

OPPORTUNITIES OF JEWISH CASEWORK AGENCIES *

by CALLMAN RAWLEY

Executive Director, Jewish Family and Children's Service, Minneapolis, Minnesota

It has seemed to me for some time that a Jewish casework agency of good standards needed no rationale and could justify its own existence by merely asking, "Would it be better for the Jews if there were no Jewish agency?" It is therefore refreshing to be part of a program which speaks of the casework agency's *contribution* to the Jewish community, not its rationale. If, however, an agency wants to consider what this contribution is, other than its good services, which the non-sectarian agency could also provide, it has to ask itself, what are its Jewish aims.

One would think that if anybody knew what these aims should be, it would be the people who have the responsibility for knowing, a board of directors. There is, however, only an awkward silence in this quarter. If pressed, they are more likely to confess that they feel that a Jewish casework agency cannot really be justified on Jewish grounds, but that it doesn't matter. The agency is here, it does good work, it is worth supporting, why upset the apple cart? An attitude perfectly in keeping with what is taught, that only two things matter in Jewishness, religion and Jewish education. Boards are therefore not prepared to

consider other components. Nor do they seem to be deeply interested in Jewish aims, their chief communal interests being service-centered, whereas laymen with more pressing Jewish needs and interests tend to gravitate towards synagogues and Jewish schools.

Under the circumstances, one of the first things we need to know in order to relate planning to a community's Jewish aims is to find out what they are. I suggest this, therefore, for research.

Obviously we have to have the kind of operation which makes us useful in the community's pursuit of the one Jewish aim which we can be sure of, that Jews should continue to be Jews, an aim not likely to be attained in an open society without a Jewish community which is personally meaningful and useful. It must not be forgotten that in this kind of society being a Jew is a personal choice and that the kind of psychosocial experiences a person has had determines the kind of Jewish identification he has. If they have been negative, I do not believe the choice can be reversed by Jewish education (would we have a problem if it could be?). To expect Jewish education to be able to compel a person's identification is to invest it with magical powers, a dangerous illusion because it diverts us from the pursuit of more

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promising solutions. After all, in Jewish learning, as in any other, we can only find what we are looking for, and that derives from our predisposition. A person who comes to it with feelings of alienation or rejection will find there the negative things to justify his feelings; and he who is positively predisposed will find exactly what he needs to convince him that a man has to be ignorant or very strange indeed not to be positively disposed toward such treasures—precisely the situation of course of those dedicated men who press so hard for the Jewish education of social workers.

The matrix of psychosocial experiences in which Jewish identifications are formed is, therefore, paramount. That the most significant of these occur in family life and community ties gives the family agency the strongest kind of institutional investment in them.

I see community ties connected to Jewish identification in the fact that, as I said before, in an open society Jewish continuity is made much more attainable when the Jewish community is personally meaningful and useful. If this is so, surely the family agency qualifies as one way in which a community makes itself meaningful and useful, for the family agency draws on and expresses one of the most endearing and least equivocal of Jewish motivations, good deeds, and expresses the community's concern and interest in the well-being of its members. This is felt most, of course, by clients, staff, and boards. If clients, for example, thought like sociologists, they might say, "I see by the agency that the Jewish community is an operational reality. It cares. The bond it has with me is shown by what the agency did for me, etc." Staff, on the other hand, would tend to build Jewish ties, it seems to me, by being the agent of that help, and boards by

being its trustees. All this tends to sustain and stabilize Jewish identification. Even those with a lesser connection to the agency are likely to get some of this effect, it seems to me.

This, then, is our institutional connection to Jewish identification. We have a much more visible and functional one, of course. It is our daily contact with the psychosocial experiences in the life of individuals and families which produce various kinds of Jewish identity. They do not come across in just that form, of course; they come across as relationship problems, or as depressions, anxieties, confusions, uncertainties, and so on. But if self-image, self-esteem, feelings about one's self, and the integrity of one's personal identity are involved in these problems, then it is reasonable to assume that to some extent Jewish identification is also, because it is a part of all these things. What a superb laboratory the family agency could be for researching this, drawing on its clinical knowledge and experience for research hypotheses. I had an experience recently which illustrates this.

I interviewed a woman who was agitated about her identity. She was married to a non-Jew. She would have liked her children to be Jewish (without Jewish content) but she didn't think this would be fair to her husband, so they were not being brought up as anything. Her parents were New York intellectuals, politically leftish and anti-institutional. Thus, although they never went to synagogue, all their friends were Jewish and there was much warmth, closeness, and good talk among them. She remembers this with nostalgia. In some mysterious way, this meant Jewish culture to her and it had a powerful pull.

Why then had she married a non-Jew? Because she had been caught in

a double bind. As a child she had never been able to please either parent. The more she was criticized by them, the greater was her need to do something to win their acceptance. The way to do it finally appeared when they sent her away to Antioch, a college noted for leading to mixed marriages, and when her mother revealed a wistful, sentimental attachment to a non-Jewish suitor she had had. It seemed to the daughter that if she married a non-Jew, she would be doing what the mother secretly would have liked to do if she had had the courage.

Alas, things are never as they seem in a double bind. When she became engaged, her parents liked the young man and encouraged her. After marriage, the other side of the double bind appeared: they let her know they would have preferred her to marry a Jew. So they had just set her up for another fall.

This case opened my eyes. I could immediately think of similar situations, three of them among personal friends. I realized then that it may not be an uncommon situation among Jewish families and that we had here a hot hypothesis to research on one type of origin of Jewish alienation: children in a double-bind type of relationship with their parents, who receive (usually covert) signals of approval for interest in non-Jews, are likely to inter-date and inter-marry in spite of overt signals of disapproval. I cite this as an example of the rich vein of research opportunities which lies in the family agency's clinical material.

What now about caseworkers' attitudes towards the introduction of Jewish questions into clinical practice? It is no secret that caseworkers are deeply suspicious and opposed. This is usually thought to be because of Jewish self-hatred and ignorance. They may indeed

be present, especially the ignorance, although it seems to me I have been seeing much less self-hatred in recent years. But the real nerve-center of this issue, in my opinion, is the belief of caseworkers that Jewish questions are anti-clinical in nature. They come by this belief quite honestly, and are supported in it by the two prevailing community attitudes towards Jewish identification questions, one that they are a person's own business, which you stay away from; the other that they are the business of the group to do something about. Hence, if a caseworker were to introduce Jewish questions into clinical practice, it would seem as if he were taking on group responsibility and be expected to act persuasive, didactic, authoritative, parental—hence, contrary to everything he has learned about how to be a good clinician. He is of course right: if he were to act that way, he *would* be up a creek. What is needed, therefore, is proof that it is clinically helpful or useful to deal with Jewish identity questions. I am sure that if this can be shown, even the biggest Jewish ignoramus and self-hater, would incorporate them into practice. Professional integrity would require it.

Let me therefore venture into this unexplored subject, with this precautionary note. The subject is fiendishly complex and difficult and will take our best clinical minds to think through. I can only lay out a few propositions and hope that they will start something going. The propositions are these:

A personal identity is compounded from all of the influences on a person's life. Among these is his existence as a Jew. Not everyone, of course, has an identity problem, but one can have it in any stage of life, and there are two stages when it is very *likely* to occur—adolescence and old age. When it occurs, it affects not only the person him-

self—but those with whom he lives, since members of a family have to respond to each other's lacks or sickness. Hence, it becomes a family problem as well.

Much more, of course, goes into a personal identity than Jewish identity, and I am not for a moment suggesting that the two can be separated. What I am suggesting is that if a client has a personal identity problem, it is sensible to explore and work as needed, with his Jewish identity problem also, particularly since it is so apt to be denied and concealed and therefore especially troublesome.

Now for a theoretical application to old age. This is a time when the prescribed responsibilities of daily work and parenting, into which the self seemed to disappear, are gone and only the self is left to draw what it can out of itself and its reduced environment. A person has never been in this situation before and must evolve a new self, as it were, to cope with it. What he already has as a birthright is his Jewish identity. He can make something of this with a richness never before experienced because this identity now is not being crowded out or subsumed by all the responsibilities extraneous to the self which inhere in working and parenting. And the place to explore and cultivate one's personal resources for this in this existential stage of life, is in the family agency with its clinical expertise.

With teenagers, one is on more familiar ground. A self is being formed. Models which have already been internalized are being integrated. Self-consciousness is more intense. Feelings are stronger. There is more confusion, more trial and error, more acting-out, and very little if any usable communication with parents.

The Jewish family agency is the one place where a professional who, the

child knows, understands both the adult world and the child's world, and is committed to helping him as a unique individual without denying or belittling any of his doubts or feelings of anger and alienation, will let him grope for his goals and models and develop a self suitable to his own resources and aims, without being didactic or authoritative and without the double talk and double standards to which parents are so vulnerable, yet himself stand squarely for Jewish identity and thereby serve as something of a model himself.

The Jewish family agency is the one place where the family experiences which are leading the child towards estrangement, hostility, or rejection of Jewish identity can be discovered and changed; where the family's communication system can be opened up and set on an honest basis; where parents can learn to understand their children; where parental manipulation, exploitation, double binds, and scapegoating can be corrected; where, in short, a family life can be worked out which is favorable to a child's undistorted personality development and Jewish identity.

I hesitate to use the word *unique*, but it seems to me that the family agency really does have a unique opportunity to deeply affect the Jewish identifications of old people and teenagers by clinical means, which, to be sure, do not have this as their chief aim, but are perhaps more effective because of that. If it does this—and other opportunities in other casework areas will come to light to those who look with Jewish aims in mind—the family agency will be carrying out a Jewish community aim and will be able to take its place with pride with the school and the synagogue as a Jewish community agency and people will finally get the point and stop wondering about the rationale for a Jewish agency.

With regard to Mr. Bernstein's ques-

tion, now, about programs of Jewish education for caseworkers. In my opinion no such program has a chance until caseworkers are convinced that Jewish issues are not anti-clinical. When this happens and when boards have taken a stand on Jewish aims, then staff discussions and seminars on Jewish topics can create a climate for encouraging Jewish identifications, Jewish aims and feelings of solidarity by making these a group expectation. I would myself, however, go in less for the traditional type of learning in which models for present day application are located in our past—by stretching things slightly, such models can be found, but so what?—and more for learning the sociology of American Jews and the tasks confronting us in creating a Jewish community, a Jewish sub-culture, a meaningful religion, and so forth—present day realities, hence dynamic.

Let us get on now to another dimension, long-range planning. The Jewish Family Life Center idea suggested last year by Greenberg and Zeff, had its antecedent in an unpublished document called *Prospectus for Long-Range Planning for Family Agencies in a Metropolitan Area*. This prospectus represented an attempt by five leading family agency executives, 3 non-Jewish, 2 Jewish, to assess the situation of the family agency—institutional changes within social work, trends likely to affect the need for family services, funding prospects, etc.—and to suggest an inventive program for the future which would maximize our usefulness. The prospectus identified the treatment of family pathology as our present chief product and did not think that needed to be changed. On the contrary, it thought that we had just begun to realize its potentialities and that one major thrust of the family agency might simply be the highest possible improvement of this product.

The prospectus went on to suggest two other possible major thrusts, closely related to family pathology and hence complementary to the improvement of treatment techniques: (1) preventing family pathology, and (2) improving the efficiency of the non-pathologic family. It was assumed that in order to develop such a program, even in the planning stage, experts from other disciplines would be needed. The name suggested for the agency carrying three such functions was Family Life Center. A few specific new services were suggested in the prospectus, similar to those proposed by Greenberg and Zeff, but these were just by way of illustration.

This prospectus has had an interesting history. It made quite a stir at the Large Agency Executives meeting in Miami two years ago. It immediately made some friends, and some enemies. The enemies were those who had a strong conviction that the family agency's obligation was to be a community servant ready at all times to do whatever the community wanted it to do and to serve wherever and whatever the need was. This meant to keep the status quo and just take each thing as it came along. Since non-sectarian family agencies in large cities are barely able to keep up with client needs now, these men did not see how an ambitious new program could be launched without neglecting these needs. Essentially the position was that the family agency was not its own master and could not therefore do long-range planning.

The friends of the prospectus, of course, disagreed. Leading United Fund executives took a position somewhere in-between; they were excited by the long-range planning itself, somewhat apprehensive that it might lead to some neglect of low income families, and at a loss, understandably, to know how such a program would be financed. Under

consideration now is a one-day meeting with family sociologists, a "think" session to delineate the scope and specific characteristics of a viable program for improving the efficiency of the non-pathologic family and to explore the possibilities for collaboration between family therapists and family sociologists.

I am not, however, optimistic. The powerful federal push on poverty and the absence of any counter-push or encouragement for creative local planning in other directions leave the non-sectarian family agency, together with welfare councils, little choice but to jump on the bandwagon. Planning, with money to back it up, comes more and more from Washington. For purposes of long-range planning, therefore, the non-sectarian agency, with perhaps an exception here and there, seems to me bogged down for the foreseeable future.

The Jewish agencies are not in that situation. They are not expected to serve all the people in a metropolitan area, only a small part, a selected community. They are not, therefore, restrained in our planning by federal programs aimed at whole metropolitan areas, nor overwhelmed by problems of the poor. We are freer to do long-range

planning, and hence, have a much greater opportunity.

The opportunity, of course, is not limited to the long-range plan I mentioned, vast as that is in scope. More limited innovations might, in fact, be more attractive for the immediate future. For example: a teenage clinic along the lines developed in London; a communication clinic, possibly inter-generational; a project for helping Jewish schools set up a climate favorable to children's forming positive identification, a project in which there would be consultation to teachers, a study of school drop-outs and children's identifications, and direct help to those children and their families who are school problems even in a favorable climate. And so on.

Wherever we turn, Jewish aims bring us into a necessary collaboration with other Jewish organizations. Hence, a community structure for facilitating and ensuring ongoing collaboration is necessary.

I invite Federations to consider how much all these opportunities are their opportunities and their responsibilities too and to roll up their sleeves and help us with the extremely complex and costly tasks which lie ahead if we are going to do anything with them.