

Breaking Silence: Serving Children of Holocaust Survivors

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... there exists a . . . void regarding a systemized body of knowledge pertaining to the non-clinical population of children of Holocaust survivors and the kinds of services that can be provided for them and by them.

Slam shut the door on misery past;
Bodies burning, chambers of gas.
Slam shut the door on hunger and pain;
Numbered tattoos, the triumph of Cain.

Slam shut the door on death and despair;
Sons at the slaughter, too much to bear.
Slam shut the door on history's Hell;
I didn't ask, you didn't tell.

Slam shut the door on silence instead;
I'm ready to hear, in spite of my dread.*

The last few years have been witness to consciousness-raising tendencies that have affected a wide range of groups within our society. People sharing common life experiences, sexual identities and ethnic backgrounds have been coming together to discuss and seek support from one another. Utilizing the concept of people sharing commonalities and having a design for human relations, the Mayer Kaplan Jewish Community Center of Skokie, Illinois launched its first support group for children of Holocaust survivors in July of 1977. Since the group's inception, we—its facilitators and the authors of this article—have maintained weekly process recordings. After carefully examining these reports, it became apparent to us that specific themes around particular issues had been expressed. In most instances, these themes reiterated the same suppositions regarding the behaviors attributed to children of survivors

* Poem by Minna Davis

that are already described in the literature. This article offers, as well, observations and postulations derived from the information and feelings the group members shared directly with us. For the most part, we have paraphrased their exact statements.

For the purposes of this article, we define survivors as those individuals who lived through the concentration camps, work camps, ghettos or in hiding: or those who were driven into exile, as was the case with Eastern European Jews who sought refuge in Russia and German Jews who fled prior to the imposition of Hitler's final solution. Children of survivors are those children who were born after the Holocaust, or those who had been removed from centers of persecution before they themselves could suffer from it directly and who were subsequently reunited with one or more of their parents.¹

The primary aim of this article is to help sensitize professionals to the needs of survivor families. Esther Appleberg addresses herself to this purpose when in the late 1960's she wrote that the profession had failed to recognize or consider the far-reaching generational effects of the Holocaust. She strongly suggested that the problem in the profession regarding this phenomenon was that the professional was avoiding coming to grips with his own per-

¹ Judith S. Kestenberg, "Psychoanalytic Contributions to the Problem of Children of Survivors from Nazi Persecution," *Israel Annals of Psychiatry and Related Disciplines*, Vol. 10, No. 4 (1972), p. 320.

sonal feelings and attitudes regarding the Holocaust including the wish that the whole thing would simply disappear.² Terence Des Pres makes the point even more strongly when he states that professional and lay people alike seem to reject the survivor in order to maintain their own psychic balance.³

In illustration of this point, one of the members of the group related the following experience:

Last month I visited open house at the local Jewish museum. Before going, my mother asked me to check the memorial list for names of relatives that she had submitted to the Holocaust exhibit. When the tour through the museum brought me to the list, I stopped to look for the names of my relatives. The tour guide took note and asked me what I was looking for. When I told her that I was a child of survivors and I was looking for the names of lost relatives, she acted as if she was trying to physically distance herself from me and she exclaimed, "Oh my God!" Someone else on the tour giggled. I was so upset that I ran out of the museum and walked down Michigan Avenue crying.

The other group members could not understand what they described as the tour guide's insensitivity, and they collectively supported the supposition that Jews not directly linked to the Holocaust usually react that way.

The generational phenomenon often attributed to children of survivors implies a unique cause and effect relationship. The way in which the survivor parent integrated his life experience, particularly the Holocaust experience, has an effect on the functioning of his/her child. In order to explore the issues faced by children of survivors, it is essential to strive to understand not only the child, but the parent, because their lives and personalities are

² Esther Appleberg, "Holocaust Survivors and Their Children," *The Jewish Family*, ed. Norman Linzer (New York: Commission on Synagogue Relations, Federation of Philanthropies of New York, 1972), p. 111.

³ Terence Des Pres, *The Survivor: An Anatomy of Life in the Death Camps*, (New York: Oxford University Press, 1976), p. 170.

bound together in a way not seen in other families.

Before proceeding to characterize survivors, it is vital to heed Furman's strong warning against generalization. She emphasizes that each individual came to the camps with different personalities and at different points in their lives. Each had specific experiences in the camps and each has had different experiences since the liberation.⁴ About the only generalization that can be safely assumed is that the survivors survived and that many of them subsequently had children.

Niederland attributes the following symptoms to what he calls the "concentration camp syndrome:" *anxiety* (fears, sleep disturbances, nightmares, and various triggered phobias), *disturbances of cognition and memory* (amnesia and time distortion), *chronic depressive problems, alteration of personal identity and psychosomatic diseases*. The camp experience also contributed to a high degree of *organic debilitation*.⁵

Joel Pupko, Hillel rabbi at the University of Illinois, recently related an experience that exemplifies the first two symptoms Niederland lists. It seems that every time it snowed, he would have to call up a particular survivor parent to assure her that her college-age daughter had arrived safely at her classes. Near the end of the war, as the Russian army was advancing from the east, the Nazis had forced this mother, her younger sister and all the other camp inmates to march westward through a brutally cold winter. It was during this march that she lost her younger sister. Since that time, snow has aroused these same

⁴ Erna Furman, "The Impact of the Nazi Concentration Camps on the Children of Survivors," *Proceedings of a Symposium at the Joint Meeting of the International Congress of Child Psychiatry and Allied Professions and the American Association for Child Psychoanalysis*, (Jerusalem; August, 1970), p. 379.

⁵ William G. Niederland, "Clinical, Social and Rehabilitation Problems in Concentration Camp Survivors," *Journal of Jewish Communal Service*, XLII (Winter, 1965), pp. 186-191.

fears, which she now projects on to her daughter. This illustration strongly suggests that there must be an effect on the child by having to deal with her mother's seemingly irrational fear. Applebaum's chastisement of us for not realizing the influence that this syndrome had on the children of survivors and not taking this into account during the treatment process cannot be ignored.⁶

At the time of liberation many youthful survivors found that they had lost most of their families and communities. As a result, many entered into hasty and ill-planned marriages in order to alleviate the sense of anomie that was felt.⁷ Languishing in DP camps, they found their way to our large cities and small communities, wherever a sizable Jewish community existed. Their adaptation to the "American way of life" was seemingly remarkable and they quickly achieved what could be described as a normal family life. However, simmering beneath this benign exterior was a witches' brew of unresolved conflicts and repressed horrors which did not emerge until twenty to thirty years later. When they then came to our social agencies, clinics and therapists, most of the profession did not realize or want to realize the importance of their past experiences as a possible source of their pain. The right questions were not asked and the survivors did not volunteer the information.⁸

It was not until the mid-1960's that it was recognized that the effects of the Holocaust experience had been passed on to the next

generation and a second generation in distress emerged.⁹

Before describing what the literature reveals regarding children of survivors, it is important to note that the data are extracted basically from a clinical population. Although we have identified similar patterns of behavior in the individuals in the group, let us not forget that like their parents, children of survivors are unique and distinct individuals; and, as a group, they have generally found healthy ways of dealing with their lives. Many of them may be emotionally scarred, as were their parents, but they are not walking around bleeding.

Trossman states that children of survivors see themselves as objects in their parents' eyes. He adds that these children must give special meaning to their parents' empty lives. They must *make up for lost objects* (people), goals and ideals, and vindicate the suffering that their parents had endured. These children become symbols to their parents and themselves and are invested with meaning and expectations which far exceed their own. *Trust* or the lack of it is also a real issue. The parents are excessively protective and constantly warn their children of impending danger from what they perceive to be a hostile world.¹⁰

One of the group members said that he was always on guard; there was an image he was supposed to project. Several other members told him that it was O.K. to keep his feelings inside and private and that it was natural to do so. We were keenly aware of the group's discomfort with respect to expressing feelings and we sensed that there was an initial desire to avoid dealing with the breakdown of any barriers.

During another session, one of the men in the group indicated that he did not reach out to other people and that he expected them to

⁹ Lenore Podietz, "The Holocaust Revisited in the Next Generation," *Analysis*, No. 54 (December, 1975), p. 1.

¹⁰ Bernard Trossman, "Adolescent Children of Concentration Camp Survivors," *Canada Psychiatric Association Journal*, XIII (1968), pp. 121-123.

prove themselves to him. Another group member exhibited serious difficulty in accepting gestures of friendship that other group members had offered. She stated that although she knows that the intentions were genuine, deep down she did not trust their sincerity.

Other behaviors identified are *severe depression* caused by internalization of anger against how they were dealt with by their parents¹¹ and their feelings of guilt, i.e., "how can I express the anger that I have towards my folks after all they've gone through?" Several group members said that as adolescents they had seriously contemplated suicide and that there were periods in their lives where they felt totally immobilized and depressed. One group member had actually attempted suicide when he was in college as a way of expressing the anger and frustration that he felt towards his parents.

Two additional issues of concern for group members were *the feeling of being overburdened* and *a loss of autonomous growth*. Wanderman attributes the former to the child having to compensate for the parents' sense of worthlessness, and the latter to the parents' attempts to secure their own identities through their children, thus hindering the child's own ego development.¹²

Group members expressed the feeling that their task was to give renewed meaning to their parents' lives—on their parents' terms—and that they were to make up for all the suffering. Their parents did not always have to verbalize this message but it was loud and clear nonetheless. They lived with their parents' nightmares, tattoos and illnesses . . . they knew. Slowly they were able to recognize that the burden to feel responsible not only for one's own life but also for one's parents' was overwhelming. One member said with tears in her eyes that she would do anything to please her father. Another expressed concern that her father might die soon although she had no special reason to think so; therefore, she said, she could not share feelings with him that

¹¹ Wanderman, *op. cit.*, p. 117.

¹² *Ibid.*

might distress him. The consensus of the entire group was that there was an overwhelming need to give their parents *nachus*.

An anecdote which illustrates the strong desire to *suppress the child's own pain for fear of causing the parent pain* was told by one of the women in the group:

I was about nine years old when I hurt my ankle playing volleyball in school. I pleaded with the gym teacher not to call my mother and said that it was nothing but a slight sprain. I told her that my mother was very sick (she wasn't) and that I didn't want to worry her. Somehow, I was able to hide my pain and convince her that I was O.K. I walked around in agony for days, and it wasn't until later that I found out that I had a hairline fracture.

Another aspect of the *nachus* theme was expressed via the issue that had to do with *an insatiable need to achieve*. Some said, with little variation, "What I'm doing is not enough; whatever I do, it's never enough." Because of this constant need to strive and achieve in an attempt to live up to their parents' expectations, there seems to be little pleasure in accomplishment. Children of survivors are always looking to the next goal before the prior one is even attained. One of our group members stated that all his life he worked and planned to be a doctor—that was his goal. Now that he was a doctor, it was no big deal, and he was searching for another goal. The feeling of constantly having to strive and do takes the joy out of achievement. There always needs to be something more. One said that he could only justify going to the beach if he took a book along because time could not be wasted.

In reference to the loss of autonomous growth, our experience with the group has led us to conclude that the most significant theme regarding the parent-child relationship is that which is the major task of adolescence—*the child separating from his parents*. It is that issue that has evoked the most stress and seems to be the most critical to the healthy development of our group members. One only has to

visualize the line-ups in the ghettos and the camps to comprehend the desperate attempts of the survivor parent to keep the family intact. On the surface it might still appear that the struggle to cut the umbilical cord is not different for children of survivors. However, there are some parts of that issue aired by our group members that may shed some light on the uniqueness of that process as experienced by them.

Daniel is an only child, twenty-seven years old, married and a Ph.D. candidate at a local university. He left the east coast several years ago because, as he said, he just had to get away if he was to keep his balance. He shared with us that he had thoughts of suicide and despair when he was a teenager and less overt guilt for having deserted his parents and causing them pain. Recently, he asked the group to help him relate to his mother when he and his wife visited his parents during an upcoming vacation. He anticipated that it would be as catastrophic as always. He said that his mother always made him feel like a little boy and he seemed inadvertently to assume that role no matter how he tried to relate to her as an adult. Daniel has made a geographic separation from his mother, but he is still struggling with the relationship.

Frank, unlike Daniel, still lives with his parents. He is twenty-four years old, single and an apprentice journeyman. He has spoken often of wanting his father to pay attention to him, offer him praise, approve of him. His choice of vocation is even tied to his father's dictum, "Those with a trade survived the camps." Although he has exhibited rebellious behavior, he has done so to get a "rise" out of his father, what Frank refers to as attention. The more Frank describes his father and his father's values, the more it seems that he is like his father as if the two personalities have melded together.

Unlike Frank, his sister Ruth seems to be coping with her separation in a more appropriate way. Rather than succumb to her father's injunction to learn a trade, against her parents' wishes she left home for college where she paid her own way and graduated as a teacher of the handicapped. While at school,

Ruth immersed herself in college life and sororities in order to disassociate herself from her past and her parents. Ruth now has her own apartment and usually spends Friday night with her parents and siblings. She describes her relationship with her father as better than it has ever been because she states that she is no longer trying to change him or win his approval. Ruth also expressed feelings of guilt for having rebelled against her parents, but feels strongly that she has done the right thing.

Ruth's and Frank's family deserve closer examination in that the family seems to follow closely the characterization in the work of Aleksandrowicz in Israel. He studied twenty-five families and found that in one-third of them, the survivor parent, a strong, intelligent and capable individual, had married someone who was far below his/her socio-cultural level. As a result, parental authority was not so much inconsistent as out of balance—one parent being despised and rejected and the other being admired and respected.¹³ Ruth verbalized that she saw her mother as a "weakling" and her father as being incredibly strong. Other members of the group voiced similar feelings towards their parents.

The adolescent stage of the group members' lives continued to emerge as a major issue. Adolescence is a particularly difficult period for the survivor family in that the child's adolescence usually corresponds to the time when the parents' traumatization occurred. During adolescence, children of survivors strive for the independence and the libidinal freedoms which were denied their parents who as adolescents in Nazi Europe had to inhibit emotional and instinctual impulses for the sake of survival. This often sets the stage for combat between the child of survivors and his

¹³ Dov R. Aleksandrowicz, "Children of Concentration Camp Survivors," *Yearbook of the International Association for Child Psychiatry and Allied Professions, The Impact of Disease and Death*, (New York: Wiley Interscience, 1973), p. 388.

parent(s).¹⁴ All of the members of the group characterized their adolescence as being full of anxiety, intense and stormy, and there continue to be many unresolved issues regarding this phase in their development.

In light of the intensity of the separation process and the many unresolved issues, many of our group members indicated that there was *a great deal of difficulty in communicating with their parents*. When we initially asked the group if there was anything they could do to open the lines of communications between themselves and their parents, the majority answered an emphatic, "no." They stated that there was very little common ground between themselves and their parents and they described their feelings towards an attempt to communicate as hopeless.

In Yiddish there is an old saying, "You should live to be 120 years old." Among survivors the saying is a bit different, "You should live to be 126 years old." The statement indicates to us that to many survivors the years spent in the camps are something to be forgotten and not to be discussed, especially with one's children. The information children of survivors obtain either by "osmosis," what they were actually told or what they imagined their parents endured, has had a profound effect on their own psyches.

When the question was raised, "How much do you know about your parents' war experiences?", the following responses were elicited. One member said that she rarely spoke to her parents about their war-time experiences because she knew it caused them a great deal of pain. Another said that his father never discussed it, and, although his mother spoke often, it was about her life before the war. In another member's family, the subject was "hush-hush;" better to forget it and go on living. Yet, she recalls always being aware of some deep, dark secret. One of our members recalled a story she had overheard when she

¹⁴ Hillel Klein, "Children of the Holocaust: Mourning and Bereavement," *The Yearbook of the International Association for Child Psychiatry and Allied Professions*, *op. cit.*, p. 406.

was ten when she first discovered that her father had previously been married and both his son and first wife were killed during the war. She described her reaction thusly, "It knocked the wind out of me; I could hardly breathe." Another member revealed that when he was ten years old, his mother told him that she had been married before and her husband had been killed. His first reaction was to ask her if they had had any children. When she said, "no," his response was, "Thank God."

After seeing and listening to the children of survivors who have passed through the group from its beginning as well as those who are now committed participants, we could not help but notice that those children whose parents shared openly and appropriately their war-time experiences seemed to have less difficulty dealing with the parent-child relationship and all of its various aspects. An example of how that information was helpful in gaining insights which may have enhanced the parent-child relationship follows:

My husband and I really had to get away for a weekend alone, and I asked my mother if she would stay with my two-year-old daughter. At first she refused; but, after a lot of pressure from me, she reluctantly consented. Upon our return, my mother enumerated all of the things that had gone wrong. I felt a great deal of anger and resentment towards her since other grandmothers took care of their grandchildren. I later learned from my aunt that my mother had been separated from her oldest daughter during a round-up of Jews in the ghetto, and that daughter, who would have been my older sister, was never seen again.

She realized after obtaining this information from her aunt, that her mother is terrified of taking any responsibility for her grandchild. As a result, the anger and resentment she had felt towards her mother dissipated.

Our group member also utilized another resource in acquiring information about her parents' war-time experiences. She realized that there were some experiences that were too painful to discuss with her parents directly, so she chose a close relative who could provide

her with the necessary data.

Another issue that emerged quite early in the life of the group was that of *alienation*. Children of survivors have been raised in two worlds—European and American, yet, they feel that they belong to neither. The group members have expressed feeling alienated not only from non-Jews, but from American Jews as well. One participant described feeling incomplete associating with any group connected to the Holocaust. She stated that children of survivors have either no or small extended families. Generally, they have no living grandparents and the concept of a cousins' club is totally foreign. Another member of the group said that when he was growing up, he always felt like a "freak" because his parents were survivors. Yet another added that when her peers, who were not children of survivors, expressed sympathy for the Holocaust, she felt a sense of being cheated because it distracted from her own uniqueness and the significance of the experience for her parents. She also stated that she could not accept expressions by American Jewish peers of understanding of the actual suffering by Holocaust victims.

The last issue to emerge with any frequency was that of the uniqueness felt by the first-born. Their first-born child was usually identified by survivors with lost members of their family and their feelings toward the child often are colored by the guilt they feel for those who perished.¹⁵ Although not all of the group members could relate to the guilt aspect, first-borns did indicate that they felt the additional burden of initiating their parents in the American culture. In many respects, they felt there was a role reversal in that the "teaching" of the system was undertaken by the child and not the parent. It also appeared to us that children who followed the first-born seemed to experience less trauma than their older sibling perhaps because their parents had already acquired some parenting skills.

¹⁵ *Ibid.*, p. 405.

Implications for Professionals

There were basically three factors which motivated us to move ahead with the formation of support groups for children of Holocaust survivors—the intense emotional upheaval sparked by the proposed Nazi march in Skokie (the largest community of survivors in Illinois), our experience with adolescent children of survivors at the Bernard Horwich Jewish Community Center in 1975, and the national attention given to children of survivors by the New York Times magazine feature article published in June of 1977.

Recruitment took on basically two forms. We utilized local media to a great extent, but our most successful effort was the reaching-out of the facilitator who is a child of survivors to other children of survivors she knew from her childhood. As word spread from the initial group members, a secondary form of recruitment—that of word of mouth—evolved.

Ours is not the first support group for children of survivors, but it is unique because it utilized the facilitating skills of two professionals, one who is a child of survivors herself and one who is not. The rationale for this unique staff mix is that:

1. The presence of a child of survivors acting as a facilitator helps expedite trust and that person acts as a role model in expressing feelings that the group members may never have been able to express before.
2. There are subtleties in life experience and implicit messages entering the group process which are not readily visible to the facilitator who is not a child of survivors.
3. The facilitator who is not a child of survivors can more appropriately identify attributions of perceptions and feelings to the fact they are children of survivors when that may not always be the case.
4. The facilitator who is not a child of survivors can maintain a degree of objectivity which may not be possible for the facilitator who is a child of survivors.

The group is composed of eight individuals, four men and four women. They range in age

from twenty-four to thirty-one. Five are single and three, married. Three are first-born and one is an only child.

The contract set with the group reflected a human relations design—we would meet on a consistent basis (once a week for two hours), and group members were held responsible for determining the session's agenda, participating in the form of feedback and sharing of perceptions, focusing on their feelings, and making the commitment to being there for the life of the group.

Initially neither the group nor the facilitators set a termination date; but, after a ten-month experience, we feel that six months is a better length of time. There were various times in the group's life when termination appeared appropriate. In retrospect, we feel that it would have been premature. As trust and rapport grew, group members gained new insights regarding their relationships with their survivor parents and were able to apply these new perceptions to issues they had with peers, their spouses and their own children.

An integral function of any group is to provide its participants with a significant experience and opportunities for individual growth. Pertinent, then, is some of what the members of this group had to say about its importance to them and its immediate effect on their lives.

As they listened to each other, group members indicated awareness of a common bond. All expressed comfort in meeting with other children of survivors because of their shared background, and many said that they had been able to gain new perceptions about how their parents function and how this has affected their relationship with them. They added that it gave them the strength to sit down with their parents and for the first time hear stories in a coherent fashion. One group member said that the group was like the extended family she had never had. Another said that it was the first time she could discuss that part of her history with peers and feel understood. Still another said that although he had been in human relations groups before, he had

not shared with them what he has shared with this group.

The poem, with which this article begins, represents to its author one of the insights that she herself has gleaned from her experience with the group. Currently, she is reaching out to family and friends who can offer her the information she lacks. (Because both her parents are now deceased, the task on her part may be more difficult than for those whose parents are still alive).

Because ours is a support group and not a therapy group, there has been no contract for behavioral change. Yet, three of our participants indicated that as an outgrowth of the group experience they are prepared to work on actualizing decisions they have made to change and have consulted with us regarding their options. We have subsequently been able to refer them to appropriate professionals.

To those professionals who may wish to serve children of survivors and/or their families, the following questions and issues should be considered.

We realize that many agencies do not have the personnel that would enable them to establish the staff mix that we have defined. Can, then, facilitators who are not survivors' children work effectively with such a group, and if so what kind of training will they need, if any? (The children of survivors with whom we have talked indicated a preference for our staff mix because, they say, they feel better able to relate to an authority figure who shares their particular life experience).

Is there a need for short term groups that focus on specific developmental tasks or issues such as the relationship of children of survivors with their aging parents and its inherent implications, the relationship of children of survivors with significant others who do not share their legacy, etc.?

Is there a need for groups with a specified composition such as children of survivors and their parents, children of survivors and their siblings, adolescent children of survivors, etc.?

Is there a need for services and activities for those individuals beyond their support group

experience? If so, what form should these services and/or activities take?

And finally, what specifically are the generational effects, if any, on the third generation?

At the inception of the writing of this article, our's was the only group for children of survivors offered in the Chicago area. In short order, our Center was able to offer four such groups, one of which is limited to college-age children of survivors. (Each of these four groups utilizes the staff mix described above). The observations shared with us by the other facilitators involved indicate that the themes, issues and concerns expressed within each group are common to them all. In spite of the fact that such support lends additional credibility to the suppositions and observations of the authors, there exists a blatant void regarding a systemized body of knowledge pertaining to the non-clinical population of children of survivors and the kinds of services that can be provided for them and by them.

We have gleaned much from our experience with the group personally as well as profes-

sionally. It has had a profound effect on our own feelings about the Holocaust, its survivors and their children. Our continued involvement during the past months with these individuals has served to strengthen and affirm our initial conviction that indeed children of survivors represent a unique group that deserves attention.

Intrinsic to any setting where the Holocaust becomes a direct or even indirect focus, there exists, at least to some degree, an aura of overwhelming gloom and gravity. In spite of the fact that many of our group sessions could be characterized in precisely that way, there also existed a sometimes nebulous but omnipresent sense of optimism. Children of survivors maintain a strong sense of humble pride not only because their parents survived physically, but because they survived with dignity, which our group members feel is attested to by their very existence.

You returned from Armageddon neither dehumanized nor defiled;

You chose to give me life!

I am your victory, I am your hope, I am your child.

The Jewish Community Center — We May Not Be Unique But We Are Very Special*

Harry Kosansky,

Executive Director, YM-YWHA & NHS of Montreal, Quebec, Canada

The role of the Centers in the future Jewish community may very well take on increased importance. Centers are the place where more Jews come to relate to more of their fellow Jews more consistently. Center services are more influenced by members than are the services of most other Jewish institutions.

Every few years someone feels compelled, or someone compels us, to restate the function and roles of the Jewish community center within the Jewish community. Some view this as a professional imperative, for an ongoing reexamination of one's function is considered as in keeping with the highest standards of professional responsibility. Others view such an appraisal as an updating of the justification for the Center's existence. And still others approach it as an attempt to identify more clearly significant changes which either have occurred in recent times or which may be on the horizon and should be considered in the formulation of tomorrow's agenda of service to the Jewish community.

Such practice is a time-honoured tradition of our people, for in every generation Jews perceive themselves differently as Jews, their environment changes, their lifestyles, expectations of them, their interpretation of Jewish values, and the form of Jewish practices, all, change; and therefore the functions of Jewish institutions must also change in response.

When Moses formed the first Council of Elders, or the first group of leaders of thousands and then of hundreds, and then of tens, this may have been the first organizational structure uniquely Jewish. Ever since then there has been in our history a series of adaptations in organizational structure to cope with the changing times and the changing issues faced by the Jewish people.

The first need of a gathering place for our people was fulfilled in the *Ohel Moad*. From

* Presented to Metropolitan City Executive Directors Seminar, January 1978.

there it was modified to regional mini-centers, to the establishment of a major temple, to the formulation of local houses of worship, to the development of study academies, to synagogues, to organizations for the care of the traveller and then to the care of the sick, and down the line to the burial of the dead; the evolution from the counselling by the oracle to the counselling of the Rebbe and subsequently the social worker, and finally the conceptualization of a Jewish settlement house, the Y and now the Jewish community center. To think that we the Center were unique or alone when we came on the scene may be overstating our importance. To think of ourselves as something special and part of a total enterprise of Jewish communal structure is more in keeping with our understanding of how groups respond to their every-day changing needs and how groups design organizational structures to perpetuate themselves and ensure their survival.

The YM-YWHAs and similar associations came into being during the latter part of last century or early in this century when Jews were experiencing a change in their social order. The North American society to which Jews migrated was quite different from the society they left, and certainly the accustomed Jewish social order was non-existent. The early Centers were formed to provide a setting wherein a whole host of fraternal, social, cultural and leisure-time needs could be filled. They took on the function of helping the newly arrived to feel comfortable among themselves in their new environment, and to assist them in relating to the unfamiliar social and political