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SOCIAL SERVICE NEEDS OF MIGRANTS IN LIMBO:
ISRAELIS IN NEW YORK

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ABSTRACT

This is an exploratory study about the social service needs of Israeli migrants in New York City. A structured, face to face interview schedule was administered by the author to a sample of 86 intact families. The families were found to be mostly undecided regarding their stay in the United States. Their state of "limbo" was reflected in specific patterns of utilization of general and ethnic social services, and in six major areas of concern and needs: (1) a sense of social isolation; (2) the wives' low level of adjustment; (3) emotional stress due to the families' hesitancy to stay in the United States; (4) distress due to concerns about children's national (Israeli) identity and their education; (5) health risks due to the lack of any health insurance coverage and, (6) reliance on supplementary income primarily through ethnic (Jewish) charities. Guidelines for policy and research on the delivery of social services for these Israelis conclude the paper.

The review of the history of social services reveals a strong relationship between social needs and the ways in which societies organize to meet them. Interest in client needs in the social welfare field and in the planning of responsive services dates back to the earliest social surveys in England in the 18th century and in the United States in the

19th century conducted by Dorethea Dix. More recently, interest has grown about the help-seeking behavior of new immigrant groups, and the obstacles they face in the adequate utilization of the available social services. [1]. While research efforts have mostly been invested in analyzing demographic data and that of service providers, only a few studies learned systematically the needs and preferences of the users and their alternative avenues of choosing among the general and ethnic social services of the absorbing society. In the light of these research trends, the following study on Israeli families was undertaken.

BACKGROUND AND PURPOSE

Israeli immigrant communities have been growing in several metropolitan areas in the United States, but there is no baseline data to guide social welfare policy makers on their needs for social services. Most of the social studies on Israeli immigrants limited themselves to the motives, attitudes and intentions of Israeli students and professionals [2]. These studies produced generalizations about Israeli immigrants, irrespective of the methodological limitations of their demographically skewed samples [3].

Three central bodies have recently expressed interest in a more practical understanding of Israeli immigrants in the United States. The Israeli government is alarmed by the magnitude of the emmigration of its citizens [4]. It considers policies which are fragmentally introduced to reach out to potential returnees and to prevent further emmigration. In the United States, American Jewish organizations are alarmed by the decrease in the size of Jewish communities, due to demographic changes in life expectancy, migration patterns, ethnic assimilation and the lack of Jewish immigration. These concerns led the Federation of Jewish Philanthropies in New York, for

instance, to change its policies and to legitimize the rights of Israelis to choose their place of residence outside of Israel. This resulted in the Federation's becoming more responsive to the personal and ethnic needs of the Israelis by seeking to "reach out to them, get to know them and come to understand them" [5]. Finally, American research institutes have started to express interest in the emerging Israeli community as a distinct ethnic group, placing emphasis on the impact of intergroup relations in immigrant communities [6], or on the impact of these newcomers on the labor market [7].

Estimations of the size of immigrant groups in the U.S. are unreliable, due to problems in recording human movements [8]. It is particularly difficult in the case of Israelis who have the option to return freely. Since many Israelis tend to postpone their decision about the permanence of their residence, thus making it difficult to tell when these temporary sojourners become expatriates, the estimate of the size of this group at 100,000 to 200,000 is problematic.

Because of the above sampling constraints, an exploratory study, using primarily descriptive survey methods was undertaken. The purposes of the study were to: (1) provide systematic baseline information on Israeli families in New York City; (2) describe differential patterns in their utilization of social services; (3) describe specific areas of concern and unmet needs and (4) suggest policy guidelines regarding the planning and the delivery of social services for this emerging ethnic group.

DESIGN AND METHODOLOGY

The author had conducted eighty-six face to face interviews with intact Israeli families with at least one child. The families

were selected on a non-probability purposive quota sample basis, chosen to reflect three variables relevant to the study goals. It was assumed that before looking for especially disturbed families of individuals, one should fine out basic facts about more ordinary, or "typical" families and about their coping mechanisms. Information was obtained on 355 individuals, i.e. both spouses and their 183 children. The families were selected by: (1) borough of residence - one half from Queens and one half from Brooklyn; (2) sub-ethnic background - one half Ashkenazi and one half Sephardi Families and (3) length of stay in the United States - one half "newcomers" (between one to three years) and one half "old-timers" (between four to ten years) [9].

"Snowballing" referral [10], the major sampling method was extended by three complementary community explorations: spectators at the Israeli Film Festival were approached, local Israeli food stores and restaurants were visited and, "Hebrewitized"-Israeli last names were selected arbitrarily from phone books. The key dependent variables of the study were utilization patterns of social services [11], needs assessment [12], and ethnic dimensions in the delivery of services [13] - all central notions in social work practice and planning [14].

To analyze the patterns by which Israeli families were seeking help and by which they were utilizing social services, an integrated method was used by exploring: (1) socio-economic and socio-demographic variables such as age, household size, income, and level of education [15], (2) socio-cultural variables such as religiousity, identity and life styles [16]; (3) coping roles undertaken by primary group supports and their functions in relation to bureaucratic social services [17] and (4) ethnic dimensions of service utilization [18]. An integrated method was also used to deter-

mine the families' major areas of concern and needs. It combined information gathered on felt needs, on socio-economic conditions, and on patterns of service utilization [19]. Normative and comparative approaches in the analysis of data were also employed [20].

FINDINGS

Socio-Demographic Characteristics

The households studied were: (1) residing in highly concentrated Jewish areas in both boroughs (three-quarters of the families), (2) small - nuclear type families, three-quarters of which had either one or two children, (3) young - the husbands median age was 34 years, (4) in reasonably good health - both physically and mentally and, (5) attracted to the United States - in most cases by the husbands' initiative - the primary reasons given being: to reunite with family in the United States, to improve job opportunities, or out of general curiosity and a spirit of adventure.

Two-thirds of the families were found to be undecided regarding their stay in the United States; one-fourth claimed they would return to Israel within three years, and the remaining ten percent indicated with certainty an intention to stay in the United States. In this respect, the Israelis, unlike most other immigrant groups, are hesitant to become Americans, and therefore may best be characterized as a "community in limbo". This finding is central to the study and is presented below to explain several areas of need and utilization patterns of social services.

The employment characteristics of the families were typical of most immigrant groups [21]. About two-thirds were self-employed in small "ethnic enterprises", usually consisting

of family and compatriot networks. Significantly fewer wives were employed in New York than they had been in Israel and of those employed, many experienced a marked downward mobility on the scale of occupations.

Utilization of Social Services

Four areas of service utilization were identified in the study: entitlement programs, ethnic charities, education and recreation; counseling and guidance services.

Entitlement Programs The utilization rate of entitlement programs - such as public assistance, unemployment benefits, food stamps, etc. - was 12 percent. There could be several plausible explanations for this level of utilization. First, the study's focus on intact families a priori selected a self-supporting group [22]. Second, at least 50 percent of the families did not qualify for public benefits since they have not built up their entitlements as American citizens. Third, permanent residents, even when eligible, face psychological and institutional barriers to use such benefits [23]. Since most Israelis have come to the United States emotionally committed to return to their country in case of failure, the option of turning to public welfare services was hardly taken into consideration. But even when the need for formal help was admitted, there were additional barriers, such as the language and the lack of understanding of the fragmented American social service system.

Ethnic Charities: Ethnic charities (Jewish) partially substituted for entitlement programs. When need grew, and primary group supports either did not exist or failed to be helpful, 16 percent of the families turned to, or were helped by ethnically based Jewish charities. Interest-free loans, secret almsgiving, tuition discounts in nurseries,

schools and summer camps were the major forms. These alternative resources facilitated access to services in ways closer to family patterns and cultural groups values [24].

Education and Recreation: Seventy percent of the school-age Israeli children in the sample were enrolled in American-Jewish schools. Most of those who reported using community centers and after-school programs were utilizing facilities under Jewish auspices such as YMHA's and synagogues. Over 80% were using Jewish summer camps.

These findings challenge the popular image of the Israelis, that is, that they live isolated from local Jewish communal services and that they assimilate at high rate into American society [25]. In several areas, the findings of this study suggest the contrary: significant proportions of Israeli families are actively integrating into the American-Jewish community.

Counseling and Guidance: A different area of ethnic integration was demonstrated in the utilization of counseling and guidance services. Twenty percent of the families reported using such personal social services, categorized into three groups: Jewish schools, Jewish family and guidance services, and congregations or synagogues. Though varied in structure and purpose, each incorporates elements of ethnic culture and social service [26].

A broader insight into the families' help-seeking attitudes was gained by introducing them to four hypothetical case vignettes in which a counselor had to be selected. Respondents were found reserved about turning to an American-Jewish agency, since they felt psycho-social barriers and a sense of being "marked-off" by these agencies [28]. Israeli professionals or local Rabbis on the other

hand, were more likely to be perceived as their "own group", thus responsive to the ethnic dimensions of their needs.

Variations in Utilization by Key-Variables

Significant differences of service utilization were identified between families residing in Queens versus those residing in Brooklyn [29] and between "newcomers" versus "old-timers". Interestingly, the families' sub-ethnic background (Ashkenazi versus Sephardi), failed to influence patterns of service utilization. While the limitations of the sampling procedures should be kept in mind, these findings suggest that class, locality, and other social conditions - such as migration motives, primary group supports and environmental circumstances - may account more for variations in service utilization than the ethnic origin of the families.

Queens versus Brooklyn: Relatives were more available to families in Brooklyn and they were more relied upon than they were by families in Queens. It is plausible that the lower socio-economic status of the families in Brooklyn compelled them to depend on such supports more than those living in Queens. Families from Brooklyn also used significantly more income supports and Jewish charities than those residing in Queens. Furthermore, one-fourth (26%) of the Israelis in Brooklyn lacked health insurance coverage, in contrast to the Israelis in Queens where every family has such coverage.

The enrollment of Israeli children in Jewish schools was significantly higher in Brooklyn than in Queens (85% vs. 67%). However, since the differences could not be attributed to interborough variations in the level of religious observance, environmental circumstances were looked to for possible explanations. They included differences in

the reputation of local public schools and in the ethnic mix of their students, and differences in the eligibility policies for tuition discounts of parochial schools between the two boroughs.

In the analysis of help-seeking patterns in the hypothetical case vignettes, Rabbis averaged as significantly more popular counseling options in Brooklyn than in Queens. In Queens credentialed professionals (i.e. psychologists, social workers, etc.) were more common. This difference could be attributed to language barriers (inferred by levels of education) and to the lower level of income among families in Brooklyn.

"Newcomers" versus "Old-timers": Three major service utilization patterns of "old-timers" indicated that they were living a more settled style of life than were the "newcomers". First, "old-timers" , more often used services for which payment was required. Unlike "newcomers" who used primarily free guidance services through school counselors or Rabbis, "old-timers" tended to purchase counseling services in the marketplace. The utilization of recreational services was also more common among "old-timers", probably reflecting their higher socio-economic status [30].

Second, despite their higher socio-economic status, "old-timers" were more likely to collect public benefits than "newcomers". It is plausible that their ability to prove eligibility as well as their improved familiarity with the American social service system accounted for this pattern.

Third, "old-timers" more often used Jewish services such as sectarian schools for their children in the higher grades, were more often involved in Israeli or Jewish self-help groups and, in the hypothetical cases, they selected more American-Jewish counselors. This greater

use of ethno-religious services by the "old-timers" was further supported by their observance of more traditional religious practices than those of the "newcomers".

Major Concerns and Needs

The study revealed six areas of family concerns and needs in the field of personal social services, education, health and economics. They were: a sense of social isolation: the low level of adjustment by the wives; ambivalence about their future in the U.S.; the children's national identity and education; health risks; and their poor economic condition.

1. Social Isolation: A sense of social isolation was explicitly or implicitly expressed by most of the interviewees. It was well summarized by one respondent who said that "For the mainstream Americans - we will always remain aliens, for the Blacks - we are White, for American Jews - we are not welcome and, among ourselves - we are suspicious." The intensity of this state was especially exemplified in secular families and by those who did not have extensive primary groups supports. For such families, the lack of organized systems of mutual aid raised fears about times of severe need. Thus, one third of the respondents translated these concerns as a need for a local Israeli center. They expected such a separatist ethnic agency to provide a response to the families' isolation by: (1) offering a place to socialize with their own group in their own community (2) organizing around issues of self-help and (3) providing information, referral and counseling services - all in the Hebrew language. Among the "newcomers", nearly half (46%) felt that such a center could be the best response to their sense of isolation.

2. Wives' Adjustment: About one-fifth

(21%) of the respondents stated that the social isolation of the wives was experienced as an extreme mental stress. Wives also reported significantly lower adjustment levels than their husbands and more concern about the future plans of the family. These feelings of discontent prevailed among over one-third of the "newcomers" but were hardly felt among the "old-timers" group. Furthermore, over 50 percent of the "old-timer" wives reported a highly satisfied level of adjustment to life in the United States. Thus, either the adjustment of Israeli wives is relatively slower than that of their husbands, or, where the wife failed to adjust, families returned to Israel.

Four findings in the study could account for the maladjustment of Israeli women. In most cases, the husbands were the primary initiators of emigration, and the wives joined reluctantly. Second, wives experienced a 25 percent drop in labor-force participation in the United States, and a marked downward occupational mobility. This meant that many women either lived as shut-ins or felt degraded at work. Third, there are major differences between the work related American social welfare system and the one the wives were used to in Israel. In Israel, employment policies are mother-and-child oriented - e.g., reduced work hours for women in the year following childbirth or with at least two children under the age of twelve, approved work absence due to the illness of children, etc. In addition, most localities have excellent networks of child-care services in the form of kindergartens and day-care centers [31]. The lack of these types of public supports in the United States, in addition to the general hardship of migration, compelled several wives to change their life style and renounce employment.

Finally, the lower adjustment level of the

wives could be attributed to fewer significant primary group supports in the United States than in Israel. Their husbands, in contrast, had more primary group supports (e.g. close family and friends) in the United States. Thus wives tended to worry more often than their husbands about the future plans of the family in the United States and about their relations with extended family in Israel.

3. Families in Limbo: As stated previously, two-thirds of the families were undecided about the permanency of their stay in the United States. Of these, only 12 percent identified this state of ambivalence as emotionally stressful, while for most of the families, such uncertainties were not perceived as a strain. With regard to the state of limbo, time acted as an intensifying factor rather than as an alleviating one. Thus among the "old-timers", the proportion of families experiencing the stress of limbo reached nearly 20 percent. This was especially the case in families with older children, where the children's willingness to return to Israel was becoming less predictable.

To be in the stressful state of limbo meant primarily to feel suspended between two places, or to sense a sort of "split soul", i.e., to live physically in the United States but emotionally in Israel. A state of this kind involves mental resistance in some cases a failure to undergo the process of "Americanization". There is a difficulty in accepting the finality of the act of migration which is further accentuated by the attitude of the people in Israel who always welcome returnees. Acceptance of the mental status of immigrants, would result in a sense of betrayal of the patriotic-nationalist (Zionist) ideals they were raised on in Israel, which include the capacity for self-sacrifice for the future of the Israeli collective. For this reason, the Hebrew term for emigration - Yerida - is

strongly emotional, implying descent, desertion and the endangering of the existence of Israel. On the other hand, the Hebrew term for immigration - Aliya - implies to go up or to ascend. The present individualist/ entrepreneurial goals of the Israelis in the United States are in direct conflict with these ideals.

A prolonged stay in the United States also involves other types of identity conflicts: Feelings of estrangement, alienation, rootlessness and temporariness which often lead to a general sense of marginality accompanied by various levels of anxiety. At those times, the "American Dream" may become a dream of return to Israel, accompanied by the grave realization that an easy way back may no longer exist. It might also involve the shame of admitting failure, which would necessitate added mechanisms of rationalization.

4. Israeli-type Education Like most immigrant groups, Israeli families tend to object to the integration of their children into American society. But unlike most immigrants, this objection is strongly related to their emotional state of "limbo". Israelis wish to maintain their national identity not only as a source of pride but also to facilitate their return to Israel. Indeed, their educational options place that identity in jeopardy. It is a kind of "no-win" situation for the Israeli - because local Jewish schools primarily emphasize religious content, while the public schools avoid explicit ethnic or religious education, leaving those roles to the families. Thus, Jewish schools become a compromise - a "second best". Several secular parents yearned nostalgically for the Israeli secular public school system. There, as students, they were raised on "Jewish consciousness" as members of a majority group in their own sovereign state. They were acquainted with the Bible as the sourcebook for Israel's

history and with religious beliefs and practices without being required to adopt them personally.

In this study, both spouses were recurrently distressed by the future of their children in general, and specifically by the lack of national-Israeli dimensions in their education. Thus, a separatist need for an Israeli-type secular public school surfaced among one-fourth or the respondents. This need was felt among one-third of the families in Queens - a proportion twice as high as in Brooklyn. The difference may be attributed to other findings in the study, namely that families in Queens were more likely than those in Brooklyn: (1) to be concerned with the education of their children; (2) to fear general assimilation and (3) to score "high" on Israeli and Zionist identities.

5. Health Risks: thirteen percent of the families and the same proportion of children were found not to be covered by any type of health insurance. They have also discontinued payments for health coverage in Israel. All of these cases were in Brooklyn. thus, about one-quarter of the Israeli families sampled in Brooklyn were risking - if not already suffering - the financial and mental implications of a major illness. This condition was hardly addressed by the respondents as an area of concern. However, the implication of this finding is grave enough to justify its inclusion in a normative category of need or as a "population at risk" [32]. Furthermore, two-thirds of these cases reported an annual income under \$15,000, supporting previous findings in which a strong association was reported between low family income and the lack of health coverage [33].

In the few cases of severe health crises encountered in the interviews, it was up to the extended family (where it existed), their

financial ability and their good will to see that medical bills were covered. If any of the above did not exist, Jewish charity became the last resort. This finding means that families outside the health care system most probably receive episodic and fragmented services for acute conditions. But above all, they do not receive the benefits of preventive or health maintenance services that a regular source can provide.

6. Economic Condition: A sense of financial stress was rarely revealed by the interviewees. However, one-quarter of the families reported an annual income of less than \$15,000 in 1981 and nearly 10 percent reported less than \$10,000. This data alone is not sufficient to infer the incidence of poor families. But this study had also revealed that 16 percent of the families received some form of Jewish charity such as tuition discounts, interest-free loans and secret almsgiving. Half of those recipients reported income levels under \$15,000. Such inter-relations were more common among families in Brooklyn, where one-third reported income of less than \$15,000 and over one-fourth reported help from Jewish charity. Furthermore, the few cases of unemployment, the receipt of food stamps and Medicaid benefits, were also primarily in Brooklyn. The combination of low income, reliance on charity, the receipt of public benefits and the lack of health insurance, draws attention to the overlapping elements of a potentially poor or near-poor fragment of Israeli families in New York City. Since most of these are likely to be concentrated in Brooklyn, their normative categorization as a "population at risk" is further justified.

The table below summarizes these six areas of concern and need by presenting: (1) their proportion in the total sample; (2) the subgroup in which they are predominant (i.e., the independent variables) and (3) the proportion

of that need or concern within the predominant sub-group.

AREAS OF MAJOR NEEDS AND CONCERN:
THEIR PROPORTION AND THE SUB-GROUP
IN WHICH THEY ARE PREDOMINANT (N=86)

Areas of Major Need and Concern	Percent of total sample	Sub-Group in which Predominant	Percent of sub-group
1. Social Isolation (Israeli Center)	31	"Newcomers"	46
2. Wives Adjustment	21	"Newcomers"	37
3. Families in limbo	12	"Old-timers"	18
4. Education (Israeli-type school)	24	Queens	33
5. Health Risks (No insurance)	13	Brooklyn	26
6. Economic Condition (Jewish Charity)	16	Brooklyn	28

GUIDELINES FOR POLICY AND RESEARCH

The major finding of this study is that in the absence of other options, an Israeli "community in limbo" tends to integrate primarily into the local American-Jewish community. For several families, this integration is a compromise, at the American-Jewish community does not satisfy their explicit ethnic needs for services, neither their needs for activities geared to maintaining a separate Israeli na-

tional identity.

In order to deal with these separatist needs, a policy guideline is suggested. It does not deal with specific programming and administrative structuring in the technical sense, but is rather a "general guide to action, a cluster of overall decisions to rationalize policy changes" [34].

When dealing with the need for separatist services, three major partners in the Israeli-Jewish system should be considered: the Israeli government, American-Jewish organizations and the Israeli-ethnic private sector in the United States. These three systems are strongly interrelated - although in an unstructured manner. Each provides a variety of services to the Israeli and American-Jewish community.

Israel's quandry in taking an active role in the provision of separatist services is the most controversial of the three systems, due to its unique ambivalence towards its emigrants. For example: in informal discussions of this study's findings, Israeli officials expressed concern that an Israeli-type educational system in the United States would support and facilitate the move from Israel to the United States. On the other hand, they are aware that such a school could slow down and interfere with the process of integration and acculturation to American society through the enhancement of national Israeli identity. The lack of information on the possible impact of such a school is Israel's major reason for deferring a decision at the policy level. However, the choice not to decide is not necessarily the optimal alternative [35]. Further research on the dilemma and some experimentation could prove helpful.

In contrast to Israel's ambivalence toward its compatriots, the American-Jewish social

services have a clear commitment to all Jewish groups in the United States. thus, several separatist programs, staffed by Israeli professionals, were started recently in local Jewish social service agencies to better address Israeli ethnic needs. Their remaining dilemma is: under what circumstances and to what extent should Israeli identity be considered in the delivery of social services, and would such consideration lead to more empathic help or to the undesired segregation of Israelis from the local Jewish communities?

Data in this study suggest that the families' recency of migration, their geographic locale and social class are important variables in addressing these questions. For example, American-Jewish organizations might want to consider not only the separatist ethnic needs of the Israelis, but also the health and socio-economic conditions of those who are at the lowest reaches of the social strata - the Israeli poor and the near-poor congregated primarily in Brooklyn.

The ethnic private sector is the third partner in the system providing separatist programs for Israelis. The most extensive portion of this sector is in the area of entertainment. However, there is also a wide variety of Israeli professionals who have developed an ethnically-based clientele (i.e., lawyers, doctors, etc.) The nature of any such private sector is to fill the gaps in areas not addressed by public or voluntary auspices. Thus, the ethnic private sector will primarily respond to areas of inaction by the Israeli government or the American-Jewish organizations.

Such an analysis suggests that both the State of Israel and American-Jewish organizations have to weigh their role in providing services for the Israelis. While they may judge this group differently, they do have

interrelated interests. Some coordination could benefit both parties more than the present fragmentation. Clarification of concrete areas of common interest requires further exploration of basic facts and values and the establishing of functional boundaries and levels of coordination.

The size of the sample and the goals of this exploratory study were too limited to reveal extensive policy implications. For further validation of the findings, more research is needed on: a) social service needs of additional immigrant groups to allow for inter-ethnic comparison, b) different sub-groups of Israelis such as: singles, divorced, separated and deserted, the poor and near-poor, and mixed marriages of American and Israelis, c) the characteristics of service utilizers from the "supply-side" (the service users) perspective and, d) longitudinal studies on the major phases and dimension of maintaining an ethnic identity or integrating into the various types of American "melting-pot". Studies like this one, and the variations suggested, may enhance the understanding of practitioners and the responsiveness of social policy-makers to the needs of the various emerging ethnic communities in the United States.

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29. Official aggregate data on socio-economic differences among the boroughs revealed, for example, that 14 percent of the residents in Brooklyn were on public assistance in 1977, compared to 4.9 in Queens (New York City Health System Plan, 1980), the median annual income of Jewish households in 1981 was \$23,000 in Brooklyn, compared to \$30,000 in Queens (Ritterband, Paul and Cohen, Steven. "The 1981 Greater New York Jewish Population Study". Report #1 Prepared for the Federation of Jewish Philanthropies/United Jewish Appeal. New York, October 1982).
30. "Newcomers" were nearly three times as likely to belong to the "under \$20,000" category than "old-timers". Conversely, "old-timers" were almost twice as likely to belong to the "over \$35,000" category as "newcomers" (N=13 versus 7).
31. Honig, Margorie and Shamai, Nira. "Israel" in Kamerman and Kahn (eds.), Family Policy, Columbia University Press, 1978.
32. Bradshaw, op. cit. (No. 12 above); Kane, Rosalie A. "Lessons for Social Work from the Medical Model: A Viewpoint for Practice". Social Work, Vol. 27, No. 4, July 1982.
33. Monteiro, Lois. "Immigrants Without Care", Society, September-October, 1977; Lash, Sigal and Dudzinsky, State of the Child: New York City II, Foundation for Child Develop-

ment, N.Y.C., June 1980, p:85.

34. Kahn Alfred. Theory and Practice of Social Planning, Russel Sage, 1969, p:137.

35. Etzioni, Amitai. The Active Society, Free Press, 1968, p:264.