Community news

Needs of ageing Holocaust survivors need to be addressed



Today specialized services are neéded even more than ever because Holocaust survivors, who were in their late teens and early 20s at the end of the war, are now in their 80s and 90s, notes Myra Giberovitch, in her "Recovering book, from Genocidal Trauma: An

Information and Practice Guide for Working with Holocaust Survivors" (University of Toronto Press).

Giberovitch, who has more than 25 years of experience in gerontological social work practice, specializing in the development of services and programs for survivors of mass atrocity crimes, was to be the guest speaker at the Jewish Child and Family Service Annual General Meeting and Volunteer Recognition on June 9th at the Berney Theatre in the Asper JCC.

(Ed. note: We will have a full report on that meeting in our June 25 issue.)

In the 1980s, she started the first community-based social service program for Holocaust survivors in Canada and subsequently founded Services for Holocaust Survivors at the Cummings Centre in Montreal. She has worked with Holocaust Survivors as

a social worker, therapist, group worker, community organizer and researcher.

Previously, she held lay positions at the Canadian Jewish Congress, where she chaired the National and Quebec Region Holocaust Remembrance Committees, including the Montreal community's Holocaust Commemoration Service.

Giberovitch is affiliated with the McGill University School of Social Work as an adjunct professor, sessional and guest lecturer and field supervisor. She has published articles and is an invited speaker at national and international conferences.

"In my book, I describe a strengths-based practice philosophy that guides the reader in how to understand the survivor experience, develop service models and programs, and employ individual and group interventions to empower survivors," said Giberovitch, a gradu-ate of McGill University - where she earned B.S.W. (Great Distinction) and M.S.W. (Dean's Honour List) degrees- during an earlier telephone interview from her home in Montreal.

Until recently, survivors lived independently and rarely sought assistance, she explained.

"Time, however, is taking its toll," said Giberovitch, who was born in a displaced persons camp in Germany after the war to Holocaust survivors Moishe and Fela Grachnik.

"Ageing and associated challenges, including the loss of loved ones, may



MYRA GIBEROVITCH: "It's important to reach out to unaffiliated and isolated survivors by organizing community forums to provide them with information about survivor resources."

remind survivors of wartime experiences, triggering feelings of grief, vulnerability, fear, dependency, and helplessness. Illness or personal crises bring survivors into the system involuntarily, where they may become dependent on health-care and social-service providers.

"Some come into hospitals and social-service agencies because of illness, loss of autonomy, dementia, care-giving responsibilities, or a need to relocate to an institution or residence. Others require help completing forms for new restitution and compensation programs."

Still others, with limited financial resources, are inquiring about assistance programs like those funded by the Conference on Jewish Material Claims against Germany (Claims Conference), she added.

'Communities' around the world are dealing for the first time with large numbers of survivors," emphasized Giberovitch, calling the survivors she's encountered an example of the human spirit's capacity to adapt, rebuild, persevere, and recover. This increase of Holocaust survivors looking for

assistance creates challenges for communities and their health-care and social-service agencies.

"I've noticed that many service providers lack knowledge about survivors' history, psycho-social function-

ing, demographics, and diversity, as well as about the impact of ageing on traumatic memory and specialized survivor-assistance resources," continued Giberovitch, whose parents went to Israel from the DP camp before immigrating to Canada in 1953.

She observed that it's vital to conduct needs assessments in the communities to identify gaps in services. This should be done by having conversations with survivors and caseworkers to identify those needs, and to realize that survivors are not a homogeneous group. "Their needs are different," said Giberovitch, a licensed social work-

er with the Quebec order of social workers (OTSTCFQ).

"The needs of autonomous survivors are different than the needs of frailer or homebound survivors, or survivors who reside in long-term care facilities.

"It's important to reach out to unaffiliated and isolated survivors by organizing community forums to provide them with information about survivor resources."

Giberovitch said that, during the course of the talk she was going to give at the JCFS AGM, she would be reaching out to possible benefactors in the audience about creating a wish project to help survivors fulfill lifelong dreams such as visiting family members or completing projects.

"This will help give meaning, purpose and happiness to their lives. Although the majority of communities in Canada have developed services



and programs for survivors with funding provided by the Claims Conference, more are needed. The development of specialized services for survivors must be recognized as a community priority," said Giberovitch.

"We have a moral obligation to ensure that they live the rest of their lives as comfortably as possible, embraced by communities that care about them."

Unfortunately, mass atrocities are still occurring today, in fact more so than ever, Giberovitch says in her book.

"Consequently, I hope that my reflec-tions will provide inspiration and guidance in the development of programs and services for survivors of other mass atrocities as they journey towards recovery and healing," she writes.