

Yiddish: It's More than a Language; In-Service Training for Staff of a Jewish Home for the Aged

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... the workshops [on Yiddish] heightened sensitivity to our residents' roots and created a bond among all those that shared this special experience.

"Linguistic sensitivity is needed to prevent negative judgments and to overcome communication problems."—John A. Cormican.¹

Laverne Harris* is a newly-employed nurse's aide at the Hebrew Home for the Aged at Riverdale. Each morning, she assists Hyman Meyerson*, a wheelchair bound 91 year-old patient, with his preparation for the day. On Ms. Harris's first Saturday tour of duty, Mr. Meyerson announced that he would like to go to "shul".

Knowing that Mr. Meyerson has difficulty speaking and frequent memory lapses, Ms. Harris assumed that her patient had mispronounced the word, school. She gently put her arm around Mr. Meyerson and assured him that he was no longer required to go to school. When Mr. Meyerson again impatiently insisted that he be taken to *shul* because he was late, Ms. Harris sought help. Her supervisor, a long-standing employee of the Home, explained that *shul* is the Yiddish word for synagogue, and that Mr. Meyerson's request reflected a lifelong tradition of attending Sabbath morning services.

* All names are fictitious.

The Home, Its Residents and Its Staff

The Hebrew Home for the Aged at Riverdale is an 1100-bed long-term care facility, providing skilled nursing, intermediate care and adult congregate living. The disparity between the cultural, racial and ethnic patterns of staff and patients at the Home is similar to that of the majority of Jewish homes for the aged across the country. While admission policies are nonsectarian, as would be expected for an Orthodox Jewish facility 99 percent of the resident population is Jewish. Currently, approximately 80% of the residents are European-born (essentially eastern Europe), a decrease of about 10% in the last decade. The majority of these residents learned Yiddish as their primary language. Today it is part of the institutional culture and their lives through the synagogue, music programs, reminiscence and continuing education. The average age of the residents is 86½ years; their average length of stay is almost five years.

In contrast, the Home's staff of 800 employees is ethnically diverse. Eighty

to eighty-five percent are of racial and/or ethnic minorities, including American and Caribbean Blacks, Portuguese, Hispanics, Phillipinos and Orientals. Although precise statistics are not available, it is estimated that 30% to 40% of the staff are American-born. While the ability to speak English is a requirement of employment, English is a second language for some 20% of the staff. Similar to the resident population, the staff are also of long-standing tenure: more than 70% have worked at the Home for five or more years.

Implications of Differences in Language and Culture

Loneliness in old age is accompanied by a variety of physical and emotional losses. These are further exacerbated by the lack of opportunities to communicate in one's native tongue, and the ensuing cultural isolation. It has been observed that the disoriented bilingual elderly are frequently more responsive in their primary language, and that using it can open windows to their minds and feelings.² To know the residents of the Hebrew Home for the Aged at Riverdale, and presumably many of the Jewish institutionalized elderly, it is necessary to know the world that shaped them, and to have an understanding of the Yiddish language in which their experiences are recorded.³

Among the many differences between the resident population and the staff, a language barrier such as the one described in the above encounter is clearly the most difficult to overcome. It has been suggested that "hiring someone who is fluent in a foreign language might be just as essential as hiring a person who gives outstanding physical care to the patient."⁴ As the pool of Yiddish-speaking health care professionals is seriously limited, alternative approaches are necessary.

A Change in Attitude

It is interesting to note that despite the growing attention to the ethnicity of the staff and the sophistication of in-service education at the Hebrew Home, only limited attention had, until now, been paid to the need for improving the staff's understanding of the world of Yiddish. The reasons for this lie in the combined attitudes fostered by our Founding Fathers, by the immigrant residents themselves, and their first-generation, American-born children.

The immigrants' retention of the old-country language, religion and customs was viewed by the founding Americans not merely as habitual and nostalgic, but also as ideological and political, and therefore a threat to American unity.⁵

The immigrant, grateful for the unparalleled opportunities which America provided and eager to comply with the demands for Anglo conformity, jettisoned Yiddish very rapidly.⁶ Their children, in a further quest for Americanization, viewed Yiddish as old-fashioned, a language spoken by "greenhorns". Yet, in the past decade we have witnessed a resurgence of interest in Yiddish on the part of young Jews.

Certainly, one contributing factor is the celebrity status it attained through the naming of I. B. Singer, the Yiddish writer, as the winner of the Nobel Prize for literature in 1978. Still another explanation is provided by Marcus Lee Hensen, the historian of immigration, who formulated the principle of the third generation interest: what the son wishes to forget, the grandson wishes to remember.⁷ An outstanding example of this is the founding of the National Yiddish Book Center by a group of dedicated young people committed to the preservation and promotion of Yiddish culture by gathering and recycling Yiddish books to students, scholars and university libraries throughout the

world. Through a common interest in salvaging Yiddish books, Jews in their 20's and 30's are being brought together with those in their 70's, 80's and 90's.

In the "Lively Life of a Dead Language,"⁸ Joshua A. Fishman describes the importance of language as a function of culture and the wide array of Yiddish cultural activities which are available in America today. The visibility of Yiddish language and Yiddish-related programs has increased in the media, in the theater and in course offerings in elementary and secondary schools, colleges and community centers. It is in this context of increased curiosity, heightened interest and new vitality that the series of workshops entitled "Yiddish: It's More Than a Language" was recognized as a learning priority at the Hebrew Home for the Aged at Riverdale.

Planning Stage

While this continuing education series actually took place during the Winter of 1985, it originated some five years earlier with the identification (through a staff Patient Care Committee meeting) of the need for an easy-to-use glossary of Yiddish terms. A short "phrase conversion" chart was developed which included translations of phrases like "Good Shabbos," "How are you?" and "Where does it hurt?" This glossary was distributed with a note reminding staff that some residents, when agitated, either preferred or were only able to speak in Yiddish. The glossary was, however, an inadequate patient care tool. It engendered neither fluency, recognition, comfort nor motivation to use it. Actual training by an individual who could link the seemingly amorphous language and culture directly to patient care seemed the best solution.

Earlier publication has described the Hebrew Home's programs to "accultu-

rate" a multicultural staff to understand and respect major Jewish Holidays and traditions, and the psychological effects engendered by them.⁹ The Yiddish-language workshops became an extension of the education offered in these series.

An informal steering committee, comprised of the authors of this paper, developed the guidelines for these workshops. Within this small committee, individual roles and responsibilities were important. The instructor brought the knowledge and skills, the Home's "on-site Yiddishist" (the Director of Community Affairs) provided the link between this information and patient care concerns, while the administrative presence brought organization and structure.

The following course goals and objectives were developed:

Goals:

1. To familiarize staff with the world of Yiddish; the language, the culture, the history, and its creative continuity.
2. To explore practical applications of the Yiddish language in the day-to-day contact with residents.

Objectives:

1. To discuss the role of Yiddish in the lives of the residents.
2. To demonstrate the use of Yiddish language as a means of improving relationships between residents and staff. As such, to develop vocabulary lists including words, phrases and expressions which can be easily interspersed with English to create meaningful communicative links with residents.
3. For staff totally unfamiliar with the sound of the language, to recognize it and respect its usage by residents, and to differentiate it from random expressions of demented patients.
4. In accordance with the increased universal interest in the Yiddish language, to provide the staff an opportunity to learn and appreciate the reasons for this resurgence.

Prior to the start of the workshops, the instructor observed patient/staff interactions and activities, and held meetings with key patient care staff to discuss their Yiddish language needs,

thus developing specific teaching strategies. The course was organized as four weekly 2-hour workshops. The time commitment established a sense of partnership between the Home and the participants, as each contributed one hour per workshop. Box lunches were available at a minimum cost to attendees.

Notices were distributed to Department Heads indicating the sessions were open to all staff with their supervisors' approval. Simple telephone pre-registration was required. Class size was projected at between 15 and 30; in fact, twenty staff members registered for the workshops. An overview of the participants indicates a broad mix among departments as well as among positions and responsibilities.

Participation by Responsibility/Position

Patient Care:	
"Hands on"	7
Supervisory	3
Department Heads	4
Administrative	2
Clerical	2
Other staff	2

The average tenure of "students" at the Home was 7.7 years, ranging from one month to almost 20 years. Half the class was Jewish.

At the beginning of the first class, the registrants were asked to complete a questionnaire to ascertain their knowledge and specific motivations. Forty percent of the responses indicated a desire to communicate better with and/or understand the residents; sixty percent suggested a more personal motivation. Of the participants, one was fluent and two had a partial Yiddish vocabulary. The majority of enrollees did have an acquaintance with Yiddish, either through actually hearing Yiddish songs on the skilled nursing units or through their personal reading of Yiddish stories in translation, most commonly those of

Sholem Aleichem or Isaac Bashevis Singer.

Methodology and Materials

Two interfacing themes, *velt* (world) and *mentsh* (individual) provided the foundation of the methodology, the materials and the organization of workshops. The concept of reaching out to the individual through the world of Yiddish was the recurrent theme throughout the series.

The purpose was not primarily to teach the language, but rather to introduce participants to the world of the language by defining its components and demonstrating samples of each of these components. The instructor strove to engage each participant in an interactive learning experience with emphasis on feelings, joy and sensitivity. For example, songs rather than memorization were used to teach practical vocabulary. The workshop format was structured to create a mini-environment that meshed the conceptual, philosophical and attitudinal aspects with practical applications.

Each session included the following elements:

The World of Yiddish—a variety of reading materials was distributed which formed layers of culture and systematically expanded the participants' knowledge, e.g., "Basic Facts About Yiddish" (G. Fishman), and "Yiddish Theater Lives, Despite the Past" (I.B. Singer).

Discussion—The previous week's assignments were reviewed and participants shared their trial and error use of the language.

Language Lab—This was accomplished through songs and dialogue with the use of vocabulary lists and song sheets. All lists were written in Yiddish on the right-hand side, with an English transliteration on the left. Space was provided for students to write in translations in the center. This allowed for active participation and for differences in language ability among the staff.

The Current Use of Yiddish—Through "Show & Tell," the instructor shared a variety of books, records and films.

Review—Each session culminated with a review of all materials learned to date. Participants left singing the sounds and songs of the language.
Homework—Suggestions were made for practical applications of the material which had been presented during each session.

Overview of Content and Materials

- Session #1—Each participant received a “World of Yiddish Starter Kit” with an “I ♥ Yiddish” button fastened to it. The kit included two sections: one on conceptual and philosophical materials, and the other on practical and applied.
- Traditional greeting of *Sholom aleykhem* was taught through song.
 - Discussion of participants’ knowledge and association with the language.
 - “Courtesy” and “Compliments” vocabulary.
 - Group shared their professional area of expertise, and how this affected their needs and interest in Yiddish language.
 - Literature was distributed on the importance of the language to a geriatric population.
- Session #2—Yiddish in the context of Hebrew and Aramaic
- The misconception that Yiddish is associated solely with old people and the old country.
 - The impact on Yiddish of historical movements, such as the Haskelah, pogroms, assimilation, Zionism, communism, and the Holocaust.
 - Vocabulary concerning health, days of the week and counting.

- Session #3—Dialects, e.g., *Litvakes* and *Galitsyaner*.
- The importance of according the older person dignity, e.g., the distinction between “ir” (the formal second person singular “you”) and “du” (the familiar form).
 - Geography of the Yiddish language, past and present.
 - Vocabulary concerning listening, seeing and key verbs.
 - The film *Mame Loshen* (Mother-Tongue), which includes testimony of celebrities, experts, born-again Yiddishists and older people.

- Session #4—*Syum* (closing event). Discussion of the importance of a *syum* in traditional Jewish learning.
- Review of the materials which had accumulated in the participants’ kits.
 - Comments on the current world of Yiddish. The National Yiddish Book Center, YIVO, *The Golden Land* (a musical production).
 - Presentation of Yiddish-language skits by participants.
 - Discussion of Yiddish at the Home, with observations by the Rabbi and the Medical Director.
 - Song Fest: all eight songs taught during the series were sung.

Impact and Observations

As is current practice with in-service educational programs conducted at the

Home, the participants were asked to evaluate the experience at the final class session. An overview of the results indicates that 100% of the participants felt the workshop was "very interesting"; 75% indicated that this training improved their understanding of the topic a great deal; 75% said that the workshop would improve their job performance either "a great deal" or "somewhat"; and 75% felt that the program was "excellent" overall.

From a logistical standpoint, the lunch hour was viewed as very convenient, four sessions the appropriate course length, and the level of the presentation "just right".

Perhaps the finest testimony to the success of the series emanated from the comments and actions of the participants. The following quotes are illustrative of the positive response of several non-Yiddish speaking staff members:

"I'm having so much fun using the material. On Tu B'shvat I wished residents *Gut yontev*." (Administrator)

"I used to start my communication group for the cognitively impaired with 'Welcome'. I now say 'sholom aleykhem', to which the patients automatically respond. 'aleykhem sholom.'" (Speech Therapist)

"When I told the residents that I'm learning Yiddish, they said 'It's about time!'" (Leisure Time Activities Worker)

"A key word or phrase like '*Heybt di fis*' (pick up your feet) can engage a reluctant resident in necessary therapy." (Occupational Therapist)

The creative and innovative teaching methodology was tailored and personalized to the needs of the staff. For example, the Director of Pharmacy asked for a vocabulary list which would enable him to intersperse such Yiddish phrases as *nemt tsvey piln a tog* (Take two pills a day), *geyt zen dem dokter* (go see the doctor). These and other materials were all added to the "World of Yiddish" kit which evolved as an excellent resource tool for staff.

Speaking to the residents in Yiddish is a form of affirmation and acceptance. It is received so warmly and with so much pleasure because it is outside the realm of their expectations and imagination.

Three months after the Yiddish in-service training, participants were polled to determine their interest in additional Yiddish-related activities and/or training. There was considerable interest in a combined staff/resident Yiddish film series, a continuing education class and a Yiddish chorus.

Recently, departments were surveyed to evaluate interest in another series on "The World of Yiddish". The response was especially encouraging, as it indicated interest within several departments heretofore not reached. A desire to participate was indicated by 21 individuals, representing the Dietary department (10); Physical Therapy (7); Nursing (2); Volunteer and Community Affairs (2); and Administration (1).

Within this new group of potential attendees, three have a minimal Yiddish vocabulary. Ninety percent of these individuals indicated a desire better to communicate with patients and residents as their primary motivation.

A future series would include more emphasis on pronunciation, with accompanying tape cassettes; a "complaints" vocabulary list; and the development of a support system for follow-through at the culmination of the series.

We feel that the workshops heightened sensitivity to our residents' roots and created a bond among all those that shared this special experience. In all, we believe we accomplished our goal of portraying Yiddish as more than a language.

An Afterthought

The role of Yiddish language in the personal lives of future generations of

elderly Jews seems uncertain. What is clear is that historically it will continue to be important to understanding the traditions and customs of Ashkenazic Jewry. "Together with Hebrew, Yiddish is the key to one thousand years in the life of the largest branch of the Jewish people and to Jewish culture as a whole".¹⁰ Hence, *de velt fun Yiddish* (the world of Yiddish) will continue to impact *dem mentsh mit Yiddish* (the individual with Yiddish). Its emphasis may perhaps change from being *vokhedik* (ordinary—an everyday occurrence) to being *yontevdik* (special — as a holiday occurrence). "With Yiddish, our Jewish experience will be fuller, more throbbing, more colorful, more varied, more continuous, more authentic."¹¹

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