955 saw epic changes in American and Jewish life. The prosperity of the "roaring twenties" gave way after the stock market crash of 1929 to depression; social legislation for the first time dealt with mass social and economic needs as a governmental responsibility. The rise of Nazism in Germany gave a glimpse to the world of the terror to come. United States involvement in World War II brought total commitment on the part of the American people, and a prodigious growth in United States technology and productive potential. After World War II, the rise of the Soviet threat, the Korean War, and the "cold war" between Communist and free nations kept America in a state of tension. Meanwhile, economic growth continued, no postwar depression appeared imminent, and full employment was nearer fulfillment than ever before.

American Jews participated in, and were influenced by, these events like all other Americans. The destruction of 6,000,000 Jews by the Nazis produced a powerful effect on American Jews, pervading all of their thinking and actions as a group. The memory of the recent European Jewish catastrophe impelled domestic Jewish agencies to work for objectives of Jewish group survival at home; it also evoked the widespread support of American Jews for the new State of Israel, which arose out of the ashes of World War II. The needs of refugees from Europe led to an expansion of overseas effort, and to the creation of special services for those refugees who entered the United States.
By mid-twentieth century, two-thirds of the five million Jews of the United States, constituting 3 per cent of the general population, were native-born. The need for special "Americanization" programs has greatly lessened; recent arrivals are being aided to adjust to American life by a whole complex of agencies serving the entire community—family counselling, vocational service, and medical service organizations, and community centers, as well as synagogues and temples and mutual benefit societies.

American Jews have moved up the economic ladder, along with most Americans, and as a group have achieved a middle-income position. This has made it possible for American Jewry to support a variety of social services designed to serve Jewish communities, as well as to support non-Jewish health and welfare activities. Since World War II, as in many of the groups whose income position has changed, there has been a steady trend among Jews to move to the suburbs, although 75 per cent of America's Jews still live in the ten largest American cities. This movement necessitates an examination of changing needs for service in new suburban areas, the relocation of existing resources, and study of changing patterns of family living.

Another postwar phenomenon noted by sociologists has been a "return of the third generation" to its traditional cultural roots. This has been particularly true of the younger members of the Italian and Jewish groups in the United States. In the Jewish community, this was reflected in the rising interest among American youth in Jewish education, in Israel, in Jewish cultural values, in books related to Jewish life. Whether or not we are now witnessing a true religious revival is open to question; but membership in religious institutions has increased among American Jews, as it has among other religious groups in the United States. The trend toward the introduction of more vital Jewish content in Jewish institutions, particularly community centers, is in line with this new preoccupation with traditional values.

Conflicts and social distance among Sephardic, German, and East European Jews have become for the most part a thing of the past. Social services, in composition of their administration and clientele, reflect the disappearance of this source of divisiveness in Jewish life. Differences in ideologies and in commitments to religious observance remain; but support of the social services cuts across ideologies and religious identification. Jewish social work has become a centripetal, cohesive force in Jewish life.

**Social Work Trends**

The 1920's found Jewish social work in the United States basking in the glow of a decade of unparalleled growth and optimism. New
federations in Jewish communities were emerging and existing ones being strengthened. The community center movement was expanding and striking firm roots, making large capital outlays for building and equipment. Family welfare agencies, child care agencies, hospitals, all consolidated their financial position and invested in a greater refinement of services.

Professionalism had come to stay. In increasing numbers, social workers were entering the salaried class, many after having received a full two years of graduate training in one of the many graduate schools of social work throughout the country. In 1919 there were fifteen such graduate schools, most of them attached to universities; by 1925 a full-fledged graduate school of Jewish social work was established in New York City. Trained social workers were given ever greater responsibility in administering and carrying out agency services. The prestige and authority of professional executives grew, the province of the lay administration shrinking commensurately.

The larger Jewish, as well as the nonsectarian, benevolent societies no longer regarded themselves as, or called themselves, "charities." They became "family welfare societies," "social service associations," and "social service bureaus." The post-World War I development of psychiatry in social work, and the vision of social case work as a helping process, opened up new horizons for service. Family agencies, as they came to be known (nationally organized at first as the Family Welfare Association of America, later the Family Service Association of America), still served the poorer elements in the community; but the way of helping was changing. More attention was paid to psychological and emotional problems "troubling" the "client", and to seeing how the family as a whole could be strengthened through help. Relief remained a major function, but administered more sensitively than before. Family agencies cooperated with employment and medical services, and tried to develop in the assisted individual greater self-awareness and capacity to handle his own problems.

The changing character of social need among Jews furthered this consolidation of services and gradual shift of function. In the garment industry, for example, where Jewish workers were concentrated, the growth of labor unions helped stabilize the industry. Garment workers, no longer penniless between seasons, did not have to apply to philanthropic agencies for relief in large numbers (unemployment insurance laws were not enacted in the United States until 1932).

Relief needs of new immigrants no longer were pressing, due to restrictive immigration legislation. Immigration from Eastern Europe, which had been dwindling since the beginning of World War I, became a mere trickle after the restrictive National Origins Quota Act of 1924, which severely curtailed immigration from Southern and
Eastern Europe, bringing Italian and East European Jewish immigration virtually to a halt.

The high-principled objectives of individuals who had headed social agencies during the previous period were incorporated more and more into the ongoing staff work of the agencies, giving these agencies new status. Executives such as Frances Taussig in New York City, Jacob Kepecs, Maurice J. Karpf and Harry Lurie in Chicago, Dorothy Kahn in Baltimore, John Slawson in Detroit and New York City, were able to infuse their organizations with professional methods and objectives. They worked with board members in developing policies which could take account of the fresh viewpoints and the newer knowledge and skills which social workers were bringing to their work.

In the decade between 1920 and 1930 social case work specialties proliferated from the new profession of social work, each specialty forming a national association. Psychiatric social work—in child guidance clinics, in school systems, in hospitals and clinics for the mentally ill—flourished, aided by foundations. Medical social work in hospitals, clinics, and work with the handicapped, spurted forward. Social group work began to emerge, along with community organization, as a basic process in social work. Jewish recreational workers formed their own national professional association; they were also active in general group work organizations. Jewish community organization was largely restricted to federation activity; but here, too, professionally trained social workers were increasingly in evidence.

With the new tools of psychological testing and interviewing, vocational guidance was rapidly becoming professionalized. Social workers who specialized in providing Jewish youth with individual educational and vocational guidance and job placement services established their own professional associations; communities organized new services to concentrate on this important work.

Effects of the Depression

The stock market crash of 1929 and the ensuing great depression rocked the United States on its heels. The bank failures, millions of unemployed, breadlines, shanty towns, that profoundly affected American life also revolutionized the character of social work in the United States.

Until the depression of the 1930's social work had given little attention to unemployment as such. Its leading agencies and spokesmen, however, were quick to realize the social implications of unemployment as the depression deepened and the number of the unemployed began to mount. Social workers encouraged the rapid development of public services, many of them helping to develop policy and admin-
istrative procedures in local, state, and Federal programs. At the 1931 meeting of the National Conference of Social Work Linton B. Swift took issue with President Herbert Hoover's statement that "the American method of assisting the unemployed is through private charity." It was clear to social workers who saw the faces and the numbers of relief applicants that the private agencies could not begin to cope with the vast needs of the unemployed.

Many prominent Jewish social workers forcefully spoke up to urge the Federal government to get into the "business of relief" and to develop a national social security program and public assistance measures (finally enacted in 1935). These included Solomon Lowenstein, director of the Federation of Jewish Philanthropies of New York City, Harry Greenstein, of the Associated Jewish Charities of Baltimore, Dorothy Kahn of New York City, Harry Lurie, then of the Bureau of Jewish Social Research in New York City, Frances Taussig, head of the Jewish Social Service Association of New York and president of the American Association of Social Workers, and Jacob Billikopf, of the Philadelphia Federation of Jewish Charities. Enlisting the participation of their boards and staffs, these dedicated men and women tirelessly sparked the development of public responsibility on state and local, as well as on national levels. It was Billikopf who was credited by Frank J. Bruno with having made, in 1931, "the first realistic statement of what the lack of work was doing to the country," and with having underlined the pitiful inadequacy of the provisions for the unemployed at that time. Before long public welfare departments in many states and local communities took over distribution of public assistance to the unemployed. In many cities where there were no public welfare departments, public funds were provided to the voluntary social agencies in order to assist relief applicants. Without the assistance of the public agencies, Jewish organizations could have barely succeeded in meeting the minimal needs for material relief.

Even with such assistance from public funds, the private family welfare agencies suffered severely from the depression. Standards of practice, developed in an atmosphere of "unprecedented freedom," had been sharply lowered by the fall of 1929. It was not easy to practice intensive and painstaking social case work when people were pounding at the door with stark emergency needs. Family agencies were hard put to cope with the problem of how far to individualize and how deeply to explore psychological problems at a time when case loads for social workers were rapidly growing. In addition, the demands for immediate relief were such that many untrained persons had to be engaged to act as social workers; as a consequence in many agencies staff morale was depressed.

Child care agencies had to suspend new projects. Their income re-
duced, they were unable to raise salaries, and in some cases had even to cut salaries. But they still tried not to lower their standards of child care substantially. Community centers lost members by the hundreds, particularly among the unemployed, though most of the centers permitted the unemployed to register with no or a mere token payment. Community support declined severely, while pressure for service continued high. Louis Kraft reminisces:

Memories are short and the nightmare years of the prolonged economic depression in the 1930's have been largely forgotten. Who recalls that in 1936 there were 4,700,000 unemployed youth between the ages of 16 and 24 with nothing to do during their enforced leisure and but dim prospects for a useful future; that 470,000 others worked only part time under the National Youth Administration; that 315,000 college and high school students who worked part time to earn some money and the 150,000 who left school, were employed on public works projects? The problem was overwhelming, especially in its impact on the youth-serving agencies.85

The centers tried to provide whatever services they could day and evening, concentrating on less formal activities. Despite their lack of reserves and the burden of heavy mortgages, the community centers survived, having established themselves with sufficient roots and vitality in the communal structure. The National Jewish Welfare Board took leadership both in raising funds to meet the budgetary needs of local centers and in working out budgetary policies to allow for economies without sacrificing basic services.

One of the consequences of the depression was the loss of prestige suffered by the philanthropists who were leaders in Jewish welfare work. They had previously been respected, even by their critics, as motivated solely by humanitarian impulses; now they were attacked by some as autocratic "plutocrats" standing in the way of social work progress. A side effect of this depreciation of veteran leadership was the broadening of the base of philanthropic lay boards, through the inclusion of more representatives from the East European immigrant group.

The depression led social workers to take a greater interest in, and to identify themselves with, the trade union movement, and with New Deal aspirations in general. In the larger cities, many social workers joined unions, and Jewish agencies were among the first social work agencies to be unionized. Better salaries, job security, and improved working conditions were motivating forces in unionization; another factor was undoubtedly sympathy among social workers for the nascent trade union movement in the United States as a whole.
To some Jewish social work executives one of the constructive developments arising from the depression experience was the necessity for close cooperation with nonsectarian as well as with public agencies. There was a generally heightened sense of the interdependence of social agencies, particularly in planning through such coordinating groups as community chests and community councils, and through major professional associations. Others viewed this trend with alarm, regarding it as decreasing the sense of Jewish identity among the case work agencies. Critics also felt that increased participation in community chests might lower the standards of Jewish agencies, because of the presumed need to strike a least common denominator with non-Jewish agencies. This fear has waned over the years.

One far-reaching change was undeniable. There was a traditional antipathy among Jews to accepting assistance from non-Jewish sources; the depression forced a change, if not in the attitude toward such assistance, certainly in the practice of acceptance. Early in the depression one Jewish social worker reported “perhaps the most important lesson coming out of this emergency is the fact that an unwilling Jewish community has come to realize that relief work can, under proper safeguards, be financed by public funds without detriment to the Jewish families thus served.” Furthermore, Jewish leaders in social work, both lay and professional, worked diligently with their colleagues in the non-Jewish fields to lead the government to assume responsibility for basic economic assistance.

**The Family Agency**

The family agency emerged from the depression with the awareness that relief was a public function. Except in very special cases, families or individuals requiring long-term financial assistance were now referred to public agencies. The emphasis was now increasingly preventive; in order to forestall individual and family breakdown, case work or counselling service was provided in such problem areas as parent-child relations, marital difficulty, and nonpathological emotional distress. The family agencies gained confidence during the depression in their basic ability to be helpful to people other than the poor. Their World War II experience with families having war-related problems heightened this confidence, leading family agencies to widen their area of service to take in the whole community, including counselling for the “middle income family” that might not normally apply to a social agency for help. This expansion led, in turn, to the decision to set fees for case work or counselling service, so that middle-income groups need not feel that they were applying to a “charitable agency.” Family agencies hoped to persuade these groups
to look upon such service as professional help similar to that received from doctors and lawyers. The first experiment by a family agency in the systematic use of fees was made by the Jewish Family Service in New York (then the Jewish Social Service Association) in 1943, when it established its Consultation Center exclusively for paying clients. The success of this venture led to the gradual incorporation of fee scales into the family service field over the United States, particularly in the larger urban centers. Although the budgetary contribution of fees have occasionally been cited as a reason for their use by family agencies, at no point have fees even approximated the cost of service. The basic rationale for the use of fees has been its value as a way of introducing middle- and higher-income groups to case work service. By 1953 it was the policy of seventeen of sixty-three Jewish family agencies in the United States and Canada (reporting to the Council of Jewish Federations and Welfare Funds) to charge fees. The practice prevails mainly in family agencies in cities with Jewish populations of 40,000 and over.

There has been no significant community reaction against the introduction of fees in family agencies; all the available evidence indicates that this policy has succeeded in attracting as agency clientele individuals and families of middle- and upper-income brackets. Like the Jewish community center, which has become more and more available to all segments of the Jewish community, rather than restricted to the underprivileged, the family agency has tended to reach out to all segments of the community.

The most important long-range question which fee-charging has raised, to which no definitive and universally acceptable answer has yet been found, has been the justification for philanthropic spending to aid middle- and upper-income families. The operating premise is that philanthropic giving by the Jewish community is still warranted because the service that is set up is available to all; that in this respect fee-charging resembles the contribution by a donor to a hospital fund, where the donor himself may be the recipient of the services the hospital affords. Nevertheless, case work for those who are economically self-sufficient, if not well-to-do, is a far cry from the traditional injunction to help the poor, and it has given pause to many lay and professional social work leaders. In effect, a changing concept of need is involved. The question of whether poor families or individuals may have to wait for service, because of pressure to serve middle-income families coming for help, has also been raised; but thus far there seems to be no clear-cut evidence that middle-class clients have been receiving preferential service. Jewish family agencies have been increasingly pressed for service by people from all walks of life, and waiting lists
are common. There has been a recent development of group counseling, partly in response to this pressure.

Since World War II a number of the larger family agencies have become more and more active in programs of "family life education." Jewish agencies in Cleveland and New York have taken the lead. While in their early stages family life education programs took the form of lectures and parent education meetings, they have become more refined and evolved into continuous discussion groups under the leadership of specially trained personnel. Such groups are designed to permit people to consider their current everyday problems cooperatively in order to prevent family breakdown and to minimize unrealistic anxieties through group reassurance. Subjects frequently discussed are marriage, in-laws, husband-wife relationship, and child behavior problems.

The basic purpose of the Jewish family agency has continued to be, on the one hand, to maintain the well-being and strength of the family, and, on the other hand, to prevent individual and family breakdown. Tensions arising out of marital conflict, or difficulties in parent-child relationships, or other aspects of individual adjustment, are among the problems with which the family agency can help. Jewish agencies have been in the forefront in developing case work and counselling techniques in this area. In addition, many family agencies provide a variety of more concrete services to the family: these include homemaker service, relief in certain cases, boarding care for the aged, psychological testing, and services to prisoners and parolees.

Nevertheless, since the 1930's, the place of the Jewish family agency in "Jewish" social work has been sharply questioned. First of the agencies to professionalize by adopting the social case work process, the family agency has also been the first to become secularized. Hence, it has been subject to recurrent criticism as not being sufficiently Jewish to warrant a prominent place in Jewish social work; it has been maintained that support from Jewish funds could be justified only if the Jewish family agency concentrated on Jewish aspects of family life, and was related to Jewish religious and secular organizations.87

A less aggressive critical approach was taken by Maurice J. Karpf, who directed his criticism not only at Jewish agencies, but at case work in general. Karpf88 stressed the importance of recognizing cultural values in case work, and the necessity for incorporating insights from sociology and social psychology. During the 1940's and 1950's the cultural elements in social work practice have been reemphasized.89 Professional conferences, journals, schools of social work have, during the past decade, stressed the need to be aware of the cultural dimension in practice with individuals and groups.

However, exploratory efforts to make the family agencies more "Jew-
ish” have been relatively ineffective. Exactly what the case work agencies should do other than what they have been doing has never been clarified to the agencies’ satisfaction. To some extent, the attacks on the family agency’s “non-Jewishness” represent an effort to engage all social services under Jewish auspices in furthering the aim of Jewish survival. However, it would be contrary to the major premises of professional practice for an agency to introduce any ideology into its actual rendering of service; critics have generally not gone so far as directly to propose it. The method of social case work, as distinct from its auspices or clientele, can no more be Jewish than the practice of medicine can. Besides, the very existence of the Jewish agency itself may be more relevant to Jewish group survival and group identity than “Jewishness” in the practice of social case work.90

The experience of the Jewish family agency in Springfield, Mass., is illuminating. In 1952 concern about “the place” of this agency in the Jewish community led to a study on attitudes towards it. As many Jews were applying to the nonsectarian family agency as to the Jewish family agency, and both agencies had high standards. The survey revealed no objective need for a family agency that could not be met by the nonsectarian agency; yet representative individuals in the Jewish community were reluctant to give up the Jewish agency. “In effect, the Survey Committee concluded that the intangible considerations of feeling and attitude which surround the existence of a Jewish social agency are still the decisive ones.” 91

It would appear that the Jewish social agency, however secular, remains a potent symbol of Jewish communal identity. The Jewish social agency’s contributors, board members, social workers, and volunteers—whatever their own personal ideological leanings—are, by virtue of their activity, all engaged in furthering Jewish group identity and survival.

The Aged

In the United States, as in most Western countries, there has been a steady increase in the proportion of persons in the older age groups of the population. This development has been due to the advances since 1850 in medicine and public health which have decreased mortality, the marked decline in the birth rate, and the drastic reduction in immigration since the Quota Act of 1924, which eliminated a major source of younger age groups and contributed to the drop in the birth rate. The trend may be gauged by the fact that in 1850, 4.1 per cent of the population was sixty years of age and over, and in 1950 it was 12.1 per cent.

Early attempts to deal with dependency in old age consisted of
placing the aged poor in poor houses. These were barren institutions, generally pitifully inadequate in providing even the simple necessities. Religious, fraternal, and other organizations gradually provided more decent homes for the aged, but these could hardly meet the demand.

Industrialization during the nineteenth century was accompanied by a radical shift of population from farm areas to cities, contributing to a rapid increase in old age dependency. Older persons had fewer opportunities for work. In addition, a combination of factors encouraged married children to live apart from their parents, particularly among the urban middle classes. Families were less able to care for the major needs of their members—in education, health, physical protection, recreation; parental control over choice of their children's spouses was weakened. Americans left their old homesteads in response to new economic opportunities; status was determined by economic and occupational position acquired through the individual's own efforts, rather than traditional family reputation. Concomitantly, the capacity to produce and social mobility became symbols of worth. As a consequence, the position of the urban aged became precarious, psychologically and emotionally as well as economically, with the withering of the prestige of old age.

A series of surveys, made in the wake of the depression of 1920–21, called public attention in the United States to the shocking conditions in the almshouses and "poor farms." Progress was made in providing noninstitutional aid for needy old people. State after state passed "old age pension" measures; but standards were low, and the situation remained acute. In January 1935 the report of the Committee on Economic Security stated that "at least one-third of all of our people, upon reaching old age, are dependent on others for support." Both old age insurance plans and more ample provisions for Old Age Assistance were subsequently developed.

As government assumed responsibility for meeting the basic economic needs of the aged, more attention was directed to their psychological, medical, and housing needs. Most measures to help the aged had previously assumed that older people were no longer "useful," and were simply to be maintained during their declining years. World War II spurred a new interest in the aged as a source of potential manpower. Employers were urged to hire aged workers, studies were undertaken to examine their skills and potentialities. The results proved encouraging;92 with the new insights gained into the ramifications of the "old age problem" have come better forms of residential care, recreation, and psychological help, and a new branch of medicine specializing in the aged—geriatrics.

From the first, Jewish communities had no difficulty in accepting care for the aged as a traditional communal responsibility. Along with
other sectarian groups, they established old age homes, maintained for
the most part in a religious atmosphere. Like other groups, too, they
found that the demand for such resources far exceeded available facili-
ties. As an urban group Jews were particularly confronted with old
age problems. While there was a strong tradition of family solidarity,
and children felt a sense of obligation for the care of their parents,
elderly Jews of East European background were culturally unprepared
to be supported by their children. In addition, conflicts in values be-
tween first-generation parents and second-generation children created
tensions which often led the aged to enter old age institutions as a
place of last resort.

On the whole there were few social workers in these institutions
until the 1940s. Partly this was due to the fact that old age homes did
not tend to employ social workers, and, when they did, paid low sala-
ries. It was also probably due to the feeling among social workers that
they could make their best professional contribution (learn more, and
advance farther) through working with youth and families; working
with the aged seemed to offer no such prospects.

These conditions have sharply altered. Increasingly homes for the
aged have sought the help of professional social workers. And, as social
workers learned more about the opportunities for helping in working
with the aged, they sought employment in such programs.

Family agencies were reluctant to work with the aged until the
1940's, thinking primarily in terms of institutional placement, and
tacitly assuming that "growth" ceases in the later years. During the
last decade, however, Jewish agencies have helped lead the way to more
creative and purposive interest in the aged.93 Family agencies have
begun to concentrate on providing special services for the aged, some
services directly, others in cooperation with other agencies and institu-
tions. By 1954, one client in every four in the Jewish family agencies
was an aged person. Many agencies are offering direct counselling
service by specially assigned experienced workers. The larger family
agencies have also been concerned with living arrangements, and have
assisted in the provision of boarding and nursing-home care and
homemaker service, usually in conjunction with homes for the aged.

Jewish community centers have participated in many of these devel-
opments, establishing "Golden Age" clubs and community day care
centers. Jewish homes for the aged have expanded physically; they
have also extended their services to aged people residing in their own
homes. The emphasis has been on providing a variety of services to
enable the aged to remain in their communities, where they can
retain the satisfactions of normal home and community life.94 The
concept of the old age home has changed from that of a permanent
retreat to that of a resource to be used as needed, in time of incapac-
ity, for longer or shorter periods. "The institution for the aged is now viewed as a semi-hospital for the chronically ill and as a rehabilitation center, closely correlating case work, group work, psychiatric and other services." The average age of persons admitted to facilities for the aged is therefore rising, although many homes accept persons under age sixty-five if they are chronically sick and in need of custodial care. By 1954, the number of residents under care in seventy-one Jewish homes was over 9,000.

Jewish communities have, in effect, been moving towards coordinated planning services for the Jewish aged by many agencies. Outstanding examples have been the organization of a central commission on the aged in Cleveland, under federation auspices, as a result of an intensive study in 1954, and the work of the Central Bureau for the Jewish Aged, in New York City.

Payments for service have more and more derived from public funds, current estimates being that 40 to 50 per cent of payments for services are derived from funds paid to residents of the homes. Payments for service on the average account for 65 per cent of the operating receipts of homes for the aged. In addition, in some instances public funds are paid directly to institutions for special kinds of care. This situation has raised the question of how the voluntary, sectarian home for the aged is affected by such relationships to public sources of funds.

Another question is the effect of high-standard homes for the aged under philanthropic auspices on private nursing home facilities run for profit. This has not yet become a burning issue. But as both kinds of facilities grow, demand for old age resident care may lessen, and the question of competition between private and public Jewish facilities may become more acute.

Child Care

Since the late 1930's there has been a trend for the populations of Jewish orphanages and other institutions for neglected children to decline, and for a diminution in foster home care. This has been due primarily to public assistance programs which permit widowed mothers to keep their children at home, and to the improvement in economic conditions. The emphasis throughout the child care field has been on maintaining children in their own homes as long as possible. At the same time, there has been a tendency for child-care and family agency services to merge. In 1955, of fifty-seven resources under Jewish auspices offering protective and foster care for children reporting to the Council of Jewish Federations and Welfare Funds, thirty-four were
child-care departments within multiple-function family agencies and twenty-three were specialized child-care agencies.

There has also been a gradual decline in the average length of time during which children remain under agency care, attributable to greater recognition of individual needs of children, the development of specialized treatment programs, and the increased knowledge and skill of social workers. The result has been more effective service to children and their families and the placement of children in institutions or in foster homes only where such placement was needed.

At the same time Jewish agencies have been in the forefront of experimental programs for the treatment of children with special needs, particularly those emotionally disturbed. Residential treatment centers, specialized foster homes and group homes have all been established.

One of the oldest of such specialized centers for emotionally disturbed children is the Hawthorne-Cedar Knoll School of the Jewish Board of Guardians. Combining the resources of psychiatry, psychology, social work, and education, the school has over the years become a specialized treatment center, without being confined to the treatment of delinquents. The Jewish Board of Guardians was also a partner with the New York section of the National Council of Jewish Women in establishing the Council Child Development Center to provide psychiatric treatment for pre-school children. Since 1926 the child guidance department of the Jewish Board of Guardians has been outstanding in applying a psychiatric and preventive approach to the treatment of children.

A considerable proportion of the funds of child care agencies specializing in institutional and foster-home care come from public sources. Thus in 1954 an average of 25 per cent of the operating income of sixteen child-care agencies reporting to the Council of Jewish Federations and Welfare Funds came from public funds, with some agencies receiving over 50 per cent of their income from such sources. This was due essentially to the fact that municipalities were turning over to voluntary agencies certain types of care for children who normally would be eligible for public support. The government has been contributing an even higher proportion of the budgets of child care agencies of non-Jewish sectarian groups. The effects of this collaboration on the voluntary agencies, whether this might not constitute a problem in church-state relations, whether public auspices ought not directly to administer certain of these services, are becoming more and more important questions.

In 1930 the Jewish community of Cleveland transferred the responsibility of serving Jewish children eligible for foster home care to the newly formed public foster home agency. "The Cleveland Jewish com-
munity apparently accepted without question public services for Jewish children in foster home placements." Few other communities have gone this far, and there is little doubt that none would be prepared to turn over institutional care to public agencies.

Jewish adoption agencies have been abreast, and sometimes in the forefront of, developments in the adoption field tending to improve practice and standards, particularly in making hitherto "unadoptable" children available for adoption. Even more than non-Jewish adoption agencies, Jewish agencies have had to meet a demand for adoptive children that far exceeds the supply. The result of this situation has been a "black market" in adoption that circumvents legal and social agency safeguards. In recent years, there has been both an increased public understanding of adoption service and more flexibility and self-study on the part of the agencies themselves.

**Vocational Services**

During the years of mass immigration, employment service became one of the functions of the large charities. Helping people find employment reduced the load of "charity," since each individual successfully placed in employment meant one fewer person, or family, who required help from relief funds. Placement service was coupled with loans, and help in establishing small businesses, thus often assuming the special vocational services which had been departments of the family agencies.

The 1920's brought specialization to this field, with psychological testing, vocational counselling, guidance for youth in the school systems, and professional training of workers. While Jewish family agencies continued to maintain vocational services for their clients, some as late as the 1930's and 1940's, distinct agencies in Jewish communities throughout the United States that were under federation auspices, offered guidance, counselling, and placement.

Jewish vocational services were active in the 1920's and 1930's in guiding Jewish youth to those occupations where vocational opportunities existed for Jews, as well as those where the client's own aptitudes and interests could be employed. The services labored to break down barriers where discrimination existed. During the depression, they attempted to find jobs, worked closely with case work and group work agencies to meet the individual needs of persons referred for special psychological or medical reasons, and cooperated with public employment agencies. The agencies aided many thousands of refugees by finding jobs for them, or helping them support themselves through loans and business advice. To the immigrants arriving after World War II, the agencies have given intensive counselling.
When jobs became more plentiful, during and after World War II, the Jewish vocational services were able to try to meet the needs of men and women whose occupational opportunities were limited by medical or other problems. The vocational agencies entered the area of rehabilitation, where many have pioneered for years.

Workers in need of economic rehabilitation have been helped through sheltered workshops, protected work trials with sympathetic employers, and special services to individuals suffering from cardiac disorders, blindness, tuberculosis, or mental retardation. For more than a decade, agencies have offered special counselling, placement, and training programs for the aged. A number of agencies have established departments to handle hard-to-place individuals, such as prison parolees and "unemployable" individuals receiving public assistance. The vocational agencies have also begun to cooperate directly with institutions such as old-age homes and hospitals, as well as continuing their traditional cooperative activity with case work and group work centers.

During 1951 it was estimated that the placement of tens of thousands of Jewish youth and adults saved the American Jewish community approximately $3,000,000 in relief costs.  

In an effort to serve the entire Jewish community, vocational services, like case work and group work agencies, have gradually been accepting clients able to afford fees.

The desirability of the Jewish agency's remaining in the field of placement, particularly at a time when public employment agencies can give appropriate placement service, has been questioned. There has, however, been no marked inclination as yet on the part of federations, or Jewish community groups generally, strongly to question the appropriateness of this kind of agency in the area of Jewish social work.

**Group Work and the Jewish Community Center**

During the 1930's four processes emerged in the American conception of social work as the basic methods by which social workers performed their functions; social case work, social action, community organization ("intergroup work"), and social group work. Social group work was not defined easily; but by the 1930's it had become accepted as a legitimate process, referring to the development and adjustment of an individual through voluntary group association and the use of this association, under professional guidance, as a means of furthering democratic values and other desirable social ends.

Interest in the methodology of social group work was widespread among Jewish social workers in such recreational and cultural settings
as settlement houses, community centers, and summer camps—all of these coming under the general rubric of "group work agencies." Jewish community centers agreed on the values of the group work process, as a method of leading its participants toward more democratic and socially adaptive behavior; they differed, however, on the extent of the emphasis on the clear-cut ideological objective of greater adherence to "Jewish values," and on the extent to which programs should center around this objective. Centers varied greatly in their incorporation of Jewish content in their programs. Many group workers felt that a strictly sectarian emphasis was antithetical to the underlying non-sectarian and humanistic values of social work which encouraged the individual to reach out from his own group to others, especially for purposes of social action. The radically uneven expressions of commitment to Judaism in the programs of community centers persisted for many years and was one of the influences that led to the survey of the Jewish Welfare Board and the community centers conducted by Dr. Oscar I. Janowsky in the early 1940's.101

The National Jewish Welfare Board (JWB) had been organized in 1917, later incorporating the federated YM and YWHA's; it promptly took the leadership in rallying the YMHA's and YWHA's to the war effort, coordinating all existing Jewish services in the Jewish recreational and adult educational field. As a representative of the Jewish community, the JWB was one of the six national American organizations participating in the morale program of the government during World War I, a precursor to its role in the United Service Organizations (USO) in World War II.

World War I led to the development of community branches of the JWB. These branches in turn became the beginnings of the community center movement, which included the existing YMHA's and YWHA's. From the beginning, the community centers were officially dedicated to the preservation of Jewish cultural values and group survival, and were influenced considerably by the philosophy of Mordecai Kaplan. The movement has been characterized by a close relationship to Jewish education (many centers housing daily or Sabbath instruction), as well as by a variety of recreational, educational, and cultural activities. The Jewish community center, however, differed from the synagogue center, or "institutional synagogue," which was frankly "religious" in its function.102

Through the 1920's and 1930's a body of trained center workers gradually came into being; a professional association was formed; and centers came to occupy a definite place in local communities.

During and after World War II and the Korean war, the JWB, through its national offices and affiliated centers, rendered outstanding service. It participated actively in every phase of the USO program,
servicing the Jewish chaplain as well as the Jewish serviceman, and operating a large program in the United States and overseas. This program included religious service, social events, discussion and cultural groups, hospital visiting, and information service. The Jewish centers extended hospitality and introduced special programs for servicemen; they also worked with the young men of pre-draft age, whose problems were becoming widely recognized. By 1950, the JWB had 331 affiliated units among the community centers, YM & YWHA's, with approximately 502,000 members.

In 1947, many of the recommendations made as a result of the survey of the JWB were adopted. These focused on the center "as an agency of Jewish identification" and "as an agency of Jewish integration"—in short, one with a definite social ideology, rather than, for example, as an agency designed primarily to contribute group work services to the cause of individual and group betterment. Janowsky was in accord with the general philosophy of I. B. Berkson and Horace Kallen, who regarded the center as an expression of American democracy within which "cultural diversity" could flourish. The effect of the survey was to tighten organizational and program policies to underline clearly the Jewish character of the community center. With respect to "Jewish settlements," the Janowsky report had this to say:

Jewish group work agencies, however denominated, must be Jewish or they have no reason for existence . . . a nonsectarian Jewish settlement or educational alliance is a contradiction in terms . . . nonsectarian agencies should be under nonsectarian direction, they should not be sponsored and financed exclusively or predominantly by the Jewish group.103

Whether or not influenced by this report, the national trend has been for Jewish "settlement houses" to be in fact reconstituted as Jewish community centers.

While the decisions taken as a result of the JWB survey settled many issues of policy, and made for more consistency in direction, they did not settle all problems. This was true particularly of professional commitments that might seem to conflict with stated community center values. Conferences, in-service training institutes, professional interassociation meetings as well as journals, are still working on a clarification of the issues. There is little question that the Jewish community center field has achieved greater clarity in its purposes, and that efforts to resolve inherent strains will continue.

In addition to working with many types of club and special interest groups, Jewish community centers have continued to offer a wide variety of activities: health and physical education, arts and crafts, dramatics, music, dance, forums, festival celebrations, and civic projects.
Increasingly, centers have directed their activities to the entire Jewish community, seeking to include all social and economic levels and various ideological groups, as well as all age groups. Emphasis on service to the aged has led to closer relationships with old age homes and other community facilities in providing appropriate activity. Centers have reached out to offer advisory services to youth and adult groups through programs conducted in homes, schools, temples, and synagogues, and organized communitywide programs and councils.

Community centers have cooperated closely with synagogue centers and Jewish education agencies.

Jewish mobility has led to the extension of center programs to suburban areas, and to the purchase of large tracts on the outskirts of cities in preference to downtown city areas.\textsuperscript{104}

**Camping**

From a limited field, devoted largely to “summer outings for the poor” in the 1880’s and 1890’s, organizational camping has grown to serve large segments of the entire community.

In the United States, organizational camping began in the 1880’s, pioneered by Ernest Balch. By 1905 there were several hundred church camps, settlement house camps, school camps, YMCA camps and private camps. Today there are an estimated 12,000 to 15,000 summer camps in operation in the United States.\textsuperscript{105}

Summer camping arose out of the conditions of city life, and the extension of the city school term. Urbanization was accompanied by a general breakdown in the traditional recreational and educational functions of the family. In rural areas the school term was originally limited to the three or four winter months, and supplemented the activity and education that children received from working with their parents and other adults on the home farm. In the city, the term was expanded to eight or nine months, leaving school children with virtually no experience in outdoor life, domestic science, or manual activities. Organizational camping in the Jewish field followed the general pattern in attempting to meet the health and recreational needs of impoverished and poorly nourished Jewish children through outdoor living. During the early period, many camps were attached to the general charities, as well as to Y’s and settlement houses; today very few camps are attached to family agencies.

In the course of time the importance of camping in the general development of personality and in the enhancement of satisfaction and skills in group relationships became clearer. Its essentially educational character was perceived and many camps were organized or directed by educators. The influence of progressive education led to a stress on
the potentialities in camping of "learning by doing." Group work centers, viewing camping as integral to the broad recreational and professional services they were offering, and consistent with group work skills and approach, characteristically began to operate summer camps themselves, many group workers developing specialized experience in camping.

The influence of psychiatry and the advances made in psychological knowledge during the 1920's added a new dimension to organizational camping; it came to be regarded as a potential contribution to the emotional well-being of children. New approaches to methods of helping the handicapped child gain maximum social adjustment led also to the forming of camps that specialized in programs for the handicapped.

By the 1930's camps under philanthropic auspices had largely ceased to be primarily health-centered and had become institutions for enhancing general social adjustment. While Jewish, like non-Jewish, organizational camps served the poorer children throughout the depression, they became more and more available to middle-income groups with the rise of the Jewish economic position. Today camps under the auspices of community centers and other social agencies characteristically charge fees—though the fees are modest in comparison with private camps. Poor Jewish children no longer have difficulty in securing at least a few weeks of summer camp. The problem has rather become one of justifying communally subsidized camps for children whose families might be able to afford to pay the higher fee of private camping. The general feeling is that such camps, like other Jewish social services, including the community centers themselves, should become increasingly available to the entire community, and that there is a value in not limiting such facilities to the lowest economic group. As in the case of the old age home vs. the private nursing home, however, there are possibilities that both institutional summer camps and the growing number of day camping facilities of community centers may come into competition with private facilities.106

A 1953 directory of the summer camps under the auspices of Jewish communal organizations107 offers a partial listing of eighty-three such camps in the United States. These include not only general camps, but many with special programs—for emotionally disturbed children, for the handicapped, for special health programs. Several camps offer facilities for parents and children.

As is true of other social service areas, the organizational camping field has become increasingly professionalized, with trained directors, supervisors, and training programs for counsellors.
Health

The interest of Jewish communities in the development of health facilities steadily continued, while such facilities themselves became increasingly nonsectarian in service. In 1953 there were sixty-four hospitals under Jewish auspices in operation in the United States, and by that year all Jewish communities of over 30,000 population, except Washington, D.C., maintained hospitals. As of December 31, 1954, an average of 44 per cent of all patients admitted to such hospitals were Jewish, according to reports submitted to the Council of Jewish Federations and Welfare Funds. The proportions varied widely from hospital to hospital, but general hospitals were almost uniformly nonsectarian in their admissions policy. In cities with the largest concentrations of Jewish population, Jewish hospitals naturally received the largest proportions of Jewish patients.

The financing of these hospitals is in marked contrast to other welfare services of Jewish communities. For all types of hospitals somewhat over 75 per cent of operating receipts are derived from payment for service (affected considerably by hospital insurance plans, which account for about half of the receipts). The proportion among general hospitals is 80 per cent; the lowest proportion, 2.4 per cent, is for specialized tuberculosis centers where contributions and membership dues constitute more than half of receipts.

The number of Jews migrating to various parts of the United States for reasons of health has dwindled considerably since the turn of the century. Migration for health purposes to the National Jewish Hospital for Tuberculosis in Denver and in Los Angeles continue the pattern set many years before, but the number has sharply declined and applications have become more selective. There has continued to be some migration to mild, dry climates such as Arizona, Miami, Southern California, Texas, and New Mexico because of the alleged beneficial effects of climate on chronic arthritis, rheumatic fever, asthma, and various other diseases. The Council of Jewish Federations and Welfare Funds was asked to study the effect on the receiving communities of such migrants for health purposes, and it was found that the number seeking help from social agencies was beyond the local capacity to handle.

Among the newer developments in which hospitals under Jewish auspices have been prominent is the hospital home care program. Hospital services are extended to the home, thus enabling beds to be released for those patients who need hospital bed care, and resulting in improved opportunity for cure and rehabilitation. Jewish hospitals like the Maimonides Health Center of San Francisco, Montefiore Hospi-
tal in New York City, and the Benjamin Rose Hospital in Cleveland,\textsuperscript{110} have been among the leaders in care of the chronically ill. Jewish hospitals, like Montefiore and Hillside Hospitals in New York, Michael Reese Hospital in Chicago, and the Jewish Hospital in Cincinnati, have been cooperating with family agencies in programs for the care of the aged and the mentally ill; they have also continued their longstanding cooperative activity with social agencies in the care of the physically ill and handicapped.

The Jewish community has continued to be concerned with special groups of handicapped, including the mentally retarded as well as the blind, the deaf, and otherwise physically disabled. While public programs have largely met minimal economic, and some of the training, medical, and custodial needs, a number of Jewish communities have maintained institutions and special programs for rehabilitation of handicapped groups, partly out of the conviction that public programs do not offer sufficient care. Vocational service agencies, as indicated above, have played a special part in the occupational readjustment of the handicapped.

It is a far cry from the "hekdesh" of the European ghetto to the modern hospital of today. The traditional necessity to establish facilities for the Jewish sick because no one else would take care of them is no longer a prime motivation in the establishment of present-day facilities for health care, or in continuing the operation of those in existence. There appears to be a mingling of motivations: the desire of Jewish communities to make a direct contribution to the health of the entire community, to provide resources where Jewish doctors can be sure of acceptance for training, and to provide a hospital atmosphere in which Jews, particularly those who are devout, may feel more at home. The fact that other sectarian denominations have also established hospitals may be still another motivation, or pattern for Jewish behavior. One senses here a unique combination of a deep-seated traditional sense of communal responsibility for the sick and infirm within one's own group, with one of the most modern aspects of the American ethos—no racial or religious barriers to service. Curiously, despite the nonsectarian character of admissions to hospitals, the appropriateness of this kind of communal endeavor under Jewish auspices has been less subject to question than the Jewish family service agencies, whose clientele is almost uniformly Jewish (but whose methods are conceived of as nonsectarian).

Overseas Aid

The prodigious development of fund raising for overseas aid has been termed "one of the greatest unifying forces in Jewish life." Such
fund raising has been essentially for the United Jewish Appeal, in which the JDC and the United Israel Appeal (formerly United Palestine Appeal) have been the principal national partners. Federations and welfare funds bore the brunt of organizing and conducting the annual campaigns and of trying to develop rational relationships between overseas needs and domestic programs.

While a number of Jewish organizations representing labor, religious, and Zionist groups have been active in overseas aid, the JDC has been the organization charged with the over-all task of the relief and rehabilitation of European Jewry. The JDC carried staggering responsibilities at the close of World War II. JDC's previous history had given it structure and experience but no prior experience could compare with that of coping with the ravages imposed on European Jewry by Nazi persecution and World War II.

By 1925, as noted earlier, the JDC had begun to consider liquidating its operations; but the economic crisis which swept Poland and nearby areas during that period decided the JDC against such liquidation. It continued its work with relief and reconstruction loans, establishing workshops in various forms of rehabilitation in Eastern Europe, cooperating with other organizations, particularly with OSE, which operated medical institutions and child care programs in many parts of Eastern Europe. During the late 1920's a separate project called Agro-Joint was organized in the Soviet Union on behalf of Jews there. Agro-Joint's program included vocational training, loan funds for artisans, workshops, and cooperatives, all designed to help Jews settle on the land.

Again in the 1930's JDC considered liquidation, due to the success of its programs. But the advent of Hitler and the new European epoch he ushered in kept the JDC operating through the 1930's to bring relief to harried refugees, to help Jews emigrate from Germany, and to establish resettlement programs. Even after the Nazi invasion of Poland in 1939 JDC attempted as far as possible to bring relief directly to Jews in Germany and later in Eastern Europe. When the Nazis took Paris, JDC moved its European headquarters to Lisbon, where it continued on the alert to seize every possible opportunity for the rescue of the remnants of the massacred Jewish population of Europe.

When World War II came to a close, JDC representatives followed close behind the liberating armies, bringing food, clothing, and medical supplies directly to concentration camp victims, soon to be termed displaced persons, or DP's.

When America's Jews came to realize what had happened to the Jewish communities of Europe—to near relatives, to brethren in cities and villages from which their parents and grandparents or they themselves had come; when the full story of concentration camps, crema-
tory ovens, systematic slaughter and brutality became known, a wave of anguish swept through every Jewish community in the country. A huge outpouring of funds for rescue operations resulted. The JDC was faced with the task of moving in to help wherever it could. By supplying direct relief, in the form of food, clothing, and other articles; by bringing in doctors and nurses and medical supplies; by conducting an immigration service, itself and in cooperation with the Hebrew Sheltering and Immigrant Aid Society (HIAS); by working jointly with ORT in vocational training and rehabilitation; by bringing educational materials, religious books and teachers to DP's and local Jewish communities; by training social workers for local Jewish communities—by all these activities the JDC strove to meet its obligations.

As the years of crisis passed, and European Jews emigrated to Israel and to other lands, the JDC was able to turn its attention to needs in Moslem areas, particularly in the countries of North Africa. The lot of the Jewish populations in the unbelievably squalid ghettos—the mellahs of Morocco and Tunisia—was miserable beyond imagination. The situation became rapidly worse with the rise of nationalist sentiment in the North African countries and the friction between Israel and the neighboring Arab countries. Again JDC conducted rescue operations, cooperating with ORT and OSE in vocational training and rehabilitation and in health work, and with the Alliance Israélite Universelle and other groups in strengthening the personal and community resources of the Jewish populations of the Moslem countries.

When the State of Israel was established in May 1948, it had to depend very largely on philanthropic aid for its foreign exchange. In the course of time other resources have developed, and a “bond drive” has been launched; but philanthropic contributions through the United Israel Appeal have remained very important. The Jewish Agency for Palestine has been the major beneficiary of these funds. Sympathy for Israel’s struggles, and concern for the welfare of the hundreds of thousands of victims of Nazi terror and war, have united Zionist and non-Zionist alike in contributing to the Israel causes, especially through the UJA.

Refugees

Shortly after Hitler came to power in 1933 Jews began to leave Germany. Many could not believe that the anti-Semitism of the Nazis could win a permanent footing, and fled later penniless and in panic. Those who were unable to leave before World War II eventually suffered the fate of Central and European Jewry. By 1934, German exiles were arriving in the United States in such numbers that a Greater New York Coordinating Committee was organized to coordinate the
special refugee services of the two larger Jewish family agencies and the two local sections of the National Council of Jewish Women. The numbers grew larger year by year; thousands of the earlier refugees had resources or could quickly become self-maintaining, but financial assistance was necessary for others and many more required help in making their initial adjustments. By 1938 it had become clear that national support was necessary, and national planning. The National Coordinating Community Fund was organized to provide central financing for refugees and to assure a more general support.

By 1939, 40,000 Jewish refugees a year were entering the United States (some 200,000 all told came between 1933 and 1940); these later arrivals were older, poorer, more disturbed. In June 1939 the National Refugee Service (NRS) was set up to replace the predecessor organizations. The NRS offered migration service to the kin of German residents; resettlement help to new arrivals; subventions to physicians, scientists and other professionals to enable them to study for examinations and resume their professional careers; an employment and retraining program; loans to small business men; and assistance to refugees who were seeking permanent visas. As Eli Ginzberg has pointed out, the remarkable work of the NRS (and its successor organizations) through quiet and efficient assistance to refugees in becoming integrated into American life and the American economy, deterred the anti-immigration sentiment which was building up among powerful groups in the United States.\textsuperscript{113}

At the peak of service, 900 community groups coordinated by the NRS were helping refugees throughout the nation. More than half of the refugees who arrived in the United States between 1939 and the entry of the United States into World War II in 1941 remained in New York City. The NRS assisted many thousands of others who wished, because of the presence of relatives and friends, or vocational opportunities, to "resettle" in smaller cities and towns throughout the country, to do so. While specialized refugee services were the pattern at first, gradually the tendency grew to "normalize" the newcomer's way of life by having him served through the same family, employment, and health services available to the general Jewish population in the communities where he came to settle.\textsuperscript{114}

After World War II came the shattered, orphaned, widowed, maimed, and tortured remnants of the concentration camps and ghettos, the survivors of the incredibly ruthless extermination of 6,000,000 of their brethren. Abroad, they were assisted first by the liberating armies, then by the United Nations Relief and Rehabilitation Association (UNRRA), and then by the International Refugee Organization (IRO) and by the JDC. Emigration was slow, and the United States
immigration laws restrictive, but in May 1946, the first of the "DP ships," the S.S. Marine Flasher, arrived in the New York Harbor.

By then, the NRS had merged with the section on services to the foreign-born of the National Council of Jewish Women (which had been providing outstanding service at ports and docks, in naturalization and immigration advice, and in work for unattached women and girls) to form the United Service for New Americans (USNA). The new organization, receiving support (as did the NRS) from the United Jewish Appeal, was prepared to offer intensive help to the new arrivals through a variety of individual services including case work counseling, vocational help, and temporary relief. It was hoped that the DP Act of 1948 would open the gates of the United States to Jewish war victims, but implementation of the act was discouraging. In 1949, however, the movement increased, and the New York Association for New Americans (NYANA) was created to be responsible for local activity in New York City, while USNA remained the integrating agency on the national level, constantly widening the network of community resources available to help the arriving DP's.115

USNA became increasingly active in easing the possibilities of immigration, helping to break the slowdown in admissions under the amended DP Act of 1950. After the McCarran-Walter Immigration and Naturalization Act of 1952 was passed, USNA put all its resources into protecting the immigrant. The new act not only restricted immigration severely, leaving unchanged the national origins quota system of 1924, but increased the hazards of deportation.116

Between the end of World War II and 1954, about 150,000 Jewish refugees had resettled in the United States; more than 98 per cent were soon self-supporting, contributing to the economy, and to the social and cultural life of the nation.

The lessons of the previous experience of Jewish communities with the mass immigration in the years around the turn of the century had been well learned. For the tragic refugees and concentration camp victims of the new era, resources were mobilized quickly, unstintingly. Resettlement and "Americanization" proceeded amid hardships, but with full awareness of the implications for communities, and the needs of the newcomers. The consensus is that, despite crises and pressures from all sides, the effort to help the newcomers, keeping their best interests in mind, and without overburdening any particular community, was successful.

HIAS with its more than forty years of experience in helping Jewish immigration had been working alongside USNA in receiving new immigrants. Since HIAS's services resembled those of USNA, and those of the immigration department of the JDC, a merger among the three groups had repeatedly been broached. It was finally achieved in 1954,
and a new organization, United HIAS Service, was formed, which was responsible for its own fund raising. This represents "one of the last remaining examples of the bringing together of welfare institutions which had been founded in earlier years under the auspices of German and Eastern European Jewish groups." 117

This report cannot attempt to do full justice to the story of American Jewry's contribution in social services to overseas communities. The full account needs telling; in such a document the work of the Zionist as well as general organizations would receive full treatment. Space here permits only the listing of major Zionist and pro-Israel organizations which engage in social work for Israel and raise their own funds:

Hadassah, The Women's Zionist Organization of America and Junior Hadassah, which conduct independent health, medical, child rehabilitation, vocational, educational, and land reclamation activities in Israel; the Mizrachi Women's Organization of America, which maintains child care, vocational education, and other social service programs in Israel in the spirit of traditional Judaism; the Women's League for Israel, which provided shelter, vocational and social adjustment services for young women newcomers in Israel; the Federated Council of Israel Institutions, which acts on behalf of many yeshivot and social welfare agencies of a traditional type in Israel; the American Red Mogen David for Israel, aiding the Israeli Red Mogen David.

Financing

Amounts raised by campaigns of the federations and welfare funds (the latter being associations for nonlocal causes, national and overseas), rose after World War II, primarily in response to overseas needs, to a peak of $200,721,000 in 1948. Since that time the sums have gradually declined; but in 1953 the total raised was about $44,000,000, still 60 per cent above the 1945 figure. Although uncertain economic conditions in 1950 and 1951 may have contributed to the decline in contributions, it is generally considered that other factors were even more important. One factor was the waning of the DP "problem"; a second, the success of Israel's War of Independence; a third, the desire of American Jews to engage in domestic projects, which had been delayed for several years.

The old conflicts between Zionists and non-Zionists was largely put aside during the 1940's and 1950's, when Jews of all ideologies united in their efforts for Hitler's victims. Israel not only became a state, but the new home of most of the new DP's. Hence, philanthropic support for Europe's Jews and Israel's Jews represented a single impulse.

A study of "multiple appeals" in fifteen cities established the fact
that considerable funds were being raised outside of central community campaigns. In the cities investigated, the total was equal to 70 per cent of the aggregate amounts raised in the central campaign. These included local, national, and overseas projects in such fields as religion, education, and community relations, as well as health and welfare.\textsuperscript{118}

Local agencies have been increasingly concerned with securing adequate financing through central Jewish campaigns, supplemented by community chest support, and fees for service.

Increased payments for service have been sought for old age care and hospital care, in particular. This has been largely due to the extension of old age assistance and old age and survivors insurance, and to the prevalence of hospital insurance coverage. Public funds have come to constitute an appreciable share of the operating budgets of child care agencies.

It is impossible even to estimate the extent to which American Jews have contributed to general or non-Jewish causes in the health and welfare field. There is little question that these contributions have been and remain extensive.

**Research**

In speaking of “research,” a distinction should be drawn between the fact-finding or survey variety, and the problem-solving type of research which begins with hypotheses to be explored or experimentally tested. The first has been widespread in social work for over fifty years, with increasing refinement of techniques; the second is a relatively recent development in social work, but the recognition of its importance has been growing.

Interest in objective fact-finding as a guide to policy and practice was expressed in Jewish social work as early as the 1880's and 1890's. This interest became more explicit around the turn of the century when Jewish social work leaders began to call for studies of the Jewish population of the United States; its needs, available resources, etc. The pages of *Jewish Charity* are dotted with references to the need for research. This preoccupation led to the organization in 1917 of the Bureau of Jewish Social Research, which undertook studies for a variety of agencies. This bureau later became incorporated into the Council of Jewish Federations and Welfare Funds (CJFWF), established in 1924. The organization of such national agencies as the Jewish Welfare Board and the CJFWF made it possible for many local federations and welfare funds to secure expert assistance from national agencies; they also made regional and national surveys possible. Through the 1930's, 1940's and 1950's, the most frequent kind
of research was the community survey. The CJFWF, the JWB, the Graduate School of Jewish Social Work, and the Conference on Jewish Relations (later called the Conference on Jewish Social Studies) were the principal organizations in the Jewish field to assume national responsibility in assisting local federations and welfare funds to carry out surveys.

Demographic studies of populations in cities such as Minneapolis and Trenton, economic and occupational research, administrative and financial studies, were also quite numerous. Evaluative studies that aimed principally at clarifying needs and resources, defining agency inter-relationships, and evaluating the work of given agencies, were less frequent though very important as a research emphasis.

Until the late 1940's, there was relatively little interest in Jewish, as in non-Jewish social work, in empirical research, particularly research that would draw fully on hypotheses as well as methods from the relevant social sciences. The continued pressure of lay leadership for a more definitive analysis of the contribution of service programs; the gradual availability of qualified research persons trained in or close to the social work field; and the greater security of social work agencies in the use of research, all have contributed to a gradual concentration on more sophisticated evaluative and experimental research in social work. Schools of social work have encouraged this development and have promoted research training through doctoral programs and other special programs for social workers qualified in social science research. Some agencies have, upon occasion, utilized the services of social scientists themselves in specific research programs.

At the same time, federations and welfare funds have been concentrating on research in planning ahead on the basis of the evaluation of the effectiveness of current programs. While scientific research has not yet received full recognition as a legitimate organizational investment in many individual agencies, the trend is clearly in that direction; lack is in research manpower rather than in conviction or desire of executives and boards to engage in research activity. Jewish social work has been keeping abreast of social work research as a whole, and certain individual agencies have been leaders in this area.

**Boards and Volunteer Participation**

With the rapid professionalization of the social work field starting with the 1920's, the authority of board members tended to recede, and that of the professional social work executive to be enhanced.119

In a sense, the growing importance of the executive as a qualified technician, administering the services of other specialized personnel,
was similar to the "managerial revolution" in industry, the tendency to turn over to the "manager" the technical reins of the industrial organization. For the social agency or federation, however, it sometimes meant the board's retreat from its appropriate authority and role, at the same time as it retained the official function of being responsible for policy. There was a real danger of the "strong" executive becoming too strong.

In one of the few attempts at sociological analysis of the role of leadership in Jewish communal activity the thesis is developed that social prestige is the prime motivation for board membership, which "is generally a reward for services already rendered; since the era of professionalization the board has been generally little more than a rubber stamp for the 'tradition' of the agency and the 'suggestion' of the executive. Nevertheless, board membership is interpreted as work."

This thesis has been accepted by some and disparaged by others as being perhaps locally true, or only superficially true, or not true at all. Two aspects of the thesis should be differentiated: motivation for board membership and the actual role of such membership. Analyzing motivation is always a hazardous occupation. It may, however, be possible to accept the desire for social prestige as one source of motivation for some board members, without imparting a negative connotation to this influence. There is nothing inherently unethical or psychologically unsound in a desire for higher social status, so characteristic of our culture. Moreover, such striving may not be an end in itself, and need not necessarily imply that the motivation is exclusively self-centered. The sociological question may rather be: "What makes board membership a channel for upward social mobility?" That board membership does imply high social status seems unquestioned.

There is little evidence that the motivations of lay leaders are in any wise different from those of others; only the channels through which motivation may be expressed may be different. Every community can point to individuals possessing the highest altruism and devotion to the best interests of the Jewish community—as well as to individuals who possess little of either quality. The record of Jewish communities in the development of welfare services in the United States attests to the fact that when all is said, their leadership has been effective and of a high order.

A negative attitude among social workers toward board members was much more characteristic of the 1930's than of the late 1940's and 1950's. Reacting sharply from earlier domination of social work activity by board members and volunteers during the 1920's and 1930's, professional social workers felt impelled to define and safeguard their newly assumed role and sphere of competence. Board members tended to be further isolated from professional staffs during the 1930's, if and
when they associated themselves with economy-minded “business-like” principles which ran counter to the objectives and viewpoints of the social workers. As agencies became bureaucratized, with more clear-cut definitions of function, boards tended to accept the province staked out by the professional, while retaining their role as policymaking bodies. This is largely true today, with the exception of a few scattered smaller agencies that still adhere to a tradition of complete board control and operation.

The profusion of articles, books, and training seminars in the 1940's and 1950's dealing with the role of the board member would seem to attest to a re-evaluation and re-alignment of board members vis-a-vis professional staffs. The present tendency is for professionals to be much more ready to accept the legitimate responsibilities of boards, and for the executive to serve as a channel for more effective board-staff communication. The interest in accepting volunteers to perform direct service is another aspect of this trend.

Jewish agencies have seen every kind of motivation and every pattern of service among board members, and lay leaders of communal services in general, from the most domineering to the most passive. There is also good evidence that the respective roles of boards and staffs are becoming more clearly defined in Jewish agencies, with a concomitant growth in mutual confidence and a decline in defensiveness over arrogated authority. As professional social workers have become secure both in their knowledge and skills and in the appreciation and confidence with which board members regard them, they have tended to relax their vigilance over their professional provinces. Conversely, as boards have been given more responsibility they have also tended to exercise it; the trend has been for executives to assume increasing authority, and the extent to which board members participate in formulating basic policy is often a reflection of the executive’s leadership. The executive’s influence, however, can spring not only from his professional leadership, but also from his ability to affect the status strivings of lay leaders. Like all power, that of the executive can be abused or well used—characteristically it is employed in the best interests of the organization and community he serves.

In addition to the lay leadership of the hundreds of local and national Jewish agencies in the United States, there is, of course, the participation of volunteers on every level of service. American society has been characterized both by an enormous profusion of voluntary groups and by the voluntary activities of Americans as individuals. There are an estimated 30,000,000 persons in the United States who offer unpaid help to various religious, social, political, civil, and service organizations. During World War II, 11,000,000 volunteers served in health and welfare programs alone to help the war effort.
Like other Americans, American Jews have participated in both Jewish and general voluntary activities of all kinds. The National Council of Jewish Women is an outstanding example of a group of volunteers active in chapters throughout the country, to help the foreign-born, to give training scholarships to overseas students (and thus influence social services in Jewish communities abroad) and to develop cultural programs. The activities of Zionist organizations in the field of philanthropy to Israel have been cited. Synagogue and temple sisterhoods perform many volunteer functions. Fraternal orders such as B'nai B'rith offer many opportunities for volunteer service.

Volunteers have also been giving direct service to health and welfare agencies, to hospitals, child guidance clinics, and to institutions for children and aged. The volunteer no longer threatens the professional. On the contrary, the professional is more and more in a teaching and supervisory position with respect to the volunteer. But the volunteer can help in ways the professional cannot—not only by performing direct, concrete services for patients and clients under professional direction, but also by interpreting the work of the agencies and raising their prestige, by helping to raise funds, by making suggestions from a fresh point of view regarding policy and performance in their agencies. For these reasons, the volunteer is being sought today by the professional health and welfare agency, reversing a fifty-year trend.

Jewish Social Work Training

Following World War I there was a revival of interest in a Jewish school of social work; however, opinion was divided as to how generally social work-oriented, or specifically Jewish-centered, the school should be. The plan for the Graduate School of Jewish Social Work finally worked out in 1924 “was a compromise between the view of those who could see no difference between Jewish and non-Jewish social work and regarded the separate system as being without justification, and those who pointed to the need for a positive Jewish ideology for social workers whose task included concern with Jewish cultural life.” The school, under the direction of Maurice J. Karpf, trained many of today’s leaders in social work, and stimulated a great deal of research in Jewish life. Technical social work courses were given by the New York School of Social Work, while the Jewish part of the curriculum was taught directly at the Graduate School. The most successful attempt at separate training for Jewish social workers to date, the school finally succumbed in 1940 to divisions of points of view, to apathy, and to economic difficulties.

In analyzing the reasons for the school’s demise, Karpf in 1940 specifically cited “lukewarm professional support and cooperation,”
the withdrawal of financial support by foundations, and the inability of federations to assume the full financial responsibility which had been requested. A severe blow was the death of Felix Warburg, taking from the school "its most ardent supporter and defender." 128

Attempts were made, particularly by the JWB, to introduce and pay for special courses in Jewish content in existing schools of social work, but these efforts were largely rejected by the schools on the basis that sectarian courses should not be offered in a general curriculum.

In 1941, Solomon Lowenstein called together a group of executives to consider the problem of training in Jewish social work. The result was a survey, conducted by Philip Bernstein of the Council of Jewish Federations and Welfare Funds. Bernstein found 124 that the number of agencies definitely requiring their workers to have Jewish schooling was negligible, but that social workers in the expanding community organization and community center field were most aware of the Jewish content in their work. This fact, in addition to the rapid development of central organizations in Jewish life (their number rose from 50 in 1930 to 300 in 1947, all with paid professional executives) led to the recommendation that Jewish social workers be trained to work in the Jewish community organization. This field includes community relations, planning services for the aged, and overseas work. It was agreed that nonsectarian schools were preparing practitioners in the functional fields adequately. The final decision was to set up a Training Bureau for Jewish Communal Service to prepare experienced social workers for executive positions. The Training Bureau was established, under the direction of George Rabinoff. Unfortunately, the number of staff released by agencies for training was too small to warrant the expense of the training, and this effort ended after a few years.

Recently, the Yeshiva University in New York City has set up a social work training program, and similar plans are afoot by other theological centers. This development is a reflection of the gradual mutual acceptance by the religious institutions of the place of organized social work and social work training in religious institutions, and by organized social work of the place of religion and traditional values in personality. Whether this mutual recognition will lead to social work training under permanently Jewish auspices, and whether this training will be sufficiently unique to clarify the nature of specifically Jewish social work, remains to be seen.

**Summary and Conclusions**

The handful of Jews living in the United States during the colonial period, while temporarily restricted from organizing synagogues in certain places, such as New Amsterdam, were able to do so by the end
of the seventeenth century, and soon began to establish burial societ-
ties and other mutual aid activities. These organizations, under syna-
gogue auspices originally, were a direct carry-over from their previous
traditions.

As the number of Jews increased during the 1800's, with immigra-
tion, largely from Germany, they rapidly dispersed through the whole
country. They prospered and entered fully into voluntary activities,
within and without the Jewish fold. By 1880 Jews were represented in
all walks of life, and in all forms of organized activity that were open
to them—politics, trade associations, professional groups, fraternal
orders. Within Jewish life they established such organizations as
YMHA's, and charities and institutions for the orphaned, the sick,
and the disabled. The East European immigrants also seized the op-
portunity to establish voluntary associations. They and their children
formed not only replicas of synagogue-centered charities, but every
kind of organization known to American life, as well.

The Jewish community has in fact become essentially middle-class
in occupational terms; middle-class values—thrift, moderation, stress
on education, postponement of immediate satisfactions—were implicit
even among the most destitute of the arrivals on Ellis Island.

The tradesmen and artisans of the colonial period, the itinerant
peddlers of the 1880's, the tailors and shoemakers and dressmakers of
the sweatshops and ghettos of the post-1880's, gave rise within one or
two generations to groups of successful merchants, independent busi-
ness men, professionals, white-collar workers. This is not to minimize
the large numbers of poor Jews, or the sick and disabled; the misery
of the hundreds of thousands of penniless new settlers in the crowded
hovels of the lower East Sides in the major cities of the 1890's and
early twentieth century, or the ravages of the depression of the 1930's
on Jews and non-Jews alike. But the Jews of the United States have
prospered as the country has prospered.

Jewish social work in the United States became strongly concerned
with overseas aid both because it was traditional and because of over-
powering facts of history. The immigration from Central Europe in
the early 1800's and the mass immigration from Eastern Europe in
the latter part of the century followed periods of intense persecution.
From the 1880's the recurrent emergencies requiring aid to overseas
communities built into Jewish welfare activity a structure of steady
and organized effort for the aid of Jewish brethren in all lands. As
the social position of the Jews in the United States became stronger
with the growth of the American economy and the rise of the second-
and third-generation to middle-class positions, American Jews became
the major source of philanthropic effort for Jews in various parts of
the world. Nazi persecution of Jews in Europe, the urgency of rescue,
relief and rehabilitation of survivors after World War II, the need to help new emigrants from disaster areas in the 1930's and 1940's and for philanthropic work in the new State of Israel, called forth prodigious outlays of funds, energy and expansion of overseas aid.

It is doubtful that there were specific relief needs peculiar to the Jewish population in the United States, aside from religious and cultural considerations, despite the recurrent concern that this might be the case. Thus, desertion in the early 1900's was considered to be a "Jewish problem" and a major cause of dependency in Jewish families. However, subsequent investigations proved that desertion was at least as common, if not more so, among non-Jewish families. Tuberculosis, a scourge of the post-1880 immigration and the focus of much Jewish social work, was a blight wherever there was overcrowding, poor sanitation and poverty. Certain needs were probably more urgent for the Jewish population, but it would be difficult to demonstrate that these were specifically "Jewish needs." The concern, however, with preserving family life, with protecting the aged, and caring for children seems to have been relatively strong among the Jewish population, and to have derived in large measure from cultural influences.

The fact that there was general support in the United States for the growth of voluntary agencies created a climate in which private social agencies could flourish. Indeed, they sprang up in such profusion that attempts at self-regulation and coordination became the first order of the day in the 1870's with the charity organization movement. There was, however, no official discouragement to deter any segment of the population from starting "a charity" anywhere in the United States, and Jews were able to form whatever societies they wished without fear of state disapproval or special state regulation. Philanthropies mushroomed and fund raising became a huge problem. The "federation" movement was the response; it contributed not only to better financed but also to better coordinated, more stable and more permanent agencies for Jewish social work.

Sufficient numbers of Jews acquired financial security to make possible the Jewish philanthropies, the hospitals, the family agencies, the guidance clinics, the community centers, and the organizations for overseas aid. Other groups in the United States have, of course, conducted similar activities. But the extraordinary outpouring of voluntary funds for Jewish and general social work by the Jewish community cannot be accounted for by economics alone.

This outpouring derives from more than financial ability to give, or even from effective fund-raising organization and techniques. It stems essentially from deeply ingrained humanitarian motivations, from traditions and patterns of giving centuries old, that depend not
only on ability to contribute but also on the moral necessity to help one's brethren, regardless of personal sacrifice. The fact that the humanitarian impulse characterizes American life in general, that the individual citizen finds himself enjoined here to contribute to a variety of health, welfare and educational organizations—and is in fact encouraged to do so by the Federal government through tax deductions—has helped make Jewish social work in this respect, too, part and parcel of the American scene.

While cultural, historical, social, and economic factors contributed both to the development and the stability of Jewish social work, counter-influences tended to diminish the growth of "sectarian social work" (in the sense of auspices) both in the general community and specifically in the Jewish community.

One such influence has been the growth of governmental programs of assistance, and social security. These programs had the effect of virtually eliminating relief as a function of voluntary social service and of limiting private philanthropy to special fields. Another influence has been the ideology of many lay leaders and professional social workers, based on a secular humanism which regards "sectarianism" as inconsistent with or contradictory to social work values. These influences have restricted the growth of Jewish social work, created differences of opinion and approach that need continually to be reconciled.

What has happened to the traditional forms of charity as they existed among the Jews for hundreds of years? A few isolated groups have kept as close as possible to the traditional patterns of retaining social services as a synagogue function.

But for the most part the traditional injunctions to clothe the needy, feed the hungry, shelter the homeless, are now being carried out by public services and are not confined to Jewish auspices. For the Jewish community in America is not self-enclosed and does not have to be self-sufficient. In fact, Jewish community leaders and professional social workers have helped in the development of public responsibility.

The orphanage has evolved into the cottage plan institution and foster care. Here, too, the government is taking on a larger share of the burden, and actual needs in the Jewish community have decreased.

The "hekdesh" of the Jewish ghetto has become the modern hospital, under Jewish auspices, but increasingly open to all on a non-sectarian basis.

The care of old people is more than ever a responsibility of the Jewish community. But all efforts are now being directed not to building institutions for the aged, but to developing special housing, extending medical service, boarding care, group activities, and in-
individual counselling, in order to help elderly people to retain the satisfactions of normal community and home life, and to make the later years of life as rich as possible.

The modern version of ransoming the captives is overseas aid—for the rescue, relief, and rehabilitation of oppressed brethren without resources of their own. To a greater degree than ever before, Jews in the United States have cooperated for this purpose.

Some needs are being met under new auspices, others have remained the same. But new needs have also arisen for which the Jewish community has assumed responsibility which it has delegated to Jewish social services: such needs as help in self-direction and self-fulfillment, the need of children for understanding and love, the need to locate one's group identity, the need for recreation and a social life.

These are not really new needs; indeed, they are very old. But they had not before been recognized by communal organizations as their responsibility to meet, but by family, friends, rabbi. Today, Jewish communities, along with those of other denominations, have established special resources to help meet them. Life has become complicated, and specialized functions are required; the social services have been developed to help family and rabbi and friends, when necessary, to meet these personal needs of individuals and families.

Among the long range trends in Jewish social work one may discern the following: 125

1. The acceptance of direct material relief as a function of government rather than that of the voluntary agency.
2. The gradual extension of social service to wider segments of the entire community, rather than to the poor alone.
3. The increasing assumption of the responsibility to try new services, new ways of working, and to carry on research, with the premise that these are essential to the role of the voluntary agency. In turn, this assumes that governmental programs may eventually take over programs that are currently experimental.
4. The acceptance of persistent responsibility for the care of the aged as a traditional form of service of the Jewish community, while at the same time accepting help in financing, directly or indirectly, from public sources.
5. Emphasis on nonsectarian policies in service.
6. Increased use of volunteers for direct service under professional supervision.
7. Increased participation in boards of individuals from varying backgrounds. Such participation remains symbolic of high social status.
8. The decline of the isolated philanthropy unattached to existing federations or welfare funds.
9. Rapprochement between the organized religious elements in Jewish life and Jewish social welfare.
10. Concern with the issue of the Jewishness of Jewish social work. This concern is expressed differently in various agencies and professional groups.

These trends add up to the continuation of deeply rooted cultural traditions, whose outward manifestations have changed but whose inner core remains the same. Jewish social work is no longer a matter of self-protection against a hostile environment; less than ever does it reflect lack of confidence in public or nonsectarian services; nor does Jewish social work represent the imposition of the will of a philanthropic oligarchy. Rather, this persistence of Jewish social work in the United States would seem to flow from the fact that after 300 years of living in this country, during which every diverse form of Jewish life has been able to appear, participation in social work under Jewish auspices has become the most universally accepted expression of Jewish communal feeling.

NOTES

2. "There are eight degrees in the giving of charity, one superior to the other. A high degree, than which there is no higher, is that of one who takes hold of an Israelite who has become impoverished and gives him a gift or a loan or goes into partnership with him or finds work for him, in order to strengthen his hand so that he be spared the necessity of appealing for help.

"Less than this (i.e., next below in rank) is the case of one who gives charity to the poor, without knowing to whom he gives and without the poor knowing from whom he takes. For behold this is a good deed done for its own sake. An instance of this is (what took place) in the Chamber of Silence in the Sanctuary, where the righteous brought their gifts secretly and the respectable poor helped themselves secretly. And akin to this is the case of the one who contributes to the public charity fund. And one should not contribute to the charity fund unless he knows that he who is in charge of it is trustworthy, wise and understands how to manage it properly.

"Less than this is the case of the one who knows to whom he gives, without
the poor knowing from whom he receives. An example of this is the practice of distinguished wise men who used to go secretly and leave money at the doors of the poor. And in this manner it is fitting to act, and it is then the highest procedure, if those appointed over the charity work do not conduct it properly.

"Less than this is the case where the poor man knows from whom he takes but the giver does not know the receiver. An example of this type is the practice of the wise who used to wrap up money in their cloaks and cast the bundles back of them (without looking), the poor coming afterwards to pick them up, thus being spared all shame.

"Less than this is the case of him who gives without being asked.

"Less than this is the case of him who gives after he is asked.

"Less than this is the case of him who gives less than is proper, but in a pleasant manner.

"Less than this is the case of him who gives reluctantly."


4. As late as the 1840's in Chicago "before a congregation could be formally organized, the need for a communal cemetery was felt. . . . The organization of a burial society was the first overt act toward the organization of a Jewish community in Chicago." Wirth, Louis, The Ghetto. Chicago, University of Chicago Press, 1928, p. 157-158.


6. Ibid., p. 113.
7. Ibid., p. 469-70.
8. Ibid., p. 155.


15. Ibid., p. 15.


20. Much of the information concerning New York City in this section was gathered from Hirsh, Joseph, and Doherty, Bekan, The First Hundred Years of the Mt. Sinai Hospital of N.Y. New York, Random House, 1952. For a full-length treatment of the rich background of experience and tradition in medical care of the German Jewish immigrants, which was drawn upon in their development of medical services in the United States, see Marcus, Jacob R., Communal Sick-Care in the German Ghetto. Cincinnati, Hebrew Union College Press, 1947.
23. Reactions not too dissimilar from current attitudes in Israel toward newcomers from "Oriental countries."
30. Placement service in farming was particularly active for refugees during the Hitler and World War II era of the 1930's and 1940's.
35. *Ibid*.
36. The Free Synagogue in New York, under the ministry of Rabbis Stephen S. Wise and Sidney Goldstein, was an early leader among Jewish religious centers, in cooperating in social service activities, and in setting up certain social work functions itself.
37. The National Desertion Bureau (NDB) was organized in 1912 as the Bureau of the National Conference with a $5,000 grant from the New York Foundation. In October 1955 the NDB was reconstituted as the Family Location Service, with the positive function of keeping families together.
46. Bogen, *op. cit.*, p. 143. In Cincinnati, in 1915, a study showed a rate of 3 per cent for Jewish infants born, as against 7.8 per cent for the general population. The contrast in New York City was even greater.
50. Bogen, op. cit., p. 252.
57. The first federation in the United States was that of the Denver Associated Charities, formed in 1888. This federation did not last, principally because it attempted to give direct services as well as to do joint fund raising.
59. San Francisco, for example, ordered 100 copies. The National Council of Jewish Women ordered copies to be sent to all chapters. The Jewish Daily News and the Jewish Morning Journal (referred to in Jewish Charity as "our East Side co-religionists") took up the issue. Jewish Charity, Vol. IV, April 1905.
60. Waldman, op. cit., p. 389.
63. Rosenberg, Stuart E., op. cit., p. 211.
64. Idem, p. 214.
70. E.g., Frankel, Lee, "The Past Fifty Years," Jewish Charity, Jan. 1905.
71. Waldman, op. cit., p. 300.
72. Jewish Charity, Vol. III, Oct. 1903. There is, moreover, a suggestive reference in the succeeding issue, Nov. 1903, p. 49: "The Winter School of Philanthropy, which has been organized by the C.O.S., had its inception in our organization (i.e., the United Hebrew Charities)."
77. Whose motto was "not alms, but a friend." This period is well described in the classic history: Warner, Amos G., Queen, Stuart A., Hooper, Ernest B., American Charities and Social Work. 4th ed., New York, Thos. Y. Crowell, 1930, p. 212.
78. Nearly all the articles referred to in this essay as appearing in the JSSQ were actually addresses and papers presented during these national conferences. The JSSQ itself is a publication of the National Conference of Jewish Communal Service.

81. In the sociological sense of planned, specialized organization, governed by written rules and procedures, and characterized by a hierarchical system of staff organization.

82. Eisenstein, Ira, “Patterns of Living of the Jewish People on the American Scene,” JSSQ, Vol. XXX, Fall 1953.


85. Kraft, op. cit., p. 23.


90. A similar point is made by Marcel Kovarsky, who quotes a comment apropos of the Springfield survey: “A sectarian service, by its very existence, is an instrument of Jewish survival regardless of its specific content.” See Kovarsky, Marcel, “Current Purposes and Goals of Jewish Family Agencies,” JSSQ, Vol. XXX, Spring 1954.


96. Seventy-one per cent of all residents in homes reporting to the CJFWF in 1954 were seventy-five years of age or over. Yearbook of Jewish Social Service. New York, CJFWF, 1955, p. 26.


106. By 1951, community centers were operating 201 day camps serving over 40,000 children. See *AJYB*. New York, 1953, p. 144.


111. The JDC is known familiarly as "der joint" among Yiddish-speaking communities, and was thus called in DP camps. In French-speaking communities, it is referred to as "le joint."

112. From 1945 to 1954 the JDC assisted in the resettlement of over 600,000 persons, representing more than 60 per cent of all of Jewish immigration during the postwar period.


115. USNA issued a number of manuals for community groups dealing with the educational, occupational, and social-cultural integration of the refugee—e.g., *Organizing a Community Americanization Program*, 3rd ed., New York, USNA, March 1953.


119. By 1931, it was possible for one social work executive to write: "The average lay board member is notoriously incompetent. In some quarters membership is merely a matter of family inheritance. It is up to the professional to build up his board." Grossman, Marc, *op. cit.*, p. 86.


