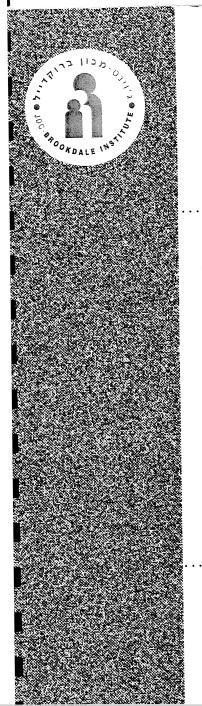
Appendix F

J. Brodsky, Y. King, A survey of

Disabled Victims of Nazi Persecution

and Disabled Veterans of War against

the Nazis



JDC-BROOKDALE INSTITUTE

OF GERONTOLOGY AND HUMAN DEVELOPMENT

Executive Summary

A Survey of Disabled Victims of Nazi Persecution and Disabled Veterans of the War Against the Nazis

Jenny Brodsky • Yaron King

The study was initiated by the Bureau for the Rehabilitation of the Disabled in the Ministry of Finance and funded with its assistance.



WHAT IS THE JDC-BROOKDALE INSTITUTE?

A national center for research on aging, human development, and social welfare in Israel, established in 1974.

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A team of professionals dedicated to applied research on high-priority social issues relevant to the national agenda.

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- Aging
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- Disability
- Center for Children and Youth

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1. Background to the Study

Approximately 300,000 Holocaust survivors, over the age of 50, live in Israel today. About 50,000 of them immigrated to Israel from the former Soviet Union since 1989. Of the 250,000 survivors who are not new immigrants, about 164,000 (65%) are aged 65 or more.

A large group of survivors receives reparations from the German government. Yet another group receives compensation only from the State of Israel, in accordance with the reparations agreement signed with the German government in 1952 (disabled victims of Nazi persecution). An additional group, who also receives compensation from the Israeli government only, includes those who fought in one of the allied armed forces or partisan units, and who do not receive compensation from the countries in whose armies they fought (disabled veterans of the war against the Nazis).

The Bureau for the Rehabilitation of the Disabled in the Ministry of Finance, operating under the Disabled Victims of Nazi Persecution Law (1957) and the Disabled Veterans of the War Against the Nazis Law (1954), is responsible for providing the compensation provided by the State of Israel. Its three offices (in Tel Aviv, Haifa and Jerusalem) serve 32,000 clients. Of these, about 22,000 are recognized as disabled victims of Nazi persecution (degree of disability no less than 25%) and 10,000 - as disabled veterans of the war against the Nazis (degree of disability no less than 10%). The Bureau's clients are entitled to aid in three areas: a monthly cash benefit, medical services and rehabilitation and social services.

The Bureau for the Rehabilitation of the Disabled has been operating for some forty years. Up until now, there has been no comprehensive study on its services and the population eligible for its assistance. In order to examine ways of improving services provided by the Bureau, as well as other government and voluntary organizations serving this population, the Bureau asked the JDC-Brookdale Institute to conduct an in-depth study of the eligible population, in order to learn about their needs and the extent of their satisfaction with the Bureau's services.

This report presents findings from interviews carried out with a sample of 600 persons living in the community in urban areas (two-thirds disabled victims of Nazi persecution and one-third disabled veterans of the war against the Nazis), representing about 29,000 persons or about 93% of the population recognized by the Bureau.

The data were collected between May and November 1996 by means of interviews conducted in the home. Structured questionnaires were used that covered a range of subjects including: demographic characteristics, health and functional status, social and mental health status, economic situation, patterns of use of social and health services and the survivor's relationship with the Bureau.

Since the disabled victims of Nazi persecution have been in Israel for some length of time, while most of the disabled veterans are new immigrant men from the former Soviet Union, the

In addition, the overall sense of emotional-well being of the disabled victims, as measured by the 28-item GHQ scale (a scale which examines areas such as depression, anxiety, life satisfaction and sleep disorders), appears to be lower than that of the general elderly population (General Health Questionnaire - Goldberg et al., 1979; Lohr & Ware, 1986; Vieweg, 1983). The average GHQ score of the disabled victims aged 65+ was 12.6 (indicative of a low sense of emotional well-being), compared to a score of 7.1 (indicative of a moderate sense of emotional well-being) among a community-based sample of elderly aged 65+ (Brodsky et al., 1991).

The disabled victims are interested in participating in social activities and receiving emotional support. Sixteen percent of all the disabled victims did not attend any social framework, but wanted to do so. Twelve percent were interested in having a volunteer visit them at home, but only one percent received such visits. Notably, about half the disabled victims wanted to talk to someone about their Holocaust experiences. About half of the disabled victims (56%) knew of at least one association or voluntary organization that assists Holocaust survivors. But about half of those disabled victims who expressed a desire to visit a social club, or receive a visit from a volunteer, or meet with other survivors, had not heard of any voluntary organizations providing such activities.

A considerable percentage of the disabled victims would like to receive some emotional support, either from mental health services or from a social worker. About eight percent had been in contact with the mental health services during the year preceding the interviews. Twenty percent of those victims who had not had any contact with this service during this period, indicated that they would like some form of mental health treatment. This percentage rises to 33% among the younger victims (aged 53-64). About 13% of the disabled victims had met with a social worker during the year preceding the interviews, and about 12% of those victims who had not met with a social worker, said they would like to.

3. Disabled Veterans of the War Against the Nazis

3.1 Socio-Demographic Characteristics

The population of disabled veterans of the war against the Nazis is primarily male (97%) and the entire population is over age 65. Over half are over 75. About 75% came to Israel since 1989 from the former Soviet Union. Consequently, in addition to the difficulties associated with being disabled war veterans, they must also face problems related to adjusting to life in Israel as well as problems to do with aging. As part of the study, we compared them to the general population of immigrants of the same sex and age (males, aged 70+), in order to better understand their unique characteristics (Strosberg and Naon, 1997). About 75% of the disabled veterans were married and 40% lived with their children, similar to the rates found in the comparable population of immigrants.

3.2 Economic Situation

All disabled war veterans who are not new immigrants receive old age allowances. By way of contrast, 49% of the disabled war veterans who are new immigrants did not receive this allowance because they received a large payment from the Ministry of Finance and therefore were not eligible for the National Insurance benefit. The Finance Ministry's monthly payment was the sole source of income for one-third of all disabled war veterans. However, it should be noted that this payment is relatively large, since they are recognized as "needy disabled". The average monthly income of a single disabled war veteran was NIS 3,100 (\$967) and of a married veteran, NIS 3,925 (\$1,225).

3.3 Housing Conditions

Half of the disabled veterans live in apartments which they own. Among new immigrant war veterans, this percentage drops to 39%, which is higher than the rate among the general population of male immigrants aged 70+ (22%).

Thirty-six percent of the immigrants aged 70+ rent privately, compared to 54% in the general population of male immigrants aged 70+. One-third of the former reported that the rent was too high and constituted an economic burden.

About 20% of the disabled war veterans reported maintenance problems, such as leaking walls or roofs in the winter and plumbing problems, and 25% reported winter heating problems. About one-quarter reported that they did not have safety features such as a railing in the bath tub or shower. Considering that almost half (44%) of the disabled war veterans reported falling within the last year, the subject of safety devices deserves special attention.

It is worth noting that 40% of the disabled war veterans, and 47% of those who are new immigrants, reported that they were interested in a sheltered housing framework.

3.4 Health and Functional Status

A high percentage of disabled war veterans suffer from functional and health problems. About 29% were limited in ADL (washing, dressing, eating). About 30% of the new immigrant war veterans had limitations in this area, compared to 11% of the general immigrant population. When compared to the general immigrant population they also suffered more from chronic diseases (for example, 73% compared to 51%, respectively, reported that they suffer from heart disease).

Despite the relatively high percentage of veterans who were disabled in ADL (29%), only a small percentage received long-term care services, such as under the Nursing Care Law (7%). A majority (69%) of the disabled war veterans who were limited in ADL reported that they needed more help in this area (representing 20% of all disabled war veterans).

Seven percent of the disabled war veterans were connected to an emergency call device, while another 18% who were not connected, wanted to be. About half (46%) of the disabled veterans

required orthopedic or medical equipment which they did not have (primarily orthopedic shoes, back support belts and special mattresses). Of these, eighty-seven percent had not applied to any agency for these items, primarily due to a lack of information about their eligibility rights and about whom to turn to.

3.5 Use of Health Services

The findings show that the disabled veterans use hospital services frequently: slightly more than 40% were hospitalized and a similar percentage required emergency medical care (such as the emergency room) during the year preceding the interview. There was no difference in the use of primary care services, such as visits to the family doctor, among new immigrant disabled veterans (96% were in contact with their family doctor during the last year) compared to the general immigrant population.

3.6 Social and Emotional Conditions and Needs

The majority of disabled veterans (88%) had children living in Israel. A not insignificant number had frequent, regular contact with their children and about one-third live with their children. Shared living arrangements provide elderly immigrants with economic benefits as well as instrumental and emotional support. However, such arrangements are not always preferred by the elderly persons or their children, nor are they always a permanent arrangement. It should be noted that 47% of immigrant disabled veterans and one-third of disabled war veterans who lived with their children, expressed an interest in sheltered housing.

The high proportion of disabled war veterans who attended organized social frameworks (47%), mainly clubs run by the Organization of Disabled War Veterans, is very striking. Nevertheless, 15% of all the disabled veterans and 37% of those living alone reported that they often felt lonely. Furthermore, a quarter of all the veterans, and a third of those limited in ADL, said that they were dissatisfied with their social life. It should be noted that the vast majority of war veterans (80%) said that they would like to discuss their war-time experiences.

The disabled veterans would like to participate in social activities and receive emotional support. About 14% of all the disabled war veterans reported that they did not attend any social framework, but would like to. About 10% were visited by a volunteer, and 12% said they would like to receive such visits. About 70% had heard of the Organization of Disabled War Veterans, but a third of those who said they would like to participate in some social activity had not heard of any voluntary organization.

About 16% of the disabled war veterans met with a social worker during the year preceding the interviews, and about 16% of those who did not meet with a social worker said they would like to meet with one. About five percent were in contact with the mental health services during the year preceding the interviews, and 9% of those who were not in contact with this service during this period expressed a wish to receive some form of mental health treatment.

4. The Relationship between Disabled Victims of Nazi Persecution and Disabled Veterans of the War Against the Nazis, and the Bureau for the Rehabilitation of the Disabled

One of the goals of this study was to examine the relationship between the disabled population and the Ministry of Finance's Bureau for the Rehabilitation of the Disabled. The aspects examined included the awareness of their rights and entitlements, the extent to which these entitlements are utilized, the patterns of contact between the disabled population and the Bureau, and their satisfaction with these contacts. The principal findings are presented below.

4.1 Awareness of Entitlements

- ♦ About 56% of all the disabled victims and veterans had received the information pamphlet of the Bureau for Rehabilitation about their rights.
- ♦ About 25% of those who had received a pamphlet reported that they had had difficulty understanding its contents.
- ♦ Twenty-two percent of those who had received the pamphlet reported that as a result they had asked for more assistance.
- ♦ Some 40% of the disabled victims reported that they had not heard about changes in their entitlements due to amendments to the Disabled Victims of Nazi Persecution Law. This percentage was higher in the central district (50%) and in the Haifa district (46%).
- ♦ About half of the disabled victims who had heard about their new entitlements reported that they did not sufficiently understand them or did not understand them at all.
- ♦ Fifty-five percent of the disabled victims and thirty-seven percent of the disabled war veterans would like more information regarding their rights. The disabled victims are interested in general information on their entitlements, while the disabled war veterans are particularly interested in information about housing.
- ♦ Fifty-seven percent of the disabled victims and veterans were not aware of their entitlements regarding loans from the Bureau for making household improvements. (The percentage was particularly high among those who reported the need to make repairs in their apartments.)
- ♦ Seventy-seven percent of the disabled victims and veterans were not aware of their entitlements for grants or reimbursements for taxes on household equipment purchases.

4.2 Patterns of Contact Between the Disabled and the Bureau

- ♦ About 28% of the disabled victims and veterans had visited one of the Bureau's offices during the past year. This translates into roughly 13,000 visits annually. The rate was particularly high among those living in the Tel Aviv district.
- ♦ More than 25% of the disabled who had not visited one of the Bureau's offices said that the reason was the inaccessibility of the office.
- ♦ Forty percent of the disabled population had some form of direct contact with the Bureau during the past year (visit, phone conversation, or correspondence).

- ♦ Twenty-eight percent would like more contact with the Bureau. This rate was higher among the disabled victims, among those limited in ADL, among those living alone, and among those living in the Jerusalem district.
- ♦ Thirty-six percent of those who said that they would like more contact with the Bureau expressed the desire to meet with a Bureau counselor.
- ♦ More than half would like to have more contact with the Bureau or to receive more information about their rights. This percentage was particularly high among those living in the Jerusalem district (83%).

5. General Guidelines for Improving the Services to the Disabled Victims of Nazi Persecution and Disabled War Veterans

The study's findings show that the disabled victims and veterans who are clients of the Bureau for the Rehabilitation of the Disabled, receive entitlements and services which are related to their needs. Some of these entitlements and services are provided by the State of Israel to all its citizens (e.g., health services); some are provided to all elderly in Israel (e.g. Nursing Care Law, day care centers and social clubs); and the rest (which are a significant component) are unique to this population of disabled victims and veterans.

The study revealed that in certain areas, the needs of the population served by the Bureau were not fully met. Finding solutions for these needs is partly the responsibility of the Bureau for the Rehabilitation of the Disabled, and partly the responsibility of various government, municipal and voluntary organizations.

The study identified three main areas that need to be addressed:

- a. Dissemination of information to the disabled victims and war veterans and to the various organizations which serve this population.
- b. Meeting the social and emotional needs of the disabled victims and war veterans.
- c. Encouraging solutions which promote the independent functioning of the disabled victims and war veterans.

a. Dissemination of Information

If the disabled population is to fully utilize their rights and entitlements, an essential condition is that they receive the relevant information. During the past two years, the Bureau invested much effort in the dissemination of information among the disabled population regarding their rights and entitlements. The findings show that some of the disabled found this information useful, and subsequently approached the Bureau in order to receive additional assistance. However, others did not understand the information and still have difficulty in comprehending their rights. Use of additional channels of information should therefore be considered, as well as a revision in the way the information is presented. Some avenues for improving the dissemination process are:

• Disseminating information periodically, as a reminder.

- ♦ Sending a single page of information about a specific entitlement, especially on topics that appear to be problematic or on topics where few requests for assistance were received. Some examples that arise from the study are: loans for apartment renovation, and reimbursement of purchase tax for home equipment.
- ♦ Presenting the information simply and clearly in Hebrew as well as in Russian in order to ensure that the clients understand their rights. A consumer focus group could be used to receive feedback on how clear the information is, even before it is published.
- ♦ Utilizing the mass media to disseminate information among as large an audience as possible.
- ◆ Enlisting the help of other service providers as well as professionals serving the disabled population, in disseminating information and counseling the disabled on how to exercise their rights to the fullest degree. Such service providers include the sick funds, social clubs, Social Service Bureaus, organizations for the disabled, the Social Security advisory centers, local offices of the Ministry of Absorption, etc.
- Organizing joint seminars with organizations providing services to the same population, for the purpose of mutual update.
- ♦ Creating a forum to include both employees of the Bureau and the representatives of relevant organizations.

b. Meeting the Social and Emotional Needs of the Disabled Victims and War Veterans

One of the study's most salient findings is the wish expressed both by victims and veterans to participate in social activities and to receive emotional and social support. Although many fulfill this wish, there are still those who have not been able to find a compatible framework. Thus, some thought should be given to ways of assisting these clients in this area. Some options are:

- ♦ To bring to the clients' attention those social frameworks run by various public and voluntary organizations, some of which also provide emotional and social support services, such as visits by volunteers and support groups.
- ◆ To initiate social activities by the Bureau for the Rehabilitation of the Disabled (such as establishing social clubs, meetings in homes, or day-trips).
- ♦ To encourage self-help voluntary activities among the disabled clients and their families.
- ♦ To enhance the social services provided to the disabled population, in order to meet their social and emotional needs. This could also be an important factor in the provision of information and guidance to help the disabled clients make the most of their rights. This may be achieved through expanding the Bureau for the Rehabilitation of the Disabled's Social Services Department, or enhancing contacts with the Ministry of Social Affairs' Social Service Bureaus, or a combination of both methods.
- ◆ To expand assistance in the area of mental health. This may include dissemination of information to the disabled population about community services specializing in the provision of emotional help. Another possibility is to consider the establishment of a special unit within the Bureau that will provide emotional help.

When developing solutions in the social-emotional area, there are two preferred target populations that require intervention: those living alone and those who are limited in personal-care activities. These two groups have greater unmet needs in the social-emotional area as indicated by a low level of emotional well-being, feelings of loneliness and dissatisfaction with social life. These groups also expressed an interest in participating in organized social frameworks, in receiving help from volunteers, and in receiving professional help from the Mental Health Services or from a social worker.

c. Encouraging Solutions which promote the Independent Functioning of the Disabled Victims and War Veterans

The study revealed additional areas where the disabled have unmet needs, and where there is a need to improve the availability of the relevant services. These include needs in the area of orthopedic equipment, safety aids in the homes of the disabled, and additional assistance in personal-care (ADL) and household-maintenance (IADL) activities to those limited in these areas. Another important finding is that half of the disabled war veterans who are new immigrants are interested in living in sheltered housing frameworks.

The disabled population must be made aware of the existence of community services that may be helpful to them, and at the same time the service providing agencies must be made aware of the needs of this population. Further, ways must be considered to enhance the availability of services aimed at addressing these needs.

Finally, the study shows that the disabled clients were interested in having more contact with the Bureau for the Rehabilitation of the Disabled. Because they are widely dispersed, the accessibility of the Bureau's offices needs to be improved. In addition to opening more offices, special meetings could be held between groups of clients and the representatives of the Bureau in convenient locations. These meetings could include receiving feedback from the clients, identifying needs, dissemination of information, and referral to other organizations that may be of help. Expanding the Bureau's social services may be another way of strengthening the ties between the Bureau and its disabled clients.

The findings of this report have been extensively discussed in meetings held with representatives of the Bureau for the Rehabilitation of the Disabled. In addition, a committee whose members include the JDC-Brookdale Institute research team and representatives of the Bureau and of the Ministry of Labour and Social Affairs, was formed. This committee has convened several times in order to develop specific plans to implement some of the study's recommendations.

Moreover, the report has been widely distributed, so as to sensitize the professional and political community to the needs of the study population. In addition, special seminars are being organized to enhance this process.

Finally, the results of this study also serve to demonstrate the importance of conducting similar research among additional groups of survivors.

Bibliography

K

Brodsky, J.; Sobol, E.; Naon, D.; King, Y.; Lifschitz, C. 1991. Comprehensive Care of the Elderly in the Community - Coordination between Health and Social Services and Health Promotion - Characteristics and Needs of Elderly in the Community in Areas of Health and Welfare, RR-192-91, JDC-Brookdale Institute, Jerusalem. (Hebrew)

Beer, S. 1996. Projection of Needs for Services Among the Elderly in Israel According to Geographic Region: 1994-2005, ES-113-96, JDC-Brookdale Institute, Jerusalem. (Hebrew)

Factor, H. 1995. "The Need for Long-Term Care Services among Elderly Holocaust Survivors Living in Israel" In: J. Lemberger (ed.) A Global Perspective on Working with Holocaust Survivors and the Second Generation. M-35-95. JDC-Brookdale Institute, Jerusalem.

Goldberg, D.P.; and Hillier, V.F. 1989. "A Scaled Version of the General Health Questionnaire". *Psychological Medicine* 9:139-145.

Lawton, M.P. et al. 1982. "Philadelphia Geriatric Center Multi-Level Assessment Instrument (MAI)". Journal of Gerontology 37(1):91-99.

Lohr, K.N.; and Ware, J.E. (eds.) 1987. Proceedings of the "Advances in Health Assessment Conference". 19-21 February 1986, Palm Springs, California. *Journal of Chronic Diseases* (Special Issue) 40:Supplement 1.

Primak, H.; and Brodsky, J. 1996. "Use of Health Services among the Elderly" in Eshel, *Five-Year Plan 1996-2000* (Editor: Dror Rotem) pp. 104-118. Eshel, Jerusalem. (Hebrew)

Strosberg, N.; and Naon, D. 1996. Absorption of Older Immigrants from the Former Soviet Union: Follow-up on the Housing Problem and its Impact on Other Areas of Absorption between the Years 1992-1995, RR-281-97, JDC-Brookdale Institute, Jerusalem. (Hebrew)

Vieweg, B.W.; and Hedlund, J.L. 1983. "The General Health Questionnaire (GHQ): A Comprehensive Review". Journal of Operational Psychiatry 14:74-81.



ג'וינט-מכון ברוקדייל מהו?

מרכז ארצי למחקר בתחומי הזיקנה, התפתחות האדם ורווחה חברתית בישראל, שהוקם ב-1974.

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